

**A SELECTION OF TEN READINGS ON TOPICS RELATED TO
2025 DISTANCE LEARNING COURSE ON EXTENDED CONSULTATION 2025**

FPSCI25 – SATURDAY, 11 JAN 2025 & SUNDAY 12 JAN 2025: 2.00pm-5.30pm
All are available as free full text

Selection of readings made by A/Prof Goh Lee Gan

READING 1 – THREE POSITIVE BEHAVIOURS OF FLEXIBILITY (NAMELY, PREDICTABILITY, ADAPTABILITY, AND ORDERLINESS) AND CHARACTER STRENGTHS ARE INTERRELATED

Vylobkova V,¹ Heintz S.^{1,2} A meeting of positive behaviors: The relations of three aspects of flexibility with character strengths. *Front Psychol.* 2023 Feb 3;13:1078764. PMID: 36817377.

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ABSTRACT

INTRODUCTION: The adaptation of plans and behaviours to new circumstances seems to be a desirable personal quality in the modern world. It has been assumed that adaptability cannot be transferred to a single character strength.

METHODS: The present research examines this assumption using typical and daily behaviours of three aspects of flexibility (predictability, adaptability, and orderliness) and 24 character strengths across two studies (N1=283, N2=188).

RESULTS: Flexibility showed a consistent and large overlap with character strengths. Adaptability was positively related to most of the strengths. Predictability was positively related to humility and prudence, and orderliness to perseverance, prudence, and self-regulation.

DISCUSSION: These results support our initial assumption and build a strong basis for further examining the relationships and interplay between flexibility and character strengths. They also constitute an important first step towards integrative positive interventions that target relevant aspects of flexibility and character.

READING 2 – WHO WILL BENEFIT FROM COGNITIVE BEHAVIOURAL THERAPY IS NOT ENTIRELY CERTAIN

Vieira S,¹ Liang X,² Mechelli A,² Guiomar R.³ Can we predict who will benefit from cognitive-behavioural therapy? A systematic review and meta-analysis of machine learning studies. *Clin Psychol Rev.* 2022 Nov;97:102193. PMID: 35995023.

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ABSTRACT

Cognitive-behavioural therapy (CBT) is the first line of treatment for several mental health disorders. However, not all patients show clinical improvements after receiving CBT. Machine learning allows inferences at the individual level and therefore is a promising approach for predicting who will and will not benefit from CBT.

A comprehensive literature search was conducted to identify all studies that used machine learning to predict clinical response to CBT. A random-effects meta-analysis of proportions was used to estimate an overall performance accuracy across all studies. Twenty-four studies (N=7,497) were identified, covering five diagnostic groups: Major Depressive Disorder (k=4), Obsessive-Compulsive Disorder (OCD, k=5), Post-Traumatic Stress Disorder (k=2), Anxiety Disorders (AD, k=7), Substance Use Disorders (k=4), and two transdiagnostic models. Studies used clinical, neuroimaging, and cognitive and genetic data, or a combination of these, as predictors. The overall performance accuracy across studies was 74.0% [70.0-77.8]. Accuracies differed significantly between diagnostic groups and was highest in PTSD (78.7%, 69.1-87.0), AD (77.6%, 67.5-86.4), and OCD (76.1%, 67.3-84.0). Some studies were at a high risk of bias due to how the outcome was operationalised and/or how the analyses were conducted/reported. There are many challenges to overcome before these promising results can be applied to real-world clinical practice.

READING 3 – NARRATIVE REVIEW OF OBESITY AS A SOCIAL PHENOMENON

Cammarano A,¹ Scipione C,¹ Marsella LT,¹ Potenza S,¹ Alvaro R,¹ Cecchetti L,¹ Maurici M,¹ Marella GL,² Tavone AM,³ Capanna A.⁴ Obesity as a social phenomenon: A narrative review. *Epidemiol Prev.* 2022 May-Jun;46(3):168-172. PMID: 35775294.

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ABSTRACT

BACKGROUND: Obesity is one of the most prevalent diseases all over the world. Because of its high social impact, the broadest possible approach on several levels – and not limited only to clinical aspect – is needed to better understand and face the challenges obesity poses to public health.

OBJECTIVES: To analyse, through the main evidence, the social impact of weight excess in the general population and the actions aimed at mitigating its negative effects.

DESIGN: Narrative review.

SETTING: Data obtained from the sources included in the study were gathered and analysed in five macroareas: Health Inequality, Society, Work, Impact on Social Medicine (focused on the Italian model), and Social Costs.

RESULTS: Each category showed a bilateral relationship with obesity having a significant impact on the community.

CONCLUSIONS: For each field, various actions should be taken at institutional level. Many recommendations and actions have already been taken worldwide, but they alone do not seem to be enough. This work points out that, in order to combat obesity and bring about a slowdown of this pandemic, the entire scientific community and institutions must work together to identify and design programmes that are truly effective.

READING 4 – MEDICAL EDUCATORS' EXPERIENCES ON MEDICALLY UNEXPLAINED SYMPTOMS

Sallay V,^{1,#} Csabai M,¹ Martos T,^{2,#} Lucza L,³ Weiland A,⁴ Stegers-Jager KM,⁵ Vermeir P,^{6,7} Mariman ANM.^{6,8}
Medical educators' experiences on medically unexplained symptoms and intercultural communication-an expert focus group study. BMC Med Educ. 2022 Apr 23;22(1):310. PMID: 35461231

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ABSTRACT

BACKGROUND: Medically unexplained symptoms (MUS) are highly prevalent and remain challenging in healthcare and medical education, along with the increase in the importance of intercultural issues regarding MUS. However, less is known about the challenges of professionally addressing patients with MUS in the interprofessional and intercultural contexts. Thus the present study aims to provide the first exploration of the experiences of medical specialists regarding treating MUS in intercultural contexts and inputs for training development on the intercultural aspects of MUS.

METHODS: Three focus groups (total n=13) consisting of medical specialists from a Hungarian university who were teaching at the medical faculty in intercultural settings and also worked for the university health services were interviewed. The topics covered the participants' personal experiences on addressing MUS and the challenges of intercultural communication and the intercultural educational context. Thematic analysis was used to yield a qualitative account of the interviews as guided by the research questions.

RESULTS: Representing the different aspects of medical specialists, the study identified three main themes in the experiences of medical specialists, namely: 1) the need to adapt to the personal world of patients and search for common frames to understand MUS; 2) the need to discover methods for adapting to cultural differences; and 3) the need to enhance the interprofessional coordination of knowledge and practices.

CONCLUSIONS: The results are in line with the distinct conclusions of previous studies. Moreover, an integrated educational programme on the intercultural aspects of MUS may address the main themes separately and, subsequently, support their integration. Therefore, the study discusses the manner in which an integrated educational programme on the intercultural aspects of MUS might address the needs recognised in these aspects.

READING 5 – CHARACTER STRENGTHS ACROSS DISABILITIES

Umucu E,¹ Lee B,¹ Sung C,¹ Yasuoka M,¹ Genova HM,² Chopik WJ,³ Niemiec RM.⁴ Character Strengths Across Disabilities: An International Exploratory Study and Implications for Positive Psychiatry and Psychology. *Front Psychiatry*. 2022 Feb 25;13:863977. PMID: 35280155.

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ABSTRACT

The purpose of this study was to examine the differences in character strengths for people with disabilities by using an international dataset by the VIA Institute on Character. Specifically, we aimed to explore (a) the top and bottom five character strengths reported by different disability groups and all people with disabilities more broadly, and (b) group differences in each character strength and total character strengths. The investigator contacted the VIA Institute on Character (<http://www.viacharacter.org/>) for obtaining the dataset for the current study. After data cleaning, our sample size resulted in 11,699 people with disabilities. Among most people with disabilities, the top five character strengths scores were love of learning, honesty, appreciation of beauty and excellence, kindness, and fairness. The bottom five character strengths scores were self-regulation, perseverance, zest, spirituality, and prudence. Knowing that there is heterogeneity in character strengths across groups gives us a better understanding of the areas that people with different disabilities and conditions might thrive and provides clinicians and practitioners with a more nuanced understanding for how to possibly intervene with their clients. Positive psychiatry and psychology implications are discussed.

READING 6 – DO MORE OF WHAT MAKES YOU HAPPY?

Huber A,¹ Höfer S,¹ Bair A,² Strecker C,³ Höge T.³ Do More of What Makes You Happy? The Applicability of Signature Character Strengths and Future Physicians' Well-Being and Health Over Time. *Front Psychol*. 2021 May 31;12:534983. PMID: 34135792.

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ABSTRACT

Research on applying signature character strengths demonstrated positive effects on well-being, health, and work behaviour. Future healthcare professionals represent a group at risk for impaired well-being due to high study demands. This study investigates potential long-term protective effects on well-being. In total, 504 medical students participated in a longitudinal online study, with at least 96 providing complete data at all three time points (time lag: one year).

Data on individual signature character strengths and their applicability, thriving (subjective and psychological well-being), work engagement, burnout, and mental and physical health were collected. Longitudinal relations of signature character strengths' applicability and well-being, and mental and physical health were tested with cross-lagged panel analyses. Moreover, indirect longitudinal mediation effects via work engagement and emotional exhaustion were considered. Cross-lagged panel analyses demonstrated significant positive effects of thriving on signature character strengths' applicability at later time points ($\beta=0.20$ to 0.27) indicating that higher levels of well-being might be mandatory first to have access to one's own signature character strengths in a naturalistic setting. Disentangling thriving, the effect was only significant for psychological well-being ($t1-t2: \beta=0.23$; $t2-t3: \beta=0.27$). Across all three time points, significant indirect effects via work engagement on the relation of the applicability of signature character strengths and well-being were identified ($r=0.15$), whereas significant indirect effects on mental and physical health were only evident at $t2$ (both: $r=0.06$) and $t3$ (mental health: $r=0.11$). A longitudinal mediation analysis via work engagement revealed a significant indirect effect ($a*b=0.13$).

These results call for further research as previous studies showed that the applicability of signature character strengths affected well-being, not vice versa. The "broaden-and-build" theory (positive emotions broaden one's consciousness and hereupon individuals build new enduring resources and skills) and the assumption of well-being in a "top-down" model (trait-like predisposition to interpret life experiences in positive ways colouring one's evaluation of satisfaction in various domains accordingly) could possibly explain these novel results.

READING 7 – EFFECTIVENESS OF THE "THREE GOOD THINGS FOR OTHERS" INTERVENTION

Laguna M,¹ Kędra M,¹ Mazur-Socha Z.¹ A Randomized Placebo-Controlled Study on the Effectiveness of the "Three Good Things for Others" Intervention. *Front Psychol.* 2021 May 19;12: 661336. PMID: 34093354.

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ABSTRACT

The aim of our study was to test the effectiveness of the "three good things for others" intervention. We used the randomised controlled trial method, with four measurements (pretest; post-test; follow-up after two weeks; follow-up after four weeks), and with random assignment of participants to experimental and placebo control groups. We investigated the effects of the intervention on prosocial behaviour, and in addition on positive and negative affect, and positive orientation (a general tendency to approach reality in a positive way). The results showed an increase in positive affect and a decrease in negative affect in the experimental group a day after the intervention. These effects, however, did not endure over the next two or four weeks. We also observed a statistically significant increase in prosocial behaviour in the placebo control group, in which participants were engaged in a task of recalling childhood memories. The results were discussed and recommendations for future studies were proposed.

READING 8 – EFFECT OF POSITIVE PSYCHOTHERAPY ON HAPPINESS AND CHARACTER STRENGTH IN CANCER PATIENTS

Meibodi RP,¹ Meftagh SD,¹ Shahangian SS.² The effect of positive psychotherapy on happiness and character strength in cancer patients. *J Educ Health Promot.* 2021 Mar 31;10:97. PMID: 34084844.

doi: 10.4103/jehp.jehp_595_20. PMID: 34084844. Full free text.

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ABSTRACT

BACKGROUND: Cancer is one of the major health problems across the world that poses a great threat to human health and active life in all age groups, causing numerous personal, familial, and social damages in physical, mental, and spiritual dimensions. The aim of the present study was to investigate the effect of positive psychotherapy on happiness, character strengths, pleasure, commitment, and semantic measures in the lives of people with cancer.

MATERIALS AND METHODS: Within the framework of a quasi-experimental design, 58 patients suffering from cancer meeting the inclusion criteria (disease history and married) were selected via purposeful sampling method. However, only 30 of the patients met the required criteria to participate in all psychotherapy sessions. The participants were then randomly assigned to two intervention and control groups (15 participants per group). The intervention group received eight 120-min sessions of positive psychotherapy on a weekly basis while the control group was put on the waiting list. Data collection tools included the Oxford Happiness-Depression Questionnaire and Values in Action-Inventory of Strengths. The participants completed the questionnaires before and after the intervention. Data analysis was conducted by analysis of covariance.

RESULTS: The results of covariance analysis suggested that the use of positive psychotherapy has been effective on increasing happiness ($F=0.129$, $P=0.005$), increasing character strength ($F=27.55$, $P=0.001$), increasing the semantic measures ($F=15.23$, $P=0.002$), increasing pleasure ($F=8.51$, $P=0.005$), and commitment ($F=64.19$, $P=0.001$) among patients with cancer.

CONCLUSIONS: The results of the present study indicated that positive psychotherapy has been effective on happiness, strengths, pleasure, commitment, and semantic measures of the life among people with cancer. Positive psychotherapy can be used to minimise the effects of cancer on patients.

READING 9 – THE PRACTICE OF CHARACTER STRENGTHS

Niemiec RM,¹ Pearce R.² **The Practice of Character Strengths: Unifying Definitions, Principles, and Exploration of What's Soaring, Emerging, and Ripe with Potential in Science and in Practice.** *Front Psychol.* 2021 Jan 27;11:590220. PMID: 33584426.

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ABSTRACT

What does it mean to be “strengths-based” or to be a “strengths-based practitioner”? These are diffuse areas that are generic and ill-defined. Part of the confusion arises from the customary default of practitioners and leaders across many cultures to label anything positive or complimentary as “strengths-based”, whether that be an approach, a theoretical orientation, an intervention, or a company. Additional muddle is created by many researchers and practitioners not making distinctions between very different categories of “strength” in human beings – strengths of character, of talent/ability, of interest/passion, of skill/competency, to name a few.

To add clarity and unification across professions, we offer seven characteristics and a comprehensive definition for a character strengths-based practitioner. We centre on the type of strength referred to as character strengths and explore six guiding principles for understanding character strengths (e.g., character is plural; character is being and doing) and their practical corollaries.

Reflecting this foundation and based on character strengths research, our longstanding work with strengths, discussions with practitioners across the globe, and a practitioner survey asking about strength practices ($N=113$), we point out several character strengths practices or approaches we describe as soaring (e.g., explore and encourage signature strengths; practice strengths-spotting), emerging (e.g., the integration of mindfulness and character strengths), or ripe with potential (e.g., phasic strengths; the tempering effect; the towing effect). We use the same framework for describing general research domains. Some areas of research in character strengths are soaring with more than 25 studies (e.g., workplace/organisations), some are emerging with a handful of studies (e.g., health/medicine), and others are ripe with potential that have none or few studies yet opportunity looms large for integrating character science (e.g., peace/conflict studies). Using this framework, we seek to advance the exchange and collaboration between researcher and practitioner, as well as to advance the science and practice of character strengths.

READING 10 – THE LONG AND WINDING ROAD OF HAPPINESS

Weiss LA,^{1,2} Oude Voshaar MAH,³ Bohlmeijer ET,³ Westerhof GJ.³ The long and winding road to happiness: A randomized controlled trial and cost-effectiveness analysis of a positive psychology intervention for lonely people with health problems and a low socio-economic status. *Health Qual Life Outcomes*. 2020 Jun 2;18(1):162. PMID: 32487120.

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ABSTRACT

BACKGROUND: Our objective was to evaluate the effectiveness and cost-effectiveness of the positive psychology intervention "Happiness Route" compared to an active control condition in a vulnerable population with an accumulation of health and psychosocial problems.

METHODS: We conducted a randomised, single-blind, actively-controlled, parallel group study in seven municipalities in the Netherlands. To be eligible, participants had to experience loneliness, health problems, and low socio-economic status. Each group received several home visits by a counsellor (two in the control condition, two to six in the experimental condition). In the Happiness Route, a happiness-based approach was used, whereas the control condition used a traditional problem-based approach. The primary outcome was well-being, measured with the Mental Health Continuum-Short Form (MHC-SF).

RESULTS: Fifty-eight participants were randomised to the Happiness Route, 50 to the control condition. Participants were severely lonely, had on average three health problems, and less than 5% had paid work. The total MHC-SF score, emotional, and social well-being, depression and loneliness improved significantly over the nine-month period in both conditions ($p < 0.05$), but there were no significant changes between the conditions across time. Languishing decreased significantly from 33% at baseline to 16% at follow-up among the Happiness Route participants but did not change significantly in the control condition. No significant improvement over time was found in psychological well-being, resilience, purpose in life, health-related quality of life and social participation. Cost-effectiveness analysis showed that expected saved costs per QALY lost was €219,948 for the Happiness Route, relative to the control condition. The probability was 83% that the Happiness Route was cost-saving and 54% that the Happiness Route was cost-effective at a willingness to accept a threshold of €100,000.

CONCLUSIONS: Mental health status of both groups improved considerably. However, we could not demonstrate that the Happiness Route yielded better health outcomes compared to the control condition. Nevertheless, the results of the cost-effectiveness analysis suggested that the Happiness Route is an acceptable intervention from a health-economic point of view. Our results should be viewed in light of the fact that we could not include the planned number of participants.