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Prioritizing Positivity: An Effective Approach to Pursuing Happiness?

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Abstract

A decade of research reveals the benefits of positive emotions for mental and physical health; however, recent empirical work suggests the explicit pursuit of happiness may backfire. The present study hypothesized that the pursuit of happiness is not inherently self-defeating; in particular, individuals who seek positivity, as exemplified by how they make decisions about how to organize their day-to-day lives, may be happier. This individual difference is labeled prioritizing positivity. In a community sample of young to older adults (N = 233), prioritizing positivity predicted a host of well-being outcomes (positive emotions, depressive symptomology). In addition, people high in prioritizing positivity have greater resources, and these links are explained by more frequent experiences of positive emotions. In sum, the present study suggests that seeking happiness, although a delicate art, may be a worthwhile pursuit.

Keywords

happiness; positive emotions; well-being; emotion regulation

Does the pursuit of happiness lead to happiness, or does it backfire, ironically making people feel worse? Writers and philosophers have cautioned against the pursuit of happiness. For example, German philosopher Arthur Schopenhauer stated that a happy state such as joy "as a rule comes uninvited and unannounced, by itself and *san façon*" (Schopenhauer, 2001: p. 409).

However, virtually everyone, regardless of nationality, wants to be happy (Diener, Saptya, & Suh, 1998). People want to be happy, and a decade of research now reveals the benefits of happiness[1] for mental and physical health (for meta-analyses see Howell, Kern, &

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[1]Throughout this article, we interchangeably use the terms happiness and positive emotions.

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Lyubomirsky, 2007; Lyubomirsky, King, & Diener, 2005; Steptoe, Dockray, & Wardle, 2009). Among other things, positive emotions predict higher quality relationships, improved physical health, and better work performance (Lyubomirsky et al., 2005). The broaden-and-build theory of positive emotions posits that positive emotions actually cause these favorable outcomes via repeated experiences of broadened cognition (Fredrickson, 1998, 2013), and longitudinal field experiments offer initial empirical support (Fredrickson, Cohn, Coffey, Pek, & Finkel, 2008; Kok et al., 2013).

A Caution Against the Pursuit of Happiness

As a handful of studies have shown, the explicit pursuit of happiness is tricky. For instance, deliberately trying to maximize one's happiness in the moment may backfire. In one study, participants read one of two fabricated articles before watching a happy or sad film clip (Mauss, Tamir, Anderson, & Savino, 2011). Some participants read an article that described the benefits of being able to make oneself feel the "greatest amount of happiness" from moment to moment (with the idea experiencing high levels of happiness during the film clip was possible) or an article that did not mention happiness at all. Participants who tried to maximize their happiness actually felt worse, in comparison to the control group, after watching the positive film clip. Mediational analyses revealed that this decrement in mood was accounted for by feelings of disappointment and self-blame. This research suggests that trying to experience extreme levels of happiness in the moment, coupled with the idea it is possible, can indeed backfire. Furthermore, another study revealed that participants who simply monitored their happiness reported feeling less happy while listening to a piece of hedonically ambiguous music than those instructed just to listen to the music (Schooler, Ariely, & Loewenstein, 2003). Therefore, even without efforts to create happiness, the act of simply paying continuous attention to one's happiness may boomerang, leading to less happiness.

Beyond these experiments, recent individual difference research suggests that relating to one's happiness in an obsessive manner may chase happiness away. Specifically, participants who scored higher on excessively valuing happiness (e.g., "How happy I am at any given moment says a lot about how worthwhile my life is.") displayed poorer well-being (Mauss et al., 2011). Although this measure does not assess the pursuit of happiness per se, but rather how much happiness matters to individuals, it does suggest that putting too much emphasis on happiness can be harmful. In short, it is worthwhile to consider whether there may be an approach to pursuing happiness that allows people to reap the documented benefits of positivity without experiencing the costs of overemphasizing it.

A More Effective Way to Pursue Happiness?

Although existing empirical evidence suggests that pursuing positivity can make people feel worse, there is reason to believe this is not the whole story. Published research has only addressed the effects of deliberately (and ambitiously) trying to upregulate positivity during a pleasant experience, such as watching a film clip. This approach is an example of response modulation, one of the strategies featured in the process model of emotion regulation, which features the five different families of emotion regulation processes (Gross & Thompson,

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2007). One alternative approach would be to let go of maximizing positivity in the moment and instead maximize the likelihood of experiencing spontaneously generated positive emotions on a day-to-day basis. This approach draws upon a different emotion regulation strategy, namely situation selection, in which individuals seek out contexts that likely give rise to or prevent certain emotions (Gross & Thompson, 2007). We propose that people who pursue happiness by putting themselves in situations in which they are likely to experience happiness may thus reap incidental and life-sustaining rewards caused by the positive emotions they experience. The purpose of the current paper is to test the following question: In the context of everyday life, do people who regularly prioritize positivity, as exemplified by how they make decisions about how to organize their days, actually feel happier? We call this individual difference *prioritizing positivity*.

Some indirect empirical evidence supports the idea that prioritizing positivity is an effective approach to pursuing happiness. The integrative model of sustainable happiness (Lyubomirsky, Sheldon, & Schkade, 2005), in which a genetic set point, circumstances, and intentional activities make up a person's chronic level of happiness, suggests that engaging in pleasant activities may be the most effective route to increasing happiness. Indeed, the results of many positive psychology interventions provide evidence that engaging in certain activities may make a difference. Research on interventions, such as writing gratitude letters, engaging in acts of kindness, and learning how to meditate, reveals that incorporating pleasant activities into one's life reliably yields increases in happiness (for a review on positive interventions, see Parks & Biswas-Diener, in press). In addition, an effective strategy to increase positive affect among individuals suffering from depression is to schedule pleasant events, such as playing with pets, into everyday life (Lewinsohn, Sullivan, & Grosscup, 1980). In summary, there is reason to believe that people who seek positivity, by habitually taking into account their potential happiness when organizing their everyday lives, may be happier. To test this idea, we examined whether prioritizing positivity predicted beneficial features of well-being.

The Present Investigation

The purpose of this study was to test whether prioritizing positivity predicted better well-being. To that end, we first tested whether prioritizing positivity was associated with various well-being outcomes, ranging from more frequent positive emotions to fewer depressive symptoms. In addition, given that prioritizing positivity and valuing happiness to an extreme have some conceptual overlap, we examined the scales for prioritizing positivity and valuing happiness in tandem, hypothesizing that prioritizing positivity would predict better well-being whereas valuing happiness to an extreme would do the opposite. Moreover, assuming that prioritizing positivity was associated with more positive emotions, we hypothesized that, in accord with the broaden-and-build theory of positive emotions (Fredrickson, 1998, 2013), prioritizing positivity would also be linked to a host of psychological and social resources as mediated by positive emotionality. Resources help individuals successfully navigate through life, but they do not directly reflect emotionality. An example of a psychological resource is resilience, or the ability to bounce back from adversity, whereas a social resource is a supportive social network (Fredrickson, 2013). We tested whether prioritizing positivity predicted various resources (self-compassion, resilience, mindfulness,

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positive relations with others, and illness symptoms) and, if so, whether these links were mediated by more frequent experiences of positive emotions. In summary, this study tested three hypotheses:

Hypothesis 1: Prioritizing positivity will predict better well-being (more positive emotions, fewer negative emotions, more satisfaction with life, less depressive symptomology).

Hypothesis 2: When examined in tandem, prioritizing positivity and valuing happiness will yield opposing associations with well-being.

Hypothesis 3: Prioritizing positivity will predict higher levels of various personal and social resources as mediated by more frequent experiences of positive emotions.

Method

Participants

The sample consisted of 235 community-dwelling adults who responded to a request to participate in a research project on everyday events. Participants in this sample were specifically recruited to represent young adulthood (age 21–34 years, $n = 99$), middle adulthood (age 35–64 years, $n = 101$), and later adulthood (age *65 years, $n = 35$). We used a two-phase instruction check designed to verify that participants were reading and attending to study instructions (Oppenheimer, Meyvis, & Davidenko, 2009). If participants failed the first time, then they were given a second chance to pass the check. Two participants failed the two-phase check and were omitted, resulting in a final sample of 233. Approximately 76% of the sample ($n = 177$) was female. The racial make-up of the sample was White ($n = 189$), African American ($n = 19$), Asian ($n = 18$), and other ($n = 4$). Three individuals did not report their race.

Procedure

Participants were recruited via a university-wide e-mail, Craigslist, and referrals from friends or relatives, and they completed a series of online surveys in exchange for $20.00.

Materials

Prioritizing positivity and valuing happiness

Prioritizing positivity: Because no measure of prioritizing positivity existed, we developed a measure to capture the extent to which people seek out positive emotional experiences when making decisions about how to organize day-to-day life. In a preliminary online study ($n = 187$, 74% female, 71% White, mean age = 19 years, $SD = 3.12$), participants indicated their agreement or disagreement on a 9-point scale (1 = *disagree strongly*, 9 = *agree strongly*) to seven prioritizing positivity items created by our research team, in addition to other questionnaires. We conducted an exploratory factor analysis to identify common factors among the seven items. Because four of the items were negatively skewed, the items were transformed by taking their square root (Kline, 1998). After removing one of the items because it created problems for model estimation,[2] the scree plot for the remaining six items suggested a one-factor solution. The largest eigenvalue was 3.02; the second-largest was

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0.90. Omnibus tests of model fit indicated that a one-factor model[3] produced an acceptable fit for the data (root mean square error of approximately [RMSEA] = 0.068, 90% confidence interval [CI] = 0.00–0.12, confirmatory fit index [CFI] = 0.97, $\chi^2 = 16.8$, $df = 9$, $p = .05$). Factor loadings for the one-factor model ranged from 0.45 to 0.76. Cronbach's α coefficient in this preliminary study was 0.78. In the current sample, we tested our six-item, single-factor model. The model produced a good fit for the data, with a RMSEA of 0.04 (90% CI [0.00–0.09], CFI = 0.99). Standardized factor loadings ranged from 0.57 to 0.79. Cronbach's α coefficient for this sample was 0.81. Item means, standard deviations, and standardized factor loading for the six-item, single-factor version of the measure for both samples are presented in Table 1.

Valuing happiness: The Valuing Happiness scale measures the tendency to value happiness to an extreme degree (Mauss et al., 2011). Participants indicated their agreement or disagreement on a 7-point scale (1 = *strongly disagree*, 7 = *strongly agree*) with seven items, including "How happy I am at any given moment says a lot about how worthwhile my life is," "If I don't feel happy, maybe there is something wrong with me," "I value things in life only to the extent that they influence my personal happiness," "I would like to be happier than I generally am," "Feeling happy is extremely important to me," "I am concerned about my happiness even when I feel happy," and "To have a meaningful life, I need to feel happy most of the time" (α = 0.74).

Well-being scales

Modified Differential Emotions Scale: The modified Differential Emotions Scale (mDES) measured the frequency with which people experienced positive and negative emotions over the past 2 weeks (Fredrickson, 2013; Fredrickson, Tugade, Waugh, & Larkin, 2003). Participants indicated their frequency of experience on a 5-point scale (0 = *not at all*, 4 = *most of the time*) for 10 positive emotions, including amusement, awe, contentment, gratitude, hope, inspiration, interest, joy, love, and pride (α = 0.93), and nine negative emotions, including anger, shame, fear, disgust, embarrassment, guilt, sadness, contempt, and stress (α = 0.90).

Satisfaction With Life Scale: The Satisfaction With Life Scale (SWLS) measures the extent to which people judge their lives to be satisfactory (Diener, Emmons, Larsen, & Griffin, 1985). Participants indicated their agreement or disagreement on a 7-point scale (1 = *strongly disagree*, 7 = *strongly agree*) with five items, including "The conditions of my life are excellent" and "I am satisfied with my life" (α = 0.91).

[2]The item that created problems for model estimation was "What I decide to do next at work is influenced by how much I might experience positive emotions." These problems varied by rotation method but included negative residual variance for this item (Quartimin, Oblimin, and Crawfer rotations) and lack of rotation identification (Geomin rotation). We reasoned that this item was sufficiently extreme that it might be influenced by factors unrelated to our construct of interest, such as how flexibly the respondent's work could be structured, personal work ethic, etc. Accordingly, we removed this item and reran the exploratory factor analysis. This adjustment resolved the model estimation difficulties.

[3]The two-factor model fit better (RMSEA = 0.00, 90% CI [0.00–0.07], CFI = 1.00); however, this model produced an uninterpretable pattern of factor loadings, in which three items loaded weakly and equivalently on both factors, two remaining items loaded strongly on the first factor, and the third remaining item loaded strongly on the second factor. This pattern of factor loadings was not consistent with theory; we suspected that the second model was overfitting the model to the data and exploiting unique features of the sample to produce good model fit (Hawkins, 2004). Accordingly, we selected the one-factor solution for our data.

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Center for Epidemiological Studies–Depression: The Center for Epidemiological Studies–Depression (CES-D) measures depressive symptoms (Radloff, 1977). Participants indicated the frequency with which they experienced various depressive symptoms during the past week on a 4-point scale (0 = *rarely or none of the time—less than 1 day*, 3 = *all of the time—5–7 days*) with 20 items, including "I couldn't get going" and "I felt depressed" (α = 0.91).

Resources

Self-compassion: The Self-Compassion scale measures the tendency to be compassionate toward the self (Neff, 2003). Twenty-six items assessed three aspects of self-compassion: self-kindness (e.g., "I try to be loving toward myself when I'm feeling emotional pain"), mindfulness (e.g., "When something painful happens I try to take a balanced view of the situation"), and common humanity (e.g., "When I'm down and out, I remind myself that there are lots of other people in the world feeling like I am"). Participants indicated the frequency with which they engage in self-compassion on a 5-point scale (1 = *almost never*, 5 = *almost always*). We computed the mean of all 26 items (α = 0.94) to represent overall self-compassion.

Ego-resilience: The Ego-Resilience scale measures the tendency to adapt to continual shifts in the environment and bounce back from adversity (Block & Kremen, 1996). Participants indicated on a 4-point scale (1 = *does not apply at all*, 4 = *applies very strongly*) the extent to which 14 items apply to them, including "I enjoy dealing with new and unusual situations" and "I get over my anger at someone reasonably quickly" (α = 0.80).

Carolina Empirically-Derived Mindfulness Inventory: The Carolina Empirically-Derived Mindfulness Inventory (CEDMI) measures the tendency to be mindful, or present-focused, in a nonjudgmental, accepting manner (Coffey, Hartman, & Fredrickson, 2010) with items drawn from the Five Factor Mindfulness Questionnaire (Baer, Smith, Hopkins, Krietemeyer, & Toney, 2006) and the Difficulties in Emotion Regulation Scale (Gratz & Roemer, 2004). Participants indicated their agreement or disagreement on 5-point scale from 1 (*never or very rarely true*) to 5 (*very often or always true*) with eight items representing present-centered attention (e.g., "When I take a shower or bath, I stay alert to the sensations of water on my body"; α = 0.85) and 14 items representing an accepting orientation toward experience (e.g., "When I'm upset, I become angry with myself for feeling that way" [reverse-coded]; α = 0.94).

Positive Relations With Others: This subscale is drawn from the Psychological Well-Being scale and assesses the presence of satisfying, interpersonal connections (Ryff, 1989). Participants indicated their agreement or disagreement on a 5-point scale from 1 (*strongly disagree*) to 5 (*strongly agree*) with seven items, including "I know that I can trust my friends, and they know they can trust me" (α = 0.83).

Illness Symptoms: This self-report scale measures 13 symptoms of poor health, including headaches, stiff muscles, nausea, and coughing (Elliot & Sheldon, 1998). Participants used a

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9-point scale from 0 (*not at all*) to 8 (*very frequently*) to report the frequency of each symptom experienced over the past 2 weeks ($\alpha = 0.85$).

Results

Does Prioritizing Positivity Predict Well-Being?

To examine the first hypothesis that prioritizing positivity predicts better well-being, we conducted a series of regression models in which prioritizing positivity predicted four markers of well-being (positive emotions, negative emotions, satisfaction with life, depressive symptomology). Prioritizing positivity[4] was not significantly associated with age ($b^* = -.06$, $b = -.73$, $p = .37$), and there was a modest association with gender ($^*b = -.17$, $b = -.52$, $p < .01$), such that women scored higher on prioritizing positivity. When including gender as a covariate, the results were negligibly different; therefore, we removed this variable from the final presentation of analyses. Results are presented in Table 2. Because depression was moderately skewed, we applied a square root transformation. As expected, prioritizing positivity[5] was positively associated with beneficial features of well-being[6,7](positive emotions, satisfaction with life) and inversely associated with negative aspects of well-being (negative emotions, depression). A visual inspection of each of the scatterplots revealed the effects were linear. Consistent with this interpretation, when we reran each of the models, including a quadratic effect of prioritizing positivity on well-being, the term was never significant.

Do Prioritizing Positivity and Valuing Happiness Yield Opposing Associations With Well-Being?

Replicating some previous research (e.g., Mauss et al., 2011), the present study found that valuing happiness was inversely associated with beneficial features of well-being (positive emotions, satisfaction with life) and positively associated with negative aspects of well-being (negative emotions, depression). To examine the second hypothesis that prioritizing positivity and valuing happiness would have opposing relationships with well-being when examined in tandem, we conducted a series of multiple regression models. The outcome variable was each respective well-being indicator, and the predictor variables were prioritizing positivity and valuing happiness. Prioritizing positivity and valuing happiness were positively correlated, $r = .25$, $p < .001$. As the fourth and fifth columns of Table 2 reveal, when prioritizing positivity and valuing happiness are simultaneously included as predictors of well-being, the positive associations between prioritizing positivity and well-being remain and are even enhanced, as are the negative associations between valuing

[4]Prioritizing positivity was relatively normally distributed, but it is possible that in other samples, this may not be the case, and a statistical transformation may be appropriate.

[5]Because some may argue the item "I admire people who make their decisions based on the happiness they will gain" does not directly assess an individual's personal tendency to seek positivity, we reran the analyses without this item. The results remained the same.

[6]We also examined whether prioritizing positivity was associated with flourishing, a measure that largely reflects a eudemonic conception of well-being but also incorporates hedonic elements (Keyes, 2009). We found that that prioritizing positivity was positively associated with flourishing ($b^* = .38$, $b = .28$, $p < .001$).

[7]We tested whether the links between prioritizing positivity and well-being were moderated by gender or age. We discovered no evidence of moderation, except for the interaction between prioritizing positivity and gender on negative emotionality ($b = -.16$, $p < .05$). The association between prioritizing positivity and negative emotionality was significant for males ($b = -.21$, $p < .05$) whereas for females it was not ($b = -.05$, $p = .15$).

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happiness and well-being. These results suggest that prioritizing positivity, although chiefly a positive trait, may have a bit of a "dark side" that is captured by its shared variance with the valuing happiness measure. When this dark side is partialed out, our scale even more strongly reveals the potential benefit of making positivity a priority. Likewise, valuing happiness may have a bit of an "upside" that is captured by its shared variance with the prioritizing positivity measure, and when this upside is partialed out, the scale created by Mauss and colleagues (2011) even more strongly reveals the potential harm of excessively valuing positivity.

Do Positive Emotions Mediate the Link Between Prioritizing Positivity and Resources?

Given the link between prioritizing positivity and more frequent positive emotions, we hypothesized that prioritizing positivity would predict resources and that positive emotions would mediate these relations. Although the current study was cross-sectional by design, we tested this third hypothesis by first examining whether prioritizing positivity predicted resources. Illness symptoms were moderately skewed; therefore, we applied a square root transformation. As Table 3 reveals, five separate regression models indicated that prioritizing positivity significantly predicted higher self-compassion, resilience, mindfulness, and positive relations with others, but not fewer illness symptoms, although a trend existed. Second, as reported above, prioritizing positivity significantly predicted more positive emotions ($b^* = .44$, $b = .22$, $p < .001$). Third, we tested whether the effect of prioritizing positivity on each resource was significantly mediated by its effect on positive emotions using a bootstrapping approach with a resampling size of 5,000 (Preacher & Hayes, 2008). As Table 3 reveals, positive emotions significantly mediated the relation between prioritizing positivity and four of the five resources assessed (i.e., self-compassion, resilience, mindfulness, and positive relations with others). In particular, there was evidence for full mediation for self-compassion and mindfulness and partial mediation for ego-resilience and positive relations with others. Positive emotions did not mediate the relation between prioritizing positivity and illness symptoms. We ran two sets of alternative models[8] and found evidence that other causal sequences may exist, although the causal sequence hypothesized is the only one that is theoretically grounded, and that yielded full mediation (as found for self-compassion and mindfulness).

Discussion

The present study investigated whether people pursue happiness in at least one way that might actually positively predict happiness rather than backfire. To that end, we introduced a new individual difference that we term *prioritizing positivity*. Prioritizing positivity reflects the extent to which individuals seek out positivity by virtue of how they make decisions about how to organize their day-to-day lives. Critically, prioritizing positivity was associated with a host of beneficial well-being indicators, ranging from more frequent positive emotions to less depressive symptomology. Furthermore, people high in prioritizing

[8]We ran two sets of alternative causal models. In the first set of alternative models, we found significant, partial mediation for the link between prioritizing positivity and positive emotions as mediated by each resource (self-compassion, resilience, mindfulness, and positive relations with others). In the second set of alternative models, we also found significant, partial mediation for the links between positive emotions and the resources ego-resilience and positive relations with others as mediated by prioritizing positivity. No evidence of mediation existed for the models featuring the resources self-compassion and mindfulness.

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positivity may be at an advantage with respect to greater resources, such as self-compassion and ego-resilience, and these links are explained by their more frequent experiences of positive emotions.

To the best of our knowledge, these findings are the first to suggest that people who regularly seek out positivity as they arrange their everyday lives may be happier. This research indicates that one element of effectively pursuing happiness may involve situation-selection, a component of Gross' process model of emotion regulation (Gross & Thompson, 2007). Many items on the scale (e.g., "What I decide to do with my time outside of work is influenced by how much I might experience positive emotions.") tap into how individuals structure their time or make choices (e.g., career selection) that have far-reaching implications for the situations they encounter. In turn, astute situation-selection may lead to a greater likelihood of experiencing positive emotions. The utility of engaging in pleasant activities to increase happiness resonates with others' speculations about potential ways to seek happiness (Ford & Mauss, 2014; Gruber, Mauss, & Tamir, 2011; Kesebir, & Diener, 2008), and the evidence reported here suggests that habitually using anticipated positivity as a touchstone for major and minor life choices is linked to greater well-being. Thus, when it comes to designing the structure of everyday life, people high in prioritizing positivity may be particularly good "architects."

Although the present study suggests that people who prioritize and seek out positive emotional experiences tend to be happier, it would be misleading not to acknowledge that the pursuit of happiness appears to be a delicate art. Even before the actual pursuit begins, when people relate to their happiness in an obsessive way—constantly concerned about their emotional state—happiness appears to plummet (Ford & Mauss, 2014; Mauss et al., 2011). Furthermore, when people try to feel happier in the moment within positive contexts, with high standards in mind, this may also give rise to unhappiness (Mauss et al., 2011).

The pursuit of happiness is complex because there appear to be effective and ineffective ways of doing it. This notion that it is not what you do, but the way that you do it, resonates with other research in positive psychology. For instance, replaying a positive life event in one's mind predicts greater well-being whereas analyzing a positive life event does the reverse (Lyubomirsky, Sousa, Dickerhoof, 2006). Thus, the act of processing a positive event is not inherently beneficial or detrimental to one's well-being; there are just more and less effective ways of doing it. Another example is the distinction between harmonious and obsessive passions (Vallerand et al., 2003). Both types of passions are highly enjoyable, but one is intrinsically motivated (harmonious passion) whereas the other is less so (obsessive passion). With this twist, having an obsessive passion has ironically been found to add more negativity to people's lives.

One boundary condition of prioritizing positivity may be that people may not always accurately predict which activities will result in happiness. For instance, individuals who decide to spend their time acquiring the latest fashions may not actually experience more happiness. However, generally speaking, people know which activities produce positive emotions and which do not, although they may not always be accurate about the intensity or the duration of these emotional experiences (Wilson & Gilbert, 2005). Indeed, Wilson and

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Gilbert state, “humans are adept at predicting whether events are likely to be pleasant or unpleasant. Even a rat can readily learn that pressing one bar will produce a food pellet and another an electric shock and will vote with its paws for the more pleasant option. People know that a root beer will be more pleasant than a root canal.” (p. 131).

An important next step in this research is to understand how prioritizing positivity manifests in daily life. Perhaps people high on prioritizing positivity reserve Saturday afternoons for watching college football or taking their family to a local park. Maybe others start their weekdays running or drinking tea while reading the *New York Times*. Some people may consistently seek out activities that elicit calm and contentment whereas others may seek out excitement and vigor. The exact behaviors or choices may differ drastically from one person to the next, and it will be important to understand which concrete activities best bridge prioritizing positivity to well-being. For instance, seeking out pleasant, social events may be more predictive of well-being than pleasant, solo events. Further, designing a life to include frequent experiences of contentment may be more achievable than designing a life around excitement. These research questions reflect important next steps.

In addition, it would be interesting to investigate the precursors of prioritizing positivity. Do some cultural, or even biological, factors support prioritizing positivity more than others? Furthermore, do certain life experiences make an individual higher in this individual difference? For instance, might a prior episode of depression, a brush with mortality, or potent experiences of positivity motivate an individual to design a life in which potential happiness is a high-priority consideration? Further, might reading about the known benefits of positive emotions be enough to shift a person’s level of prioritizing positivity? This last question raises the idea that prioritizing positivity could be translated into an intervention to increase well-being or is one way self-help works when it does. This study demonstrates that people who already seek out positive emotional experiences are happier, but the cross-sectional nature of this study limits our ability to make causal inferences. Thus, it remains to be seen whether this individual difference could be adopted by anyone and similarly operate.

Conclusion

This study began by asking whether the pursuit of happiness actually leads to happiness, or whether it backfires, ironically making people feel worse. The answer to this question appears to be “it depends.” This article suggests there may be at least one way people successfully pursue happiness—by prioritizing positivity. In contrast to the available literature, the present study suggests that seeking happiness is not inherently self-defeating, and although a delicate art, it may be a worthwhile pursuit.

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Table 1

Prioritizing Positivity Item Means, Standard Deviations, and Factor Loadings

	Sample 1			Sample 2		
Prioritizing positivity item	**Mean**	***SD***	**Standardized factor loading**	**Mean**	***SD***	**Standardized factor loading**
A priority for me is experiencing happiness in everyday life.	7.2	1.6	0.76	7.3	1.6	0.79
I look for and nurture my positive emotions.	7.5	1.3	0.68	6.9	1.7	0.73
What I decide to do with my time outside of work is influenced by how much I might experience positive emotions.	7.5	1.3	0.66	6.6	2.1	0.62
I structure my day to maximize my happiness.	5.4	1.8	0.64	5.6	2.1	0.60
My major decisions in life (e.g., the job I choose, the house I buy) are influenced by how much I might experience positive emotions.	7.0	1.5	0.61	6.9	1.8	0.62
I admire people who make their decisions based on the happiness they will gain.	6.3	1.9	0.45	5.9	2.0	0.57

Note. Means and standard deviations are provided for the untransformed variables; standardized factor loadings are for the transformed variables. Participants were provided with the following instructions: We consider positive emotions to include amusement, awe, excitement, gratitude, hope, interest, joy, love, pride, pride, serenity, and contentment. Using the scale below, please select a response from 1 to 9.

The response scale was 1 = *disagree strongly*, 2 = *disagree mostly*, 3 = *disagree somewhat*, 4 = *disagree slightly*, 5 = *neither disagree or agree*, 6 = *agree slightly*, 7 = *agree somewhat*, 8 = *agree mostly*, 9 = *agree strongly.*

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Table 2

Standardized Coefficients for Regression of Well-Being Measures on Prioritizing Positivity and Valuing Happiness

Well-Being Measure	Prioritizing positivity	Valuing happiness	Prioritizing positivity (Controlling for valuing happiness)	Valuing happiness (Controlling for prioritizing positivity)
mDES Positive Emotions	.44***	−.15*	.51***	−.27***
mDES Negative Emotions	−.18**	.22**	−.25***	.28***
Satisfaction with Life	.36***	−.23***	.45***	−.34***
CES-D	−.27***	.30***	−.37***	.40***

Note. mDES = modified Differential Emotions Scale; CES-D = Center for Epidemiological Studies-Depression.

* $p < .05$.

** $p < .01$.

*** $p < .001$.

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Table 3

Prioritizing Positivity Predicts Resources As Mediated by Positive Emotions

Resources	Prioritizing positivity	Prioritizing Positivity with Positive Emotions in Model	Indirect effect	95% CI
Self-Compassion	.12***	0.02	0.10	[.07–.15]
Ego-Resilience	.11***	.05**	0.06	[.03–.09]
CEDMI	.09**	.01	0.08	[.05–.12]
Positive Relations with Others	.18***	.07*	0.11	[.07–.17]
Illness Symptoms	−.04	−.02	—	—

Note. CEDMI = Carolina Empirically-Derived Mindfulness Inventory.

* $p < .05$.

** $p < .01$.

*** $p < .001$.

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