CHAPTER 1

Introduction to Positive Psychology

Learning Objectives
Positive psychology is the study of topics as diverse as happiness, optimism, subjective wellbeing, and personal growth. The opening chapter has two goals: (1) to describe and critically examine the emergence and development of this new field in recent years and (2) to orientate students to some of the topics studied by positive psychologists. At the end of the chapter you will have the opportunity to complete questionnaires on some of the main topics in positive psychology.

List of topics
- The scope and aim of positive psychology.
- The history of positive psychology.
- How we measure happiness.
- The good life and authenticity.
- Humanistic psychology.
- Where positive psychology stands today.
Chapter 1  Introduction to Positive Psychology

MOCK ESSAY QUESTIONS

1 Critically discuss the differences between ‘positive’ psychology and ‘psychology as usual’.
2 Is positive psychology as different from humanistic psychology as it claims to be?
3 Why might we need positive psychology?

What is positive psychology?

In today's world, society is facing extremely tough challenges in the form of global warming, natural disasters, economic recession, unprecedented homelessness, terrorism and the draining continuation of war. With all this sadness and horror, where in the world does a science based on testing happiness, wellbeing, personal growth and ‘the good life’ fit into the modern-day agenda?

This textbook will take you through the new science of positive psychology, which aims to ‘understand, test, discover and promote the factors that allow individuals and communities to thrive’ (Sheldon et al., 2000). Positive psychology focuses on wellbeing, happiness, flow, personal strengths, wisdom, creativity, imagination and characteristics of positive groups and institutions. Furthermore, the focus is not just on how to make individuals happy, thereby perpetuating a self-centred, narcissistic approach, but on happiness and flourishing at a group level as well. We will look at how individuals and groups thrive and how increasing the wellbeing of one will have a positive effect on the other, leading to a win-win situation.

What we hope to demonstrate, throughout this textbook, is that positive psychology is not simply the focus on positive thinking and positive emotions. It’s much more than that. Indeed, the area of positive psychology is focused on what makes individuals and communities flourish, rather than languish. Flourishing is defined as ‘a state of positive mental health; to thrive, to prosper and to fare well in endeavours free of mental illness, filled with emotional vitality and function positively in private and social realms’ (Michalec et al., 2009: 391). Indeed, existing figures show that only 18 per cent of adults meet the criteria of flourishing, 65 per cent are moderately mentally healthy and 17 per cent are languishing. Unsurprisingly, flourishing has several positive correlates such as academic achievement, mastery goal setting, higher levels of self-control and continued perseverance (Howell, 2009). Thus, a science that focuses on the development and facilitation of flourishing environments and individuals is an important addition to the psychological sciences.
Authentic happiness and the good life

Positive psychology concentrates on positive experiences at three time points: (1) the past, centring on wellbeing, contentment and satisfaction; (2) the present, which focuses on concepts such as happiness and flow experiences; (3) the future, with concepts including optimism and hope. Not only does positive psychology distinguish between wellbeing across time points but it also separates the subject area into three nodes:

- the subjective node, which encompasses things like positive experiences and states across past, present and future (for example, happiness, optimism, wellbeing);
- the individual node, which focuses on characteristics of the ‘good person’ (for example, talent, wisdom, love, courage, creativity); and
- the group node, which studies positive institutions, citizenship and communities (for example, altruism, tolerance, work ethic) (Positive Psychology Center, 1998).

Contrary to criticism, positive psychology is not a selfish psychology. At its best, positive psychology has been able to give the scientific community, society and individuals a new perspective on existing ideas as well as providing empirical evidence to support the phenomenon of human flourishing. Above all, though, positive psychology has challenged and rebalanced the deficit approach to living while connecting its findings to many different disciplines. Throughout this textbook you will see how inducing positive emotions, committing acts of kindness and enhancing social connections enable individual and societal flourishing, demonstrating the usefulness of the discipline for individual, group and community wellbeing.

Think about it...

Why have you decided to take this module? What was it about the syllabus that attracted you? Past experiences? A certain topic? Take a moment to reflect on this.

Authentic happiness and the good life

What is the good life? Socrates, Aristotle and Plato believed that when people pursued a virtuous life, they would become authentically happy. Epicurus and later utilitarians preached that happiness was indeed the abundance of positive feelings and pleasures. Positive psychology has traditionally conceptualized authentic happiness as a mix of hedonic and eudaimonic wellbeing (Seligman and Csikszentmihalyi, 2000). Hedonic happiness encompasses high levels of positive affect and low levels of negative affect, in addition to high subjective life...
satisfaction (Diener, 1999). Eudaimonic wellbeing focuses more on the creation of meaning and purpose in life, although the distinction between these two concepts is subject to debate (Kashdan et al., 2008; Keyes and Annas, 2009; Tiberius and Mason, 2009).

The notion of ‘authentic happiness’ has been further broken down by Seligman to indicate a life that is a combination of a pleasurable life, an engaged life and a meaningful life. The pleasurable life encompasses feelings of positive emotions (for example, joy, gratitude, serenity, interest, hope, pride, amusement, inspiration, awe and love – Fredrickson, 2009), which are integral components to our success and wellbeing. Positive emotions widen our thought processes, which can be built up over time and banked to create a ‘protective reservoir’ upon which a person can draw from during unpleasant or distressing times (more about this in Chapter 2).

The engaged life focuses on flow, engagement, absorption and wellbeing, while the meaningful life encompasses service to something higher than the self. Thus, individuals can find happiness with the pursuit of all three ‘lives’. At present, the concept of authentic happiness is more a theory than a causal recipe for happiness (Rashid, 2009a). As positive psychology continues to grow and develop more longitudinal databanks, we will know more about how these three ‘lives’ work in harmony to enhance wellbeing.

Think about it...

Sheldon (2009) defines authenticity as ‘emotional genuineness, self-attunement and psychological depth’. Humanists originally believed that you couldn’t study such abstract concepts, whereas other theorists, such as Freud believed that one could never be authentic.

1. Do you agree or disagree with these arguments?
2. Can you think of a time when you have been truly authentic or inauthentic to your self?
3. How do you know when you are being truly authentic?

The origins of modern-day positive psychology

The person regarded as being responsible for the creation of the positive psychology movement is Martin E. P. Seligman, a professor at the University of Pennsylvania. After decades of experimental research and success with his learned helplessness theory, Seligman was appointed President of the American Psychological Association (APA) in 1998. It was during his inauguration at the 107th Annual Convention of the APA in Boston, Massachusetts, 21 August 1999,
that Seligman decided to introduce his agenda to correct the trajectory of modern day ‘pathologically focused’ psychology. Since Seligman’s presidential position, he has become a figurehead for the positive psychology movement and continues to gain support from research funds and governments across the world to include positive psychology theories and practices into daily life.

A

lthough not an experiment, the story of Seligman and his rose garden has become a folk legend in the discipline of positive psychology. By his account, positive psychology started from an epiphany he experienced while attending to his rose garden. His daughter, who was five at the time, had been trying to get her father’s attention. Seligman turned to her and snapped. Unhappy with this response, his daughter asked him whether or not he remembered how she used to whine when she was three and four? She told him that when she turned five she decided to stop – and if she was able to stop whining, then he was able to stop being a grouch! This revelation of developing what was right, rather than fixating on what was wrong, sparked what Seligman would go on to promote during his career as APA president: that we should be teaching our children and ourselves to look at our strengths rather than weaknesses.

See Seligman and Csikszentmihalyi (2000) for the original account.

Psychology as usual (pre-1998)

Unbeknown to the general psychology population, there were three tasks of psychology prior to World War Two. These were to: (1) cure mental illness; (2) enhance the lives of the normal population; and (3) study geniuses. Due to the aftermath of two world wars and the return of many psychologically impaired soldiers, research funding focused on its first agenda, with the other two nearly forgotten (Linley, 2009).

We must acknowledge that this funding for mental disorders has been immensely successful, as at least 14 disorders can now be cured or considerably relieved (Seligman and Csikszentmihalyi, 2000). Unfortunately, these fixations on pathology led to psychology becoming a ‘victimology’. Instead of viewing humans as proactive, creative, self-determined beings, psychologists viewed humans as passive individuals subjected to external forces (Seligman and Csikszentmihalyi, 2000). Hence, the main difference between post-World War Two psychology and today’s positive psychology is in the question asked: ‘Why do these individuals fail?’ versus ‘What makes some individuals succeed?’
The message of the Positive Psychology movement is to remind our field that it has been deformed. Psychology is not just the study of disease, weakness, and damage; it also is the study of strength and virtue. Treatment is not just fixing what is wrong; it also is building what is right. Psychology is not just about illness or health; it is about work, education, insight, love, growth, and play. And in this quest for what is best, Positive Psychology does not rely on wishful thinking, self-deception or hand-waving; instead it tries to adapt what is best in the scientific method to the unique problems that human behaviour presents in all its complexity.

– (Seligman, 2002b).

Think about it...

From 1972 to 2006, the ratio of depression research publications to wellbeing publications was 5:1. We challenge you to undertake your own calculations on PsychInfo, to see where the ratio is currently at today.

Depression and mental illness

Depression and mental illness are still important issues within our society and positive psychology researchers do not negate this. Indeed, statistics indicating the occurrence of depression were and are still worrying. Depression was ten times higher in 2009 than it was in 1960, with the mean age for depression today being 14.5 (compared to 29.5 in 1960). Furthermore, at any one time, about 2 per cent of the population is suffering from depression and 14 per cent of us will experience depression by the age of 35 (compared to 2 per cent in the 1950s) (Keyes and Michelac, 2009).

The results of the Global Burden of Disease Study (1996) found depression to be among the top five illnesses contributing to disability in life adjusted years (the total number of years a person lives with disabilities). Indeed, mental disorder came only second to cardiovascular disease.

Mental illness costs the USA over $40 billion per annum and this figure continues to rise (Keyes and Michelac, 2009). Staggering new statistics suggest that up to 50 per cent of us will experience some mental disorder in our lifetime. Furthermore, once we have experienced a mental disorder we are far more likely to experience another again in the future. The rise in documented occurrences may also be due to the reduced stigma involved in seeking help for depression in addition to public awareness of mental disorders.
Disease model debate

Originally, the idea of positive psychology was to move away from the disease (medical) model (Figure 1.1), which fixated on moving people from a −8 to −3 or severely depressed to mildly depressed. Positive psychology, on the other hand, situated its focus on people who fell at +3 (languishing) and helped to raise them to a +8 (flourishing). We find this model an easy, simple visual when teaching our students to differentiate between the ‘main aims’ of positive psychology.

<table>
<thead>
<tr>
<th>Psychosis, neuroticism</th>
<th>Wellbeing, contentment, bliss</th>
</tr>
</thead>
<tbody>
<tr>
<td>Depression, disorder</td>
<td>Excitement, cheerfulness</td>
</tr>
<tr>
<td>Focus on flaws</td>
<td>Focus on strengths</td>
</tr>
<tr>
<td>Overcoming deficiencies</td>
<td>Building abilities</td>
</tr>
<tr>
<td>Avoiding pain</td>
<td>Seeking pleasure</td>
</tr>
<tr>
<td>Running from unhappiness</td>
<td>Engaging happiness</td>
</tr>
<tr>
<td>Neutral state (0) as ceiling</td>
<td>No ceiling (you can keep going)</td>
</tr>
</tbody>
</table>

FIGURE 1.1 Disease/health model

Of course, the analogy is simple and did the trick at a time when clarification between the psychologies was needed. However, this theoretical model assumes that people can be at zero; but what is zero? And what does it really mean to be +3? The model assumes that positive psychology cannot help those on the negative end of the scale. However, we now have evidence that positive psychology interventions can benefit people who are diagnosed as clinically depressed in addition to the normal population (Sin and Lyubomirsky, 2009).

Furthermore, the diagram calls into question the meaning of health. What exactly is ‘health’ and when do we exhibit mental health versus mental illness? Since 1948, the World Health Organization has defined health as ‘a state of complete physical, mental and social wellbeing and not merely the absence of disease or infirmity’ (World Health Organization, 1948: 200). In 1958, Austrian psychologist Marie Jahoda wrote her major contribution to psychology, titled Ideal Mental Health, which listed six criteria or six characteristics found within the normal population: (1) efficient self-perception; (2) realistic self-esteem and acceptance; (3) voluntary control of behaviour; (4) true perception of the world; (5) sustaining relationships and giving affection; and (6) self-direction and productivity. She argued that these six criteria were needed to establish ‘positive mental health’. Her studies were amongst the first to attempt to operationalize positive functioning and her findings are not far divorced from what we know about mental health and wellbeing today.
Corey Keyes, a shining example of a positive sociologist, has spent years looking at the relationship between mental health and mental illness. His work brought him to conclude that the two are not on the same continuum, and that they are two separate continuums. Thus, the absence of mental illness does not equate to the presence of mental health. As research has continually found that the absence of mental health is as damaging as the presence of mental illness, Keyes proposed two strategies for tackling mental disorder: (1) the promotion and maintenance of mental health; and (2) the prevention and treatment of mental illness (Keyes and Michalec, 2009).

History of positive psychology

One of the criticisms of positive psychology is that the ideas are not new. Even the term ‘positive psychology’ was used by Abraham Maslow, many decades before Seligman (Maslow, 1954: 201). However Seligman has done a phenomenal job of bringing the thoughts and ideas of past researchers, philosophers and scientists back to our consciousness. We have identified four groups of individuals who were looking at ‘the good life’ before the discipline of positive psychology even existed. Let’s begin with the Ancient Greeks...

Greeks

Aristotle’s (384–322 BCE) greatest contribution to philosophy is arguably his work on morality, virtue and what it means to live a good life. As he questioned these topics, he concluded that the highest good for all humanity was indeed eudaimonia (or happiness). Ultimately, his work argued that although pleasure may arise from engaging with activities that are virtuous, it is not the sole aim of humanity (Mason and Tiberius, 2009).

Utilitarianism

Utilitarianism, created by Jeremy Bentham and carried on by John Stuart Mill, is a philosophy that argued that the right act or policy from government is that which will cause ‘the greatest good for the greatest number of people’, also known as the ‘greatest happiness principle’, or the principle of utility. Utilitarianism was the first sector that attempted to measure happiness, creating a tool composed of seven categories, assessing the quantity of experienced happiness (Pawelski and Gupta, 2009). Whereas philosophers before had assumed that happiness was not measurable, utilitarianism argued and attempted to demonstrate that it was indeed possible. Pawelski and Gupta (2009) proposed that utilitarianism influences some areas of positive psychology today, such as subjective wellbeing and the pleasurable life. Ultimately, positive psychology accepts that while pleasure is a component of overall...
wellbeing, it is not enough, and the inclusion of eudaimonic pursuits is necessary as a complement to utilitarian philosophy.

William James
A brilliant scholar, William James is best known for his contribution to psychology through his widely read text, *The Principles of Psychology* (James, 1890). James originally trained as a medical doctor at Harvard University, Boston, USA, before becoming interested in religion, mysticism and epistemology (Pawelski, 2009). His chapter, ‘The Emotions’, is most relevant for positive psychology to acknowledge. He suggests there that emotions come after we have physically acted out. For example ‘common-sense says, we lose our fortune, are sorry and weep; we meet a bear, are frightened and run; we are insulted by a rival, are angry and strike. The hypothesis here to be defended says that this order of sequence is incorrect . . . that we feel sorry because we cry, angry because we strike, afraid because we tremble . . . ’ (James 1890: 1065–6). This was one of the first examples, if not the very first example, of writing to connect emotions and expressions together. His years of intertwining physiology, psychology and philosophy still have an impact in philosophical issues surrounding the mind, the body and the brain today.

Humanistic psychology
Humanistic psychology emerged in the late 1950s and early 1960s as a backlash to the predominant psychological theories of psychoanalysis, behaviourism and conditioning. The humanistic movement introduced and solidified qualitative inquiry as an imperative paradigm to research human thought, behaviour and experience, adding a holistic dimension to psychology. In a nutshell, humanistic psychology is the psychological perspective that emphasizes the study of the whole person. Humanistic psychologists believe that: (1) individuals’ behaviour is primarily determined by their perception of the world around them and their personal meanings; (2) individuals are not solely the product of their environment or their genes; and (3) individuals are internally directed and motivated to fulfil their human potential.

The main drive of humanistic psychology was to focus on mental health, specifically positive attributes such as happiness, contentment, ecstasy, kindness, caring, sharing and generosity. Humanists felt that, unlike their behaviourist cousins, humans had choice and responsibility for their own destiny. This perspective ultimately views life as a process, with all humans beholding an innate drive for growth and fulfilment of potentials. The humanists even went as far as to include spiritual proprieties of the self, the world and wellbeing; an area that is controversial even in today’s scientific societies.

So, even back then, psychologists were aware of the deficit in research on the positive side of life. Some positive psychologists have argued that the reason why the humanistic
Unfortunately, positive psychology didn’t start off on the right foot with its humanistic cousins. In the beginning, there was a clear drive to separate positive psychology from the humanistic discipline, claiming a major difference in methodological inquiry. Positive psychology is the scientific study of wellbeing, and therefore uses the scientific method to test hypotheses. We believe that there is much that positive psychology can learn from and continue to learn about the humanistic movement and this need to separate from the humanistic appears divisive and unnecessary.

Humanistic psychology criticizes positive psychology for its short-sighted drive to separate itself from the humanistic discipline, as by adopting this approach, it has left out vital areas of research and methods of inquiry (qualitative) that limit the generalization of its main findings. Furthermore, humanistic psychologists feel that to prove that positive psychology is indeed ‘scientific’ it has overcompensated and stuck to quantitative inquiry. This is a very important historical fact that students must be aware of when undertaking their studies in positive psychology. We truly believe that in order to understand where we are in positive psychology we have to know where we have come from.

Abraham Maslow

Abraham Maslow was one of several eminent psychologists who embodied the humanistic movement and what it stood for. Maslow was a very famous psychologist across many disciplines and actually coined the term ‘positive psychology’ (Maslow, 1954: 201). Mostly known for his model of a ‘hierarchy of needs’, Maslow emphasized the need for psychology to focus on human potentialities rather than just human deficiencies (Bridges and Wertz, 2009). Thus, he desired a more positive approach toward psychology. His major contributions to psychology as a whole were his theories on motivation, needs, self-actualization and peak experience.

_The science of psychology has been far more successful on the negative than on the positive side: it has revealed to us much about man’s shortcomings, his illnesses, his sins, but little about his potentialities, his virtues, his achievable aspirations, or his psychological height._

(Maslow, 1954: 201)
Can we measure happiness?

This is one of the most fundamental questions for positive psychology. Indeed, much of the reason why the topics and concepts within positive psychology were not previously studied was because they were believed to be ephemeral and too difficult, if not impossible, to study and measure. By creating and testing scientific measurement tools as well as experimental methods, scientists/psychologists have taken philosophical concepts of virtue and happiness and put them to rigorous, scientific testing.

You will read repeatedly how positive psychology is a science, not a self-help technique that uses the scientific method to understand human thoughts, feelings and behaviours. When psychology was first making its way into history, its practitioners wanted to adopt the same scientific rigour as the natural sciences, such as biology and chemistry. These sciences are based on objective testing and the positivist epistemological paradigm. This epistemology uses experimentation, logical deduction and rational thought to examine the world whereby knowledge is obtained by direct, objective observation. Facts and knowledge lead to laws and predictions for human nature and can determine causal relationships (cause and effect).

Epistemology

Epistemology is a branch of philosophy concerned with the acquisition of knowledge. A multitude of philosophical viewpoints surround methodological paradigms. Researchers must therefore choose which epistemological position they believe best suits their research question. The four main paradigms include: post-positivism, constructivism (social constructionism), advocacy/participatory and pragmatism.

There are, however, several critiques of the scientific method, to which we will allude throughout the textbook. First of all, it does not acknowledge historical, cultural and societal factors. In reducing people to numbers and averages, this method ‘oversimplifies’ human behaviour and neglects the individual (Langdridge, 2004a, 2004b). Furthermore, positive psychology, in its attempt to be considered a ‘proper science’ has separated itself from the use of qualitative methods, which are imperative adjunct methods of data collection, used to explain and explore topics and results within the discipline.
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Think about it...

What do you consider to be ‘good evidence’? What is truth? Can research be totally objective? Write down your answers and think of examples to argue your points. (Adapted from Forrester, 2010: 19.)

Where is positive psychology today?

As mentioned, the positive psychology movement has gained massive momentum over the past years. After Seligman’s speech, researchers gathered in Akumal, Mexico, from 1999 to 2002, to discuss development of the new area of positive psychology. At the same time, researchers were holding national and international summits from Lincoln, Nebraska to Washington DC, which continued to thrive (Linley, 2009).

There are currently hundreds of undergraduate classes in positive psychology across the world as well as two Masters programmes in applied positive psychology, the first founded in 2005 by Seligman at the University of Pennsylvania, and the second founded in 2007 at the University of East London, UK. Italy, Portugal and Mexico are currently creating Masters courses in positive psychology in their own languages.

At present, there are several conferences offered by the European Positive Psychology Network (Boniwell, 2009). The First World Congress of Positive Psychology was held on 18–21 June 2009 in Philadelphia, Pennsylvania, USA. Finally, a sign of the strength of the movement lies in the fact that positive psychology boasts its own academic, peer-reviewed journal, Journal of Positive Psychology, founded in 2006.

In the UK, several positive psychology resources contribute to the positive psychology research base. We work within the London Partnership for Positive Psychology in Practice (LP4), which provides access to leaders in the field of positive psychology as well as opportunities for collaboration of research and consultancy. Furthermore, the Centre for Applied Positive Psychology at Warwick, UK, runs online short courses on positive psychology as well as consultancy projects.

Positive psychology’s place

The discipline of psychology can be divided into a vast number of different areas. The American Psychological Association has 56 branches, while the British Psychological Society recognizes nine chartered areas of psychology: clinical, counselling, educational, forensic, health, neuro-psychology, occupational, sport and exercise, and teachers/researchers in psychology. However, where exactly does positive psychology fit within the accepted psychology disciplines?
There is disagreement regarding whether positive psychology is a separate discipline in itself or if it encompasses the entire field of psychology. For example, Figure 1.2 shows how positive psychology can be situated within mainstream psychological disciplines. Other links can be drawn to humanistic psychology, psychiatry, sociology, biology and other subject areas. However, whether or not positive psychology will become a separate discipline remains to be seen.

Positive psychology has rapidly grown in the past few years and spans a multitude of areas and disciplines. You only have to look at the mind map in Figure 1.3 to gain a sense of how this area is spreading.

**Think about it…**

What might be missing from this mind map? As you go through this textbook, create your own visual mind map, which will help you understand the many links within positive psychology.

Positive psychologists would argue that psychology should also expand its focus to improve child education by making greater use of intrinsic motivation, positive affect and creativity; improve psychotherapy by developing approaches
that emphasize hope, meaning and self-healing; improve family life by better understanding the dynamics of love, parenthood and commitment. They would argue that it should improve work satisfaction across the lifespan by helping people to find authentic involvement, experience states of flow and make genuine contributions in their work; that it should improve organizations and societies by discovering conditions that enhance trust, communication, and altruism; and that it should improve the moral character of society by better understanding and promoting the spiritual impulse.

One thing to note is that many researchers in these areas of expertise were working on them before positive psychology was even born. What suddenly makes...
some of these areas now ‘positive psychology’ rather than say clinical or sport psychology? For example, since the early 1980s, research has been conducted on how coaches and athletes can achieve peak performance. From the vast amount of data collected, theories about motivation, planned behaviour, mastery and success have been cross-fertilized with other areas of psychology. In particular, sport psychology and performance psychology appear to seek the same outcome. Sport tends to look at the best performers and adapt their strategies to those who can improve further, as does positive psychology, which looks at those who are flourishing and shares this information with the normal population. The authors believe that collaboration with these two areas is essential for positive psychology.

**Topics we will cover in this textbook**

Areas with significant amounts of research include subjective wellbeing, positive affect, hope, optimism, resilience, post-traumatic growth, goals, meaning and strengths (Snyder and Lopez, 2007). Each chapter is created to cover similar or connected areas of positive psychology.

More specifically, Chapter 2 focuses on the concepts of positive emotions and emotional intelligence. Chapter 3 discusses hedonic happiness and the concept of subjective wellbeing (SWB). Following from this, Chapter 4 questions the concept of SWB with eudaimonic theories, including psychological wellbeing and self-determination theory. No course on positive psychology would be complete without studying the theory of optimism, positive illusion and hope (Chapter 5). Chapter 6 focuses on resilience, post-traumatic growth, wisdom and positive ageing. Chapter 7 fixes on meaning and goal theories and their association with wellbeing. The last few chapters focus more on the applied nature of positive psychology, looking at strengths and interventions and how we can apply them within corporate organizations, schools, health centres and therapeutic surroundings. The last chapter looks at the discipline from a more critical viewpoint, with scholarly predictions of where this new and exciting discipline will end up.

So, from our review of positive psychology yesterday, today and tomorrow, we hope we’ve shown you that the topics have history and decades of research behind them. They were in fruition before the umbrella term and will, hopefully, continue to be so in the future, whether or not the movement solidifies its place in psychology. Positive psychology has definitely identified groups of fragmented researchers focusing on the positive side of human behaviour, thought and feelings and given them a common thread. Indeed, some scientists may be positive psychologists and not know it (Diener, 2003).
Summary

Reflecting on the learning objectives, you should now understand the main aims of positive psychology and its components. More specifically:

- Positive psychology is the science of wellbeing and optimal functioning.
- There are three levels to positive psychology: the subjective node, the individual node and the group node.
- Positive psychology has a rich history within ancient Greek philosophy, humanism and several areas of mental health.
- Humanistic psychology is a close cousin of positive psychology, the main difference being positive psychology’s focus on the use of the scientific method.
- We will cover a wide variety of topics, ranging from positive emotions to trauma and growth.
- Positive psychology is not simply a ‘happiology’; it is intended as a supplement to ‘psychology as usual’.

Suggested Resources

www.positivepsychology.org.uk
This is our positive psychology UK website, which focuses on leading positive psychology researchers and their findings.

www.authentichappiness.org
The original ‘go to’ website, authentic happiness is a place where you can access all of the leading positive psychology tools, participate in research and learn about current research from Seligman himself.

www.ippanetwork.org
This is a website dedicated to researchers in positive psychology, with access to full membership reserved for psychologists and MSc graduates in positive psychology. Details of conferences are available to the public.

www.enpp.eu
This is the European Network for Positive Psychology, with highlighted representatives for countries within Europe, as well as their conference details and abstract submission deadlines.

www.cappeu.com
A work-based applied centre in Warwick – this is ideal for those looking to see the applied nature of positive psychology in business.

www.neweconomics.org
A leading research/policy think tank based in London.
Further questions for you

1. What do you feel is novel about positive psychology?
2. If this is positive psychology, does that mean all other psychology is negative? Discuss.
3. Why do you think positive psychology is needed in today’s society?
4. Which topics do you relate to and why?
5. What do you think the potential dangers of positive psychology are?

Personal Development Interventions

Before we start the course, we would like you to think about your current state of happiness. How happy are you? Try out the following exercises to help raise awareness around your current happiness levels and how you can potentially improve them.

1. This is an interesting exercise about a rapidly growing therapeutic intervention, quality of life therapy (Frisch, 2006). It is known as ‘the happiness pie’. To do this, you should get a sheet of blank paper and draw a large circle, or happiness pie, to represent your life and to what you allocate your energy to, such as family, health, exercise, goals, spiritual practices, work and play. As you reflect on these, make ‘slices’ into the pie to reflect how much energy you devote to each. Does the size of each slice represent the importance of that slice? For example, if family is very important to you and yet it represents only a small fraction of the pie, then maybe it’s time to start thinking of how to scale back other areas and increase this particular one. Finally, list five ways in which you can make time for these slices and thereby increase your wellbeing.

2. The second exercise we would like you to do is something that you may already do instinctively. This is simply putting a name and some structure to your daily routine. If you do not already do this, then you’re in for a big surprise (Seligman et al., 2005).
   This exercise is called ‘three good things’ and was developed to enhance one’s sense of gratitude. For the next week, before you go to bed, write down three good things that happened to you that day. The
‘things’ do not have to be monumental, such as winning the lottery or graduating, and it is surprising how hard it can be at the start. Eventually, you will start to see and appreciate the smaller things in life that add up over time.

We would suggest that after you have done the ‘three good things’ exercise for one week, you continue for the remainder of the course. Use the gratitude scale below to document your ‘before’ and ‘after’ gratitude scores.

Measurement Tools

Before we start asking you to fill out questionnaires, we would like you to review the ‘time out’ section below to refresh your memory about what constitutes a ‘good’ questionnaire. Remember, the data collected are only as good as the questionnaire used to collect them. Enjoy!

Assessing quality within questionnaires

The following section will review the main components involved in creating a good quality questionnaire (Howitt and Cramer, 2008). These components are found throughout psychology – keep them in mind as you go through the Measurement Tools sections.

Reliability: this is what we use to assess if something is consistent. For example, the ability of a questionnaire to produce the same results under the same conditions. It asks whether or not the test is measuring something relatively unchanging: are the scores stable over time? Reliability is a necessary but not sufficient condition of a questionnaire.

- Inter/intra-rater reliability assesses whether the scores are consistent across/within raters.
- Test/retest reliability assesses whether or not the scores are consistent across time. What about practice effects/mood states? Some test results can be expected to change.
- Internal consistency: this considers whether the items are intercorrelated. The Cronbach’s alpha method splits the test into all possible halves,
correlates all scores and averages the correlations for all splits. In psychology we generally accept a cutoff of 0.7 with anything above 0.8 deemed as reliable.

**Validity:** this refers to whether or not the questionnaire measures what it is intended to measure. Validity is a necessary but not sufficient condition of a questionnaire. You can think of validity as accuracy – does the questionnaire hit the ‘bull’s eye’? There are several types of validity. These include:

- **Content/face validity:** How representative are your items? How well do they relate to the construct being measured at face value?

- **Criterion validity:** Is the questionnaire measuring what it intends to measure?

- **Predictive validity:** If we use the questionnaire in a variety of settings, would it predict an appropriate outcome? For example, tests in mathematical ability should predict success in maths examinations.

- **Concurrent validity:** Does it correlate well with other, already validated measures of the same construct? Comparison with real world observations?

- **Construct validity:** A higher level concept is applied to a test that fulfils predictions that would be made given the nature of the construct it purports to operationalize.

- **Convergent validity:** Measures of constructs that theoretically should be related to each other are, in fact, observed to be related to each other.

- **Discriminant validity:** Measures of constructs that theoretically should not be related to each other are, in fact, observed not to be related to each other.

- **Factorial validity:** Is your factor structure valid? Does it make intuitive sense? If items cluster into meaningful groups, factorial validity can be inferred.

**Tips on making your own questionnaire:**

- Each item should contain only one complete thought or idea.

- Items should be succinct, rather than long.

- No complex sentences. The language of the items should be simple, accessible, clear and direct.

- No double negatives.

- No items that are likely to be endorsed by almost everyone or by almost no one.

- No items that are ambiguous and may be interpreted in more than one way.

- No items which clearly contain a socially desirable response.

- Item content and language should be suitable for people of different ages, meaningful across the socioeconomic gradient, for men and women, and not culture-specific.
Chapter 1  Introduction to Positive Psychology

The Gratitude Questionnaire-Six Item Form (GQ-6)

(McCullough, Emmons and Tsang, 2002)

Directions
Using the scale below as a guide, write a number on the line preceding each statement to indicate how much you agree with it.

1 = strongly disagree
2 = disagree
3 = slightly disagree
4 = neutral
5 = slightly agree
6 = agree
7 = strongly agree

1. I have so much in life to be thankful for.
2. If I had to list everything that I felt grateful for, it would be a very long list.
3. When I look at the world, I don’t see much to be grateful for.
4. I am grateful to a wide variety of people.
5. As I get older I find myself more able to appreciate the people, events, and situations that have been part of my life history.
6. Long periods of time can go by before I feel grateful to something or someone.

Scoring
Add together your scores for items 1, 2, 4, and 5. Reverse your scores for items 3 and 6. Add the reversed scores for items 3 and 6 to those for items 1, 2, 4, and 5. This is your total GQ-6 score. This number should be between 6 and 42.

Interpretation
If you scored 35 you scored higher than 25 per cent of the 1224 individuals who took the GQ-6 on the Spirituality and Health website. If you scored 38 out
of 42, you scored higher than 50 per cent of them. If you scored 41 out of 42, you scored higher than 75 per cent. If you scored 42 or higher, you scored among the top 13 per cent.

For more cultural and contextual norms, please refer to www.psy.miami.edu/faculty/mmccullough/gratitude/GQ-6-scoring-interp.pdf.

**Review**

This questionnaire documents your level of gratitude. It contains six items on a seven-point Likert scale. Overall, the scale yields a high internal consistency (0.82) and is positively correlated with positive emotions, life satisfaction, vitality, optimism, empathy, sharing and forgiving. It is negatively related to depression and stress.

The scale has low-to-moderate correlations with self-deceptive and impression-management scales (McCullough et al., 2002).

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**Notes**

1. The Veterans Administration (1946) and the National Institute of Mental Health (1947) were established at this time.

2. Contrary to criticisms, positive psychology does not refer to all other disciplines as ‘negative psychology’. Positive psychologists use the term ‘psychology as usual’ instead.

3. Mental disorder/mental illness is defined as ‘a persistent deviation from normal functioning that is sufficient to cause emotional suffering and role impairment, diminishing an individual’s capacities to execute their responsibilities as a parent, spouse or employee’ (Keyes and Michalec, 2009: 612).

4. In 2004, WHO included Mental Health Promotion (MHP) as a key agenda for the development of healthy individuals.

5. Ilona Boniwell founded this programme, on which both authors of this textbook currently teach.