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## Appendix - I

### Ethical Clearance Certificate

#### INSTITUTIONAL HUMAN ETHICS COMMITTEE



### *Avinashilingam*

Institute for Home Science and Higher Education for Women  
(Deemed to be University under Category 'A' by MHRD, Estd. u/s 3  
of UGC Act 1956) Re-accredited with 'A++' Grade by NAAC.  
Recognised by UGC Under Section 12 B  
Coimbatore-641 043, Tamil Nadu, India

03<sup>rd</sup> June 2022

#### **Chairman**

Dr.Sudha Ramalingam  
Director-Research & Innovation,  
Professor-Community Medicine,  
PSG Institute of Medical Sciences  
& Research, Coimbatore

#### **Member Secretary**

Dr.S.Uma Mageshwari  
Professor and Head,  
Department of Food Service  
Management & Dietetics

#### **Members**

Mr.K.Arunmoli (Legal Expert)  
Dr.Subhashini K. Sripathi  
Dr.A.Saraswathy (Medical Officer)  
Ms.D.Kavitha  
Dr.A.R.Sudamani Ramasamy  
Dr.G.Victoria Naomi  
Dr. Judith Justin  
Dr.Anitha Subash

To  
Ms.Sudha.R  
Department of Psychology  
Avinashilingam Institute for Home Science and  
Higher Education for Women  
Coimbatore – 641 043

Dear Sudha.R,

Ref: Your presentation of the proposal No. IHEC/21-22/PSY-20 entitled "Construction of a Psychological Tool to Quantify Positive Psychology Constructs" submitted for approval to IHEC on 23.11.2022.

The Institutional Human Ethics Committee of our University hereby grants approval to your research proposal No. IHEC/21-22/PSY-20 entitled "Construction of a Psychological Tool to Quantify Positive Psychology Constructs" submitted and presented by you. The Approval number for the same is AUW/IHEC/PSY-21-22/FHP-20.

We wish you all the best in your research endeavours.

Regards,

*S. Uma Mageshwari*  
Dr.S.Uma Mageshwari  
Member Secretary



## Appendix - II

### Details of Research Publications



#### Avinashilingam Institute for Home Science and Higher Education for Women

(Deemed to be University Estd. u/s 3 of UGC Act 1956, Category 'A' by MHRD  
Re-accredited with A++ Grade by NAAC. CGPA 3.65/4, Category I by UGC  
Coimbatore - 641 043, Tamil Nadu, India

### Appendix L2

#### (Item No 5 of Check List) Details of Research Publications

S.No	Article	Journal	Other Details Vol/No/Page No/ Year	Published in UGC- CARE / Scopus Indexed/ Web of Science
1	A Virtual Positive Psychology Based Intervention Model for young adults during the COVID19	Indian Journal of Clinical Psychology	Vol. 48 Issue 4 25-35 2021	UGC-CARE Group 1.
2	Efficacy of a Positive Psychology based Intervention on Stress and Happiness among Working Women: An RCT protocol	Journal of the Indian Academy of Applied Psychology	Vol. 49 Issue 2 2023	UGC-CARE Group 1.

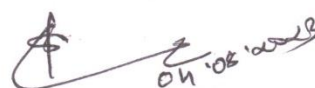
\*Proof of list of Journals from Internet to be attached along with copies of reprints.

Scholar

: R. Sudha

Supervisor

: S. Gayathri Devi

  
04.08.2023

Checked By:

HoD/Dean of Respective School

The scholar Mrs. Sudha, R (20PHCP001) has published her paper in the following journals:

1. Indian Journal of Clinical Psychology - is indexed and active in UGC Care Group I from June 2019 to present. The scholar published her paper in Vol. 48, Iss. 4, 2021.
2. Journal of the Indian Academy of Applied Psychology - is indexed and active in UGC Care Gr. I from January 2023 to present. The paper is provisionally accepted in this journal (Vol. 49, No. 2, July 2023).

J. J. J. J.  
04.08.23

## A Virtual Positive Psychology Based Intervention Model for Young Adults during the COVID 19

<sup>1</sup>R. Sudha, and <sup>2</sup>S. Gayatri Devi

The COVID 19 pandemic has brought about considerable changes to all our lives. People have suffered numerous physical and psychological issues. This paper is an effort to create a Virtual Positive Psychology Based Intervention Model to help students overcome depression, Anxiety and Stress brought by the pandemic and develop hope and happiness to stride forward in future. An initial survey of 258 students in the age group of 18 to 23 years was conducted by psychometrically assessing using the hope, depression, anxiety, stress and the subjective happiness of the participants. After the initial screening, 55 students who were vulnerable to develop anxiety and depression were selected. After informed consent, the 15-day intervention model designed by the researchers was conducted. The whole intervention had a set of exercises conveyed and followed up virtually. The tests were repeated after the intervention. A follow-up was conducted with the same psychological tests after a period of three months. The results indicated a significant difference in the Before, After and Follow-up phases in stress, anxiety and depression. It indicated that the intervention was successful in reducing the psychological issues in the participants.

*Keywords:* stress, anxiety, depression, positive psychology

The COVID 19 pandemic has brought about considerable changes to our lives. All over the world, people have evolved and brought forward new and effective coping strategies. Priorities of individuals have changed; people are more focused on micromanaging their health. However, the main challenge has been maintaining mental health and well-being despite many setbacks. The education system has changed too. The whole teaching-learning system has undergone substantial change. Students and teachers have responded to this in diverse ways starting from embracing the new method of online teaching and learning to being critical about the success of this new system.

During the last two years, people from diverse backgrounds, cultures, socioeconomic backgrounds, and various facilities have all had multiple reactions to these changes. They have faced uncertainties and frustrations through everyday exposure to news about COVID 19, causing stress and anxiety, frustrations and depression and many more psychological difficulties. Much uncertainty has plagued the minds of students and their parents. The life skills were needed to overcome this pandemic stress. It ranged from simple relaxation to resilience-building, to resetting and reorganizing their goals and objectives while working through constraints posed by this global threat. This

resulted in creating a Virtual Positive Psychology Based Intervention Model called CARE (C: Compassion and Self Compassion, A: Achievement and Purpose in Life, R: Good Relationships and E: Positive Emotions). The intervention module has the objective to improve the well-being of the participants through exercises designed to enhance the feelings of compassion and self-compassion, achieving a purpose in life, building and maintaining good relationships, building positive feelings such as optimism, resilience, hope and happiness. Thus, this intervention was designed to get the participants involved in activities to bring about lasting wellbeing for them. Jain (2021) suggests that greater exposure to COVID related news leads to more significant stress and hence lesser satisfaction and gratitude levels and suggests building positive emotions to overcome this stress. In a study on the effectiveness of positive psychology-based online intervention among adults in Greece, Brouzos et al. (2021) reported that the positive psychology intervention helped to reduce anxiety, stress and loneliness. Also, this intervention improved positive psychology constructs such as empathy and resilience among the participants. Jordan et al. (2021), in a study on the protective factors for elders during the COVID pandemic, outlined the importance of forward-focused coping that can be built through

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<sup>1,2</sup>Department of Psychology, Avinashilingam Institute for Home Science and Higher Education for Women, Coimbatore  
Corresponding Author's Email: drgaya1965@gmail.com

positive psychological interventions. In a study on employee positive psychology coaching, Nieuwerburgh et al. (2021) reported that such coaching re-energized their employees. Also, positive psychology coaching brought forth increased awareness and self-reflection. The coaching helped alleviate negative emotions in participants and improved their confidence levels. In a similar study benefitting communities, Waters et al. (2021) discuss the positive effects of positive psychology on schools, workplaces, and families that are inclusive of marginalized populations during the pandemic.

Tejada-Gallardo et al. (2020) conducted a meta-analysis of nine randomized and non-randomized control trials on the effectiveness of multicomponent positive psychology interventions on improving well-being and reducing distressing symptoms such as depression. This study found the positive psychological components such as optimism, hope and happiness to be very effective in improving subjective and psychological well-being and reducing depressive symptoms among adolescents. A similar result was reported in clinical populations where positive psychology interventions focusing on increasing positive psychology constructs such as optimism and hope helped improve emotional and psychological well-being. (Bolier et al., 2013). Parks and Boucher (2020) suggest that positive psychology interventions focusing not only on happiness but on building hope and optimism are necessary for the pandemic period. The researchers suggest that due to social distancing norms, these interventions have to be developed in such a way that they can be conveyed digitally are necessary.

Chakhssi et al. (2018) reported that positive psychological interventions focusing on developing positive emotions, cognitions, and behaviour help improve well-being while effectively reducing symptoms of Stress, Anxiety, and Depression among the clinical population. A similar randomized control study (Pietrowsky & Mikutta, 2012) reported that brief positive psychology interventions helped alleviate the symptoms of Depression and helped to increase well-being. An investigation on the effectiveness of the Compassion Cultivation Programme on burnout and job satisfaction among health care workers (Scarlet et al., 2017)

concluded that improvements in compassion levels showed a significant increase in job satisfaction, mindfulness, self-compassion, and reduced interpersonal conflict. However, no effect was seen on burnout. This study had an intervention programme to build and develop compassion in everyday life.

In interesting research by Cohen et al. (2006), study participants were initially assessed on their Positive Emotional Style (Happy, Cheerful, Lively or Calm) versus a Negative Emotional Style (stressed, anxious, hostile or depressed). Then they were exposed to the Influenza virus. The results remarkably indicated that increased positive emotional style was associated very clearly with a lesser risk of upper respiratory tract infections.

The CARE Intervention that is taken up for study in the present research was effective in reducing social anxiety and improving the happiness levels of 55 female college students. (Sudha & Gayatri Devi, 2021). The same intervention is being used in the present study to reduce stress, anxiety and depression and help build hope and happiness.

Given the enormous uncertain circumstances, it is essential to help people in their coping strategies, to help in reducing psychological distress and helping to build hope and optimism when the COVID variants continue their nonstop onslaught. Building a simple to use positive psychology-based intervention that could be conveyed virtually was hence undertaken by the researchers.

## Method

The study was conducted to identify the psychological distress in the students during the COVID and to analyze the effectiveness of a virtual positive psychological intervention to reduce stress, anxiety, and depression among the participants and analyze the effectiveness of a virtual positive psychological intervention to improve hope and happiness among the participants. The overall aim of the study was to bring forward an easy-to-use positive psychological intervention that can be given virtually to the participants. The literature review reveals that positive psychology-based interventions help in reducing psychological distress

### *Hypotheses*

H<sub>1</sub>: There will be a significant difference between Before, After, and Follow-up phases in depression, anxiety and stress through CARE intervention programme students.

H<sub>2</sub>: There will be a significant difference between Before, After and follow-up phases in hope and happiness through CARE Intervention among Students.

### *Materials*

The following psychological scales were used in the assessment process in the Before, After and the Follow-up phases. Before the onset of the programme, the participants were administered:

The Adult Trait Hope Scale (Snyder et al., 1991): The scale consists of 12 items using Likert-type response scales of 1 (definitely false) to 8 (definitely true). Across many studies, internal reliability alphas for the overall hope Scale have ranged from 0.74 to 0.84. The construct validity was also sufficiently established. (Snyder et al., 1991).

The Depression, Anxiety, Stress Scale (DASS-21) (Lovibond, & Lovibond, 1995): This scale consists of 21 items, seven each measuring depression, anxiety and stress, respectively. The scale uses a rating scale ranging from 0 (Did not apply to me at all) to 3 (Applied to me very much or most of the time). The Cronbach alpha values of reliability (0.80) and factorial validity have been established. (Vasconcelos-Raposo et al. 2013).

Subjective Happiness Scale (Lyubomirsky, 1999): This scale uses four items, with a rating scale ranging from 1 (less happy) to 7 (happier). More than 14 studies have proved the reliability and validity of this scale among adults, school students and college students. Cronbach alpha values of 0.77 have been reported (Lyubomirsky, S. 2020). Another study reported the Cronbach alpha values of 0.84 for a translated version (Alquwez et al. 2021)

### *Procedure*

An initial survey of 258 female students in the age group of 18 to 24 years from a women's was conducted during the COVID pandemic, were conducted using the scales mentioned above. After the initial screening, 55 students who were vulnerable to develop anxiety and depression and

who displayed high levels of stress were selected. After obtaining informed consent, the 15-day intervention module was designed by the researchers was conducted. The whole intervention consisted of a set of exercises conveyed and followed up virtually through electronic mail, videos, Google meets and WhatsApp. Daily motivational messages with small activities were also sent to them and their responses were collected for each day. After every five days, a feedback session was conducted with a break day to reflect upon the intervention. So the complete intervention module took 18 days time.

The CARE intervention module included includes Relaxation Exercises such as Counted Breathing, Deep Breathing, Breathing from the Stomach, and Jacobson's Progressive Muscle Relaxation for a period of 30 to 40 minutes every day in the morning. The CARE intervention with a sample of the activities used in the intervention is given below:

On the first day, one, the focus of the activities were on developing compassion. This activity required the participant to choose a certain task(s) such as donate money/time/clothing for a good cause, smile and wish someone when they least expect it, show concern to someone, give time and pleasantness to someone from one's family. The second day consisted of activities striving to build optimism. The participants were asked to deliberately consider an adverse event that has happened to him/her in the past 15 days and look at the advantages/positives deliberately hidden behind the negative emotion associated. Examples were provided to the participants. They are then required to write down a thoughts opposed to the negative thinking which were associated with the adverse life events. The third day comprised of helping to build resilience. Here, the participants were asked to think of a stressful situation weighing them down. They are asked to write it down in detail. Also, to write down ways in which they think they can challenge themselves and bounce back from the negativity. They are asked to imagine that the stressful event is a cloud spreading over them. They are then required to break through the barrier and build on thoughts focusing on building the strength to bounce back. Each day comprised of activities to build one particular positive experience. The

constructs included were building a sense of purpose, building good relationships, constructing one positive emotion of their choice, developing self-compassion, understanding and practicing gratitude even for small things in life, exploring their strengths through an activity, building hope and happiness, spreading smiles, and overcoming obstacles in the path to positivity.

The above intervention programme was conveyed to the selected participants virtually for 15 days, with one activity scheduled for a day. A schedule of activity was provided to the participants for practice (Annexure-1). The session consisted of 20 to 30 minutes. Their responses were collected for each task. Discussions were held with the students individually if they required any clarifications. They all posted their thoughts freely and participated willingly in the intervention programme.

The above intervention programme was conveyed to the students virtually and their responses collected for each task. Discussions

were held with the students individually if they required any clarifications. They all posted their thoughts freely and participated willingly in the intervention programme. After the intervention programme, the psychological scales were administered to all the participants. A follow-up of the same psychological scales was conducted after three months.

## Results

The data collected were analyzed using the SPSS software version 21. Statistics such as distribution analysis (to analyze the levels of depression, anxiety, stress, hope and happiness among the participants) and Repeated Measures ANOVA (to analyze the significant differences in the levels of depression, anxiety, stress, hope and happiness in the before, after and follow-up phases of intervention) were conducted. Initially, the distribution analysis for the levels of depression, anxiety, stress, hope and happiness in the initial survey of 258 students was analyzed. The results are presented in Tables 1 and 2 respectively.

**Table 1:** Distribution Analysis of Depression, Anxiety, and Stress among students (N=258)

S. No.	Levels	Depression		Anxiety		Stress	
		Number	Percent	Number	Percent	Number	Percent
1	Normal	65	25	52	20	43	17
2	Mild	73	28	81	31	90	35
3	Moderate	53	21	58	23	42	16
4	Severe	36	14	39	15	52	20
5	Extremely Severe	31	12	28	11	31	12

**Table 2:** Distribution Analysis of Hope and Happiness among students (N=258)

S. No.	Levels	Hope		Happiness	
		Number	Percent	Number	Percent
1	Low	87	34	96	37
2	Moderate	121	47	119	46
3	High	50	19	43	17

Table 1 indicates that 12 percent of the participants had Very Severe Depression, 11 percent had Very Severe Anxiety, and 12

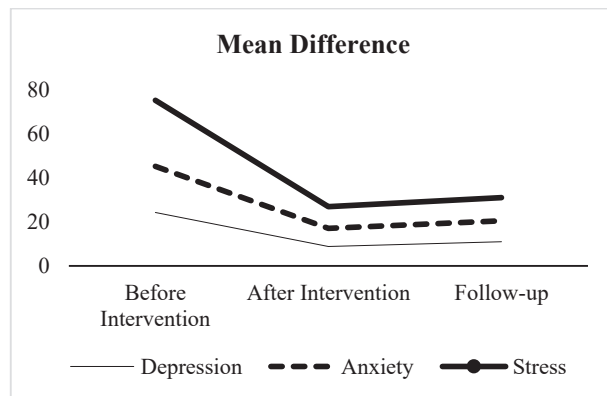
percent had Very Severe Stress. Table 2 indicates that only 19 percent of the participants had High levels of Hope, while only 17 percent had High levels of Happiness. The differences in mean values in the Before, After, and Follow-up phases of Intervention for Depression, Anxiety, Stress, Hope and Happiness was further analyzed. The results are presented in Tables 3 and 4, respectively. Table 3 shows that the means of Depression, Anxiety and Stress have reduced in the After Intervention phase compared to the Before Intervention phase. Also, this change is maintained in the follow-up phase. This difference is also manifested in figure 1.

**Table 3:** Mean and Standard Deviation of Depression, Anxiety and Stress in Before, After and Follow-up Phases of Intervention among students (N=55)

S. No.	Levels	Depression		Anxiety		Stress	
		Mean	SD	Mean	SD	Mean	SD
1	Before Intervention	24.27	3.58	20.95	4.04	30.00	5.49
2	After Intervention	8.82	2.21	8.24	2.06	9.85	3.30
3	Follow-up	11.00	1.61	9.51	2.28	10.53	2.07

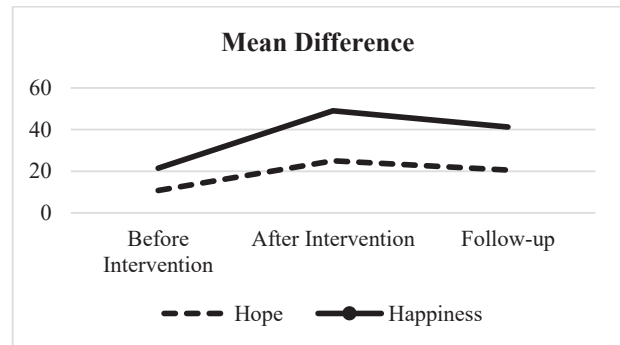
**Table 4:** Mean and Standard Deviation of Hope and Happiness in Before, After and Follow-up Phases of Intervention among Students (N=55)

S. No	Levels	Hope		Happiness	
		Mean	SD	Mean	SD
1	Before Intervention	10.75	1.71	10.71	3.13
2	After Intervention	25.00	3.31	24.02	3.44
3	Follow-up	20.53	3.65	20.71	2.97



**Figure 1:** Mean difference of Depression, Anxiety And Stress in the Before, After and Follow-up phases of CARE intervention

Table 4 shows that the levels of Hope and Happiness have increased in the After Intervention phase compared to the Before Intervention phase. Also, this change is maintained in the follow-up phase. This difference is also manifested in Figure 2.



**Figure 2:** Mean Difference of hope and happiness during before, after and follow-up phases of care intervention among students

One-way Repeated Measures ANOVA was conducted to find significant differences in the Before, After and Follow-up phases of intervention in the students. The results are presented in the following tables.

**Table 5:** Repeated Measures One Way ANOVA for Depression among Students (N=55)

Source	Type III Sum of Squares	df	Mean Square	F	
Depression	Sphericity Assumed	7695.76	2	3847.88	539.07 **
	Greenhouse-Geisser	7695.76	1.74	4436.12	539.07 **
	Huynh-Feldt	7695.76	1.79	4305.80	539.07 **
	Lower-bound	7695.76	1.000	7695.76	539.07 **
Error (Depression)	Sphericity Assumed	770.91	108	7.14	
	Greenhouse-Geisser	770.91	93.68	8.23	
	Huynh-Feldt	770.91	96.51	7.99	
	Lower-bound	770.91	54.00	14.28	

\*\*Significant at 0.01 level

**Table 6:** Pairwise Comparisons for Before, After and Follow-up Phases in Depression among Students (N=55)

(I) Depression	(J) Depression	Mean Difference (I-J)	Standard Error
Before	After	15.40*	0.60
	Follow-up	13.22*	0.50
After	Before	-15.40*	0.60
	Follow-up	-2.18*	0.42
Follow-up	Before	-13.22*	0.50
	After	2.18*	0.42

\*Significant at 0.05 level

Table 5 shows a significant effect of the C. A. R. E intervention on Depression among students,  $F(2, 108) = 539.07$ , where  $p=0.000$ . Table 6 shows that three paired-samples t-test was used to make post hoc comparisons between the before, After, and Follow-up conditions. There is a significant mean difference in the Before and the After Phases ( $M=15.40, SE=0.60$ ). Also, there is a significant mean difference in the Before and Follow-up Phases ( $M= 13.22, SE=0.50$ ).

The table shows that there is a significant mean difference in the After and the Before Phases ( $M=-15.40, SE=0.60$ ). Also, there is a significant mean difference in the After and Follow-up Phases ( $M= -2.18, SE=0.42$ ).

The above table shows that there is a significant mean difference in the Follow-up and the Before Phases ( $M=-13.22, SE=0.50$ ). Also, there is a significant mean difference in the Follow-up and After Phases ( $M= 2.18, SE=0.42$ ).

**Table :** Repeated Measures of One-Way ANOVA for Anxiety among Students (N= 55)

Source		Type III Sum of Squares	df	Mean Square	F
Anxiety	Sphericity Assumed	5388.74	2	2694.37	343.72 **
	Greenhouse-Geisser	5388.74	1.60	3361.16	343.72 **
	Huynh-Feldt	5388.74	1.65	3276.38	343.72 **
	Lower-bound	5388.74	1.00	5388.74	343.72 **
Error (Anxiety)	Sphericity Assumed	846.59	108	7.84	
	Greenhouse-Geisser	846.59	86.58	9.78	
	Huynh-Feldt	846.59	88.82	9.53	
	Lower-bound	846.59	54.00	15.68	

\*\*Significant at 0.01 level

Table 7 shows a significant effect of the C. A. R. E intervention on Anxiety among students,  $F(2, 108) = 343.72$ , where  $p=0.000$ . Table 8 shows that three paired-samples t-tests were used to make post hoc comparisons between the Before, After, and Follow-up conditions. There is a significant mean difference in the Before and the After Phases ( $M=12.71, SE=0.62$ ). Also, there is a significant mean difference in the Before and Follow-up Phases ( $M= 11.44, SE=0.57$ ). The table shows that there is a significant mean

difference in the After and the Before Phases ( $M=-12.71, SE=0.62$ ). Also, there is a significant mean difference in the After and Follow-up Phases ( $M= -1.27, SE=0.38$ ). There is a significant mean difference in the Follow-up and the Before Phases ( $M=-11.44, SE=0.57$ ). Also, there is a significant mean difference in the Follow-up and After Phases ( $M= 1.27, SE=0.38$ ).

**Table 8:** Pairwise Comparisons for Before, After and Follow-up phases of Anxiety among Students (N=55)

(I) Anxiety	(J) Anxiety	Mean Difference (I-J)	Standard Error
Before	After	12.71*	0.62
	Follow-up	11.44*	0.57
After	Before	-12.71*	0.62
	Follow-up	-1.27*	0.38
Follow-up	Before	-11.44*	0.57
	After	1.27*	0.38

\*Significant at 0.05 level

**Table :** Repeated Measures of One-Way ANOVA for Stress among Students (N=55)

Source		Type III Sum of Squares	df	Mean Square	F
Stress	Sphericity Assumed	14400.45	2	7200.22	443.63 **
	Greenhouse-Geisser	14400.45	1.45	9928.06	443.63 **
	Huynh-Feldt	14400.45	1.48	9729.65	443.63 **
	Lower-bound	14400.45	1.00	14400.45	443.63 **
Error (Stress)	Sphericity Assumed	1752.89	108	16.23	
	Greenhouse-Geisser	1752.89	78.33	22.38	
	Huynh-Feldt	1752.89	79.92	21.93	
	Lower-bound	1752.89	54.00	32.46	

\*\*Significant at 0.01 level

Table 9 shows a significant effect of the C. A. R. E intervention on Stress among students,  $F(2, 108) = 443.63$ , where  $p=0.000$ . Table 10 shows that three paired samples t-test were used to make post hoc comparisons between the Before, After and Follow-up conditions. There is a significant mean difference in the Before and the After Phases ( $M=20.15, SE=0.95$ ). Also, there is a significant mean difference in the Before and Follow-up Phases ( $M= 19.47, SE=0.77$ ).

**Table 10:** Pairwise Comparisons for Before, After and Follow-up phases of Stress among Students (N=55)

(I) Stress	(J) Stress	Mean Difference (I-J)	Standard Error
Before	After	20.15*	0.95
	Follow-up	19.47*	0.77
After	Before	-20.15*	0.95
	Follow-up	-0.67	0.52
Follow-up	Before	-19.47*	0.77
	After	0.67	0.52

\*Significant at 0.05 level

The table shows that there is a significant mean difference in the After and the Before Phases ( $M=-20.15$ ,  $SE=0.95$ ). Also, there is a significant mean difference in the After and Follow-up Phases ( $M=-0.67$ ,  $SE=0.52$ ). The above table shows that there is a significant mean difference in the Follow-up and the Before Phases ( $M=-19.47$ ,  $SE=0.77$ ). Also, there is a significant mean difference in the Follow-up and After Phases ( $M=0.67$ ,  $SE=0.52$ ). The above tables demonstrate that there was a significant difference between Before, After, and Follow-up phases in Depression, Anxiety and Stress among Students. It implies that the C. A. R. E Intervention significantly reduced Stress among girl students. Hence the Alternative Hypothesis, "There will be a significant difference between Before, After and Follow-up phases in Depression, Anxiety and Stress through C. A. R. E Intervention among Students", is accepted.

Table 11 shows a significant effect of the C. A. R. E intervention on Hope among students,  $F(2, 108) = 386.01$ , where  $p=0.000$ . Table 12 shows that three paired-samples t-test were used to make post hoc comparisons between the Before, After and Follow-up conditions. There is a significant mean difference in the Before and the After Phases ( $M=-14.26$ ,  $SE=0.43$ ). Also, there is a significant mean difference in the Before and Follow-up Phases ( $M=-9.78$ ,  $SE=0.51$ ).

The table shows that there is a significant mean difference in the After and the Before Phases ( $M=14.26$ ,  $SE=0.43$ ). Also, there is a significant mean difference in the After and Follow-up Phases ( $M=4.47$ ,  $SE=0.62$ ).

**Table 11:** Repeated Measures of One-Way ANOVA for Hope among Students (N= 55)

Source	Type III Sum of Squares	df	Mean Square	F	
Hope	Sphericity Assumed	5846.16	2	2923.08	386.01**
	Greenhouse-Geisser	5846.16	1.71	3412.32	386.01**
	Huynh-Feldt	5846.16	1.76	3314.33	386.01**
	Lower-bound	5846.16	1.00	5846.16	386.01**
Error (Hope)	Sphericity Assumed	817.84	108	7.57	
	Greenhouse-Geisser	817.84	92.52	8.84	
	Huynh-Feldt	817.84	95.25	8.59	
	Lower-bound	817.84	54.00	15.15	

\*\*Significant at 0.01 level

**Table 12:** Pairwise Comparisons for Before, After and Follow-up phases of Hope among Students (N= 55)

(I) Hope	(J) Hope	Mean Difference (I-J)	Standard Error
Before	After	-14.26*	0.43
	Follow-up	-9.78*	0.51
After	Before	14.26*	0.43
	Follow-up	4.47*	0.62
Follow-up	Before	9.78*	0.51
	After	-4.47*	0.62

\*Significant at 0.05 level

The above table shows that there is a significant mean difference in the Follow-up and the Before Phases ( $M=9.78$ ,  $SE=0.51$ ). Also, there is a significant mean difference in the Follow-up and After Phases ( $M=-4.47$ ,  $SE=0.62$ ).

Table 13 shows a significant effect of the C. A. R. E intervention on Happiness among students,  $F(2, 108) = 386.01$ , where  $p=0.000$ . Table 14 shows that three paired-samples t-test were used to make post hoc comparisons between the Before, After and Follow-up conditions on Happiness. There is a significant mean difference in the Before and the After Phases ( $M=-13.31$ ,  $SE=0.55$ ). Also, there is a significant mean difference in the Before and Follow-up Phases ( $M=-10.00$ ,  $SE=0.55$ ).

The table shows that there is a significant mean difference in the After and the Before Phases ( $M=13.31$ ,  $SE=0.55$ ). Also, there is a significant mean difference in the After and Follow-up Phases ( $M= 3.31$ ,  $SE=0.56$ ).

**Table 13:** Repeated Measures of One-Way ANOVA for Happiness among Students (N=55)

Source		Type III Sum of Squares	df	Mean Square	F
Happiness	Sphericity Assumed	5281.50	2	2640.75	312.78 **
	Greenhouse-Geisser	5281.50	1.99	2643.10	312.78 **
	Huynh-Feldt	5281.50	2.00	2640.75	312.78 **
	Lower-bound	5281.50	1.00	5281.50	312.78 **
Error (Happiness)	Sphericity Assumed	911.83	108	8.44	
	Greenhouse-Geisser	911.83	107.90	8.45	
	Huynh-Feldt	911.83	108.00	8.44	
	Lower-bound	911.83	54.00	16.89	

\*\*Significant at 0.01 level

**Table 14:** Pairwise Comparisons for Before, After and Follow-up phases of Happiness among Students (N=55)

(I) Happiness	(J) Happiness	Mean Difference (I-J)	Standard Error
Before	After	-13.31*	0.55
	Follow-up	-10.00*	0.55
After	Before	13.31*	0.55
	Follow-up	3.31*	0.56
Follow-up	Before	10.00*	0.55
	After	-3.31*	0.56

\*Significant at 0.05 level

The above table shows that there is a significant mean difference in the Follow-up and the Before Phases ( $M=10.00$ ,  $SE=0.55$ ). Also, there is a significant mean difference in the Follow-up and After Phases ( $M= -3.31$ ,  $SE=0.56$ ).

The above tables disclose that there was a significant difference between Before, After and Follow-up phases in Hope and Happiness among Students. It implies that the CARE Intervention significantly enhanced Happiness among students.

Hence the Hypothesis, "There will be a significant difference between Before, After and Follow-up phases in Hope and Happiness through CARE Intervention among Students", is accepted.

## Discussion

The present study shows that the CARE intervention module effectively reduces Depression, Anxiety and Stress while increasing Hope and Happiness among the highly vulnerable students due to the pandemic circumstances. This intervention focuses on building positive psychological constructs to overcome the negative mental health issues and promote positivity. The COVID pandemic has created havoc on students' mental health status worldwide. Feedback and discussion sessions held with the participants revealed that some participants had been infected and had become carriers and passed on the infection to their family members. This resulted in guilt and self-criticism. Many of them expressed that the stress they faced was because their initial carelessness caused their whole family to suffer from the infection. Such anecdotes bring to the forefront the mental health issues faced by the public during the pandemic. Many studies have been conducted on students and their mental health during the pandemic. To quote a recent study, among the medical students in Iran, the presence of certain positive psychology constructs like life satisfaction, spiritual well being along with self-esteem were significantly negatively correlated with depressive symptoms. (Mirhosseini, et al. 2022). Another study by Waters et al. (2021) found that during the pandemic, positive psychology interventions such as developing self-compassion, coping, courage, gratitude, character strengths, positive emotions and relationships building are crucial for buffering and bolstering mental health.

While the present study effectively helps in reducing psychological issues in a small sample through virtual means with a small 15-day intervention model, it needs to be said that the intervention model must be extended and validated using randomized control trials. Such trials can compare the CARE intervention with a larger sample and different populations.

## Conclusion

The above analysis indicated that the 15 days CARE intervention effectively reduced the Depression, Anxiety and Stress levels. Also, the intervention effectively increased the Hope and Happiness levels among the participants at the same time. Furthermore, the Follow-up clearly showed that the change was maintained even after three months. Implications for future research include modifying the research to suit the varied needs of different populations. Moreover, educational organizations and employers should introduce positive psychology-based interventions to help their students and employees. The study has limitations, such as using a smaller sample and only female students. These limitations could be overcome in future research. Despite the limitations, this study effectively uses a Virtual Positive Psychology Intervention to reduce psychological distress such as Depression, Anxiety, and Stress symptoms while improving Hope and Happiness in this pandemic era.

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## Annexure-1

### A 15-day Calendar with Daily Activities

- 
- Day 1 *Compassion Day*: Do a kind task towards another person. Choose from any one of the activities: (a) Donate money/time/clothing. (b) Smile and wish someone when they least expect it. (c) Show concern to someone. (d) Give your time and pleasantness to someone from your family
- 
- Day 2 *Optimism Day*: Deliberately consider an adverse event that has happened to you in the past 15 days. Look at the advantages/positives deliberately hidden behind the negative emotion associated. (Examples given to the participants). Write down a thought that is opposed to the negative thinking associated with the adverse event.
- 
- Day 3 *Resilience Day*: Think of a stressful situation that is weighing down on you. Write it down in detail. In the end, write down ways in which you think you can challenge yourself and bounce back from the negativity. Imagine that the stressful event is a cloud that is spreading over you. You stand upright and bring your hands fist up to break through the cloud and emerge a winner.
- 
- Day 4 *Achievement and Purpose in Life Day*: Ask yourself the following questions:(a) What is the purpose of the day today?(b) What is the one thing that I can achieve today?(c) The motto and objective for today is..... (Choose something fulfilling and satisfying to you, something that will make you happy)
- 
- Day 5 *Relationship Day*: Today, we work to improve one relationship in our life that is not very good. Make sure you change your thought process about that person and make it positive and open. Go and make deliberate, patient conversation with eye contact. Be non-judgmental and non-critical. Try to listen. Have an open body language. Do not deny or jump to defend. Try to repair any maladjustment today.
- 
- Day 6 *Positive Emotion Day*: Today, try to cultivate, build and broaden one positive emotion. Choose one emotion from the following: Happiness, Savouring, Contentment, Compassion, Gratitude, Hope, Try to fill your mind with the chosen positive emotion and spread that positive emotion to those around you today.
- 
- Day 7 *Gratitude Day*: Identify at least five things/events/ people in your life that you are thankful/grateful for. Then, write the reasons that you are grateful for each of the five things. This exercise can also be repeated daily by identifying one thing you are grateful for that day.
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Day 8 *Self-Compassion Day*: Today is kindness to self-day. Are you overly critical about yourself over any particular weakness/ fault of yours? Show a little compassion to yourself. It is all O.K. There is always tomorrow to strive to be better.

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Day 9 *Hope Day*: Visualize in full detail a future, where you are very successful, a future where you are achieving all that you dreamt of.

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Day 10 *Happiness Day*: Find a reason, however small or silly, to be happy today. Enjoy the Joy! Spread the happiness to all around you. Smile and be pleasant to all around you.

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Day 11 *Spread the Smile Day*: Post a message, poem or a few words about a person who has brought a smile to your face today. The person can be your family member/ friend/relative or yourself.

---

Day 12 *Visualize Peace Day*: Sit back and picture your favourite place. Sharpen all your senses and feel calm and peaceful. Write down all the details about your favourite spot. Picture yourselves in your favourite place. Write down your thoughts.

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Day 13 *Overcome Obstacle Day*: Can you think of one obstacle in your path. Then, think about how you can overcome it. Could you write it down?

My Obstacle: I plan to overcome this obstacle by \_\_\_\_\_

---

Day 14 *Strengths Exploration Day*: For today's task, we have a Strength Exploration Worksheet. Given below are some strengths. Feel free to add/ delete and fill up the empty rows with your strengths, as many as you can think of.

Calm	Smart	Fun-loving	Intelligent
Courageous		Honest	
	Loyal		Beautiful
Focused			Hard-working

Clues: Answering these questions may give you a list of strengths.

1. What are the qualities in me that help me in friendships?
  2. What are the factors within me; that helps me in my work/academics?
  3. What helps me maintain cordial relationships with my family?
  4. What makes me feel contented/ satisfied/ fulfilled?
- 

Day 15 *Overcome FEAR with DARE Day* Today's task is to identify and overcome your fears. So what are some things that make you feel scared or nervous?

My FEAR	My DARE
F- How do I Feel?	D - Develop Skills. What are the skills I need to develop to overcome this Fear?
E - What are the excessive emotions involved?	A – Accept what can not be changed. Can I accept a part of this situation that I cannot change?
A - Am I Avoiding? Running Away?	R - Realistic Goals. Can I have Realistic Goals? Can I take one day at a time?
R - Am I far away from Reality?	E - Embrace positivity. Can I Embrace my values and principles at this time?

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## **Efficacy of a Positive Psychology Based Intervention on Stress and Happiness among Working Women: An RCT protocol**

**Sudha, R. and S. Gayatridevi**

Avinashilingam Institute for Home Science and Higher Education for Women, Coimbatore

Women are an integral part of the workforce in India. The female labour force participation has reduced from 30.6% in 1990 to 20.25% in 2019 (Statista.com, 2021). The causes for this decline are said to be a lack of flexible work timings, lack of family support and lack of satisfaction and contentment in their lives. This paper is an attempt to understand the psychological manifestations of stress and happiness among women working in various structured and unstructured occupations. The study also uses a positive psychology-based intervention to improve stress and hence its impact on happiness. The research design used for the study is a before-after with a control group experimental design. Eighty-four women from various registered and unregistered occupations, aged between 22 to 60 years, were selected using a purposive sampling technique. They were then randomly assigned to an experimental group and a waitlist control group. The Subjective Happiness Scale (Lyubomirsky, 1999) was used to measure Happiness, and the Holmes-Rahe Stress Inventory (1967) was used to measure Stress. The positive psychology-based intervention consisted of activities and exercises given virtually for 28 sessions to build self-compassion and positive emotions in the participants of the experimental group. Results revealed that the Positive Psychology Based Intervention improved happiness and also reduced stress levels among working women. There were no significant differences in happiness and stress with regard to the salary drawn or the types of jobs that women were involved in.

**Keywords:** Stress, happiness, positive psychology intervention, working women

India is now a country with a growing female workforce. Women currently are employed in various jobs, ranging from driving trucks and autorickshaws to launching rockets. The womenfolk, called the softer gender, are employed in hardcore professions that require skill, ability and grit. The age when jobs were segregated according to gender is a thing of the past. Gender is no longer a criterion when choosing careers now. This kind of improvement of gender representation in the varied workforce is a qualitative change; the quantity has decreased. The female labour force participation has reduced from 30.6% in 1990 to 20.25% in 2019 (Statista.com, 2021). The causes for this decline are said to be lack of flexible work timings, lack of family support and lack of satisfaction and contentment in their lives.

Along with the changing demands on women, there is a change in the time these women spend for themselves. Even homemakers who are

not gainfully employed outside the house are lost in odd jobs and find it difficult to find even a little time for themselves. Working women have been found to be more stressed due to their responsibilities of managing the home and workplace. To achieve Work Life balance, the working woman strives hard and many of them are plagued by sleeplessness, fatigue, lack of family support, guilt among many other stressors. This causes a great amount of stress and its related disorders that manifest themselves physically and psychologically.

Happiness is a state of subjective well being. Different people have different understandings of the meaning of the word happiness. It is being in an enthusiastic state of mind; for others, it is materialistic. Still, others think that a calm and peaceful life is happy. The subjective feeling of happiness is the feeling that one is well and that things are going on well. Happiness is a state of mind with many positive emotions, such as joy,

satisfaction, contentment, and positive emotions, such as optimism, love and affection.

This paper is an attempt to develop a Positive Psychology Based Intervention Programme designed to alleviate stress and bring about increased happiness in the lives of working women. Positive Psychology postulates that the absence of “Negative”, that is the absence of disease, does not ensure well being. Applying this construct, an intervention model was constructed and named “The C. A. R. E Intervention Model”. It consisted of activities and exercises designed to develop compassion and self compassion, achieve a sense of purpose in life, build relationships and enhance positive emotions, thus leading one to the experience of well being. C.A.R.E is an acronym, that can be elaborated as:

C: stands for Compassion and Self Compassion

A: stands for Achieving a Purpose in Life

R: stands for Relationship Building

E: stands for Enhancing Positive Emotions

A brief review of the literature was conducted to understand the previous research on the variables taken up for the study. Fekete and Deichert (2022) analyzed the efficacy of gratitude writing as an intervention in overcoming stress during the pandemic and reported that gratitude writing brought down the stress related to the pandemic effectively. Dennis and Ogden,(2022) reported that the benefits of nostalgia, gratitude and optimism, used as brief interventions improved well being during the COVID-related lockdowns.

Tejada-Gallardo et al. (2020) conducted a meta-analysis on the effectiveness of Positive Psychology Interventions in reducing distressing symptoms such as depression, anxiety and fatigue, and in improving well being. It was reported that the positive psychological components are very effective in improving psychological well being and subjective well being and in reducing depressive symptoms among adolescents. Sudha (2020) conducted a study among migraine sufferer women teachers who were administered the Mindfulness Based Interventions, reported a marked improvement

in the experience of stress related headaches. A meta-analytic review on the effectiveness of Positive Psychology Interventions in the workplace by Donaldson et al. (2019) revealed that Positive Psychology Based Interventions focusing on gratitude building and well being focused interventions were found to improve work related outcomes and reduce stress and build well being.

Woo et al. (2019) used Positive Psychology Group Intervention for occupationally injured employees in Korea and reported that it was effective in reducing stress and motivating the injured employees to return to work effectively. In a similar study on positive psychology interventions for the workforce by Meyers et al. (2013), it was reported that these interventions effectively reduced stress and burnout among employees and enhanced their well being and performance. Also, Greenawalt et al. (2019) found out that Happiness Based Positive Psychology Intervention was beneficial in reducing perceived stress and fatigue among elderly participants.

The above review suggests that the need for Positive Psychology Based Intervention to increase well being and to reduce stress of working women. Especially in the post-COVID scenario, when there is an economic emergency as well, the women are stressed to continue their jobs despite added pressures and hence require such simple easy to do solutions for effective stress management. A simple survey conducted among the working women in Tamil Nadu revealed that Stress was a major mental health issue and that majority of the surveyed sample were unsure of their happiness, and satisfaction levels. Hence, it was decided to take up stress and happiness as variables for this study.

### ***Need for New Innovative Intervention***

Early research in Psychology followed only a preventive paradigm. Studies focused on reducing abnormalities in individuals rather than promoting positive aspects. Positive Psychology as a branch of Psychology was founded by Martin Seligman and colleagues with the objective of promoting positive concepts and develop flourishing and hence, building well

being. As a result, many Positive Psychology Interventions mushroomed, most of them focusing on developing optimism, hope or happiness, empathy, strength etc. Sin and Lyubomirsky (2009) defined Positive Psychology Interventions, as “a psychological intervention that primarily focuses on raising positive feelings, positive thoughts, and positive behaviour”. According to Sin and Lyubomirsky, all the Positive Psychology Interventions focus on improving happiness through positive thoughts and emotions and also sustaining these effects for long term. Parks and Schueller (2014) identified seven types of Positive Psychology Interventions namely focused on savouring, gratitude, kindness, empathy, optimism, strength building and meaning.

The present research aims to develop a comprehensive need based positive psychology intervention. The intervention was developed after a need survey undertaken with a sample of 2780 adults representative of the population for which the intervention is aimed at. The survey results identified that four main constructs of positive psychology (compassion and self compassion, achievement of purpose in life, relationship building and enhancing positive emotions) are the most needed in the COVID and Post-COVID scenario. The rationale for this study is that this intervention with the acronym, C.A.R.E Intervention module is a one stop solution to develop all these Positive Psychology constructs in a brief period of one month and start the journey towards well being. Moreover, the survey also suggested that working women have high amounts of stress and that the levels of happiness are also significantly low. Hence, it was decided by the authors to embark upon this research study.

The present study on “Efficacy of a Positive Psychology Based Intervention on Stress and Happiness among Working Women” was conducted with the objectives of identifying the happiness and stress levels of working women and also to understand the efficacy of the developed C. A. R. E Intervention in reducing stress and building happiness among working women.

The hypotheses for the study are:

- There will be significant relationship between stress and happiness among working women
- There will be significant difference in the before, during and after intervention levels of Stress among working women
- There will be a significant difference in the before, during and after intervention levels of happiness among working women
- There will be a significant difference in the levels of Stress and Happiness among working women with regard to income and types of occupation (Permanent/ Temporary).

### Method

The research design used for the study is Before After with Waitlist Control Group Experimental Design. The initial sample consisted of 750 working women, who were surveyed for their stress and happiness levels. The Subjective Happiness Scale (Lyubomirsky, 1999) was used to measure Happiness and the Holmes-Rahe Stress Inventory (1967) was used to measure Stress.

### Sample

The sample for the study consisted of 84 women (from various registered and unregistered occupations, aged between 22 to 60 years) were selected using a purposive sampling technique (those who had higher stress levels and lower happiness levels and who were interested in undergoing a Positive Psychology Intervention).

### Tools:

*The Subjective Happiness Scale* (Lyubomirsky, 1999) consists of 4 items, with a rating scale ranging from 1 (less happy) to 7 (happier). More than 14 studies proved the reliability and validity of this scale among adults, school students and college students. Cronbach alpha value was 0.77 (Lyubomirsky, 2020) and another study reported was 0.84 for a translated version (Alquwez et al., 2021)

*The Holmes-Rahe Stress Inventory* (Holmes & Rahe, 1967) consists of 43 life-changing stressful events. More than 300 as a score is considered highly stressful and the participant had high risk to develop stress related disorders.

The reliability of the scale was found sufficient and the rank ordering remained extremely consistent ( $r = 0.96 - 0.89$ ) among patients and the validity of the stress scale as a predictor of illness (Rahe, 1970).

### **Randomization Process**

The selected 84 participants were randomly assigned to an experimental group and waitlist control group, each group consisted of 42 participants. Randomization started only after all the participants were registered and gave their informed consent to participate in the study. The allocation of participants to experimental and waitlist control groups was concealed by assigning unique numbers to each participant and the random sorting was done in SPSS version 21. The participants were blinded to the group allotment. The waitlist participants were only informed of a delay in start of their intervention programme. Participants were also not allowed any contact with each other till the start of the intervention for the experimental group. After this also, the experimental group members were unaware of the presence of the other group.

Eighty four participants were tested for homogeneity using normal distribution and the Shapiro-Wilk Test and they were normally distributed. After the initial assessment using the aforesaid psychological scales, only the participants of the experimental group were administered the C. A. R. E intervention module for 28 sessions (7 weeks), with 4 sessions (20 minute duration each) in a week.

### **Development of the C. A. R. E Intervention Module**

This Intervention Module was developed as a part of the doctoral work of the author and was the first subject to content validation by 12 subject experts and 25 stakeholders (adults). The Content Validity Ratio (CVR) was found to be above 0.85 (The acceptable value for CVR is 0.99 for 5 raters, 0.85 for 8 raters, and 0.62 for 10 raters (Polit, Beck & Owen, 2007).

The next step in validation was establishing a Randomized Control Trial (RCT). Five such RCTs were planned by the authors. This paper

presents one of the Randomized Control trial Experiments to validate the C.A.R.E Intervention Module.

It includes Relaxation Exercises such as Counted Breathing, Deep Breathing, Breathing from the Stomach, and Jacobson's Progressive Muscle Relaxation (for a period of 30 to 40 minutes every day in the morning)

The C. A. R. E intervention with a sample of the activities used in the intervention is given below:

*On day one, the focus of the activities was on developing Compassion. This activity required the participant to choose a kind task (Donate money/time/clothing, Smile and wish someone when they least expect it, show concern to someone, Give your time and pleasantness to someone from your family).*

*Day two consisted of activities striving to build Optimism. The participant is asked to deliberately consider an adverse event that has happened to them in the past 15 days and look at the advantages/positives deliberately hidden behind the negative emotion associated (Examples given to the participants). They are then required to write down a thought opposed to the negative thinking associated with the adverse event.*

*Day three comprised of helping to build Resilience. Here, the participant must think of a stressful situation weighing them down. They are asked to write it down in detail. Also, to write down ways in which they believe they can challenge themselves and bounce back from the negativity. They are asked to imagine that the stressful event is a cloud spreading over them. They are then required to break through the barrier and build on thoughts focusing on building the strength to bounce back.*

*Similarly, each day comprises activities to build one particular positive psychology construct. The constructs included were creating a sense of purpose, building good relationships, constructing one positive emotion of their choice, developing self compassion, understanding and practising gratitude even for small things in life, exploring their strengths through an*

*activity, building hope and happiness, spreading smiles, and overcoming obstacles in the path to positivity.*

At the middle of the intervention, stress and happiness levels were again measured for both the experimental and waitlist control group using the same tools. Following the intervention, the same tools were used for the after intervention assessment for both the experimental and the waitlist control group. No intervention was given to the participants of the waitlist control group. After the completion of the study, the experimental group were used as peer volunteers to facilitate the intervention for the wait list control group as well.

### Results

The data was collected and analyzed using the SPSS software version 21. Pearson's Product Moment Correlation was computed to understand the relationship between stress and happiness among the working women.

**Table 1. Correlation between Stress and Happiness among Working Women (N = 84)**

Variables	Stress	Happiness
Stress	1	-0.47**
Happiness	-0.47**	1

\*\* = Correlation is significant at 0.01 level

Table 1 indicates that there is a significant negative correlation between Stress and Happiness levels among working women. As the stress levels increase, the happiness levels reduce and vice versa. Hence, the hypothesis, "There will be significant relationship between

**Table 2. Means, and Standard Deviations of the Experimental and Waitlist Control Group in the Before, During and After Phases of Intervention for Stress and Happiness (N = 84)**

Dependent Variable	Time of Measurement	Experimental Group		Waitlist Control Group	
		M	SD	M	SD
Stress	Before Intervention	336.21	46.74	342.79	30.40
	During Intervention	271.90	58.05	351.29	28.86
	After Intervention	188.93	46.87	352.38	27.97
Happiness	Before Intervention	8.71	3.81	9.57	2.30
	During Intervention	15.79	2.88	8.67	1.72
	After Intervention	20.31	2.82	9.95	1.39

stress and happiness among working women" is accepted.

The independent variable for the research, is the intervention that had two groups, the experimental group which received the intervention and the waitlist control group that had not receive it. The stress and happiness (the dependent variables) levels were measured three times namely, prior to the intervention, henceforth called before intervention scores, during the intervention and also after the intervention. As there were three time scores for two dependent variables and two groups in the independent variable, it was decided to use Two Way Repeated MANOVA (also referred to as doubly multivariate MANOVA) to statistically compute the results.

A Two Way MANOVA of repeated measures [2 (experimental and waitlist control groups) x 3 (before, during and after intervention scores of both the dependent variables, stress and happiness)] was computed. The results are presented below. \

Average stress was significantly lower in the after-intervention phase (M = 188.93, SD = 46.87) than the during intervention phase (M = 271.90, SD = 58.05), and which was significantly lower than the before intervention phase (M = 336.21, SD = 46.74) for the Experimental Group. There were no significant differences in the mean of stress scores for the waitlist control group.

Average happiness was significantly higher in the after-intervention phase (M = 20.31, SD = 2.82) than the during intervention phase (M =

**Table 3. Test of Sphericity for Stress (N=84)**

Variable	Within Subjects Effect	Mauchly's W	Chi-Square	df	Sig.
Stress	Intervention	1.00	.00	0	
	Time	.88	4.91	2	0.09
	Intervention * Time	.90	4.16	2	0.13
Happiness	Intervention	1.000	.000	0	
	Time	0.81	8.29	2	0.02
	Intervention * Time	0.96	1.35	2	0.51

**Table 4. Multivariate Analysis of Variance for Stress and Happiness**

Measure	Wilk's Lambda value	F (df)	p	$\eta^2$
Intervention (2 groups)	0.12	151.76 (2,40)	0.000	0.88
Time (3-time measures)	0.14	67.32 (4,162)	0.000	0.62
Intervention*Time	0.14	68.54 (4,162)	0.000	0.63

**Table 5. Univariate Analysis of Variance for Stress and Happiness in the experimental group**

Measure	Sum of Squares	F (df)	p	$\eta^2$
Stress	222329.41	217.45 (2, 40)	0.000	0.84
Happiness	1399.06	226.27 (2, 40)	0.000	0.85

15.79, SD = 2.88), and which was significantly lower than the before intervention phase (M = 8.71, SD = 3.81) for the Experimental Group. There were no significant differences in the mean of stress scores for the waitlist control group.

As the above table indicates, for the interaction effect, the test of sphericity is not significant,  $\chi^2 = 4.16$ ,  $p = 0.13$  for stress and  $\chi^2 = 1.35$ ,  $p = 0.51$ . The rule of thumb indicates that reject the null hypothesis if  $p < 0.05$ . Hence the sphericity (homogeneity) seems to be met. The main within subjects' interaction effects were then computed.

The above table shows a significant effect of the interaction between the 2 groups of the independent variable (intervention), the experimental and waitlist control groups shown by an  $F(2, 42) = 151.76$ , which is significant at the 0.01 level, and the partial eta square value  $\eta^2$  is 0.88, showing a strong effect size. There is also, a significant difference between the 3-time measures, that is, the before, during and after measures of the dependent variables namely,

stress and happiness; where  $F(4, 162) = 67.32$ , which is significant at the 0.01 level, and the partial eta square value  $\eta^2$  is 0.62, showing a moderate effect size.

The multivariate analysis also reveals significant interaction effects between the independent and dependent variables,  $F(4, 162) = 68.54$ , which is significant at the 0.01 level, and the partial eta square value  $\eta^2$  is 0.63, showing a moderate effect size.

The above MANOVA indicates maximum difference in the independent variable, that is between the stress and happiness scores for the experimental and waitlist control groups. It can be interpreted that the C.A.R. E Intervention module given to the experimental group has a good effect on the dependent variables namely, stress and happiness.

The above table indicates a significant interaction effect of  $F(2, 40) = 217.45$ ,  $p = 0.001$  for stress and  $F(2, 82) = 226.27$ ,  $p = 0.001$  for happiness, were both statistically significant and the  $\eta^2$  (partial eta square) = 0.84 and 0.85 respectively, showing strong effect size. The

**Table 6. Pairwise comparisons for Before, During and After Intervention Phases for the Experimental Group on Stress and Happiness**

(I) Time	(J) Time	Mean Difference (I-J)		Std. Error	
		Stress	Happiness	Stress	Happiness
Before Intervention	During Intervention	28.80*	-3.08*	3.63	0.35
	After Intervention	74.54*	-5.99*	4.92	0.41
During Intervention	Before Intervention	-28.80*	3.08*	3.63	0.35
	After Intervention	45.74*	-2.91*	4.70	0.28
After Intervention	Before Intervention	-74.54*	5.99*	4.92	0.41
	During Intervention	-45.74*	2.91*	4.70	0.28

post hoc values for paired comparisons were computed.

Post hoc paired comparisons were performed to understand the effect of the C. A. R. E

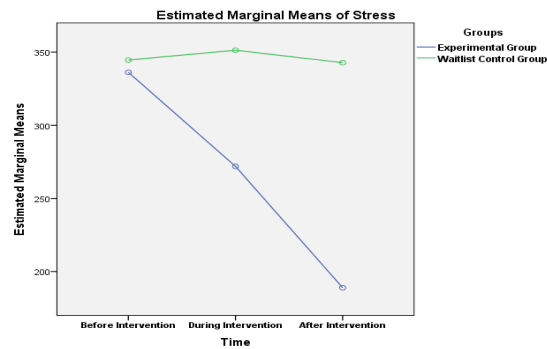
intervention in the before, during and after intervention phases on Stress. The above table shows that there is a significant mean difference in the before and the after Phases (M=74.54, SE=4.92). Also, there is a significant mean difference in the before and during intervention Phases (M= 28.80, SE=3.63). The above table shows that there is a significant mean difference in the during and the before phases (M=-28.80, SE=3.63). Also, there is a significant mean difference in the after and during intervention phases (M= 45.74, SE=4.70). The above table also shows that there is a significant mean difference in the after and the before phases (M=-74.54, SE=4.92). Also, there is a significant mean difference in the during intervention and after intervention phases (M= -45.74, SE=4.70).

Post hoc paired comparisons were performed to understand the effect of the C. A. R. E

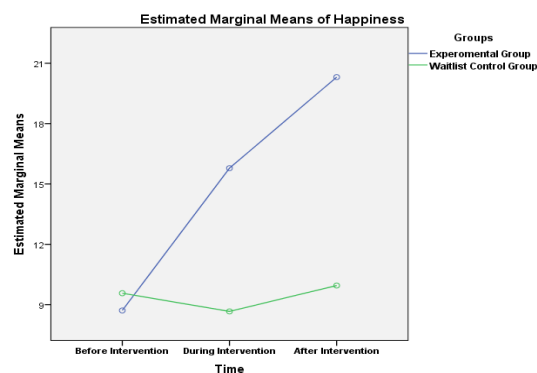
intervention in the before, during and after intervention phases on happiness. The above table shows that there is a significant mean difference in the before and the after Phases (M=-5.99, SE=0.41). Also, there is a significant mean difference in the before and during intervention Phases (M= -3.08, SE=0.35). The above table shows that there is a significant mean difference in the during and the before phases (M=-2.91, SE=0.28). Also, there is a significant mean difference in the after and during intervention phases (M= 3.08, SE=0.35). The above table also shows that there is a significant mean difference in the after and the before phases (M=-5.99, SE=0.41). Also, there

is a significant mean difference in the during intervention and after intervention phases (M= 2.91, SE=0.28).

The profile plots for the significant difference is shown below.



**Figure 1. Profile plots of stress in the Before, During and After intervention scores of Stress for the Experimental and Waitlist Control Group**



**Figure 2. Profile plots of stress in the Before, During and After intervention scores of Happiness for the Experimental and Waitlist Control Group**

From both the above two-way multivariate

**Table 7. Independent-samples t-test of Stress and Happiness with regard to the income and type of occupation of working women (N=84)**

Type of measure	Variables	Income	N	Mean	Standard Deviation	t
Income	Stress	Below 25,000	46	341.33	49.392	0.71 <sup>NS</sup>
		Above 25,000	38	331.10	44.530	
	Happiness	Below 25,000	46	9.10	4.277	0.64 <sup>NS</sup>
		Above 25,000	38	8.33	3.337	
Type of Occupation	Stress	Temporary	50	341.32	50.378	0.86 <sup>NS</sup>
		Permanent	34	328.71	41.100	
	Happiness	Temporary	50	9.20	4.425	1.01 <sup>NS</sup>
		Permanent	34	8.00	2.622	

NS= Not Significant

analysis of variance conducted for stress and happiness scores of the before, during and after intervention phases, show that the C.A.R.E intervention is very effective in reducing the stress and improving the happiness levels of working women.

Hence the hypothesis, "There will be a significant difference in the before, during and after intervention levels of Stress among working women" is accepted. Also, the hypothesis, "There will be a significant difference in the before, during and after intervention levels of happiness among working women" is accepted.

Independent samples t-tests were conducted to understand any significant differences in Stress and Happiness levels with regard to the income and type of occupation (Permanent or temporary in nature). The results are presented below.

Table 7 indicates that there is no significant difference in the levels of Stress and Happiness among working women with regard to their income or types of occupation (Permanent/temporary). This indicates that stress and happiness are rather intrinsic factors and arise from certain psychological aspects rather than being extrinsic in nature.

Hence, the hypothesis, "There will be a significant difference in the levels of Stress and Happiness among working women with regard to income and types of occupation (Permanent/Temporary)" is rejected.

## Discussion

The results section above indicates clearly that the C. A. R. E intervention module is highly effective in reducing stress and increasing the happiness levels of working women. This positive psychology-based intervention focuses on increasing compassion and self-compassion; achieving a sense of purpose in life; building relationship bonds and enhancing positive emotions among the working women. These activities are easy to do, simple and practical and the participants of the study found them comfortable to do at any time whenever they were free. Also, the activities were self-motivating and created a feel-good environment in their lives. This was indicated in the feedback sessions held with the participants of the study. The above conducted randomized control trial experiment proves that the aforesaid intervention is effective.

Positive psychology postulates that the absence of negative psychological concepts does not ensure the well-being of human beings. The necessity for the deliberate building of positive emotions with an aim to bring about a state of flourishing is the keystone of all positive psychology interventions. Flourishing is said to be a state of positive psychological and social functioning that bring about the overall well-being of the individual. The present study develops such a positive psychology-based intervention module that is focused on improving the well-

being of the individual. Positive emotions have a way of buffering that helps build well being in one's life. In a supportive study conducted in Iran, among the students pursuing their medical studies, the presence of certain positive psychology constructs like satisfaction in life, spiritual well being and self-esteem were negatively correlated with symptoms of depression and loneliness. (Mirhosseini et al. 2022). Another recent similar study reported that positive psychology interventions focusing on developing self-compassion, coping, character strengths, courage, gratitude and such positive emotions along with helping build relationships are vital for developing, building and repairing any damage to mental health, especially during the pandemic. (Waters et al. 2021). Sudha and Gayatri Devi (2021) reported that the C. A. R. E intervention is beneficial in reducing social anxiety among young adults during the pandemic.

The pandemic situation has brought about a great amount of stress to the lives of the working population, especially women. Such positive psychological interventions are hence necessary to enable the women to manage their stress levels and bring about their well-being. A critical analysis reveals that the intervention used in the study needs to be validated further using more such randomized control trials before its generalized use. There are certain limitations in the study as the sample comprises of a small number of working women only and the variables used for the study are also limited. Such limitations can be overcome in further studies.

### Conclusion

The following conclusions can be drawn from the study on "The Efficacy of a Positive Psychology-based Intervention on Stress and Happiness among Working Women":

There is a significant difference in the levels of Stress and Happiness in the Before, During and After phases of the C. A. R. E intervention.

The C. A. R. E intervention is more effective in reducing the levels of Stress and improving the Happiness of working women.

Overall, it can be concluded that the C. A. R. E intervention is very effective in dealing

with some of the mental health issues faced by working women. It also improves some positive emotions such as happiness among working women.

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**Sudha, R.**, Ph.D Research Scholar, Department of Psychology, Avinashilingam Institute for Home Science and Higher Education for Women, Coimbatore. Email: [sudha\\_psy@avinuty.ac.in](mailto:sudha_psy@avinuty.ac.in)

**S. Gayatri Devi**, Ph.D., Professor and Head, Department of Psychology, Avinashilingam Institute for Home Science and Higher Education for Women, Coimbatore. Email: [dr gaya1965@gmail.com](mailto:dr gaya1965@gmail.com)

**Appendix - III**  
**Plagiarism Report**



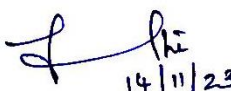
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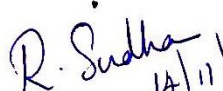
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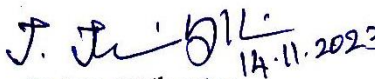
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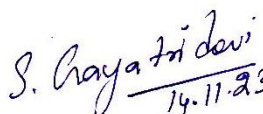
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POSITIVE PSYCHOLOGY CONSTRUCTS: DEVELOPMENT AND  
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1

# Positive Psychology Constructs: Development and Measurement

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**Appendix- IV**  
**Psychological Tests**

**Self-Compassion Scale Short Form (SCS-SF)**

**HOW I TYPICALLY ACT TOWARDS MYSELF IN DIFFICULT TIMES**

Please read each statement carefully before answering. Indicate how often you behave in the stated manner, using the following scale:

<b>Almost never</b>					<b>Almost always</b>
<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>	

When I fail at something important to me I become consumed by feelings of inadequacy.

I try to be understanding and patient towards those aspects of my personality I don't like.

When something painful happens I try to take a balanced view of the situation.

When I'm feeling down, I tend to feel like most other people are probably happier than I am.

I try to see my failings as part of the human condition.

When I'm going through a very hard time, I give myself the caring and tenderness I need.

When something upsets me I try to keep my emotions in balance.

When I fail at something that's important to me, I tend to feel alone in my failure

When I'm feeling down I tend to obsess and fixate on everything that's wrong.

When I feel inadequate in some way, I try to remind myself that feelings of inadequacy are shared by most people.

I'm disapproving and judgmental about my own flaws and inadequacies.

I'm intolerant and impatient towards those aspects of my personality I don't like.

**Reference:**

Raes, F., Pommier, E., Neff, K. D., & Van Gucht, D. (2011). Construction and factorial validation of a short form of the Self-Compassion Scale. *Clinical Psychology & Psychotherapy*, 18, 250-255

### Brief Resilience Scale (BRS)

Please respond to each item by marking <u>one box per row</u>		Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
<b>BR S1</b>	I tend to bounce back quickly after hard times	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
<b>BR S2</b>	I have a hard time making it through stressful events.	<input type="checkbox"/> 5	<input type="checkbox"/> 4	<input type="checkbox"/> 3	<input type="checkbox"/> 2	<input type="checkbox"/> 1
<b>BR S3</b>	It does not take me long to recover from a stressful event.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
<b>BR S4</b>	It is hard for me to snap back when something bad happens.	<input type="checkbox"/> 5	<input type="checkbox"/> 4	<input type="checkbox"/> 3	<input type="checkbox"/> 2	<input type="checkbox"/> 1
<b>BR S5</b>	I usually come through difficult times with little trouble.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
<b>BR S6</b>	I tend to take a long time to get over setbacks in my life.	<input type="checkbox"/> 5	<input type="checkbox"/> 4	<input type="checkbox"/> 3	<input type="checkbox"/> 2	<input type="checkbox"/> 1

**Scoring:** Add the responses varying from 1-5 for all six items giving a range from 6-30. Divide the total sum by the total number of questions answered.

Reference:

Smith, B. W., Dalen, J., Wiggins, K., Tooley, E., Christopher, P., & Bernard, J. (2008). The brief resilience scale: assessing the ability to bounce back. *International journal of behavioral medicine, 15*(3), 194-200.

### LIFE ORIENTATION TEST –Revised (LOT-R)

**Description of Measure:** A 10-item measure of optimism versus pessimism. Of the 10 items, 3 items measure optimism, 3 items measure pessimism, and 4 items serve as fillers. Respondents rate each item on a 4-point scale:

- 0 = strongly disagree,**
- 1 = disagree,**
- 2 = neutral,**
- 3 = agree, and**
- 4 = strongly agree.**

LOT-R is a revised version of the original LOT (Scheier & Carver, 1992; see abstract below). The original LOT had 12 items: 4 worded positively, 4 worded negatively, and 4 fillers.

Scale: Please be as honest and accurate as you can throughout. Try not to let your response to one statement influence your responses to other statements. There are no "correct" or "incorrect" answers. Answer according to your own feelings, rather than how you think "most people" would answer.

**A = Strongly agree**

**B = Agree**  
**C = Neutral**  
**D = Disagree**  
**E = Strongly Disagree**  
**The test:**

1. In uncertain times, I usually expect the best.
2. It's easy for me to relax.
3. If something can go wrong for me, it will.
4. I'm always optimistic about my future.
5. I enjoy my friends a lot.
6. It's important for me to keep busy.
7. I hardly ever expect things to go my way.
8. I don't get upset too easily.
9. I rarely count on good things happening to me.
10. Overall, I expect more good things to happen to me than bad.

Reference: Scheier, M. F., Carver, C. S., & Bridges, M. W. (1994).

### **The Adult Trait Hope Scale**

Directions: Read each item carefully. Using the scale shown below, please circle the number next to each item that best describes YOU.

- 1 Definitely False, 2 Mostly False, 3 Somewhat False, 4 Slightly False  
5 Slightly True, 6 Somewhat True, 7 Mostly True, 8 Mostly False
- 1 2 3 4 5 6 7 8 1. I can think of many ways to get out of a jam
- 1 2 3 4 5 6 7 8 2. I energetically pursue my goals
- 1 2 3 4 5 6 7 8 3. I feel tired most of the time
- 1 2 3 4 5 6 7 8 4. There are lots of ways around any problem
- 1 2 3 4 5 6 7 8 5. I am easily downed in an argument
- 1 2 3 4 5 6 7 8 6. I can think of many ways to get the things in life that are most important to me
- 1 2 3 4 5 6 7 8 7. I worry about my health
- 1 2 3 4 5 6 7 8 8. Even when others get discouraged, I know I can find a way to solve the problem
- 1 2 3 4 5 6 7 8 9. My past experiences have prepared me for my future
- 1 2 3 4 5 6 7 8 10. I've been pretty successful in life
- 1 2 3 4 5 6 7 8 11. I usually find myself worrying about something
- 1 2 3 4 5 6 7 8 12. I meet the goals that I set for myself

Reference: Snyder et al., 1991

## The Pain Catastrophizing Scale (PCS)

Everyone experiences painful situations at some point in their lives. Such experiences may include headaches, tooth pain, joint or muscle pain. People are often exposed to situations that may cause pain such as illness, injury, dental procedures or surgery.

We are interested in the types of thoughts and feelings that you have when you are in pain. Listed below are thirteen statements describing different thoughts and feelings that may be associated with pain. Using the following scale, please indicate the degree to which you have these thoughts and feelings when you are experiencing pain.

**0** – not at all    **1** – to a slight degree    **2** – to a moderate degree    **3** – to a great degree    **4** – all the time

---

*When I'm in pain ...*

- 1  I worry all the time about whether the pain will end.
- 2  I feel I can't go on.
- 3  It's terrible and I think it's never going to get any better.
- 4  It's awful and I feel that it overwhelms me.
- 5  I feel I can't stand it anymore.
- 6  I become afraid that the pain will get worse.
- 7  I keep thinking of other painful events.
- 8  I anxiously want the pain to go away.
- 9  I can't seem to keep it out of my mind.
- 10  I keep thinking about how much it hurts.
- 11  I keep thinking about how badly I want the pain to stop.
- 12  There's nothing I can do to reduce the intensity of the pain.
- 13  I wonder whether something serious may happen.

---

*... Total*

Reference: Sullivan et al., 1995

## WHO Well Being Index 5

1. I have felt cheerful and in good spirits	5	4	3	2	1	0
2. I have felt calm and relaxed	5	4	3	2	1	0
3. I have felt active and vigorous	5	4	3	2	1	0
4. I woke up feeling fresh and rested	5	4	3	2	1	0
5. My daily life has been filled with things that interest me	5	4	3	2	1	0

Reference: Krieger et al., 2014

## Subjective Happiness Scale (SHS)

---

For each of the following statements and/or questions, please circle the point on the scale that you feel is most appropriate in describing you.

In general, I consider myself:

1	2	3	4	5	6	7
not a very happy person						a very happy person

Compared to most of my peers, I consider myself:

1	2	3	4	5	6	7
less happy						more happy

Some people are generally very happy. They enjoy life regardless of what is going on, getting the most out of everything. To what extent does this characterization describe you?

1	2	3	4	5	6	7
not at all						a great deal

Some people are generally not very happy. Although they are not depressed, they never seem as happy as they might be. To what extent does this characterization describe you?

1	2	3	4	5	6	7
not at all						a great deal

Note: Item #4 is reverse coded.

Reference: Lyubomirsky & Lepper, 1999

# The Holmes-Rahe Life Stress Inventory

## The Social Readjustment Rating Scale

**INSTRUCTIONS:** Mark down the point value of each of these life events that has happened to you during the previous year. Total these associated points.

LIFE EVENT	MEAN VALUE
1. Death of spouse	100
2. Divorce	73
3. Marital Separation from mate	65
4. Detention in jail or other institution	63
5. Death of a close family member	63
6. Major personal injury or illness	53
7. Marriage	50
8. Being fired at work	47
9. Marital reconciliation with mate	45
10. Retirement from work	45
11. Major change in the health or behavior of a family member	44
12. Pregnancy	40
13. Sexual Difficulties	39
14. Gaining a new family member (i.e. ... birth, adoption, older adult moving in, etc.)	39
15. Major business readjustment	39
16. Major change in financial state (i.e. ... a lot worse or better off than usual)	38
17. Death of a close friend	37
18. Changing to a different line of work	36
19. Major change in the number of arguments w/spouse (i.e. ... either a lot more or a lot less than usual regarding child rearing, personal habits, etc.)	35
20. Taking on a mortgage (for home, business, etc. ... )	31
21. Foreclosure on a mortgage or loan	30
22. Major change in responsibilities at work (i.e. promotion, demotion, etc.)	29
23. Son or daughter leaving home (marriage, attending college, joined mil.)	29
24. In-law troubles	29
25. Outstanding personal achievement	28
26. Spouse beginning or ceasing work outside the home	26
27. Beginning or ceasing formal schooling	26
28. Major change in living condition (new home, remodeling, deterioration of neighborhood or home etc.)	25
29. Revision of personal habits (dress manners, associations, quitting smoking)	24
30. Troubles with the boss	23
31. Major changes in working hours or conditions	20
32. Changes in residence	20
33. Changing to a new school	20
34. Major change in usual type and/or amount of recreation	19
35. Major change in church activity (i.e. ... a lot more or less than usual)	19
36. Major change in social activities (clubs, movies, visiting, etc.)	18
37. Taking on a loan (car, tv, freezer, etc.)	17
38. Major change in sleeping habits (a lot more or a lot less than usual)	16
39. Major change in number of family get-togethers ("")	15
40. Major change in eating habits (a lot more or less food intake, or very different meal hours or surroundings)	15
41. Vacation	13
42. Major holidays	12
43. Minor violations of the law (traffic tickets, jaywalking, disturbing the peace, etc.)	11

**Now, add up all the points you have to find your score**

**TOTAL**

*150pts or less means a relatively low amount of life change and a low susceptibility to stress-induced health breakdown.  
 150 to 300 pts implies about a 50% chance of a major health breakdown in the next 2 years.  
 300pts or more raises the odds to about 80%, according to the Holmes-Rahe statistical prediction model.*

Reference: Holmes & Rahe, 1967

**THE FORMS OF SELF-CRITICISING/ATTACKING & SELF-REASSURING SCALE  
(FSCRS)**

	Not at all like me 0	A little bit like me 1	Moderately like me 2	Quite a bit like me 3	Extremely like me 4
When things go wrong for me:					
1.					0 1 2 3 4
2.					0 1 2 3 4
3.					0 1 2 3 4
4.					0 1 2 3 4
5.					0 1 2 3 4
6.					0 1 2 3 4
7.					0 1 2 3 4
8.					0 1 2 3 4
9.					0 1 2 3 4
10.					0 1 2 3 4
11.					0 1 2 3 4
12.					0 1 2 3 4
13.					0 1 2 3 4
14.					0 1 2 3 4
15.					0 1 2 3 4
16.					0 1 2 3 4
17.					0 1 2 3 4
19.					0 1 2 3 4
20.					0 1 2 3 4
21.					0 1 2 3 4
22.					0 1 2 3 4

Reference: Gilbert et al., 2004

## Beck Anxiety Inventory (BAI)

Below is a list of common symptoms of anxiety. Please carefully read each item in the list. Indicate how much you have been bothered by that symptom during the past month, including today, by circling the number in the corresponding space in the column next to each symptom.

	Not at all	Mildly, but it didn't bother me much	Moderately - it wasn't pleasant at times	Severely - it bothered me a lot
Numbness or tingling	0	1	2	3
Feeling hot	0	1	2	3
Wobbliness in legs	0	1	2	3
Unable to relax	0	1	2	3
Fear of worst happening	0	1	2	3
Dizzy or lightheaded	0	1	2	3
Heart pounding / racing	0	1	2	3
Unsteady	0	1	2	3
Terrified or afraid	0	1	2	3
Nervous	0	1	2	3
Feeling of choking	0	1	2	3
Hands trembling	0	1	2	3
Shaky / unsteady	0	1	2	3
Fear of losing control	0	1	2	3
Difficulty in breathing	0	1	2	3
Fear of dying	0	1	2	3
Scared	0	1	2	3
Indigestion	0	1	2	3
Faint / lightheaded	0	1	2	3
Face flushed	0	1	2	3
Hot / cold sweats	0	1	2	3

Reference: Beck et al., 1988

## Beck's Depression Inventory

This depression inventory can be self-scored. The scoring scale is at the end of the questionnaire.

1.
  - 0 I do not feel sad.
  - 1 I feel sad
  - 2 I am sad all the time and I can't snap out of it.
  - 3 I am so sad and unhappy that I can't stand it.
2.
  - 0 I am not particularly discouraged about the future.
  - 1 I feel discouraged about the future.
  - 2 I feel I have nothing to look forward to.
  - 3 I feel the future is hopeless and that things cannot improve.
3.
  - 0 I do not feel like a failure.
  - 1 I feel I have failed more than the average person.
  - 2 As I look back on my life, all I can see is a lot of failures.
  - 3 I feel I am a complete failure as a person.
4.
  - 0 I get as much satisfaction out of things as I used to.
  - 1 I don't enjoy things the way I used to.
  - 2 I don't get real satisfaction out of anything anymore.
  - 3 I am dissatisfied or bored with everything.
5.
  - 0 I don't feel particularly guilty
  - 1 I feel guilty a good part of the time.
  - 2 I feel quite guilty most of the time.
  - 3 I feel guilty all of the time.
6.
  - 0 I don't feel I am being punished.
  - 1 I feel I may be punished.
  - 2 I expect to be punished.
  - 3 I feel I am being punished.
7.
  - 0 I don't feel disappointed in myself.
  - 1 I am disappointed in myself.
  - 2 I am disgusted with myself.
  - 3 I hate myself.
8.
  - 0 I don't feel I am any worse than anybody else.
  - 1 I am critical of myself for my weaknesses or mistakes.
  - 2 I blame myself all the time for my faults.
  - 3 I blame myself for everything bad that happens.
9.
  - 0 I don't have any thoughts of killing myself.
  - 1 I have thoughts of killing myself, but I would not carry them out.
  - 2 I would like to kill myself.
  - 3 I would kill myself if I had the chance.
10.
  - 0 I don't cry any more than usual.
  - 1 I cry more now than I used to.
  - 2 I cry all the time now.
  - 3 I used to be able to cry, but now I can't cry even though I want to.

11.  
0 I am no more irritated by things than I ever was.  
1 I am slightly more irritated now than usual.  
2 I am quite annoyed or irritated a good deal of the time.  
3 I feel irritated all the time.
12.  
0 I have not lost interest in other people.  
1 I am less interested in other people than I used to be.  
2 I have lost most of my interest in other people.  
3 I have lost all of my interest in other people.
13.  
0 I make decisions about as well as I ever could.  
1 I put off making decisions more than I used to.  
2 I have greater difficulty in making decisions more than I used to.  
3 I can't make decisions at all anymore.
14.  
0 I don't feel that I look any worse than I used to.  
1 I am worried that I am looking old or unattractive.  
2 I feel there are permanent changes in my appearance that make me look unattractive  
3 I believe that I look ugly.
15.  
0 I can work about as well as before.  
1 It takes an extra effort to get started at doing something.  
2 I have to push myself very hard to do anything.  
3 I can't do any work at all.
16.  
0 I can sleep as well as usual.  
1 I don't sleep as well as I used to.  
2 I wake up 1-2 hours earlier than usual and find it hard to get back to sleep.  
3 I wake up several hours earlier than I used to and cannot get back to sleep.
17.  
0 I don't get more tired than usual.  
1 I get tired more easily than I used to.  
2 I get tired from doing almost anything.  
3 I am too tired to do anything.
18.  
0 My appetite is no worse than usual.  
1 My appetite is not as good as it used to be.  
2 My appetite is much worse now.  
3 I have no appetite at all anymore.
19.  
0 I haven't lost much weight, if any, lately.  
1 I have lost more than five pounds.  
2 I have lost more than ten pounds.  
3 I have lost more than fifteen pounds.

- 20.
- 0 I am no more worried about my health than usual.
  - 1 I am worried about physical problems like aches, pains, upset stomach, or constipation.
  - 2 I am very worried about physical problems and it's hard to think of much else.
  - 3 I am so worried about my physical problems that I cannot think of anything else.
- 21.
- 0 I have not noticed any recent change in my interest in sex.
  - 1 I am less interested in sex than I used to be.
  - 2 I have almost no interest in sex.
  - 3 I have lost interest in sex completely.

Reference: Beck et al., 1996a

### UCLA LONELINESS SCALE

**Scale:**

**INSTRUCTIONS:** Indicate how often each of the statements below is descriptive of you.

C indicates "I often feel this way"

S indicates "I sometimes feel this way"  
R indicates "I rarely feel this way"

N indicates "I never feel this way"

- |   |         |
|---|---------|
| 1. I am unhappy doing so many things alone                        | O S R N |
| 2. I have nobody to talk to                                       | O S R N |
| 3. I cannot tolerate being so alone                               | O S R N |
| 4. I lack companionship   | O S R N |
| 5. I feel as if nobody really understands me                      | O S R N |
| 6. I find myself waiting for people to call or write              | O S R N |
| 7. There is no one I can turn to                                  | O S R N |
| 8. I am no longer close to anyone                                 | O S R N |
| 9. My interests and ideas are not shared by those around me       | O S R N |
| 10. I feel left out   | O S R N |
| 11. I feel completely alone                                       | O S R N |
| 12. I am unable to reach out and communicate with those around me | O S R N |
| 13. My social relationships are superficial                       | O S R N |
| 14. I feel starved for company                                    | O S R N |
| 15. No one really knows me well                                   | O S R N |
| 16. I feel isolated from others                                   | O S R N |
| 17. I am unhappy being so withdrawn                               | O S R N |
| 18. It is difficult for me to make friends                        | O S R N |
| 19. I feel shut out and excluded by others                        | O S R N |
| 20. People are around me but not with me                          | O S R N |

Reference:

Russell, D , Peplau, L. A.. & Ferguson, M. L. (1978). Developing a measure of loneliness. *Journal of Personality Assessment*, 42, 290-294.

## C. A. R. E Inventory

**Sudha. R**

This is an assessment designed to understand your Compassion and Self-Compassion, your sense of Achievement of Purpose in life, Good Relationships and Positive Emotions in your life. So, the "C" stands for Compassion, "A" stands for Achievement of purpose in life, "R" Relationship building and "E" stands for Enhancing Positive Emotions in life.

What is your age

- 12 years to 18 years
- 19 years to 22 years
- 23 years to 27 years
- 28 to 35 years
- Above 35 years

Your gender

- Male
- Female
- Prefer not to say
- Third gender

Instructions: Kindly read the following statements and tick in the column that is appropriate for you. Kindly do not omit any statements. Try to finish the schedule as fast as you can, though there is no time limit. There are no right or wrong answers. Your data will be kept confidential and would be used solely for research purposes only. Kindly answer the statements given below if you consent.

S. No		Always	Often	Sometimes	Rarely	Never
	<b>Compassion</b>					
1	I am kind to myself					
2	I rate myself as a kind and compassionate person.					
3	I think that Compassion and Hope are important human values to be followed in my life.					
4	I feel inadequate in many ways when compared to other people					
5	When I am in emotional distress, I will try to remind myself to be compassionate.					
6	I am intolerant and disapproving of my own faults.					
7	I am intolerant and disapprove of others' faults.					
8	I understand others' emotional pain.					

<b>Achievement of Purpose in Life</b>						
9	I feel that my life is worthwhile and valuable.					
10	I think that I am making progress toward achieving the goals that I have set for myself.					
11	I think that I have achieved the goals that I have set for myself.					
12	In general, I think that I lead a meaningful and purposeful life.					
13	I feel contented and satisfied with the direction my life is taking.					
14	I have clarity as to what I want in life.					
15	I can clearly picture myself 5 years from now.					
16	I feel unsure of what I am doing in my life.					
17	I feel that I lack a mission in my life.					
18	I feel that I am constantly searching for fulfilment.					
<b>Relationship Building</b>						
19	I feel loved by the people around me.					
20	I readily receive help and support from others when I need it.					
21	I am satisfied with my personal relationships.					
22	I feel that the people in my life understand and cooperate with me.					
23	I feel that I can trust the significant others in my life.					
24	Even when I fail in certain things, I feel that there are people to support me.					
25	I feel that people in my life are unpredictable.					
26	I feel that people in my life will not care for me when I am in distress.					
<b>Enhancing Positive Emotions</b>						
27	I feel that I can cope with the stressors in my life.					
28	I feel that I can manage my emotions and not go “out of control” even in a bad situation.					
29	In general, I feel positive and hopeful about my life.					
30	I feel angry when others have opposing views on things/ events, or when they argue with me.					
31	Considering all the people, things and events in my life, I rate myself as a happy person.					
32	I find myself to be in a bad mood when things do not go right for me.					
33	I am aware of all the emotions that I am undergoing at present.					
34	I often have memories of the good times in my life.					
35	When I look back, I remember only my failures and others’ betrayal.					
36	When I experience happiness, I am able to prolong that good mood throughout the day.					

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## Scoring

There are eleven negative statements such as 4, 6, 7, 16,17,18, 25, 26, 30, 32, 35. They are scored reverse in the following way:

- Always: Score of 0
- Often: Score of 1
- Sometimes: Score of 2
- Rarely: Score of 3 and
- Never: Score of 4.

All the other statements are positive and are scored as follows:

- Always: Score of 4
- Often: Score of 3
- Sometimes: Score of 2
- Rarely: Score of 1 and
- Never: Score of 0.

**Each of the subtests namely Compassion, Achievement of Purpose in Life, Relationship Building and Enhancing Positive Emotions are scored individually.**

The maximum possible score for each of the subtests is 40 for dimensions 2 and 4. The minimum possible score for each domain is 0. For dimensions 1 and 3, the maximum possible score for each of the subtests is 36 and the minimum possible score is 0. The interpretation for each of the subtests is as follows:

Raw Score	Interpretation
41 to 50	High
31 to 40	Moderate
21 to 30	Low
10 to 20	Needs Improvement

A high score indicates a good adjustment in the particular domain/ subtest; for example: if a subject scores high in Compassion and Good Relationships, then he/she has a high level of compassion and also has very good relationships in his/ her life.

## C. A. R. E Intervention Module

**Requirements: One Journal/ notebook for writing down experiences each day.**

Seven activities each for Compassion and Self Compassion, Achieving a Purpose in Life, Relationship Building, and Enhancing Positive Emotions are spread through the 28-day calendar.

Relaxation Exercises such as Counted Breathing, Deep Breathing, Breathing from the Stomach, and Jacobson’s Progressive Muscle Relaxation (for a period of 30 to 40 minutes every day in the morning) are also conducted every day. A free talk session is organized every week to discuss any doubts that participants may have.

- A 28-day-long calendar with activities from day one is given below.

<b>Day 1</b> <b>C</b>	<p><b>Compassion Day:</b> Do a kind task towards another person. Choose from any one of the activities given below:</p> <ul style="list-style-type: none"> <li>• Donate money/time/clothing/ .....</li> <li>• Smile and wish someone when they least expect it</li> <li>• Show concern to someone</li> <li>• Give your time and pleasantness to someone from your family</li> </ul> <p>Outcome: Doing a compassionate activity gives an immense sense of satisfaction</p>
<b>Day 2</b> <b>A</b>	<p><b>Resilience Day:</b> Think of a setback that is weighing you down. Write it down in detail. In the end, write down ways in which you think you can challenge yourself and bounce back from the negativity. Imagine that the stressful event is a cloud that is spreading over you. You stand upright and bring your hands fist up to break through the cloud and emerge a winner.</p> <p>Outcome: The ability to bounce back from stress cultivates Resilience and hence a sense of achievement and success.</p>
<b>Day 3</b> <b>R</b>	<p><b>Relationship Day:</b> Today, we work to improve one relationship in our life that is not very good. Make sure you change your thought process about that person and make it positive and open. Go and make deliberate, patient conversation with eye contact. Be non-judgmental and non-critical. Try to listen. Have an open body language. Do not deny or jump to defend. Try to repair any misunderstanding today.</p> <p>Outcome: Building a Relationship gives better Well-being and Happiness.</p>
<b>Day 4</b>	<p><b>Enhancing Positive Emotion Day:</b> Today, try to cultivate, build and broaden one</p>

<b>E</b>	<p>positive emotion. Choose one emotion from the following:</p> <ul style="list-style-type: none"> <li>• Happiness</li> <li>• Joy/Elation</li> <li>• Serenity/Calmness</li> <li>• Love</li> <li>• Contentment</li> </ul> <p>Try to fill your mind with the chosen positive emotion and spread that positive emotion to those around you today.</p> <p>Outcome: Enhancing one positive emotion per day builds Well-being.</p>
<b>Day 5</b> <b>C</b>	<p><b>Self Compassion Day:</b> Today is Kindness to self day. Are you overly critical about yourself over any particular weakness/ fault of yours? Show a little compassion to yourself. It is all ok. There is always tomorrow to strive to be better.</p> <p>Activity: Write down what you consider one of your major faults. Describe it in detail. Then write down, what are the possible reasons there are to forgive yourself and be kind to yourself despite that glaring fault. Read it over and see if it is believable.</p> <p>Outcome: A little Self Compassion can establish better Well-being</p>
<b>Day 6</b> <b>A</b>	<p><b>Achievement of Purpose in Life Day:</b> Ask yourself the following questions:</p> <ul style="list-style-type: none"> <li>• What is the purpose of the day today?</li> <li>• What is the one thing that I can achieve today?</li> <li>• The motto and Objective for today is..... (Choose something small but fulfilling and satisfying to you, something that will make you happy)</li> </ul> <p>Outcome: After you do the task, bask in the glow of achieving a sense of purpose.</p>
<b>Day 7</b> <b>R</b>	<p><b>Forgiveness Day:</b> Today, Forgive a friend, relative, or anyone who has hurt you recently by their speech or actions.</p> <p>Activity: Write about how that person betrayed your trust and how bad you felt/still feel. Close your eyes. Take a deep breath. Say loudly, “I FORGIVE YOU” for hurting me. Let go of the anger and frustration towards that person or event. Imagine the sense of calm and peace overflowing in your mind after you have let go of the hurt.</p> <p>Outcome: Forgiveness mends Relationships and builds bonds.</p>
<b>Day 8</b> <b>E</b>	<p><b>Gratitude Day:</b> Identify at least five things/events/ people in your life for which/whom you are thankful/grateful. Then, write the reasons for your feeling of being grateful for each of the five things. This exercise can also be repeated daily</p>

	<p>by identifying one thing you are grateful for that day.</p> <p>Outcome: Gratitude is a positive emotion that is one of the highest predictors of Well-being.</p>
<b>Day 9</b> <b>C</b>	<p><b>Challenging your Self Critic Day:</b> Does your inner voice say, “I am useless/worthless/ failure/disgusting etc..”</p> <p>Activity: Reframe the observations and comments made by your self critic in a positive friendly way. Soothe yourself by self reassurance, and by using different words, for example, “I may fail today, but, I can overcome this, I can get the strength to fight this situation” Write down your self supporting dialogue.</p> <p>Outcome: Self Reassurance helps build Self Compassion and overcoming self criticism.</p>
<b>Day 10</b> <b>A</b>	<p><b>Overcome Obstacle Day:</b> Can you think of one obstacle in your path. Then, think about how you can overcome it. Could you write it down?</p> <p>My Obstacle:</p> <p>My plan to overcome this obstacle:</p> <p>My chances of success:</p> <p>Outcome: A clear plan to overcome obstacles builds a sense of achievement and purpose.</p>
<b>Day 11</b> <b>R</b>	<p><b>Spread the Smile Day:</b> Post a message, poem or a few words about a person who has brought a smile to your face today.</p> <p>The person can be your family member/ friend/relative or yourself. Say thanks to this person who is the reason for your smile today.</p> <p>Alternate Activity: Bring a smile on any person around you. Make them feel good with an activity, words or anything that would make them smile.</p> <p>Outcome: More smiles means more happiness, more positive emotional experience and building relationships.</p>
<b>Day 12</b> <b>E</b>	<p><b>Optimism Day:</b> Deliberately recall an adverse event that has happened to you in the past 15 days. Bring out the advantages/positives hidden behind the negative emotion associated. (Examples given to the participants). Write down a thought that is opposed to the negative thinking associated with the adverse event. Carefully consider the advantages associated with that negative event, while writing.</p> <p>Outcome: Looking for positives within negatives helps cultivate optimistic thinking, hope and a sense of purpose in life.</p>

<p><b>Day 13</b> <b>C</b></p>	<p><b>Self Compassion Day: The Best Friend Test</b>  Activity: What would you say to a best friend who is feeling bad? What are the words that you would use to console your best friend who feels down? Write it down. Write down with sincerity what you feel about your friend and what are misconceptions your friend has about himself/herself. Now read it as if your friend has written a letter to console you. Believe each and every word.</p> <p>Outcome: This activity enhances Self compassion and hence promotes Well-being</p>																														
<p><b>Day 14</b> <b>A</b></p>	<p><b>Strengths Exploration Day:</b> For today's task, we have a Strength Exploration Worksheet. Given below are some Strengths. Feel free to add/ delete and fill up the empty rows with your strengths, as many as you can think of.</p> <table border="1" data-bbox="358 684 1429 989"> <tr> <td>Calm</td> <td>Smart</td> <td>Fun-loving</td> <td>Intelligent</td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Courageous</td> <td></td> <td>Honest</td> <td></td> <td></td> </tr> <tr> <td></td> <td>Loyal</td> <td></td> <td></td> <td>Beautiful</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>focused</td> <td></td> <td></td> <td>Hard-working</td> <td></td> </tr> </table> <p>Clues: Answering these questions may give you a list of strengths.</p> <ol style="list-style-type: none"> <li>1. What are the qualities in me that help me in my friendships?</li> <li>2. What are the factors within me; that helps me in my work/academics?</li> <li>3. What helps me maintain cordial relationships with my family?</li> <li>4. What makes me feel contented/ satisfied/ fulfilled?</li> </ol> <p>Outcome: Building Strengths, helps to achieve a sense of purpose.</p>	Calm	Smart	Fun-loving	Intelligent							Courageous		Honest				Loyal			Beautiful						focused			Hard-working	
Calm	Smart	Fun-loving	Intelligent																												
Courageous		Honest																													
	Loyal			Beautiful																											
focused			Hard-working																												
<p><b>Day 15</b> <b>R</b></p>	<p><b>Building Bridges Day:</b> Today make an attempt to communicate with someone whom you have not communicated or contacted because of a fight or misunderstanding. It can be a friend or relative. Make an attempt to communicate without any expectations of a return of the same gesture. Write down in detail your experience at mending the broken down communication.</p> <p>Outcome: Communication helps to repair broken relationships.</p>																														
<p><b>Day 16</b> <b>E</b></p>	<p><b>Hope Day:</b> Visualize in full detail a future, where you are very successful, a future where you are achieving all that you dreamt of.</p> <p>Write down your dream in detail. Imagine that you have realized your dream and feel the success.</p> <p>Activity: My Hope Box: use an old shoebox for this. Write down your dream in</p>																														

	<p>detail in a sheet of paper and write down the date when you plan to realize it. Give structure and concreteness by giving full details. For Example, “I dream of becoming an accomplished singer. For achieving this aim, I have joined vocal music classes. I will become an accomplished singer five years from now(Specify month and year).” Put this in the Hope Box. Add short term and long term dreams and goals. Take time once a month to read and remind yourself of your dreams.</p> <p>Outcome: Writing down goals and reminding yourself of them helps to cultivate the positive emotion of Hope and also builds Optimism.</p>										
<p><b>Day 17</b> <b>C</b></p>	<p><b>Take Action for Self Care Day:</b> What is the one thing that you can do to stop people from hurting you. What is the thing that you can give yourself? Activity: Motivate yourself to do something to defend yourself. Write on how you plan to win over anyone who is critical or judgmental about you. What are the actions that you are going to take to safeguard yourself from the harm and hurt that others may inflict upon you? Write this down in detail.</p> <p>Outcome: Self Care is one of the exercises of Self Compassion. This leads to better Well-being.</p>										
<p><b>Day 18</b> <b>A</b></p>	<p><b>Overcome FEAR with DARE Day</b> Today's task is to identify and overcome your fears. So what are some things that make you feel scared or nervous?</p> <table border="1" data-bbox="358 1062 1432 1619"> <thead> <tr> <th data-bbox="358 1062 894 1108">My FEAR</th> <th data-bbox="894 1062 1432 1108">My DARE</th> </tr> </thead> <tbody> <tr> <td data-bbox="358 1108 894 1236">F- How do I Feel?</td> <td data-bbox="894 1108 1432 1236">D - Develop Skills. What are the skills I need to develop to overcome this Fear?</td> </tr> <tr> <td data-bbox="358 1236 894 1362">E - What are the excessive emotions involved?</td> <td data-bbox="894 1236 1432 1362">A – Accept what can not be changed. Can I accept a part of this situation that I cannot change?</td> </tr> <tr> <td data-bbox="358 1362 894 1488">A - Am I Avoiding? Running Away?</td> <td data-bbox="894 1362 1432 1488">R - Realistic Goals. Can I have Realistic Goals? Can I take one day at a time?</td> </tr> <tr> <td data-bbox="358 1488 894 1619">R - Am I far away from Reality?</td> <td data-bbox="894 1488 1432 1619">E - Embrace positivity. Can I Embrace my values and principles at this time?</td> </tr> </tbody> </table> <p>Outcome: Overcoming fear develops a sense of security, and achievement of purpose in life.</p>	My FEAR	My DARE	F- How do I Feel?	D - Develop Skills. What are the skills I need to develop to overcome this Fear?	E - What are the excessive emotions involved?	A – Accept what can not be changed. Can I accept a part of this situation that I cannot change?	A - Am I Avoiding? Running Away?	R - Realistic Goals. Can I have Realistic Goals? Can I take one day at a time?	R - Am I far away from Reality?	E - Embrace positivity. Can I Embrace my values and principles at this time?
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<p><b>Day 19</b> <b>R</b></p>	<p><b>Empathy Day:</b> Today empathize with a friend or relative who is having some kind of trouble. Activity: Reach out to someone like a friend or relative who is in trouble. Listen to</p>										

	<p>them, encourage them to share their trouble. Be non-critical and nonjudgmental with them. Be supportive. Make an effort to understand the intensity of their pain from their perspective.</p> <p>Outcome: This activity builds bonds and strengthens relationships.</p>
<b>Day 20</b> <b>E</b>	<p><b>Happiness Day:</b> Find a reason, however small or silly, to be happy today. What puts you in a happy mood. What is it that makes you laugh? Do that activity now. For example, eating your favourite food puts you in a good mood, do it today! Enjoy the Joy! Spread the happiness to all around you. Smile and be pleasant to all around you.</p> <p>Activity: Write a Happy story. Write about a happy time in your own life or one event or a funny incident you witnessed. Be happy.</p> <p>Outcome: Happiness is one positive emotion that builds Well being.</p>
<b>Day 21</b> <b>C</b>	<p><b>Exercise Day:</b></p> <p>Activity: Today is the day to take care of yourself physically. Choose an exercise that you like to do. It can be walking, jogging, dancing, playing a sport, or any physical activity. Do that physical activity for half an hour. After the activity, sit back and feel the exhilaration in your body.</p> <p>Outcome: Physical Self-care is an important aspect of being compassionate to yourself.</p>
<b>Day 22</b> <b>A</b>	<p><b>Positive Posture Day:</b> Assume a “Power Pose”.</p> <p>Activity: This activity works best when you are feeling very down. Look at yourself in the mirror at that time. See how your posture is that of a defeated person. Pull yourself up. Push your chin up, straighten your shoulders, push your chest forward, shoulders backwards, look yourself in the eye. Assume that you are confident and successful. Repeat to yourself, loud and clear, “I am powerful, I am successful” with conviction. Watch your mood change to the positive.</p> <p>Outcome: Assuming a “Power Pose” helps you to feel better and builds Positivity and Hope. This builds a sense of achievement and purpose to look forward.</p>
<b>Day 23</b> <b>R</b>	<p><b>Give a Compliment Day:</b></p> <p>Activity: Make an effort to give a genuine compliment to someone around you. Write about how you feel after giving a compliment and also how your compliment was received by that person.</p> <p>Outcome: Genuine Compliments to others builds Relationships.</p>

<p><b>Day 24</b> <b>E</b></p>	<p><b>Savoring Day:</b> What is your most treasured memory. Relive that moment  Activity: Visualize how you felt on that day when you had your most pleasant, happy moment. Alternatively, think of that moment recently when you felt content and peaceful. Think back as to what were you doing, how happy/calm you felt. Relive that memory fully. If possible, write about that memory in detail. Prolong that experience by imagining yourself there, smiling and being happy.</p> <p>Outcome: Savoring happy memories helps build positive emotions and well being.</p>
<p><b>Day 25</b> <b>C</b></p>	<p><b>Kindness Day:</b>  Activity: Today take time to do an act of kindness. Be kind by volunteering some time, making a donation or speaking a kind word to someone around you who needs kindness.</p> <p>Outcome: Compassion to others contributes to Well-being</p>
<p><b>Day 26</b> <b>A</b></p>	<p><b>Mission In Life Day:</b>  Activity: Think of what is it that you want to achieve in life five years down the line. Visualize where you would want to be, what you would want to do and How you decide to make it happen. Make it your mission. Write down a Mission Statement and make yourself believe in it.</p> <p>Outcome: Building a long term mission or purpose in life helps build hope and optimism. It also motivates one to achieve.</p>
<p><b>Day 27</b> <b>R</b></p>	<p><b>Write a letter Day:</b>  Activity: today, write a letter to a friend or relative with whom you have lost touch. Alternatively, send a message or use social media to get in touch with a long lost friend or relative. Initiate contact and make the effort to rekindle a lost relationship</p> <p>Outcome: Relationships need nurturing and time. Giving a little attention to meaningful relationships help in Well-being.</p>
<p><b>Day 28</b> <b>E</b></p>	<p><b>Live for the Moment Day:</b>  Activity: Be Mindful today. Be observant of all that is happening here and now. Concentrate only on the present. Be observant of only the present; forget about the past or future. Live today as if it were the last day on earth. Write down your experience.</p> <p>Outcome: Living for today enhances Mindfulness and positive emotions.</p>



