Cultivating Subjective Well-Being through Positive Psychological Interventions

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Citation:

Abstract:
Positive Psychological Interventions are activities that have been demonstrated to cause a positive change in a population by increasing a positive variable (e.g., optimism). Although these activities come in a variety of forms and focus on a wide range of positive variables, researchers tend to concentrate their efforts on seven popular and well-researched categories of PPIs that are as follows: meaning, gratitude, strengths, savoring, optimism, empathy, and kindness. Collectively, the PPIs in these domains have been shown to alleviate depressive symptoms, increase pro-social spending and social connectedness, reduce suicidal ideation, increase subjective well-being or happiness, and many other positive changes across diverse populations. Still, there are many questions that warrant discussion for future research such as sex and cultural differences, long-term effects, and antithetical or unexpected reactions to activities. Along with examining these benefits and critiques of PPIs, we discuss the background and state of replicability for each domain.

Keywords: Positive Psychological Interventions, Subjective Well-being, Self-Help

The relatively new field of Positive Psychology has produced a great deal of clinically applicable research through the study of Positive Psychological Interventions (PPIs). In both self-help, research, and clinical practice, well-researched domains such as gratitude, savoring, and kindness encourage individuals to shift their focus away from negative experiences, traits, and circumstances towards the positive (Parks & Biswas-Diener, 2013). The idea of this approach is to strengthen the non-psychopathological qualities of an individual so that one is less susceptible to future psychopathology, and so that distressing symptoms become more manageable. PPIs have been designed and tested for those who are suffering from severe mental or physical ailments (e.g., schizophrenia; cancer), but also for subclinical psychological symptoms (e.g., mild levels of depression and anxiety; management of chronic conditions) and normally occurring problems (e.g., bereavement, vocational anxiety, interpersonal conflict). Furthermore, PPIs enhance individual’s lives that are not experiencing a problem (Seligman & Csikszentmihalyi, 2000). Essentially, unlike other more traditional psychological interventions (e.g., cognitive-behavioral therapy), PPIs are designed to benefit anyone who uses them, regardless of one’s mental state or circumstance.

Parks and Biswas-Diener (2013) proposed a set of criteria to determine which interventions fall under the umbrella of “PPI.” First, the activity must target some positive variable (e.g., positive affect). Thus, researchers typically design PPIs to serve a function through the targeting of a positive variable. For example, some PPIs seek to improve happiness among those who are depressed. The second criterion is that the intervention observably affects that positive variable through experimentation. This second criterion distinguishes between interventions with an empirical basis and those disseminated without research vetting (for example, certain self-help books and programs whose “evidence base” comes from testimonials and public acclaim rather than data). Lastly, there must be empirical evidence that a positive change in the tested population was caused by a change in the positive variable targeted by the intervention. For example, if one were to aim to increase hope in employees who hold high-stress jobs, there must be some evidence that increasing hope actually improves the ability of those employees to persevere at work, reduce their stress, perform better, and so on.
PPIs designed to increase an individual’s happiness and wellbeing generally fall into seven well-researched domains. There are many other areas, such as creativity, courage, patience, and humor (see Parks & Schueller, 2014 for chapters on these emerging areas and others), which have some research basis, but less than those featured in this chapter. In no particular order, the well-researched domains are meaning, gratitude, strengths, savoring, optimism, empathy, and kindness. In this chapter, we examine the theoretical framework, as well as an overview of the interventions, limitations, and future directions, for each of these domains with a particular emphasis on their effect on subjective well-being and happiness.

**Meaning**

Meaning-oriented interventions focus on clarifying an individual's sense of purpose – that which gives one’s life importance. Research suggests that life is generally pretty meaningful and that having meaning may be an important element of good functioning (Heintzelman & King, 2014; Steger, 2012). Due to the complex nature of the construct, there is debate within the field as to which approach, either reductionist (e.g., measuring a single “meaning”) or multidimensional (e.g., measuring various aspects that sum to make “meaning”), is appropriate. Many opt for the multidimensional approach consisting of two parts; although, many people have broken it down further (Martela & Steger, 2016; Leontiev, 2006; Reker & Wong, 1988). The first component is purpose, which is the aspirations or goals an individual possesses. This first component applies to multiple meaning-oriented ideas such as reasons for being in certain relationships or vocational ambitions. The second part is coherence – one’s comprehension about one’s life. This second part relates to the consistency one feels when assigning meaning to one’s lives (i.e., prescribing circumstances and behaviors to one’s bigger picture). Writing in meaning-oriented activities promotes this coherence aspect of meaning in life.

As previously mentioned, an individual can find meaning by examining one’s relationships. In other words, one can find meaning by defining reasons one is in a relationship. Furthermore, one can find meaning within one’s work life through a calling. A calling is a sense of having a religious purpose or devotion to one’s vocation. The difference between a career and a calling is that when someone possesses a calling they experience motivation that is spiritual and does not solely come from the desire to earn money or do a good job. Moreover, Dobrow-Riza & Heller (2015) found in a longitudinal study that individuals who had a stronger early musical career calling were more likely to perceive their abilities as better, which resulted in them pursuing musical careers. Perhaps, this sense of direction in one’s career may lead to well-being.

Consequently, there is evidence to support the claim that there are many psychological benefits to finding and practicing meaning in life. Duffy & Dik (2013) found that developing an understanding of one’s calling leads to higher levels of career maturity. Career maturity deals with one’s ability to process and make difficult vocational decisions. This benefit ultimately leads to better and more fulfilling work outcomes. In a study done by Bassi, Bacher, Negri, and Delle (2013) a successful and a failing insurance company were compared in terms of life satisfaction, well-being, and job-meaning scores. Interestingly, job-meaning scores did not differ between the companies, suggesting that the success of the organization one works at is independent from one’s vocational purpose. However, those at the thriving company experienced higher levels of meaning, life satisfaction, environmental mastery, and autonomy at an organizational level.

An example of a meaning-based PPI is goal-setting (Parks & Layous, 2015). In this activity, individuals set up goals they plan on achieving along with a timeline of when to accomplish those goals. This planning strengthens the purpose aspect of finding meaning in life by determining precise motivations and steps towards progress. Another common meaning-based intervention is reflecting on one’s life as a whole (e.g. Pennebaker’s writing paradigm; see Niles, Halton, Mulyenna, Lieberman, & Stanton, 2014 for a review). This activity can be used to focus on some of the more unexplainable or negative aspects of one’s life (e.g., getting a divorce) by filling in or explaining the negative or confusing times with meaning.

Still, some argue that having a calling may not be beneficial to one’s subjective well-being. This antithetical effect may be explained by the distress individuals feel if they do not live up to their calling; which in some circumstances is probable if one’s career aspirations are particularly unrealistic or challenging to accomplish. Future research should examine the long-term effects of meaning-based interventions using longitudinal designs. A majority of studies on meaning-based interventions focus on the immediate effects or cross-sectional, and thus concurrent, effects instead of the long term. Lastly, gender differences may explain differences in how individuals feel towards their calling. Researchers should seek to differentiate the psychological effects and benefits of having a calling between the genders.

**Gratitude**

The domain of gratitude consists of activities in which an individual exercises one’s appreciation
for the altruistic acts of another individual or individuals. Originally, the sociobiologist Trivers (1971) proposed that the emotion of gratitude is dependent on the cost to benefit ratio one experiences in a relationship. He argued that gratitude is a means of regulating the generous acts from the benefactor so that the natural sensitivity to feeling cheated is controlled. Specifically, he proposed that there is system between individuals called reciprocal altruism. This concept suggests that there are two types of behaviors when giving and taking in a relationship. The first type comprises behaviors of altruism and the second type are behaviors of cheating. He suggests that humans have the tendency to perform both types of behaviors. If either one of these behaviors significantly exceed the other than an individual who is giving more may feel that one is being taken advantage of, which adds tension to the relationship. However, other variables play into controlling this dynamic such as, “friendship, dislike, moralistic aggression, gratitude, sympathy, trust, suspicion, trustworthiness, aspects of guilt, and some forms of dishonesty and hypocrisy” (p. 35). Therefore, gratitude from the individual displaying cheating behaviors may reduce the altruistic individual’s feelings of being cheated.

More recent studies argue that gratitude plays a more critical and complex role than merely regulating the cost-benefit ratio between two individuals. Algoe, Haidt, & Gable (2008)’s Find-Bind-and-Remind Theory proposes that gratitude may also be a reaction to the kind acts of another individual; not just to mediate the relationship. The reaction may occur because acts of altruism stand out in comparison to other more common social interactions. This theory stands apart from traditional theories because the duration and intensity of the relationship between the benefactor and the recipient may not affect the expression of gratitude. This theory recognizes that the experience of gratitude can happen outside of established relationships, where mediating the give-take ratio would be less important than in established relationships.

With the role of gratitude for relationship success in mind, one of the most popular gratitude-based intervention is the gratitude letter exercise. In this activity, individuals write a letter to someone who they are very grateful for, even though they may have never fully expressed their gratitude to that individual. When writing the letter for an appropriate amount of time and length, those taking part in this activity demonstrated an increase in well-being after just ten minutes. Additionally, the benefits of writing a gratitude letter occur regardless of whether the letter is delivered to its intended recipient (Seligman, Steen, Park, & Peterson, 2005) or if it remains undelivered (Boehm, Lyubomirsky, & Sheldon, 2011; Lyubomirsky, Dickerhoof, Boehm, & Sheldon, 2011). Moreover, expressing gratitude is common outside of relationships where individuals are not necessarily grateful for other individuals rather, they are grateful for positive circumstances and situations. One can exercise this kind of gratitude through the three good things activity. In this intervention, individuals write or think about three good things that have happened to them recently or during that same day. Along with being convenient and easy to do daily, this intervention can decrease an individual’s negative affect after just two weeks.

Furthermore, gratitude may decrease stress and depressive symptoms while encouraging higher perceived social support (Wood, Maltby, Gillett, Linley, & Joseph, 2008). This finding supports the idea that practicing gratitude in clinical settings may be helpful in treating some depressive and anxiety disorders. Additionally, gratitude promotes prosocial behaviors to strangers more than general positive affect (Bartlett & Desteno, 2006). These helping behaviors may lead to other benefits typically experienced from kindness and empathy interventions. In addition, Vieselmeyer, Holguin, and Mezulis (2017) found that expressing gratitude after a school shooting (Seattle Pacific University) lead to a decrease in post-traumatic stress symptoms and an increase in post-traumatic growth. This finding suggests that gratitude may be an effective protective and coping mechanism for trauma-related disorders in clinical settings. Lastly, Emmons and McCullough (2003) found that gratitude was able to increase one’s subjective well-being on many on numerous psychological and physical measures.

There is some concern in the literature on the effects one’s cultural background has on the potential benefits of the gratitude interventions. Boehm, Lyubomirsky, & Sheldon (2011) found that Anglo Americans demonstrated a larger increase in life satisfaction than that of the Asian Americans completing the same gratitude-based intervention. In addition, Layous, Lee, Choi, and Lyubomirsky (2013) presented evidence that Koreans may benefit even less from these kinds of interventions. These findings suggest that one’s cultural values affect the outcome of gratitude interventions. Some have also proposed that certain depressive styles affect gratitude interventions. According to Sergeant and Mongrain (2011) self-critics received more benefits from the gratitude intervention than needy individuals. In fact, the gratitude intervention for needy individuals had a negative impact on their self-esteem.

Future research should examine whether or not gratitude affects one’s social support system. There is debate as to whether having strong social support creates gratitude in an individual or if gratitude in an individual causes more people to join one’s social network. Regardless, gratitude may increase perceived social support (Wood, Maltby, Gillett, Linley, & Joseph, 2008). Lastly, researchers should focus on the role
of gender in the style of expressing gratitude (e.g., are women more likely to express gratitude? Are men and women more likely to express gratitude to certain individuals?)

Strengths

An essential virtue of PPIs is focusing on the positive instead of the negative. Likewise, focusing on one’s strengths, instead of one’s weaknesses, is an important area of research for PPIs. Researchers have separated strengths into two types. The first kind are strengths of character (e.g., empathetic, kind, and determined), which are qualities individuals possess as character traits or temperament. The second type of strengths are talents (e.g., good friend or parent, exceptional football player, and natural musician). Strength-based PPIs effectively use both types of strengths, although researchers tend to focus more on character strengths.

The general structure of strength-based interventions is a strength-based assessment brings awareness to one’s strengths, and then a counselor or therapist will explore those findings with the client, although the latter is not necessary. These interventions work by giving an individual feedback and guidance to use those strengths more often, in a novel manner, or as a means of replacing negative or harmful behaviors (Parks & Layous, 2015). For example, strengths assessments may reveal that someone is an exceptionally caring person. One could take this information and try to focus one’s efforts on exercising one’s caring demeanor by doing more volunteer work or taking care of family and friends through small acts of kindness. Similarly, a strengths assessment may reveal that one is remarkably good at considering the different perspectives of others. One may exercise this strength by serving on a college judicial board, or volunteering to help with evaluating applications hiring in one’s department.

Importantly, using one’s talents and character attributes in a positive or novel manner is associated with many benefits. A study by Seligman, Steen, Park and Peterson (2005) demonstrated that strength-based interventions are effective at increasing happiness and decreasing depressive symptoms after just one month. These effects remained present for the 6-month follow-up. Moreover, Park, Peterson, and Seligman (2004) found that certain types of character strengths (e.g., creativity or love of learning) were associated with higher levels of subjective well-being. Generally, agreeableness and extraversion are positively associated with life satisfaction. Similarly, character strengths have been found to be a more potent promoter of resilience than positive affect, self-efficacy, optimism, social support, self-esteem, and life satisfaction (Martínez-Martí & Ruch, 2017). However, an important caveat to strength-based interventions is that one must actually use the identified strengths. Seligman et al. (2005) found that the group in which participant’s strengths were only identified yielded very similar results to the control group. Taking an assessment and talking about one’s strengths does not yield the same benefits as using those strengths – particularly in a novel manner.

A potential downfall to using strength-based interventions is that the participants may be inclined to feel as if the strengths are permanent, and therefore unchangeable (Biswas-Diener, Kashdan, & Minhas, 2011). This can be discouraging to individuals because they may believe that pursuing the strengths serves no purpose because they are immutable. This defeating idea renders the strength assessment ineffective because one must actively pursue and believe that they are able to grow the strengths to receive the benefits. Moreover, there is concern over the inappropriate use of strengths, which may lead individuals into harmful or dangerous situations. For instance, if some individuals discover they have the strength of “zest,” they may apply their enthusiasm to maladaptive behaviors, or they may pursue stimulation-seeking or substances in order to enhance their experience of zest.

One other concern regarding strengths has to do with strengths assessment, which is typically lengthy and cumbersome. Although many real-world settings use more time-efficient workarounds to strengths assessment such as a patient-endorsed checklist, research has not demonstrated whether this type of assessment approach is equally valid. Research should examine the benefits of patient identified strengths instead of assessment or clinician identified strengths. Some have suggested that there may be benefits to simply having an individual assess oneself.

Savoring

When individuals choose to savor, they focus on neglected or forgotten details and experiences. Savoring-based interventions direct individuals to focus on these details (e.g., the intricate tastes of food or the way the air smells). Researchers divide savoring activities into four types. Sharpening perception occurs when an individual focuses on sensory experiences, which can involve all of the senses. Memory building occurs when an individual focuses on significant moments, which may work by inducing an appreciation of the fleeting nature of the present moment (Kurtz & Lyubomirsky, 2012). Reminiscence involves savoring non-sensory experiences (e.g., ridding a fun roller coaster in the past). Lastly, the fourth
type of savoring, related to gratitude, involves relishing the healthy aspects of one’s relationships (Borelli et al., 2014).

There are many other benefits to savoring mentioned in the literature. First, Bryant, Smart, and King (2005) found that a reminiscing intervention lead to greater levels of positive affect when compared to the control group after one week post-study. Furthermore, savoring imaginary future positive experiences (mental time travel) daily for a period of two weeks heightened levels of happiness when compared to savoring negative or neutral imaginary future experiences (Quoidbach, Wood, & Hansenne, 2009). Some research also suggests that certain aspects of savoring (e.g., mindfulness, reappraisal, & meaning) can be a potent buffer against stress (Bryant, 2003). Still, naturally savoring events (i.e., outside of clinical interventions) may be effective. Gentzler, Palmer, and Ramsey (2016) demonstrated that naturally savoring positive events was associated with a higher perception of one’s ability to savor and an increase in subjective well-being.

One of the most popular savoring-based PPIs is a slow and attentive experience of the senses (i.e., sharpening perception). This intervention involves consuming a certain food (e.g., a cookie) slowly and with high levels of focus on the senses. Instead of eating the cookie at a normal rate, an individual performing this intervention might start by smelling and inspecting the textures of the food before taking a bite. Black & Areni (2016) demonstrated that this activity can decrease one’s appetite – filling people up faster with smaller proportions of food. Another activity that uses savoring is focusing on the positive memories an individual has shared with others. This activity involves a slow and concerted effort to remember all the details by mentally re-experiencing the memory as if it were happening again. This type of reminiscing activity may lead to higher overall relationship-satisfaction as well as an increase in positive affect. This effect was particularly present in those whose baseline overall relationship-satisfaction was naturally elevated (Borelli, Rasmussen, Burkhart, & Sbarra, 2015).

Future research should examine the role of everyday savoring on the efficacy of reminiscing-based activities. Essentially, if one habitually savors during any given moment, then one’s recollection of that moment would be more intense and detailed when compared to someone who was paying less attention.

Optimism

Optimism-based activities focus on developing a positive outlook of the future instead of a negative one (Scheier & Carver, 1985). One way in which optimism may affect an individual is by creating a desire to work towards predicted or expected positive outcomes. An important distinction is that optimism and pessimism may not exist on a continuum to form a unidimensional trait. Segerstrom, Evans, and Eisenlohr-Moul (2011) found that optimism and pessimism may be separate constructs; it is possible to be both optimistic and pessimistic at the same time.

Optimism may also work by assisting an individual in forming a positive coherent life narrative (different from a meaning-based coherent life narrative, which is not necessarily positive). Some suggest that optimism creates an illusion of control for an individual in which one feels more secure about one’s ability to control one’s life. In fact, Alloy and Abramson (1979) found that nondepressed individuals tend to overestimate the control they have over their lives whereas depressed individuals tend accurately estimate their control. This finding suggests that optimism may be linked to an overestimation of one’s control over one’s life, which is an essential component to healthy functioning. Additionally, optimism may increase positive and healthy self-serving biases in individuals, whereas depression and pessimism may lead to negative biases (e.g., discounting positive character strengths) (Alloy & Ahrens, 1987).

Arguably, the most notable activity that captures the idea of forming a coherent positive life narrative is the Best Possible Selves (BPS) activity. In this activity, participants write about a future in which they fulfill every expectation and aspiration they desire. The benefits of this activity are effective when completed twenty minutes a day over the course of four days (King, 2001). Another optimism-based intervention is the Life Summary. In this intervention, individuals write about an ideal future in which everything turns out as planned – or better. When combined, these interventions focus on creating a positive coherent life narrative.

A known benefit of optimism-based interventions is an increase in positive affect and positive future expectations, accompanied by a decrease in negative expectations (Enrique, Bretón-López, Molinari, Baños, & Botella, 2017). Peters, Flink, Boersma, & Linton (2010) found that less catastrophizing is associated with a decrease in pain sensitivity and an increase in one’s ability to adjust to painful stimuli. Moreover, there is an association between high levels of optimism and a faster recovery from serious surgeries along with a lower likelihood of recurring illnesses (Balck, Lippmann, Jeszen, Klaus-Peter, & Kirschner, 2016). A proposed explanation for this health-related benefit is that individuals who are high in optimism tend to address their health concerns in a more constructive way. Furthermore, optimism is likely
to increase one’s desire to protect one’s health, higher levels of engagement and coping, lower levels of avoidance and disengagement, and better relationships (Carver, Scheier, & Segerstorm, 2010). One can attribute this finding to optimism’s effects on preparing an individual to expect positive, instead of negative, outcomes. Lastly, optimism may promote subjective well-being by minimizing the distress an individual experiences over events and decreasing depressive symptoms (e.g., as measured in women with postpartum depression) (Carver & Gaines, 1987).

Nonetheless, there is some concern over the malleability of optimism. When examining the benefits of optimism, one has to consider the difference between state and trait optimism. If some individuals are predisposed to optimistic thinking, then there is a possibility that those people may not benefit as much as someone with less dispositional optimism. Likewise, for those less inclined to thinking optimistically, practicing optimism through interventions may feel less natural. A distinction between the effects of state optimism affected by trait optimism (a possible moderator variable) need to be further addressed in the literature. Second, researchers should further examine the effects and benefits of little optimism compared to big optimism. Little optimism has to do with fleeting situational attitudes (e.g., “I am going to make it to work on time!”). Whereas big optimism focuses on large-scale situations (e.g., “The economy is about to flourish!”). Making an important distinction between these types of optimism could be beneficial to future research (Peterson, 2000). Lastly, the literature on optimism-based interventions is lacking in strong longitudinal studies where several interventions occur. As a result, researchers should focus on the long-term effects of practicing optimism.

Empathy

Empathy-based interventions focus on taking another person’s perspective in order to develop a deeper understanding of the feelings another is experiencing. There is a consensus that empathy is multidimensional and composed of both an affective and cognitive component (Decety & Jackson, 2004). The affective component has to do with the sensitivity one has towards experiencing other's emotional states, whereas the cognitive component has to do with the extent to which one is aware of the flexibility and intricacy of others’ thoughts.

Cultivating empathy is beneficial on both an intimate and a professional level. Arriaga & Rusbault (1998) demonstrated that accurately taking a partner's perspective during a conflict leads to a better resolution of that conflict. Additionally, Sadri, Weber, & Gentry (2011) found that, in the workplace, employers who exercised more empathy were more likely to receive positive evaluations and higher productivity from employees. Lastly, in the book “Video Interaction Guidance”, authors Kennedy, Landor, and Todd (2011) explain the benefit of increased well-being from practicing empathy through a relationship-based intervention. A relationship-based intervention focuses on the quality of an individual’s relationship with others as a measure and a means of promoting one’s subjective well-being and overall happiness.

An example of an empathy-based PPI is loving-kindness meditation (LKM). LKM is similar to mindfulness meditation; however, the focus is on building a strong love for others instead of awareness. The love practiced in LKM is one that has no conditions and is not restricted to friends and family, but extends to all living beings. The idea behind LKM is that anyone can practice to attain this particular idealistic feeling of love for others. Additionally, LKM reliably increases subjective well-being (Galante, Galante, Bekkers, & Gallacher, 2014; Hofmann, Grossman, & Hinton, 2011; Shonin, Gordon, Compare, Zangeneh, & Griffiths, 2015). Another empathy-based PPI is self-affirmations – or having empathy for oneself. Self-affirmations fall into two categories (Armitage & Rowe, 2011). The first is attribute self-affirmations which emphasize an individual’s positive attributes and skills. The second type is value self-affirmations which emphasize an individual’s morals. Both type of self-affirmations may promote positive behaviors (e.g., increased fruit intake and cessation of indoor tanning) (Fielden, Little, Sillence, & Harris, 2016; Mays & Zhao, 2016) and increase feelings of self-worth (Dijk, Koningbruggen, Ouwererk, & Wessling, 2011).

Nonetheless, there are concerns within the field that need further investigation on how and when perspective taking and empathy are not always positive. Hodges, Clark, and Myers (2011) discuss how perspective taking when in a competitive environment where resources are limited might cause an adverse reaction for both the empathizer and the target of the empathy. First, when an individual attempts to empathize with someone considered a competitor, one may use that information to figure out the individuals plans instead of trying to form a genuine connection. This misuse of empathy could lead to increased aggression and selfishness if the empathizer finds that the targets perceived plans are threatening (Caruso, Eply, & Bazerman 2006). Second, when a perceived competitor attempts to empathize with an individual the actions of the empathizer may seem disingenuous and manipulative which increases mistrust and competitiveness (Caruso, Epley, & Bazerman, 2007).
Kindness

Kindness interventions aim to promote altruistic behaviors towards others with the intention of fostering positive emotions in the benefactor. One PPI that promotes kindness is prosocial spending – the act of spending money to benefit others. Generally, those with more money tend to be happier than those with less money; however, science on prosocial spending is revealing that how you spend your money also affects happiness. Still, there are times when spending money on others does not increase happiness. Dunn, Aknin, and Norton (2008) suggest that three criteria that allow prosocial spending to be beneficial. The first is relatedness, which deals with others knowing that the act of prosocial spending results in some positive outcome. Essentially, the powerful benefits of prosocial spending are most potent when the benefits to the receiving party are apparent to others. For example, donating to a charity fulfills this requirement well since there is a clear positive outcome that is universally accepted. Lastly, one must feel autonomous in one’s actions. The individual cannot feel as if they were coerced or forced to prosocially spend. If one fulfills these three conditions, prosocial spending may increase happiness and well-being (Dunn, Ashton-James, Hanson, & Aknin, 2010).

There are other guidelines to ensure that practicing acts of kindness is beneficial. First, Lyubomirsky, Sheldon, & Schkade (2005) found that the amount of time in between the acts of kindness affects the benefits to one’s emotional health and well-being. When participants performed single acts of kindness once a day across a week, the benefits were not as strong as when participants performed five acts of kindness in a single day. These activities have little to do with the behavior itself, rather, the reflection of the behavior post-act (Parks & Biswas-Diener, 2013). Additionally, the acts of kindness must have an element of novelty involved. For example, an individual who always holds the door for others would not significantly benefit from holding the door for several people in a single day. However, if an individual who does not hold the door for others suddenly held the door open for everyone they encounter in a single day, they would experience the benefits of acts of kindness to well-being more intensely than the former individual.

Acts of altruism may increase both the giver and receiver’s well-being. Pressman, Kraft, and Cross (2014) concluded that acts of altruism were responsible for a significant increase in positive affect and a decrease in negative affect among the givers in their study. Moreover, Windsor, Anstey, & Rogers (2008) found an inverted U shape between hours spent volunteering and life satisfaction. Individuals who spent little and too much time volunteering reported similar low levels of well-being. Whereas, individual who reported a moderate amount of time volunteering reported the highest levels of well-being. Lastly, a study by Schwartz, Keyl, Marcum, and Bode (2009) found that helping others within a person’s family was associated with benefits to health and subjective well-being.

Nonetheless, there is argument within the field over the need for authenticity when helping others and how the motivation affects the benefits. Future research should examine if having intrinsic motivation is more potent than extrinsic motivation. Additionally, there are several other concerns when studying the benefits of acts of kindness. First, studies should examine if knowing the individual, as opposed to performing the acts of altruism on strangers, affect the benefits. Second, individuals should examine if planned acts of kindness have a different effect than random acts of kindness. Lastly, future research should examine if seeing the individual respond to the acts of kindness affect the benefits.

Conclusion

The study of PPIs has resulted in a wide breadth of scientific knowledge on what is involved in promoting subjective well-being, happiness, and life satisfaction. Despite great strides in the science of increasing subjective well-being – the specific techniques that improve subjective well-being and the key features of interventions such as variability and dosage that result in optimal outcomes – researchers still know little about the underlying theoretical mechanisms that drive well-being interventions. Although for a variety of interventions, many have proposed positive emotion as a mechanism, conversations with other researchers in the field indicate to the second author that more often than not, well-being interventions affect variables like depression with much larger effects than for positive emotion, if there is an effect on positive emotion at all. Other potential mechanisms should be tested and considered such as hope, self-efficacy, and attention towards positive stimuli. Furthermore, it may be that the idea of a single mechanism that underlies well-being intervention is a misnomer, because different techniques operate by different mechanisms. Although seminal work by Fredrickson and colleagues on the Broaden-and-Build Model of Positive Emotions provides an important foundation for understanding how it is beneficial to improve subjective well-being, the search for other mechanisms should also continue.

There are a few other domains that are becoming popular areas of interest among researchers worth
mentioning, though they were beyond the scope of this chapter. First, forgiveness interventions are that which focus on the decision to let go of the negative feelings of anger, resentment, and hurt towards another individual for behaving in a way that was perceived as offensive (DiBlasio, 1998). Forgiveness-based interventions may reduce negative thoughts and feelings and increase positive thoughts and feelings about a transgressor, increase forgiveness self-efficacy (i.e., forgiving without external pressure), and even increase the likelihood that forgiveness will generalize to new situations (Harris et al., 2006). Additionally, forgiveness-based interventions may be effective in helping females who have survived abuse (Freedman & Enright, 2017) and students who experience emotional breakdowns (Mohammadi & HajiAlizadeh, 2017). Secondly, hope interventions and Hope Intervention Programs (HIP) focus on decreasing an individual’s feelings of helplessness, powerlessness, and despair while increasing feelings of self-esteem (Shin & Park, 2007). Hope interventions may increase sexual satisfaction and perceived body image in men who suffer from addiction (Koolae, Eslamei, & Mohammad, 2017) and increase the effectiveness of self-care instructional programs for those suffering from multiple sclerosis (Anderson, Turner, & Clyne, 2017). Lastly, Chamodraka, Fitzpatrick, and Janzen (2016) focused on the effectiveness of hope in a therapeutic setting and found that a good match between a client’s preferences and a clinician’s hope-based input can result in a client having increased faith in the therapeutic process, which leads to an increase in hope as a positive outcome. Overall, these domains of hope and forgiveness need much more research to be on par with the other previously mentioned domains.

Finally, one rising area of interest among researchers and clinicians is the dissemination of PPIs in these aforementioned domains. Although providing clients with worksheets and homework in a therapeutic environment similar to Cognitive Behavioral Therapy (CBT) or Dialectal Behavioral Therapy (DBT) would work, some are opting for a more user-friendly method of delivery to individuals who are not receiving treatment from a licensed professional. This can be done using mobile technology (i.e., smart phone applications), but new methodological considerations arise when conducting interventions over the internet (see Parks, 2014). Nevertheless, technology is a promising avenue for the dissemination of well-being interventions to scale.

In conclusion, PPIs have both theoretical value for the study of how human happiness works as well as practical applications for both therapeutic settings and the general population. Although scientists already have a good depth of knowledge on PPIs, the field is only getting started and has many questions that will guide future research, especially when it comes to realistic dissemination.

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