



Understanding the Happiness Route;

A qualitative study about effective factors during the positive psychological intervention the Happiness Route



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Abstract

The Happiness Route is an intervention, based on the positive psychology, for people with risk factors for low well-being, i.e. health impairments, social isolation and a low socioeconomic status. These participants get a one-time-only amount of €500 for an activity to promote their well-being which is intrinsically motivated. A counsellor visits and supports them. This study is connected to a large randomized controlled trial. The study made use of the opinion of the participants of the Happiness Route and gives answer to the question: *What are the effective elements to increase well-being by participants of the Happiness Route?* Eighteen participants were selected who completed the Happiness Route between October 2013 and March 2015. These participants participated in an interview about their experiences of the Happiness Route. In the interview participants were asked about life before and after the Happiness Route, the chosen activity, important moments and changes in competence, autonomy and relatedness. The interviews were analysed with Atlas.ti. Five effective elements were indicated; the activity, the counsellor, improvement in life, social contacts and spending money. These five elements have seventeen sub-elements. These sub-elements indicate the reason for the effectiveness of the main element. The base effective elements are the activity and the counsellor which fulfil the self-determination theory. These elements activate the other three elements. On top of that, a relation is found between sub-elements. One of the correlated sub-elements is counsellor; good help/ Time spent and improvement in life; activation. Another of the correlated sub-elements is counsellor; click and improvement in life; nudging/freedom. It can be concluded that these five elements are important to improve the well-being of the participants.

Samenvatting

De Geluksroute is een interventie gebaseerd op de positieve psychologie. Eenzame, chronisch zieke volwassenen met een laag sociaaleconomische status, krijgen eenmalig een bedrag van €500 om te besteden aan een activiteit die hun welbevinden zou verhogen. Ze krijgen meerdere bezoeken van een consulent om hen te begeleiden bij dit keuzeproses. Dit onderzoek is aangesloten bij een groot gerandomiseerd onderzoek. Deze studie richt zich op de effectieve elementen van de Geluksroute. De vraag die centraal staat is: *Wat zijn effectieve factoren voor het verhogen van het welbevinden bij deelnemers van de Geluksroute?* Belangrijk is dat deze studie zich richt op de visie van de deelnemers. Er zijn achttien deelnemers geselecteerd die de Geluksroute hebben afgerond tussen oktober 2013 en maart 2015. Deze deelnemers hebben deelgenomen aan een interview over hun bevindingen met de Geluksroute. Dit interview bevat vragen over het leven voor en na de Geluksroute, de gekozen activiteit, belangrijke momenten en verandering op gebieden van autonomie, sterke kanten en sociale contacten. De interviews zijn geanalyseerd met behulp van Atlas.ti. Er zijn vijf elementen effectief gebleken, namelijk activiteit, consulent, verbetering in het leven, sociale contacten en besteding van het geld. Deze vijf elementen hebben zeventien sub-elementen die de reden aangeven voor de effectiviteit van het hoofdelement. De basis effectieve elementen zijn de activiteit en de consulent. Deze elementen vervullen de zelfdeterminatie theorie. Door deze elementen worden de andere elementen in werking gezet. Daarnaast is er een relatie gevonden tussen sub-elementen. Deze relatie bestaat tussen consulent; goed geholpen/tijd besteed en verbetering in het leven; activatie. Ook bestaat er een relatie tussen consulent; klik en verbetering in het leven; nudging/vrijheid. Er kan worden geconcludeerd dat deze vijf elementen een belangrijke rol spelen in het verhogen van het welbevinden van de deelnemers.

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Introduction

Meet Coby

Meet a woman named Coby, she is in her sixties and lives in a small town in the Netherlands. Coby is divorced and has four children. She only has contact with her youngest daughter, who drops by with the grandchildren every week. She lives in a nice apartment with a lot of stores outside and a large public garden close by. Unfortunately, Coby is never able to enjoy the large public garden or the stores outside. She has two chronic diseases named fibromyalgia and osteoarthritis and she cannot go outside a lot. She does not have a lot of contact with her neighbours. Coby has clearly been isolated. On top of that, she has financial issues and does not have a lot of money to spend. Fortunately in this case, the social isolation is history. Coby has participated in the Happiness Route and has become more active. She got a membership for public transport so she can visit her sister now. She also has a bike and enrolled in a painting course. Coby goes outside more often and goes for a walk almost every day. The Happiness Route has given her new opportunities.

The Happiness Route

The Happiness Route is an intervention for people with risk factors for low well-being, i.e. health impairments, social isolation and a low socioeconomic status (Weiss, Westerhof & Bohlmeijer 2013; Francissen, Wezenberg & Westerhof, 2010). The intervention has the intention to improve well-being by doing activities which are intrinsic motivated. A counsellor is educated with methods from positive psychology to help the participant to discover an intrinsic motivated activity. To be able to afford the activities, people get an amount of €500 once, based on the principle of nudging. Nudging means to give people a little push in to the 'right' direction (Thaler & Sunstein, 2008). As described in Weiss et al., (2013) there is a randomized controlled trial for the evaluation of the Happiness Route in progress. They hypothesize an increase of emotional, social and psychological well-being of participants of the Happiness Route in comparison to the traditional and common-used problem-based approach. The participants in the experimental condition get the Happiness Route, The participants in the control condition get common-used problem-based care, which means they will have a few conversations about their problems with a counsellor.

The Happiness Route is an example of a positive psychological intervention. Positive psychology provides the opportunity to develop interventions which focus on the promotion of happiness, self-realization and social integration (Westerhof & Bohlmeijer, 2010, p.260). Positive psychology does not have one theory which can explain each element of the positive

psychology. It is an approach which states to research positive qualities of human instead of only researching diseases and negative qualities, founded in 2000 (Westerhof & Bohlmeijer, 2010, p261.) There are a lot of themes within the positive psychology like bravery, optimism, hope, healthy lifestyle, goals, wisdom, forgiveness, worth, emotional intelligence, gratitude, curiosity, posttraumatic growth, creativity, purpose and social participation (Westerhof & Bohlmeijer, 2010, p261). The applied positive psychology means the application of positive psychology research to the facilitation of optimal functioning (Liney & Joseph, 2004, p4.). The applied positive psychology is focused on promoting happiness (Westerhof & Bohlmeijer, 2010, p261). This makes the Happiness Route a typical positive psychological intervention, which may contribute to funding the new approach to positive psychology.

The Happiness Route is based on different theories from psychology. One of the principles is intrinsic motivation. Motivation concerns energy, direction, persistence and an open state of mind which are aspects of intention and activation (Ryan & Deci, 2000). Intrinsic motivation is authentic motivation. It means a person does not perform something to receive a reward or avoid a punishment, but does something because the person is motivated to do it. Research shows people with intrinsic motivation, have more interest, excitement and confidence compared to people with externally controlled motivation. This results in enhanced performance, persistence, creativity, heightened vitality, self-esteem and general well-being (Ryan & Deci, 2000; Sheldon, Ryan, Rawsthorne & Ilardi, 1997; Nix, Ryan, Manly & Deci, 1999; Ryan, Deci & Grolnick, 1995). Also, research reveals that tangible rewards, threats, deadlines, directives, pressured evaluations and imposed goals diminish intrinsic motivation. In contrast, choice, acknowledgment of feelings and opportunities for self-direction enhance intrinsic motivation (Ryan & Deci, 2000). This gives people a bigger feeling of autonomy, which is the reason for the growth of intrinsic motivation. Research shows autonomically supportive students catalyse a greater intrinsic motivation, curiosity and desire for challenge than students who had less autonomy during the tests of this research (Ryan & Deci, 2000). The research of Cini, Kruger and Ellis (2013) shows that visitors of a National Park who are intrinsic motivated, have higher life levels of satisfaction, more positive feelings and fewer negative feelings in contrast with visitors of the same park who are external motivated,. The intrinsic visitors show more well-being (Cini, et al., 2013). From the studies described above can be concluded that intrinsic motivation is important for well-being.

The Happiness Route distinguishes three variants of well-being, i.e. emotional, social and psychological well-being. This together comprises general well-being, which can promote health. The review of Pressman and Cohen (2006) shows that emotional well-being can promote

health. Emotional well-being means the presence of positive affect and the absence of negative affect (Westerhof & Bohlmeijer, 2010). Not only emotional well-being can promote health: the research of Yip, Subramanian, Mitchell, Lee, Wang and Kawachi (2007) shows the social aspects of social well-being, like trust and being part of the community, can promote health as well. Based on this research, it can be concluded that social well-being can also promote health. The longitudinal research of Mechanic and Hansell (1987) shows that psychological well-being influences health as well. Psychological well-being means self-realisation, a positive functioning in individual life (World Health Organisation, 2005). Students with a greater psychological well-being show a better health. Related to the Happiness Route, this indicates that finding activities which are intrinsic motivated by the participants, can increase well-being, which can in turn promote health.

An important theory about motivation and achieving goals is the self-determination theory (Bohlmeijer, Bolier, Steeneveld, Westerhof & Walburg, 2013, p23). This theory states people have three psychological needs for motivation. For facilitating optimal functioning, growth, constructive social development and personal well-being, there is a need for competence, relatedness and autonomy (Ryan & Deci, 2000; Schreurs & Westerhof, 2013, p.78). Need for competence comprises feeling and seeing possibilities to complete something, for example a task or a command for work. Need for relatedness means people need to feel commitment with other people. Need for autonomy provides insight a human needs to feel responsibility and take care of decisions in their own life. (Schreurs & Westerhof, 2013, p 78.; Black & Deci, 2000).

Another theory of the Happiness Route is nudging. Nudging means to give people a little push in to the 'right' direction (Thaler & Sunstein, 2008). People need this little push because most benefits of activities they are supposed to undertake, take place in the future (Thaler & Sunstein, 2008). The costs of the activities are a present problem, which makes carrying out the activity difficult. Nudging can help to still go through with the activity. The principle of nudging is used extensively in research for healthy food and choices. Research shows nudging can facilitate in decision-making for healthy food. The research of Keller, Markert and Bucher (2015) shows people more often choose a low-calorie bar when it is presented in the middle, instead of the left or right side. Nudging can help people making decisions. The Happiness Route uses nudging to let the participants become acquainted with their opportunities to promote their well-being and health. Therefore participants receive a budget once to afford the intrinsic motivated activity (Weiss, et al., 2013).

Limitations of earlier studies and description of the current study

Intrinsic motivated activities can improve well-being, with a little help of nudging. The study of Weiss, et al., (2013) has the purpose to scientifically examine the effectiveness of the Happiness Route. With a randomized sample they research if the Happiness Route can increase social, emotional and psychological well-being, with intrinsic motivated activities, a budget and guidance from a counsellor. An increase of subjective well-being has a lot of benefits, which can be seen in the review of Diener and Ryan (2009). High levels of well-being are beneficial to effective functioning, health and longevity, work and income, social relations and societal benefits (Diener & Ryan, 2009). However, there is not much information on the *how* of this mechanism. There are studies that prove intrinsic motivated activities can improve well-being, but there are not any studies that examine what makes that this activities will improve well-being. The Happiness Route has a lot of little interventions for the participants. The participants are getting a counsellor who advises and comes around, they are going to do an activity they are intrinsic motivated to, they get a budget and they are getting to know new people during the activity. For the participants this all could be reasons to increase well-being. However, what mechanisms make the Happiness Route effective? Which of the elements makes the Happiness Route effective? These are interesting questions for this study. This study focuses on the effective elements of the Happiness Route. Therefore, this study is implemented within the study of effectiveness of the Happiness Route, by Weiss and colleagues (2013). This study focuses on the perception of the participant of the Happiness Route.

The answer to the question *why* it works, cannot be given with statistical numerical data. There is a need for a method which can collect the visions of the participants. These visions can shed light on effective elements of the Happiness Route. Like written before, there has been made use of interviews. According to Lub (2014), interviews have the function to understand the concerns of the participant and to move away from seeing people as simply data and being easily manipulated (Cohen, Manion & Morrison, 2011). Interviewing gives the opportunity to see the story behind the activities of the Happiness Route and to evaluate a process (Lub, 2014; Cohen, et al., 2011). An advantage of the use of interviews is the personal approach. The use of an interviewer gives the opportunity to deepen the questions and ask for clarification when the answer is indistinct. The method of interviewing gives the opportunity to hear the story of the participant behind the Happiness Route, to understand which mechanisms of the Happiness Route are effective.

The study of Francissen and colleagues (2010) have held interviews with participants of their Happiness Route. These interviews are used to give an overview of the intervention in the life of the participants. They were looking for the story of the participant, to give insight into

the results of the Happiness Route. This study is looking for the story of the participant too, but is focused more on effective elements, instead of merely showing the results. Second, the Happiness Route of Weiss and colleagues (2013) holds more participants in different residences. This study includes more participants from different residences.

This article describes the study of the effective elements of the Happiness Route by using interviews with participants of the Happiness Route. This study gives answer to the question: *What are the effective elements to increase well-being by participants of the Happiness Route?* The perception of the participants is the source of information to answer this question. Like research shows, intrinsic motivated activity can promote well-being. Based on previous described research, our hypothesis is that the activity, which is intrinsic motivated, is important to promote their well-being. Second hypotheses state the self-determination theory is important to differentiate a growth of well-being.

Methods

Design

To evaluate the effective elements of the Happiness Route, this study used a qualitative design, i.e. a semi-structured interview study. The interviews were held with participants of the Happiness Route of the randomized controlled trial (RCT) of Weiss and colleagues (2013). This study also made use of data from the RCT study of Weiss and colleagues (2013). It included eighteen interviews with participants of the Happiness Route. Ten interviews were held in autumn 2014 by LS and MD. Eight interviews were held in April 2015 by PDW. All interviews were based on the same interview scheme. The study was approved by the Medisch Ethische Toetsingscommissie of the Medisch Spectrum Twente Enschede.

Participants

The participants were former participants of the RCT. The participants of the RCT were randomly selected for the experiment group (Weiss et al., 2013). The participants completed the Happiness Route between October 2013 and March 2015. Before they started the Happiness Route, they were selected on various criteria. The inclusion criteria were the following: (1) age over eighteen; (2) low socioeconomic status based on a low educational level, or a low employment status, or limited financial status, or a combination of these elements; (3) health limitations, i.e., at least one health limitation on the EuroQol (Brooks, 1996); (4) no high positive mental health, which meant a score than 4,83 on the Mental Health Continuum- Short Form (Lamers, Westerhof, Bohlmeijer, ten Klooster & Keyes, 2011); (5) no serious, untreated

clinical depression, this meant a score of 38 or lower on the Center for Epidemiology Depression Scale (Radloff, 1977); (6) loneliness, which meant a score of 3 or higher on the loneliness scale (De Jong & Van Tilburg, 1999). At the start of the Happiness Route all participants met these criteria.

The study used participants who were available and completed the Happiness Route. There were twenty-three participants who met the criteria and were randomly selected to participate in the Happiness Route. They completed questionnaire one and the follow-up questionnaire nine months after the start. This participants completed this questionnaires between October 2013 and March 2015. Four participants had not undertaken an activity. The reason: two participants had not been able to choose an activity, one because he had not been able to submit a request for the budget and another one cancelled the activity. Nineteen participants chose an activity. Unfortunately, during the interview period, two participants were not able to participate in the interview as one participant had a long-term illness and the other one was not able to recall participating in the Happiness Route, probably due to dementia. The other seventeen participants completed the questionnaires, used the budget for an activity and were available for an interview. The choice was made to interview the participant who had cancelled her budget as well, to figure out her reason to quit. These eighteen participants had participated in the interviews.

For a general overview of the demographical data of the participants, see table 1 on the next page. Of the eighteen participants, sixteen were female and two participants were men. The participants were between 29 and 87 years old with an average age of 58. The places of residence of the participants were Almelo, Assen, Hengelo, Woerden or Zeist, the most participants lived in Hengelo. Regarding education: the participants were divided into groups with no education completed and higher education. Most of the participants were divorced. Otherwise participants were married, widow/widower or single. More than half of the participants had a single living situation. Other participants lived with children or with a husband.

Instruments

An information sheet and an informed consent about the study were being used. The interviews were semi-structured, which meant there were topic questions, as can be seen in appendix two. Each interviewer used the same interview scheme for the interviews. The interview consisted of three parts. The first part covered the way through the Happiness Route from the beginning until the moment of the interview.

Table 1*Gender, age, residence, education, marital status and living situation of the participants*

	Participants
Gender	
Man	2 (11%)
Woman	16 (89%)
Age	
20 – 40	3 (17%)
41- 60	8 (44%)
61>	7 (39%)
Residence	
Almelo	5 (28%)
Assen	1 (6 %)
Hengelo	7 (39 %)
Woerden	1 (6 %)
Zeist	4 (22 %)
Education completed	
No education	2 (11%)
Primary school	2 (11%)
Vocational education	5 (28%)
Higher education	8 (44%)
Missing	1 (6%)
Marital status	
Married or registered partnership	4 (22%)
Divorced	8 (44%)
Widow/widower	3 (17%)
Single and never been married	3 (17%)
Living situation	
Single	10 (56%)
Living together with partner	4 (22%)
Single with children	4 (22,2%)

The second part asked a review about the life before and after the Happiness Route. The third part consisted of telling about the chosen activity and appointing special moments in the Happiness Route. This part asked about improvements proposals and strengths of the Happiness Route. The last part of the interview consisted of the three elements of the self-determination theory; autonomy, commitment and relatedness. In this part, the participants were questioned about changes in these three factors. To explain the three elements of the self-determination theory, the interviews, held by PDW, made use of three coloured papers. Each colour represented an element with the name of the element and a little explanation. During this part of the interview, the participant was given one paper during the similar question about this element. Along with the notes made during the interviews, the interviews were transcribed literal in Word files by the interviewer herself. The interviews had a duration of about one hour and were recorded on voice recorder. During the interviews, the interviewer took notes.

This study made use of data from the RCT study of Weiss and colleagues (2013), i.e. the data from the Dutch Mental Health Continuum – Short Form (MHC-SF) (Lamers, et al., 2011). This MHC-SF questionnaire was measured three times during the Happiness Route. This study made use of the first and the follow-up measure, nine months after the start. The MHC-SF is a 14-item questionnaire that measures the three sections of positive mental health (Keyes, 2002). It measured emotional well-being (3 items), defined in terms of the experience of positive feelings and satisfaction with life. It also measured social well-being (5 items), defined in terms of the self-report of positive functioning in community life (being of social value). And finally it measured psychological well-being (6 items), defined in terms of the self-report of positive functioning in individual life (self-realization). The participants reported the frequency of feelings in the past month. The items were ranked on a six-point scale ranging for ‘never’ to ‘every day’. A study about the reliability proved the reliability of the MHC-SF is high of the individual items, across demographics, physical and mental health status, as well as across time (Lamers, et al., 2012).

Procedure

The eighteen participants who completed the Happiness Route, were called to ask if they wanted to participate in an interview about their experiences of the Happiness Route. An appointment was made directly. Eighteen participants agreed to participate in an interview.

The interviews took place in Autumn 2014 and April 2015. The interviewer visited the participants’ homes. After having read an information sheet and the informed consent, the participants signed the informed consent. The interviewer asked permission for recording the interview. The interview consisted of three parts as described previously. During the interviews,

the interviewer asked several questions about the answers of the participants for clarification and depth. The interviews were transcribed literally into a Word file, using the notes and the recording.

Analysis

The analysis of the data, collected during the interviews, was interpreted systematically. The main question during the analysis was: *What are the effective elements to increase well-being according to participants of the Happiness Route?* This study was analysed with use of bracketing and bottom-up. This meant the interviews were leading to creating the effective elements and the scientific explanation was added later. During the analysis, the program ATLAS.ti was used. This program has the ability to organize, to group and to recognize patterns in textual data by the use of self-created codes. The analysis of this study was based on the analysis process of Cresswell (2003). Cresswell distinguished six steps to analyse qualitative data. These six steps were as written below:

The first step was to organize and prepare the data for analysis. This involved transcribing interviews and sort different types of information. Interview 1 to 5 were conducted and transcribed by MD. Interview 6 to 10 were conducted and transcribed by LS. Interview 11 up and until 18 were conducted and transcribed by PDW. The results of the MHC-SF were added to the documents, however, the MHC-SF scores were not connected to the interviews this time. The reason for this was that the MHC-SF score could not influence the analysis of the interviews.

The second step consisted of reading all the data. This was a first step to obtain a general sense of the information and to reflect on the overall meaning. The interviews were read roughly and the interviewer took some notes about striking features.

The third step was the beginning of detailed analysis with the coding process. The interviewer read the interviews and when a line, or two, contained a meaning, it got a code. Coding meant a process of organizing the material into codes before bringing meanings to this codes. It was important to connect the names of the codes with the experiences of the participants. A code was given to one or two lines text. Sometimes the lines of text got two codes because the participant said something about more elements in these one or two lines text during the interview.

Step four held the process to indicate the effective elements. It was important to expand the already given codes and to saturate the codes. For the already existing codes, the interviewer gave sub codes. These sub codes gave the reason why the main code was seen as an effective element by the participants. The transcripts were read anew to expand and to saturate the codes. Through this comprehensive analysis, the interviewer distilled the main elements of the study.

On top of that, codes were removed when it was revealed they were superfluous. Sometimes the name of the existing codes changed. Finally there was a list of five effective elements. For each effective element, a list was made of effective sub-elements or reasons why people experienced the element as effective.

The fifth step was important to represent all effective elements in a meaningful way. All the collected effective elements were compared between each participant. The interviewer read the interviews on the level of the participant. For each participant, the codes were written in a schema together with the MHC-SF scores, as can be seen in appendix three. In this way, the effective elements by participants were compared. The possibility of there being striking relationships had been looked into. This had been done by counting relationships on a printed scheme by the researcher. Striking relationships were noted in the results.

The final step in data analysis involved making an interpretation or meaning of all data. Each participant was made anonymous by using letters instead of the name. For each participant and effective element, there was chosen a typical citation to summarize the participant and the effective element. To compare the data with all the codes, found effective elements and MHC-SF scores, an answer was given to the question: *What are the effective elements to increase well-being by participants of the Happiness Route?*

Results

Description of the participants

This first part of the results displayed a selection of a brief description of a number of participants. The remainder of the descriptions were described in appendix one. The descriptions showed the age, complaints, activity and MHC-SF scores of these participants.

Participant A age:35 MHC-SF before: 3,21 MHC-SF follow-up: 3,5

Participant A is a 35 year-old woman who suffers from depression, severe headache and a lot of neck pain. This woman has lived in the Netherlands for four years now and was not able to receive education. She lives together with her daughter. Due to the Happiness Route, this participant was able to receive education to pass her government examination. Hereafter, she would like to receive a vocational education and would like to get a job. In this way, she will earn money to send her daughter to college. This participant is very happy she has the possibility to study and get a degree. Her well-being increased.

“Life is not what I expected, but it is all right. I am very happy I follow education. I am very happy, it has been my dream.”

Participant E age:55 MHC-SF before:2,64 MHC-SF follow-up: 3,86

Participant E is 55 years old and has Graves' disease and arthritis. She had a turbulent time. Because of her illness she had to stop working. Around that time, her relationship ended as well. She moved to another city and had no money left. She sold belongings from her house to get some money. Meanwhile, she receives sickness benefit. The Happiness Route gave her an activity to have pleasure. She followed a djembe course. She enjoyed playing with other people and had a great time. Unfortunately, the location of the course moved, so she was not able to follow the course anymore. In the future the participant will work one day per week with mentally disabled people in a theatre. As a reward for her work, she will get guitar lessons for free. She is looking forward to start with this work and lessons. Her well-being increased extremely.

“It was outside, a summer evening, and we were in a big cirkel (...). I laughed so hard, I liked it very much.”

Participant F age:68 MHC-SF before:3,93 MHC-SF follow-up:3,5

The procedure had not always been followed properly. This 68 year-old woman finished the counselling conversations and questionnaires, but she waived her activity. This woman is not really strong and falls regularly. She has a mild depression. The woman relays why she waived the activity. The counsellor thought it was a good idea to choose a tablet. The participant said yes, but actually, she did not want a tablet. She was overruled by the counsellor. Her daughter called the counsellor to abandon the tablet. After this, the counsellor never showed again. The participant has peace with the situation and her days fly by. This interview was not used to create the effective elements. This interview was used to confirm the effective elements and stated what was missing by this participant, seen that the well-being decreased.

“Happiness, for me, lies in those around me”

Participant P age:29 MHC-SF before: 2,07 MHC-SF follow-up:2,36

Participant P is one of the two men in this study. He is 29 years old and has a liver disease and diabetes. He had a liver transplantation. He was at home a lot and he undertook less. He goes to the hospital a lot. His family does not live in the Netherlands, so he is out on a limb. He chose a membership to the gym. He is very happy with this membership. He has a lot more activities and he feels better and has more energy. He has more social contacts. He is very thankful for getting this opportunity. His well-being increased

“I see people around there and chat (...) If you are at home, you will not meet other people.”

This woman, with an age of 52 years old, has Crohn's disease, rheumatism, diabetes and asthma. She undertook nothing for a long time. She was at home a lot and sat on the couch. She has a lot of buttons and she wants to do something with these buttons. She chose a course gold smiting to make jewellery with these buttons. She enjoys making jewellery and she made a lot of things. She goes outside more often. She even accepted a part-time job to market new products in the supermarket. She enjoys meeting new people and she has a lot of plans for the future. Her well-being increased.

“So it is like everything is going in the right direction. I am being part of society again.”

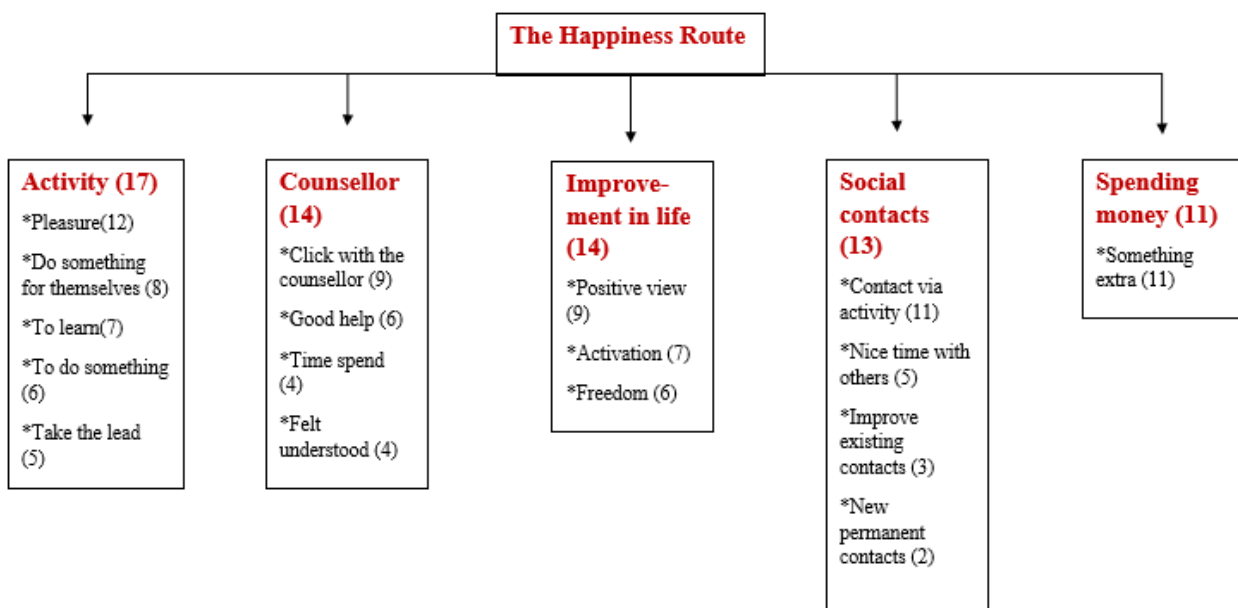


Figure 1: Overview effective elements the Happiness Route

Description of effective elements

As can be seen in figure 1, five effective elements discerned in the interviews. These five effective main elements were activity, spending money, counsellor, social contacts and improvement in life. Each effective element had a number of sub-elements. In total 17 sub-elements were discerned. These sub-elements gave the reason for the effectivity of the main element. The numbers in figure 1 show the number of participants who mentioned this main or sub-element. The elements were sorted based on the frequency of mentioning. Participant F did not complete the activity, she quit. She told something about the activity and the route, but she had not given an opinion, therefore this was not taken into account for the effective elements. The next sections explained each main elements with their sub-elements.

Main element; Activity

Each participants mentioned the activity in the interview. The participants told a lot about the activity. The most participants told about choosing an activity and the content of the activity. To distill effective elements, it was important the participant gave an opinion on the element. These opinions were reasons why the element was effective in the Happiness Route. For the main element activity, there were six reasons why the activity had a meaning for the participants.

Pleasure: This was the most frequently cited reason for the main effective element Activity. Twelve participants said they liked the activity because it gave them pleasure or joy in their life. An example of the code: *“I felt fine, I like music a lot. So I liked the activity so much.” (Participant E)*

Do something for themselves: The participants indicated the activity gave them the opportunity to do something on their own. Because of financial issues, the most participants were not able to afford an activity like this. The participants chose an activity just for themselves. An example of the code: *“I wanted just one afternoon for myself so badly, really just for me.” (Participant D)*

To learn: Seven participants indicated the activity has learnt them something. Most of the participants who said they have learnt something, had learnt a new technique at their hobby. One participant chose to follow education to receive her government examination. An example of the code: *“It was so nice, really. I learnt a lot, he taught me and we talked.” (Participant M)*

To do something: Six participants said they chose an activity to have something to do and to pass time. Most of the participants had less to do before they started the Happiness Route. Some participants chose for an activity to do more and to spend time. An example of the code: *“Yeah, I like it and I have something to do, to pass time.” (Participant P)*

Take the lead: Five participants said they chose an activity that gave them the opportunity to take initiative. The participants showed enterprise to choose or to do an activity. They took responsibility for their activity. An example of the code: *“So, I would like to do something with the buttons. (...) I called the teacher for information and the possibilities.” (Participant Q)*

Main element; Counsellor

The second main element was the counsellor. This was the contact for the participants. This counsellor came around a few times and talked with the participant about life, complaints and happiness. The counsellor guided the participant to choose an activity and to go to the activity. There was not a specific question about the counsellor during the interview. There was a

question about the route of the Happiness Route from registration to now. A counsellor was a part of this route. Fourteen participants told something about the addition of the counsellor to their route. There were four reasons why the counsellor had a meaning to the participants.

Click with the counsellor: Half of the participants indicated they liked the visits of the counsellor because they felt a click. The participants felt at ease with the counsellor. This code also meant the time with the counsellor was nice. An example of this code: “*Contact with [name counsellor] was good, nice. We had a really good click.*” (Participant B)

Good help: Six participants said they were helped by the counsellor. The counsellor gave good advice or he/she listened well. The counsellor helped to see more positive things in life. An example of this code: “*I was really happy she tried to help me and bring a positive feeling*” (Participant A)

Time spent: Four participants indicated they appreciated time spent on the participant. The counsellor made time to listen or to help the participant. The participants indicated they appreciated this time. An example of this code: “*Yeah, it is true, there has been time spent on me.*” (Participant P)

Felt understood: Four participants told they felt understood by the counsellor. The counsellor gave the impression they understood the participant. The participants felt the liberty to discuss the personal situation with the counsellor. An example of the code: “*Well, in that sense, [name counsellor] understood my situation. She could empathize with my situation.*” (Participant R).

Main element; Improvement in life

The third element was improvement in life. Fourteen participants indicated the Happiness Route applied an improvement in their life. The participant did something he or she did not do before. It was important the participant indicated the change was an improvement in life and not just a change of something. This improvement in life was not the finish of the Happiness Route, it was just the start. By the activity or the counsellor, something had changed, the improvement in life which made other changes in the life of the participant possible. This improvement in life was not the reason well-being of the participants had grown, it was an element, like other elements, which made growth possible. Fourteen participants indicated there had been an improvement in life. There were three reasons for this improvement in life.

Positive view: This meant people felt a little push into the right direction and this made their view more positive. Their life could be seen in a more positive way. Before the Happiness Route, most of the participants saw only the negative aspects of life. Through the Happiness

Route, this negative view was turned into a more positive view. An example of this code: *The Happiness Route has helped me (...) the worries of life can be seen a bit*. (Participant B) *So, I have switched the whole sad and depressive thoughts. I have to accept my situation*”(Participant R)

Activation: Seven participants reported their life improved by activation. The participants did something, they did not do before. There were activated by the Happiness Route. The participants were stimulated to undertake something and they had actually undertaken this something. An example of this code: *“If I want to go to the shopping mall, I will go there. Before I would not have gone”* (Participant J)

Freedom: Six participants told they had a greater feeling of freedom by the Happiness Route. This code represented this greater feeling of freedom. Most of the participants who had reported a greater feeling of freedom, chose for a product instead of an activity. This product was a bicycle or a membership of the public transport. This sort of products gave more mobility to the participants. An example of this code: *“For me, it was very important I got this membership of the public transport. So I am not dependent anymore, I can use the public transport to go somewhere.”* (Participant N)

Main element; Social contact

The participants of the Happiness Route had a feeling of loneliness before they participated the Happiness Route. The intention of the Happiness Route had been to get these participants in contact with other people more. In the last part of the interview they were asked about social contacts and changes of social contacts. Social contact meant each way of contact with one, two or more people. Thirteen participants said something about the social contact in their life before, during and after the Happiness Route. There were four reasons social contact was an effective element of the Happiness Route.

Contact via activity: Eleven participants claimed they had contact via the chosen activity. This meant that the participant met people during the chosen activity, for example; eight participants chose a course where they met other people. The participants contacted other people during their activity. In this code it was important to meet with other people. An example of this code: *“It is nice to meet other participants of the course, to see what they are doing. And yes, we talk a lot.”*(Participant J)

Nice time with others: Five participants indicated they appreciated having had a nice time with people. This meant participants reported a really nice time with people. The

participants indicated being with other people made a wonderful experience. An example of this code: *“Sometimes a woman comes by to have a talk, which I really enjoy.” (Participant H)*

Improve existing contacts: Three participants indicated existing contacts were improved by the Happiness Route. This meant the Happiness route facilitated the ability to deepen existing contacts. For example, participants had an improved mobility and were able to visit their friends or family. An example of the code: *“My social contacts have grown. Before the Happiness Route, I had to walk to family and friends, so I was unable to go there often. Since I got the bicycle, I can go to anyone.” (Participant C)*

New permanent contacts: Two people reported they met new friends through the Happiness Route. It meant the participant found a new friend and also contacted this new friend outside of the activity. An example of the code: *“It is very nice, via the course, I have met a woman who lives in the neighborhood too. We still have contact.” (Participant B)*

Main element; Spending money

The last effective main element were mentioned spending money. The participants who participated the Happiness Route, received an amount of €500. The participants who were selected for the Happiness Route, had a low socioeconomic status. To receive an amount like this made a big difference in the life of the participants. There was no question about the money. However eleven participants said something about the money. Each of these eleven participants said something about the fact they had been able to do something extra. There was too little introspection for creating more sub-elements.

Something extra: This meant people received an amount to do something they were not able to do before. Normally the participants did not have the financial possibilities to afford something to make them happy. This amount felt like a present for most of the participants. Some examples of this code: *“Financially, I have never been able to allow this. On this way, a door opened for me and I have got the possibility to get out of this situation. (Participant J)*

“It was a present, a big present. (...) I was allowed to buy something and I enjoyed it.” (Participant G)

“I liked the fact I got the bike. It gives me freedom a bit, to do something I have not been able to do normally.” (Participant N)

Description overall

Five elements were found. A search for a relation or a pattern between the mentioned codes of the different participants in combination with the main score of the MHC-SF was conducted. Eight participants mentioned each of the five effective elements. Four participants mentioned

four of the five effective elements. The elements which were missing, were social contacts (twice) and spending money (twice). Three participants mentioned three of the five effective elements. They did not mention spending money. Two of them did not mention the counsellor. One did not mention improvement in life. Two participants only mentioned two effective elements. They mentioned something about the activity. One mentioned something about the counsellor and the other one mentioned about spending money. One participant had not mentioned an effective element at all. For an overview of the mentioned elements by the participants and the mean MHC-SF score, see Table 2.

Table 2
Overview mentioned codes by different participants

Participant mentioned:								
Elements	Activity	Counsellor	Improvement in life	Social contacts	Spending money	Mean MHC-SF before	Mean MHC-SF follow-up	Difference
5	8	8	8	8	8	2,59	3,06	+0,47
4	4	4	4	2	2	3,43	4,36	+0,93
3	3	1	2	3	0	2,69	3,41	+0,72
2	2	1	0	0	1	4,32	4,11	-0,21
Total	17	14	14	13	11	3,01	3,75	+0,71

Although every participants mentioned the activity, a relation or a pattern between the mentioned elements by the participants could not be found. It seemed each participant deemed other elements of the Happiness Route important. It seemed each participant had his or her own route through the Happiness Route. Striking was the mean MHC-SF score before and follow-up measure. Participants who mentioned three, four or five elements, showed a growth of their well-being. Participants who mentioned two elements, showed a shrink of their well-being. Participants who mentioned four of the elements, showed the most growth, followed by participants who mentioned three of the elements. Participants who mentioned all elements, showed growth of well-being, however this growth was less in comparison to participants who mentioned four or three elements.

Description of relations

As can be seen in Appendix three, each participant mentioned a lot of effective sub-elements. Some sub-elements correlated with other sub-elements. This meant when a participant mentioned one sub-element, most of the time, the participant mentioned the correlated sub-element too.

One of the correlated sub-elements were good help/ there has spent time (counsellor) and activation (improvement in life). Good help and there has spent time was taken together. Six participants reported both of the elements.

Another of the correlated sub-elements were Counsellor; click and Improvement in life; positive view/freedom. Positive view and freedom were taken together. Seven participants reported both of the elements.

An overview with sub-elements was displayed in Table 3. Each relationship represented one note. For example, a participant mentioned she had a click with the counsellor and she mentioned she had a more positive view now. This example meant one note in the figure in the box: click/ positive view. When a participant mentioned she had an improvement in life by activation and they mentioned they were helped by the counsellor and time had been spent, it meant there was one note in box good help/activation and there is one note in the box time spend/activation. In this example, the participant was responsible for two notes.

Table 3
Overview of correlated sub-elements

	Improvement in life; Activation	Improvement in life; Positive view	Improvement in life; Freedom
Counsellor; Good help	4	1	
Counsellor; Time spend	4		1
Counsellor; Click		6	3

Discussion and Conclusion

Interpretation

Through all the interviews, it can be concluded that there are five effective elements that make the Happiness Route effective for increasing well-being. The five elements are activity, the counsellor, improvement in live, social contacts and spending money. These five elements have a total of 17 sub elements.

The activity seems to be the most important part of the Happiness Route. Each participant mentions the activity and gives a meaning to the activity. The possibility to do an activity or buy something probably effects the well-being of the participants. This is reflected in the results of the MHC-SF, the measuring instrument of well-being, as can be seen in appendix three. The results of the MHC-SF show thirteen participants have an increased well-being over time. These thirteen participants have chosen an activity which they enjoy. It is important that the activity is in line with the interests of the participant. The participant has to be intrinsic motivated to do the activity to let increase the well-being (Ryan & Deci, 2000; Sheldon, et al., 1997; Nix, et al., 1999; Ryan, Deci & Grolnick, 1995; Cini, et al., 2013). Meanwhile, when the participant chooses an activity which does not meet their interests and intrinsic motivation, their well-being decreases (Cini, et al., 2013). An example is participant O. She said she had chosen a laptop because her old laptop was broken. Actually, she wants to go on holiday or go outside more often. Her chosen activity, a laptop, does not meet her interests and her desires. Her well-being is decreased. It can be concluded the intrinsic motivated activity is important for increasing well-being.

Another important element is the counsellor. The counsellor is important for the process to undertake something again. Participants indicate the counsellor listens, helps and understands. A counsellor represents multiple roles. Firstly the counsellor is the contact between the participant and the Happiness Route. Secondly the counsellor is important to overview the situation of the participant and gives advice. Most of the participants have had a hard time before the Happiness Route. The counsellor gives support and a possibility to talk about this hard situation. Thirdly, the counsellor looks for a deep desire of the participant, something they have not been able to do before. The counsellor also stimulates choosing an activity. Lastly, the counsellor stimulates and motivates the participant to undertake the chosen activity. It can be concluded that the counsellor has an important role within the Happiness Route.

The findings of this study suggest the activity and the counsellor are the basics to increase well-being. This can be interpreted with the self-determination theory. The self-

determination theory states well-being can increase when there is competence, relatedness and autonomy (Ryan and Deci, 2000; Schreurs & Westerhof, 2013, p.78). Choosing an activity can give a feeling of autonomy. The participant is responsible for choosing an activity, which confirms the feeling of autonomy. Participants indicate they felt the freedom to choose an activity by their own. To do an activity confirms the element competence. Participants choose to do an activity which is within their interests and skills. For example, participants indicate they chose a painting course to expand their technique. The counsellor is responsible for the last element of the self-determination theory, i.e. relatedness. During the Happiness Route, participants have a counsellor who visits them to talk and to help. Nine participants indicate they have felt a click with their counsellor. They have the opportunity to feel relatedness again. By facilitating these three elements of the self-determination theory, the participant is able to increase their well-being.

When the Happiness Route is started with the activity and the counsellor, two other elements become effective. One element is social contacts. During the Happiness Route, participants meet new people, for example via the course they chose. Before the Happiness Route, they showed loneliness. There are many interventions which want to counteract loneliness. Most of these interventions have not provided effective, according to the review of Findlay (2003) However, during the Happiness Route, eleven participants met new people during the chosen activity. Besides, three participants were able to confirm their existing contacts. Two participants actually met a new friend during the Happiness Route. The participants in this study are lonely at the start, however this intervention does not have the intention to provide new friends. Social contacts are a side effect of the Happiness Route.

Another element which becomes effective during the Happiness Route is improvement in life. The participants notice something has changed in their life. It is possible that they found a reason in the activity, so they go outside more often. In two sub-elements the principle of nudging is visible. Nudging means they felt a little push into the right direction In this case, participants have to see things more positive or to undertake more. This is the principle of Thaler and Sunstein (2008) who emphasize the principle of nudging. This little push is important because the most benefits of activities take place in the future, meanwhile the cost of the activities are a current problem. Participants experienced a little push and they report an improvement in life. Especially when the counsellor has helped to see things more positive (Participant R) or when the participant has undertaken more (Participant J).

The fifth element is spending money. Eleven participants indicate the money feels like a gift which gives opportunities to do something they have not been able to do before. The

participants indicate the money felt like a present, or it gave a feeling of freedom. Unfortunately, the participants gave too little information and introspection about the meaning of spending money, more cannot be concluded about spending money.

Relations between counsellor and improvement in life

It can be concluded that there is a relation between counsellor and improvement of life. When participants mention the counsellor has helped or has spent time with them, they also mention that they have been activated, which in an improvement in life. In other words, when the participants mention there has been a click with the counsellor, there has been an improvement in life with positive view or freedom. It seems the counsellors have different characteristics. The review of Ackerman and Hilsenroth (2003) shows therapist characteristics are important for the therapeutic relationship. This review reveals how these therapists' personal qualities and techniques have a positive, or negative, influence on the relationship.

In the current study, it is considered possible the therapeutic relationship is influenced by the personal characteristics of the counsellor i.e. by the degree of given autonomy by the counsellor. A higher degree of autonomy is related with more activation (Black & Deci, 2000). It could be counsellors who have helped and spent time stimulate the autonomy of the participant, which leads to activation.

Thirteen counsellors guided the eighteen participants. Therefore, it is not possible to inquire if the counsellor have personal characteristics which are used in the therapeutic relationships.

Reasons the Happiness Route did not work

Unfortunately, there are five participants whose well-being decreased during the Happiness Route. It is obvious the MHC-SF scores of four of this five participants were at least 3,85, which is a high score, seen the mean score of the first MHC-SF scores of the eighteen participants are 3,06, as can be seen in appendix three. It could be participants who have a high well-being, are not able to increase their well-being.

There are understandable reasons why the Happiness Route probably did not result in more well-being. Participant B had a first score of MHC-SF of 4. This is a high score and it is possible there was no possibility to grow in her well-being. Participant F did not choose an activity by herself. The counsellor highly recommended a tablet while the participant did not want a tablet. She had not chosen another activity. Participant H takes a lot of care for her husband. The health of her husband worsened and this situation gives a lot of worries.

Participant I heard nothing from her counsellor anymore and she is disappointed. Her dating adventure has brought nothing. Participant O chose a laptop because her old laptop was broken. She likes to play a game, but it worries her she is inside all day, she cannot go anywhere. She would like to go on a holiday, but she spent her budget on the laptop.

The participants have not indicated their well-being decreased in the interviews. Unfortunately these five participants decreased in their well-being. But for the reasons in each case, it is conceivably why this five participants decreased in their well-being.

Strengths and weaknesses

This study has strengths and weaknesses. A weakness of this study is that the interview has a lot of questions about life before and after the Happiness Route, which makes the timeline of the interview for over a year. The interview scheme is shown in appendix two. When the interviews cover the whole life before, during and after the Happiness Route, it could be there are a lot of elements which influence the well-being of the participant and are not part of the Happiness Route. For example participant H: the mental state of her husband worsened, which influences her well-being. In this case, it is hard to differentiate what is the effect of the Happiness Route because her well-being is decreased. This point is at tension with a strength of this study, i.e. the personal approach of this study. Interviews give the possibility of mapping the personal story of each participant. The advantage of this interview study is that it gives insight into the personal situation of the participants, before, during and after the intervention. Each interview in this study is a complete story. Besides, all the interviews are held in the same way. So if there are other elements that have influenced the well-being because of the long timeline, each interview has this influence. That makes the interviews mutually comparable, it makes the results reliable.

Another weakness of this study is the degree of introspection among the participants. Most participants have a low level of education and a low socioeconomic status. This can make the degree of introspection low. It is hard for most of the participants to describe their intrinsic processes like thoughts and feelings. These intrinsic processes are valuable to get more insight into the mechanism of the Happiness Route. Meanwhile a strength side of the interview is: the participants mention a lot of valuable information. The participants indicate their experience about the Happiness Route. It is really valuable to get insight into the experience of the participant, irrespectively their degree of introspection.

Mechanisms

As referred to in the introduction, The Happiness Route is a positive psychological intervention. A positive psychological intervention has the intention to create optimal functioning (Liney & Joseph, 2004, p4.). This intervention focuses on creating an optimal functioning measured by well-being. This optimal functioning is facilitated by the activity and the counsellor. More abstract, the optimal functioning is facilitated by the self-determination theory with the elements of competence, autonomy and relatedness. The activity and the counsellor stand for this three elements, as explained earlier.

The effect of fulfilling the three elements of the self-determination theory is the activation of other elements which contribute to a more optimal functioning. From the secure base, funded by the activity and the counsellor, the participant was able to have more social contacts and to improve their life by activating or create a more positive view. When the base elements activity and counsellor are not funded, there is no possibility to create more elements which contribute the optimal functioning. For example participant I, her activity did not give the result she wanted and the counsellor does not contact her anymore. In this case, her base elements are not enough which makes growth impossible for other elements like social contacts or improvement in life. Because her competence, autonomy and relatedness are not fulfilled, there is no option to create an optimal functioning.

The mechanism of this intervention is to create the elements of the self-determination theory like a secure base for the participants. From this secure base, it is possible to grow in other elements of life, like social contacts and improvement in life. This combined makes sure this intervention leads to more well-being. For other interventions of the positive psychology, it is important to create a secure base, so that other elements can develop from this base.

Practical relevance and recommendations

This study gives more insight in the Happiness Route. It can be concluded that contact with the counsellor is important. The type of relationship and the given autonomy is correlated with the improvement in life. This correlation can be used more in different types of welfare work. A lot of help in the welfare work is offered by a counsellor, a therapist or a social worker. This study shows the type of contact between counsellor and client and the given autonomy are important for the type of change. With this knowledge, other contact in welfare work can profit. They can insert on the type of relationship between counsellor and client and the degree of autonomy. It depends on the purpose of the intervention, which type of relation can be used. If the purpose of the intervention is to activate the participant, the counsellor has to give help and spend time on the client. If the purpose of the intervention is to create a positive view or to give

a hunch of freedom, it is important there is a click between the participant and the counsellor. For further practical interventions with counsellors, it is important to decide what is the purpose of these intervention. If the intervention may activate the participants, it is important there is a high degree of autonomy and the counsellor has to spend time with them and give them help. If the intervention gives a positive view or a hunch of freedom, it is important to focus on a good relationship between the counsellor and the participant.

Another point of insight of this study is the activity. It is important to choose an activity which is intrinsic motivated by the participant. For other welfare work, an intrinsic motivated activity is important for change. The participants of the Happiness Route did something they did not do before. They are motivated to do this, because of their intrinsic motivation. Other changes that need to be made in context of welfare work should be intrinsic motivated too. A recommendation about the Happiness Route specific is to focus on choosing the right activity. This study shows participant who chose an activity which is intrinsic motivated, gives happiness and promotes the well-being. Participants who do not choose an activity which is intrinsic motivated, or have an activity which is forced on them show their happiness and well-being do not increase. Choosing an activity is an important process on which sufficient time should be spent. There should be more attention on emphasizing to counsellors the importance of the selecting process of the activity.

The Happiness Route has a different focus in comparison with the standard welfare work. Most of the welfare work focus on reducing the problems of the clients. The Happiness Route indicates the problems but focuses on something which gives happiness. The Happiness Route focuses on increasing well-being instead of reducing the problems. It assumes when the well-being increases, some problems can decrease sequential. A recommendation that follows, is the welfare work should focus on adding more happiness and well-being to their work. The Happiness Route focuses on the desires of the participant instead of the complaints. Welfare work should focus more on the desires of the participant, for example by asking what he or she would like the relief to bring them in positive way. It is important to give the participant autonomy in the offered welfare work.

Scientific relevance and recommendations

This study gives scientific insight based on well-being interventions. There is not a great deal of research into the working mechanism in the positive psychology. This study gives insight in effective elements which facilitate an increase of well-being. For promoting well-being, it is important to choose an intrinsic motivated activity and to have a good relationship with a counsellor, which are the base elements of the self-determination theory. From this base, it is

possible to develop other elements which can increase well-being.

This study gives more scientific insight in working mechanisms of socially isolated people. There are many interventions which want to counteract loneliness. Because participants become more active and go to a course or go cycling, they will meet new people. This study states new friends cannot be the first effect of an intervention, it can be a side effect.

For further research, it is important to get more insight into the effect of getting money. During the interviews, participants said something about getting the money. It feels like something extra, a support. However, during the interviews, it did not become clear if there is a mechanism behind this support of money. It is important for further research to research if there is a mechanism of low socioeconomic people getting an amount to do something for themselves and how this mechanism works.

Other research should focus on the long-term effect of the Happiness Route. This study states the activity and the counsellor are the most important elements of the Happiness Route. The visits of the counsellor stop after a few times and sometimes the activity does not have a duration forever, e.g. participant M. He do not go walking anymore with his buddy and also his membership of the library has ended. The activity disappears from his life, only the memories stay. It is still unknown what this means for the development of the well-being of the participant. Follow-up studies have to provide clarity regarding the long-term impact of the Happiness Route. It is important to research the long-term effect of the Happiness Route. This research should focus on two aspects. First it is important to figure out the development of well-being. Second it is important to figure out the long-term effects of the effective elements. Are the effective elements still available after long time?

Conclusion

The Happiness Route is a positive psychological intervention to increase well-being. The main question of this study is: *What are the effective elements to increase well-being by participants of the Happiness Route?* Effective elements are activity, counsellor, improvement in life, social contacts and spending money. The elements activity and counsellor are the base elements which fulfil the self-determination theory. These elements actuate the other elements. Most of the participants of this study have an increased well-being. They have found their own *Happiness* in the Happiness Route!

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Appendix

Appendix one; description of the participants

Participant B age:53 MHC-SF before: 4 MHC-SF follow-up: 3,86

This 53 year-old woman endured a hard period. She divorced, has financial issues and recovers from a burnout. Besides, she has rheumatoid arthritis. During this heavy and financial difficult period, the woman spent no money on her own. During the Happiness Route her situation changed. She went to the barber, which gave her a lot of happiness. The participant received walking shoes and Nordic walking sticks as well, so she was been able to participate a course Nordic walking to meet people in her neighbourhood. Besides the Nordic walking course, she followed a mindfulness course and a flower arranging course. Despite the MHC-SF score of the participant showed no increasing, the participant said she can be grateful again.

“The Happiness Route has helped me (...) the worries of life can be seen a bit”.

Participant C age:36 MHC-SF before:2,93 MHC-SF follow-up: 3,5

This third participant, who has an age of 36, was helped by the Happiness Route. By ending her relationship, she came into an emergency situation and lived with her daughter at her sister's house before she got her own house. This woman has a dysthymia disorder and is emotionally unstable. During the Happiness route, she received a bicycle and a table. She is very happy with this bicycle, because she do not have to walk to school with her daughter anymore. Also she can visit friends and family more often. Before the Happiness Route, she had to walk to every destination. Now she is faster and experiences more freedom because of the bicycle. Her well-being increased.

“Yeah, It has put back on its feet”

Participant D age:55 MHC-SF before:3,64 MHC-SF follow-up: 3,86

The fourth participant has an age of 55 years. Her physical complaints are neuropathy, diabetes, type 2 and osteoarthritis. She has to take a lot of care of her husband, who is very ill. Before the Happiness Route, she did not have time to take rest or to do something for pleasure. She was caring for her husband. The Happiness Route gave her the opportunity to do something for herself. Every Wednesday, she goes to an oil paint course. Since the Happiness Route, she takes time to paint during the course and in her own atelier. She can enjoy painting again instead of worrying about her husband all the time. Her well-being increased.

“Yeah, I can paint in a peacefull setting. Before, I had to check my husband's breath for every five minutes.”

Participant G age: 49 MHC-SF before: 3,14 MHC-SF follow-up: 4,78

This 49 year-old woman has psychological symptoms. She has anxiety and depression complaints. The participant has a social phobia and trouble to get outside. Yet she wanted to take a photography course. The Happiness Route offered money to buy a photo camera and the photography course. During the course, she was the only one with a small camera, so she decided to quit the course. She was ashamed of the size of her camera. Despite of cancelling the course, the woman is very happy with her new camera. She goes outside with her dog to take pictures. Hereafter there was some budget left to buy new craft supplies. She is very happy with this new stuff and enjoys using it. Her well-being increased extremely. *“Yeah, I think the moments of purchasing the camera and the craft supplies. I have felt like a kid in a toy store.”*

Participant H age: 69 MHC-SF before: 2 MHC-SF follow-up: 1,93

This 69 year-old woman takes a lot of care for her husband. Her husband has the disease Alzheimer and caused many problems, in particular financial problems. The participant has physical problems with her cervical vertebrae and she had a stroke. She is blind in one eye. During the Happiness Route, she chose to knit. She made clothes for her granddaughter and she was satisfied with the results. Unfortunately the mental state of her husband worsened. She does not have the energy and money to continue knitting. It is clear her well-being decreased.

“It gives you distraction and I must say, it did me well knitting. Because I had fun, really, I enjoyed it. ”

Participant I age: 87 MHC-SF before: 3,64 MHC-SF follow-up: 4,09

Participant I is an old woman of 87 years old. She has various diseases like osteoarthritis, muscular rheumatism and whiplash. As a result of the whiplash, the woman is ornery for light and noise. She chose to follow a painting course. She liked the painting course. Unfortunately, the course group was too crowded for this lady and she decided to quit. Fortunately, there will start a new group for painting and she is looking forward to starting with this group. Her well-being increased.

“The activity (...) it is lovely. I love that. ”

Participant J age: 56 MHC-SF before: 1,86 MHC-SF follow-up: 2,14

The tenth woman has an age of 56. She has a pinched nerve, limited mobility and a lot of pain. She was at home a lot. She and her husband had not the financial possibilities to go somewhere and meet people. The Happiness Route gave her the possibility to do activities. She chose to go swimming, to follow an aquarelle course and to take sewing classes. She likes the activities and is easier to contact other people now. Besides, she goes outside more often. Her well-being

increased.

“For the Happiness Route, I was like a snail, if you touch, it goes back into its home.”

Participant K age: 70 MHC-SF before: 3,85 MHC-SF follow-up: 3,71

Participant number K is an 70 years-old woman. She had a spiral fracture in her arm, where she is still suffering from. This lady has only a few contacts, because she has been a lot at home to take care of the household. She was looking for a partner, so she used the budget of the Happiness Route to go to a dating agency. She had four or five dates with men. Unfortunately, there was not the buddy she was looking for. Also, the participant went to a painting course, but she suffered from her arm. On the advice of the counsellor, she goes to the community centre to meet other people and she likes it. She is disappointed she have not any contact with the counsellor anymore. This participant stopped the interview prematurely because she had nothing to say anymore. Her well-being decreased.

“Just it has been there, you can get money.”

Participant L age: 41 MHC-SF before: 2,64 MHC-SF follow-up: 3,29

The participant of 41 years old encountered a difficult period. She has fibromyalgia and had a depression. Before the Happiness Route, she had a hard time. She takes care of her children by herself. Better times will come for this lady. She does not have a depression anymore. She follows a paranormal course, once a month. She is interested in the paranormal for her whole life. She liked the course and she built a friendship with another woman who she met at the course. Her well-being increased.

“During the Happiness Route, they take a look who you really are and what you would like to do.”

Participant M age: 84 MHC-SF before: 3,93 MHC-SF follow-up:4,36

This is the first man who participated in the interviews. He is 84 years old and has a lot of physical complaints. He has diabetes type 2, hypertension, high cholesterol, tremors and he falls by dizziness. He passed a lot of time at home. During the Happiness Route he received walking shoes and a buddy to walk with. Each week, he went for a walk with his buddy, while they were talking about the nature. He enjoyed all the hikes. Unfortunately, his buddy and he do not go walking anymore because of different time-schemes. So, he goes every day walking alone. Also, he had a membership at the library. The man is stronger now, he went less to the hospital. His well-being increased. *“You are never too old to learn.”*

Participant N age: 61 MHC-SF before: 2 MHC-SF follow-up:3,29

Participant N is a 61 year-old lady and has a lot of physical complaints. She has a severe degree of fibromyalgia and osteoarthritis. She divorced and has financial problems. She was at home

a lot and had not a lot of contact with other people. Her financial situation allowed not to do a host of activities. With the budget of the Happiness Route, she receives a membership for public transport, a bike and a painting course. The membership gives her the possibilities to venture out and visit her sister. She goes outside more often and goes for a walk almost every day. Her well-being increased.

“I am sixty-one years old, but I do not need to act like someone of ninety-one?”

Participant O age: 80 MHC-SF before: 4,79 MHC-SF follow-up:4,5

The participant is an 80 year-old woman. She has a lot of physical complaints. She has chronic obstructive pulmonary disease, diabetes, kidney failure, heart problems and thyroid problems. She has problems with mobility and spent the whole day inside the house. She chose to buy a new laptop because her old one was broken. Actually, she wanted to go on vacation. She uses the laptop for pastime and every day, she plays a game. She wants to win, so she plays just as long until she wins a game. During the interview, her son and grandson came around and during this visit she not answered the questions extensive. Her well-being decreased.

“You have something for amusement and I want to win a game. I play as long as I have won a game.”

Participant R age:60 MHC-SF before: 3 MHC-SF follow-up:4,43

The last participant is a 60 year-old woman. After she lost her job, she got financial troubles. She has back pain and osteoarthritis and with her depression and her dismissal, she sat at home and she felt lonely. She felt no connection to the community. She chose to buy an electrical bicycle. She accepted the situation and enjoys life again. She undertakes a lot of activities with her bicycle and her grandchildren. She has a cart behind her bicycle, so she can take her grandchildren to the playground, the farm or other things. She is very happy with her life now. Her well-being increased.

“So, for now, I cycle very happy through [name of town] and surroundings.”

Appendix two; interviewscheme

DOEN: Samenvatten (begrijp ik het goed dat u...), stiltes laten vallen, niet afkappen.

Doorvragen indien wenselijk: wat bedoelt u precies, kunt u dat nader toelichten, kunt u hier een voorbeeld van geven, hoe ziet u dat precies?

Af en toe vragen of iemand het nog volhoudt. Tussendoor eventueel een korte pauze houden.

Korte introductie. Vraag of het goed is dat het opgenomen wordt. Aangeven dat er aantekeningen gemaakt worden. Zo hebben ze ook de tijd om na te denken of ze nog iets vergeten zijn.

Deel A) U hebt deelgenomen aan de Geluksroute. We zijn benieuwd naar uw ervaringen hiermee.

-Kunt u vertellen hoe het allemaal is gegaan vanaf het moment dat u bent aangemeld voor Zorg op Maat tot nu toe?

-Hoe zag uw leven eruit voor uw deelname aan de Geluksroute?

-Hoe ziet uw leven eruit na de Geluksroute?

-Als u uw leven een cijfer zou moeten geven van 0 tot 10. Welk cijfer zou u uw leven geven voor u deelname aan de Geluksroute? En welk cijfer na de deelname aan de Geluksroute?

Deel B) We hebben het net gehad over uw leven voor en na de Geluksroute. Nu wil ik graag nog wat dieper ingaan op de ervaringen tijdens de Geluksroute.

-Kunt u iets vertellen over de activiteit die u gekozen hebt en hoe dat allemaal ging?

-Zou u eens een moment kunnen benoemen uit de periode van de Geluksroute die voor u belangrijk was?

-Vond u dat de Geluksroute net zo als andere hulpverlening was of dat het anders was? Op welke manier vond u het anders/ net zo als andere hulpverlening?

-Wat vond u bijzonder goed aan de Geluksroute?

-Hebt u dingen die u niet goed vond aan de Geluksroute of verbetervoorstellen?

Deel C) U hebt net al verteld over verschillen van de tijd voor de Geluksroute en nu. Nu wil ik graag nog wat meer over drie dingen met u praten. Namelijk over het gevoel van autonomie, het gevoel ergens goed in te zijn (=competentie), en het gevoel met anderen verbonden te zijn(=verbondenheid).

-Vertelt u eens iets over uw gevoel de regie over uw eigen leven te hebben voor en na de Geluksroute.

-Welk cijfers (van 0 tot 10) zou u hiervoor geven vóór en na uw deelname aan de Geluksroute?

-Vertelt u eens iets over dingen waar u goed in bent. Hoe kon u deze vaardigheden gebruiken en laten zien voor en na de Geluksroute?

-Welk cijfers (van 0 tot 10) zou u hiervoor geven vóór en na uw deelname aan de Geluksroute?

-Vertelt u eens over contacten met anderen voor en na de Geluksroute.

-Welk cijfers (van 0 tot 10) zou u hiervoor geven vóór en na uw deelname aan de Geluksroute?

Appendix three; overview participants and their mentioned elements

Participant	MHC before	MHC after 9 months	Difference	Effective elements	Number of mentioned effective main elements
Participant A	3,21	3,5	+0,29	Counsellor (click) Counsellor (good help) Activity (to learn) Spending money (something extra) Activity (do something for themselves) Verbetering leven (nudging) Social contacts (contact via activity)	5
Participant B	4	3,86	-0,14	Spending money (something extra) Improvement in life (nudging) Activity (pleasure) Activiteit (te doen hebben) Social contacts (nice time with others) Activity (do something for themselves) Social contacts (contact via activity) Counsellor (click) Social contacts (new permanent contacts)	5
Participant C	2,93	3,5	+0,57	Improvement in life (nudging) Improvement in life (freedom) Activity (to do something) Spending money (something extra) Counsellor (click) Social contacts (improve existing contacts)	5
Participant D	3,64	3,86	+0,22	Activity (to learn) Activity (do something for themselves) Improvement in life (activation) Activity (pleasure) Improvement in life (freedom) Counsellor (time spend)	4 (Lack: Spending money)

				Social contacts (contact via activity) Social contacts (improve existing contacts)	
Participant E	2,64	3,86	+1,22	Activity (pleasure) Social contacts (contact via activity), Spending money (something extra) Social contacts (nice time with others) Activity (do something for themselves) Counsellor (good help) Improvement in life (activation)	5
Participant F	3,93	3,5	-0,43		0 (Lack: all)
Participant G	3,14	4,78	+1,64	Counsellor (time spend) Spending money (something extra) Activity (take the lead) Activiteit (iets leren) Activity (pleasure) Besteding geld (mooie dingen) Improvement in life (activation)	4 (Lack: Social contacts)
Participant H	2	1,93	-0,07	Counsellor (click) Social contacts (nice time with others) Activity (pleasure) Spending money (something extra) Improvement in life (freedom) Counsellor (felt understood) Improvement of life (nudging)	5
Participant I	3,64	4,09	+0,45	Counsellor (click) Social contacts (contact via activity) Activity (pleasure) Counsellor (felt understood),	3 (Lack: spending money and improvement in life)
Participant J	1,86	2,14	+0,28	Activity (take the lead) Counsellor (felt understood) Social contacts (contact via activity) Improvement in life (activation) Activity (to learn)	5

				Activity (do something for themselves) Improvement in life (nudging) Spending money (something extra) Counsellor (good help) Counsellor (time spend)	
Participant K	3,85	3,71	0,14	Counsellor (click) Activiteit (iets voor zichzelf)	2 (Lack: spending money, social contacts and improvement in life)
Participant L	2,64	3,29	+0,65	Improvement in life (nudging) Activity (to learn) Social contacts (contact via activity) Social contacts (nice time with others) Activity (do something for themselves) Social contacts (new permanent contacts)	3 (Lack: spending money and counsellor)
Participant M	3,93	4,36	+0,43	Social contacts (contact via activity) Activity (to learn) Improvement in life (nudging) Activity (pleasure) Social contacts (nice time with others) Counsellor (click)	4 (Lack: Spending money)
Participant N	2	3,29	+1,29	Activity (take the lead) Social contacts (improve existing contacts) Activity (to learn) Activity (pleasure) Social contacts (contact via activity) Improvement in life (freedom) Spending money (something extra) Counsellor (click) Activity (to do something)	5
Participant O	4,79	4,5	-0,29	Activity (pleasure) Activity (to do something) Spending money (something extra)	2 (Lack: counsellor, improvement in life and social contacts)

Participant P	2,07	2,36	+0,29	Counsellor (good help) Social contacts (contact via activity), Activity (to do something) Improvement in life (activation) Activity (pleasure) Improvement in life (activation) Spending money (something extra) Counsellor (time spend)	5
Participant Q	1,79	2,86	+1,07	Improvement in life (activation) Activity (take the lead) Improvement in life (nudging) Social contacts (contact via activity) Activity (to do something) Activiteit (iets voor zichzelf) Activity (pleasure) Verbetering leven (autonomie),	3 (Lack: counsellor and spending money)
Participant R	3	4,43	+1,43	Activity (take the lead) Activity (pleasure) Improvement in life (freedom) Improvement in life (nudging) Counsellor (click) Counsellor (good help) Counsellor (felt understood) Spending money (something extra) Improvement in life (activation),	4 (Lack: social contacts)
	Mean 3,06	Mean 3,55	Mean 0,50		