

Timothy So and Carol Kauffman have reviewed the literature on positive psychology interventions. Here we offer you 120 research abstracts dating from 1975 – 2011.

Review of Positive Psychology Interventions

An Annotated bibliography from the Behavioral Science Literature

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Cite this paper as:

So T.T.C. & Kauffman C. (2011) Positive Psychology Interventions: An Annotated bibliography from the Behavioral Science Literature. Unpublished paper, Institute of Coaching, Harvard Medical School.

Abstract

Positive psychology intervention (PPI) refers to treatment methods or intentional activities that aim to cultivate positive feelings, behaviours, or cognitions. Since less than 20% adults in the United States (Keyes, 2002) and less than 19% adults in the Europe (Huppert & So, 2009) report that they are flourishing, positive interventions as a tool to enhance wellbeing and flourishing as well as relieve suffering has drawn more and more public attention.

This annotated bibliography draws scholarly peer review papers from the behavioral science literature as presented in PsychInfo and Dissertaton Abstracts International (DAI) published between 1975 and 2011. Furthermore, references for review paper by Rashid (2009) and meta-analysis Sin & Lyubomirsky (2009) were gathered. Studies were included in this document only if they examined an intervention primarily aimed at increasing positive feelings, behaviours, and/or cognitions. The use of positive psychology intervention has become more common and hence it receives growing attention in research. The number of papers has increased sharply from 4 between 1975 and 1980 to 79 between 2006 and 2011.

Despite a mounting body of knowledge in the field, more systematic research is yet necessary in validating the effectiveness of positive intervention as well as the underlying mechanism for both individual and group therapy, as positive

interventions represent systematic approaches to overcome challenges by using individuals' strengths and resources

Selection Criteria

Theoretical papers, empirical studies, discussion articles or review papers about interventions that make use of positive psychology elements or concepts, (behavioural interventions for disease (HIV) or special learning and so on are excluded)

Abstracts Sorted by Chronological Order:

1975-1980
1981-1985
1986-1990
1991-1995
1996-1999
2000
2001
2002
2003
2004
2005
2006
2007
2008
2009
2010
2011

***E1**: Positive interventions in Clinical Practice (Rashid, 2009)

***E2**: Positive psychology interventions: A Meta Analysis (Sin & Lyubomirsky, 2009)

***F1**: Positive Psychology Interventions: An Annotated bibliography from the Behavioral Science Literature (So, T.T.C. & Kauffman. C., 2010)

***F2**: Review of the Mental and Physical Health Benefits of Positive Psychology Interventions Summary Table (So, T.T.C. & Kauffman. C., 2010)

***N**: Newly included by RA Marian

Total number of studies: 120

1975-1980

n=4

Fallot, R. D. (1979). The impact on mood of verbal reminiscing in later adulthood. *International Journal of Aging & Human Development*, 10, 385-400.

The impact on mood of verbal reminiscing was compared with that of talking about the present or future in a group of thirty-six female participants between the ages of forty-six and eighty-five. Self reports of mood showed a relatively more positive effect of reminiscing and thus support the hypothesis that reminiscence may serve an adaptive function in later life. Participants over sixty-five years of age, however, did not report a different impact on mood than the younger participants, calling into question the age-specific nature of this phenomenon. Potential theoretical explanations and clinical implications of these findings are discussed. [F2]

Fordyce, M. W. (1977). Development of a program to increase personal happiness. *Journal of Counseling Psychology*. 24, 511-521.

Conducted 3 studies in which a self-study program, designed to increase felt personal happiness and life satisfaction, was developed. The program was based on the literature of happiness, and it was hypothesized that normal community college students (total N=338) could become happier if they could modify their behaviors and attitudes to approximate more closely the characteristics of happier people.

In the 1st study, 2 of 3 pilot programs produced statistically significant happiness boosts compared to a placebo control. A single program was then designed that combined the best aspects of the pilot programs. In the 2nd study, an experimental group receiving this combined program showed significant boosts in happiness compared to a placebo control. In the 3rd study, the combined program was presented to Ss on a take-it-or-leave-it basis--those applying it showing significant boosts in happiness compared to those who did not. The studies suggest that the resulting self-study program may be helpful to individuals wishing to increase the emotional satisfaction they derive from living. (PsycINFO Database Record (c) 2009 APA, all rights reserved) [E2] [F1] [F2]

MacDonald, M.L. and Settin. J.M. (1978) Reality orientation versus sheltered workshops as treatment for the institutionalized aging. *Journal of Gerontology* 33,416-421.

The effects of two psychosocial treatments, Reality Orientation and Sheltered Workshops, were evaluated against an assessment-only control. Thirty nursing home residents (mean age, 64.4 years) were randomly assigned to one of two groups in one of the three experimental conditions. Residents assigned to therapy conditions met for 15 group sessions led by trained nursing home personnel. Program effects were assessed before and after treatment using three variables: the Life Satisfaction Index-A, nurses' ratings, and behavior observations. The Sheltered Workshop treatment produced significant gains in Life Satisfaction Index-A scores and staff perceived social interest; Reality Orientation resulted in nonsignificant decrements in Life Satisfaction Index-A scores. Neither treatment produced effects on observer-rated on-ward behavior. The results underscore the importance of empirically evaluating therapy effects with the institutionalized aging and suggest that Sheltered Workshops may be more beneficial for this population than has previously been recognized. (PsycINFO Database Record (c) 2010 APA, all rights reserved) [F2]

Lichter, S., Hays, K., & Kammann, R. (1980). Increasing happiness through cognitive retraining. *New Zealand Psychologist*, 9, 57-64.

Recent findings indicate that happiness depends not so much on life circumstances as on the way in which these are interpreted and evaluated, which

is loosely attributed to a concept of "happiness set." Two experiments with 84 Ss indicated that happiness can be improved either by a group discussion of beliefs and attitudes or, alternatively, by daily rehearsal of positive feeling statements. These results can be attributed either to 2 different ways of influencing the happiness set or to a nonspecific placebo-type effect. (PsycINFO Database Record (c) 2009 APA, all rights reserved) [E2](#) [F1](#) [F2](#)

1981-1985

N=1

Fordyce, M. W. (1983). A program to increase happiness: Further studies. *Journal of Counseling Psychology*, 30, 483-498.

Reports new studies (226 adult Ss) on increasing personal happiness. The studies are continuations of Studies 1, 2, and 3 reported in M. W. Fordyce (see record 1978-23415-001). The studies used a training program in happiness that centered on 14 fundamentals, including keeping busy, spending more time socializing, developing positive thinking, and working on a healthy personality. Adults at a community college participated in the programs. Measures of happiness included the Depression Adjective Check Lists and Happiness Measures. In Study 4, the complete program demonstrated significant happiness increases over a control group receiving summary instruction in the program. In Study 5, the complete program showed slight superiority over a control group receiving almost half the information. In Study 6, the full program was compared to groups receiving partial instruction from the program in their predetermined areas of "happiness weakness" and to a control receiving "placebo expectations" of greater happiness. All treatment groups demonstrated significant gains in happiness compared to controls, though no difference between the treatments was apparent. Study 7 involved a 9-28 mo follow-up of the program's effects on 69 past participants, with the vast majority of anonymous respondents reporting continued happiness increases. The collected findings indicate that the program had a long-lasting effect on happiness for most Ss and that this effect was due to the content of the information. [E2](#) [F1](#)

1986-1990

N=1

Bennett, S. L., & Maas, F. (1988). The effect of music-based life review on the life satisfaction and ego integrity of elderly people. *British Journal of Occupational Therapy*, 5, 433-436.

Tested the hypothesis that a review using music to stimulate reminiscence would more effectively promote life satisfaction and ego integrity than a verbal life review. 26 elderly female patients residing in nursing homes or hostel accommodation were selected, matched, and randomly assigned to either a music-based or a verbal life review. Following a 6-wk intervention period, Ss completed the ego integrity subscale of W. Boylin et al (1976) and the Life Satisfaction Index Form A and indicated on a linear scale the degree to which they enjoyed the treatment or found it helpful. Results support the hypothesis. (PsycINFO Database Record (c) 2010 APA, all rights reserved) [F2](#)

1991-1995

N=3

Kabat-Zinn, J., Massion, A. O., Kristeller, J., Peterson, L. G., et al. (1992). Effectiveness of a meditation-based stress reduction program in the treatment of anxiety disorders. *The American Journal of Psychiatry*, 149, 936-943.

22 study participants (aged 26-64 yrs) were screened with a structured clinical interview and found to meet the Diagnostic and Statistical Manual of Mental

Disorders-III-Revised (DSM-III-R) criteria for generalized anxiety disorder or panic disorder with or without agoraphobia. Assessment, including self-ratings and therapists' ratings, were obtained weekly before and during the meditation-based stress reduction and relaxation program and monthly during the 3-mo follow-up period. Repeated measures ANOVA documented reductions in anxiety and depression scores after treatment for 20 of the Ss--changes that were maintained at follow-up. The number of Ss experiencing panic symptoms was also reduced. A comparison of the study Ss with a group of nonstudy program participants who met the initial screening criteria showed that both groups achieved similar reductions in anxiety scores. E1 F1

Hebl, J., & Enright, R. D. (1993). Forgiveness as a psychotherapeutic goal with elderly females. *Psychotherapy: Theory, Research, Practice, Training*, 30, 658-667.

A psychotherapeutic intervention with forgiveness as the goal was implemented with 24 elderly women (mean age 74.5 yrs). The client's goal was to forgive one person who had inflicted considerable psychological hurt, as judged by the client. The Ss were randomly assigned to a forgiveness condition and a control group. The forgiveness group followed a treatment model based on R. D. Enright et al (1991). Dependent variables included 2 forgiveness scales, the Coopersmith Self-Esteem Inventories, Beck Depression Inventory, and State-Trait Anxiety Inventory. Following the 8-wk intervention, the experimental group showed significantly higher forgiveness profiles at posttest compared with the control group. Both groups significantly decreased from pretest to posttest on psychological depression and trait anxiety. F2

Smith, W. P., Compton, W. C., West, W. B. (1995). Meditation as an adjunct to a happiness enhancement program. *Journal of Clinical Psychology*. 51, 269-273.

Investigated the impact that meditation has on M. W. Fordyce's (see PA, Vols 60:3415 and 71:4461) Personal Happiness Enhancement Program (PHEP). 36 undergraduates were assigned randomly to either the meditation plus PHEP (MEDP) group, the PHEP instruction only group, or a control group. The Happiness Measure, Psychap Inventory, Beck Depression Inventory, and State-Trait Anxiety Inventory were dependent measures. The 3 (groups)*2 (pre-post) mixed-ANOVAs with Student Newman-Keuls found that the MEDP group significantly improved on all dependent measures over both the PHEP-only group and the control group. The PHEP-only group improved significantly over the control group on all measures except state anxiety. E2 F1 F2

1996-1999

N=7

Freedman, S. R. & Enright, R. D. (1996). Forgiveness as an intervention goal with incest survivors. *Journal of Consulting and Clinical Psychology*, 64, 983-992.

An intervention, with forgiveness toward their abuser as the goal, was implemented with 12 female incest survivors. The women, from a midwestern city, were 24 to 54 years old, and all were Caucasian. A yoked, randomized experimental and control group design was used. The participants were randomly assigned to an experimental group (receiving the forgiveness intervention immediately) or a waiting-list control group (receiving the intervention when their matched experimental counterpart finished the intervention). Each participant met individually with the intervener once per week. The average length of the intervention for the 12 participants was 14.3 months. A process model of forgiveness was used as the focus of intervention. Dependent variables included forgiveness, self-esteem, hope, psychological depression, and state-trait anxiety scales. After the intervention, the experimental group gained more than the control group in forgiveness and hope and decreased significantly more than the control group in anxiety and depression. When the control group then began the program they showed similar change patterns to the above, as well as in self-esteem improvement. E2 F1 F2

Durlak, J.A., and Wells, A.M. (1997). Primary prevention mental health programs for children and adolescents: A meta-analytic review. *American Journal of Community Psychology*, 25, 115–152.

Used meta-analysis to review 177 primary prevention programs designed to prevent behavioral and social problems in children and adolescents. Findings provide empirical support for further research and practice in primary prevention. Most categories of programs produced outcomes similar to or higher in magnitude than those obtained by many other established preventive and treatment interventions in the social sciences and medicine. Programs modifying the school environment, individually focused mental health promotion efforts, and attempts to help children negotiate stressful transitions yield significant mean effects ranging from 0.24 to 0.93. In practical terms, the average participant in a primary prevention program surpasses the performance of between 59% to 82% of those in a control group, and outcomes reflect an 8% to 46% difference in success rates favoring prevention groups. Most categories of programs had the dual benefit of significantly reducing problems and significantly increasing competencies. Priorities for future research include clearer specification of intervention procedures and program goals, assessment of program implementation, more follow-up studies, and determining how characteristics of the intervention and participants relate to different outcomes. N

Cook, E. A. (1998). Effects of reminiscence on life satisfaction of elderly female nursing home residents. *Health Care for Women International*, 19, 109-118.

Investigated the efficacy of a 16-wk reminiscence group in increasing life satisfaction in 36 elderly female nursing home residents (aged 69-96 yrs). Erikson's (1982) developmental theory and R. N. Butler's (1981) theory of reminiscing provided the theoretical framework for the study. It was hypothesized that recollection of positive and pleasant experiences in a structured format would increase life satisfaction when measured by the Life Satisfaction Index A (B. L. Neugarten et al, 1961). Ss were randomly assigned to a reminiscing group or a control group. A statistically significant difference was found between the reminiscing group and the control group on the dependent variable, life satisfaction, when data were analyzed using an analysis of covariance. Implications for research and practice are discussed. It is concluded that because satisfaction with one's entire life, past and present, is a contributing factor to mental health, reminiscing should be used to enhance the mental health of elderly women. (PsycINFO Database Record (c) 2009 APA, all rights reserved)

E2 F1 F2

Fava, G. A., Rafanelli, C., Cazzaro, M., Conti, S., & Grandi, S. (1998). Well-being therapy: A novel psychotherapeutic approach for residual symptoms of affective disorders. *Psychological Medicine: A Journal of Research in Psychiatry and the Allied Sciences*, 28, 475-480.

Sought to apply a novel, short-term psychotherapeutic approach for increasing well being, based on C. D. Ryff's conceptual model, to remitted patients with affective disorders and to compare the results with those obtained with symptom-oriented cognitive behavioral strategies. 20 patients with affective disorders (major depression, panic disorder with agoraphobia, social phobia, generalized anxiety disorder, and obsessive-compulsive disorder) who had been successfully treated by behavioral or pharmacological methods were randomly assigned to a well-being enhancing therapeutic strategy (well-being therapy) or cognitive-behavioral treatment of residual symptoms. Results show that both well-being and cognitive-behavioral therapies were associated with a significant reduction of residual symptoms. However, a significant advantage of well-being therapy over cognitive-behavioral strategies was observed with observer-rated methods. These preliminary results suggest the feasibility of well-being therapy in the residual stage of affective disorders. Further research should determine its value as a relapse-preventive strategy in specific mood and anxiety disorders. (PsycINFO Database Record (c) 2010

APA, all rights reserved) E2 F1 F2

Klausner, E. J., Clarkin, J. F., Spielman, L., Pupo, C., Abrams, R., & Alexopoulos, G. S. (1998). Late-life depression and functional disability: The role of goal-focused group psychotherapy. *International Journal of Geriatric Psychiatry, 13*, 707–716.

Compared the efficacy of 2 time-limited group psychotherapies for depression and functional disability in late life. Goal-focused group psychotherapy (GFGP) utilized focused psychoeducation and skills training to assist each patient in the achievement of individualized goals, while reminiscence therapy (RT) emphasized individual life review to facilitate discussion. 13 Ss, aged 55+ yrs, with major depression were randomly assigned to 1 of the 2 groups. While both treatment groups improved in depressed mood and disability, GFGP Ss had a far greater change in depressive symptomatology and also improved in the areas of hope, hopelessness, anxiety and social functioning. (PsycINFO Database Record (c) 2010 APA, all rights reserved) [F2](#)

Smyth, J. (1998). Written emotional expression: Effect sizes, outcome types, and moderating variables. *Journal of Consulting and Clinical Psychology, 66*(1), 174-184

A research synthesis was conducted to examine the relationship between a written emotional expression task and subsequent health. This writing task was found to lead to significantly improved health outcomes in healthy participants. Health was enhanced in 4 outcome types-reported physical health, psychological well-being, physiological functioning, and general functioning-but health behaviors were not influenced. Writing also increased immediate (pre- to postwriting) distress, which was unrelated to health outcomes. The relation between written emotional expression and health was moderated by a number of variables, including the use of college students as participants, gender, duration of the manipulation, publication status of the study, and specific writing content instructions. [N](#)

Schwartz, C. E., & Sendor, M. (1999). Helping others helps oneself: Response shift effects in peer support. *Social Science & Medicine, 48*, 1563-1575.

The present work explores the impact of helping others on the physical and psychosocial well-being of the provider. Lay people were trained to listen actively and to provide compassionate, unconditional positive regard to others with the same chronic disease. The recipients of the peer support intervention were participants of a psychosocial randomized trial, whereas the peer supporters were study personnel and were therefore not randomized. We describe a secondary analysis of a randomized trial to explore the impact of being a peer supporter on these lay people. Subjects were 132 people with multiple sclerosis, all of whom completed quality-of-life questionnaires 3 times over 2 years. A focus group was also implemented with the peer telephone supporters 3 years after completion of the randomized trial. Effect size was computed for each quality-of-life outcome, and the focus group discussion was content analyzed. We found that compared to supported patients, the peer telephone supporters: (1) reported more change in both positive and negative outcomes as compared to the supported patients and that the effect size of these changes tended to be larger ($\chi^2 = 9.6$, $df = 4$, $p < 0.05$) and (2) showed pronounced improvement on confidence, self-awareness, self-esteem, depression and role functioning. Content analysis revealed that the participants articulated a sense of dramatic change in their lives in terms of how they thought of themselves and in how they related to others. We conclude with a discussion of response shift, a mediator of adaptation to illness which involves shifting internal standards, values, and concept definitions of health and well-being. We suggest that a response shift may be induced by a therapeutic strategy involving the externalization and re-internalization of concern among physically ill patients. (PsycINFO Database Record (c) 2010 APA, all rights reserved) [F2](#)

King, L. A. & Miner, K. N. (2000). Writing about the perceived benefits of traumatic events: Implications for physical health. *Personality and Social Psychology Bulletin*, 26, 220-230.

Examined the potential benefits of writing about the positive side of painful life events. 118 psychology students (aged 18–36 yrs) were randomly assigned to 1 of 4 cells (writing about trauma, not writing about trauma, writing about perceived benefits, or not writing about perceived benefits) and instructed to write about 1 of 4 topics: (a) trauma-only: their most traumatic life experiences, (b) trauma plus perceived benefits: a traumatic life experience and how they have grown and/or benefited as a result of the experience, (c) perceived benefits only: the positive aspects of and how they have grown or benefited as a result of some traumatic experience or loss, and (d) control condition: participants wrote about their plans for the following day and a description of their shoes. Participants also completed questionnaire measures of subjective well-being and released health center information for a year. Those who wrote only about trauma or perceived benefits showed significantly fewer health center visits for illness 3 mo after writing. Additionally, 5 mo after writing, the trauma-only and perceived-benefits-only groups maintained a difference from the control group. (PsycINFO Database Record (c) 2010 APA, all rights reserved) [E2](#) [F1](#) [F2](#)

Teasdale, J. D., Segal, Z. V., Williams, J. M. G., Ridgeway, V. A., Soulsby, J. M., & Lau, M. A. (2000). Prevention of relapse/recurrence in major depression by mindfulness-based cognitive therapy. *Journal of Consulting and Clinical Psychology*, 68, 615-623.

This study evaluated mindfulness-based cognitive therapy (MBCT), a group intervention designed to train recovered recurrently depressed patients to disengage from dysphoria-activated depressogenic thinking that may mediate relapse/recurrence. Recovered recurrently depressed patients (n = 145) were randomized to continue with treatment as usual or, in addition, to receive MBCT. Relapse/recurrence to major depression was assessed over a 60-week study period. For patients with 3 or more previous episodes of depression (77% of the sample), MBCT significantly reduced risk of relapse/recurrence. For patients with only 2 previous episodes, MBCT did not reduce relapse/recurrence. MBCT offers a promising cost-efficient psychological approach to preventing relapse/recurrence in recovered recurrently depressed patients. (PsycINFO Database Record (c) 2009 APA, all rights reserved) [E1](#) [F1](#)

2001

N=2

King, L. A. (2001). The health benefits of writing about life goals. *Personality and Social Psychology Bulletin*, 27, 798-807.

In a variation on J. W. Pennebaker's (1993) writing paradigm, a sample of 81 undergraduates (aged 18–42 yrs) wrote about one of four topics for 20 minutes each day for 4 consecutive days. Participants were randomly assigned to write about their most traumatic life event, their best possible future self, both of these topics, or a nonemotional control topic. Mood was measured before and after writing and health center data for illness were obtained with participant consent. Three weeks later, measures of subjective well-being were obtained. Writing about life goals was significantly less upsetting than writing about trauma and was associated with a significant increase in subjective well-being. Five months after writing, a significant interaction emerged such that writing about trauma, one's best possible self, or both were associated with decreased illness compared with controls. Results indicate that writing about self-regulatory topics can be associated with the same health benefits as writing about trauma. (PsycINFO Database Record (c) 2010 APA, all rights reserved) [E2](#) [F1](#) [F2](#)

Savelkoul, M., de Witte, L., Candel, M. J. J. M., Van Der Tempel, H., & Van Den Borne, B. (2001). Effects of a coping intervention on patients with rheumatic diseases: Results of a randomized controlled trial. *Arthritis Care & Research*, 45, 69-76.

OBJECTIVE: To test the effects (on coping, social interactions, loneliness, functional health status, and life satisfaction) of an intervention aimed at teaching people with rheumatic diseases to cope actively with their problems. **METHODS:** A total of 168 patients with chronic rheumatic disorders affecting the joints were randomly assigned to a coping intervention group, a mutual support control group, or a waiting list control group. Measurements were by self-report questionnaires. **RESULTS:** Post-intervention measurements showed that the coping intervention increased action-directed coping and functional health status, but these effects did not persist up to 6-months followup. In patients who attended at least half of the 10 sessions, the coping intervention contributed to decreased loneliness at post-intervention and to improvements in social interactions and life satisfaction at 6-months followup. **CONCLUSION:** Teaching patients with rheumatic diseases to cope actively with their problems had positive impacts. Consequently it is recommended that the coping intervention be incorporated into regular care. Maintenance sessions are advisable. F2

2002

N=3

Grant, A. M. (2002). Towards a psychology of coaching: The impact of coaching on metacognition, mental health and goal attainment. Dissertation Abstracts International, 63/12, 6094.

A series of studies developed a framework for a psychology of coaching. Coaching was defined as a collaborative, solution-focused, result-orientated systematic process, used with normal, non-clinical populations, in which the coach facilitates the self-directed learning, personal growth and goal attainment of the coachee. A review of the peer-reviewed psychological literature found some measure of support for the effectiveness of coaching, but noted that coaching research is still in its infancy. A solution-focused cognitive-behavioural (SF/CB) framework was developed, which the following studies explored. The Transtheoretical Model of Change (TTM) was identified as a model of change with applicability to coaching and empirical support was found for its use in coaching. Three studies then explored the effects of cognitive only, behavioural only, and combined cognitive and behavioural coaching, on trainee accountants' grade point average, study skills, self-regulation, mental health, private self-consciousness and self-concept. The cognitive only program increased deep and achieving approaches to learning, academic self-concepts, reduced test anxiety and nonstudy-related anxiety and depression. Academic performance declined relative to controls. The behavioural only coaching program decreased test anxiety and increased academic performance. The combined cognitive and behavioural program increased academic performance, deep and achieving approaches to learning, academic self-concepts, and reduced test anxiety. No program had a significant impact on private self-consciousness, self-reflection or insight. On follow-up, one semester later, academic performance increases were maintained only for combined cognitive and behavioural program participants. A theoretical discussion then outlines the role of psychological mindedness, self-reflection and insight in coaching, and the construction and validation of the Self-reflection and Insight Scale (SRIS) is reported. In the final study 20 adults completed a life coaching program, focusing on attaining goals that had alluded them for an average of 23.5 months. Participation was associated with enhanced mental health, quality of life and increased goal attainment. Levels of self-reflection decreased but insight increased. It is concluded that SF/CB coaching appears to be an effective approach to personal development and goal attainment, and may prove to be a useful platform for a positive psychology and the investigation of the psychological mechanisms involved purposeful change in normal adult populations. F2

Rejeski, W. J., Shelton, B., Miller, M. E., Dunn, A. L., King, A. C., Sallis, J. F., et al. (2001). Mediators of increased physical activity and change in subjective well-being: Results from the Activity Counseling Trial (ACT). Journal of Health Psychology, 6(2), 159-168.

The purpose of this study was to examine whether change in satisfaction with physical function (SF), satisfaction with physical appearance (SA), and self-efficacy (SE) mediate the effects that increased physical activity has on change in subjective well-being (SWB). Participants in this investigation consisted of 854 men (n = 471) and women (n = 383) who took part in the Activity Counseling Trial (ACT). ACT was a 24-month multicenter, randomized controlled trial to evaluate the effectiveness of interventions to promote physical activity in the primary care setting. Participants were assigned to one of three treatments: standard care control, staff-assisted intervention, or staff-counseling intervention. Results revealed that, irrespective of treatment arm, change in physical activity was related to change in SBW and to change in all mediators of interest. A statistical test of mediation revealed that the influence of change in physical activity on SWB was due to change in all three mediators with change in SF making the greatest contribution to the model. N

Sheldon, K. M., Kasser, T., Smith, K., & Share, T. (2002). Personal goals and psychological growth: Testing an intervention to enhance goal attainment and personality integration. *Journal of Personality*, 70, 5-31.

Hypothesized that semester goal attainment provides a route to short-term psychological growth. In an attempt to enhance this process, the authors randomly assigned 90 participants to either a goal-training program or to a control condition. Although there were no main effects of program participation on later goal attainment, important interactions were found. Consistent with a "prepared to benefit" model, participants already high in goal-based measures of personality integration perceived the program as most useful and benefited the most from the program in terms of goal attainment. As a result, they became even more integrated and also increased in their levels of psychosocial well-being and vitality. Implications for theories of short-term growth and positive change are discussed, as is the unanswered question of how to help less-integrated. (PsycINFO Database Record (c) 2010 APA, all rights reserved) F1

F2

2003

N=5

Bedard, M., Felteau, M., Mazmanian, D., Fedyk, K., Klein, R., Richardson, J., Parkinson, W., & Minthorn-Biggs, M. (2003). Pilot evaluation of a mindfulness-based intervention to improve quality of life among individuals who sustained traumatic brain injuries. *Disability and Rehabilitation: An International, Multidisciplinary Journal*, 25, 722-731.

Examined the potential efficacy of a mindfulness-based stress reduction approach to improve quality of life in individuals who have suffered traumatic brain injuries. We recruited individuals with mild to moderate brain injuries, at least 1 year post-injury. We measured their quality of life, psychological status, and function. Results of 10 participants who completed the programme were compared to three drop-outs with complete data. The intervention relied on insight meditation, breathing exercises, guided visualization, and group discussion. We aimed to encourage a new way of thinking about disability and life to bring a sense of acceptance, allowing participants to move beyond limiting beliefs. The treatment group mean quality of life (SF-36) improved by 15.40 (SD = 9.08) compared to -1.67 (SD = 16.65; p = 0.036) for controls. Improvements on the cognitive-affective domain of the Beck Depression Inventory II (BDI-II) were reported (p = 0.029), while changes in the overall BDI-II (p = 0.059) and the Positive Symptom Distress Inventory of the SCL-90R (p = 0.054) approached statistical significance. The intervention was simple, and improved quality of life after other treatment avenues for these participants were exhausted. (PsycINFO Database Record (c) 2010 APA, all rights reserved) E2 F1 F2

Emmons, R. A., McCullough, M. E. (2003). Counting blessings versus burdens: An experimental investigation of gratitude and subjective well-being in daily life. *Journal of Personality and Social Psychology*, 84, 377-389.

The effect of a grateful outlook on psychological and physical well-being was examined. In Studies 1 and 2, participants were randomly assigned to 1 of 3 experimental conditions (hassles, gratitude listing, and either neutral life events or social comparison); they then kept weekly (Study 1) or daily (Study 2) records of their moods, coping behaviors, health behaviors, physical symptoms, and overall life appraisals. In a 3rd study, persons with neuromuscular disease were randomly assigned to either the gratitude condition or to a control condition. The gratitude-outlook groups exhibited heightened well-being across several, though not all, of the outcome measures across the 3 studies, relative to the comparison groups. The effect on positive affect appeared to be the most robust finding. Results suggest that a conscious focus on blessings may have emotional and interpersonal benefits. (PsycINFO Database Record (c) 2009 APA, all rights reserved) [E1](#) [E2](#) [F1](#) [F2](#)

Grant, A. M. (2003). The impact of life coaching on goal attainment, metacognition and mental health. *Social Behavior & Personality*, 31, 253-264.

Despite its high media profile and growing popularity there have been no empirical investigations of the impact of life coaching on goal attainment, metacognition or mental health. This exploratory study used life coaching as a means of exploring key metacognitive factors involved as individuals move towards goal attainment. In a within-subjects design, twenty adults completed a life coaching program. Participation in the program was associated with enhanced mental health, quality of life and goal attainment. In terms of metacognition, levels of self-reflection decreased and levels of insight increased. Life coaching has promise as an effective approach to personal development and goal attainment, and may prove to be a useful platform for a positive psychology and the investigation of the psychological mechanisms involved in purposeful change in normal, nonclinical populations. (PsycINFO Database Record (c) 2003 APA, all rights reserved) [F1](#)

Nelson, G., Westhues, A., & MacLeod, J. (2003). A meta-analysis of longitudinal research on preschool prevention programs for children. *Prevention & Treatment*, 6(31).

The objectives of this research were to determine the effectiveness of preschool prevention programs for disadvantaged children and families in the short-term (preschool), medium-term (K-8), and the long-term (high school and beyond) and to identify factors that moderate program success. Meta-analysis was used to examine the effect sizes (d) of different outcome domains of 34 preschool prevention programs that had at least one follow-up assessment when the children were in school. While cognitive impacts resulting from these programs were greatest during the preschool period ($d=.52$), they were still evident during K-8 ($d=.30$). Social-emotional impacts on children were similar at K-8 ($d=.27$) and high school and beyond ($d=.33$), as were parent-family wellness impacts at preschool ($d=.33$) and K-8 ($d=.30$). As predicted, cognitive impacts during the preschool time period were greatest for those programs that had a direct teaching component in preschool. Also as predicted, cognitive impacts during the K-8 time period were greatest for those programs that had a follow through educational component in elementary school. The longer the intervention for children, the greater were the impacts on preschool cognitive outcomes and child social-emotional outcomes at K-8; and the more intense the intervention for children, the greater were the impacts on preschool cognitive outcomes and parent-family outcomes at K-8. The largest impacts on preschool cognitive outcomes and child social-emotional and parent-family outcomes at K-8 were found for those programs that served predominantly African-American children. These results indicate that preschool prevention programs do have positive short-, medium-, and long-term impacts on several outcome domains. The findings were discussed in terms of contemporary trends in and future directions for policies and preschool prevention programs for children and families. [N](#)

Watkins, P.C., Woodward, K., Stone, T., & Kolts, R.L. (2003). Gratitude and happiness: Development of a measure of gratitude, and relationships with subjective well-being. *Social Behavior and Personality*, 31, 431–452.

The purpose of these studies was to develop a valid measure of trait gratitude, and to evaluate the relationship of gratitude to subjective well-being (SWB). Four studies were conducted evaluating the reliability and validity of the Gratitude Resentment and Appreciation Test (GRAT), a measure of dispositional gratitude. This measure was shown to have good internal consistency and temporal stability. The GRAT was shown to relate positively to various measures of SWB. In two experiments, it was shown that grateful thinking improved mood, and results also supported the predictive validity of the GRAT. These studies support the theory that gratitude is an affective trait important to SWB. F2

2004

N=5

Burton, C. M. & King, L. A. (2004). The health benefits of writing about intensely positive experiences. *Journal of Research in Personality*, 38, 150-163.

In a variation on Pennebaker's writing paradigm, a sample of 90 undergraduates were randomly assigned to write about either an intensely positive experience (IPE) (n=48) or a control topic (n=42) for 20 min each day for three consecutive days. Mood measures were taken before and after writing. Three months later, measures of health center visits for illness were obtained. Writing about IPEs was associated with enhanced positive mood. Writing about IPEs was also associated with significantly fewer health center visits for illness, compared to controls. Results are interpreted as challenging previously considered mechanisms of the positive benefits of writing. (PsycINFO Database Record (c) 2009 APA, all rights reserved) E2 F1 F2

Davis, M. C. (2004). Life Review Therapy as an Intervention to Manage Depression and Enhance Life Satisfaction in Individuals with Right Hemisphere Cerebral Vascular Accidents. *Issues in Mental Health Nursing*, 25, 503-515.

This pilot study sought to determine if the use of Life Review Therapy would result in lower levels of depression and higher degrees of life satisfaction in individuals with right hemisphere cerebral vascular accidents (CVAs). Fourteen subjects in a southern rehabilitation center were randomly assigned to either an experimental or control group. The experimental group received three one-hour sessions of Life Review Therapy and the control group viewed three one-hour sessions of neutral video with a follow-up discussion. Following the third session of each group, subjects were administered the Zung Scale for Depression and the Life Satisfaction Index--Form Z. A one-way ANOVA revealed a significantly lower level of depression ($p < .01$) and a significantly higher degree of life satisfaction ($p < .01$) in the Life Review Therapy group. (PsycINFO Database Record (c) 2009 APA, all rights reserved) E2 F1 F2

Gable, S. L., Impett, E. A., Reis, H. T., & Asher, E. R. (2004). What do you do when things go right? The Intrapersonal and Interpersonal Benefits of Sharing Positive Events. *Journal of Personality and Social Psychology*, 87, 228-245.

Four studies examined the intrapersonal and interpersonal consequences of seeking out others when good things happen (i.e., capitalization). Two studies showed that communicating personal positive events with others was associated with increased daily positive affect and well-being, above and beyond the impact of the positive event itself and other daily events. Moreover, when others were perceived to respond actively and constructively (and not passively or destructively) to capitalization attempts, the benefits were further enhanced. Two studies found that close relationships in which one's partner typically responds to capitalization attempts enthusiastically were associated with higher relationship well-being (e.g., intimacy, daily marital satisfaction). The results are discussed in terms of the theoretical and empirical importance of understanding how people

“cope” with positive events, cultivate positive emotions, and enhance social bonds. N

Lin, W., Mack, D., Enright, R. D., Krahn, D., & Baskin, T. W. (2004). Effects of Forgiveness Therapy on anger, mood, and vulnerability to substance use among inpatient substance-dependent clients. *Journal of Consulting and Clinical Psychology*, 72, 1114-1121.

Anger and related emotions have been identified as triggers in substance use. Forgiveness therapy (FT) targets anger, anxiety, and depression as foci of treatment. Fourteen patients with substance dependence from a local residential treatment facility were randomly assigned to and completed either 12 approximately twice-weekly sessions of individual FT or 12 approximately twice-weekly sessions of an alternative individual treatment based on routine drug and alcohol therapy topics. Participants who completed FT had significantly more improvement in total and trait anger, depression, total and trait anxiety, self-esteem, forgiveness, and vulnerability to drug use than did the alternative treatment group. Most benefits of FT remained significant at 4-month follow-up. These results support FT as an efficacious newly developed model for residential drug rehabilitation. (PsycINFO Database Record (c) 2009 APA, all rights reserved) E2 F1 F2

Seligman, M. E. P. (2004, September). Positive interventions: More evidence of effectiveness. *Authentic Happiness Newsletter*. Retrieved July 17, 2008, from <http://www.authentichappiness.sas.upenn.edu/newsletter.aspx?id=45> E2 F1

2005

N=8

Duckworth, A. L., Steen, T. A., & Seligman, M. E. P. (2005). Positive Psychology In Clinical Practice. *Annual Review of Clinical Psychology*, 1, 629-651.

Positive psychology is the scientific study of positive experiences and positive individual traits, and the institutions that facilitate their development. A field concerned with well-being and optimal functioning, positive psychology aims to broaden the focus of clinical psychology beyond suffering and its direct alleviation. Our proposed conceptual framework parses happiness into three domains: pleasure, engagement, and meaning. For each of these constructs, there are now valid and practical assessment tools appropriate for the clinical setting. Additionally, mounting evidence demonstrates the efficacy and effectiveness of positive interventions aimed at cultivating pleasure, engagement, and meaning. We contend that positive interventions are justifiable in their own right. Positive interventions may also usefully supplement direct attempts to prevent and treat psychopathology and, indeed, may covertly be a central component of good psychotherapy as it is done now. (PsycINFO Database Record (c) 2010 APA, all rights reserved) F1

Bryant, F.B., Smart, C.M., & King, S.P. (2005). Using the past to enhance the present: Boosting happiness through positive reminiscence. *Journal of Happiness Studies*, 6, 227-260.

Two studies explored relations between positive reminiscing and emotional experience – a survey of naturally occurring reminiscence (Study 1) and a field experiment testing the affective consequences of two styles of reminiscing (Study 2). In Study 1, frequency of positive reminiscing predicted perceived ability to enjoy life, and students who reminisced using cognitive imagery reported a greater ability to savor positive events than those who reminisced using memorabilia. In Study 2, students were randomly assigned either to reminisce about pleasant memories using cognitive imagery, reminisce about pleasant memories using memorabilia, or think about current concerns (control condition) for 10?min twice daily for a week. Both reminiscence groups reported greater increases in the percent of time they felt happy over the past week than the

control group; and happiness increased more in the cognitive imagery group than in the memorabilia group. [F2](#)

Fava, G. A., Ruini, C., Rafanelli, C., Finos, L., Salmaso, L., Mangelli, L., & Sirigatti, S. (2005). Well-Being Therapy of Generalized Anxiety Disorder. *Psychotherapy and Psychosomatics*, 74, 26-30.

BACKGROUND:There is increasing awareness that the goal of treatment in generalized anxiety disorder (GAD) should not simply be a response, but restoration of normal function. The aim of this study was to apply a novel psychotherapeutic approach for increasing the level of remission in GAD. **METHODS:** Twenty patients with DSM-IV GAD devoid of comorbid conditions were randomly assigned to 8 sessions of cognitive behavioral therapy (CBT) or the sequential administration of 4 sessions of CBT followed by other 4 sessions of well-being therapy (WBT). Assessment methods included the Anxiety and Depression Scales of Paykel's Clinical Interview for Depression, Ryff's Psychological Well-being Scales and Kellner's Symptom Questionnaire. A one-year follow-up was undertaken. **RESULTS:** Significant advantages of the CBT-WBT sequential combination over CBT only were observed with both observer and self-rated methods after treatment. Such gains were maintained at follow-up. **CONCLUSIONS:** These preliminary results suggest the feasibility and clinical advantages of adding WBT to the treatment of GAD. They lend support to a sequential use of treatment components for achieving a more sustained recovery. (PsycINFO Database Record (c) 2009 APA, all rights reserved) [E2](#) [F1](#) [F2](#)

Fredrickson, B. L. & Losada, M. (2005). Positive affect and the complex dynamics of human flourishing. *American Psychologist*, 60 (7) 678-686

Extending B. L. Fredrickson's (1998) broaden-and-build theory of positive emotions and M. Losada's (1999) nonlinear dynamics model of team performance, the authors predict that a ratio of positive to negative affect at or above 2.9 will characterize individuals in flourishing mental health. Participants (N=188) completed an initial survey to identify flourishing mental health and then provided daily reports of experienced positive and negative emotions over 28 days. Results showed that the mean ratio of positive to negative affect was above 2.9 for individuals classified as flourishing and below that threshold for those not flourishing. Together with other evidence, these findings suggest that a set of general mathematical principles may describe the relations between positive affect and human flourishing. [N](#)

Lyubomirsky, S., Sheldon, K. M., & Schkade, D. (2005). Pursuing Happiness: The Architecture of Sustainable Change. *Review of General Psychology*, 9, 111-131.

The pursuit of happiness is an important goal for many people. However, surprisingly little scientific research has focused on the question of how happiness can be increased and then sustained, probably because of pessimism engendered by the concepts of genetic determinism and hedonic adaptation. Nevertheless, emerging sources of optimism exist regarding the possibility of permanent increases in happiness. Drawing on the past well-being literature, the authors propose that a person's chronic happiness level is governed by 3 major factors: a genetically determined set point for happiness, happiness-relevant circumstantial factors, and happiness-relevant activities and practices. The authors then consider adaptation and dynamic processes to show why the activity category offers the best opportunities for sustainably increasing happiness. Finally, existing research is discussed in support of the model, including 2 preliminary happiness-increasing interventions. (PsycINFO Database Record (c) 2010 APA, all rights reserved) [E1](#) [F1](#) [F2](#)

Seligman, M. E. P., Steen, T. A., Park, N., & Peterson, C. (2005). Positive psychology progress: Empirical validation of interventions. *Tidsskrift for Norsk Psykologforening*, 42, 874-884.

Positive psychology has flourished in the last 5 years. The authors review recent developments in the field, including books, meetings, courses, and conferences. They also discuss the newly created classification of character strengths and virtues, a positive complement to the various editions of the Diagnostic and Statistical Manual of Mental Disorders (e. g., American Psychiatric Association, 1994), and present some cross-cultural findings that suggest a surprising ubiquity of strengths and virtues. Finally, the authors focus on psychological interventions that increase individual happiness. In a 6-group, random-assignment, placebo-controlled Internet study, the authors tested 5 purported happiness interventions and 1 plausible control exercise. They found that 3 of the interventions lastingly increased happiness and decreased depressive symptoms. Positive interventions can supplement traditional interventions that relieve suffering and may someday be the practical legacy of positive psychology. (PsycINFO Database Record (c) 2010 APA, all rights reserved) [E1](#) [F1](#) [F2](#)

Surawy, C., Roberts, J., & Silver, A. (2005). The effect of Mindfulness training on mood and measures of fatigue, activity, and Quality of Life in patients with Chronic Fatigue Syndrome on a hospital waiting list: A series of exploratory studies. Behavioural and Cognitive Psychotherapy, 33, 103-109.

Three exploratory studies evaluated group mindfulness training (which aims to facilitate non-judgmental attention to present moment experience through the practice of meditation) in patients waiting for cognitive behaviour therapy for Chronic Fatigue Syndrome (CFS). The approaches used were based on Mindfulness Based Stress Reduction, and Mindfulness Based Cognitive Therapy. The first group showed that such training is acceptable to patients and that it results in significantly improved subjective measures of anxiety, and improvements in subjective levels of fatigue that approached significance, when compared to waiting list controls. A second uncontrolled study replicated the findings of the first study and also demonstrated an improvement in quality of life as measured by the Fatigue Impact Scale (FIS). More wide-ranging effects were demonstrated in the final study in which significant improvements in subjective levels of fatigue, anxiety, depression, quality of life and physical functioning were observed following the training programme. These effects were sustained for 3 months. Overall, the findings of the three exploratory studies indicate that MBSR/MBCT has potential for the treatment of patients with CFS. (PsycINFO Database Record (c) 2010 APA, all rights reserved) [E2](#) [F1](#) [F2](#)

Wachholtz, A., & Pargament, K. (2005). Is spirituality a critical ingredient of meditation? Comparing the effects of spiritual meditation, secular meditation, and relaxation on spiritual, psychological, cardiac, and pain outcomes. Journal of Behavioral Medicine, 28, 369–384.

This study compared secular and spiritual forms of meditation to assess the benefits of a spiritual intervention. Participants were taught a meditation or relaxation technique to practice for 20 min a day for two weeks. After two weeks, participants returned to the lab, practiced their technique for 20 min, and placed their hand in a cold-water bath of 2 degrees C for as long as they could endure it. The length of time that individuals kept their hand in the water bath was measured. Pain, anxiety, mood, and the spiritual health were assessed following the two-week intervention. Significant interactions occurred (time x group); the Spiritual Meditation group had greater decreases in anxiety and more positive mood, spiritual health, and spiritual experiences than the other two groups. They also tolerated pain almost twice as long as the other two groups. [F2](#)

2006

N=19

Cheavens, J. S., Feldman, D. B., Gum, A., Michael, S. T. & Snyder, C. R. (2006). Hope therapy in a community sample: A pilot investigation. Social Indicators Research, 77, 61-78.

We report findings from an initial empirical test of a hope-based, group therapy protocol. In this context, hope is defined as a cognitive process through which

individuals pursue their goals [Snyder, C. R.: 1994, Free Press, New York]. As such, the eight-session group treatment emphasized building goal-pursuit skills. Findings from a randomized, wait-list control trial using a community sample (n = 32 completers) are reported. Participants underwent structured diagnostic interviews (SCID-I) and completed assessment packets. Post-participation assessment results indicate the intervention was associated with statistically significant ($p < 0.05$) improvements in the agency component of hope, life meaning, and self-esteem as well as reductions in symptoms of depression and anxiety. These results suggest that a brief hope intervention can increase some psychological strengths and reduce some symptoms of psychopathology. (PsycINFO Database Record (c) 2010 APA, all rights reserved) [E2](#) [F1](#) [F2](#)

Frieswijk, N., Steverink, N., Buunk, B. P., & Slaets, J. P. J. (2006). The effectiveness of a bibliotherapy in increasing the self-management ability of slightly to moderately frail older people. *Patient Education and Counseling*, 61, 219-227.

OBJECTIVE: Self-management ability (SMA) is the ability to obtain those resources necessary for the production of well-being. With age, SMA becomes increasingly important, if one has a large variety of resources, physical and psychosocial losses due to the aging process can be substituted or compensated for. This study examined whether an increase in SMA would ensure sustainable levels of positive well-being among slightly to moderately frail older people. **METHODS:** A bibliotherapy was developed to increase the SMA of slightly to moderately frail older people, and to help these persons to sustain a certain level of well-being. The effectiveness of this bibliotherapy was examined by comparing the SMA, mastery, and subjective well-being of 97 older people participating in the bibliotherapy to those of 96 older people in a delayed-treatment control condition. **RESULTS:** The bibliotherapy resulted in a significant increase in SMA and mastery compared to the delayed-treatment control condition, and for SMA, this effect still existed 6 months after the intervention. The increase in SMA among older people who received the bibliotherapy prevented a decline in well-being as expected, but only in the short-term. **CONCLUSION:** The current findings show that it is possible to counteract an age-related decline in well-being, even with only slight to moderate levels of frailty. **PRACTICE IMPLICATIONS:** Cheap and easily accessible interventions, like the self-management bibliotherapy described in this article, may provide a useful addition to more traditional gerontological interventions. [F2](#)

Green, L. S., Oades, L. G., & Grant, A. M. (2006). Cognitive-behavioral, solution-focused life coaching: Enhancing goal striving, well-being, and hope. *The Journal of Positive Psychology*, 1, 142-149.

Research is in its infancy in the newly emerging field of coaching psychology. This study examined the effects of a 10-week cognitive-behavioral, solution-focused life coaching group programme. Participants were randomly allocated to a life coaching group programme (n = 28) or a waitlist control group (n = 28). Participation in the life coaching group programme was associated with significant increases in goal striving, well-being and hope, with gains maintained up to 30 weeks later on some variables. Hope theory may explain such positive outcomes. Life coaching programmes that utilize evidence-based techniques may provide a framework for further research on psychological processes that occur in non-clinical populations who wish to make purposeful change and enhance their positive psychological functioning. (PsycINFO Database Record (c) 2010 APA, all rights reserved) [E2](#) [F1](#) [F2](#)

Harris, A. H. S., Luskin, F., Norman, S. B., Standard, S., Bruning, J., Evans, S., Thoresen, C. E. (2006). Effects of a group forgiveness intervention on forgiveness, perceived stress, and trait-anger. *Journal of Clinical Psychology*, 62, 715-733.

The goal of this study was to evaluate the effects of a 6-week forgiveness intervention on three outcomes: (a) offense-specific forgiveness, (b) forgiveness-

likelihood in new situations, and (c) health-related psychosocial variables, such as perceived stress and trait-anger. Participants were 259 adults who had experienced a hurtful interpersonal transgression from which they still felt negative consequences. They were randomized to a forgiveness-training program or a no-treatment control group. The intervention reduced negative thoughts and feelings about the target transgression 2 to 3 times more effectively than the control condition, and it produced significantly greater increases in positive thoughts and feelings toward the transgressor. Significant treatment effects were also found for forgiveness self-efficacy, forgiveness generalized to new situations, perceived stress, and trait-anger. F2

Kraag, G., Zeegers, M.P., Kok, G., Hosman, C., and Abu-Saad, H.H. (2006). School programs targeting stress management in children and adolescents: A meta-analysis. *Journal of School Psychology*, 44(6), 449–472.

Introduction: This meta-analysis evaluates the effect of school programs targeting stress management or coping skills in school children. Methods: Articles were selected through a systematic literature search. Only randomized controlled trials or quasi-experimental studies were included. The standardized mean differences (SMDs) between baseline and final measures were computed for experimental and control groups. Experimental groups were groups that either received an intervention of (a) relaxation training, (b) social problem solving, (c) social adjustment and emotional self-control, or (d) a combination of these interventions. If no baseline measurement was available, SMDs were calculated between final measures of the groups. The overall pooled effect size was calculated and the pooled effect sizes of improvement on stress, coping, (social) behavior, and self-efficacy by random effects meta-analysis. The dependence of the results on study characteristics (i.e. methodological quality and type of intervention) was evaluated using meta-regression analysis. Results: Nineteen publications met the inclusion criteria of controlled trials for class programs, teaching coping skills or stress management. Overall effect size for the programs was -1.51 [95% confidence interval (CI) -2.29, -0.73], indicating a positive effect. However, heterogeneity was significant (p less than 0.001). Sensitivity analyses showed that study quality and type of intervention were sources of heterogeneity influencing the overall result (p values less than 0.001). The heterogeneity in quality may be associated with methodological diversity and differences in outcome assessments, rather than variety in treatment effect. Effect was calculated per intervention type, and positive effects were found for stress symptoms with a pooled effect size of -0.865 (95% CI: -1.229, -0.502) and for coping with a pooled effect size of -3.493 (95% CI: -6.711, -0.275). Conclusion: It is tentatively concluded that school programs targeting stress management or coping skills are effective in reducing stress symptoms and enhancing coping skills. Future research should use clear quality criteria and strive for less diversity in methodology and outcome assessment. N

Kremers, I. P., Steverink, N., Albersnagel, F. A., Slaets, J. P. J. (2006). Improved self-management ability and well-being in older women after a short group intervention. *Aging & Mental Health*, 10, 476-484.

In the present randomized controlled trial (RCT) it was investigated whether single women, 55 years of age and older, improved with regard to self-management ability, well-being, and social and emotional loneliness after having participated in a newly designed self-management group intervention based on the Self-Management of Well-being (SMW) theory. The expected mediating effect of self-management ability on well-being was not found. Although self-management ability, well-being and loneliness improved significantly in the intervention group immediately after the intervention, and also remained at this improved level after six months, there was also improvement in the control group after six months, rendering the longer-term differences between the groups non-significant. It can, however, be concluded that, although the longer-term effectiveness could not be proven, this SMW theory-based intervention seems to be useful in supporting older women to improve their self-management ability

Larun, L., Nordheim, L.V., Ekeland, E., Hagen, K.B., and Heian, F. (2006). Exercise in prevention and treatment of anxiety and depression among children and young people. *Cochrane Database of Systematic Reviews*, 3, Art. No.: CD004691.

BACKGROUND: Depression and anxiety are common psychological disorders for children and adolescents. Psychological (e.g. psychotherapy), psychosocial (e.g. cognitive behavioral therapy) and biological (e.g. SSRIs or tricyclic drugs) treatments are the most common treatments being offered. The large variety of therapeutic interventions give rise to questions of clinical effectiveness and side effects. Physical exercise is inexpensive with few, if any, side effects. **OBJECTIVES:** To assess the effects of exercise interventions in reducing or preventing anxiety or depression in children and young people up to 20 years of age. **SEARCH STRATEGY:** We searched the Cochrane Controlled Trials Register (latest issue available), MEDLINE, EMBASE, CINAHL, PsycINFO, ERIC and Sportdiscus up to August 2005. **SELECTION CRITERIA:** Randomised trials of vigorous exercise interventions for children and young people up to the age of 20, with outcome measures for depression and anxiety. **DATA COLLECTION AND ANALYSIS:** Two authors independently selected trials for inclusion, assessed methodological quality and extracted data. The trials were combined using meta-analysis methods. A narrative synthesis was performed when the reported data did not allow statistical pooling. **MAIN RESULTS:** Sixteen studies with a total of 1191 participants between 11 and 19 years of age were included. Eleven trials compared vigorous exercise versus no intervention in a general population of children. Six studies reporting anxiety scores showed a non-significant trend in favour of the exercise group (standard mean difference (SMD) (random effects model) -0.48, 95% confidence interval (CI) -0.97 to 0.01). Five studies reporting depression scores showed a statistically significant difference in favour of the exercise group (SMD (random effects model) -0.66, 95% CI -1.25 to -0.08). However, all trials were generally of low methodological quality and they were highly heterogeneous with regard to the population, intervention and measurement instruments used. One small trial investigated children in treatment showed no statistically significant difference in depression scores in favour of the control group (SMD (fixed effects model) 0.78, 95% CI -0.47 to 2.04). No studies reported anxiety scores for children in treatment. Five trials comparing vigorous exercise to low intensity exercise show no statistically significant difference in depression and anxiety scores in the general population of children. Three trials reported anxiety scores (SMD (fixed effects model) -0.14, 95% CI -0.41 to 0.13). Two trials reported depression scores (SMD (fixed effects model) -0.15, 95% CI -0.44 to 0.14). Two small trials found no difference in depression scores for children in treatment (SMD (fixed effects model) -0.31, 95% CI -0.78 to 0.16). No studies reported anxiety scores for children in treatment. Four trials comparing exercise with psychosocial interventions showed no statistically significant difference in depression and anxiety scores in the general population of children. Two trials reported anxiety scores (SMD (fixed effects model) -0.13, 95% CI -0.43 to 0.17). Two trials reported depression scores (SMD (fixed effects model) 0.10, 95% CI -0.21 to 0.41). One trial found no difference in depression scores for children in treatment (SMD (fixed effects model) -0.31, 95% CI -0.97 to 0.35). No studies reported anxiety scores for children in treatment. **AUTHORS' CONCLUSIONS:** Whilst there appears to be a small effect in favour of exercise in reducing depression and anxiety scores in the general population of children and adolescents, the small number of studies included and the clinical diversity of participants, interventions and methods of measurement limit the ability to draw conclusions. It makes little difference whether the exercise is of high or low intensity. The effect of exercise for children in treatment for anxiety and depression is unknown as the evidence base is scarce. **N**

Low, C. A., Stanton, A. L., & Danoff-Burg, S. (2006). Expressive disclosure and benefit finding among breast cancer patients: Mechanisms for positive health effects. *Health Psychology*, 25, 181-189.

A randomized trial (n = 60; A. L. Stanton, S. Danoff-Burg, L. A. Sworowski, et al., 2002) revealed that 4 sessions of written expressive disclosure or benefit finding produced lower physical symptom reports and medical appointments for cancer-related morbidities at 3-month follow-up among breast cancer patients relative to a fact-control condition. The goal of this article is to investigate mechanisms underlying these effects. Within-session heart rate habituation mediated effects of expressive disclosure on physical symptoms, and greater use of negative emotion words in essays predicted a decline in physical symptoms. Postwriting mood and use of positive emotion and cognitive mechanism words in essays were not significant mediators, although greater cognitive mechanism word use was related to greater heart rate habituation and negative emotion word use. (PsycINFO Database Record (c) 2009 APA, all rights reserved) [E2](#) [F1](#) [F2](#)

Madrugá, C. M. (2006). Counseling adolescents with cancer: Using positive psychology to enhance coping skills. Dissertation Abstracts International: Section B: The Sciences and Engineering, 66, 5688.

The way a cancer diagnosis is perceived has changed. As advances in modern medicine continue to develop, cancer is often not a fatal disease. Instead, more and more adolescents who are diagnosed with cancer are surviving. This change has led clinicians to find better ways to help these adolescents deal with their illness rather than face a terminal illness. As the likelihood and period of survival increases, understanding the impact of adolescents' experience with cancer and its treatment is increasingly important. The diagnosis of cancer in childhood often disrupts the emerging social development of the school-aged child. For example, the requirements of the treatment can interfere with the ability of the child to attend school or to have normal social interactions. Therefore, the focus of clinicians must turn to increasing the coping skills and resilience of adolescents who are struggling with a very disruptive stressor. Without appropriate interventions, these adolescents are at a greater risk for developing psychological problems. The focus of this study is on adolescents who are living with or have survived cancer. A conceptual analytic approach was taken to apply positive psychology theory to better understand and counsel adolescents who face abundant developmental challenges in coping with cancer at this stage in life. Adolescents are more flexible than adults in changing maladaptive coping style and are able to develop better coping skills. Positive psychology offers a promising theoretical paradigm for both prevention and intervention because it focuses on the strengths of the person. A personal account of K, a 17-year-old female, was utilized to specify the clinical applications outlined in this study. Her coping skills, sense of coherence and signature strengths exemplify how utilizing positive psychology interventions can strengthen adolescents' resilience. Moreover, it help them find meaning and purpose at a time when they often feel out of control and uncertain about their future. The theories used in this conceptual analytic study are meant to suggest a myriad of clinical applications. Hopefully, this study will help health professionals better understand how adolescents cope with this difficult and sometimes life-threatening illness. A consideration of the clinical applications suggested can help them both prevent and better deal with common and individual psychological problems of adolescents living with cancer. (PsycINFO Database Record (c) 2010 APA, all rights reserved) [F1](#)

Otake, K., Shimai, S., Tanaka-Matsumi, J., Otsui, K., & Fredrickson, B. L. (2006). Happy people become happier through kindness: A counting kindnesses intervention. Journal of Happiness Studies, 7, 361-375.

We examined the relationship between the character strength of kindness and subjective happiness (Study 1), and the effects of a counting kindnesses intervention on subjective happiness (Study 2). In Study 1, participants were 175 Japanese undergraduate students and in Study 2, participants were 119 Japanese women (71 in the intervention group and 48 in the control group). Results showed that: (a) Happy people scored higher on their motivation to perform, and their recognition and enactment of kind behaviors. (b) Happy people have more happy memories in daily life in terms of both quantity and quality. (c) Subjective happiness was increased simply by counting one's own

acts of kindness for one week. (d) Happy people became more kind and grateful through the counting kindnesses intervention. Discussion centers on the importance of kindness in producing subjective happiness. (PsycINFO Database Record (c) 2009 APA, all rights reserved) [E2](#) [F1](#) [F2](#)

Reed, G. L., Enright, R. D. (2006). The effects of forgiveness therapy on depression, anxiety, and posttraumatic stress for women after spousal emotional abuse. *Journal of Consulting and Clinical Psychology*, 74, 920-929.

Emotionally abused women experience negative psychological outcomes long after the abusive spousal relationship has ended. This study compares forgiveness therapy (FT) with an alternative treatment (AT; anger validation, assertiveness, interpersonal skill building) for emotionally abused women who had been permanently separated for 2 or more years ($M = 5.00$ years, $SD = 2.61$; $n = 10$ per group). Participants, who were matched, yoked, and randomized to treatment group, met individually with the intervener. Mean intervention time was 7.95 months ($SD = 2.61$). The relative efficacy of FT and AT was assessed at $p < .05$. Participants in FT experienced significantly greater improvement than AT participants in depression, trait anxiety, posttraumatic stress symptoms, self-esteem, forgiveness, environmental mastery, and finding meaning in suffering, with gains maintained at follow-up ($M = 8.35$ months, $SD = 1.53$). FT has implications for the long-term recovery of postrelationship emotionally abused women. (PsycINFO Database Record (c) 2009 APA, all rights reserved) [E2](#) [F1](#) [F2](#)

Ruini, C., Belaise, C., Brombin, C., Caffo, E., & Fava, G. A. (2006). Well-Being Therapy in School Settings: A Pilot Study. *Psychotherapy and Psychosomatics*, 75, 331-336.

BACKGROUND: There is increasing interest in the psychobiological mechanisms of resilience and psychological well-being. It is conceivable that activation of such mechanisms in the school setting may entail long-term benefits, both in terms of the developmental process and of prevention of distress. This study wants to apply and test the efficacy of a school-based intervention protocol derived from well-being therapy (WBT) compared to cognitive-behavioral strategies. **METHODS:** School interventions were performed in a population of 111 students randomly assigned to: (a) a protocol using theories and techniques derived from cognitive-behavioral therapy; (b) a protocol derived from WBT. Assessment before and after interventions was performed using two self-rating scales: Kellner's Symptom Questionnaire and Ryff's Psychological Well-Being Scales. **RESULTS:** Both school-based interventions resulted in a comparable improvement in symptoms and psychological well-being. **CONCLUSIONS:** This new well-being-enhancing strategy could play an important role in the prevention of psychological distress in school settings and in promoting optimal human functioning among children. (PsycINFO Database Record (c) 2009 APA, all rights reserved) [E2](#) [F1](#) [F2](#)

Seligman, M.E.P. (2006). *Learned Optimism: How to Change Your Mind and Your Life*. 2nd Edition. New York: Vintage. [N](#)

Seligman, M. E. P., Rashid, T., & Parks, A. C. (2006). Positive psychotherapy. *American Psychologist*, 61, 774-788.

Positive psychotherapy (PPT) contrasts with standard interventions for depression by increasing positive emotion, engagement, and meaning rather than directly targeting depressive symptoms. The authors have tested the effects of these interventions in a variety of settings. In informal student and clinical settings, people not uncommonly reported them to be "life-changing." Delivered on the Web, positive psychology exercises relieved depressive symptoms for at least 6 months compared with placebo interventions, the effects of which lasted less than a week. In severe depression, the effects of these Web exercises were particularly striking. This address reports two preliminary studies: In the first, PPT delivered to groups significantly decreased levels of mild-to-moderate depression through 1-year follow-up. In the second, PPT delivered to individuals produced

higher remission rates than did treatment as usual and treatment as usual plus medication among outpatients with major depressive disorder. Together, these studies suggest that treatments for depression may usefully be supplemented by exercises that explicitly increase positive emotion, engagement, and meaning. ((c) 2006 APA, all rights reserved). E1 E2 F1 F2

Sheldon, K. M. & Lyubomirsky, S. (2006). How to increase and sustain positive emotion: The effects of expressing gratitude and visualizing best possible selves. *The Journal of Positive Psychology*, 1, 73-82.

A 4-week experimental study (N = 67) examined the motivational predictors and positive emotion outcomes of regularly practicing two mental exercises: counting one's blessings ("gratitude") and visualizing best possible selves ("BPS"). In a control exercise, participants attended to the details of their day. Undergraduates performed one of the three exercises during Session I and were asked to continue performing it at home until Session II (in 2 weeks) and again until Session III (in a further 2 weeks). Following previous theory and research, the practices of gratitude and BPS were expected to boost immediate positive affect, relative to the control condition. In addition, we hypothesized that continuing effortful performance of these exercises would be necessary to maintain the boosts (Lyubomirsky, S., Sheldon, K. M., & Schkade, D. (2005a). Pursuing happiness: The architecture of sustainable change. *Review of General Psychology*, 9, 111-131). Finally, initial self-concordant motivation to perform the exercise was expected to predict actual performance and to moderate the effects of performance on increased mood. Results generally supported these hypotheses, and suggested that the BPS exercise may be most beneficial for raising and maintaining positive mood. Implications of the results for understanding the critical factors involved in increasing and sustaining positive affect are discussed. E2 F1 F2

Tkach, C. T. (2006). Unlocking the treasury of human kindness: Enduring improvements in mood, happiness, and self-evaluations. *Dissertation Abstracts International: Section B: The Sciences and Engineering*, 67(1-B), 603.

This dissertation used an experimental design to test the hypothesis that lasting improvements in happiness and well-being can be achieved by performing acts of kindness for an extended period. Kind acts included such activities as helping a fellow student study, giving a homeless person spare change, and cleaning the apartment for a roommate who is studying for an exam. Participants in the treatment conditions were asked to perform acts of kindness with varying levels of 'frequency' and 'variety.' Participants in the control conditions, by contrast, were asked simply to record daily events that occurred to them with varying levels of frequency. Specifically, the study used a 2 (Frequency: High vs. Low) X 4 (Variety: High, Low, Free to Vary, vs. Absent [control]) factorial design. A battery of well-being indicators were used as outcome variables---specifically, subjective happiness, affect, life satisfaction, subjective well-being, stress, self-evaluations, self-acceptance, relations with others, and friends' social support. Outcomes were assessed at four time points---pre-intervention (Week 1), mid-intervention (Week 5), post-intervention (Week 10), and 1-month follow-up (Week 14). Additionally, participants (N = 287) reported on their recent life events (control condition) or on the kind acts that they performed (treatment condition) on a weekly basis using an online 'web diary.' Results tentatively suggest that kindness can lead to boosts in well-being, providing that the conditions are optimal. Specifically, individuals who systematically performed different acts of kindness for a period of 10 weeks reported slightly higher levels of self-acceptance, self-evaluations, happiness, and subjective well-being, and lower levels of stress and negative affect, than individuals who did not perform acts of kindness. Additionally, the study's findings revealed that the amount of gratitude expressed by those who have been helped may be an important operative mechanism underlying the reported boosts in well-being (i.e., the 'kindness effect'). Finally, the kindness effect may work best for individuals who are low in dispositional empathy. Also discussed are caveats concerning the conclusions of

the study, limitations with regard to the sample population, future research directions, and theoretical and implications. [E2](#) [F1](#) [F2](#)

Vázquez, C., Hervás, G., & Ho, S. M. Y. (2006). Clinical interventions based on Positive Psychology: Fundamentals and applications. *Psicología Conductual Revista Internacional de Psicología Clínica de la Salud*, 14, 401-432.

Clinical interventions based on positive psychology are increasingly the subject of scientific literature. In this review we argue that, both for theoretical and practical reasons, it is necessary to take into account negative and positive aspects of human functioning for a better understanding of clinical issues. Three relevant and complementary models of psychological well-being are discussed in regard to their direct implications for psychotherapy interventions: Seligman's model of the three ways to happiness (Seligman, 2002), Ryff's multidimensional model of psychological well-being (Ryff, 1995) and Deci and Ryan's motivational model of well-being (Deci and Ryan, 2000). Positive interventions in the clinical arena should be strongly guided by empirical data derived from the existing abundant research on happiness and psychological well-being. Furthermore, promising new interventions and programs to enhance people's well-being, some of which are described in this review, should be tested with the most stringent designs (namely, randomized clinical trials) in order to prove their efficacy. Finally, we discuss the implications of positive interventions to tackle important clinical problems (e.g., relapses and recurrences) and present some challenges that future research in this emerging field needs to address. (PsycINFO Database Record (c) 2010 APA, all rights reserved) [F1](#)

Wing, J. F., Schutte, N. S., Byrne, B. (2006). The Effect of Positive Writing on Emotional Intelligence and Life Satisfaction. *Journal of Clinical Psychology*, 62, 1291-1302.

This study explored the effect of writing about positive emotional experiences on emotional intelligence and life satisfaction. One hundred and seventy-five adults wrote about one of the following three topics: positive experiences with a cue for emotion regulation reflection, positive experiences without this cue, or a control writing topic. Multivariate analysis showed a significant time (pretest, posttest, and follow-up) by group effect. Writing about positive emotional experiences with an emotion regulation cue led to significant increases in emotional intelligence and life satisfaction at posttest and the increase in life satisfaction was maintained at 2-week follow-up. Further, participants who were cued to reflect on emotional regulation while writing about positive experiences rated their emotional intelligence significantly higher than the participants in the control writing group both at posttest and at follow-up. There were no significant differences in emotional intelligence or life satisfaction between those who were cued to reflect on emotional regulation while writing about positive experiences and those who wrote about positive experiences without such a cue. (PsycINFO Database Record (c) 2009 APA, all rights reserved) [E2](#) [F1](#) [F2](#)

Wong, Y. J. (2006). Strength-Centered Therapy: A social constructionist, virtues-based psychotherapy. *Psychotherapy: Theory, Research, Practice, Training*, 43, 133-146.

This article describes Strength-Centered Therapy, a new therapeutic model based on the positive psychology of character strengths and virtues as well as social constructionist perspectives on psychotherapy. The contributions of the positive psychology of character strengths and social constructionist conceptualizations of psychotherapy are examined. In addition, the theoretical assumptions, applications, and limitations of Strength-Centered Therapy are discussed. It is argued that Strength-Centered Therapy might contribute to the revival of character strengths and virtues in psychotherapy. [E1](#) [F1](#)

Biswas-Diener, R., & Dean, B. (2007). Positive psychology coaching: Putting the science of happiness to work for your clients. Hoboken, NJ: Wiley. N

Goldstein, E. D. (2007). Sacred moments: Implications on well-being and stress. Journal of Clinical Psychology, 63, 1001-1019.

This research provides a theoretical, empirical, and qualitative examination of the role of cultivating sacred moments in daily life on subjective well-being (SWB), psychological well-being (PWB), and stress. Seventy-three participants were randomly assigned to two groups: (a) a 3-week intervention group where members were instructed in cultivating sacred moments, or (b) a 3-week control group where members were instructed in writing about daily activities. Findings indicate that the intervention was equally as effective as an adapted therapeutic writing intervention. There were significant effects over time across multiple assessments related to SWB, PWB, stress, and daily spiritual experiences after the 3-week intervention and again 6 weeks later. Qualitative analysis complemented and enriched the findings of these results. This study introduces a new intervention into the field of clinical psychology and extends the findings of prior research. (PsycINFO Database Record (c) 2009 APA, all rights reserved)

E2 F1 F2

Grossman, P., Tiefenthaler-Gilmer, U., Raysz, A., & Kesper, U. (2007). Mindfulness training as an intervention for fibromyalgia: Evidence of post-intervention and 3-year follow-up benefits in well-being. Psychotherapy and Psychosomatics, 76, 226-233.

BACKGROUND: Mindfulness-based stress reduction (MBSR) proposes a systematic program for reduction of suffering associated with a wide range of medical conditions. Studies suggest improvements in general aspects of well-being, including quality of life (QoL), coping and positive affect, as well as decreased anxiety and depression. METHODS: A quasi-experimental study examined effects of an 8-week MBSR intervention among 58 female patients with fibromyalgia (mean, 52 +/- 8 years) who underwent MBSR or an active social support procedure. Participants were assigned to groups by date of entry, and 6 subjects dropped out during the study. Self-report measures were validated German inventories and included the following scales: visual analog pain, pain perception, coping with pain, a symptom checklist and QoL. Pre- and postintervention measurements were made. Additionally, a 3-year follow-up was carried out on a subgroup of 26 participants. RESULTS: Pre- to postintervention analyses indicated MBSR to provide significantly greater benefits than the control intervention on most dimensions, including visual analog pain, QoL subscales, coping with pain, anxiety, depression and somatic complaints (Cohen d effect size, 0.40-1.10). Three-year follow-up analyses of MBSR participants indicated sustained benefits for these same measures (effect size, 0.50-0.65). CONCLUSIONS: Based upon a quasi-randomized trial and long-term observational follow-up, results indicate mindfulness intervention to be of potential long-term benefit for female fibromyalgia patients. (PsycINFO Database Record (c) 2009 APA, all rights reserved)

E2 F1 F2

Jiang, X. H. & Shen, H. Y. (2007). Positive psychology in psychological assessment and intervention. Chinese Journal of Clinical Psychology, 15, 99-101.

Positive psychology sprung up in American in the end of last century. As a field concerning well-being and optimal functioning, positive psychology is the scientific study of positive experiences, positive individual traits and the institutions that facilitate their development. Positive psychology might be helpful to broaden the view of clinical psychology beyond suffering and its direct alleviation. The opinions of positive psychology in conceptual organization, assessment and positive interventions of well-being were introduced in the article. (PsycINFO Database Record (c) 2010 APA, all rights reserved)

F1

Spence, G. B. & Grant, A. M. (2007). Professional and peer life coaching and the enhancement of goal striving and well-being: An exploratory study. The Journal of Positive Psychology, 2, 185-194.

Few studies have investigated the impact of life coaching on self-regulated behavior and well-being. A limitation of past studies has been their reliance on peer rather than professional coaches. The present randomized controlled study compared peer with professional life coaching over a 10-week period with 63 participants. Results indicated that, compared to peer coaches and controls, coaches of professional coaches were more engaged in the coaching process, had greater goal commitment and progression, and greater well-being in terms of environmental mastery; other facets of well-being did not change. The results suggest that the presence of a supportive person may be a necessary but insufficient condition for enhancing goal striving and highlight the importance of expertise in coaching. Recommendations are made for future research and for using life coaching as a methodology for applied positive psychology. (PsycINFO Database Record (c) 2010 APA, all rights reserved) [E2](#) [F1](#) [F2](#)

Updegraff, J. A., & Suh, E. M. (2007). Happiness is a warm abstract thought: Self-construal abstractness and subjective well-being. *Journal of Positive Psychology*, 2, 18-28.

Research investigating the relationship between self-construals and subjective well-being has traditionally focused on understanding how dimensions such as positivity-negativity and internality-externality relate to well-being. This paper presents two studies that investigate how a potentially important yet unexamined dimension, the abstractness versus concreteness of people's self-construals, is related to life satisfaction. Study 1 showed that happier people tend to think about themselves with higher level of abstraction than less happy people, even after controlling for the overall valence and internality of their construals. Study 2 found that people randomly assigned to think about themselves in abstract rather than concrete terms reported greater pre- to post-manipulation increases in reports of life satisfaction. Implications of these findings for understanding individual differences in well-being are discussed, and directions for future research are presented. [F2](#)

2008

N=11

Britton, K. (2008). Increasing job satisfaction: Coaching with evidence-based interventions. *Coaching: An International Journal of Theory, Research and Practice*, 1, 176-185.

Positive psychology offers a number of tools that coaches can use with groups and individuals to raise job satisfaction and engagement. This article describes ways to apply five empirically validated positive interventions: searching for the positive core; intentionally increasing positive emotion; establishing conditions for flow; handling negatives more resiliently; and celebrating positives more effectively. Explanation of each intervention includes its theoretical background, practical ways to adapt it to specific workplace settings, and illustrations from real experience.

(PsycINFO Database Record (c) 2010 APA, all rights reserved) [F1](#)

Fredrickson, B. L., Cohn, M. A., Coffey, K. A., Pek, J., & Finkel, S. M. (2008). Open hearts build lives: Positive emotions, induced through loving-kindness meditation, build consequential personal resources. *Journal of Personality and Social Psychology*, 95, 1045–1062

B. L. Fredrickson's (1998, 2001) broaden-and-build theory of positive emotions asserts that people's daily experiences of positive emotions compound over time to build a variety of consequential personal resources. The authors tested this build hypothesis in a field experiment with working adults (n = 139), half of whom were randomly-assigned to begin a practice of loving-kindness meditation. Results showed that this meditation practice produced increases over time in daily experiences of positive emotions, which, in turn, produced increases in a wide range of personal resources (e.g., increased mindfulness, purpose in life, social support, decreased illness symptoms). In turn, these increments in personal resources predicted increased life satisfaction and reduced depressive

symptoms. Discussion centers on how positive emotions are the mechanism of change for the type of mind-training practice studied here and how loving-kindness meditation is an intervention strategy that produces positive emotions in a way that outpaces the hedonic treadmill effect. (c) 2008 APA, all rights reserved. [N](#)

Froh, J. J., Sefick, W. J., & Emmons, R. A. (2008). Counting blessings in early adolescents: An experimental study of gratitude and subjective well-being. *Journal of School Psychology, 46*, 213-233.

The development and manifestation of gratitude in youth is unclear. We examined the effects of a grateful outlook on subjective well-being and other outcomes of positive psychological functioning in 221 early adolescents. Eleven classes were randomly assigned to either a gratitude, hassles, or control condition. Results indicated that counting blessings was associated with enhanced self-reported gratitude, optimism, life satisfaction, and decreased negative affect. Feeling grateful in response to aid mediated the relationship between experimental condition and general gratitude at the 3-week follow-up. The most significant finding was the robust relationship between gratitude and satisfaction with school experience at both the immediate post-test and 3-week follow-up. Counting blessings seems to be an effective intervention for well-being enhancement in early adolescents. (PsycINFO Database Record (c) 2009 APA, all rights reserved) [E2](#) [F1](#) [F2](#)

Lyubomirsky, S., Dickerhoof, R., Boehm, J. K., & Sheldon, K. M. (2008). How and why do positive activities work to boost well-being?: Two experimental longitudinal investigations of regularly practicing optimism and gratitude. Manuscript under review. (cannot access this paper for it but seems relevant) [N](#)

MacLeod, A. K., Coates, E., & Hetherington, J. (2008). Increasing well-being through teaching goal-setting and planning skills: Results of a brief intervention. *Journal of Happiness Studies, 9*, 185-196.

Many factors are known to be associated with psychological well-being. However, it is much less clear whether those factors actually cause well-being and, hence, whether there is any practical value in trying to manipulate those factors to increase well-being. The proposed study addresses both the theoretical and practical issues by testing the effectiveness of an empirically-derived, brief psychological intervention to increase well-being in a non-clinical, unselected sample. The intervention focused on developing goal setting and planning (GAP) skills, which are known to be linked to well-being, potentially have widespread effects, and are amenable to intervention. Within a quasi-experimental design, participants received three, 1-h, group sessions (Study 1) or completed the programme individually in their own time (Study 2). Those taking part in the intervention, both individually and in a group, showed significant increases in subjective well-being, compared to their respective control groups not receiving the intervention. The results provide preliminary support for the view that (a) goal setting and planning skills have a causal link to subjective well-being and (b) that such skills can be learned to enhance well-being. (PsycINFO Database Record (c) 2009 APA, all rights reserved) [E2](#) [F1](#) [F2](#)

Mallen Ozimkowski, K. (2008). The gratitude visit in children and adolescents: An investigation of gratitude and subjective well-being. *Dissertation Abstracts International: Section B: The Sciences and Engineering, 69*, 686.

Research suggests that expressing gratitude can improve subjective well-being and mitigate symptoms of depression among the adult population. However, the benefits of expressing gratitude remain understudied in child and adolescent populations. Therefore, extending the work of Froh, Sefick, and Emmons (2007), this study attempted to determine if the participation in an intervention called the 'gratitude visit' (Seligman, Steen, Park & Peterson, 2005) could enhance subjective well-being, state gratitude and decrease depression symptomology in children and adolescents. The second objective of this study was to determine if

religious commitment, extraversion or gender moderate the relationship between the gratitude visit and reports of happiness. The overall N of this study was 89. Three groups of participants (3rd grade 8th grade and 12 th grade) were randomly assigned to either the gratitude visit condition or a control condition. The measures used in this study consisted of the following: Positive and Negative Affect Scale for Children (PANAS-C; Laurent, Catanzaro, Joiner, Rudolph & Potter, 1999), the Brief Multidimensional Life Satisfaction Scale (BMLSS; Seligson, Huebner & Valois, 2003), the Center for Epidemiological Studies Depression Scale for Children (CES-DC; Wiessman, Orvaschel & Padian, 1980), the Gratitude Adjective Checklist (GAC; Emmons & McCullough, 2003), and either the Children's Personality Questionnaire (CPQ; Porter & Cattell, 1985) or the High School Personality Questionnaire (HSPQ; Cattell et al., 1984) for children and adolescents, respectively. Results indicated that conducting a gratitude visit was not associated with increases in overall happiness or state gratitude, or decreases in depression symptomology. However, students in the gratitude visit condition reported significant increases in life satisfaction at 4 weeks post. Religious commitment, extraversion and sex did not serve as moderators. The findings from this study add to the existing literature on gratitude and subjective well-being in children and adolescents. These findings suggest that the gratitude visit may be an effective intervention for the enhancement of life satisfaction in children and adolescents. Finally, the present research is consistent with Seligman et als., (2005) research which suggests that rather than being delivered to children and adolescents in isolation, perhaps the gratitude visit may be best delivered in a package of positive psychology interventions or as a supplement to psychotherapeutic intervention. F1

Rashid, T., & Anjum, A. (2008). Positive psychotherapy for young adults and children. In J.R.Z. Abela & B.L. Hankin (Eds), Handbook of depression in children and adolescents (pp. 250–287). New York, NY: Guilford Press. E2 F1 F2

Richards, A., Rivers, I., & Akhurst, J. (2008). A positive psychology approach to tackling bullying in secondary schools: A comparative evaluation. Educational and Child Psychology, 25, 72-81.

Anti-bullying interventions in schools favour approaches that practically tackle the problems in the classroom as well as the playground. However, the effectiveness of curriculum-based interventions is often context specific. A Positive Psychology (PP) approach to tackle bullying focuses upon the individual strengths of pupils rather than behaviours. It foregrounds the greater involvement of pupils in problem-solving the issue of bullying, and promotes development of personal qualities that are valued both socially and individually. In this study, a positive psychology intervention programme was designed for implementation in a school's year seven Personal, Social & Health Education (PSHE) lessons, with a control group recruited from another school. The effectiveness of the programme was measured both pre- and post-intervention using self-report questionnaires which included items on bullying behaviour, general well-being and mental health. Results indicated that, among those pupils who experienced the PP intervention programme, levels of bullying reduced and they scored marginally better in terms of general well-being but not mental health. Further developments in the programme are underway. (PsycINFO Database Record (c) 2010 APA, all rights reserved) F1

Spinks, D. W. (2008). A solution focused family checkup as a positive intervention in family therapy. Dissertation Abstracts International: Section B: The Sciences and Engineering, 68, 4847.

This study seeks to examine the efficacy of a two-session family checkup, using a Solution Focused approach as a positive intervention for interrupting family dysfunction that is both ecologically and psychologically acceptable to families in distress, who otherwise might not seek family therapy. Families and marriages currently suffering distress are often unable to afford professional services due to ecological issues such as transportation, child care, time commitment to therapy, and previous negative therapeutic experiences. Additionally many persons are averse to seeking counseling or therapy due to the psychological stigmatization

of having to attend to professional guidance and/or assistance. Using a convenience sample of varied family make-ups, participants completed the Family Assessment Measure III, the Marital Satisfaction Inventory-Revised, and the Depression Anxiety Stress Scale at a time one and time two intervals, approximately 30 days apart, where the instruments are designed to measure family functioning fulfillment, marital satisfaction, and mood. Data was analyzed using Chi-Square's, Independent t-tests, and ANOVA'S to look for relationships among the variables as well as differences in time one and time two measurements. The results suggested that a Solution Focused Family Checkup is effective in helping families make desired changes in areas of tasks and functions that maintain efficacy at a 30 day follow-up interval, and that some significant changes may occur in the marital dyadic relationship as well. The results also suggested that the more symptomatic the family the more likely they were to not seek therapy due to the symptomatic behaviors and the psychological stigma's associated with seeking professional assistance. Ecological issues related to seeking therapy did not rate statistical significance. However, in all cases the briefer the therapy and the affordability of assistance were the most important choices in ecological information. F1

Tan, A. G., Ho, V., Ho, E., Ow, S. (2008). High school students' perceived creativity self-efficacy and emotions in a service learning context. *The International Journal of Creativity & Problem Solving*, 18, 115-126.

Our study examined the relationship of creativity self-efficacy and emotions of high school students (n = 279) in Singapore before and after they attended a three to five-day international service learning program. Participants completed a creativity self efficacy scale, the Positive Affect and Negative Affect Scale (PANAS), Satisfaction With Life Scale (SWLS) and Subjective Happiness Scale (SHS). We found a positive, significant correlation between creativity efficacy and positive affect, life satisfaction and subjective happiness but negative correlation with negative mood affect. In addition, students whose creativity efficacy was moderately high were found to have reported higher ratings of life satisfaction after having participated in service learning. Our findings provide initial evidence suggesting that service learning with positive intervention is positively related to creativity self-efficacy and happiness of youth. (PsycINFO Database Record (c) 2010 APA, all rights reserved) F1

Zautra, A. J., Davis, M. C., Reich, J. W., Nicassario, P., Tennen, H., Finan, P., Kratz, A., Parrish, B., & Irwin, M. R. (2008). Comparison of cognitive behavioral and mindfulness meditation interventions on adaptation to rheumatoid arthritis for patients with and without history of recurrent depression. *Journal of Consulting and Clinical Psychology*, 76, 408-421.

This research examined whether cognitive behavioral therapy and mindfulness interventions that target responses to chronic stress, pain, and depression reduce pain and improve the quality of everyday life for adults with rheumatoid arthritis (RA). The 144 RA participants were clustered into groups of 6-10 participants and randomly assigned to 1 of 3 treatments: cognitive behavioral therapy for pain (P); mindfulness meditation and emotion regulation therapy (M); or education-only group (E), which served as an attention placebo control. The authors took a multimethod approach, employing daily diaries and laboratory assessment of pain and mitogen-stimulated levels of interleukin-6 (IL-6), a proinflammatory cytokine. Participants receiving P showed the greatest Pre to Post improvement in self-reported pain control and reductions in the IL-6; both P and M groups showed more improvement in coping efficacy than did the E group. The relative value of the treatments varied as a function of depression history. RA patients with recurrent depression benefited most from M across several measures, including negative and positive affect and physicians' ratings of joint tenderness, indicating that the emotion regulation aspects of that treatment were most beneficial to those with chronic depressive features. (PsycINFO Database Record (c) 2009 APA, all rights reserved) E2 F1 F2

N=24

Abbott, J., Klein, B., Hamilton, C., & Rosenthal, A. (2009). The impact of online resilience training for sales managers on wellbeing and work performance. *Electronic Journal of Applied Psychology, 5(1), 89-95.*

In a randomised controlled trial, the internet-based ResilienceOnline (ROL) program was evaluated among lubricant sales managers at BP Australia. This program is designed to enhance resilience by teaching seven skills to help improve ability to cope with challenges and setbacks and maximise potential achievements. Sales managers were allocated to complete the ROL program (n = 26) or to be in a waitlist-control condition (n = 27) and were compared on pre- and post-intervention measures of happiness, quality of life, depression, anxiety, stress and work performance. Sales managers found the resilience training very enjoyable and believed it would improve their work performance and life skills. However, a high proportion of sales managers did not complete the ROL program and it was not found to significantly reduce distress or improve quality of life or work performance. [N](#)

Barnhofer, T., Crane, C., Hargus, E., Amarasinghe, M., Winder, R., & Williams, J. M. G. (2009). Mindfulness-Based cognitive therapy as a treatment for chronic depression: A preliminary study. *Behaviour Research and Therapy, 47(5), 366-373.*

This pilot study investigated the effectiveness of Mindfulness-Based Cognitive Therapy (MBCT), a treatment combining mindfulness meditation and interventions taken from cognitive therapy, in patients suffering from chronic-recurrent depression. Currently symptomatic patients with at least three previous episodes of depression and a history of suicidal ideation were randomly allocated to receive either MBCT delivered in addition to treatment-as-usual (TAU; N=14 completers) or TAU alone (N=14 completers). Depressive symptoms and diagnostic status were assessed before and after treatment phase. Self-reported symptoms of depression decreased from severe to mild levels in the MBCT group while there was no significant change in the TAU group. Similarly, numbers of patients meeting full criteria for depression decreased significantly more in the MBCT group than in the TAU group. Results are consistent with previous uncontrolled studies. Although based on a small sample and, therefore, limited in their generalizability, they provide further preliminary evidence that MBCT can be used to successfully reduce current symptoms in patients suffering from a protracted course of the disorder. [N](#)

Barclay, L. J., & Skarlicki, D. P. (2009). Healing the Wounds of Organizational Injustice: Examining the Benefits of Expressive Writing. *Journal of Applied Psychology, 94(2), 511-523.*

Clinical and health psychology research has shown that expressive writing interventions-expressing one's experience through writing-can have physical and psychological benefits for individuals dealing with traumatic experiences. In the present study, the authors examined whether these benefits generalize to experiences of workplace injustice. Participants (N = 100) were randomly assigned to write on 4 consecutive days about (a) their emotions, (b) their thoughts, (c) both their emotions and their thoughts surrounding an injustice, or (d) a trivial topic (control). Post-intervention, participants in the emotions and thoughts condition reported higher psychological well-being, fewer intentions to retaliate, and higher levels of personal resolution than did participants in the other conditions. Participants in the emotions and thoughts condition also reported less anger than did participants who wrote only about their emotions.(c) 2009 APA, all rights reserved. [F2](#)

Biswas-Diener, R. (2009). Personal coaching as a positive intervention. *Journal of Clinical Psychology, 65, 544-553.*

Personal coaching is a relatively new and unlicensed profession aimed at helping functioning individuals set and achieve goals, overcome obstacles, and maintain

motivation. Coaching is increasingly merging with psychology as evidenced by new journals, academic programs, and research symposia. Although coaching has traditionally been used with non-clinical populations, it can be highly relevant to psychotherapy. Clinicians who develop a hybrid psychotherapy-coaching practice might be better protected from occupational stress and burnout. In addition, a number of coaching interventions and assessments might translate well to therapy and help clinicians innovate their practice. The synergy between personal coaching and psychotherapy are illustrated with a case example. (PsycINFO Database Record (c) 2010 APA, all rights reserved) [F1](#)

Boehm, J. K., & Lyubomirsky, S. (2009). The promise of sustainable happiness. In S. J. Lopez (Ed.), Oxford handbook of positive psychology (2nd ed., pp. 667-677). New York: Oxford University Press. (<http://www.faculty.ucr.edu/~sonja/papers/BLinpressa.pdf>) (other chapters may also be relevant but could not access) [N](#)

Della Porta, M. D., Sin, N., & Lyubomirsky, S. (2009). Searching for the placebo effect in happiness-enhancing interventions: An experimental longitudinal study with depressed and nondepressed participants. Poster presented at the Annual Meeting of the Society for Personality and Social Psychology, Tampa, FL. (see poster here: http://nancysin.net/pubs/posters/dellaporta_sin_lyubomirsky_2009_spsp.pdf) [N](#)

Fazio, R. J. (2009). Growth consulting: Practical methods of facilitating growth through loss and adversity. *Journal of Clinical Psychology*, 65, 532-543.

The way that people lead themselves and others through crisis, loss, and adversity impacts their future and the future of those around them. Traditionally, mental health professionals have emphasized the negative consequences of crisis and loss. I present a story of how the simple act of holding the door for others on September 11th created a foundation for positive interventions. I offer the OTHERS(S) model and the process of growth consulting as practical means of creating growth as a result of loss or adversity. A case illustration and examples of clinical methods to facilitate Growth Through Loss and Adversity (GTLA) are provided. [F1](#)

Fredrickson, B. L. (2009). Positivity: Groundbreaking research reveals how to embrace the hidden strength of positive emotions, overcome negativity, and thrive New York. Crown Publishing Group (may be relevant. Could not access though) [N](#)

Malinowski, P. (2009). Mental Balance and Well-being: The role of meditation and mindfulness. 1st World Congress on Positive Psychology, IPPA, 18-21 June 2009, Philadelphia.

Meditation practice and the development of mindfulness have become an intensively researched area and first theoretical appraisals linking western psychological theories and ancient buddhist perspectives on mental balance and well-being have been proposed. These accounts suggest that a harmonic and balanced interplay of intention/motivation, attention, cognition and affect promotes well-being. Our own research focuses on investigating how meditation and mindfulness practice influence these aforementioned four components and thus contributes to psychological (and also physiological) well-being. In a series of studies we (and others) have so far provided evidence for a relation between meditation/mindfulness practice and (a) several attentional functions, (b) perceived stress and (c) well-being. This poster will present evidence from several cross-sectional, correlational studies confirming moderately strong correlations between several of these variables and supporting the assumption that attentional and emotional factors are linked to mindfulness and well-being. The results from our studies as well as several others in this field generally are in line with the assumption that meditation practice and the improvement of mindfulness skills are conducive to mental balance and well-being. However, there is still a long way to go until principles and underlying mechanisms are clearly identified and confirmed. [N](#)

Ramachandra, P., Booth, S., Pieters, T., Kalliopi, V. & Huppert, F.A. (2009) A brief self-administered psychological intervention to improve well-being in patients with cancer: Results from a feasibility study. *Psycho-Oncology*, 18, 1323-1326.

Background: Patients with cancer have relatively high rates of anxiety and distress, adversely affecting their well-being and quality of life. Recent studies indicate that addressing these symptoms could result in better response to cancer treatment. Researchers have found that interventions that focus on increasing mental awareness and the frequency of positive experiences may have a greater impact on reducing psychological morbidity and increasing quality of life than interventions that target relief of psychological symptoms. Aim: To develop and test a brief, easy to use intervention that could improve well-being and quality of life in cancer patients. Methods: We developed a simple well-being intervention that made few demands on patient time and required little training resource. Participants were randomly assigned to an intervention group or a deferred entry group. Measures of anxiety, depression, well-being and quality of life were administered at baseline and at follow-ups. Results: Twenty-two women with metastatic breast cancer and 24 men with metastatic prostate cancer were recruited from oncology clinics. Thirteen women and 14 men completed the study. Both qualitative and quantitative data showed that the intervention was acceptable to users. There was statistically significant improvement in quality of life scores on WHOQOL-BREF post-intervention ($p=0.046$). Compliance with the intervention was good. Conclusions: This brief well-being intervention appears to be a promising technique for improving quality of life of cancer patients, without making undue demands on staff resources or patient time. If further studies confirm its effectiveness, it could prove to be a cost-effective intervention. [N](#)

Johnson, D.P., Penn, D.L., Fredrickson, B.L., Kring, A.M., Meyer, P.S., Brantley, M. (2009). Loving-kindness meditation to enhance recovery from negative symptoms of schizophrenia. *Journal of Clinical Psychology*. 65 (5), 499–509.

In this article, we describe the clinical applicability of loving-kindness meditation (LKM) to individuals suffering from schizophrenia-spectrum disorders with persistent negative symptoms. LKM may have potential for reducing negative symptoms such as anhedonia, avolition, and asociality while enhancing factors consistent with psychological recovery such as hope and purpose in life. Case studies will illustrate how to conduct this group treatment with clients with negative symptoms, the potential benefits to the client, and difficulties that may arise. Although LKM requires further empirical support, it promises to be an important intervention since there are few treatments for clients afflicted with negative symptoms. [N](#)

Kauffman, C. & Silberman, J. (2009). Finding and fostering the positive in relationships: Positive interventions in couples therapy. *Journal of Clinical Psychology*, 65, 520-531.

Research of positive psychology interventions (PPIs) has expanded dramatically in recent years, and many novel PPIs may be useful in couples therapy. The present work identifies, summarizes, and suggests adaptations of PPIs that may improve couples therapy outcomes. Each intervention is presented as part of a larger organizational framework that may help couples therapists determine how and when each intervention can be effectively applied. Finally, a case illustration demonstrates how these methods can complement traditional therapeutic approaches. (PsycINFO Database Record (c) 2010 APA, all rights reserved) [F1](#)

Lyubomirsky, S., Dickerhoof, R., Boehm, J. K., & Sheldon, K. M. (2009). Becoming happier takes both a will and a proper way: Two experimental longitudinal interventions to boost well-being. *Manuscript under review.*

An 8-month-long experimental study examined the immediate and longer term effects of regularly practicing two assigned positive activities (expressing optimism and gratitude) on well-being. More important, this intervention allowed us to explore the impact of two meta-factors that are likely to influence the success of any positive activity: whether one self-selects into the study knowing that it is about increasing happiness and whether one invests effort into the

activity over time. Our results indicate that initial self-selection makes a difference, but only in the two positive activity conditions, not the control, and that continued effort also makes a difference, but, again, only in the treatment conditions. We conclude that happiness interventions are more than just placebos, but that they are most successful when participants know about, endorse, and commit to the intervention. N

Magyar-Moe, J. (2009) Therapist's Guide to Positive Psychological Interventions. Academic Press: USA.

Positive psychology - essentially the scientific study of the strengths that enable individuals and communities to thrive - is a relatively new discipline that has experienced substantial growth in the last 5-10 years. Research suggests that the principles and theories from this area of study are highly relevant to the practice of counseling and psychotherapy, and positive psychology presents clinicians and patients with a much needed balance to the more traditional focus on pathology and the disease model of mental health. This book provides a comprehensive introduction to the best-researched positive psychological interventions. It emphasizes clinical application, providing a detailed view of how the research can be applied to patients. Covering the broaden-and-build theory, strengths-based therapy, mentoring modalities and more, the volume will provide numerous assessment tools, exercises and worksheets for use throughout the counseling and psychotherapy process. N

Mitchell, J., Stanimirovic, R., Klein, B., & VellaBrodrick, D. (2009). A randomised controlled trial of a self-guided internet intervention promoting wellbeing. Computers in Human Behavior, 25, 749-760.

Positive psychology is paving the way for interventions that enduringly enhance well-being and the internet offers the potential to disseminate these interventions to a broad audience in an accessible and sustainable manner. There is now sufficient evidence demonstrating the efficacy of internet interventions for mental illness treatment and prevention, but little is known about enhancing well-being. The current study examined the efficacy of a positive psychology internet-based intervention by adopting a randomised controlled trial design to compare a strengths intervention, a problem solving intervention and a placebo control. Participants (n = 160) completed measures of well-being (PWI-A, SWLS, PANAS, OTH) and mental illness (DASS-21) at pre-assessment, post-assessment and 3-month follow-up. Well-being increased for the strengths group at post- and follow-up assessment on the PWI-A, but not the SWLS or PANAS. Significant changes were detected on the OTH subscales of engagement and pleasure. No changes in mental illness were detected by group or time. Attrition from the study was 83% at 3-month follow-up, with significant group differences in adherence to the intervention: strengths (34%), problem solving (15.5%) and placebo control (42.6%). Although the results are mixed, it appears possible to enhance the cognitive component of well-being via a self-guided internet intervention. N

Orzech, K. M., Shapiro, S. L., Brown, K. W., & McKay, M. (2009). Intensive mindfulness training-related changes in cognitive and emotional experience. The Journal of Positive Psychology, 4(3), 212-222

This study examined the role of intensive mindfulness training on changes in day-to-day experiential processing, psychological symptoms, resilience, and well-being in two groups of community adults (N = 69). Using both quasi-experimental and longitudinal methods, the study found that intensive training, operationalized as 10-12 hours of formal mindfulness practice per day for 1 month, was significantly related to increases in training-specific experiential processing capacities, namely trait mindfulness and decentering (reperceiving), in comparison to pre-post-training wait-list controls. In both training groups combined, mindfulness, decentering, and acceptance increased over the pre-training to 1-month follow-up period. Intensive mindfulness training was also related to declines in anxiety and enhanced both subjective well-being and self-compassion from pre-training to follow-up in the two training groups. Finally, increases in trait mindfulness and acceptance were related to improvements in

psychological symptoms, well-being, and resilience. Future directions for this novel area of mindfulness research are discussed. N

Parks, A. C. (2009). Positive psychotherapy: Building a model of empirically supported self-help. Unpublished Doctoral Thesis, University of Pennsylvania, Pennsylvania.

A sizable portion of the population experiences subthreshold depressive symptoms, and these symptoms can lead to substantial functional impairment. However, there is little research on psychological interventions for depressive symptoms in nonclinical populations. In a series of three studies, I examine the efficacy of Positive Psychotherapy (PPT)--an intervention designed to decrease depressive symptoms in mild-moderately depressed individuals by increasing pleasure, engagement, and meaning--both in-person and over the web. I also explore the mechanism by which PPT decreases symptoms without ever targeting depression directly. In Study 1, I piloted a 6-week group PPT intervention. Participants randomly assigned to receive group PPT experienced fewer depressive symptoms and greater life satisfaction than did no-intervention controls. Decreases in depressive symptoms were mediated by increases in life satisfaction, but only partially. In Study 2, I examined the effects of the techniques used in PPT when administered individually. I randomly assigned participants to complete one of the six PPT exercises or a placebo control exercise. When analyzed as one group, PPT exercises led to significant improvement in depressive symptoms while the Control exercise did not. Both PPT exercises and the Control exercise increased life satisfaction. However, the PPT exercises did not significantly differ from the Control exercise on either outcome. In Study 3, I piloted an online version of PPT. Compared to assessment-only controls, online PPT participants experienced significantly fewer depressive symptoms. However, there were no significant effects on life satisfaction, nor on another potential mediator: positive emotion. There was substantial variation in rates of compliance and continued use for each exercise; however, three months later, 91% of those who completed the follow-up assessment were still practicing at least one of the six exercises, with the average participant continuing to use between 2 and 3 exercises. Despite limitations, which include high dropout rates and structural rigidities due to the automated design of online PPT, this series of studies provides an important first step in developing a low-cost, acceptable intervention for decreasing mild-moderate depressive symptoms in nonclinical populations. N

Rashid, T. (2009). Positive interventions in clinical practice. Journal of Clinical Psychology, 65, 461-466.

Mainstream psychotherapy has made huge strides in treating symptoms and disorders, but it has largely overlooked happiness as a therapeutic goal despite frequently hearing from clients, "Doctor, I want to be happy." This issue of *Journal of Clinical Psychology: In Session* describes a number of positive interventions for specific clinical problems, such as depression, anxiety, schizophrenia, loss, grief, and relationship distress. Although the name may suggest it, positive interventions do not imply that rest of psychotherapies are negative. Neither are negatives denied nor minimized. Distinct from self-help recipes proffering instant changes, positive psychology interventions refer to systematic approaches to overcome challenges by using clients' strengths and assets. A hybrid psychotherapy-coaching model and strength-based assessment can ask a client "What is right with you?" All articles are supplemented with rich case illustrations. (PsycINFO Database Record (c) 2010 APA, all rights reserved)

F1

Sears, S., Kraus, S. (2009). I think therefore I Om: cognitive distortions and coping style as mediators for the effects of mindfulness meditation on anxiety, positive and negative affect, and hope. Journal of Clinical Psychology. 5, 1-13.

This study examined cognitive distortions and coping styles as potential effects of mindfulness meditation on anxiety, negative affect, positive affect, and hope in college students. Our pre- and postintervention design had four conditions: control, brief meditation focused on attention, brief meditation focused on loving

kindness, and longer meditation combining both attentional and loving kindness aspects of mindfulness. Each group met weekly over the course of a semester. Longer combined meditation significantly reduced anxiety and negative affect and increased hope. Changes in cognitive distortions mediated intervention effects for anxiety, negative affect, and hope. Further research is needed to determine differential effects of types of meditation. [N](#)

Sheldon, K. M., & Lyubomirsky, S. (in press). Change your actions, not your circumstances: An experimental test of the Sustainable Happiness Model. In A. K. Dutt & B. Radcliff (Eds.), Happiness, economics, and politics: Toward a multi-disciplinary approach. New York: Edward Elgar.

Is it possible to become a happier person? This is an enormously important issue for subjective well-being (SWB) researchers, as well as for the burgeoning field of positive psychology (Seligman & Csikszentmihalyi, 2000, Sheldon, 2004). Indeed, if happiness cannot be lastingly increased, then one of the basic premises of positive psychology is suspect – namely, that positive psychology is about more than curing disorders or “bringing people back to 0,” but is instead about helping to move people “beyond 0,” to new heights of fulfillment and satisfaction (Seligman, 2002). [N](#)

Sin, N. L. & Lyubomirsky, S. (2009). Enhancing well-being and alleviating depressive symptoms with positive psychology interventions: A practice-friendly meta-analysis.

Journal of Clinical Psychology, 65, 467-487.

Do positive psychology interventions—that is, treatment methods or intentional activities aimed at cultivating positive feelings, positive behaviors, or positive cognitions—enhance well-being and ameliorate depressive symptoms? A meta-analysis of 51 such interventions with 4,266 individuals was conducted to address this question and to provide practical guidance to clinicians. The results revealed that positive psychology interventions do indeed significantly enhance well-being (mean $r=.29$) and decrease depressive symptoms (mean $r=.31$). In addition, several factors were found to impact the effectiveness of positive psychology interventions, including the depression status, self-selection, and age of participants, as well as the format and duration of the interventions. Accordingly, clinicians should be encouraged to incorporate positive psychology techniques into their clinical work, particularly for treating clients who are depressed, relatively older, or highly motivated to improve. Our findings also suggest that clinicians would do well to deliver positive psychology interventions as individual (versus group) therapy and for relatively longer periods of time. (PsycINFO Database Record (c) 2010 APA, all rights reserved) [F1](#)

Toepfer, S.M., & Walker, K. (2009). Letters of gratitude: Improving well-being through expressive writing. Journal of Writing Research, 1(3), 181-198.

Researchers have shown that about 40% of our happiness is accounted for by intentional

activity whereas 50% is explained by genetics and 10% by circumstances (Lyubomirsky, Sheldon & Schkade, 2005). Consequently, efforts to improve happiness might best be focused in the domain of intentional activity: willful and self-directed activity (Sheldon & Lyubomirsky, 2007). Such activity is nested in the “sustainable happiness model” proposed by Lyubomirsky, Sheldon, and Schkade (2005) which states that happiness is in part within our ability to manage. Earlier work (Fordyce, 1977; 1983) supports the premise that individuals can sustain levels of happiness through volitional behavior. The current pilot study explored one such intentional activity – composing letters of gratitude. It was hypothesized that writing three letters of gratitude over time would enhance important qualities of subjective well-being in the author; happiness, life satisfaction, and gratitude. [N](#)

Weinstein, N., Brown, K. W., & Ryan, R. M. (2009). A multi-method examination of the effects of mindfulness on stress attribution, coping, and emotional well-being. Journal of Research in Personality, 43, 374–385.

Mindful individuals orient to ongoing events and experiences in a receptive, attentive manner. This experiential mode of processing suggests implications for the perception of and response to stress situations. Using laboratory-based, longitudinal, and daily diary designs, four studies examined the role of mindfulness on appraisals of and coping with stress experiences in college students, and the consequences of such stress processing for well-being. Across the four studies (n's = 65 - 141), results demonstrated that mindful individuals made more benign stress appraisals, reported less frequent use of avoidant coping strategies, and in two studies, reported higher use of approach coping. In turn, more adaptive stress responses and coping partially or fully mediated the relation between mindfulness and well-being. Implications for the role of mindfulness in stress and well-being are discussed. [N]

Wong, Paul T. P. (2009). The need for a balanced approach to positive psychotherapy and traditional masculinity. *PsycCRITIQUES*, 54.

Reviews the video, Positive psychology with male clients, with Mark S. Kiselica (2008). Although Kiselica does not explicitly claim that he is practicing positive psychotherapy, the content of the DVD and the promotional material in the DVD packet make it clear that he indeed practices a strength-focused positive psychotherapy. On the surface, positive psychotherapy seems a misnomer, a contradiction in terms. How could a psychology devoted to only positive experiences be applied to psychopathology? At the present stage of development of positive psychotherapy, the consensus is that positive interventions can be used effectively as a supplement to standard clinical practices. The format of this video, consisting of an interview with the therapist, a counseling session with an actual client, and an in-depth discussion with the therapist about a few selected segments, is a plus. This format allows an overview of the basic tenets and skills of a particular approach of psychotherapy in a single sitting. The host, Jon Carlson, comes across as supportive and affable. Mark Kiselica is also very likable. Both Kiselica and Carlson possess the important qualities of empathy and compassion. However, in an interview situation, one can be guilty of overusing empathy skills. On several occasions, Carlson appears too agreeable, to the point of patronizing. By the same token, Kiselica's frequent self-disclosure may also sound patronizing. Also, Kiselica seems more interested in traditional gender roles than in the client's uniqueness. Trying to steer the client toward the traditional masculine role may have the adverse effect of stereotyping and limiting personal development. As far as psychotherapy videos go, Kiselica does offer a helpful positive orientation in working with male clients. The reviewer recommends his video for counseling students as an example of strength-focused counseling or coaching, but not as the best example of positive psychotherapy. (PsycINFO Database Record (c) 2010 APA, all rights reserved) [E1]

Wood, J. V., Perunovic, W. Q. E., & Lee, J. W. (2009). Positive self-statements: Power for some, peril for others. *Psychological Science*, 20, 860–866.

Positive self-statements are widely believed to boost mood and self-esteem, yet their effectiveness has not been demonstrated. We examined the contrary prediction that positive self-statements can be ineffective or even harmful. A survey study confirmed that people often use positive self-statements and believe them to be effective. Two experiments showed that among participants with low self-esteem, those who repeated a positive self-statement ("I'm a lovable person") or who focused on how that statement was true felt worse than those who did not repeat the statement or who focused on how it was both true and not true. Among participants with high self-esteem, those who repeated the statement or focused on how it was true felt better than those who did not, but to a limited degree. Repeating positive self-statements may benefit certain people, but backfire for the very people who "need" them the most. [N]

Bazzano, A., Wolfe, C., Zylowska, L., et al. (2010). Stress-Reduction and improved well-being following a pilot community-based participatory mindfulness-based stress-reduction (MBSR) program for parents/caregivers of children with developmental disabilities. *Disability and Health Journal*, 3(2), 6-7.

Introduction: Stress among parents and caregivers of children with developmental disabilities is pervasive and is linked to lower quality of life, unhealthy family functioning, and negative psychological consequences. Mindfulness-based stress reduction (MBSR) is a method of reducing stress and improving well-being through letting go of stress by "being in the moment." Our goal was to develop, implement, and evaluate the feasibility of an MBSR program designed for parents/caregivers in a community-based participatory setting. Methods: Parents/caregivers were equal partners with researchers in curriculum development, recruitment, implementation, and evaluation. Two concurrent classes, evening and morning, were conducted twice weekly in English with Spanish translation over 8 weeks in spring 2008. Classes consisted of meditation practice, supported discussion of stressors affecting parents/caregivers, and yoga. Pre- and post-scores on the Mindfulness Attention Awareness Scale (MAAS), Self-Compassion Scale (SCS), Scale of Psychological Well-Being (PWB), Perceived Stress Scale-10 (PSS10), and Parental Stress Scale (PSS) were compared using paired t-tests. Results: Of 37 participants recruited, 29 (78%) attended six or more classes. Parents/caregivers reported significantly less stress after the program (PSS mean = 38.8, SD = 10.1) than before (mean = 46.5, SD = 10.6, $p < .05$). The mean PSS-10 score decreased by 9.53 points ($p < .05$). Parents/caregivers also reported significantly ($p < .05$) increased mindfulness (MAAS), self-compassion (SCS), and well-being (PWB). Conclusions: A community-based MBSR program can be an effective intervention to reduce stress and improve psychological well-being for parents/caregivers of children with developmental disabilities. Future studies should include a community-based approach for larger, randomized controlled studies of MBSR programs with longer-term outcomes and for those with developmental disabilities. [N](#)

Boehm, J. K., Lyubomirsky, S., & Sheldon, K. M. (2010). A longitudinal experimental study comparing the effectiveness of happiness-enhancing strategies in Anglo Americans and Asian Americans. Manuscript submitted for publication.

Growing evidence suggests that well-being interventions can be effective. However, it is unclear whether happiness-increasing practices are equally effective for individuals from different cultural backgrounds. To investigate this question, Anglo Americans and predominantly foreign-born Asian Americans were randomly assigned to express optimism, convey gratitude, or list their past experiences (control group). Multilevel analyses indicated that participants in the optimism and gratitude conditions reported enhanced life satisfaction relative to those in the control condition. However, Anglo Americans in the treatment conditions demonstrated larger increases in life satisfaction relative to Asian Americans, while both cultural groups in the control condition showed the least improvement. These results are consistent with the idea that the value individualist cultures place on self-improvement and personal agency bolsters the efforts of Anglo Americans to become more satisfied, whereas collectivist cultures' de-emphasis of self-focus and individual goals interferes with the efforts of Asian Americans to pursue enhanced well-being. [N](#)

Cohn, M. A. & Fredrickson, B. L. (2010). In search of durable positive psychology interventions: Predictors and consequences of long-term positive behavior change. *The Journal of Positive Psychology*, 5(5), 355-366.

A number of positive psychology interventions have successfully helped people learn skills for improving mood and building personal resources (e.g., psychological resilience and social support). However, little is known about whether intervention activities remain effective in the long term, or whether new resources are maintained after the intervention ends. We address these issues in a 15-month follow-up survey of participants from a loving-kindness meditation intervention. Many participants continued to practice meditation, and they

reported more positive emotions (PEs) than those who had stopped meditating or had never meditated. All participants maintained gains in resources made during the initial intervention, whether or not they continued meditating. Continuing meditators did not differ on resources at baseline, but they did show more PE and a more rapid PE response to the intervention. Overall, our results suggest that positive psychology interventions are not just efficacious but of significant value in participants' real lives. ^N

Fang, C. Y., Reibel, D. K., Longacre, M. L., et al. (2010). Enhanced psychosocial well-being following participation in a mindfulness-based stress reduction program is associated with increased natural killer cell activity. *The Journal of Alternative and Complementary Medicine*, 16(5), 531-38.

BACKGROUND: Mindfulness-based stress reduction (MBSR) programs have consistently been shown to enhance the psychosocial well-being of participants. Given the well-established association between psychosocial factors and immunologic functioning, it has been hypothesized that enhanced psychosocial well-being among MBSR participants would be associated with corresponding changes in markers of immune activity. **OBJECTIVES:** The objectives of this study were to examine changes in psychosocial and immunologic measures in a heterogeneous patient sample following participation in a MBSR program. **DESIGN:** A single-group, pretest/post-test design was utilized. **SETTING:** The intervention was conducted at an academic health center. **SUBJECTS:** This pilot study involved 24 participants (aged 28-72 years). Inclusion criteria were as follows: > or =18 years of age, English-speaking, and no known autoimmune disorder. **INTERVENTION:** The intervention was an 8-week MBSR program. **OUTCOME MEASURES:** Distress and quality of life (QOL) measures included the Brief Symptom Inventory-18 and the Medical Outcomes Survey Short-Form Health Survey, respectively. Immunologic measures included natural killer (NK) cell cytolytic activity and C-reactive protein (CRP). **RESULTS:** Patients completed psychosocial assessments and provided a blood sample at baseline (pre-MBSR) and within 2 weeks post-MBSR. Significant improvements in anxiety and overall distress as well as across multiple domains of QOL were observed from baseline to post-MBSR. Reductions in anxiety and overall distress were associated with reductions in CRP. Patients who reported improvement in overall mental well-being also showed increased NK cytolytic activity from pre- to post-MBSR, whereas patients who reported no improvement in mental well-being showed no change in NK cytolytic activity. **CONCLUSIONS:** Positive improvement in psychologic well-being following MBSR was associated with increased NK cytolytic activity and decreased levels of CRP. ^N

Garland, E., Fredrickson, B., Kring, A. M., Johnson, D. P., Meyer, P. S., & Penn, D. L. (2010). Upward spirals of positive emotions counter downward spirals of negativity: Insights from the broaden-and-build theory and affective neuroscience on the treatment of emotion dysfunction and deficits in psychopathology. *Clinical Psychology Review*

This review integrates Fredrickson's broaden-and-build theory of positive emotions with advances in affective neuroscience regarding plasticity in the neural circuitry of emotions to inform the treatment of emotion deficits within psychopathology. We first present a body of research showing that positive emotions broaden cognition and behavioral repertoires, and in so doing, build durable biopsychosocial resources that support coping and flourishing mental health. Next, by explicating the processes through which momentary experiences of emotions may accrue into self-perpetuating emotional systems, the current review proposes an underlying architecture of state-trait interactions that engenders lasting affective dispositions. This theoretical framework is then used to elucidate the cognitive-emotional mechanisms underpinning three disorders of affect regulation: depression, anxiety, and schizophrenia. In turn, two mind training interventions, mindfulness and loving-kindness meditation, are highlighted as means of generating positive emotions that may counter the negative affective processes implicated in these disorders. We conclude with the proposition that positive emotions may exert a countervailing force on the

dysphoric, fearful, or anhedonic states characteristic of psychopathologies typified by emotional dysfunctions. [N]

Godfrin, K. A. & van Heeringen, C. (2010). The effects of mindfulness-based cognitive therapy on recurrence of depressive episodes, mental health and quality of life: A randomized controlled study. *Behaviour Research and Therapy*.

Depression is characterized by a large risk of relapse/recurrence. Mindfulness-based cognitive therapy (MBCT) is a recent non-drug psychotherapeutic intervention to prevent future depressive relapse/recurrence in remitted/recovered depressed patients. In this randomized controlled trial, the authors investigated the effects of MBCT on the relapse in depression and the time to first relapse since study participation, as well as on several mood states and the quality of life of the patients. 106 recovered depressed patients with a history of at least 3 depressive episodes continued either with their treatment as usual (TAU) or received MBCT in addition to TAU. The efficacy of MBCT was assessed over a study period of 56 weeks. At the end of the study period relapse/recurrence was significantly reduced and the time until first relapse increased in the MBCT plus TAU condition in comparison with TAU alone. The MBCT plus TAU group also showed a significant reduction in both short and longer-term depressive mood and better mood states and quality of the life. For patients with a history of at least three depressive episodes who are not acutely depressed, MBCT, added to TAU, may play an important role in the domain of relapse prevention in depression. [N]

Hofmann, S. G., Sawyer, A. T., Witt, A. A., & Oh, D. (2010). The effect of mindfulness-based therapy on anxiety and depression: A meta-analytic review. *Journal of Consulting and Clinical Psychology*, 78(2), 169-183.

Objective: Although mindfulness-based therapy has become a popular treatment, little is known about its efficacy. Therefore, our objective was to conduct an effect size analysis of this popular intervention for anxiety and mood symptoms in clinical samples. Method: We conducted a literature search using PubMed, PsycINFO, the Cochrane Library, and manual searches. Our meta-analysis was based on 39 studies totaling 1,140 participants receiving mindfulness-based therapy for a range of conditions, including cancer, generalized anxiety disorder, depression, and other psychiatric or medical conditions. Results: Effect size estimates suggest that mindfulness-based therapy was moderately effective for improving anxiety (Hedges's $g = 0.63$) and mood symptoms (Hedges's $g = 0.59$) from pre- to posttreatment in the overall sample. In patients with anxiety and mood disorders, this intervention was associated with effect sizes (Hedges's g) of 0.97 and 0.95 for improving anxiety and mood symptoms, respectively. These effect sizes were robust, were unrelated to publication year or number of treatment sessions, and were maintained over follow-up. Conclusions: These results suggest that mindfulness-based therapy is a promising intervention for treating anxiety and mood problems in clinical populations. [N]

Huppert, F.A. & Johnson, D.M. (2010) A controlled trial of mindfulness training in schools; the importance of practice for an impact on well-being. *Journal of Positive Psychology*, 5, 4, 264-274.

We report the results of a short programme of mindfulness training administered to adolescent boys in a classroom setting. Intervention and control groups ($N = 155$) were compared on measures of mindfulness, resilience and psychological well-being. Although the overall differences between the two groups failed to reach significance, we found that within the mindfulness group, there was a significant positive association between the amount of individual practice outside the classroom and improvement in psychological well-being and mindfulness. We also found that the improvement in well-being was related to personality variables (agreeableness and emotional stability). Most students reported enjoying and benefiting from the mindfulness training, and 74% said they would like to continue with it in the future. The results of this preliminary study are encouraging. Further work is needed to refine the training programme and undertake a definitive randomised controlled trial, using both subjective and objective outcome measures, with long-term follow-up. [N]

Johnson, D. P., Penn, D. L., Fredrickson, B. L., Kring, A. M., Meyer, P. S., & Brantley, M.

(2010). A pilot study of loving-kindness meditation for the negative symptoms of schizophrenia. Manuscript under review

This pilot study examined loving-kindness meditation (LKM) with 18 participants with schizophrenia-spectrum disorders and significant negative symptoms. Findings indicate that the intervention was feasible and associated with decreased negative symptoms and increased positive emotions and psychological recovery. [N](#)

Mathew, K. L., Whitford, H. S., Kenny, M. A., & Denson, L. A. (2010). The long-term effects of mindfulness-based cognitive therapy as a relapse prevention treatment for major depressive disorder. Behavioural and Cognitive Psychotherapy, 7, 1-16.

Background: Mindfulness-based Cognitive Therapy (MBCT) is a relapse prevention treatment for major depressive disorder. Method: An observational clinical audit of 39 participants explored the long-term effects of MBCT using standardized measures of depression (BDI-II), rumination (RSS), and mindfulness (MAAS). Results: MBCT was associated with statistically significant reductions in depression from pre to post treatment. Gains were maintained over time (Group 1, 1–12 months, $p = .002$; Group 2, 13–24 months, $p = .001$; Group 3, 25–34 months, $p = .04$). Depression scores in Group 3 did begin to worsen, yet were still within the mild range of the BDI-II. Treatment variables such as attendance at “booster” sessions and ongoing mindfulness practice correlated with better depression outcomes ($p = .003$ and $p = .03$ respectively). There was a strong negative correlation between rumination and mindful attention ($p < .001$), consistent with a proposed mechanism of metacognition in the efficacy of MBCT. Conclusion: It is suggested that ongoing MBCT skills and practice may be important for relapse prevention over the longer term. Larger randomized studies of the mechanisms of MBCT with longer follow-up periods are recommended. [N](#)

Miriam, A. (2010). Applying Positive Psychology to alcohol-misusing adolescents. Journal of Groupwork, 20(3), 7-23.

Adolescent alcohol misuse is associated with many adverse consequences for well-being (Viner & Taylor, 2007). Positive psychology has pledged to improve adolescent well-being, so what can the field contribute to the treatment of alcohol misusing young people? This mixed methods study evaluates a pilot group application of positive psychology to alcohol-misusing adolescents, examining its effects on adolescent well-being and alcohol habits. The intervention consisted of eight workshops based on positive psychology models including happiness, strengths, optimism and gratitude. The participants were adolescents attending an alcohol and drug treatment service for young people. The experimental group ($n = 10$) participated in weekly workshops while a control group ($n = 10$) received no treatment. The results suggested that the group intervention led to an increase in adolescent well-being and decrease in alcohol consumption. In the quantitative study the results indicated significant increases in happiness, optimism and positive emotions and a significant decline in alcohol dependence. In the qualitative study the main themes were a rise in happiness and other positive emotions; the development of a future goal orientation; a decline in alcohol and drug use and an escalation of change amounting to transformation. The investigation concludes that a positive psychology group intervention can make an effective contribution to the treatment of alcohol-misusing adolescents with a recommendation to take the current pilot forward to a full study. [N](#)

Moeenizadeh, M., & Salagame, K. K. K. (2010). The Impact of Well-Being Therapy on Symptoms of Depression. International Journal of Psychological Studies, 2(2), 223-230.

Well Being Therapy (WBT) is a relatively modern technique of managing patients with Depression. Many studies and researches have been conducted in this field to formally found the Positive Psychology, the goal of which is to study the nature of wellbeing and the conditions, which stimulate them. The improvement shown

by patients who were managed with this technique lead to WBT based on Ryff's multidimensional model of psychological well-being. This article has been written to emphasize the novel applications of Psychotherapeutic Strategy for patients suffering from depression. The objective of this therapy is to improve the level of psychological well-being of patients. WBT has been executed in 10 sessions according to Ryff's phases. Methods: A sample of 40 patients was treated in 8 sessions by WBT and CBT and assessed (BDI-II) for specification of depression as pre and post tests. Results: Test-retest of WBT and CBT showed a more significant effect between pre and post treatment and WBT is more effective than CBT. Conclusions: The results suggested the feasibility and clinical advantages by adding WBT to the treatment of depression. [N](#)

Schroevers, M. J., & Brandsma, R. (2010). Is Learning Mindfulness Associated with Improved Affect After Mindfulness-Based Cognitive Therapy? *British Journal of Psychology*, 101, 95-107.

The increased popularity of mindfulness-based interventions and the growing body of empirical evidence confirming the positive effects of these interventions on well-being warrant more research to determine if the effects are indeed related to learning mindfulness. The present study extends previous studies, by examining whether and how changes in five core aspects of mindfulness are related to changes in the report of negative and positive affect during an 8-week course of mindfulness-based cognitive therapy. The study was performed in 64 individuals from the community with mild to moderate psychological problems. Data were collected by self-report questionnaires before and directly after the training. Results showed significant decreases in negative affect and increases in positive affect. We also found significant increases in four of the five aspects of mindfulness. Importantly, changes in mindfulness were significantly associated with improved affect, with a distinct pattern found for positive and negative affect. Hereby, our findings extend previous research by showing that learning distinct aspects of mindfulness is differently related to an improved positive affect and a decreased negative affect. Future randomized controlled trials with a larger sample and longer follow-up period are needed to replicate these findings. [N](#)

Shapira, L. H., & Mongrain, M. (2010). The benefits of self-compassion and optimism exercises for individuals vulnerable to depression. *Journal of Positive Psychology*, 5, 377-389.

The effectiveness of two online exercises intended to help individuals experience (1) self-compassion ($n = 63$) and (2) optimism ($n = 55$) were compared to a control intervention where participants wrote about an early memory ($n = 70$). A battery of tests was completed at 1 week following the exercise period, and at 1-, 3-, and 6-month follow-ups. Both active interventions resulted in significant increases in happiness observable at 6 months and significant decreases in depression sustained up to 3 months. The interventions were examined in relationship to dependency and self-criticism, both related to vulnerability to depression. Individuals high in self-criticism became happier at 1 week and at 1 month in the optimism condition in the repeated measures analysis. A sensitivity test using multi-level modeling failed to replicate this effect. More mature levels of dependence (connectedness) were related to improvements in mood up to 6 months in the self-compassion condition. This study suggests that different personality orientations may show greater gains from particular types of positive psychology interventions. [N](#)

Sheldon, K. M., Abad, N., Ferguson, Y., Gunz, A., Houser-Marko, L., Nichols, C. P., & Lyubomirsky, S. (2010). Persistent pursuit of need-satisfying goals leads to increased happiness: A 6-month experimental longitudinal study. *Motivation and Emotion*, 34, 39-48.

University-based community members ($N = 181$) participated in a four-wave, 6-month longitudinal experiment designed to increase treatment participants' happiness levels. Participants were randomly assigned to set goals either to improve their life circumstances (comparison condition) or to increase their feelings of autonomy, competence, or relatedness in life (treatment conditions). We hypothesized that sustained gains in happiness would be observed only in

the three treatment conditions, and that even these gains would last only when there was continuing goal engagement. Results supported these predictions and the sustainable happiness model on which they were based (Lyubomirsky et al. in *Rev Gen Psychol* 9:111-131, 2005). Furthermore, participants with initial positive attitudes regarding happiness change obtained larger benefits. We conclude that maintained happiness gains are possible, but that they require both “a will and a proper way” (Lyubomirsky et al. in *Becoming happier takes both a will and a proper way: two experimental longitudinal interventions to boost well-being*, 2009). [N](#)

Tarrier, N. (2010). Broad minded affective coping (BMAC): A positive CBT approach to facilitating positive emotions. *International Journal of Cognitive Therapy*, 3, 65–78.

This article describes a new cognitive-behavioral treatment Broad Minded Affective Coping (BMAC) based upon Frederickson and colleagues' “broaden and build” theoretical model of positive emotions. Simply, negative emotions are threat-focused and survival based whereas positive emotions broadened thought-action repertoires and increase access to a much wider range of psychological resources. Thus constructive and positive cognition and behaviour are more likely to arise from the experience of positive emotional states. The theoretical underpinnings of, and the clinical procedures to, BMAC are described. BMAC aims through the use of mental imagery to elicit positive past memories and the positive emotional states associated with them. BMAC is indicated as a tactical addition to cognitive behavioural treatments and a number of cases are briefly described to indicate its clinical feasibility and acceptability. [N](#)

2011

N=6

Bormans, L. (in publish), *The World Book of Happiness*

In this book 100 professional researchers from all over the world share for the first time what they know about happiness. No spiritual philosophy but evidence-based knowledge of recent experiments and life-long research. Set in a language that everybody understands. Grazing through more than 8000 studies in the World Database of Happiness (established by Professor Veenhoven, University of Rotterdam), we contacted the best researchers in positive psychology. We asked them to describe in some words what they have learned through their research on happiness and what specific advice they would give to people all over the world to improve their happiness. The final selection of the most relevant views contains 100 extraordinary extracts from specialists in more than fifty countries, from China and Japan, to India, Australia, Africa, Europe and America. (believe to be relevant) [N](#)

Durlak, J. A., Weissberg, R. P., Dymnicki, A. B., Taylor, R. D., and Schellinger, K. (2011). The impact of enhancing students' social and emotional learning: A meta-analysis of school-based universal interventions. *Child Development*, 82, 474-501.

This article presents findings from a meta-analysis of 213 school-based, universal social and emotional learning (SEL) programs involving 270,034 kindergarten through high school students. Compared to controls, SEL participants demonstrated significantly improved social and emotional skills, attitudes, behavior, and academic performance that reflected an 11-percentile-point gain in achievement. School teaching staff successfully conducted SEL programs. The use of 4 recommended practices for developing skills and the presence of implementation problems moderated program outcomes. The findings add to the growing empirical evidence regarding the positive impact of SEL programs. Policy makers, educators, and the public can contribute to healthy development of children by supporting the incorporation of evidence-based SEL programming into standard educational practice. [N](#)

Huffman, J. C., Mastromauro, C. A., Boehm, J., Seabrook, R., Fricchione, G. L., Denninger, J. W., & Lyubomirsky, S. (2011). Development of a positive psychology intervention for patients with acute cardiovascular disease. Manuscript under review.

Positive affective states, such as optimism, have been associated with superior cardiovascular outcomes. However, to our knowledge, positive psychology interventions have never been attempted in heart disease patients. Our primary objective was to develop an 8-week, phone-based positive psychology intervention for patients with acute cardiac disease. Secondly, we assessed the intervention's feasibility and acceptability in a small three-arm randomized pilot trial. Overall, we were able to successfully create and pilot test the intervention. The intervention appeared to be feasible and easy to complete, and subjects in the positive psychology arm of the pilot trial had numerically greater improvements in clinical outcomes than subjects in active or attentional control groups. [N](#)

Kurtz, J. L., & Lyubomirsky, S. (2011). Using mindful photography to increase positive emotion and appreciation. To appear in J. J. Froh & A. Parks-Sheiner (Eds.), Positive psychology in higher education: A practical workbook for the classroom. Washington DC: American Psychological Association. [N](#)

Malinowski, P. (2011). Flourishing through meditation and mindfulness. In I. Boniwell & S. David (Eds.), Oxford Handbook of Happiness. Oxford: Oxford University Press. In press. [N](#).

Piet, J. & Hougaard, E. (2011) The effect of mindfulness-based cognitive therapy for prevention of relapse in recurrent major depressive disorder: A systematic review and meta-analysis. Clinical Psychology Review.

Mindfulness-based cognitive therapy (MBCT) is a group-based clinical intervention program designed to reduce relapse or recurrence of major depressive disorder (MDD) by means of systematic training in mindfulness meditation combined with cognitive-behavioral methods. By means of a meta-analysis to evaluate the effect of MBCT for prevention of relapse or recurrence among patients with recurrent MDD in remission. Electronic databases were searched and researchers were contacted for further relevant studies. Studies were coded for quality. Meta-analyses were performed by means of the Cochrane Collaboration Review Manager 5.1. Six randomized controlled trials with a total of 593 participants were included in the meta-analysis. MBCT significantly reduced the risk of relapse/recurrence with a risk ratio of 0.66 for MBCT compared to treatment as usual or placebo controls, corresponding to a relative risk reduction of 34%. In a pre-planned subgroup analysis the relative risk reduction was 43% for participants with three or more previous episodes, while no risk reduction was found for participants with only two episodes. In two studies, MBCT was at least as effective as maintenance antidepressant medication. Results of this meta-analysis indicate that MBCT is an effective intervention for relapse prevention in patients with recurrent MDD in remission, at least in case of three or more previous MDD episodes. [N](#)

Sin, N. L., Della Porta, M. D., & Lyubomirsky, S. (2011). Tailoring positive psychology interventions to treat depressed individuals. In S. I. Donaldson, M. Csikszentmihalyi, & J. Nakamura (Eds.), Applied positive psychology: Improving everyday life, health, schools, work, and society (pp. 79-96). New York: Routledge. (<http://www.faculty.ucr.edu/~sonja/papers/SDL2011.pdf>, other chapters may also be useful) [N](#)

(More studies on mindfulness (PPI) in increasing people's positive affect between 2009-2010 can be found here: <http://www.mindfulexperience.org/publications.php>) and <http://www.mindfulnet.org/page4.htm>

In Press

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Mongrain, M., Chin, J. & Shapira, L. B. (in press). Practicing compassion increases happiness and self-esteem. *Journal of Happiness Studies*. N