

Top entry page

Positive Psychology for Clinical Benefits



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Think about when you are angry.

Your mind is constrained and narrowed to that one object in your path. Then about when you're happy, your mind is expansive and your thoughts flow freely, you are curious about the future and where it will take you. Think of this as an analogy for your health and wellbeing. As a general rule when you are happy you feel better about yourself and therefore feel healthier, and vice versa.

Take for example blood pressure, most people take it as common knowledge that getting angry and upset can raise your blood-pressure and in extreme circumstances lead to cardiac-arrest, but much less well known is that the triggering of positive emotions can have the opposite effect and drastically reduce your risk of cardiovascular disease. In this field one of the foremost minds is Dr. Barbara Fredrickson, whose recent research shows how when stressed subjects were shown a film which left them feeling amused and at ease, they would have a quicker recovery of their heart function, she also noted that those who smiled while watching a sad movie had more a more rapid recovery of heart rate.

1.2 Where to start:

To get a good grasp of what this topic is about we would recommend Burton and King (2004)'s paper "The Health benefits of writing about intensely positive experiences" available at:

(<http://www.sciencedirect.com/science/article/pii/S0092656603000588>)<http://www.sciencedirect.com/science/article/pii/S0092656603000588>

(<http://www.sciencedirect.com/science/article/pii/S0092656603000588>)

This paper highlights the theory of how expressing one's positive experiences, in this case by writing them down, can lead to both an increase in mood, as well as to better health; with subjects who had expressed a positive experience significantly associated with fewer health centre visits than controls. The paper gives a broad insight into the topic as a whole, and gives many references and works which allow deeper research into the subject matter.

(<http://www.sciencedirect.com/science/article/pii/S0092656603000588>)

Like many papers which use the writing method for positive expression, the results show that the method "works" but they cannot provide a concrete indication of why this happens (King, 2002). The results also showed that writing about one's negative experiences can have the same effect as IPEs (Intensely Positive Experiences) thus confounding the theory that these positive experiences are causal of the greater health.

Dear Mr. Chins:

Since I'm doing this prison smart programme everything turns out to be the best for me, my mind don't snap anymore like before and I know that this would help me in the future as well. When I meditate I feel delighted, relieved, relaxed, loyal, the list is endless, in fact I know now that I can live a positive life with no anger what so ever. Mr. Chins as you said you know that the whole class wouldn't change but when you've done your first programme here at Medium B, you really had the power to come and changed my life forever. I'm really not a person of crime the only problem was that I was shaking when people irritated me and my anger started controlling me, but now that's a memory of the past thanks to you Mr. Chins.

Mr. Chins this what you had done for me may God bless you. I come from a very poor family and I don't think I would do this outside because R650 is too much to pay. But this that you've taught me Mr. Chins it's priceless to me and it means a lot to me and my future that's waiting out there, "add to the list" thanks to you Mr. Chins I also no longer smoke. I'm a song writer and performer. I'll look for a part time job and then record my songs and then live a happy positive life. "Thanks to the man that changed the life of a star Mr. Chins is a real hero."

Your best student Raymond Crouch

Sincerely


This Image, is one of the more heartwarming examples of the benefits of positivity in both in a clinical and non-clinical environment.

It shows the response of an inmate named Raymond Crouch who took part in an Art of Living prisoner programme and recounts how the programme has aided him both in his outlook on life and his psychological health. The programme works with inmates doing such activities as giving classes in yoga, and as is mentioned in the letter, and in the paper above, uses the writing of the inmates positive experiences to appreciate what they have in life, and to "add to the list" by accumulating more positive experiences in the future.

The work of the programme can be seen here: <http://www.artofliving.org/za-en/prison-program-testimonials> (<http://www.artofliving.org/za-en/prison-program-testimonials>) and goes into much greater depth about their work and shows many other testimonials by prisoners regarding their experiences, and how their lives have been changed for the better, which are well worth reading if only to allow you to appreciate the positives in your own life and thus gain a practical experience of the benefits and how much better you feel when positive!

2.1 Practical Exercises which result in clinical benefits.

Practical Exercise 1

It was Burton & King (2004) who tested the clinical benefits of writing ab

Aim: to test if writing about an IPE would hold any clinical benefits.out an intensively positive emotional experience (IPE).

Practical exercise: Participants had to commit to three consecutive days of 20-minute writing sessions about their experience. The procedure included filling in mood-testing surveys before and after each writing session.

Clinical benefits found: The results of the statistical analysis showed that the individuals who wrote about their IPEs reported significantly less illnesses following the writing exercise in comparison to the control group.

Why not try it yourself? Designate just 20 minutes of your day to writing a short essay describing an experience in your life which has affected you significantly in an emotionally positive way. You will be able to test if it has had a clinical benefit by monitoring your health in the following months- as done in the previous study.



Practical Exercise 2

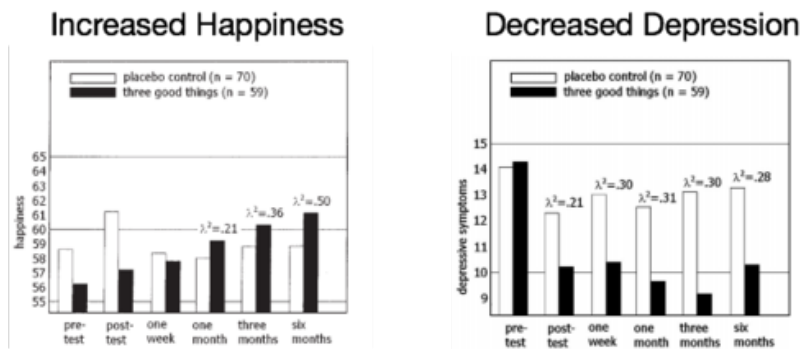
In 2005, Seligman & Steen claimed that by using the “Three good things” exercise, clinical mental health benefits were reported. This exercise is simple and can be easily repeated.



Aim: to test if reflection of three things that have made you happy/you have enjoyed throughout the day brings any mental health benefits.

Practical exercise: Participants had to reflect for a few minutes at the end of the day to think about/write down three things that made them happy. They could be something small or something of substantial importance- the choice was personal.

Results: It was shown that the participants' happiness was increased and depressive symptoms were decreased for six months following the exercise.



Why not try it yourself? This is an extremely simple and quick exercise and has proven results.

To read further information on the “Three good things” exercise, click on the link below:

<http://www.actionforhappiness.org/take-action/find-three-good-things-each-day> (<http://www.actionforhappiness.org/take-action/find-three-good-things-each-day>)

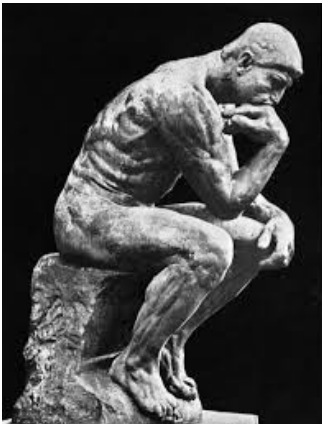
2.2 An old cultural connection.

The birth of positive psychology as we currently occurred in 1998 when Seligman made his Presidential Address to the American Psychological Association.

Seligman highlighted the fact that since WWII, Psychology had neglected two of its missions: aiding people to lead more fulfilling lives and nurturing high talent (Linley et al., 2007).

To enable us to learn a little more about the mental health issues which emerged from WWII, let us look at "The Disease model" in a short youtube video from "Go Strengths Online":

Looking back to pre-Seligman, there are many recognised ancestors of Positive Psychology. Since at least the time of great thinkers such as; Socrates, Aristotle and Plato, the “good life” has been subject of many a debate (Duckworth et al, 2004).



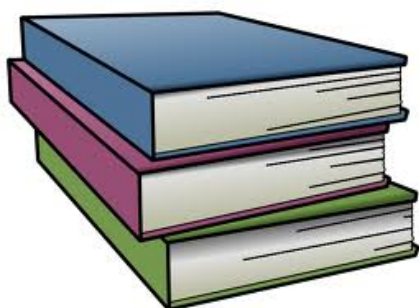
2.3 Three Top Reads.

1. *“Positive Psychology In Clinical Practice.”* by Duckworth et al., (2004). **Abstract:** 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.
2. **“Positive Psychology Progress: Empirical Validation of Interventions.”** By Seligman & Steen (2005). **Abstract:** Positive psychology has flourished in the last five years. We review its recent developments, including books, meetings, courses, and

conferences. We discuss the newly-created classification of character strengths and virtues, a positive complement to the DSM's, and we present some cross cultural findings that suggest surprising ubiquity of strengths and virtues. Finally, we focus on psychological interventions that increase individual happiness. In a six-group, random assignment, placebo-controlled Internet study, we tested five purported happiness interventions and one plausible control exercise. We found that three of the interventions lastingly increased happiness and decreased depressive symptoms. Positive interventions can supplement traditional interventions that relieve suffering and this may someday be the practical legacy of positive psychology.

3. **“Positive Psychology: Past, present, and (possible) future.”** By Lindley et al., (2006). **Abstract:**

What is positive psychology? Where has it come from? Where is it going? These are the questions we address in this article. In defining positive psychology, we distinguish between the meta-psychological level, where the aim of positive psychology is to redress the imbalance in psychology research and practice, and the pragmatic level, which is concerned with what positive psychologists do, in terms of their research, practice, and areas of interest. These distinctions in how we understand positive psychology are then used to shape conceptions of possible futures for positive psychology. In conclusion, we identify several pertinent issues for the consideration of positive psychology as it moves forward. These include the need to synthesize the positive and negative, build on its historical antecedents, integrate across levels of analysis, build constituency with powerful stakeholders, and be aware of the implications of description versus prescription.



3.1 History of Positive Psychology for Clinical Benefits

In 1998, Martin Seligman introduced Positive psychology as its own phenomenon; aiming to expand the focus of clinical psychology building strengths, beyond the individuals vulnerabilities and suffering, supplementing a 'fix-what's-wrong' approach to therapy, with a 'build-what's-strong' approach. Seligman stressed how of a persons' ambitions, positive life experiences and strengths of character could act as a buffer against psychological disorders.

However positive psychology is not a novel phenomenon, with its roots present in philosophical and religious explorations since the time of Socrates, Plato and Aristotle. Positive psychologists did not invent positive emotion, good character or well-being, they brought these ideas to attention for them to be scientifically investigated. Aspects of positive psychology have existed within other areas of psychology for some time, e.g. behaviorism, cognitive therapy, humanistic psychology and existential psychology all contribute to our current understanding of positivity in human experiences; e.g. Freud's (1933/1977) pleasure principle research and Frankl's (1984) work on finding meaning under the most dire human circumstances.

The roots of positive psychology can be traced to humanistic psychology movement, when humanistic psychologists James Maslow (1958) and Carl Rodgers (1961) attempted to make a movement from the focus on negative aspects of human suffering studied at the time, towards the study of healthy, creative and self-actualized individuals. Many of the same questions asked by positive psychologists now have been previously touched upon by humanistic psychologists, e.g. what is the good life? When are individuals at their best? Carl Rodgers, used client-centered therapy, with the belief that individuals had the power to develop and improve their functioning through discovering and understanding themselves (Rodgers 1961). Maslow (1962), was interested in the self-actualization of individuals, maximizing their talents and strengths through therapy. This concept of a self-actualized person, is the basis of much current positive psychology research, developed by Seligman et al (1998).

Philosophy and religion have long questioned what it is that makes us happy. There is evidence that positive psychology interventions have originated from religion, e.g. mindfulness meditation from Buddhism. Mindfulness is the intentionally focused awareness of your immediate experience. Mindfulness meditation has been used to reduce stress, anxiety and depression by getting the individual to focus on and enjoy the experience at the time. This coping strategy that Buddhists have used for thousands of years, has recently aided the growth and development of techniques used in positive psychology for clinical benefits.

3.2 Clinical Application of Positive Psychology Interventions

Seligman et al (2005) aimed to make psychology into a more complete science integrating an understanding of human happiness and suffering and their interactions; focusing on validating interventions that alleviate suffering as well as those increasing well-being and happiness.

Since the emergence of positive psychology in 2000 as the study of positive emotion, positive character and positive institutions (Seligman & Csikszentmihalyi), interventions have advanced with the growth of this field. A variety of happiness interventions have been tested extensively in recent years. Sin & Lyubomirsky define positive psychology interventions (PPI's) as- 'treatment methods or activities aimed at cultivating positive feelings, behaviours or cognitions'. They work to increase individual happiness, which has been found to bring beneficial life qualities; e.g. better health, more successful and more socially engaged (Lyubomirsky, King & Diener), making it fundamental for PPI's to be applied in clinical settings more commonly. There are at least 100 interventions that claim to increase happiness from early Buddhism, through the humanistic psychology of the 1960s, up to the present positive psychology developments.

In 2004, Seligman & Peterson wrote 'Character Strength and virtues: A Handbook and Classification' with its aim to classify psychological well-being the way that the DSM classifies the psychological disorders that disable human beings.

Seligman et al tested five positive psychology interventions (PPI) in one single study in 2005, recruiting 411 adult participants via the internet. They measured each intervention for depression (Center for Epidemiological Studies-Depression Scale (CES-D) symptom survey) and happiness (Steen Happiness Index (SHI)), testing which interventions really work.

Gratitude: Increases happiness

Participants were given one week to write and deliver in person, a letter of gratitude to someone they had never thanked for being especially kind to them.

Three good things in life: Increase of well-being and happiness

Participants were asked to write down three things that went well each day and why, each night for one week. They had to write a cause for each good thing.

You at your best: Promotes positive emotions

Participants asked to write about a time when they were at their best and then try to reflect on personal strengths displayed in the story. They were told to read their story every day for a week and to reflect on the strengths they identified.

Using signature strengths in a new way

Participants asked to take Seligman's inventory of character strengths online (www.authentic happiness.org) (<http://www.authentic happiness.org/>) and to receive individualized feedback about their top five strengths. They then had to use one of these strengths in a new and different way every day for one week.

Identifying signature strengths

Participants had to take the same survey to identify five highest strengths, and then use them more often during the next week.

A placebo control group were asked to write about their early memories every night for one week.

When compared to a control, two positive psychology interventions- *using signature strengths in a new way* and *three good things*, increased happiness and decreased depressive symptoms long-term (6 months). The gratitude exercise triggered the highest initial positive changes for one month, however this boost in happiness was returned back to participant baseline happiness by 3 months. *You at your best*, *identifying signature strengths* and the *placebo group* all created positive but brief effects on happiness and depression.

It was found that continued practice of an intervention led to increased positive outcomes. Participants who continued the exercises after the one week of testing and who adhered to the exercises were the happiest. This shows that long-term effects of PPI's are most pronounced for those who continue the exercises. These positive interventions could be most beneficial if combined in packages together or PPIs as a supplement to therapy focused on alleviating suffering.

META-ANALYSIS

Sin & Lyubomirsky (2009) carried out a meta-analysis which tested whether positive psychology interventions (PPIs) enhance well-being and alleviate depressive symptoms, also aiming to provide practical guidance to clinicians. There were 51 interventions totalling 4266 individuals. Results revealed that PPIs significantly enhance well-being and decrease depressive symptoms. Other factors found to impact the effectiveness of PPIs include depression status, self-selection, participant age and format and duration of interventions. They believe that clinicians should incorporate PPIs into their clinical work, particularly working well with patients who are depressed, older or highly motivated to improve, when delivered as individual therapy for longer periods of time.

General and Clinical Populations

In 2013 a meta-analysis was carried out by Bolger et al, investigating effects of specific PPIs in the general public and in those with psychosocial problems, measuring psychological and subjective well-being and depressive symptoms. Finding various PPIs in the forms of self-help interventions, group training and individual therapy, significantly increase both subjective and psychological well-being and reduce depression.

Couple's Therapy

Kaufman et al (2009) highlighted the effectiveness of the clinical application of PPIs in couples therapy, demonstrating that they can be flexible and adaptive tools. In the case study experiment the 'three good things' exercise was used; where the couple identified their individual strengths and how they could benefit the relationship. This improved the positive emotions and general satisfaction of the couple's relationship, preventing negative emotion from emerging, allowing for a stable relationship.

Suggestions for clinical practice for maximum client improvements:

- Exerting high levels of effort to practice a happiness boosting exercise, and continued practice post intervention result in greater benefits for well-being and depression (Lyubomirsky, 2008., Seligman 2005). So clinician should encourage for these exercises to become part of daily life
- A 'shotgun' approach, where the client practices multiple PPI activities assigned by clinician, may be most beneficial (Fordyce 1977; Seligman 2005)
- Those in individualist cultures, whose values support the pursuit of happiness have been found to benefit more from PPIs than members of collectivist cultures (Lyubomirsky 2008). Therefore the client's cultural background should be considered.

There is overwhelming evidence from meta-analysis studies that have found positive psychology interventions can improve the well-being and alleviate depression for many.

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