Flourish: Positive Psychology
and Positive Interventions

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We have a strange heritage about the positive and negative sides of life.1 Our heritage comes from Schopenhauer and Freud who told us that the best we can ever hope for is to keep our misery and suffering to a minimum. I want to suggest today the possibility of a positive human future. Until the possibility that there is more to life than minimizing suffering gets on the radar screen, a positive human future is much less likely. As a first step, I will outline what it might mean for human beings to have a positive human future, to flourish, and how science can help us understand more about the elements of the positive side of life and how they might be achieved.

Here is an outline of what I am going to discuss. I have given you the prologue—if we merely begin to think of our own lives, the lives of our university, the lives of our nation, more than just in terms of going from −5 to 0 but of going from +2 to +5, that merely having that possibility on the radar screen may do some good. Next I am going to try to define what it means to go from +2 to +5. Having defined what I think it is for a human being, an organization, or a nation to flourish, I am then going to ask the question: Is the positive side of life buildable? Or is it like your waistline? You probably know that dieting is a scam, a fifty-billion-dollar scam in the United States. And the reason for that is that any of you can lose 5 percent of your body weight in about three weeks by following any diet that is on the best-seller list now. The problem is that between 80 and 95 percent of you will regain all that weight or more in the next three to five years (Mann et al. 2007; Powell, Calvin, and Calvin 2007). Is the positive side of life like so many things in which we can see temporary changes and then revert to our baseline? Or is it actually movable? There is a growing literature on positive interventions that suggests that what I am going to define in a moment as the positive side of life—PERMA: positive emotion, engagement, relationships, meaning, and accomplishment—is actually buildable.

Then I will talk about positive intervention programs in larger entities—in schools, in school systems, and in the entire United States Army. The chief of staff decided two years ago that he wanted to create an army that was just as psychologically fit as physically fit. I will tell the story of this massive cultural intervention. Finally, I will ask, “Can positive interventions work, not only in individuals and organizations, but

1. Transcription by Alex Silk.
also in entire nations?” Can it happen globally? In this context I believe that the wealthy nations of the world stand at a very special moment in history—a Florentine moment—in which we can, with great effect, decide what our wealth is for.

WHAT IS POSITIVE PSYCHOLOGY?

First, the question: what is positive psychology? Historically and in my own intellectual history, psychology has been about what is wrong with life: suicide, depression, schizophrenia, and all the brick walls that can fall on you. I started my work on learned helplessness (Seligman 1975): people who experience uncontrollable bad events become passive, not trying to do anything about their future. Such people also have cognitive troubles: difficulty seeing that their actions succeed when they really do. But in the helplessness literature there was, for ten years, a regularity: one-third of the people who came to my laboratory, people to whom inescapable events were given, never became helpless. So around thirty-five years ago we began to ask the question, what is it about some people that makes them immune from helplessness? And what is it about one-tenth of the people who came to my laboratory, who would become helpless at the drop of a hat? It turned out that the key was optimism. When we began to ask people in the laboratory and in real life who experienced awful events, those people whose habitual way of looking at setbacks in life was tragic—people who said, “This is going to last forever and is going to undermine everything I do, and there is nothing I can do about it”—were the people who collapsed most readily. By and large, the people whom we could not make helpless were people who, when bad events occurred, had the habit of mind of saying, “It’s temporary, it’s just this one situation, and there is something I can do about it.” That was what we called learned optimism (Seligman 1991).

Thirteen years ago, when I was president of the American Psychological Association, my job was to look around at what psychology did well and what it did badly. What psychology did well was misery. What it did not do very well was what made life worth living. It was with that in mind that I gathered together under one large tent some of the leading people, among them Chris Peterson and Barbara Frederickson, who worked on the positive side of life, and tried to create a field in which we asked the question, “What makes life worth living, and how can we build it?” In this framework, psychology is just as concerned with strength as it is with weakness. It is just as interested in building what makes life worth living as it is with repairing pathology.
I hasten to say to those of you who do clinical work that I am not remotely suggesting that positive psychology is a replacement for psychology-as-usual. I spent my life working on misery and suffering, and I think we have learned something about how to lower the amount of it on the planet. Positive psychology is a supplement to psychology-as-usual. Just working within the Schopenhauer-Freud framework, the best you can do is to relieve misery. This is literally half-baked. Most of you, when you go to bed at night, are not thinking of how to go from −8 to −3 in life. By and large, you are thinking about how to go from +3 to +6. This suggests that in addition to understanding suffering, we need to understand how to go from +3 to +6. So positive psychology is a supplement to what psychology traditionally does. We should be just as concerned with making the lives of people fulfilling as we are with healing pathology.

Finally, though we have spent so much effort in pharmacology and in psychotherapy developing interventions that relieve misery, such interventions are not the same as interventions that produce well-being. Removing the disabling conditions of life is laudable, but it is not the same endeavor as building the enabling conditions of life.

I am a psychotherapist. Once in a while, I would do pretty good work. I would get rid of almost all of a patient’s sadness, her anxiety, and her anger. I thought I would get a happy person. But I never did. What I got was an empty person. That is because building the skills of having better relationships, more meaning in life, more engagement, and more positive emotion is almost entirely different from building the skills of fighting depression, anxiety, and anger. So, positive psychology aims to develop interventions that build the enabling conditions of life, not just interventions that decrease misery.

**WHAT IS WELL-BEING?**

Let me take you through my intellectual development about well-being. About ten years ago I wrote a book called *Authentic Happiness* in which I asked the question, what are the components of happiness? I argued that the study of happiness could be dissolved into the study of positive emotion and engagement and meaning. The first element of happiness was *positive emotion*. The second was being absorbed, *engagement*. And the third was having *meaning* in life, belonging to and serving something you believed was bigger than you were. That was the Authentic Happiness theory, and a lot of research followed.

Starting around four years ago, I began to change my mind about this theory. The first problem was the *target* of positive psychology. The target
of positive psychology was happiness, and the prime measurement was “life satisfaction.” I found this problematic because, as Ruut Veenhoven (2006) has shown, when you ask people about their life satisfaction, 70 percent of their answer is what mood they are in, and about 30 percent is what judgment they make about the conditions of their life. I didn’t want a “happiology,” a psychology that was merely about what mood people were in. Instead, I have changed the target of positive psychology from happiness or life satisfaction to well-being or flourishing.

The second problem is the elements of this new target of positive psychology. I began to be convinced that positive emotion, engagement, and meaning did not exhaust what people valued for their own sake. Rather, there are five different elements of well-being. First and second are positive emotion and engagement, as in Authentic Happiness theory. The third is positive relationships. I have come to believe that people are motivated to seek out and maintain positive relationships even when it brings none of the other elements. The fourth element is meaning, belonging to and serving something that you think is bigger than you are. And the fifth is accomplishment. Many people are motivated to achieve, to have mastery, to have competence, even if it brings no positive emotion, no engagement, no relationships, and no meaning (Seligman 2011).

Let me explain briefly what has convinced me of that. I am a serious bridge player. Great bridge players divide into two categories: those who, when they play, are engaged and happy, and those who just play to win. Among the latter are cheaters. Some people actually cheat at high-level bridge just in order to win. I think the same thing is true in the actual world as well. So I have become convinced that accomplishment is a fifth element.

I want now to illustrate the kind of science that is done in positive psychology by discussing research on optimism, one of the positive emotions—and what its effect is on depression, achievement, and physical health. Thirty years ago Chris Peterson and I started to measure optimistic versus pessimistic people. Optimistic people were defined as people who viewed setbacks as temporary, changeable, and local. Pessimists viewed setbacks as permanent, unchangeable, and pervasive. We followed both across time, and we found that, holding depression constant, pessimistic people got depressed at twice the rate of optimistic people when they faced setbacks (Peterson and Seligman 1984).

We then asked the question, what is the effect of optimism on achievement? This has been tested in schools, in the business world, in sports.
Importantly, the form of the studies from this large literature involves taking people’s optimism or pessimism at time $t_1$, their talents at time $t$, and then seeing if increases or decreases in the target variable can be predicted. Here is a school example that comes from the University of Pennsylvania, where the admissions committee takes the applicant’s SAT score, high school grade point average, and achievement tests, and then grinds these scores into a regression equation. This spits out a number like 3.3: the applicant’s predicted grade point average for the freshman year. Much of admissions is done based on that number. So Penn’s dean of admissions had come to me and said, “Marty, we’re making a lot of mistakes in admissions at Penn. We find that there are a large number of kids who do much better than they’re supposed to do, given their SATs and their high school records. A smaller number of them do much worse. Can you predict who is going to do better or worse?”

In response, we did the following study. On students’ first day at the University of Pennsylvania, we gave them optimism-pessimism tests that well over a million people have taken now, and then we simply watched them for the first semester. We found that eighty-three of the kids did 1.5 standard deviations better than they were supposed to do, given their talents. Only seventeen kids did 1.5 standard deviations worse. (That is about getting an A- instead of a C+, or vice versa.) It was the pessimists who did worse than they were supposed to and the optimists who did better (Seligman, Kamen, and Nolen-Hoeksema 1988).

At around the same time, the coach of America’s Olympic swimming team in the Seoul Olympics of 1988, Nort Thornton, wanted to know who to put in the relay races. In swimming, the relay races occur after individual events. So the question is, “If a swimmer does badly in an individual event, should you put that swimmer into the relays? Or will they collapse?” We measured the optimism and pessimism of all of America’s male and female Olympic swimmers. Here is what we did with Matt Biondi. Nort sent Matt into the pool to swim the 100-meter fly. Biondi swam it in 50.2. He came out of the pool, and Nort said, lying to him, “Matt, 52.5. Rest up for twenty minutes and swim it again.” Biondi swam it the second time in 49.9. He is in the top 25 percent of optimism among professional athletes. Optimistic athletes get faster after defeat, while pessimistic athletes get slower (Seligman et al. 1990).

I will summarize one study on cardiovascular death and optimism. Take 999 sixty-five-year-old Dutch men and women and monitor them for a decade. Ten years later, 35 percent of them are dead of cardiovascular
complications. Can you predict who is going to die, given all the traditional risk factors like cholesterol, blood pressure, body mass index, and the like? These risk factors are not very predictive. But if you take the optimism and pessimism, holding constant the risk factors, the upper quartile in optimism has less than half the risk of cardiovascular death than the rest of the population (Giltay et al. 2004). There are about fifteen such studies in the literature.

What I have done so far is define the field of positive psychology. Positive psychology is about the concept of well-being. The elements of well-being are PERMA: positive emotion, engagement, relationships, meaning, and accomplishment. I have given some samples of the science that has been done on these five elements. Can these elements be built in people?

**POSITIVE INTERVENTIONS**

Before describing how many positive interventions begin, I should say that I am a pessimist and a depressive. I take my own medicine. For example, when one of my undergraduates suggested to me ten years ago that making a gratitude visit might increase positive emotion, I first tried it on myself. I have always taken whatever my subjects have taken. When I did shock in animals, I would take the shock first. (And I would eat the Purina chow, which was worse than the shock!) So I first did these interventions on myself. If it works on me, I give it to my wife and my seven children. If it works on us, then my graduate students get it, and then we are ready to do laboratory studies on it. If it works in laboratory studies, we begin to do clinical studies.

There is a gold-standard method for testing interventions on the negative side of life—random-assignment, placebo-controlled studies. Since I had used this methodology with psychotherapy studies and with drug studies, when I began to work on positive interventions ten years ago, I asked, “Could you do the same thing on positive interventions?” Could you ask in a rigorous way whether a given positive intervention, in a random-assignment, placebo-controlled procedure, would actually make people lastingly less depressed? From the Buddha to modern pop psychology, there have been about two hundred suggestions about what makes people lastingly happy. What we do in my laboratory is take these different suggestions, manualize them, and put them on the World Wide Web. I have a website, www.authentichappiness.org. Some 1.8 million people have registered at it and taken the tests. It has all the basic tests of
the positive side of life, and, every so often, a link with exercises appears. This link says something like this: “Dr. Seligman would like to find out which exercises make people lastingly happier and less depressed, and which are placebos. If you are willing to do this, you are going to get an exercise but will not know whether it is a placebo or a real exercise. Then we are going to follow you for the next six months, asking you about your depression and well-being.” That is typical of the methodology that we use. Using this procedure, we have found what works lastingly well and what does not.

One exercise from the website is “three good things”: “Every night for the next week, before you go to sleep, write down three things that went well today, and why they went well.” It turns out that when people do this, six months later they are less depressed and have higher positive emotion compared to placebo—even though the exercise says to do it for only one week. Positive interventions, unlike negative ones, tend to be addictive.

One of the dirty little secrets of psychotherapy research is that the way we measure its effectiveness is how long the effects last after the end of the treatment—before they melt to zero. Sad to say, by and large in psychotherapy, as in dieting, you get benefits for a few months, and then they melt to zero. Interestingly, one characteristic of many of the positive exercises is that they are self-sustaining. Unlike dieting, where it’s no fun to keep turning down chocolate mousse, when you start writing down three things that went well today and why they went well, you tend to sleep better, and you don’t go to sleep at night thinking about, say, the fight you just had with your dean. By and large, people keep doing the exercise after the week is up. The exercises thus tend to be self-maintaining.

Here is another exercise. Marital therapy is the most difficult form of therapy to do, and it has the worst outcome statistics. Basically, in marital therapy, what we teach people is how to fight better, how not to have the same fight over and over. What you try to do, essentially, is change insufferable marriages into barely tolerable marriages. That is not what positive psychology is interested in. So about seven years ago, led by Shelly Gable, marital researchers at UCLA began to ask the question not of how couples fight together, but of how they celebrate together.

Imagine that your spouse has just been promoted at work. What do you say to her? Imagine a 2x2 table, which is active/passive by constructive/destructive. You might do active-destructive: “You’ve been promoted? You know what tax bracket that’s going to put us into?” You might do what I did until I read the literature—namely, passive-constructive:
“Congratulations. Well deserved.” You might do passive-destructive: “What’s for dinner?” But the only type of response that works is active-constructive: “Where were you when your boss told you that you had been promoted? Exactly what did he say? Why did you really think you had been promoted? You know, I have been reading your financial reports for the past few months, and that last report you wrote on the pension plan is simply the best financial document I have read in my twenty-five years in business. Would you relive the whole episode with me?” That is active-constructive responding. It turns out that practicing active-constructive responding predicts increases in love and affection and decreases in divorce. So active-constructive responding is a second exercise that is quite well documented now.

A third exercise came out of the work that Chris Peterson and I did. The VIA Signature Strengths Questionnaire (www.authentichappiness.org), which more than a million people have taken, tells you what your five highest strengths are—fairness, kindness, social intelligence, sense of humor, and the like. Once you have your signature strengths, your assignment is the following: “Think of something that you have to do at school or at work every week that you don’t like doing. Given that you have found your signature strengths, think of a way of doing that task using your highest strength.”

Let me put a little flesh on this. One woman I worked with was a waitress. She hated waitressing, with the heavy trays and customers patronizing her. Her task was to redefine waitressing using her highest strength: social intelligence. She decided that she would make the encounter with her the social highlight of every customer’s evening. Notice that she is going to fail almost all the time. She is, however, continually putting on offer what she is best at. In her case, the trays got lighter and the tips got bigger. In the case of random-assignment, placebo-controlled research, six months later you are less depressed and happier (Seligman et al. 2005).

FROM INDIVIDUALS TO ORGANIZATIONS TO NATIONS

Now that we have about twelve well-documented interventions that work for individuals, we asked the question, “Can you have positive interventions in organizations?” We began with schools and children. We went to classrooms and taught individual classes techniques of the sort that I have described above. We found in several studies that when we taught ten- to twelve-year-olds the techniques of positive psychology and resilience and then followed them versus control groups, we roughly halved the rate of
depression and anxiety when the kids went through puberty (Gillham et al. 2007).

Since the teaching in these studies was done by graduate students, we then asked the question, could we teach teachers to do this? So we developed a ten-day course for teachers and then followed the students of these teachers for the next two years. We found that their students showed significantly less depression, less anxiety, and, perhaps, better conduct for the next two years (Seligman et al. 2009). Could this work for a whole school? The Geelong Grammar School in Australia (a traditional British boarding school) allowed us to try this. Twenty of my faculty went to Australia, and we taught one hundred faculty from Geelong Grammar, which has around twelve hundred students. The faculty took ten days to learn these techniques. The whole school has now been imbued with positive education. Indeed, there are now nineteen replications of these procedures in schools across the world (Seligman et al. 2009).

Here is the story of the inflection point in positive education. Two years ago I was called to the Pentagon. The chief of staff of the army, George Casey, began by saying, “Post-traumatic stress disorder, suicide, depression, substance abuse, divorce—what does positive psychology have to say about that, Dr. Seligman?” I said that the distribution of human reactions to extreme adversity is bell shaped. On the far left hand are people who fall apart under extreme adversity. They become helpless, they show what we now call “post-traumatic stress disorder,” they kill themselves, or they become massively depressed. In the great middle are most people, by definition. These are people who are resilient, in the sense that although they have a very hard time after the awful event, within a month or two, by our psychological and physical measures, they are back where they were. And then a large number of people on the right-hand side of the distribution show post-traumatic growth. That is, they often go through post-traumatic stress disorder, but a year later, by physical and psychological measures, they are stronger than they were before the adversity occurred. These are the people of whom Nietzsche said, “If it doesn’t kill me, it makes me stronger” (1990).

My suggestion to the chief of staff was that he move the entire distribution of the army in the direction of post-traumatic growth by teaching them the skills of positive psychology. General Casey then actually ordered that, from that day forward, resilience and positive psychology would be taught and measured throughout the entire United States Army. General Casey said to me, “The general staff has read your work
on positive education, and we like your model. That is, we like the notion that you teach teachers these skills and then have the teachers teach the students. That is the army way.” I said, “It is?” He said, “Well, sure, we have 40,000 teachers in the army: the drill sergeants. So the job, Dr. Seligman, will be to train all the drill sergeants in the army in positive psychology.”

Indeed, this is what the United States Army is doing now. This project is called “Comprehensive Soldier Fitness.” First, a new test of fitness was developed. The usual army tests are about weaknesses and risk factors. But Chris Peterson, with Carl Castro, developed a test of fitness, a 105-item test of psychological fitness, social fitness, family fitness, and spiritual fitness. So we have measures of these positive variables on 1.1 million soldiers. Second, the army has developed online courses that you can take for college credit in each of these areas. Third, the army is training the drill-sergeant teachers in “master resilience training.” Every month 150 drill sergeants come to the University of Pennsylvania for ten days, and we take them through the teaching manuals. They then go out and teach the troops.

So the U.S. Army is in the middle of a cultural transformation. George Casey is a visionary. He realizes that the wars that we have been involved in lately are human wars, not mechanical wars, and if you want to create an army that can do its job and not have an epidemic of post-traumatic stress disorder, you need a psychologically fit army. So psychological fitness has now been elevated to the same level as physical fitness in the United States Army.

The United States Army is the largest organization that we have worked with. But how about nations? Is it possible that an entire nation can flourish? Policy follows from what we measure, and right now, what we measure is essentially economic. In February, I advised the Tory leadership of the UK that should you be elected, you should take seriously the measurement of well-being in Britain in addition to economic measures. You should hold yourself accountable for increases in well-being and not just increases in wealth. You should measure PERMA—how much positive emotion, how much engagement, how much goodness in relationships, how much meaning, and how much accomplishment the British people have. Indeed, the Tories were elected, and David Cameron’s government is doing what I suggested.

Using criteria similar to PERMA, Felicia Huppert and Timothy So (2009) of the Cambridge Well-Being Institute measured about fifty thousand adults in twenty-three European nations. This survey just used subjective criteria, though I am very interested in combining subjective and
objective measures of positive emotion, engagement, relationships, meaning, and accomplishment. Huppert and So reported, for example, that Denmark is leading the pack with about 33 percent of adults flourishing, Britain is at about 18 percent, and Russia at about 6 percent. This beginning tells us that the concept of human flourishing is measurable. So one can ask the question of changing the criterion by which government is judged—from making a nation wealthier to increasing its well-being. It is commonly said in the United States and Great Britain that this generation of young people will be the first generation not as well off as its parents. That may be true economically, but it is not true of flourishing.

This leads to the moon shot of positive psychology: our goal is that by the year 2051, 51 percent of the world’s population will be flourishing. This goal is a more serious human goal than more people smiling, having good relationships, and having meaning in life. The evidence is that the downstream effects are that people who are flourishing by PERMA criteria are physically healthier, more productive at work, and more peaceful than people who are not flourishing. Some of the human goals we most cherish—prosperity, health, and peace—which we have not been able to achieve head-on, might be able to be met indirectly: by building flourishing.

**OUR FLORENTINE MOMENT**

This brings me to my concluding comment on the politics of flourishing. It is not a politics of Left or Right, which are the politics of what means to the conventional ends of wealth and security. This is a politics of a different end. In this politics, the end is human flourishing: what government is about, in this view, is increasing human flourishing.

When nations are poor and at war and in famine and in plague, it is perfectly natural that government’s primary concern should be about defense and damage. This is the way it has usually been in human history. But there have been eras when a nation was wealthy, at peace, not in civil turmoil, not in plague, not in famine. Florence had become enormously wealthy by the 1450s, due, for the most part, to Medici banking genius. They asked the question, “What are we going to do with our wealth?” Cosimo the Elder won the day, and Florence decided to devote its resources and its surplus to beauty. They gave us what, two hundred years later, we called the Renaissance.

I am not suggesting that the time has come for us to do sculpture. Rather, I am suggesting that we are at a Florentine moment. The rich
nations of the world have come to a Florentine moment. The question is, “What is our wealth for?” My economist friends generally say that the point of wealth is to increase wealth. I disagree. The point of increasing wealth is to increase well-being, to increase the PERMA in the citizens of the nation.

In Zarathustra, Nietzsche argued that human development has three stages. The first stage he called the camel. Human history for the most part has been in this stage. The camel just sits there and moans. The second stage Nietzsche called the lion, or sometimes the rebel. What the lion does is say “No!”—no to poverty, no to racism, no to disease. This is basically what our politics from 1776 has been, a politics of saying “No” to the disabling conditions of life. I think you have to be blinded by ideology not to see that this politics has been working and that there has been real human progress. There are more good things in the world now than there were two hundred years ago. There is not only more wealth, but also less racism, less pollution, more human rights, fewer battlefield deaths, more democracy, and on and on.

But the lion is not Nietzsche’s final stage. Nietzsche wondered, what if the lion worked, and we actually were successful in saying “No” to the disabling conditions of life? This leads to the third stage of human existence, which Nietzsche called the child reborn. In this stage, we can ask, “What can every human being affirm? What does every parent want for every child?” This is exactly what we have talked about today.

We can all say “Yes” to more positive emotion in life.
We can all say “Yes” to more engagement with the people we love, in our work, in our leisure.
We can all say “Yes” to better relationships with people.
We can all say “Yes” to more meaning in life.
We can all say “Yes” to more positive accomplishment.
We can all say “Yes” to human flourishing.

References


Prospective Cohort of Elderly Dutch Men and Women.” *Archives of General Psychiatry* 61: 1126–35.


Abstract Positive psychology has flourished in the last five years. We review its recent developments, including books, meetings, courses, and conferences. We discuss the newly-created classification of character strengths and virtues, a positive complement to the DSM’s, and we present some cross cultural findings that suggest surprising ubiquity of strengths and virtues. Finally, we focus on psychological interventions that increase individual happiness. Positive Psychology Progress: Empirical Validation of Interventions. Five years have passed since the American Psychologist devoted its millennial issue to the emerging science of positive psychology: the study of positive emotion, positive character, and positive institutions (Seligman & Csikszentmihalyi, 2000).
The use of positive psychological interventions may be considered as a complementary strategy in mental health promotion and treatment. The present article constitutes a meta-analytical study of the effectiveness of positive psychology interventions for the general public and for individuals with specific psychosocial problems. Methods. Although the basic concepts of well-being, happiness and human flourishing have been studied for some decades [12, 25-27], there was a lack of evidence-based interventions [24]. Results showed that positive psychology interventions significantly enhance subjective and psychological well-being and reduce depressive symptoms. Effect sizes were in the small to moderate range. Flourish: Positive Psychology and Positive Interventions. Martin Seligman. Tt. works on positive psychology, learned helplessness, depression, optimism, and pessimism. He is currently Zellerbach Family Professor of Psychology in the Department of Psychology at the University of Pennsylvania and the director of the Positive Psychology Center. He was elected president of the American Psychological Association in by the largest vote in history. Positive psychology complements traditional psychological approaches to mental health. The stance of positive psychology is to study what makes life worth living. Practitioners of positive psychology focus on interventions that develop a sense of optimism, and that foster positive attitudes (toward oneself, one’s subjective experiences, and life events). Positive psychology in its current implementation was given a boost by Martin Seligman’s presidential address given to the American Psychological Association in 1999. He proposed that although contemporary psychology successfully focused on