Exploring the Impact of a Positive Psychology Intervention

with Latina/o Adolescents

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Abstract

Latina/o adolescents may begin middle school with lower levels of life satisfaction, hope, and self-compassion. In the current study, a small-series ($N = 5$) single-case research design was implemented to evaluate the impact of a positive psychology group counseling experience to increase Latina/o adolescents’ life satisfaction, hope, and self-compassion. Analysis of participants’ scores on outcome measures yielded treatment effects indicating that the positive psychology group counseling experience may be effective for increasing hope, life satisfaction, and self-compassion. Given that the positive psychology approach was a promising approach for improving Latina/o adolescents’ positive outcomes, implications for school counselors to integrate positive psychology into treatment processes are presented.

*Keywords*: school counseling, positive psychology, Latina/o adolescents
Exploring the Impact of a Positive Psychology Intervention with Latina/o Adolescents

The Latina/o population is at greater risk than other populations for depressive symptoms, mental health impairment, suicide attempts, suicide ideation, and hopeless feelings (Centers for Disease Control and Prevention, 2011; Wagstaff & Polo, 2012). Vela et al. (2009) found that Latina/o college students (ages 19-22), when interviewed about their high school counselors, were an underserved population regarding school counseling and mental health services. Given that past researchers have detected that Latina/o youth had higher instances of psychosomatic problems and anxiety symptoms (Glover, Pumariaga, Holzer, Wise, & Rodriguez, 1999; Pina & Silverman, 2004), exploring the impact of interventions to help Latina/o adolescents improve mental health outcomes is important. The current study augments previous research by examining treatment effectiveness of an 11-week positive psychology intervention with Latina/o adolescents. Findings have potential to inform practices for school and clinical mental health counselors working with Latina/o adolescents who have mental health needs.

Treatment Approach

Based on previous research in positive psychology (Seligman, 2002; Snyder & Lopez, 2002), a positive psychology intervention was implemented to improve life satisfaction, hope, and self-compassion among Latina/o adolescents. Given that counseling and positive psychology have philosophical differences that are beyond the scope of the current article (Waterman, 2013), we focus on what these two viewpoints have in common: subjective well-being, wellness, flourishing, authentic happiness, optimal functioning, and the human experience (Seligman, 2002; Wong, 2011). Kaplan,
Tarvydas, and Gladding (2014) also provided the following counseling definition: “counseling is a professional relationship that empowers diverse individuals, families, and groups to accomplish mental health, wellness, education, and career goals” (p. 368). Professional counselors use a wellness-based perspective to help clients and students identify strengths and make positive changes toward wellness and subjective well-being (Haktanir, Lenz, Can, & Watson, 2016). Also, Haktanir et al. (2016) stated that positive psychology and counseling share a common focus on helping individuals identify and cultivate strengths to enhance positive psychological functioning. Finally, positive psychology (Seligman & Csikszentmihalyi, 2000) is a scientific study in which the goal is to understand and improve optimal human functioning. Positive psychology has applications and interventions in various counseling contexts including individual counseling, child and adolescent counseling, couples and family counseling, group counseling, and career counseling (Magyar-Moe, Owens, & Conoley, 2015; Lerma, Wright, Ikonomopoulos, Hinojosa, & Cavazos, 2018).

Life Satisfaction

Due to its strong relationship with psychological well-being, life satisfaction is an important component of mental health (Segrin & Taylor, 2007). In a study with young adults who were mostly Caucasian, a link between life satisfaction and both hedonism (pursuit of pleasure) and eudaemonism (pursuit of good) was found, suggesting life satisfaction may be an outcome of both variables (Proctor, Tweed, & Morris, 2015). There is also research linking life satisfaction to academic success. Lyons and Huebner (2016) showed statistically significant positive correlations between life satisfaction and grade point average as well as emotional engagement. However, Kim and Jeong (2017)
stated that academic success has a strong positive effect on adolescents’ life satisfaction. Finally, Stephens, Stein, and Landrine (2010) showed that Hispanics with lower levels of acculturation had higher levels of life satisfaction among cancer survivors. Based on previous research, life satisfaction may be a strong contributing factor to Hispanic college students’ mental health and academic success, making exploring the impact of an intervention to influence life satisfaction worthwhile.

**Hope**

An important variable in overcoming difficult life events and circumstances is hope. Snyder (2002) defined hope as the belief in one’s capacity to create pathways toward meeting goals and agency. Hope is an important component in achieving happiness as researchers found that sub-factors of hope (e.g., positive future orientation) predict subjective happiness (Sariçam, 2015). Hope has also been shown to contribute to academic success as it allows for development of coping strategies and new insight (Hansen, Trujillo, Boland, & MacKinnon, 2014). Similar results were shown in a 6-year longitudinal study in which hope was a strong predictor of overall grades among participants (Snyder et al., 2002). Participants with higher levels of hope were also more likely to graduate than other participants, showing the possibility that hope promotes problem-solving strategies. Relatively recent research shows hope to be a predictor of psychological grit (Vela, Lu, Lenz, & Hinojosa, 2015) when studied with Mexican-American college students. This is significant as psychological grit is an essential component to working through difficult challenges and maintaining effort (Duckworth, Peterson, Matthews, & Kelly, 2007). Given that hope is connected to
problem-solving strategies, psychological grit, and academic achievement, exploring the impact of interventions to increase hope among Latina/o adolescents is important.

**Self-Compassion**

Neff (2003) postulated that self-compassion consists of three components: self-judgment vs. self-kindness; isolation vs. humanity; and over-identification vs. mindfulness. Trompetter, de Kleine, & Bohlmeijer (2017) found that self-compassion significantly mediated the negative relationship between psychopathology and positive mental health. Chang et al. (2017) also highlighted how three major facets of self-compassion (common humanity, mindfulness, and over-identification) mediated negative life events and depressive symptoms. However, despite positive effects of self-compassion, Denckla, Consedine, and Bornstein (2017) found self-compassion was a possible contributor to negative effects that adaptive health-dependency and maladaptive destructive-overdependence have on mental health. The studies suggest that self-compassion can be either a positive or negative variable dependent on the accompanying behaviors and subjective attitudes. As a result, if an intervention serves to target other variables, such as hope and life satisfaction, increasing self-compassion with these conditions could lead to positives results.

**Purpose of Study and Rationale**

The purpose of this study was to evaluate the efficacy of a positive psychology group counseling experience for increasing hope, life satisfaction, and self-compassion among Latina/o adolescents. The rationale for using a single-case research design (SCRD) was to explore the impact of an intervention that might help Latina/o adolescents improve positive outcomes that are related to academic achievement,
college self-efficacy, and mental health. Lenz (2015) recommended SCRDs to examine treatment effectiveness for the following reasons: self as control, type of data yielded from analyses, minimal sample size, flexibility and responsiveness, and ease of data analysis. At the middle school where participants were recruited, a SCRD was feasible given the small sample size as well as potential to examine the efficacy of an intervention with a diverse population (Vela, Ikonomopoulos, Garcia, Whittenberg, & Gonzalez, in press). With this goal in mind, a SCRD (Lenz, Speciale, & Aguilar, 2012) was implemented to identify and explore trends of changes in hope, life satisfaction, and self-compassion following participation in a positive psychology group counseling experience. As a result, the following research question was evaluated: To what extent is positive psychology group counseling effective for increasing hope, life satisfaction, and self-compassion among Latina/o adolescents? Based on previous research, we developed the following hypotheses: (1) adolescents in a positive psychology group would report increases in hope; (2) adolescents in a positive psychology would report increases in life satisfaction; and (3) adolescents in a positive psychology would report increase in self-compassion.

**Methodology**

A small series ($N = 5$) A-B single-case research design was implemented with Latina/o adolescents to evaluate the treatment effect associated with positive psychology group counseling for increasing hope and life satisfaction. Researchers (e.g., Lenz et al., 2012) have suggested that an A-B single-case research design is a sound design to measure the effectiveness of an intervention.
Participants

Participants in this study were five Latina/o adolescents who attended a middle school in the Southern region of the United States who were between the ages of 12 to 14 years. Participants were five adolescents with a mean age of 13.2. All participants self-identified as Hispanic. During informed consent, participants were assigned pseudonyms to protect their identity.

**Participant 1.** Melissa was a Hispanic adolescent who struggled with goal setting and self-compassion. She reported good behavior but difficulty staying focused in class. Her treatment goals included increased life satisfaction and progress toward goals.

**Participant 2.** Jennifer was a Hispanic adolescent who struggled with self-compassion and life satisfaction. She reported good academic performance and behavior. Her treatment goals included increasing life satisfaction and hope.

**Participant 3.** Alex was a Hispanic adolescent who struggled with goal setting and life satisfaction. He reported difficulty behaving in class and struggled academically. His treatment goals included self-regulation and increasing life satisfaction.

**Participant 4.** Erica was a Hispanic adolescent who struggled with life satisfaction and hope. She reported good academic performance but difficulty working with others. Her treatment goals included increasing self-regulation and life satisfaction.

**Participant 5.** Fabian was a 14-year-old Hispanic adolescent who struggled with life satisfaction and goal setting. He reported difficulty with academic performance and behavior in school. His treatment goals included increasing self-compassion and self-regulation.
Measurements

**Hope.** The Children’s Hope Scale (Snyder et al., 1997) is a self-report inventory to measure participants’ attitudes toward goals and objectives. Participants responded to a six-item measure that is evaluated on a six-point Likert-type scale ranging from *all of the time* (6) to *none of the time* (1). Sample response items include, “can get things in life” and “doing just as well as other kids.” Reliability coefficients for scores on the total scale range from .71 to .86 (Snyder et al., 1997; Taysi, Curun, & Orcan, 2015).

**Satisfaction with life.** The Satisfaction with Life Scale-Child ([SWLS-C], Gadermann, Schonert-Reichl, & Zumbo, 2010) measures adolescents’ perceptions of life satisfaction. Participants responded to 5-items ranging from (1) *disagree a lot* to (5) *agree a lot*. Sample items include, “I am happy with my life” and “So far I have gotten the most important things I want in life.”

**Self-compassion.** The Self-Compassion Scale-Short Form (Raes, Pommier, Neff, & Van Gucht, 2011) measures adolescents’ self-kindness, self-judgment, common humanity, isolation, mindfulness, and over-identification. Participants responded to 12-items ranging from (1) *almost never* to (5) *almost always*. Sample items include, “When I fail at something important to me, I become consumed by feelings of inadequacy” and “When something painful happens, I try to take a balanced view of the situation.”

Treatment

Participants received between nine and eleven sessions of positive psychology in a group setting (Savage, 2011; Seligman, 2002). The purpose of these sessions was to help participants express emotions, identify gratitude, reframe negative situations, and re-imagine a positive future outcome in a small group setting. The fifth author, who was
also the lead practitioner in the current study, adapted interventions which were designed to facilitate gratitude, positive mental health, and hope toward the future. She is a certified school counselor and has school and community counseling experience with adolescents and adults. She selected and adapted techniques using positive psychology interventions (Savage, 2011; Seligman, 2002) into an 11-week small group counseling experience. Each session lasted approximately 60 minutes with opportunities for participants to reflect on materials, collaborate with peers, and think about ways to apply what they learned to their personal circumstances.

Session one focused on building a strong therapeutic relationship and helping adolescents increase awareness of positive well-being. Sessions two and three focused on positive emotions about the past with techniques targeting gratitude. Sessions four through seven focused on helping adolescents develop positive emotions about the present. Common emotions included kindness, zest, joy, and flow; techniques focused on character strengths and acts of kindness. Sessions eight through eleven focused on positive emotions about the future, including optimism and hope. A sample activity included “writing about your best possible self” in which adolescents imagined their life in the future (King, 2001). All sessions involved interactive techniques and reflective exercises to help adolescents engage in emotional expression.

Procedure

The study implemented an A-B single-case research design to determine the effectiveness of a positive psychology intervention in a small group setting (Lundervold & Belwood, 2000; Sharpley, 2007) on increasing hope, life satisfaction, and self-compassion. Researchers (e.g., Lenz et al., 2012) have suggested that an A-B single-
case research design is a sound design to measure the effectiveness of an intervention. This design was selected given the limited time frame (11 weeks), thereby preventing the collection of follow-up data. Baseline measurements (A) during a two-week period before the intervention and repeated measurements of outcome variables (B) were collected. After two weeks of data collection, the baseline phase of data collection was completed. The treatment phase, which involved positive psychology group counseling sessions, began after the 3rd baseline measure where the first positive psychology group counseling session occurred. Following this, at the conclusion of each group counseling session, participants completed instruments on hope, satisfaction with life, and self-compassion. All instruments were collected and stored securely in the school counselor’s office. After the eleventh week of data collection, the treatment phase of data collection was completed. Starting the twelfth week, the positive psychology group counseling intervention was withdrawn because of forthcoming summer vacation.

**Data Analysis**

The percentage of data points exceeding the median procedure ([PEM], Ma, 2006) was implemented to analyze scores on hope, life satisfaction, and self-compassion across phases of treatment. Researchers (Lenz et al., 2012) have detected that the PEM procedure has potential to produce strong measures of treatment effect. The PEM procedure yields a percentage of data in the treatment phase that exceeds the median data point in the baseline phase (Renfro-Michel & Lenz, 2017). PEM calculations are expressed in a decimal format that ranges between zero and one with higher scores representing greater treatment effects (Lenz, 2013). To calculate the PEM statistic, data points in the treatment phase on the therapeutic side of the baseline are
counted and divided by the total number of points in the treatment phase (Renfro-Michel & Lenz, 2017). In the current study, since the intended change was an increase in hope, life satisfaction, and self-compassion, the total number of points in the treatment phase above the median baseline point were calculated and then divided by the total number of treatment points. Finally, an interpretation of effect size was conducted to determine the efficacy of the positive psychology intervention when comparing each phase of data collection (Sharpley, 2007). Scruggs and Mastropieri (1998) provided the following PEM values to estimate treatment effect: values of .90 and greater are indicative of very effective treatments; values ranging from .70 to .89 represent moderate effectiveness; values between .50 to .69 are debatably effective; and values less than .50 are regarded as not effective.

**Results**

Table 1 depicts estimates of treatment effect using PEM across all participants. Detailed description of participants’ experiences is provided below.

<table>
<thead>
<tr>
<th>Measures</th>
<th>Melissa (11)</th>
<th>Jennifer (11)</th>
<th>Alex (10)</th>
<th>Erica (9)</th>
<th>Fabian (10)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hope</td>
<td>1.00</td>
<td>0.82</td>
<td>0.80</td>
<td>0.89</td>
<td>0.00</td>
</tr>
<tr>
<td>Self-Compassion</td>
<td>0.90</td>
<td>0.90</td>
<td>0.10</td>
<td>0.22</td>
<td>0.00</td>
</tr>
<tr>
<td>Life Satisfaction</td>
<td>1.00</td>
<td>0.55</td>
<td>0.40</td>
<td>1.00</td>
<td>1.00</td>
</tr>
</tbody>
</table>

*Note.* Effect sizes of .90 and greater are indicative of very effective treatments, effect sizes ranging from .70 to .89 represent moderate effectiveness, effect sizes between .50 to .69 are debatably effective, and effect sizes less than .50 are regarded as not effective. Parentheses next to participant names indicate number of treatment sessions.
Participant 1

Findings from this study indicate that Melissa showed improvements in hope, life satisfaction, and self-compassion. Melissa’s ratings on the hope scale illustrate that the efficacy of a positive psychology intervention was very effective for improving her hope scale score. Evaluation of the PEM statistic for the hope score measure (1.00) indicated that all 11 scores were on the therapeutic side above the baseline. Melissa successfully improved her hope during treatment as evidenced by improved scores on items such as “I think I am doing pretty well,” “I am doing just as well as other kids my age,” and “When I have a problem, I can come up with lots of ways to solve it.” Scores above the PEM line were within an 8-point range. Trend analysis depicted a consistent level of improvement following the first treatment measure.

Melissa’s ratings on the life satisfaction scale illustrate that the efficacy of a positive psychology intervention was very effective for improving her life satisfaction score. Evaluation of the PEM statistic for the satisfaction with life score measure (1.00) indicated that all 11 scores were on the therapeutic side above the baseline. Melissa successfully increased her life satisfaction during treatment as evidenced by improved scores on items such as “My life is going well,” “I have a good life,” and “My life is just right.” Scores above the PEM line were within a 1-point range. Trend analysis depicted a consistent level of improvement following the first treatment measure.

Melissa’s ratings on the self-compassion scale illustrate that the efficacy of a positive psychology intervention was very effective for improving her self-compassion score. Evaluation of the PEM statistic for the self-compassion score measure (0.90) indicated that 10 out of 11 scores were on the therapeutic side above the baseline.
Melissa successfully improved her self-compassion during treatment as evidenced by improved scores on items such as “I try to be understanding and patient towards those aspects of my personality I don’t like” and “I try to see my failings as part of the human condition.” Scores above the PEM line were within a 4-point range. Trend analysis depicted a consistent level of improvement following the first treatment measure.

**Participant 2**

Findings from this study indicate that Jennifer showed improvements in hope, life satisfaction, and self-compassion. Jennifer’s ratings on the hope scale illustrate that the efficacy of a positive psychology intervention was very effective for improving her hope scale score. Evaluation of the PEM statistic for the hope score measure (.82) indicated that 9 out of 11 scores were on the therapeutic side above the baseline. Jennifer successfully improved her hope during treatment as evidenced by improved scores on items such as “I think I am doing pretty well,” “I am doing just as well as other kids my age,” and “When I have a problem, I can come up with lots of ways to solve it.” Scores above the PEM line were within a 11-point range. Trend analysis depicted a consistent level of improvement following the first treatment measure.

Jennifer’s ratings on the life satisfaction scale illustrate that the efficacy of a positive psychology intervention was debatably effective for her life satisfaction score. Evaluation of the PEM statistic for the life satisfaction measure (.55) indicated that all 6 out of 11 scores were on the therapeutic side above the baseline. Jennifer debatably increased her life satisfaction during treatment as evidenced by improved scores on items such as “My life is going well,” “I have a good life,” and “My life is just right.”
Scores above the PEM line were within a 1.3-point range. Trend analysis depicted a consistent level of improvement following the fifth treatment measure.

Jennifer’s ratings on the self-compassion scale illustrate that the efficacy of a positive psychology intervention was very effective for improving her self-compassion score. Evaluation of the PEM statistic for the self-compassion score measure (.90) indicated that 10 out of 11 scores were on the therapeutic side above the baseline. Jennifer successfully improved her self-compassion during treatment as evidenced by improved scores on items such as “I try to be understanding and patient towards those aspects of my personality I don’t like” and “I try to see my failings as part of the human condition.” Scores above the PEM line were within a 2-point range. Trend analysis depicted a consistent level of improvement following the first treatment measure.

Participant 3

Findings from this study indicate that Alex showed moderate improvements in hope and little improvements in life satisfaction and self-compassion. Alex’s ratings on the hope scale illustrate that the efficacy of a positive psychology intervention was moderately effective for improving his hope scale score. Evaluation of the PEM statistic for the hope score measure (.80) indicated that 8 out of 10 scores were on the therapeutic side above the baseline. Alex moderately improved his hope during treatment as evidenced by improved scores on items such as “I think I am doing pretty well,” “I am doing just as well as other kids my age,” and “When I have a problem, I can come up with lots of ways to solve it.” Scores above the PEM line were within a 9-point range. Trend analysis depicted a consistent level of improvement following the third treatment measure.
Alex’s ratings on the life satisfaction scale illustrate that the efficacy of a positive psychology intervention was not effective for his life satisfaction score. Evaluation of the PEM statistic for the life satisfaction measure (.40) indicated that 4 out of 10 scores were on the therapeutic side above the baseline. Scores above the PEM line were within a 1-point range. Trend analysis did not depict a consistent level of improvement following the first treatment measure.

Alex’s ratings on the self-compassion scale illustrate that the efficacy of a positive psychology intervention was not effective for improving his self-compassion score. Evaluation of the PEM statistic for the self-compassion score measure (.10) indicated that 1 out of 10 scores were on the therapeutic side above the baseline. Scores above the PEM line were within a 12-point range. Trend analysis did not depict a consistent level of improvement following the first treatment measure.

**Participant 4**

Findings from this study indicate that Erica showed improvements in hope and life satisfaction. Erica’s ratings on the hope scale illustrate that the efficacy of a positive psychology intervention was very effective for improving her hope scale score. Evaluation of the PEM statistic for the hope score measure (.89) indicated that 8 out of 9 scores were on the therapeutic side above the baseline. Erica successfully improved her hope during treatment as evidenced by improved scores on items such as “I think I am doing pretty well,” “I am doing just as well as other kids my age,” and “When I have a problem, I can come up with lots of ways to solve it.” Scores above the PEM line were within a 2-point range. Trend analysis depicted a consistent level of improvement following the first treatment measure.
Erica’s ratings on the life satisfaction scale illustrate that the efficacy of a positive psychology intervention was very effective for her life satisfaction score. Evaluation of the PEM statistic for the life satisfaction score measure (1.00) indicated that all 9 scores were on the therapeutic side above the baseline. Erica successfully increased her life satisfaction during treatment as evidenced by improved scores on items such as “My life is going well,” “I have a good life,” and “My life is just right.” Scores above the PEM line were within a 1-point range. Trend analysis depicted a consistent level of improvement following the first treatment measure.

Erica’s ratings on the self-compassion scale illustrate that the efficacy of a positive psychology intervention was not effective for improving her self-compassion score. Evaluation of the PEM statistic for the self-compassion score measure (.22) indicated that 2 out of 9 scores were on the therapeutic side above baseline. Trend analysis did not depict a consistent level of improvement following the first treatment measure.

**Participant 5**

Findings from this study indicate that Fabian showed improvements in life satisfaction. Fabian’s ratings on the hope scale illustrate that the efficacy of a positive psychology intervention was not effective for improving his hope scale score. Evaluation of the PEM statistic for the hope score measure (0) indicated that none of the 10 scores were on the therapeutic side above the baseline. Trend analysis did not depict a consistent level of improvement following the first treatment measure.

Fabian’s ratings on the life satisfaction scale illustrate that the efficacy of a positive psychology intervention was very effective for his life satisfaction score.
Evaluation of the PEM statistic for the life satisfaction score measure (1.00) indicated that all 10 scores were on the therapeutic side above the baseline. Fabian successfully increased his life satisfaction during treatment as evidenced by improved scores on items such as “My life is going well,” “I have a good life,” and “My life is just right.” Scores above the PEM line were within a 1-point range. Trend analysis depicted a consistent level of improvement following the first treatment measure.

Fabian’s ratings on the self-compassion scale illustrate that the efficacy of a positive psychology intervention was not effective for improving his self-compassion score. Evaluation of the PEM statistic for the self-compassion score measure (0) indicated that none of the 11 scores were on the therapeutic side above the baseline. Trend analysis did not depict a consistent level of improvement following the first treatment measure.

**Discussion**

The purpose of the present study was to examine the impact of a positive psychology intervention in a small group setting on Latina/o adolescents’ life satisfaction, hope, and self-compassion. Based on previous research, we developed the following hypotheses: (1) adolescents in a positive psychology group would report an increase in hope, (2) adolescents in a positive psychology would report an increase in life satisfaction, and (3) adolescents in a positive psychology would report an increase in self-compassion. Partial support for first hypothesis was detected given that most participants in the positive psychology group developed higher levels of hope. Because gratitude, meaning in life, and happiness are related to adolescents’ grit, life satisfaction, or hope (e.g., Vela et al., 2015; Vela, Sparrow, Ikonomopoulos, Gonzalez,
& Rodriguez, 2017), it would be reasonable to expect that helping Latina/o adolescents explore these concepts in a group setting could improve their beliefs to develop and pursue positive goals in the future. Previous correlational or predictive studies have identified relationships between some variables on hope (Hansen et al., 2014), yet little is known about the impact of treatment effects of specific interventions and techniques. Results of the current study extend knowledge from previous studies by highlighting the benefits of participation in a positive psychology group on Latina/o adolescents.

Our second hypothesis suggested that participants in the positive psychology group would report an increase in life satisfaction. Partial support for this hypothesis was found given that most participants in the positive psychology group reported an increase in life satisfaction over time. Because gratitude, meaning in life, and hope are related with life satisfaction (e.g., Vela et al., 2017), it would be reasonable to expect that helping Latina/o adolescents explore these concepts in a group setting could improve their perceptions of life satisfaction. Previous studies have highlighted correlational and predictive relationships between life satisfaction and well-being or academic achievement (Lyons & Huebner, 2016), yet little is known about the impact of interventions and treatment processes that target these outcomes. Results of this study extend findings from previous studies by demonstrating the impact of a positive psychology intervention on Latina/o adolescents.

Finally, our third hypothesis suggested that participants in the positive psychology group would report an increase in self-compassion. Minimal support for this hypothesis was found given that only two participants in the treatment group reported higher levels of self-compassion. One explanation for this finding is that the positive
psychology intervention targeted other variables such as gratitude, character strengths, and hope, which might not influence Latina/o adolescents’ self-compassion. Other interventions that target self-judgment vs. self-kindness, isolation vs. humanity, and over-identification vs. mindfulness might produce different results (Neff, 2003).

**Implications for Practice**

Based on findings from this study, there are several implications for school counselors, clinical mental health counselors, and counselor educators when working with Latina/o adolescents. Particularly for Latina/o adolescents who struggle with mental health and academic underachievement, school counselors can play an important role in addressing goals, needs, and expectations. First, school counselors can consider reaching out to Latina/o adolescents who might not seek guidance and help them identify and build positive emotions and strengths. School counselors can consider integrating the positive psychology intervention with Latina/o adolescents. Using the entire intervention or parts of intervention could increase Latina/o adolescents’ hope or life satisfaction. Informal conversations from participants in this study indicated that they enjoyed the gratitude, character strengths, and hope activities to foster positive emotions. Second, school counselors could work with teachers to implement positive psychology exercises into teaching practices. There is evidence to suggest that brief goal exercises can increase students’ hope (Feldman & Dreher, 2012). Teachers in writing or English courses could use parts of the positive psychology program and have students keep a gratitude or hope journal as part of course requirements. By integrating positive psychology into writing assignments, school counselors and teachers could
collaborate and provide Latina/o adolescents with opportunities to reflect and identify hope toward their future.

Counselor educators also could consider integrating positive psychology into curriculum to train future school counselors. Counselor educators could discuss the benefits of positive psychology with diverse populations in courses such as multicultural counseling, counseling theories, or counseling practicum. Consistent with Kolodinsky et al.’s (2014) findings that counselor educators want to train counseling students in positive psychology themes, including mindfulness, gratitude, and hope, counselor educators can consider integrating positive psychology principles and research-based practices into their curriculum. Finally, counselor educators and school counselors could partner to deliver psycho-educational presentations and workshops on positive psychology. Helping Latina/o adolescents understand the importance, benefits, and practice of positive psychology principles (Seligman, 2002) could foster positive outcomes as well as spark interest in group counseling opportunities.

**Implications for Research**

Findings from the current study point to the moderate impact of a positive psychology intervention on improving outcomes for Latina/o adolescents. Based on these findings, there are several implications for future research. First, researchers should replicate this study and use larger sample sizes or between-group designs to provide additional evidence for this intervention; more studies would help establish evidence-based implications. Second, it would be interesting to use qualitative methods to determine what specific parts of the positive psychology intervention helps Latina/o adolescents improve life satisfaction, hope, or self-compassion. Using personal
interviews and focus groups would provide insight and understanding into what
treatment components and processes within positive psychology helps Latina/o
adolescents. Third, researchers can conduct follow-up interviews or use an ABA single-
case research design with withdrawal measures to explore treatment gains beyond the
intervention period (Lenz, 2013). Finally, researchers could explore the impact of
positive psychology on other outcomes, including college self-efficacy, grit, resilience, or
sense of school belonging.

Limitations

There are several limitations that warrant consideration. First, results might not
generalize to other Latina/o adolescents in different academic or clinical settings.
Additionally, evidence suggests adolescents differ based on developmental levels,
therefore findings may not apply to Latina/o high school or college students. We also did
not use an ABA design with withdrawal measures (Lenz et al., 2012) that would have
provided stronger internal validity to measure the impact on life satisfaction, hope, and
self-compassion. Finally, although three baseline measures are considered sufficient in
single-case research designs (Lenz et al., 2012), utilizing four or five baseline measures
might have allowed life satisfaction, hope, and self-compassion scores to stabilize prior
to their positive psychology group counseling experience.

Conclusion

Using positive psychology to assist Latina/o adolescents in increasing hope and
life satisfaction could be considered by school counselors. Based on results of this
study, positive psychology in a small group setting shows promise as an effective
method for improving positive outcomes among Latina/o adolescents. We recommend
that researchers continue to examine the impact of positive psychology group counseling experiences with larger sample sizes, between-group designs, and different outcome variables to provide additional evidence. School counselors also can consider positive psychology techniques when implementing treatment approaches for Latina/o adolescents. Finally, school counselors can promote and use positive psychology, which have been shown to enhance Latina/o adolescents’ positive outcomes.
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Appendix

Figure 1. Graphical Representation of PEM Ratings for Hope.

Figure 2. Graphical Representation of PEM Ratings for Self-Compassion.
Figure 3. Graphical Representation of PEM Ratings for Life-Satisfaction.