

An overview of positive psychological therapies and interventions for enhancing and sustaining happiness

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Everyone wants to be happy. Increasing and sustaining happiness is often the goal that clients express when they come to therapy. Historically, psychotherapy has been based on deficit models and alleviating distress. Positive psychological therapies follow positive psychology's strength-based models to go beyond just alleviating distress to enhancing wellbeing and happiness by improving meaningful relationships, cultivating positive emotions, and more. Positive psychology and therapies/interventions drawing on positive psychology have potential to enhance clients' happiness and help them sustain that in the long term. Positive psychotherapies and interventions can help clients evaluate barriers and discover facilitating factors of living a full-life which can contribute to happiness. This is a brief, introductory article for clinicians to gain some basic knowledge about the empirical effectiveness of positive psychology and positive psychological therapies/interventions for enhancing and sustaining happiness and the associated implications.

Keywords: happiness; positive psychology; positive psychotherapy; therapy; well-being

Positive psychology is a scientific field dedicated to describing and understanding what allows individuals to thrive and lead lives that are “most worth living” (Seligman & Csikszentmihalyi, 2000, p. 5). Likely of greater interest to the general lay public, it is “the science of happiness” as Carr (2011) has called it and seems to have potential for helping people enhance and sustain their happiness. Formally introduced to the psychology community as a presidential initiative by Dr. Martin Seligman during his presidency at the American Psychological Association (APA) in 1998, positive psychology has gained momentum in terms of its recognition, research productivity, and applications over the past few decades (e.g., Carr, 2011; Carr et al., 2021; Csikszentmihalyi & Nakamura, 2011; Duckworth et al., 2005; Romano, 2015; Seligman, 2002). Duckworth et al. (2005) provide one of the most comprehensive definitions of positive psychology in the literature as follows:

Positive psychology is the scientific study of strengths, well-being, and optimal functioning. Viewing even the most distressed persons as more than the sum of damaged habits, drives, childhood conflicts, and malfunctioning brains, positive psychology asks for more serious consideration of those persons’ intact faculties, ambitions, positive life experiences, and strengths of character, and how those buffers against disorder. (p. 631)

Positive psychology has called for a shift in how psychologists approach research and practice away from the dominant, disease model marked by a heavy emphasis on human deficits and mental illnesses and into the strengths-based model marked by curiosity and interests in unique individual experiences, potential, and resilience as well as social systems and institutions that facilitate human growth and happiness (Diener & Seligman, 2004; Duckworth et al., 2005; Seligman & Csikszentmihalyi, 2000).

The influence of positive psychology on the broader sphere of psychology is ongoing and dynamic. Peterson and Seligman (2004) developed a positive psychology manual titled *Character Strengths and Virtues: A Handbook and Classification* as a counterpart to the *Diagnostic and Statistical Manual of Mental Disorders* (American Psychiatric Association, 1994) and the *International Classification of Diseases* (ICD; World Health Organization, 1990), advocating for a conceptual framework to classify human strengths. The six core virtues and character strengths elaborated by Peterson and Seligman (2004) include wisdom and knowledge (i.e., creativity, curiosity, open-mindedness, love of learning, perspective/wisdom), courage (i.e., authenticity, bravery, perseverance, zest), humanity (i.e., kindness, love, social intelligence), justice (i.e., fairness, leadership, teamwork), temperance (i.e., forgiveness, modesty, prudence, self-regulation), and transcendence (i.e., appreciation of beauty and excellence, gratitude, hope, humor, religiousness). This classification model was created to help define what qualities are considered human strengths and promote evaluation of positive psychology interventions (Peterson & Seligman, 2004). Their work has inspired a line of research providing empirical evidence for the six virtues and 24 strengths (e.g., Gander et al., 2021; Peterson et al., 2007; Proyer et al., 2013; Proyer et al., 2015; Seligman et al., 2005; Zhang & Chen, 2018).

Within the APA, positive psychology is increasingly embraced, specifically featured in Division 17 Society of Counseling Psychology Section on Positive Psychology and Division 32 Society for Humanistic Psychology Positive Psychology Interest Group. A rich positive psychology literature currently exists, including peer-reviewed journal articles, journal special issues, and other publications devoted to positive psychology topics (Romano, 2015). Furthermore, the focus on positive psychology to promote strengths and resilience is consistent with the emerging field of prevention psychology (Romano, 2015), as predicted to be a trend by Seligman and Csikszentmihalyi (2000).

In the clinical domain, positive psychology interventions are increasingly recognized as a valuable addition to a clinician’s repertoire to decrease depressive symptoms and increase a sense of subjective well-being/happiness (e.g., Boiler et al., 2013; Pinto-Coelho & Relajo, 2017; Sin & Lyubomirsky, 2009). Among various positive psychological constructs, one of the most notable is happiness (Carr, 2011). Psychology research has shown that important determinants of happiness are both nature and nurture. More specifically, it has been suggested that 50% is accounted for by genetic set point or biologically determined aptitude, 40% intentional activities, and 10% life circumstances (Seligman, 2002). What such findings imply is that, although it is important to acknowledge clients biologically determined “set points” or realistic target baselines in achieving well-being, there is room to bring in intentional activities or self-directed actions to help increase happiness. The purpose of this article is to provide a brief overview of positive psychology therapies as a starting point for practitioners who are interested in integrating positive psychology into their clinical work to facilitate optimal functioning and enhance happiness among their clients.

Positive psychology interventions

Positive psychology interventions aim to not just remedy problems such as depression but also enhance well-being and happiness (Carr, 2011). Seligman (2002) suggested that the following strengths can be amplified through therapy: courage, interpersonal skills, rationality, insight, optimism, honesty, perseverance, realism, capacity for pleasure, broader perspective, future orientation, and purpose. Such amplification of character strengths may be associated with increased happiness (e.g., Huber et al., 2021; Peterson & Seligman, 2004; Zhang & Chen, 2018).

There are various ways to implement or integrate positive psychological therapies in clinical practice. First, positive psychological techniques can be used as add-in interventions in other therapeutic approaches. There are a variety of positive psychology interventions such as loving-kindness meditation (e.g., Fredrickson et al., 2008; Zeng et al., 2015), gratitude exercises (e.g., Emmons & McCullough, 2003; Wood et al., 2010), and the utilization of signature strengths (e.g., Gander et al., 2021; Peterson et al., 2007; Peterson & Seligman, 2004; Proyer et al., 2013; Proyer et al., 2015; Zhang & Chen, 2018) whose effectiveness in enhancing happiness/well-being have been actively investigated by researchers. Such positive psychological techniques can be integrated into existing therapeutic approaches. For example, Conoley et al. (2015) proposed the integration of positive psychology into family therapy to promote future orientation, strengths, resourcefulness, and resilience within the whole family system. For readers who are looking to expand their intervention repertoires, the Greater Good in Action website (<https://ggia.berkeley.edu/>) by the University of California, Berkeley Greater Good Science Center provides an accessible repertoire of positive psychology interventions. For readers who are interested in exploring the rich positive psychology literature but are unsure where to begin, we recommend the following resources: the Positive Psychology Center at the University of Pennsylvania website (<https://ppc.sas.upenn.edu/>), the World Database of Happiness (<https://worlddatabaseofhappiness.eur.nl/>), and the Compassion Database by the Center for Compassion and Altruism Research and Education at Stanford University School of Medicine (<http://ccare.stanford.edu/research/compassion-database/>).

Second, positive psychology interventions can constitute one's primary theoretical orientation as in solution-focused brief therapy (SFBT) (Bannink & Jackson, 2011) which focuses on client resources and strengths to cultivate a positive, hopeful perspective on life and work toward solutions of psychological issues at hand. Finally, positive psychology interventions can be integrated as a core component of a standardized program. For example, Positive Psychotherapy (Rashid & Seligman, 2018) is a manualized program that includes experiencing positive emotions (pleasant life), using signature strengths (engaged life), and maintaining meaningful relationships with family, friends, partners and institutions larger than self (meaningful life). Fava's well-being therapy (Fava & Ruini, 2003) is an empirically-based treatment (EBT) that was developed from well-recognized cognitive behavior therapy and tends to focus on relapse prevention, Negative Automatic Thoughts that detract from happiness, and encouraging happiness enhancing activities. Quality of Life Therapy by Frisch (2005) is another EBT manualized treatment in which positive psychology is integrated into cognitive therapy which covers ways to fulfil cherished wishes in 16 life domains, improving self-care, practicing relaxation, and exploring life meaning. Post-traumatic growth therapy (Tedeschi, Calhoun, & Groleau, 2015) is another example in this category. Post-traumatic growth therapy focuses on positive changes after trauma, including newly discovered personal strengths, awareness of new possibilities in life, improved relationships, and a sense of purpose and meaning in life to help clients build new and more resilient assumptions about self, others, and the world.

Meta analyses have provided promising evidence supporting the effectiveness of positive psychology interventions (e.g., Boiler et al., 2013; Carr et al., 2021; Sin & Lyubomirsky, 2009). Positive psychotherapies do appear to promote well-being, happiness, and flourishing yet the evidence about symptom reduction currently appears to be inconclusive. Therefore, Jankowski et al. (2020) encourages a "dual focus that uses distinct interventions to target symptoms and well-being" (p. 291). The inconclusive evidence supporting symptom reduction does not necessarily mean that symptoms are not being significantly reduced. It may well be more a reflection of the fact that many studies investigating the effectiveness of positive psychology interventions have been plagued by methodological limitations, including lack of rigorous experimental control/design (Carr et al., 2021). Future research with more sophisticated research designs, including randomized control trials is needed to further clarify the effectiveness and applicability of positive psychology interventions for both clinical and non-clinical populations.

CONCLUSION

The advent of positive psychology has promoted a shift in the broader field of psychology away from the pathologizing perspective on human functioning to the strengths-based, empowering view on human functioning that attempts to enhance and sustain happiness. Just as Seligman and Csikszentmihalyi (2000),

in their seminal work published 22 years ago, predicted, there has been a significant and impactful rise of positive psychology:

We believe that a psychology of positive human functioning will arise that achieves a scientific understanding and effective interventions to build thriving in individuals, families, and communities. You may think that this is pure fantasy. You may think that psychology will never look beyond the victim, the underdog, and the remedial, but we want to suggest that the time is finally right for positive psychology. (p. 13)

Given the thriving literature on positive psychology (e.g., Carr et al., 2021; Donaldson et al., 2015; Seligman et al., 2005), it is our hope that positive psychology interventions continue to be normalized and integrated into clinical practice across settings so that as a field we can collectively work toward enhancing and sustaining our clients' happiness/well-being as well as their ability to progress toward their full potential. Should more clinicians gain sufficient competence in positive psychological therapies, there could be important happiness and well-being implications not only for their individual and group clients but also idealistically for macro societal sustainable happiness and well-being.

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