American psychology seems suddenly to be enmeshed in a new ideological movement that is being referred to as positive psychology. Its premise is that if individuals engage in positive thinking and feeling and abandon or minimize their preoccupation with the harsh and tragic—that is, the stressful side of life—they will have found a magic elixir of health and well-being. It is an old idea that has usually been popular, though we still are uncertain about the conditions under which an emotion could have major effects if any.

My generation enjoyed the Hoagy Carmichael song which states “You have to accentuate the positive, eliminate the negative, latch onto the affirmative, and don’t mess with Mr. In-between.” This is, I believe, a good general translation, not literal of course, of the main implication of the positive psychology outlook, at least as it is understood by many psychologists. I would be critical, too, if anyone was urging accentuating what is referred to as negative psychology, which would be equally unsatisfactory.

As of now, the movement is, in my view, in danger of being just another one of the many fads that come and go in our field, which usually disappear in time, sometimes to return again in another form because the issues addressed are important but unresolved (Roskies & Lazarus, 1988). After a time, we will once again veer toward some other set of issues that are regarded as God’s gift to advanced psychological understanding, but it too will ultimately disappear. My business here is not to speculate about why our field is like this; it just is.

What Is Positive Psychology

An outpouring of articles and books touting a great variety of theses that are said to fall within the rubric of positive psychology have gained attention in the short period of a few years. These include a large special issue of the American Psychologist, a major house organ for psychology (Seligman & Csikszentmihalyi, 2000). A later special section of the same journal titled “Why Positive Psychology Is Necessary” is another offering of this movement. It was edited by Sheldon and King (2001) and consists of four separate articles by Fredrickson (2001), Lyubomirsky (2001b), Masten (2001), and Schneider (2001). A new book, which when last I heard has the tentative title Handbook of Positive Psychology, is being edited by Snyder and Lopez (2002). What is unusual about this is that handbooks are usually written when there is a well-established field with solid theory and empirical foundations.

I suspect that positive psychology does not mean the same thing to all psychologists. To some, it is about so-called positive versus negative emotions. To others, it is about the personality resources and virtues that help people survive and flourish. The most sensible way to get a sense of this movement is to quote from the introduction to the American Psychologist special issue written by Seligman and Csikszentmihalyi (2000). These pioneers of the movement wrote as follows:

Psychologists have scant knowledge of what makes life worth living. They have come to understand quite a bit about how people survive and endure under conditions of adversity…. However, psychologists know very little about how normal people flourish under more benign conditions. Psychology has, since World War II, become a science largely about healing. It concentrates on repairing damage within a disease model of human functioning. This almost exclusive attention to pathology neglects the fulfilled individual and the thriving community. The aim of positive psychology is to begin to catalyze a change in the focus of psychology from preoccupation only with repairing the worst things in life to also building positive qualities.

The field of positive psychology at the subjective level is about valued subjective experiences: well-being, contentment, and satisfaction (in the past); hope and optimism (for the future); and flow and happiness (in the present). At the individual level, it is about positive individual traits; the capacity for love and voca-
At first glance, there seems to be little to quarrel with in this eloquent statement of positive human Hvalues. Use of the word only in the last sentence of the first paragraph, which speaks of the aim of the movement, appears to avoid the extremist implications that seem to have followed this enthusiastic beginning. Nevertheless, I still want to challenge the implicit message, as it has been widely understood, as a call to separate positive from negative. Aside from uncertainties and misunderstandings about what defines positive and negative, this polarity represents two sides of the same coin of life, like structure and process, stability and change, stress and coping, and so-called positive and negative emotions. One of the central theses in my target article is that you can’t separate them and make good sense.

Speaking metaphorically rather than mystically, God needs Satan, and vice versa. One would not exist without the other. We need the bad, which is part of life, to fully appreciate the good. Any time you narrow the focus of attention too much to one side or the other, you are in danger of losing needed perspective. The movement castigates psychology’s interest in the negative side of life as overemphasis. To this I would say, there is nothing wrong with giving more attention to the positive but not at the expense of the negative, and above all, they should not be regarded as separable. The movement also seems to make the spurious claim of being new, but, in reality, in one form or another it is thousands of years old.

I also find much wrong with the conceptualization, research methods, and philosophical claims of many who are active in this movement. The devil lies in the details, and I shall spell out the movement’s problems step-by-step in this target article in the next two main sections. If positive psychology research doesn’t ultimately shape up, important issues could be ill served and end up on the huge waste heap of past methodological and philosophical follies, which is, indeed, very large. It is this waste, incidentally, that I am mainly concerned about, not the specious criticism of stress and coping as negative psychology, though I shall still complain about it later as naive and misleading. The long-standing theoretical and research efforts on stress and coping of my colleagues and myself stand on their own and need no defense, especially against foolish ideological attacks.

By the time this target article appears in print there will undoubtedly be many more publications on the same theme. That is the way with fads. Large segments of the psychological community suddenly turn on for a while to some idea or measurement scale. As a case in point, I remember the Manifest Anxiety Scale that was published by Janet Taylor (1953). It fueled hundreds of dissertations because there was now a respectable, brief, and reliable way to measure anxiety even though the drive theory from which it sprang had little or nothing to do with the concerns of most researchers who used it.

The advent and widespread use of coping scales in the 1980s and 1990s (e.g., Folkman & Lazarus, 1988b, and a host of others) could be another example. Somerfield and McCrae’s (2000) searching recent analysis of research on coping and the debate it fostered in the American Psychologist about clinical applications and methods of measurement reflects a similar upsurge of interest. Much of the substance of this debate had to do with how best to measure and do research on the topic of coping. It may be too early to know for sure how long the interest in coping will be sustained just as it is too early to know the fate of the positive psychology movement. Some fads have more utility and relevance than others do, and some misdirect research into various dead ends for decades.

Before I proceed further, I should offer one other essential caution to the reader. It is that my most trenchant criticisms also apply to psychology in general. It would, therefore, have been quite justifiable if I had used a more inclusive title for my target article, such as “Does Psychology Today Have Legs?” rather than the more limited one I did use, which refers only to the positive psychology movement. That a large segment of our field suffers from many of the same deficiencies should not exempt the movement itself from criticism.

My Cognitive–Motivational–Relational Theory of the Emotions

What I say in this target article is tied to this theory, which is presented in various places, including Lazarus (1981, 1991, 1999b, 2001c) and Lazarus and Folkman (1984). My views may be sufficiently well-known to allow me to assume a minimal familiarity on the part of the reader with the central constructs—namely, relational meaning, appraisal, and coping. In presenting the brief overview that follows, therefore, I restrict myself to a few of its central ideas as reminders, especially those relevant to my later criticisms of the positive psychology movement.

The concept of relational meaning refers to the significance of what is happening in an emotional encounter for a person’s well-being. This meaning is the proximate cause of emotions that are experienced or displayed. An individual constructs it by means of the process of appraising, which is the verb form of the noun appraisal and is basically an evaluation of this personal significance. This mundane idea, versions of which have been around for many millennia, helps us...
deal theoretically and practically with individual differences in the quality and intensity of the emotions that are generated, differences that can be found even under the same or similar environmental conditions. An essential premise of my analysis is that each discrete emotion has a distinctively different relational meaning.

A relational meaning-centered view of the emotion process has major significance for the most important research issues tackled by the positive psychology movement. For example, if, as I claim, the relational meaning differs from one discrete emotion to another, then combining emotions into two broad categories, positive and negative, in order to compare them confounds what is at the very heart of the discrete emotions within each category.

Each of these categories combines a number of different emotions, which leads us to lose essential information about the distinctive role each emotion plays in a person’s struggle to adapt to the pressures and hardships of living as well as the challenges and joys. Individual differences too are mixed together into two broad melting pots of so-called positive and negative emotions and hidden, which is likely to distort what is happening emotionally and result in misleading conclusions. It would be better to compare discrete emotions, whose antecedents, subjective qualities, and consequences are very different from each other. I will address these issues in greater detail later.

The process of coping represents the third main construct of my emotion theory. I give it special emphasis here because it is so important to health and well-being and germane to my criticisms of the positive psychology movement’s ideology. Individuals seek to manage their emotions and the conditions that bring them about by means of the coping process. Like stress, coping is an integral feature of the emotion process. It comes into play at the very start of the cognitive–motivational–relational process that generates an emotion when an appraisal has revealed a problem that must be dealt with (for discussions and evidence of the role of coping as a mediatior of emotion, see Folkman & Lazarus, 1988b, 1988c).

One reason coping is important in evaluating the positive psychology movement is that a favorable reappraisal of a person’s harmful or threatening situation can be viewed as emotion focused coping, which is one of the two main forms of coping, the other being problem focused coping. In emotion focused coping no attempt is made to change the actual situation being faced, but the person’s effort is to reappraise it more benignly. Individuals who cope by thinking or feeling positively believe or perhaps try to sell themselves on the idea that everything will work out. This is often referred to as psyching oneself up or bootstrapping. In contrast, problem focused coping is an action-centered effort to actually change the troubling situation.

The Issue of Subjectivism

There is a common complaint about my kind of theory, made especially by those who still distrust the scientific legitimacy of speculations about the mind even when they are connected to what is observable. It is that appraisal theory is too subjective to trust. The validity of what people say or imply about their inner experience has long been a legitimate concern of psychology, and there are diverse ways to try to make self-reports trustworthy, though they are seldom used for this purpose by researchers.

Some readers might harbor lingering doubts about this issue, so I consider this criticism and my response to it too important to overlook, and I hope the reader will forgive a short digression from the main line of argument. I make two responses to this complaint.

The first response is that this theory is by no means entirely subjective if by this it is meant that most appraisals do not depart significantly from reality. In other words, an appraisal is not solipsism and, unless the person is demented or badly informed, it usually involves negotiation between two seemingly contradictory modes of thought.

One mode is the desire to understand the realities being faced as accurately as possible in order to deal with them effectively. If people appraise the most important, adaptationally relevant realities inaccurately, the way they cope with them is apt to be inadequate or even counterproductive. If appraising were not, in the main, realistic about the adaptational requirements of the situation, the human species and its member individuals would not have survived and flourished.

In a classic Peanuts cartoon, Charles Schulz captures this idea in an instructive and amusing way. The dog, Snoopy, is looking at a large rock on the ground and bewailing not being invited anywhere for Thanksgiving dinner. The cartoon strip ends with the dog thinking sadly that regardless of how hard we pretend, a rock always remains a rock. Individuals and populations often distort reality, but this is not the place to take up the complex issue of rationality (for extensive discussions, see Lazarus, 1999b; Lazarus, 1995; see also Andersen, 1995; Averill, 1995; Malatesta-Magai & Culver, 1995; Matsumoto, 1995; Parrott, 1995; Scherer, 1995).

The other mode of thought is the equally strong desire to put the most “positive spin” possible on what is happening in order to preserve morale and remain motivated to do something constructive about one’s plight. Appraising, as I said, is the process by means of which positive—or perhaps I should say wishful—thinking and feeling is found in my stress and coping theory. It can also be said that the more wishes predominate in a person’s appraisal, the more subjective that appraisal will be.

A positive or optimistic thought is apt to be modified by the realities of what is happening, and vice
versa—the negative realities are often mitigated by positive thinking, both of which are included in what I mean by negotiation. As I see it, both these modes of thought are products of human evolution and have served equally in facilitating our ability to survive and flourish. Because subjectivism is such a bone of contention in our field, the reader should keep this principle of negotiation in mind whenever the bugaboos of individual differences and subjectivism are broached.

My second retort about subjectivism is, I think, even more telling. The only way we can judge an appraisal is itself subjective because it depends on a consensus of subjective judgments that are made by others. A consensus is, in effect, an average of many different individual appraisals made by a collectivity of persons selected by a researcher. The more complex and controversial the judgment is, the greater these individual variations will also be. This consensus cannot be more objective than a single appraisal made by an individual, a statement that may come as a surprise to many readers because it seems like professional heresy.

I say this because, ironically for those who argue in favor of greater objectivity, the average appraisal made by a collectivity can be of questionable validity. Yet, at the same time, the appraisal of an individual within that collectivity could be correct even when the collectivity is wrong. In other words, a consensus does not necessarily make a judgment more sound than that of a deviant individual. There is no absolute way to tell which is right in any given instance, especially when appraisals depend on social values.

We seldom face the fact that consensual appraisals—for example, in spiritual matters—often partake of primitive magical thinking. However, what is even more important, they can represent shared illusions about life and the world that might be considered by nonbelievers as misjudgments about reality. If they were not shared, they might be considered deviant or even delusional. The sharing makes it difficult for an independent-minded person to question a consensus without being regarded as mentally ill or a social alien.

Shared illusions also constitute much of what those who focus on positive thinking and feeling, maintain hope under the harshest of circumstances, and view the world through rose-colored glasses regard as valuable in facilitating adaptation, health, and well-being. In other words, illusions are often heroic ways a community copes with adversity, fear, and loss. This is one of the central dogmas of positive psychology. I agree that they can be adaptational assets, though we know little about their costs and benefits and how this works. For more extended arguments about subjectivity and objectivity, see Hobfoll (2001) and my reply to him in Lazarus (2001a).

I am now ready to proceed to the heart of my essay in the next two sections. In the first, I discuss problems of research method and conceptualization of the positive psychology movement. In the second, I take up what I view as errors in philosophical outlook, especially the tendency to treat stress and coping as solely a negative psychology and to keep the good and the bad separate, as I indicted too briefly earlier to be fully convincing without more elaboration later.

### Methodological and Conceptual Problems of the Positive Psychology Movement

Four major problems are to be found frequently in psychological research in general and emotion research in particular. They are as follows:

1. Two serious limitations of cross-sectional research, which tends to dominate studies of correlation. First, cross-sectional research does not have the ability to demonstrate convincingly a causal relationship—say, between emotions, health, and well-being. Second, such research designs are solely interindividual and cannot distinguish what is stable or in flux, that is, between emotion states and traits. I refer to this problem as limitations of cross-sectional research.

2. A widespread tendency to draw on an over-simplified approach in which any emotion of interest is assigned automatically to one of two valences, positive or negative, solely on the basis of its label and usually without adequate grounding in the measurement of that emotion. The so-called positive emotions are then grouped together and compared with the so-called negative ones. I refer to this as the emotion valence problem.

3. Overstatement of the importance of sample or cohort differences and failure to give adequate attention to individual differences, which I refer to as the individual-differences problem.

4. The use of overly casual procedures to measure emotion—typically, checklists and questionnaires that are administered only once per participant. These are inadequate for the purpose of providing accurate and full descriptions of the flow of emotions that have been experienced or displayed. I refer to this as the emotion measurement problem.

### Problem 1: Limitations of Cross-Sectional Research

I first take up causality and then the need for longitudinal research, for which there are many other terms that mean something similar.
Causality

Most research on emotion and health treats the emotions as a potential cause of health and well-being (or illness and ill being). Cross-sectional research provides an undependable demonstration of antecedent–consequent contingencies, which I think of as a more neutral way of speaking about the complex and controversial issue of causation. It consists of comparisons between two separate samples or cohorts, with the research participants’ being assessed on a single occasion on variables hypothesized to be antecedents and consequences.

No research design is ideal to establish causality. However, cross-sectional research is especially vulnerable because it does not permit prediction from one time or circumstance to a later time or circumstance in the same group of participants. In effect, it does not produce observations that rule out other antecedents that might be correlated with the one hypothesized to have an effect on what gets labeled as a consequence.

The difficulty of inferring causality from a correlation is, of course, old hat, and my emotion theory does not have anything special to say about it. Still, I have often written, and do again later in this target article, about the most desirable methodologies for the study of stress, coping, and the emotions as processes. These are, specifically, ipsative–normative or longitudinal research designs, which represent a combination of intraindividual and interindividual procedures (Lazarus, 2000).

The difficulty of demonstrating causality applies less to the experimental manipulation of variables than to cross-sectional correlation research, though the laboratory has its own special problems with making causal inferences. Actually, no single method provides an acceptable demonstration of cause and effect in the absence of replication and sound measurement and the ability to rule out other correlated antecedents of the so-called consequences being studied.

Long-standing arguments continue to take place about causation, how it can be demonstrated, and even whether the task of identifying causes, which in social and biological science are usually multiple, should be the prime function of science in contrast with description. This is truly a murky philosophical area. Prediction, incidentally, is not tantamount to causation either, though it is usually taken to support or refute a causal hypothesis. Despite the practical importance of reducing or correcting psychological, social, and medical problems, one could argue sensibly that causation is given far too much attention in psychology in contrast with careful description of the phenomena and processes of interest.

Periodically, articles and discussions also appear on two related methodological topics—namely, the null hypothesis and ways to evaluate whether a finding exceeds mere chance probability, or what social science usually refers to as statistical significance. These discussions usually raise doubts about the scientific soundness of procedures that currently dominate the field. A very recent discussion of some of these issues can be found in the American Psychologist (Brand, 2002; Guenther, 2003; Hofmann, 2002; Krueger, 2002; Markus, 2002; Schmidt & Hunter, 2002), which was stimulated by the earlier appearance of an article published by Krueger (2001).

My colleagues and I too have used cross-sectional research designs, often with regret. For example, we would have liked to conclude that the strong relationships we found between age and the dependent variables of stress and coping (Folkman, Lazarus, Pimley, & Novacek, 1987) demonstrated an antecedent–consequent contingency rather than being explainable as merely cohort differences. However, though such an inference seemed plausible, we could not do so with confidence and said this in our discussion.

For a concrete illustration of the problem, note that the correlation that is commonly obtained between exercise and health cannot prove causality or its direction. People who exercise might live longer because of the exercise. It is equally plausible, however, that people who are healthy are better able to engage in exercise and enjoy it—or perhaps some other factor in their lives could account for the correlation, for example, the two cohorts may differ in lifestyle, biological factors, personality, upbringing, or cultural outlook.

Although much health-related research involves a search for causal variables—including the idea that emotion might be such a variable—causality is a problem that seldom surfaces when people talk about exercise and health, just as it is an almost unmentioned problem when psychologists consider emotions and health.

Yet even when a proper qualification is made voluntarily by the researcher in a publication, the thrust of the discussion is still apt to imply an antecedent–consequent contingency. This is the case despite the fact that most of us know but are loath to acknowledge that a statistically significant correlation cannot firmly demonstrate causality without our being able also to rule out all other factors that could account for that correlation.

Cross-sectional research can be a useful preliminary strategy to identify promising antecedent variables. To justify a causal inference, however, the research must ultimately be followed up by intraindividual (within-subjects) research designs that could be more effective in evaluating cause and effect by controlling participant variation and affording the opportunity to be prospective, hence predictive. This is the reason Schaie (1994) developed and used what he called sequential research designs in aging studies that combine cross-sectional and longitudinal strategies. Aging research is particularly vulnerable to the cohort problem, in which two par-
participant populations have grown up in different eras and are currently found to differ as a result of their background rather than chronological age.

I regret to say that much research in psychology in general and on the effects of emotion on health or well-being in particular draws conclusions that are open to question because of their dependence on cross-sectional research designs. In newspapers, television news, and magazines, the public is constantly misled about the health implications of a correlation obtained from this kind of research because a correlation does not, per se, provide evidence of causality.

**Longitudinal Research**

For the study of emotions, the second limitation of cross-sectional research is, in my view, even more serious than the issue of causation. Such research is, perforce, interindividually, or normatively, rather than intraindividually in focus.

In *interindividual research*, people are compared with each other on a single occasion. Therefore, as I indicated before, nothing can be said from the research findings about the stability or flux of the variables being studied—for example, whether the antecedent of a health or illness change is an evanescent state or a stable trait. In *intraindividual research*, on the other hand, people are compared with themselves over time and across occasions. As I said, the combination of within-subjects and between-subjects research designs is referred to as *ipsative-normative*.

Basically, these designs are also longitudinal in style even when pursued for only a short time period. The duration of a study is not a defining criterion of longitudinal research (see Broverman, 1962, for sound and clear analyses of these methodologies). Although longitudinal research, per se, cannot demonstrate causality, the fact that it is temporal provides an opportunity to test antecedent variables as predictors of what follows, which is often used to confirm that there may be a causal connection.

Intraindividual and interindividual research address different questions and often produce contradictory findings (for findings and clear expositions of these issues, see Epstein, 1983; Gottlieb, 1997; Tennen, Affleck, Armeli, & Carney, 2000). These researchers, and others too, have used ipsative-normative research designs extensively. Their studies have led to impressive demonstrations of major differences in what the findings reveal about psychological processes. If we want to consider the mechanism that accounts for an observed effect—for example, whether it is an evanescent state of emotion or a stable trait—it would be necessary, as I said earlier, to use this type of research design.

In the earlier discussion of the two main limitations of cross-sectional research, the reader might have expected me to cite some of the many articles on positive psychology within the two *American Psychologist* issues that I mentioned at the outset (Seligman & Csikszentmihalyi, 2000; Sheldon & King, 2001). All 16 of the articles in the former publication are, essentially, reviews, and the same can be said of the four articles in the latter publication. Most of them also describe a theoretical position attesting to the virtues of the positive psychology outlook.

The difference between a review nowadays and an original research report is that if one wants to see the details of the research design, procedure, and findings, one must check the original. This information cannot be obtained from a review, which provides only an overview. So many studies are apt to be cited, often by simply stringing references together without detail or explanation, that to consider the methodological advantages or disadvantages of a given study is not possible without going to the original report.

Occasionally, a review author provides enough information that one can tell that some studies were probably longitudinal rather than cross-sectional, as in Masten’s (2001) article, which is about the development of resilience. Because of my own prior familiarity with many of the studies cited, it was clear to me that most of the research cited in these reviews is cross-sectional and, therefore, normative or interindividual. The difficulties surrounding causality or normative research are not addressed.

**Problem 2: Emotion Valence**

There are three subproblems when a valence is automatically attributed to an emotion. The first is the failure to question the basis for attributing a positive or negative valence to a prior-named emotion. There are three distinctively different rationales for a positive attribution. Emotions are regarded as positive (a) when they feel good subjectively, which is the most common meaning of *valence*; (b) when they are brought about by favorable life conditions; and (c) when they result in a desirable social outcome. In effect, there is always a social context to the emotions, which serves as an important aspect of the process of their generation.

Thus, one person’s happiness could be a major source of another’s unhappiness, and the reverse could also be true, which also illustrates the role of the social context. The same applies to an attribution of a negative valence, except that (a) the person would feel bad rather than good, (b) the emotion would be based on unfavorable rather than favorable causal conditions, or (c) the emotion would have negative personal or social consequences.

The second subproblem is that combining a number of emotions on the basis of a positive or negative valence for the purpose of comparing them requires that we overlook the advantages of studying discrete emotions. Recall that one of my key theoretical premises is
that each emotion has a distinctive relational meaning, which implies a different set of causes, subjective experience, and impulse to act.

I argue here, however, that collapsing several discrete emotions into two broad categories and labeling them as positive and negative is unwise and regressive. Much depends, of course, on the issues of concern to the researcher. However, it is making a fixed rigor judgment about their valences that is an especially serious mistake if we want to understand how emotions affect health or illness.

Creating two categories, positive and negative, is a variant of the dimensional approach to the emotions. By means of factor analysis, one seeks to identify the smallest number of factors that could account for the largest amount of the emotion response variance (see Lazarus, 1991, for a more extended discussion). The dimensional approach has a number of present-day advocates, such as Lang, Bradley, and Cuthbert (1997); Russell (1991); Tomarken, Davidson, Wheeler, and Kinney (1992); and Watson (2000). This approach ignores or undervalues the distinctive adaptational import of each discrete emotion. It is a simplifying or reductive strategy that usually leads to simplistic analyses if it is not combined with a discrete emotion approach. After all, all emotions involve both qualitative and intensity factors.

Discrete emotion theory, which is usually based on the concept of appraisal (Scherer, Schorr, & Johnstone, 2001), emphasizes qualitative differences while still taking into account variations in the intensity of each emotion. In other words, anger and anxiety, say, are psychophysiological different from each other, even though both are said to be negatively valenced. The same applies to happiness, pride, and love, which are said to share a positive valence.

The third subproblem, which is an even more fundamental reason to be wary of a positive versus negative grouping of emotions, is that if one thinks about it carefully, positive and negative emotions are not really fixed or consistent opposites. The crucial principle is that all emotions have the potential of being either one or the other, or both, on different occasions, and even on the same occasion when an emotion is experienced by different persons.

Next, I look searchingly at some examples of this in order to convince the reader that to regard so-called positive and negative emotions as opposites is a distortion of reality. I touch briefly on hope, joy, pride, love, and anger. All except anger are usually considered to be positively valenced. A comparable case could be made for any emotion not on these lists.

Hope

Elsewhere, I proposed (Lazarus, 1999a) that hope is always—oops, that dangerous word—a combination of (a) a wish and a belief that the desired outcome could occur (cf. Snyder & Forsyth, 1991) and (b) anxiety that it will not.

Consider the following two common scenarios of life, one from the domain of existential threat, the other from the domain of wishful thinking. The existential threat scenario is that, if an individual is awaiting the results of a biopsy for a suspicious lump, he or she is likely to hope that the lump is not malignant. However, the individual will also feel anxious because he or she cannot be sure about this before the results of careful medical testing are announced. The wishful thinking scenario is that, if an individual really wants the job he or she applied for, that individual might believe his or her chances of getting it are favorable but also feel uneasy because he or she cannot be sure until the decision is announced.

It is, therefore, not sensible to classify hope as either positive or negative because it is usually both; I believe the qualifying word always might be justified in this case. One might suppose that optimism is quite a different case. If an individual is optimistic, he or she is said to have few or no doubts about the outcome, so anxiety about it should be absent or minimal. However, this may be more of a linguistic than a real distinction; there might well be degrees of optimism, which make the standard either–or approach to measurement of this trait suspect.

Joy or Happiness

There is little agreement about the psychodynamics of this emotion. An acute emotion, in contrast to a mood or sentiment, is apt to be limited in duration (Ekman, 1994). When we, as human beings, experience a triumph or attain what we want, most of us will experience joy, but we cannot live on it for long. The troublesome realities of life will sooner or later intrude, and often what we thought we wanted turns out to be disappointing.

For example, students who achieve an advanced degree must shortly go on to the next probable life step, say, getting a job. They have little time to bask in their happy frame of mind. As another example, only in fantasy does getting married, which is often but not always joyous—it can be coupled with or dominated by anxiety—imply that we live happily ever after without plenty of intervening struggle and distress.

The joys of a marital relationship can be substantial, but along with them a host of negative conditions and responsibilities arrive, which can create stressful demands. For example, we may be dealing with someone who has different needs and goals or a different daily tempo, establishing a home, producing an adequate income, and having children and caring for them. There can be disappointments, too, such as serious illness, infidelity, or waning sexual enthusiasm. The same used
to be said about the honeymoon, but this is less frequently heard today in the light of the current cultural pattern in which intimacy and living together often starts before marriage.

Here we might consider also the importance of the social context for emotions, in this case joy. This emotion in one person may be a provocation for envy, jealousy, or positive identification and modeling in another. Expressions of joy can also be defensive and appear Pollyannish—that is, they may represent a person’s attempt to avoid dealing with adversity in life.

Pride

Many societies, including our own, are ambivalent about pride. It is most often treated in Western countries as having a positive valence, yet we speak of overweening pride and warn that pride goes before a fall. Other persons may be wounded by a gaudy display of pride because they regard bragging as a put-down. In addition, an experienced pride that one feels justified about or uses defensively may be pursued militantly. In Judeo–Christian religious thought (Schimmel, 1992), it is frequently considered to be one of the seven deadly sins.

Love

This is a positive emotion when shared by the person you love but a great misery when unrequited as portrayed in Somerset Maugham’s (1956) novel Of Human Bondage and, more recently, in Baumeister and Wotman (1992). In effect, to love is to be vulnerable to loss, which points up the impossibility of defining it as solely a positive emotion.

As an illustration, love can become a source of threat through the potential of dementia, death, separation, or merely disengagement. Threat is, in other words, an indispensable aspect of the emotion of love, though this is apt to remain in the background of one’s thoughts. It could become foreground, however, when something happens to suggest that the threat might be real.

One of the sources of confusion about this emotion is the contrast between love as an emotion and as a sentiment, a distinction that is akin to state versus trait. One can acknowledge that two people have a loving relationship in general—that is, they share the sentiment of mutual love, but at varying times in the relationship there may be negatively toned emotions, such as anger, anxiety, guilt, disappointment, envy, and jealousy. Feelings of love are usually in flux.

Depending on the stage of a relationship, when lovers are apart from each other, say, at work, they usually concentrate on all sorts of other things without experiencing the emotion of love, which at the moment is not attended to. In the early stage of a newfound love, however, the couple might have more trouble putting aside this feeling and focusing on other matters. As an emotion rather than a sentiment, love waxes and wanes and in its place from time to time a host of other emotional states can intervene without necessarily undermining the overall sentiment. A sentiment may even remain quite stable through thick and thin, but it, too, can eventually change.

Anger

This emotion is a special case because it is usually classified as having a negative valence when, actually, it is often experienced as positive. The negative classification is probably made because of its potentially destructive consequences for the quality of an intimate relationship or, alternatively, because of the belief that it can be directly damaging to health, depending perhaps on how it is managed.

Anger is experienced as having a positive tone or valence when we act resolutely and forcefully against someone or something by standing up for ourselves rather than shrinking away fearfully and helplessly. The sense of mastery derived from this could make us feel wonderful. Here too we have an emotion that is capable of having either a positive or negative valence, and often both. Even righteous anger, which often feels good, may make a person vulnerable to anxiety about its social consequences, or, if we are uncertain about its righteousness, it may violate one’s own moral standards and could lead to guilt.

In social and organizational psychology and other subfields, such as sports psychology, grouping the emotions into positive and negative for comparison has until recently dominated research in contrast with the treatment of emotions as discrete reaction patterns. But why lose the considerable information contained in the distinctiveness of each emotion?

From the standpoint of adaptation to the work environment, what happens when a worker reacts with anger is quite different from other so-called negative emotions—for example, anxiety and guilt. We can learn much more by studying each of a number of discrete emotions in organizational life or any other social context than by grouping them into those that are said to be positive or negative. A colleague and I (Lazarus & Cohen-Charash, 2001) have recently been at pains to sell this point of view to those who do research in an organizational setting.

Some years ago, in contrasting threat with challenge (Lazarus, Kanner, & Folkman, 1980), my colleagues and I expanded on an old theme that threat is functionally constricting whereas challenge expands performance and is experienced as positive. That article has occasionally been cited by some of those who favor the parallel contrast between positive and negative emotions. There have, indeed, been plenty of studies, some of them dating back to the 1950s, which pro-
vide empirical support for what I have just said about threat and challenge (see Lazarus, 1999b, pp. 77–78).

However, the contrast between threat and challenge contains problems that are also inherent in the grouping of emotions into positive and negative. For example, threat and challenge, and so-called positive and negative emotions too, can occur together in the same person. They can also be a state or process as well as a trait. With respect to the latter, some people are more easily threatened and others more easily challenged, just as some can be mostly sunny and others cloudy with respect to their dominant emotion. The bottom line, which I deal with in Problem 4, is that in all these instances of confusion about valence, the only way to be confident about the valence of a particular emotional experience is to measure its emotions very carefully.

### Problem 3: Individual Differences

Appraisal theories of emotion like mine came into being, as I suggested earlier, because of the ubiquity of individual differences even under similar environmental conditions. The famous relevant quotation from Shakespeare’s Hamlet is “There is nothing either good or bad but thinking makes it so” (Act 2, Scene 2). Despite individual differences, however, there is a widespread tendency for emotion researchers to overstate cohort (or group) differences that are hypothesized by the researcher but not give adequate attention to this individual variation, which is a nuisance because it gets in the way of scientific generalization.

Even when they are statistically significant, the cohort differences obtained in most emotion research are ordinarily very modest in scope compared with individual differences. This is not as widely acknowledged as it should be and is likely to mislead many persons who read about emotion research. I venture to say again that this issue is not limited to the study of emotion but applies to much psychological and, more broadly, social science research.

The heart of the issue is that most of the participants being contrasted on some presumably antecedent—read causal—variable cannot be distinguished from one another statistically on the so-called emotional or health outcome variable because they fall within the overlap between the two cohorts. Only a modest proportion of the research participants at either extreme of the distribution—that is, those falling outside the overlap—can be truly said to belong to one or the other of the two different cohorts being compared. In effect, despite the statistical evidence that an obtained difference probably exceeds chance, individual differences are far greater than the average difference between the cohorts.

To show this graphically requires that research illustrating the point be described in enough detail. I have chosen a study by Gross et al. (1997) to serve as the illustration. It centers on emotion as the dependent variable rather than health, with chronological age as the independent variable. However, it provides one of the best available illustrations of the problem of individual versus cohort differences, and its lesson applies equally well to studies of emotion and health.

One reason for choosing this study is that it presents enough data to reconstruct the overlap between the cohorts being compared. A second reason is that the cohort differences found in this study, though much less impressive than the individual differences, are still more robust than in a great many other comparable studies. Therefore, no one can legitimately challenge my conclusions by saying I chose a unique case that favors what I am trying to say. Although I am critical of the authors’ conclusions and the relatively superficial measure of emotion traits, this study is otherwise a substantial piece of research on an important topic. It also reflects the dominant method used in emotion research—namely, cross-sectional, or interindividual, research designs.

These researchers performed a series of four separate studies, each evaluating a different emotion-related variable. A sample item for the variable of impulse strength is “I have strong emotions.” For positive emotional expressivity, it is “When I’m happy, my feelings show.” For negative emotional expressivity, it is “When I feel negative emotions, people can easily see exactly what I’m feeling.” And for emotional control, a scale ranging from 1 (no control) to 10 (complete control) is presented to all research participants in the form of the following question: “Overall, how much control would you say you have over your emotions?” Please note that these emotion variables have to do with various criteria of emotionality rather than with discrete emotions.

Figure 1 shows four sets of normal curves that reveal how the participants’ scores are distributed on each of the emotion-related variables for two cohorts distinguished by chronological age. One is an older sample ranging in age from 58 to 96. The other is a younger sample ranging in age from 19 to 56. The

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1 The means and standard deviations for each variable that was used to create Figure 1 are as follows. For impulse strength, the mean of the young cohort is 4.85 with a standard deviation of 1.11; the mean for the older cohort is 4.45 with a standard deviation of 1.13. For positive expressivity, the mean for the young cohort is 5.59 with a standard deviation of 0.98; the mean for the older cohort is 5.21 with a standard deviation of 0.93. For negative expressivity, the mean for the young cohort is 3.90 with a standard deviation of 0.99; the mean for the older cohort is 3.52 with a standard deviation of 1.01. For control, the mean for the younger cohort is 6.05 with a standard deviation of 1.73; the mean for the older cohort is 7.07 with a standard deviation of 1.92. This information is used here to plot the overlaps for the age groups, which constitutes the independent variable.
curves for each variable are generated from the cohort means and standard deviations presented by the authors and revealed in Footnote 1.²

Let us examine the overlap between the two age cohorts for each of the four variables in the figure. Each graph shows two normal distributions superimposed on each other on the same abscissa. For three of the graphs, the distribution on the right in which the means are higher is for the younger participants and the one on the left is for the older participants. The exception is the variable of control for which the older cohort has the higher mean.

The overlap between the young and older cohorts is shown in the darkest center section of each graph. As indicated on the graphs, for impulse strength, the overlap is 76%. For positive expressivity, it is 72%. For negative expressivity, it is 75%. For control, it is 60%. This overlap identifies all research participants from both the older and young cohorts who cannot be said to be reliably different on the basis of their age. In effect, these are the participants from each age cohort whose difference from each other does not exceed chance probability. Therefore, statistically speaking, any score that falls within the overlap between the cohorts must be treated as though it was not significantly different.

Notice that the overlap on all the emotion variables includes considerably more than half the research participants. Roughly three fourths of the participants in each cohort fall within the overlap in three of the four emotion variables. In other words, most of the participants, regardless of whether they are in the older or younger age cohorts, cannot be distinguished from each other on the variable of emotion being studied. Only a minority of the participants (roughly 25% to 40%) falls within the range of scores that differ from each other beyond chance probability.

We can sum up this analysis by saying that emotion, as it is measured in this research, is somewhat but not greatly affected by the participants’ age. Another way to say this, as noted earlier, is that individual differences within the two age cohorts are more impressive than the average differences between the age cohorts. Therefore, for most of the participants, age cannot be said to be a factor in their emotional lives. The punch line is that too much is being made of too little.

Following the tradition of journal research reports, Gross et al. (1997) presented an extensive analysis and set of conclusions about what their data show, which they referred to—much too sanguinely I would say—as “age-related changes” (p. 590) in emotion, thereby im-

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²Senior Research Analyst from United Behavioral Health, Loren M. McCarter, PhD, was responsible for the development of this method of portraying the overlaps in this unusual figure. I also thank Professor Emeritus William Meredith. My consultation with him about the statistical merits of this kind of analysis encouraged my use of it here.
plying causality. Given the cohort problem, the modest size of the obtained differences, and the superficial nature of the emotion measurement, to claim age-related changes is a presumption rather than a proven fact. Nor can such research be used to describe what most people at a given chronological age, or as members of some other cohort, are like emotionally, which is what we, as researchers, usually want to do with findings on aging. The ubiquity and magnitude of individual differences should make us wary of overgeneralizing about similarities and differences in chronological age.

Here I don’t want to be misunderstood, so I put the matter again as carefully as I can. Given the statistical significance of the finding, it is quite likely that these researchers have identified a correlate of age. The relationship is, in effect, probably real, which means that it is unlikely to be a product of chance. It is a real finding that should not disappear in a replication, though at this moment we do not have one. The problem I have with this, as I said, is that one cannot readily speak of age as causal from these data nor can we make an accurate descriptive statement about what this aspect of the emotional lives of people is like in older compared with younger persons.

Most researchers are subject to this tendency to promote a positive spin on their findings, which is a result of ambition and a natural enthusiasm for their hypotheses. An interesting secondary issue generated by all this is in what way or ways the minority of participants for which there is no overlap between the cohorts might differ descriptively from the majority who lie within the overlap. To my knowledge, no one has sought to find out, probably because individual differences are viewed as an embarrassment in the search for generalizations.

I don’t wish to fault anyone for accepting weaker methodological standards than most of us, as psychologists, would desire. As I said, I have done the same myself. However, the dominance of cross-sectional, interindividual research must be widely recognized. The interpretations drawn from such research can be misleading—for example, with respect to causation and, even more important, with respect to how to describe those persons who fit the hypothesis and those who do not. Our field needs to find a way to resolve this problem. When I spoke earlier of too much being made of too little, I was referring to this tendency, which also applies to research on emotion and health and the role of personality in adaptation and health outcomes.

These concerns do not mean that Gross et al.’s conclusions, or those of other researchers who study the emotions, should be discarded as erroneous. Given the methodological and measurement problems, however, I am obliged to urge wariness about the broad generalizations being made. The findings and conclusions should be treated as modest, tentative, applicable to only a limited proportion of persons (less than a majority), and subject to confirmation by replications that are based on longitudinal rather than cross-sectional data.

In the desire to be scientific, which in the eyes of most scientists calls for making broad, elegant generalizations from observations, those who do research stubbornly display a de facto denial of the importance of individual variation and the value of detailed description in science. Spiegel (1997) stated this dilemma of science beautifully in a discussion of coping with cancer. I italicized Spiegel’s lovely epigram within the quotation from Spiegel that follows, which says so much with so few words. He wrote:

Modern psychological science has been biased towards quantitative analysis of data…but also toward the goal of platonic simplicity. We are often caught in the dilemma that our theories are either too elegant to be meaningful or too full of meaning to be elegant. Coping is an important construct and yet it has become clear that it has a short life span that we must ask the question “Coping by whom? At what moment, in response to what types of stress, and in what context?” Thus, researchers are beginning to address the common complaint of clinicians, that they fail to adequately take into account the existential reality of individuals in life threatening situations. (p. 170)

Problem 4: Emotion Measurement

The two previous problems, one having to do with valence (Problem 2), the other involving cohort versus individual differences (Problem 3), come together squarely on the urgent need to measure emotions fully and accurately. In a sense, measurement is the bottom line of research on the emotions, one that is, ironically, most commonly given short shrift by using one-time-only, oversimple checklists and questionnaires without follow-up or exploration of their adequacy.

The absence of careful, in-depth measurement also rules out the possibility of obtaining observations about the flow of events in an emotional encounter and the conditions generating the emotions, which we, as researchers, need to know about in order to pin down the phenomena being observed and to assess their relational meanings.

When we are considering the factors influencing health and well-being, we also need to examine the role of coping. It is possible, for example, that the coping process contributes all or most of the variance concerning harmful or favorable consequences of any given emotion to bodily health and psychological well-being. The effects of coping, if any, could be mediated by the indirect damage done to intimate relationships, by direct hormonal effects on bodily organs, or by both.

Which one of these is responsible in any given instance—it may very well be both—and how this works
cry out to be addressed by competent research. I wish I had fully realized the importance of this early in my professional life or was still young enough now to tackle these questions. However, doing this effectively is expensive and requires long-term research.

All this should explain to the reader why I am being such a stickler about emotion measurement, though I was not in a position in the past to follow such advice myself. There is no doubt in my mind, however, that if we, as researchers, measure emotions poorly, our efforts to answer the important questions will be inadequate or, worse, misleading—for example, as to whether so-called positive emotions are a ticket to the heaven of health and well-being and how this works. The same applies to whether negative emotions are an invitation to the hell of illness and how this works.

If psychologists wish to identify the mechanism underlying a correlation between emotion, health, and well-being, I say again that a distinction must be drawn between a fluctuating state and a stable personality trait. It is difficult for me to see how an occasional moment of gratitude or joy could benefit the person significantly in long-term health.

I am confident that Fredrickson (2001) would disagree with me from what she has written in a heading in the text of her article, stating that “positive emotions undo lingering negative emotions” (p. 221). All things considered, including her description of her own research (Fredrickson & Levenson, 1998), I do not find this convincing. Among other things, it depends on the cardiovascular sequelae of negative emotions and experimentally induced emotions rather than careful emotion measurement. And many other possible causal connections cannot be ruled out.

My stance here is more logical than empirical because the research designs typically used to study this kind of issue do not allow it to be effectively tested empirically and there is still the problem of the too-casual measurement of emotion. The benefit or harm of an emotion, whatever it might be, would presumably apply for only as long or as frequently as a person might feel this way, with rare exceptions, one of which is an acute stroke or heart attack in an emotional crisis. I believe we must assume instead that to influence long-term health (in contrast, e.g., with acute, short-term infections), there would have to be a general emotional or coping trait.

What I have just said about trait versus state should apply especially to ailments that are slow to develop, such as cancer and heart disease, rather than short-term health outcomes. The case is strong for the thesis that short-term stress can impair immune system functioning and increase the likelihood of infections (see the review by Kiecolt-Glaser, McGuire, Robles, & Glaser, 2002). To evaluate the trait principle, one could look at say, happy and depressed or optimistic and pessimistic people, though as Peterson (2000) pointed out, concepts such as these are far more complex and difficult to assess than has previously been presumed.

Some researchers, such as Diener (1984), might assess this kind of trait by separately summing and comparing positive and negative emotions over time, as if they were additive, but my preference would be to follow the way Wright and Mischel (1987) conceived of traits. They adopt a conditional trait approach, which affirms the necessity of taking into account the meaning of the person–environment relationship. To do this would require that personality characteristics be identified that dispose people to favor so-called positive or negative emotions under environmental conditions that are, in effect, made functionally equivalent. That is, they are comparable in their capacity to generate the same emotions as a result of one or another of these personality characteristics (see Lazarus, 1998a).

To establish which the mechanism might be—state, trait, or both—we must make very careful measurements of the same research participants’ emotions repeatedly over time and across different conditions. Such measurements must reflect accurately what the participant is actually feeling under each condition and during each time period. Provision should also be made for multiple emotions, which could have either a positive valence, a negative valence, or both.

Philosophical Problems With the Positive Psychology Movement

For some time I have been asking myself about what the main features of this movement were that I found most troubling. This target article and my invited address in San Francisco at the American Psychological Association (Lazarus, 2001b) meeting are consequences of this struggle. At this meeting, I discovered, incidentally, that quite a few others were also shaking their heads in doubt about what the movement was really all about and what, if anything, was new in it.

Norman Vincent Peale preceded the positive psychology movement by almost a century with his inspirational religious book, The Power of Positive Thinking (1996). His views are certainly relevant here because in many ways the message appears to be pretty similar to the message of the positive psychology movement. However, although he had no qualms about the validity of his religious message, his book brought to mind important questions in skeptical people like me. I consider Peale’s main thesis to be sound in one respect but not in another, and the same should apply to the comparable dicta of positive psychology.

Peale was probably correct when he suggested that to be able to put our troubles in a positive light might, indeed, help people feel better and even flourish in their lives. A possible reason for this, among others, is that most people are turned off by complainers and turned on
by those who usually seem sanguine regardless of how they actually feel. Another reason is that being able to put a positive spin on a harsh fate can motivate problem-solving efforts, self-actualization, and the enjoyment of life, in spite of negative realities. This, of course, must be demonstrated rather than taken for granted.

Peale’s second assumption is that if dour people read his book or other similar inspirational works, they would be readily transformed into positive thinkers whose cups are now half full rather than half empty. I am skeptical about the soundness of this premise. Notice that I speak of positive thinking as an ability in order to emphasize that not everyone is able to gain for themselves its potential benefits. To produce change in a person’s thoughts and feelings from negative to positive is probably a much more difficult task than meets the eye. Ironically, many people, maybe a majority of those who could benefit from it, cannot change even if they wanted to because of ingrained habits of thought.

If, incidentally, one is impressed with the potential power of positive thinking, there is also the interesting possibility that this ability underlies the process of reappraising or reframing whatever might be threatening. If we think positively, we should also be more readily challenged than threatened. Or we could manage more easily to psyche ourselves up to believe that we are able to cope with a threat and convert it into challenge. Bandura’s (1997) concept of self-efficacy appears quite relevant here.

There is much ferment in the subfield of personality about just how much change is possible in an adult. This became evident in a recent debate in Psychological Inquiry between Lewis (2001) and Caspi and Roberts (2001). Lewis argued that there is very little stability over time, and Caspi and Roberts took the position, which makes good sense to me, that once adulthood is reached there is considerable stability but one must still allow for modest change. A major issue to be emphasized, then, has to do with the conditions that favor change.

For the stable adult, major personality change may require a trauma, a personal crisis, or a religious conversion. Abandoning unserviceable goals and counterproductive ways of coping with life in favor of more effective ways of coping is very difficult without the mobilization that crisis can produce. Even experts cannot agree about the prospects for change on the basis of evidence that, unfortunately, is not clear even when it comes to the personality changes sought in psychotherapy (VandenBos, 1996).

In this connection, by the way, to locate ideas and some data about religious conversion, interested readers might examine a recent review by Paloutzian, Richardson, and Rambo (1999). These authors expressed doubt that conversions lead to substantial personality change. I do not agree, however, with the way they characterized what is basic versus superficial.

To locate ideas about sources of change and the processes that create it in the context of psychotherapy, readers might consult Safran and Greenberg (1991) and Lazarus (1999a). The former speak of change events, but they also draw implicitly on the concepts of relational meaning, appraisal, and coping, without using this particular language.

Martin Seligman, who is one of the psychologists most likely to be credited or blamed for being a progenitor of the positive psychology movement, has frequently criticized psychology for emphasizing stress and adversity rather than the positive side of life. He has also complained—appropriately as far as I am concerned—about an excessive tendency in the psychological professions to pathologize ordinary problems of living. On this, however, he is a Johnny-come-lately.

Unlike those who focus on positive emotions, Seligman has emphasized personality traits that could facilitate the good life, which is a reasonable approach that contains an unstated coping and motivational motif. Still, emotions are always a central part of human adaptation, whether or not coping is successful. A list of relevant personality traits might include all those traits listed in the quotation I presented early on from Seligman and Csikszentmihalyi (2000) as well as others, too, including resilience and having a purpose in life.

I find nothing wrong with the proposal to study in a programmatic fashion these or other presumably favorable traits to determine whether they have a role in coping, health, and well-being. However, the unfortunate message that comes across from the marketing of the positive psychology movement is, as I noted at the outset, that we, as researchers, must abandon the negative and focus on positive human qualities.

Does it really make sense to complain that the past research and thought about stress, coping, and adversity constitute a negative psychology that shortchanges the positive? Of course not. The complaint is specious because it is an inaccurate reading of the literature of stress and coping and makes little philosophical sense, which I touched on in my introduction. Despite the positive psychology movement’s claim to newness, most of its issues and research objectives are precisely what the best of stress and coping theory and research has long been about. This, as far as I can tell, makes the complaint about negative psychology just another red herring.

Those of us who have emphasized coping with stress and adversity consider all sorts of favorable circumstantial and personality-based resources as important for adaptive effectiveness, health, and well-being. The process of coping could not be adequately examined without attention to personality traits that facilitate or impair coping. Much of the best current research
on coping (see Lazarus, 2000) is, I believe, well-balanced between positive and negative.

Consider, for example, the extremely productive research observations of Folkman and Moskowitz (2000) on coping with AIDS and the ultimate death of an intimate partner. The context of this study sounds like an emotional downer but these researchers have found much that is positive, even inspiring, in the way caregivers dealt with the tragedy. The same can be said about what has been observed about premature death from cancer or other life-threatening or disabling ailments.

Are we really to consider as representative of positive psychology only people who live under highly favorable circumstances? And do their lives really provide evidence of the absence of significant stress and hardship, even tragedy? Stress and loss are inevitable features of life. To be able to transcend the harsh realities seems to me to be a better approach to what is meant by positive than what is suggested by those pushing the positive psychology movement, which has a Pollyanna quality.

To cite another well-known developmental example, children who seemed invulnerable to the deleterious consequences of stress have been studied systematically in the well-known research of Garmezy and Rutter (1983). Should we not think of such resilience as a positive resource even though the life context is one of substantial stress? What is often overlooked, too, is that stress and adversity often play a valuable role in the development of the personal strengths needed to survive and flourish.

The topic of resilience can be brought up to date, incidentally, by noting that on May 3 and 4, 2002, a symposium was held at the Institute of Human Development of the University of California at Berkeley with the partial title “Children Who Thrive in the Face of Adversity.” Four well-known developmental researchers, Linda Burton (2002), Avshalom Caspi (2002), Dante Cicchetti (2002), and Sara McLanahan (2002), spoke on childhood resilience.

I wonder why the study of stress and coping is denigrated as negative psychology. In truth, I also remain perplexed about what protagonists of the movement mean exactly by positive and negative, aside from its use as a political slogan. If one is familiar with the stress and coping research literature, it has to be obvious that the critics of psychology’s seeming focus on stress and adversity have been highly selective in what they have read. They have evidently also forgotten Selye’s (1974) famous, though admittedly oversimple, contrast between eustress and distress.

Coping is not just about adaptive failure but is equally about success. Its failures are just as important as, maybe even more important than, its successes in helping us to understand the human struggle to survive and flourish and to facilitate success clinically. It is often said that we learn more from failures than from successes. Success and failure are interdependent, and we cannot really think of one without the other.

When I read some of the things protagonists of positive psychology have written, lauding positive psychology to the skies, I can hear the band playing and the 76 trombones blaring out their exciting message like a patriotic salute. Hooray for positive psychology—make sure to get on the bandwagon. Look at me, ma, I’ve joined the club! But much of this message, like the wonderful movie The Music Man, is fantasy rather than reality.

After Seligman became aware of the criticisms of the ideology of this movement that a growing number of us were making, he seems to have realized that he had overstated his case and made it too zealously into a diatribe. One must be careful about what one publishes; someone might read it and get the message. He shifted the brunt of his attack to the clinical preoccupation with mental illness, a position that many of us have long affirmed. He recently protested in the APA Monitor that “Positive psychology is not just happiology” and “is not meant to replace psychology as usual” (Seligman, 2001). It was, indeed, wise of him to have softened his original stance.

Permit me also to embellish briefly what I have been saying about the unity of positive and negative by giving it a broader philosophical and historical flavor. If we follow the imagery of thesis and antithesis and the perennial search for a synthesis to resolve the contradiction, we must realize it is not possible to abandon either of the opposing frames of reference. Both are part of the same dialectic. Remember what I said earlier about God needing Satan, and vice versa and the good and the bad being two sides of the same coin. This also applies to appraising as a negotiation between reality and wish.

Even the Boy Scouts had to find their Satan, tragically for them and the homosexuals they slandered. Countries too, appear to need an enemy to mobilize against. President Reagan drew on the idea of the Evil Empire to comfort him and the American people. George W. Bush has been able to advance his right-wing domestic agenda by exploiting fear and his war on terrorism, which at this writing, most Americans seem to support with enthusiasm. Positive and negative are inextricably joined together.

Many of those who became spokespersons for positive psychology appear to be engaging in denial of all that is clearly negative in order to affirm only the positive side of life.

This is a risky tack. I should think they would not wish to be identified with Dr. Pangloss litany that this is the best of all possible worlds, which Voltaire (1999) in used his play Candide to satirize human
foolishness and hypocrisy. I suppose this is why Seligman recently denied that positive psychology was happyology. Perhaps he now views the simplistic dichotomy of positive and negative as being negative baggage that dumbs down thought about emotions, health, and well-being.

Optimists appear to have positive psychology’s seal of approval these days (see, however, Lazarus, 1999a, on hope). Given the world in which we live, I would venture to suggest, however, that we need pessimists even more than optimists. Pessimists, or realists as many would prefer to think of themselves, mobilize valuable outrage against human depravity and its banality. Cruelty, murder, slavery, genocide, prejudice and discrimination, and worst of all perhaps, indifference to human suffering, abound, both today and in previous centuries. In reading about or experiencing this terrible litany of social evil, however, we also need to acknowledge the heroic goodness of many people, which has usually been mobilized by such evil. The bad and the good are functionally linked.

Nor should we be convinced at this juncture that pessimists are worse off in health or well-being than optimists. The data on optimism, pessimism, and health appear to be quite mixed, with some advantages to the optimists and some to the pessimists depending on the context (see, e.g., Segerstrom, 2001).

Summary and Conclusions

Early on, I enjoined the reader not to make the mistake of believing I am against exploring personality traits that could serve as valuable positive resources over the course of one’s life. Who could be so foolish? Concern with such traits has long been a feature of the best stress and coping theory and research, and if the critics were more scholarly or fair-minded, they would recognize that this tradition existed long before the present rebirth of the positive psychology movement.

There is nothing wrong either with urging the study of positive emotions as long as one recognizes that any emotion can have a negative as well as positive valence depending on the context in which it occurs. I view what many of the protagonists say, however, as far too simplistic to move us toward a solid understanding of the role of emotion in health and well-being.

In turn, careful measurement of the emotional state of the person and the context in which it was generated is also essential. Better and more diversified research methods that are well suited to the questions being asked must be used (Lazarus, 1998). It would also be salutary if spokespersons for the movement also sought a sounder and well thought through theoretical or philosophical rationale than they have up to now. Slogans alone rarely win the day.

Many of those who were caught up in the excitement of discovering the venerable concept of positive thinking and feeling have, unfortunately, converted their oversimple dogmas into popular slogans designed to whip up enthusiasm for a vague and old-hat ideology that so far has had little new to say. Perhaps this is why they must attack the psychology of the past to create the illusion that what they offer is new and different. From my vantage, it is not.

For an enterprise that wants to define itself as a serious scientific project to proceed in this way is a serious mistake that could weaken its credibility and hasten its demise. So-called positive psychologists need to do better. So does psychology in general.

Note

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