Self-Help Interventions in Positive Psychology

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Abstract

The efficacy of psychological interventions for increasing happiness is well established, but many of these interventions are only beginning to be available to the general public. The purpose of this chapter is to provide an guide to readers interested in selecting a science-based self-help tool that targets happiness – be it for one’s own personal use, for one’s client, or for use in research. First, the chapter provides an overview of the rationale for disseminating positive psychological interventions (PPIs) via self-help. Second, the reader is provided with some caveats and recommendations to consider when evaluating and selecting self-help PPIs. Third, several examples of publicly-available self-help PPIs are described, cutting across three modalities: books, the web, and smartphones. Lastly, future directions for research and practice using self-help PPIs are discussed.

Key words: happiness, self-help, internet, smartphones, positive psychology, positive psychological interventions, well-being
Self-Help Interventions in Positive Psychology

Elsewhere in this volume, Layous, Sheldon and Lyubomirsky provide an overview of research on intentional activities that promote happiness, known in recent literature as positive psychological interventions (PPIs; Parks & Schueller, in press). Dozens of studies have contributed to the general conclusion that PPIs are, on the whole, efficacious – that is, they reliably increase happiness and decrease depressive symptoms (see Sin & Lyubomirsky, 2009). Most PPI studies have been conducted in lab settings, which are designed to maximize experimental control and to reduce noise (see Parks, 2014 for an in-depth discussion). The real-world dissemination of PPIs to the real world, therefore, is still somewhat in its infancy, and the question remains open: what is the best vehicle by which to disseminate them?

In clinical psychology, interventions that are studied in research are then typically disseminated via therapy. Indeed, there has been work disseminating PPIs to a variety of clinical populations, including mild-moderately depressed young adults (Seligman, Rashid & Parks, 2006), sufferers of schizophrenia (Meyer, Johnson, Parks, Iwanski & Penn, 2012), individuals trying to quit smoking (Kahler et al., in press), and suicidal inpatients (Huffman et al., in press). However, while there is certainly a precedent for applying PPIs in therapy (e.g. Magyar-Moe, 2009), there is also the equally important task of getting PPIs to the general public – people who are not clinically distressed, but who could stand to improve their happiness. Self-help methods seem to be ideal for non-clinical populations. First of all, there is significant demand for self-help, as is evidenced by the multi-million dollar market for self-help books, products, and websites. Furthermore, self-help approaches have the potential to reach a much broader audience.
than does therapy by virtue of their being more affordable and potentially easier to access. Lastly, self-help approaches seem to be the way that PPI research is headed; while research used to take place in the lab, more and more, studies are starting to use real-world settings as their backdrop. It is relevant, therefore, to look at self-help modalities as a means of delivering PPIs.

The goal of the present chapter, then, is to discuss the ways in which PPIs have been and could be delivered to the general public in self-administered formats. An overarching goal is to provide a guide to readers who may want to select a self-help tool for his own personal use, for the use of a client, or use in a research study. First, I provide some general caveats that one should keep in mind when choosing a happiness-based self-help intervention. Next, I provide examples of existing, publicly available self-help interventions in three modalities – books, the internet, and smartphones – with data on their efficacy where available. Lastly, I provide some ideas for future directions in research and practice of happiness-based self-help.

**Translating PPIs for Use in the Real-World: Some Caveats**

PPIs are, by nature, self-administered, even in research studies – they are typically delivered by giving participants a set of instructions for an activity and asking them to follow those instructions. Thus, at first blush, it is not so difficult to imagine the transition from research to implementation in self-help contexts; the instructions come from a book or a website instead of an experimenter, and otherwise, the process is quite similar. However, recent research suggests that some ways that PPI usage is standardized in research are not ideal for real-world practice. While a detailed discussion of these factors
is beyond the scope of this chapter (see Parks, 2014), I will give a brief overview below, along with some recommendations for how practitioners might use this information to help clients.

First, in many studies, participants are given no choice about which activity or activities they use. Limiting participant choice is important to experimental design, as it standardizes the experience across participants, making it easier to draw inferences about how well the intervention works. However, research by Lyubomirsky and colleagues finds that people benefit more when they have chosen to do a PPI rather than having been assigned (Lyubomirsky, Dickerhoof, Boehm, & Sheldon, 2011). Furthermore, when given free reign, participants choose to practice PPIs quite differently from how they are asked to practice them in the lab. For example, lab studies tend to ask participants to use a single activity, or to use one activity, then to move on to the next activity. On average, however, happiness seekers use many different activities in a given week (Parks et al., 2012, Study 2). In one study, using a wider variety of activities predicted greater improvements in happiness than did spending the same amount of effort on a smaller number of activities (Parks et al., 2012, Study 3), suggesting that instructions to do otherwise might undermine effectiveness.

In addition, studies tend to ask participants to follow the same set of instructions for an activity over a fixed period of time (using the same example as before: a gratitude journal once a week for 6 weeks) but naturalistic data on happiness seekers suggests that they tend to gravitate towards “mixing up” their practice, trying different variations of activities from week to week in order to avoid adapting to their gains (Parks et al., 2012, Study 2). Lastly, many studies emphasize making interventions as brief and simple as
possible with the idea that a brief intervention will be more appealing to participants. However, happiness seekers, on average, choose to spend about an hour a day actively working on their happiness (Parks et al., 2012, Study 2), suggesting that when left to their own devices, happiness seekers want to work hard on their happiness – and are capable of working harder – than traditional study designs allow.

Therefore, when recommending self-help PPIs to clients, practitioners should not necessarily encourage clients to adhere exactly to the instructions from the published research; with few exceptions\(^1\), these instructions are the way they are not because they maximize efficacy, but because the researchers had to choose some fixed duration to standardize participants’ experiences.

Second, people who participate in research on PPIs may not necessarily be the same as the people who will choose to use them in real-world practice. One study found that the average level of depressive symptoms in a sample of happiness seekers on the internet was substantially higher than the average college student, and college students are participants in many PPI studies (Parks et al., 2012; Study 1). Therefore, research done in college students may or may not be generalizable to the average client in real-world practice. Furthermore, there is some new evidence that PPIs work wonderfully for some, and not at all for others (Sergeant & Mongrain, 2011). Growing evidence suggests that person-activity fit plays an important role in PPI effectiveness (Schueller, in press). Therefore, any findings of PPIs’ efficacy must be taken with a grain of salt. Practitioners

\(^1\) In one study by Lyubomirsky, Sheldon, and Schkade (2003), dosage was varied in order to find an optimal frequency. This is the only study, to my knowledge, that has done this; otherwise, dosages are somewhat arbitrary.
who choose to recommend self-help PPIs should work with clients to carefully evaluate whether or not the intervention is working for them.

Lastly, much PPI research leaves out social support and social networking, again trying to make sure that the experience is as similar as possible across users; introducing a social network adds noise to the data, which is not ideal for research purposes. However, social support can be a very helpful tool when instituting behavioral change, particularly when doing it outside of a formal context like therapy. Some of the interventions discussed below have social support built in, but others (especially book-based interventions) do not. Many commercial products contain social networking features by default, not necessarily to improve the efficacy of the intervention, but to improve adherence, which is notoriously a problem in internet interventions (see Eysenbach, 2005). Therefore, when recommending self-help interventions, practitioners would be well-advised to encourage clients to engage with some kind of social support, be it through the PPI itself (if included, say, on a commercial website), or through a book club, Facebook group, or other source of accountability. As with other variables discussed in this section, these types of social features are left out of online PPI research for reasons of experimental control, not because they are considered to be unnecessary or unhelpful.

Examples of Existing Self-Help PPIs

In the following section, I provide examples of the different types of existing self-help PPIs. This section is not meant to be exhaustive, but rather, illustrative of the types of resources that are available to practitioners hoping to make recommendations to
clients, and to researchers looking for a tool to use in a study. In selecting interventions to be discussed here, I chose only those that were accessible to the general public – some for free, some for an up-front purchase price or for a subscription fee.

*Book-Based PPIs*

Self-help books have been around for decades, and a subset of self-help books are based on research-validated interventions. Cognitive-behavioral therapy (CBT) lends itself particularly well to translation into a self-help book, as it centers around patients’ willingness to independently practice skills via homework. Books such as *Control Your Depression* (Lewinsohn, Muñoz, Youngren & Zeiss, 1992) and *Feeling Good* (Burns, 2008) provide many of the key components of CBT: a rationale for the cognitive model, tools for self-tracking, and a series of concrete skills for readers to practice. Numerous studies have demonstrated the efficacy of CBT-based self-help books, particularly for reducing depressive symptoms; that is, psychological interventions translated into book form can lead to significant and long-lasting improvement for depression (for a meta-analysis, see Gregory, Schwer Canning, Lee, & Wise, 2004). In some cases, bibliotherapy for depression has even been shown to be comparable to in-person therapy (Cuijpers, Donker, van Straten, Li, & Anderson, 2010).

The success of self-help books for depression lends confidence to the proposition of self-help books for increasing happiness; if CBT skills can successfully bear the transition to self-help, why not PPIs? Many science-based self-help books about happiness exist; some of the most popular include *Authentic Happiness* (Seligman, 2002), *The Happiness Hypothesis* (Haidt, 2005), *Curious?* (Kashdan, 2009), and *Thanks!* (Emmons, 2007). However, many of these books focus primarily on information and self-
understanding rather than providing readers concrete techniques. The How of Happiness (Lyubomirsky, 2008) is unique in that it more closely follows the format of other bibliotherapy volumes, with over half of the book is dedicated to providing research-based happiness skills and directions for practicing them. The skills-focus of HoH makes it an ideal choice for research examining the benefits of positive bibliotherapy. To date, only one published study has examined HoH’s efficacy, but the findings are positive; Parks and Szanto (2013) compared HoH with Control Your Depression and with a no-intervention control and found that HoH led to higher levels of life satisfaction compared to both other groups at long-term follow-up. Other more recent books, such as Gratitude Works! (Emmons, 2013), are similarly structured, but have not yet been studied.

Compared with clinical psychology, there has been surprisingly little work looking at the efficacy of book-based approaches in positive psychology. This is, in part, because of the great potential for technology to take what is helpful about a book and bolster it with interactive features, social networking, and greater accessibility via the internet. Cognitive-behavioral bibliotherapy research began decades ago, when the internet was not as widely accessible, while PPIs came about much later. Indeed, much recent work in the area of PPIs has focused on translating PPIs to technology-based formats with the idea that a web-based intervention can include everything a book-based intervention does, and more. Below is an overview of this work.

Web-based PPIs

While early PPI research was conducted in-person (e.g. Emmons & McCullough, 2003), a substantial number of PPIs tested in the last decade have taken place online (for
a comprehensive review, see Bolier & Abello, in press). Indeed, one of earliest studies to use the term “positive psychological intervention” was conducted online, examining the efficacy of individual happiness activities (Seligman, Steen, Park, and Peterson, 2005). Participants were given written instructions for a single activity, then they were told to practice that activity over the course of a week and report back for assessment. Mitchell, Stanimirovic, Klein, and Vella-Brodrick (2009) examined a single happiness activity – building strengths – over the web. Unlike Seligman et al. (2005), Mitchell et al. (2009)’s activity was completed over several sessions: first, users identified their strengths, then they generated ideas for how to use those strengths more in their everyday lives, implemented those ideas, and finally, reflected on their experience. Building on these two previous studies, Schueller and Parks (2012) tested a 6-week PPI containing six different activities spread out over six weeks. Participants received instructions for one activity, practiced that activity independently over the course of a week, then returned the site for the next activity.

In all of these cases, activities were completely user-driven; participants were given instructions and then told to go follow those instructions in everyday life. This type of experimental design is ideal for research settings, in which it is desirable to have a standardized user experience. However, PPIs like those described in these studies are not freely available to the general public; they were used by research participants only. Furthermore, while ideal in some ways for research purposes, the above-described designs are not very realistic. In general, widely available web-based PPIs are designed more like commercial products; in this context, customization and flexibility are
desirable, and self-help websites typically contain numerous “whistles and bells” in order to keep users interested and engaged. Several of those are described below.

**Simple Web-based Interventions.** As was the case in PPI research, some web-based PPIs are comprised of a single activity; *Gratitude Bucket* by Zach Prager, for example, is a free website that asks users to pick someone they are grateful to, then create a “bucket,” or a page where gratitude for that person can be expressed. Anyone can go to the page and add grateful comments at any time. This website is devoted entirely to the practice of one positive activity – gratitude – in one particular way. It doesn’t provide much in the way of guidelines for how often to use it and in what way to use it in order to achieve maximal well-being; it’s just a tool for consumers to use as they like. *Thnk4.org*, designed by the Greater Good Foundation, has the same idea but a bit more structure. The site helps users to keep track of and to express their gratitude using an interactive online journal. It starts with a “2-week gratitude challenge,” after which users can elect to keep going as they see fit\(^2\). Like *Gratitude Bucket*, *Thnk4.org* is also free and available to the general public.

**Multi-faceted Web-based Interventions.** Below, I discuss three existing, publicly available interventions that contain multiple positive psychology-inspired activities designed to increase well-being.

*Daily Challenge* is an eclectic self-help website created by MeYou Health. Each day, it provides users with a simple self-help technique, with the target of the technique ranging from physical health to psychological health and a mixture between the two.

\(^2\) Thnx4.org is unique in that it offers itself as a tool to be used by researchers who may want to collaborate to collect data.
Upon initial sign-up, users are assigned to a track that contains very quick and easy activities that only lightly address physical and psychological well-being; with further use of the website, however, users can unlock “tracks” that allow them to specialize their goals and focus on possibilities such as finding fulfillment, living mindfully, and deepening close relationships (though there are also more practical or physical-health focused activities like building physical flexibility, de-cluttering, and eating healthier snacks). Sample challenges from the “living mindfully” track include watching a 5-minute video of someone performing your favorite song, or starting the day with a single yoga pose. Sample challenges from the “finding fulfillment” track include writing down 3 words that describe an ideal future version of yourself, or finding something you haven’t used in months or years to donate. To maximize user engagement, each activity on Daily Challenge earns the user points, which help to unlock additional features of the site and to raise the user’s rank, which is visible to other users. Users also receive reminder emails.

A study evaluating the efficacy of Daily Challenge was recently published by Cobb and Poirier (2014), and suggests that users who participated in the website fared better than an information-only control group on measures of “overall well-being,” which includes health behaviors, physical health, and access to care (physical factors) as well as emotional health, work satisfaction, and general life evaluation (psychological factors) (Cobb & Poirier, 2014). However, in an effort to maximize retention and compliance by making activities as brief as possible, Daily Challenge may be a less powerful intervention than some of the other available sites, which involve more in-depth activities (see below). Unfortunately, Cobb and Poirier (2014) do not include effect sizes, nor does
it provide the information needed to calculate effect sizes – the authors only say that users improve by 2 points on a 0-100 scale – so it is difficult to infer whether the changes observed were clinically significant.

*Daily Challenge* is available to the general public at no cost, and may be useful for people who may want to work casually on their health, very broadly construed. For individuals whose goal is specifically to improve happiness, and who are aiming to effect a relatively substantial change in their happiness, a site that specializes in happiness, and which asks users to practice activities in somewhat more depth be preferable. Below, I describe two such interventions.

*Psyfit* is a web-based PPI created by Trimbos Institute in the Netherlands to target "mental fitness." While the site is in Dutch, it is possible to translate aspects of the site into other languages, and so it is usable by a broad audience. The intervention contains activities that draw from literature on PPIs, as well as mindfulness and CBT to help with: goal-setting, creating positive emotion, developing more positive relationships, cultivating mindfulness, and optimism (Bolier et al., 2013). Each of these topics is presented in a series of four lessons which, like Mitchell et al. (2009), walks the user through the steps of the activity in a way that is somewhat more interactive than simple written instructions. Users track their progress using self-monitoring tools and receive reminder emails.

The efficacy of *Psyfit* was evaluated in a recent paper by Bolier and colleagues, in which the PPI was compared with a no-intervention group, and *Psyfit* led to significant increases in well-being through 2-month follow-up, but not through 6-month follow-up (Bolier et al., 2013). They did, however, observe lasting effects on depressive and
anxious symptoms at 6 months. At the same time that they report that the intervention group outperformed a control condition, Bolier et al. (2013) acknowledge that Psyfit lacks interactivity, social networking, and other features that could potentially increase user engagement and retention, and possibly also extend long-term benefits. Psyfit is available to the general public by yearly subscription.

Happify, developed by Happify Inc. (for which this chapter’s author serves as scientific advisor), guides users through activities in five major categories: savoring, gratitude, hope/goal-setting, prosocial behavior, and empathy (Leidner, Ben-Kiki, & Parks, 2013). The user follows one of several “tracks” that help her use these five skills to effect a desired change in her life. All skills featured on the site are based directly off of PPIs from the literature; the tracks, then, suggest particular contexts in which variations of the activities can be applied towards a specific goal. For example, Seligman et al. (2005) had participants write down three good things that happened in their day; on Happify, a user might join a track about enjoying their kids more, and then they would keep a “three good things” journal that centers around their family. A user on a track that focuses on getting more engaged at work might emphasize recording positive events related to one’s work environment instead. Regardless of track, the activity being offered is the same as the one tested in the research; it’s just modified to be specifically relevant to the user’s goals. Like Daily Challenge, Happify still generally follows the same model as previous online PPIs in that it relies on users to read instructions and do activities on their own. It also contains elements of gamification – mini-games, quizzes, etc. – as well as on-site social networking features and interactivity with Facebook.
Data on Happify’s efficacy have not been published previously, but preliminary data are summarized below, based on Leidner, Ben-Kiki, and Parks (2013). In a sample of beta users of Happify, users were split into quartiles based on their usage as follows: low-usage users (N=676; more than 5.20 days between visits) and moderately low-usage users (N=549; 3.20-5.20 days between visits) were compared with moderately high-usage users (N=576; 2.10-3.20 days between visits) and heavy-usage users (N=362; 2.10 days or fewer between visits) on their improvements in well-being over time. Well-being was evaluated using a scale designed by Happify, which contains items that tap both emotional and cognitive well-being, and which yields a score on a scale of 0-100 (Leidner, Ben-Kiki, and Parks, 2013). All users experienced change over time that was significantly greater than zero (p<.0001 in all cases) but those users who exhibited heavy or moderately high usage showed significantly more improvement in happiness (1.75 points per week and 1.64 points per week, respectively) than did users who used Happify with moderately-low (1.17 points per week) or low (.75 points per week) frequency. Users who used the site often or moderately often did not differ from each other, however. While these initial data do not include a control group, they do preliminarily suggest that the benefits of Happify are more than just a placebo effect or regression to the mean; low usage of Happify is arguably a better comparison group than a no-intervention group, often used in online PPI research. However, it is worth acknowledging that this comparison group is self-selected by their own choice not to participate, which is less than ideal.

The basic features of Happify – which include one activity per day – are available to the public and free. Premium content (i.e. additional tracks) are available with a
subscription. *Happify* is also currently in the process of conducting a randomized, controlled trial to more rigorously evaluate its efficacy. Practitioners wishing to refer their clients to participate in the trial – which includes free access to Happify (though that access is delayed for control participants) – can contact the author by email for more information.

*Smartphone-Based PPIs*

Another natural extension of the self-help book is the self-help app. A plethora of self-help apps have cropped up in recent years, though a smaller subset are explicitly research-based, and an even smaller subset are based on PPI research. Some apps focus on a single PPI – for example, *Gratitude Journal* by Happy Tapper (free for the iPhone), asks users to enter five things they are grateful for each day, and then keeps track of these so that the user can review them later. However, given work by Lyubomirsky, Sheldon, and Schkade (2003) suggesting that it is possible to “overdose” on gratitude, practitioners are advised to recommend a more open-ended gratitude app such as *Gratitude Tree* by Stacey Bobby (also free for the iPhone) – where users are given an empty tree graphic each month, and each grateful thing they record becomes a leaf on the tree. This allows users to determine their own dosage of gratitude.

Other apps include multiple happiness activities together. *LiveHappy*, developed by Signal Patterns and available on the iPhone for 99 cents, gives users a choice of several different types of happiness activities, which they then practice at their leisure and

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3 They found that a keeping a gratitude journal once a week was effective, but journaling three times per week was not; it seems that participants in the 3x/week condition “overdid” it. Thus, it seems to me that an app asking people to journal daily is potentially ill-advised, though it may be helpful for some clients.
log their progress into their phone. Like Happify, LiveHappy contains activities that are directly based on research. Specifically, the activities are based on the content of Lyubomirsky’s The How of Happiness. It covers eight domains: savoring, positive memories, acts of kindness, strengthening social relationships, goal-setting, contemplating gratitude, expressing gratitude, and thinking optimistically (Parks et al., 2012; Study 3). Users can freely move between these activities and use them with any frequency. One study found that users of the app did generally benefit (Parks et al., 2012; Study 3), and that greater usage led to greater benefit; however, like the pilot study of Happify described above, this study lacks a control group and, while potentially promising, begs for additional research to follow it up.

It is worth noting that standalone smartphone apps – particularly those with no social networking component – are prone to user dropoff. This makes sense; with no accountability, one must be self-driven to continue visiting the app. It may be, therefore, that while standalone apps can be suitable vehicles for conveying PPIs, they may not be as ideal as web-based PPIs for user retention. The optimal balance, then, would be happiness-based smartphone apps as a supplement to happiness-based websites to extend website reach and accessibility without the limitations of being a standalone app. For example, both Happify and Daily Challenge have companion apps for the iPhone. These apps contain much of the content of the parent site, but the parent site also contains social networking components and assessments that are more optimally completed at a computer, so the two platforms work in concert to make a multimodal intervention.

**Concluding Remarks: Challenges of Using PPIs in the Real World**
In this chapter, I have provided an overview of the current market of self-help interventions that target happiness. Below, I note several important issues that must be addressed in future research and practice related to self-help PPIs.

**Empirical Validation**

Two things should separate positive psychology-based self-help from other self-help approaches: a conceptual basis in science, and demonstrated efficacy through rigorous, controlled research trials. The problem is that, for the reasons discussed above, self-help research – if it is to be at all realistic – is quite messy. For example, naturalistic intervention research is rife with dropouts, which compromises the researcher’s ability to do airtight data analysis (see Allison, 2001). However, there is no getting around the fact that in the real world, people have the autonomy to start and stop things, and in the absence of compensation from researchers, they don’t always have the motivation to provide complete data.

Naturalistic research is also uncontrolled; users do whatever they want at whatever pace they prefer, resulting in massive variability in the amount of time spent using an intervention, as well as the qualitative nature of the intervention experience. As a result, people get widely varied dosages in widely varying time frames. In a multi-faceted intervention like *LiveHappy* or *Happify*, one user may choose to use gratitude activities and ignore relationships, while another user may do the opposite; they still technically received the same “intervention,” but there was no overlap in the activities they use. It becomes difficult, then, to combine users together for the purposes of analysis, and even more difficult to sub-classify them with an almost infinite number of permutations in user experience.
In short, studying self-help interventions naturalistically is quite challenge. However, it’s worthwhile to see how interventions validated in the lab play out in the real world. A pill that cures heart disease when used perfectly is of no use if patients can’t and don’t take it as instructed; similarly, a PPI that works only when instructions are followed exactly has little utility in the real-world, where users are not as restricted as are research participants. For a PPI to really “work,” it must hold up to the challenges of being exported into real-world practice, and research must demonstrate that it can do so. This is not to say that there is no place for clean, simple PPIs tested in the lab; rather, I argue that rigorous, controlled research must be paired with PPI research in naturalistic settings in order to reach a general conclusion that a particular intervention is efficacious.

**The Potential of Emerging Technology**

The existing self-help PPIs are only the beginning of what is possible with new and emerging technology. Smartphones contain tremendous untapped potential to provide customized psychological interventions to individuals (Pharow, Blobel, Ruotsalainen, Petersen, & Hovsto, 2009). Specifically, one aspect of smartphone technology that has not yet received attention in the PPI literature is “context sensing” – where information about an individual’s situation (i.e. location and time of day) as well as his phone behavior (i.e. calls and text messages) can be combined with self-report data (i.e. mood and stress levels) to decide when certain activities would be maximally useful (e.g. Burns et al., 2011). Context sensing could be rendered even richer by providing physiological data about the user using external hardware that can be linked to the phone, such as the Fitbit or Jawbone’s UP24, both of which monitor activity levels and even sleep patterns. Having objective data about activity levels can help to increase accountability with goal-
setting (say, a person sets a goal to be more physically active) and to help users see how behavioral choices (like not sleeping enough) impact their mood. More advanced (and more costly) hardware, such as the Zephyr HxM, which can measure heart rate variability, or Affectiva’s Q-Sensor, which can measure skin conductance, have the potential to provide objective data about the stress levels and real-time coping experienced by the user, further enabling customization.

Ethical Considerations

As promising as self-help PPIs may be, it is important also to remember that some problems are beyond the scope of a self-help intervention. This early in the life of self-help PPIs, it is impossible to know where exactly to draw that line. Careful, systematic work is necessary to determine whether PPIs’ clinical utility (see above) generalizes when translated to a self-administered format. In the meantime, readers thinking of recommending a self-help PPI should be clear that PPIs in any format are not yet (and possibly will never be) considered a stand-alone treatment for psychological disorder. Many self-help resources will repeat this message, but it’s a message worth repeating.

Final Thoughts

Feasible dissemination of interventions to the general public is a quintessential quandary in clinical psychology, a field that is far more established than is positive psychology; dissemination is a major undertaking! Thus, even though positive psychology is a young field, it behooves PPI researchers and practitioners to think about how PPIs can be most optimally disseminated to the general public. Self-help modalities are very promising vehicles for achieving that goal; no doubt, the next decade holds
many exciting possibilities for advancements in the development of PPI self-help tools, and for advancements in the research methodology that we use to test them.

Take-Home Messages

- Self-help is an ideal way to get PPIs to the general public
- When using any self-help tool, guidelines such as frequency of usage and number of activities practiced should be determined based on what works for the individual, not on what has been done in previous research
- There are three main types of self-help interventions: books, web sites, and smartphone apps.
- There exist several science-based self-help tools that target happiness and that are publicly available
- The above-mentioned self-help tools are all in various stages of development and evaluation; none are considered fully “validated” yet.
- The most promising self-help PPIs seem to be multimodal, consisting of instructive text (like a book), as well as interactive web tools and a supplementary smartphone app
- Real-world PPI research using self-help interventions is challenging, but worth doing more of
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