

Table 2

Study Characteristics

Study, Design	Design	N	Clinical status	Additional interventions	Delivery	Sessions, duration	Findings
Seligman (2006 <i>Study 2</i>)	RCT comparing 1.PPT 2.TAU 3.TAU + antidepressant	45	DSM-IV Criteria for Major Depressive Disorder	-- ^a	Individual	14, over 12 weeks	Depression, functioning and happiness significantly improved. No difference in life satisfaction
Asgharipour (2012)	RCT comparing 1.Adapted PPT 2.Group CBT	18	DSM-IV Criteria for Major Depressive Disorder	Activity scheduling. Behavioral commitment to values	Group	12, 2hours over 12 weeks	Happiness significantly improved in PPT. Significant decrease in distress in CBT. No group differences in wellbeing or depression -- ^b
Carr & Finnigan (2014)	Protocol of adapted PPT	-- ^b	Major Depressive Disorder	CBT including cognitive restructuring, self-talk, anxiety and anger management, assertiveness. Goal setting. Meditation. Physical exercise.	Group	20, 2hours unknown duration	-- ^b
Meyer (2012)	Single arm pilot of adapted PPT	16	Current diagnosis of Schizophrenia or Schizoaffective Disorder	Mindfulness minute. Positive goal	Group	10, 1.5 hours, over 10 weeks. Additional booster after 6	Significant improvement in wellbeing, hope, savoring, self-esteem, symptoms but no effect on social functioning

						weeks	
Schrank (2015)	RCT comparing 1.Adapted PPT 2. TAU	94	Clinical diagnosis of Psychosis	Mindful music listening	Group	11, 1.5 hours, over 11 weeks	No significant effect on primary outcome wellbeing. Significant effect on psychiatric symptoms, depression and another wellbeing measure
Roepke (2015) RCT	RCT comparing 1.PPT exercises 2.General Superbetter 3.Waiting list	283	Meeting criteria for clinically significant depression (≥ 16 CES-D)	CBT. Activity scheduling. Acceptance content	App	Daily, 10 minutes, over 4 weeks	Depression improved in conditions 1 and 2 relative to the waiting list. Similar pattern in secondary outcomes life satisfaction, social support, self-efficacy
Cohn (2014)	RCT comparing 1.PPT exercises 2.Emotion reporting	49	Target group people with type 2 diabetes and depression ($53\% \geq 16$ CES-D)	Activity scheduling. Mindful breathing. Positive reappraisal. Acts of kindness. Character strengths journal.	Online	5 over 5 weeks	Significant effect on depression. No effect on secondary outcomes perceived stress, positive and negative affect, diabetes specific psychological measures, health behavior
Lambert D'raven (2015)	Single arm pilot of PPT exercises	318	Target group mild to moderate depressive symptoms (>42 Mental health component of SF12)	Mindfulness. Goal setting. Positive writing. Reducing overthinking. Self-talk. Optimism.	Group	6 , 2 hours over 6 weeks	Significant reduction in participants at risk for depression. Significant changes in secondary outcomes including physical, mental and general health
Huffman	Single arm	61	Admission to	Activity scheduling.	Individual	9, over 9 days	Optimism and

(2014)	pilot of PPT exercises	inpatient psychiatric unit for passive or active suicidal ideation or suicide attempt	Acts of kindness. Best possible self. Behavioral commitment to values.	hopelessness improved significantly for all exercises except forgiveness letter
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^a This paper describes the original intervention therefore no amendments were made

^b This paper describes the intervention therefore no data are provided on design, sample size or findings