

# Mindful Continuing Education

## Analyzing the Effectiveness of Positive Psychology Interventions

### Background

**1. Which of the following is NOT an accurate statement about positive psychology interventions (PPI)?**

- A. They focus on enhancing well-being and optimal functioning rather than ameliorating symptoms
  - B. An important component is addressing symptoms through directive interventions
  - C. Positive psychology complements rather than replaces traditional psychology
  - D. Common themes include savoring, gratitude, kindness, promoting positive relationships, and pursuing hope and meaning
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**2. A substantial body of evidence demonstrates that high levels of well-being buffer against psychological symptomatology, including relapse or recurrence of symptoms, as well as enhancing quality of life and:**

- A. Longevity
  - B. Social connectedness
  - C. Health awareness
  - D. Prosperity
- 

### Intervention, Comparison and Outcome Characteristics

**3. Extensive research examined the effects of comparing PPIs to treatment as usual, an active control condition, or a no intervention/waitlist condition on well-being, depression, anxiety, and stress in clinical samples with psychiatric or somatic disorders, with specific focus on raising positive feelings, behaviors and:**

- A. Relationships
  - B. Experiences
  - C. Resilience
  - D. Cognitions
- 

**4. When evaluating well-being at post-intervention, study results indicated a significant, small effect.**

- A. True
  - B. False
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**5. Which of the following accurately describes post-intervention effects on depression, anxiety, and stress?**

- A. Overall effects were most significant for stress when compared to depression and anxiety outcomes
  - B. For depression, based on 14 comparisons, a significant, moderate effect was found, and after removal low quality studies from the analysis, the effect size was small and not significant
  - C. Based on 26 comparisons, a significant, small effect of PPIs on anxiety was found, and after removal of low-quality studies, the effect size was not significant
  - D. The overall mean effect size for 5 comparisons on stress was not significant at post-intervention, and only 1 study that included stress as an outcome had a medium quality rating
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## **Discussion**

**6. The analyses suggest that at follow-up, a small but significant effect size of PPIs on well-being continued to be observed.**

- A. True
  - B. False
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**7. Recent studies suggest that well-being and psychological distress are two separate constructs, and that the treatment of symptoms does not necessarily result in improved well-being.**

- A. True
  - B. False
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**8. Explorative subgroup analyses suggest that PPIs are more effective in improving well-being when they are:**

- A. Incorporated into a group setting
  - B. Guided and supported
  - C. Peer-led
  - D. Formatted as self-help interventions
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**9. Study findings that are in line with earlier meta-analytic reviews suggest that PPIs are more effective when offered during a longer period of time, which should be more than 12 weeks.**

- A. True
  - B. False
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**10. The authors recommend further research to examine which clinical populations may benefit from PPIs, in terms of type, delivery mode, and:**

- A. Duration
  - B. Structure
  - C. Strategies
  - D. Intensity
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## **Towards Sustainable Mental Health Promotion-Background**

**11. According to the authors, a flourishing mental health state is demonstrated by high levels of emotional well-being such as life-satisfaction and positive affect and high levels of social and psychological well-being indicated by each of the following EXCEPT:**

- A. Social contribution and positive relationships
  - B. Self-acceptance
  - C. Autonomy and personal growth
  - D. Purpose in life
- 

**12. Longitudinal studies have shown that flourishing helps to protect against first-onset and recurrence of diagnosed:**

- A. Mood and anxiety disorders
  - B. PTSD
  - C. Somatoform disorders
  - D. Substance use disorders
- 

## **Interventions**

**13. In a study that compared the effects of a mental well-being intervention to a wait-list control, intervention participants received the self-help book, This is Your Life, which focuses on psycho-education, theoretical background information, a variety of evidence-based exercises from positive psychology, as well as mindfulness, acceptance, and:**

- A. Social coping
  - B. Communication
  - C. Commitment therapy
  - D. Gratitude interventions
- 

**14. Specific purposes of the book include improving an individual's capacity to savor positive emotions, discovering and using character strengths, developing self-acceptance and compassion,**

**learning to cope with adversity, encouraging sharing and connection with others, and:**

- A. Teaching the fundamentals of happiness
  - B. Encouraging flow and an optimistic attributional style
  - C. Learning how to look at life and experiences with optimism, strength, and empathy
  - D. Developing tools to enable the imagining of the ideal self
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## **Results-Health Effects**

**15. Study results evaluating health effects at 6 months indicated that 47 percent of the participants in the intervention condition demonstrated flourishing mental health compared to 23 percent in the control condition.**

- A. True
  - B. False
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## **Discussion**

**16. All study findings indicated that substantial health gains can be expected from the intervention against an increase in health care costs and that the probability of regarding the intervention as cost-effective exceeds 90% at a willingness to pay \$12,290 per treatment responder.**

- A. True
  - B. False
- 

**17. The current study indicates that guided PP-based bibliotherapy has a high likelihood to be seen as a cost-effective approach compared to usual care if there is a willingness to pay a reasonable amount for reaching a flourishing mental health state and avoiding:**

- A. Physical manifestations of emotions
  - B. Undue stress
  - C. Interpersonal conflict
  - D. Anxiety and depression
- 

## **Conclusions**

**18. This specific intervention is of great importance for public mental health and clinical practice because it has the potential to reach large groups of people through public mental health services and primary care with minimal investment.**

- A. True
  - B. False
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