

Positive Interventions in Positive Organizations

Intervenciones Positivas en Organizaciones Positivas

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Abstract

We describe how (positive) organizations can be enhanced from the framework of Positive Psychology, being healthy from a psychological point of view, as well as resilient in times of crisis and turmoil. Thus, Healthy & Resilient Organizations (HEROs) make systematic, planned, and proactive efforts to improve employees' and organizational processes and outcomes (Salanova, Llorens, Cifre, & Martínez, 2012). These efforts involve fostering healthy organizational resources and practices aimed at improving the work environment, especially during changing times. Despite its relevance in modern societies, research on how to develop HEROs is scarce. Therefore, in this article first we focus on its concept and the measurement, and then, we review the main research conducted on interventions to promote HEROs based on Positive Psychology from a collective (teams and organizations) and an individual (employee) point of view. Lastly, we develop a set of *best practices* on positive interventions in the organizational context.

Key words: healthy organizations, organizational resilience, positive interventions.

Resumen

Describimos cómo las organizaciones (positivas) pueden mejorar desde la Psicología Positiva, siendo saludables desde un punto de vista psicológico, y resilientes en tiempos de crisis y confusión. Las organizaciones saludables y resilientes (*Healthy & Resilient Organizations - HEROs*) hacen esfuerzos sistemáticos, planificados, y proactivos para mejorar la salud de sus empleados, y los procesos y resultados de la organización (Salanova, Llorens, Cifre, y Martínez, 2012). Estos esfuerzos incluyen fomentar recursos y prácticas organizacionales saludables para mejorar el trabajo, especialmente durante tiempos de cambios. A pesar de su importancia en las sociedades modernas, la investigación sobre cómo desarrollar HEROs es escasa. En este artículo revisamos su concepto y medida, así como las principales investigaciones sobre intervenciones para promover HEROs basadas en la psicología positiva, tanto a nivel colectivo (equipos y organizaciones) como individual (empleado). Por último, se describen cuáles son las "mejores prácticas" en materia de intervenciones positivas en el contexto organizacional.

Palabras clave: organizaciones saludables, resiliencia organizacional, intervenciones positivas.

Introduction

1.A HEalthy & Resilient Organization (HERO) as a Positive Organization

Modern societies are characterized by recurring periods of crisis, and social and economic changes. This situation requires modern organizations to focus on the health of both their teams of employees and the organization as a whole. In this scenario, research has shown the importance of: (1) focusing on a more comprehensive, interdisciplinary, and multicausal approach that establishes the role of different stakeholders (e.g., Chief Executive Officers – CEOs), teams' immediate supervisors, employees, and customers in order to enhance positivity inside organizations, and (2) integrating healthy programs in the companies' policies and culture as a benefit in itself.

Therefore, HEROs constitute a key element within the framework of Positive Organizational Psychology. Salanova and colleagues (2012) stressed that a HERO is an organization that makes systematic, planned, and proactive efforts to improve employees', teams', and the organization's processes and outcomes. Moreover, these organizations are "resilient" because they: (1) maintain positive adjustment under challenging conditions, (2) bounce back from untoward events, and (3) maintain desirable functions and outcomes in the midst of strain. These efforts involve implementing healthy organizational resources and practices aimed at improving the work environment at the task (e.g., autonomy), interpersonal

(e.g., transformational leadership styles), and organizational (e.g., Human Resources – HR – practices) levels, especially during times of turbulence and change.

The so-called *HERO Model* is a heuristic theoretical model that integrates results from empirical and theory-based evidence on topics such as job stress, Human Resource Management (HRM), organizational behavior, and Positive Occupational Health Psychology (POHP). A HERO refers to a combination of three main interrelated components: healthy organizational resources and practices (e.g., social support, work-family strategies, transformational leadership), as strategies that structure and organize the work; healthy employees/teams (e.g., trust, work engagement), which show high levels of psychosocial well-being; and healthy organizational outcomes (e.g., high performance, corporate social responsibility).

The HERO Model has two main advantages which are related to data collection and analyses. First, data are collected from different respondents (e.g., CEOs, teams' immediate supervisors, employees, and customers), and from objective financial performance indicators (e.g., Return Of Assets – ROA) using both quantitative (questionnaires) and qualitative (interviews) methodologies. Second, data analyses are computed at the collective level following a multilevel perspective (i.e., individuals, teams, and organizations) (see Figure 1).

Results from a validity study conducted with 303 teams and their immediate supervisors (Salanova et al., 2012) show that when organizations have healthy practices and resources (team autonomy, team feedback, supportive team climate, teamwork, team coordination, transformational leadership), teams feel healthier (more efficacious, engaged, and resilient



Figure 1. *HEalthy & Resilient Organization (HERO) Model* (adapted from Salanova et al., 2012)

to adversity), which in turn leads to healthier organizational outcomes (team in-role and extra-role performance as assessed by their immediate supervisors). Employees' excellent job performance also positively predicted customer loyalty and satisfaction with the company. Further evidence for the *HERO Model* is shown in other studies (Acosta, Salanova, & Llorens, 2012; Cruz, Salanova, & Martínez, in press; Torrente, Salanova, Llorens, & Schaufeli, 2012).

The HERO methodology combines qualitative and quantitative instruments and is applied to different stakeholders. First, the qualitative measures involve semi-structured interviews with CEOs and cover two topics through two open-ended questions: (1) healthy organizational resources and practices, and (2) healthy organizational outcomes. Interviews are analyzed by using content analysis of different categories performed by two independent, trained coders with the aim of creating a mutually exclusive system of categories that is both reliable and valid (Weick, 1985). Healthy organizational resources and practices are categorized according to the ERCOVA (Valencian Community Responsible Enterprise) project, which calls for the Corporate Social Responsibility (CSR) of companies as part of the EQUAL European Project. Healthy organizational outcomes include both the quality of products and services (excellence), and positive relationships with the organizational environment and community (community benefits).

Second, the quantitative measures involve three questionnaires filled in by employees and immediate supervisors, as well as by customers. Questionnaires for employees and supervisors include 21 validated scales/subscales referring to three expected main dimensions of HEROs, namely: healthy organizational resources and practices (e.g., autonomy, transformational leadership, and practices), healthy employees (e.g., collective efficacy, trust, and work engagement), and healthy organizational outcomes (e.g., performance, service quality, commitment). In all cases the referent is collective. That is, employees fill in the questionnaire thinking about the organization (i.e., "*In this company...*") and the team (i.e., "*My team...*"), whereas the immediate supervisor thinks about the organization ("*In this company...*") and the team that he/she supervises ("*The team I supervise...*"). Finally, the customers' questionnaire includes four measures about healthy organizational outcomes, specifically from Service Quality: that is, employee excellent job performance, employee empathy, customer loyalty, and customer satisfaction. Scales are measured by a 7-point Likert scale ranging from 0 (*never*) to 6 (*always*).

In order to develop positive organizations, first healthy and resilient factors are assessed. In the next step, these

factors are enhanced by means of positive interventions. Positive interventions refer to strategies focused on employees, teams, and organizations that improve optimum performance and health to promote higher levels of quality of work and organizational excellence. Schaufeli and Salanova (2010) went a step further by arguing that we are entering a novel phase of development known as *amplition*, which is based on the principle of improvement or betterment (Seligman & Csikszentmihalyi, 2000). Amplition is defined as "positive" interventions that promote, increase, and improve health and well-being (e.g., work engagement) at the collective (teams and organizations) and individual (employee) levels, and includes three characteristics: (1) comprehension: the focus of interventions is oriented toward improving the health and well-being of teams and organizations; (2) inclusion of the *entire* workforce: employees, teams, and organizations that are not sick or distressed; and (3) it constitutes a long mission that requires a continuous and sustained effort (Salanova, Martínez, Cifre, & Llorens, 2009). Recently, Llorens, Salanova, Torrente, and Acosta (in press) have provided an overview of interventions based on Positive Psychology focusing on HEROs. Specifically, in that study methodological questions are discussed with the aim of developing a set of best practices for organizational interventions based on Positive Psychology. Taking the *Research to Practice (R2P)* premise and the Professional-Scientific Model as their foundation, these contributions are reflected in a set of best practices to develop and design successful interventions. The sections that follow focus on positive strategies oriented toward carrying out changes in teams and organizations at the collective level, and then at the employee level (which can be carried out both inside and outside the work context).

2. Organization- and team-based interventions from Positive Psychology

Positive interventions based on the collective level (teams and organization) constitute the essence of amplifying strategies to develop HEROs (Salanova et al., 2012). This research suggested that healthy organizational resources and practices (e.g., team autonomy, team feedback, supportive team climate, team-work, team coordination, transformational leadership) were responsible for increasing health in employees (team efficacy, team work engagement, team resilience), and healthy organizational outcomes (in- and extra-role performance, as assessed by their immediate supervisors). Following the logic of these positive relationships,

gain cycles and spirals obtained by research (e.g., Acosta, Salanova, & Llorens, 2012; Llorens, Schaufeli, Bakker, & Salanova, 2007; Salanova, Llorens, & Schaufeli, 2011; Salanova, Martínez, & Llorens, 2012; Torrente et al., 2012; Xanthopoulou, Bakker, Demerouti, & Schaufeli, 2007), HEROs may be developed and maintained by stimulating each link in their main dimensions, that is, healthy organizational resources and practices, healthy employees, and healthy outcomes. Below, it is outlined how this can be achieved by using strategies that focus on: (1) assessing and evaluating HEROs; (2) designing and changing work places and organizational practices; (3) enhancing positive and transformational leadership; (4) promoting work training; and (5) developing career management.

2.1. *HERO assessment and evaluation*

The ultimate purpose of the assessment and evaluation of HEROs is to match the right persons/teams to the right organizations. That is, to create an optimal balance between team values and goals, and those of the organizations. More particularly, the assessment and evaluation of HEROs is about increasing healthy organizational resources and practices (as assessed by CEOs, employees/teams, and immediate supervisors), as well as about healthy development (as assessed by teams and immediate supervisors) and healthy outcomes (as assessed by teams, immediate supervisors, and customers) following a collective approach. The main strategies outlined below may enhance HEROs:

Talent attraction, recruitment, selection, and retention. This involves defining and presenting the company brand based on enhancing the positive strengths of the workers. These companies are shown as appealing to potential employees and therefore more attractive to “headhunters”. In addition, it involves recruiting and selecting the right people based on strengths, that is, based on the employee’s pre-existing natural capabilities to behave, think or feel in a specific and authentic way. Consequently, the employee will be full of energy, which allows an optimum level of performance, development, and functioning to be reached.

Establishing and monitoring the psychological contract. The psychological contract reflects the employees’ subjective notion of reciprocity: the gains or outcomes from the organization (e.g., salary, recognition) are expected to be proportional to one’s own investments or inputs (e.g., effort, loyalty). A fair psychological contract should be established that reflects an optimal match between employee and organization in terms of mutual expectations. This can be achieved by: (1) assessing the employee’s

values, preferences, and personal and professional goals; (2) negotiating and drafting a written contract (*Employee Development Agreement*) that guarantees the necessary resources from the organization to achieve personal meaningful goals; and (3) monitoring this written agreement periodically in terms of goal achievement.

Periodic HERO audits. The aim of these audits is to inform individual and groups of employees, as well as the organizations they work for, about their levels of healthy organizational resources and practices (e.g., social support, work-family balance), their levels of well-being (e.g., including work engagement, efficacy beliefs, resilience), and their organizational outcomes (e.g., individual and team performance, quality). This information is crucial for taking individually- and collectively-driven decisions for improvement. The gathering of reliable information is even more important since these decisions mean that the different stakeholders such as CEOs, employees, and immediate supervisors have to think about the group and customers. Based on the *HERO Model* (Salanova et al., 2012), work well-being audits were carried out in Spain (www.wont.uji.es) in 1484 employees working in 303 groups, 303 immediate supervisors of these teams, and 2098 customers from 43 companies. This monitoring of HEROs is basic as a secondary amplification strategy. However, it only makes sense if companies invest in the institutionalization of amplification services. This refers to services oriented toward the assistance and promotion of health and resilience of employees, teams, and organizations over time. Such audits consist in assessing future needs, as well as foreseeable organizational, economic, and social changes, and in monitoring the implementation of interventions as a strategic objective of the company.

Workshops on positive experiences. Workshops are structured group meetings of employees that are held to promote health and well-being. They are implemented during a short time and include work engagement, positive emotions, and emotional intelligence, usually by increasing personal resources. Workshops that aim to build these positive experiences are similar to *Quality Circles*, except that the former focus on the enhancement of personal resources, such as cognitive, behavioral and social skills (e.g., positive thinking, goal-setting, time-management, and life-style improvement). This can be achieved by the active participation of employees to develop the abilities needed to enjoy and commit to work, manage interpersonal relationships among colleagues, supervisors, and customers, as well as to improve work quality (see Rodríguez, Llorens, & Salanova, 2006). Moreover, McDonald, Jackson, Wilkes,

and Vickers (2012) argued that training programs caused an increase in self-confidence, self-consciousness, communication, skills for resolving conflicts, as well as in personal resilience in nurses. Similarly, Sin and Lyubomirsky (2009) showed the effectiveness of positive interventions through the optimization of positive feelings, positive behaviors, and positive cognitions in increasing well-being. In this line, Fredrickson (2003) proposed that positive emotions may contribute to optimal organizational functioning; that is, organizational members should consider cultivating positive emotions in themselves and in others, as a means to achieve individual and organizational transformation and optimal functioning over time by upward spirals (see also Staw, Sutton, & Pellod, 1994). Finally, Rodríguez, Llorens, and Salanova (2006) showed the effectiveness of a workshop on emotional intelligence in order to increase psychosocial well-being in nurses working with terminal patients.

2.2. Job and organization (re)design and changing work places

These strategies serve two purposes: from an occupational health perspective the aim is to reduce the exposure to psychosocial risks, whereas from an HRM perspective they are aimed at fostering healthy employees and healthy organizational outcomes. Following the *HERO Model* (Salanova et al., 2012), investing in healthy organizational resources and practices is the best mechanism to promote healthy employees and to produce healthy organizational outcomes.

Investing in task and social resources. Research has evidenced that in order to develop healthy employees/teams (e.g., work engagement, resilience, efficacy beliefs) and healthy organizational outcomes (e.g., in- and extra-role performance as assessed by the immediate supervisors), it is necessary to invest in healthy resources (team autonomy, team feedback, supportive team climate, team-work, team coordination and transformational leadership) (Salanova et al., 2012). Specifically, research shows that investing in task (time control and method control) resources increases students' well-being over time in terms of work engagement when they are working in groups, which in turn boosts future efficacy beliefs, and so on (Llorens et al., 2007). Furthermore, Cifre, Salanova, and Rodríguez-Sánchez (2011) conducted a quasi-experimental, longitudinal study to show that team redesign increased personal (professional efficacy and perceived competence) and job resources (climate of innovation), and the work engagement of employees in manufacturing companies. Similarly, Vera,

Salanova, and Lorente (2012) showed the role of job and social resources among efficacy beliefs in predicting work engagement (job autonomy, social support climate) in a sample of 274 secondary school teachers from 23 schools. In the same line, Robertson and Huang (2006) also showed the effectiveness of interventions based on training related to job redesign on employees' perceived satisfaction and performance (individual perceptions, collaboration of the group, and effectiveness). Moreover, investing in social resources (supportive team climate, coordination, team-work) has a positive effect on collective work engagement (as assessed by employees within teams) and collective performance (in-role and extra-role performance as assessed by the supervisor; Torrente et al., 2012).

Investing in organizational practices. Another strategy is to invest in healthy organizational practices. In this sense, Acosta and colleagues (2012) used a sample of 518 employees distributed in 55 teams from 13 companies to show that healthy organizational practices (i.e., work-family balance, mobbing prevention, psychosocial health, and communication strategies) increase the levels of healthy employees, in terms of organizational trust (i.e., vertical trust) and team work engagement.

Investing in work changes. These strategies are implemented when jobs are rotated, that is, employees are temporarily assigned to carry out special projects, or when they are reassigned to entirely different jobs. Based on qualitative research on work engagement (Schaufeli, Taris, Le Blanc, Peeters, Bakker, & De Jonge, 2001), we may add that changing work is very likely to also increase work engagement. This will be particularly the case when employees feel challenged in their new jobs while at the same time they have the necessary competencies to meet the challenges (Salanova, Peiró, & Schaufeli, 2002).

2.3. Positive and Transformational Leadership

Transformational leadership constitutes a key social resource in increasing health and well-being at work and consequently in developing HEROs, especially in times of change. In that regard, a practical guide on successful leadership in safety and health organizations has been drafted by the European Agency for Safety and Health at Work (EU-OSHA, 2012). This guide offers practical examples to achieve (1) effective and strong leadership; (2) the involvement of workers in their constructive engagement, and (3) the implementation of ongoing assessment. All this advice could have an impact on the organizational benefits that allow good safety and health in the workplace (EU-OSHA, 2012).

A transformational leader is charismatic, inspiring, and visionary; motivates employees and builds work engagement; displays conviction; takes stands; challenges followers with high standards; communicates optimism about future goal attainment; stimulates and encourages creativity and innovation; and listens to the followers' concerns and needs, which are mainly higher-order intrinsic needs (Avolio, 1999; Bass, 1985). Such leaders should inspire trust, respect, and pride so as to increase optimism, hope, and resilience in order to develop to a greater extent than expected (Quick, Macik-Frey, Mack, Keller, Gray, & Cooper, 2006). In a number of different studies transformational leaders have been shown to have a positive impact on: (1) followers' information and learning, as well as on their capacity to go about their daily clinical activities and to improve the quality of service with the patients (Phillips, 2005); (2) individual and collective work engagement through the "contagion of engagement" (Bakker, Le Blanc, & Schaufeli, 2005) from one team member to another, especially when their members collaborate closely to accomplish particular tasks (Salanova, Llorens, Cifre, Martínez, & Schaufeli, 2003); (3) followers' health and well-being (Nielsen, Yarker, Randall, & Munir, 2009); (4) positive affect experience (relaxation, enthusiasm, pleasure, optimism, resilience, and job satisfaction) and work engagement (Llorens, Salanova, & Losilla, 2009), as well as in- and extra-role performance in teams (Cruz et al., in press); (5) self-efficacy, work engagement, and extra-role performance (Salanova, Lorente, Chambel, & Martínez, 2011); and (6) the performance of the group, particularly when leaders transfer their positive emotions (George, 1996).

2.4. Work training in efficacy beliefs

Work training is a traditional HRM strategy that is used to enhance employees' levels of well-being and health. More especially, work training to foster efficacy beliefs (i.e., the power to believe that you can do something) is particularly interesting when it comes to promoting personal health and well-being. According to Social Cognitive Theory (SCT), efficacy beliefs lie at the core of human agency and are important because they influence employees' and teams' behavior, thinking, motivation, and feelings (Bandura, 2001). Research shows that high levels of efficacy beliefs are related to well-being (e.g., work engagement, flow) and positive outcomes (e.g., job satisfaction, performance, organizational commitment, academic success) by positive reciprocal cycles and spirals (e.g., Del Libano, Llorens,

Salanova, & Schaufeli, 2012; Llorens et al., 2007; Llorens, Salanova, & Rodríguez, 2012; Salanova et al., 2003; Salanova, Llorens, & Rodríguez, 2009). For example, Le Blanc, Schaufeli, Salanova, Llorens, and Nap (2010) conducted a longitudinal study in two waves on 372 nurses working in 29 different European intensive care units to show that efficacy beliefs predict collaborative practice through team commitment, which are reciprocally related to each other. Furthermore, research suggests an upward gain-spiral in which efficacy beliefs (both individual and collective) reciprocally influence activity engagement (work and task engagement) indirectly through their impact on positive affect (enthusiasm, satisfaction, and comfort) over time. This has been demonstrated in two longitudinal field studies involving gain-cycles and gain-spirals in 274 secondary school teachers and in 100 university students, respectively, working in groups (Salanova et al., 2011). Furthermore, research also shows the benefits of increasing efficacy beliefs in the experience of flow in work settings over time. For example, Salanova, Bakker, and Llorens (2006) showed that efficacy beliefs as well as organizational resources (social support climate and clear goals) facilitated work-related flow, which in turn had a positive influence on personal and organizational resources in a two-wave study among 258 secondary school teachers. Recently, in a retrospective study of 957 employees (tile workers and secondary school teachers) using multiple analyses of variance, Llorens and colleagues (2012) have suggested that the frequency of flow experience (enjoyment and absorption) at work is produced when challenge and skills (in terms of efficacy beliefs) are high and balanced.

This means that efficacy beliefs serve as a kind of self-motivating mechanism: as a consequence of evaluating their own competence, employees set new goals that motivate them to mobilize additional efforts, focus on achieving these goals, and be persistent in the face of difficulties. According to Bandura (2001), efficacy beliefs could be enhanced by four strategies: mastery experiences, vicarious experience, verbal persuasion, and positive emotional states. Specifically, training programs should include, for instance, practical exercises to provide experiences of vocational success (mastery experiences), role models of good performance (vicarious experiences), coaching and encouragement (verbal persuasion), and reduce fear of rejection or failure (managing emotional states) at the individual (self-efficacy for employees) and collective levels (team efficacy and organizational efficacy). According to SCT, mastery experiences are the most powerful tool for boosting efficacy beliefs. The best way to evoke mastery experiences in employees is therefore

by tackling work problems in successive, attainable steps. Likewise, if people see similar others succeed by sustained effort during work training, they come to believe that they also have the capability to succeed (vicarious experiences). Trainers and supervisors may additionally use social persuasion in order to convince employees that they have what it takes to succeed, and so they make more effort and are more likely to persevere if they have self-doubts when obstacles arise. Finally, the employee's negative emotional states may be reduced by applying stress-management techniques and enhancing positive emotional states by positive interventions (e.g., mindfulness). These principles to increase efficacy beliefs may also be applied by supervisors when coaching their employees (Biswas-Diener & Dean, 2007; Quick et al., 2006).

2.5. Career management

Career management represents a key organizational practice in developing HEROs. This strategy is especially fundamental nowadays, when the idea of a fixed career path has become obsolete and employees have to cope with a far more unstable job situation. More than ever before employees have to rely on their own initiative to continuously develop themselves both professionally and personally in order to remain employable. Employability also includes a high level of work engagement because it makes employees fitter to do the job and more successful at doing it. Organizations should motivate workers and give them opportunities to develop their career inside (promotions) or outside the company (Salanova & Llorens, 2007). Research has shown a positive gain-spiral between career development and work engagement. Those employees who carefully plan their career successively select jobs that provide ample opportunities for professional and personal development. Consequently, the levels of work engagement are high (see Salanova & Llorens, 2007). The mechanism for developing the present strategy is by: (1) periodically completing HERO audits, team members, their supervisor, the CEOs, and the customers can monitor the development of healthy and resilient employees, teams, and organizations as a whole over time; (2) including the development of specific skills and competencies in the *Employee Development Agreement*; (3) re-designing jobs and organizations or by changing the work places thereby fostering employee development; and (4) designing specific work training, especially to increase efficacy beliefs (both individual and collective) and work engagement (see Salanova & Schaufeli, 2009).

3. An overview of individual-based interventions from Positive Psychology

Positive interventions may also be focused on individual employees and they are complementary to the collective strategies described earlier. These strategies involve the person's core values, interests, and preferences; ultimately, they are about knowing oneself and could be applied not only at work but also outside, depending on the will of the individual. This not only implies that one is aware of one's talents, values, and goals at work, but also of how these fit into one's larger, existential scheme of things. Their aims are to increase the individual's level of happiness in employees and immediate supervisors, not only in the work context but also in general life, since they have a wider and more existential meaning. The benefits of these individual interventions are twofold: (1) they elicit positive reactions from others (in terms of smiling back, self-disclosure, kindness, and offering help and assistance), which encourages the employee to continue with the positive behavior; and (2) they increase not only the employee's well-being (e.g., work engagement) but also the social climate at work by fostering group cohesion, resolving conflicts, and increasing loyalty, team spirit, and pro-social behavior. Individual positive interventions are split into three levels, since they trigger changes in the individual's (1) behavior, (2) beliefs, or (3) goals and motives (see Schaufeli & Salanova, 2010).

3.1. Behavioral strategies

Practicing virtues. This strategy is based on the principle that sustained happiness is not fostered by the pursuit of pleasure (*hedonism*), but by leading a meaningful life (*eudaimonia*). In other words it means by living an authentic life and fully realizing one's strengths, talents, and potentials (Ryan & Deci, 2001). Hence, identifying (e.g., the *Signature Strength Questionnaire*; authentic happiness.org) and developing one's unique personal strengths – the so-called signature strengths – play a key role in increasing happiness (Peterson & Seligman, 2004). Several scholars have provided evidence for that. For example, in an internet study, Seligman, Steen, Park, and Peterson (2005) found that individuals who receive, individualized feedback about the top-five signature strengths and were encouraged to use them more often during the following week showed an increase in happiness, particularly when they were used *in a new and different way* each day of the week. Similarly, such individuals who take up activities in order to develop their dominant talents at work (assessed

by the *Strengths-Finder's* tool; Buckingham & Clifton, 2001) significantly increased employees' work engagement (Clifton & Harter, 2003).

Being kind to others. Practicing the act of kindness toward others (e.g., holding the door open for a stranger, visiting an elderly relative, or donating blood) boosts happiness (Boehm & Lyubomirsky, 2009). Kindness acts are likely to generate positive benefits in individuals since they: (1) elicit positive feedback (e.g., gratefulness and appreciation); (2) stimulate reciprocation and positive social interaction (e.g., helping of others); (3) help the person to view him/herself as altruistic; and (4) boost self-esteem and confidence. Empirical research shows that individuals who practiced acts of kindness during a ten-week period felt happier than before, particularly when they perform a wide variety of kindness acts in a short period of time. An interesting practice is to designate a "kindness day", on which kindness is practiced with colleagues, supervisors, and customers at work or with friends and family outside the work context.

Expressing gratitude. To express gratitude (e.g., writing and sending a letter of gratitude, saying words of appreciation, thanking someone for something) toward others (colleagues, supervisor, and customers) is also a positive intervention that enhances positive experiences (Emmons & Shelton, 2002; Schaufeli, Dijkstra, & Salanova, in press). Individuals who express gratitude are more likely to savor positive life experiences, bolster self-worth, build social bonds, and develop "an antidote to toxic workplace emotions" (Emmons, 2003, p. 90). Research about the positive effects of expressing gratitude reveals that, as expected, writing and sending a letter of gratitude to someone who has been especially kind or important (1) increases happiness in the individuals who express these feeling of gratitude (Seligman et al., 2005); (2) stimulates moral behavior such as helping, and helps build social bonds (McCullough, Kilpatrick, Emmons, & Larson, 2001); (3) is incompatible with negative emotions, and thus may inhibit feelings of envy, bitterness, anger, or greed (McCullough, Emmons, & Tsang, 2002); (4) enhances positive affect and other measures of well-being (Emmons & McCullough, 2003); (5) feels good and produces a cascade of beneficial social outcomes (e.g., repaying kindness creatively reflects, motivates and reinforces moral social actions, and increases the experience of the positive emotion of elevation – the desire to become a better person and perform helpful acts oneself) by upward spirals (see Fredrikson, 2003).

Learning to forgive. Forgiveness involves suppressing or mitigating one's motivation for revenge and retaliation

in response to an abuse such as an insult, an offence, a betrayal, a desertion, a missed opportunity for promotion, showing favoritism, violence, harassment or negative performance feedback by colleagues, supervisors or customers. There is evidence that people who forgive are likely to be happier, healthier, more agreeable and serene, as well as less anxious, depressed, and neurotic (McCullough, 2001). For instance, Hebl and Enright (1993) found that a group of elderly women who felt hurt by an abusive interpersonal experience and learned to forgive showed a lower level of anxiety and more self-esteem. Lyubomirsky (2007) offered examples of ways to forgive by: (1) writing a letter of forgiveness to someone who did wrong; (2) empathizing with an offender and granting him or her imaginary forgiveness; and/or (3) practicing empathy for the person that hurt you.

Sharing good news. Another efficacious positive intervention is to share good news with others at work (colleagues, supervisor, customers) or outside (family, friends) (see Schaufeli et al., in press). It seems that sharing good news or telling others about positive experiences has positive results, since they allow one (1) to increase positive emotions, and (2) to remember the good news, that is, to savor the experience over time (Gable, Reis, Impett, & Asher, 2004). According to Bakker, van Emmerik, and Euwema (2006), celebrating one's successes at work, such as having closed a lucrative business deal, together with other members of the team seems an effective way (1) to increase levels of happiness (in terms of work engagement), and (2) to bolster the team spirit because of the "contagion" of engagement in work teams.

Nurturing social relationships. Another way to intervene positively in individuals is by giving social support in times of crises. There are different ways of giving support, such as by providing practical help or assistance, emotional support, or information. Specifically, Salanova and Schaufeli (2009) pointed out different ways of nurturing social relationships in the workplace, namely: (1) by spending time together with colleagues and one's immediate supervisor (e.g., by socializing during work breaks instead of isolating themselves); (2) by talking not only about work but also about personal matters; (3) by being loyal and giving supportive help to others; (4) by listening to them; and (5) by giving them useful information. Different scholars reveal the positive impact of nurturing social support on health and well-being in terms of job satisfaction, self-reported health, less burnout, and less withdrawal intentions (see Viswesvaran, Sánchez, & Fischer, 1999).

3.2. Cognitive strategies

Counting one's blessings. This strategy implies savoring positive life experiences and this can be achieved in different ways: (1) by keeping a daily journal in which three to five things one is currently grateful for are written down, and (2) by choosing a fixed time and simply *contemplating* each of the things one is grateful for and reflecting on *why* one is grateful and *how* one's life has been enriched. Research offers evidence of the positive effect of these strategies in enhancing participants' happiness, as well as in buffering the embarrassment, shame or other negative emotions that could be experienced at work and which undermine self-honesty (see Emmons, 2003; Emmons & McCullock, 2003; Seligman et al., 2005).

Cultivating optimism. Optimism refers to the expectation that the future is bright and to the belief that one's goals can be accomplished (see Schaufeli et al., in press). There are two main ways to cultivate optimism: (1) by a mental exercise in which the individual should focus, visualize, and write a narrative description about one's "*best possible self*" in the future; and (2) by replacing pessimistic explanations ("*My boss did not speak to me today; he mustn't like me*"), through the use of disputation ("*What other evidence do I have that he doesn't like me?*"), and by more optimistic explanations ("*He was probably too busy*"). In fact, research shows that these two strategies (1) increase happiness and decrease physical ailments in the five months after the writing sessions (King, 2001), and (2) generate a learning and optimistic attributional style (Seligman, 1991).

Savoring. This strategy implies being able to mindfully accentuate and sustain pleasurable moments, and to deliberately remember experiences in a way that rekindles enjoyment. Various strategies have been suggested to foster savoring: (1) reminiscence together with colleagues; (2) recalling happy days; (3) being open to beauty and excellence; (4) taking pleasure in the senses; (5) stepping back, taking time out, and deliberately shifting one's attention to particular pleasurable events and experiences; or simply (6) enjoying one's coffee or looking back at a joint festivity with the colleagues (Lyubomirsky, 2007; Schaufeli & Salanova, 2010). Empirical data support an increase in self-confidence, extroversion, and less hopelessness and depression (Bryant & Veroff, 2007), but more happiness as a result of these kinds of strategies (Lyubomirsky, Sousa, & Dickerhoof, 2006).

3.3. Volitional strategies

Setting and pursuing personal goals. This strategy implies clarifying, choosing, and achieving personal goals

which are meaningful and important for the individual in the long term. According to Lyubomirsky (2007), three types of personal goals could be distinguished: intrinsic (gratifying in themselves), authentic (rooted in one's core interests), and harmonious (complementary rather than conflicting). This author also established different ways to set and pursue personal goals properly: (1) by writing down the personal legacy that one would leave after one had died; (2) by critically examining one's commitment to a particular goal ("*Is one really committed to the goal with passion and zeal?*"); and/or (3) by breaking down a higher-level goal (e.g., being promoted to supervisor) into smaller low-level goals (e.g., following leadership training and being a more active networker). Different scholars show the effectiveness of these strategies. In particular, research has revealed that goal attainment leads to enhanced well-being and personal growth, but only for those participants whose goals "fit" their interests and values (Sheldon, Kasser, Smith, & Share, 2002). In addition, a brief intervention involving the development of goal-setting and planning skills revealed an increase in life satisfaction, efficacy beliefs, and positive affect (MacLeod, Coates, & Hetherington, 2008). Similar results were obtained by Dubé, Lapierre, Bouffard, and Alain (2007), where a personal goal-based intervention showed that, at the end of the program, the experimental group had improved significantly more than the control group in the majority of the goals and subjective well-being (happiness, positive experience with retirement, environmental mastery, personal growth, purpose in life, and relations with others), and this gain was maintained six months later.

Increase resilience. Resilient individuals are those who, despite being confronted with a major challenge that unsettles their personal foundations, are able to report personal growth, strengthening or even thriving, and develop a more sophisticated and satisfying philosophy of life (Tedeschi & Calhoun, 2004). In the work context, resilience is conceptualized as the maintenance of positive adjustment under challenging conditions; more specifically, it refers to the ability to bounce back from untoward events, to absorb strain, and to preserve or improve functioning despite the presence of adversity (Sutcliffe & Vogus, 2003). Different strategies can be used to foster resilience: (1) writing about one's deepest thoughts and feelings related to the negative event for about fifteen to thirty minutes each day (3 to 5 consecutive days); and (2) by offering adequate job resources (e.g., colleague and supervisory support, job control), and mastery motivation (e.g., optimism, self-efficacy). Research shows evidence for both strategies. Specifically, they lead to enhanced immune functioning, physical health, life

satisfaction, and the likelihood of finding a new job after unemployment, on the one hand, and decreased depression, anxiety, distress, and work absenteeism levels, on the other hand (Frattaroli, 2006).

Conclusions

In this article, we have argued that the emerging concept of Healthy & Resilient Organization (HERO) is a role model of a positive organization that flourishes in times of crisis and turmoil such as those we are experiencing today. We have introduced the recently-emerged concept of HEROs, and discussed its foundations as well as how HEROs can be measured. In addition, we have explored how organizations may be enhanced using various strategies. Six main conclusions can be drawn from the brief overview of empirical studies on HEROs:

1. The so-called *HERO Model* is a heuristic theoretical model that integrates results from empirical and theory-based evidence on topics such as job stress, HRM, organizational behavior, and POHP.
2. HEROs make systematic, planned, and proactive efforts to improve employees' and organizational processes and outcomes (Salanova et al., 2012). These efforts involve fostering healthy organizational resources and practices aimed at improving the work environment at the task, interpersonal, and organizational levels, especially during times of change and crisis.
3. Positive organizations are "resilient" because they maintain positive adjustment under challenging conditions, bounce back from untoward events, and maintain desirable functions and outcomes in the midst of strain.
4. The *HERO Model* has five main advantages: (1) data are collected from different respondents; (2) qualitative and quantitative methodologies are used; (3) data analyses are computed at the collective level following a multilevel perspective; (4) integrates results from healthy organizations, occupational health, and organizational resilience; and (5) both objective and subjective indicators from the organizations are included.
5. A psychometric evaluation of a HERO using qualitative and quantitative techniques – the HERO Scales – showed satisfactory validity and reliability in a wide range of different organizations in various occupational sectors (Salanova et al., 2012).
6. Organizations can be enhanced from an *Amplification Model* that promotes, increases, and improves health and well-being at the collective and individual levels (teams and organizations), and includes three characteristics, i.e., comprehension, inclusion, and effort.

The second part of this article focused on the practical strategies that can be used to enhance organizations from a Positive Psychology point of view. The main objective was to explore what organizations can do to increase levels of positivity among their employees and teams, using collective strategies from HRM strategies such as HERO assessment and evaluation, job (re)design, positive and transformational leadership, training, and career development. However, as individual employees can also increase their levels of well-being and satisfaction in their jobs and so individual strategies can be used as well. Based on this overview, the following five conclusions may be drawn:

1. HERO assessment and evaluation can be used in important strategies such as talent attraction, recruitment, selection and retention; establishing and monitoring the psychological contract; periodic HERO audits; and workshops on positive experiences.
2. Job (re)design may enhance positive organizations by making use of the motivating potential of job resources. Hence, (re)designing jobs in order to promote positivity boils down to increase job resources. Job rotation and changing jobs might also result in higher levels of well-being because they challenge employees, increase their motivation, and stimulate learning and professional development. Investing in healthy practices increases levels of healthy employees in terms of organizational trust and engagement at work.
3. A transformational leader is positive because he/she is charismatic, inspiring, and a visionary. Moreover, he/she motivates employees, displays conviction, takes stands, challenges followers with high standards, communicates optimism about future goal attainment, stimulates and encourages creativity and innovation, self-efficacy, and work engagement, and listens to followers' concerns and needs.
4. Training programs in organizations that aim to enhance employees' levels of well-being and health should focus on building efficacy beliefs, which serve as a kind of self-motivating mechanism. In other words, high levels of self-efficacy set in motion an upward gain-spiral that boosts engagement and subsequent performance, which in turn increases efficacy beliefs, and so on. Mastery experiences are the most powerful tools to enhance efficacy beliefs, followed by vicarious experiences, verbal persuasion, and positive emotions that build positive spirals of success and well-being.

5. Career planning and development in modern organizations essentially boils down to increasing employability and HEROs. This is achieved by ensuring continuous personal and professional development, whereby employees have to rely more and more on their own initiative. Provided that employees are able to keep developing themselves throughout their careers, their levels of positivity are likely to remain high.

On the other hand, individual strategies to improve positivity in organizations are also possible. These strategies increase the individual's level of happiness in employees and immediate supervisors in the work context but also in general life, since they have a wider and more existential meaning, thereby offering benefits such as: positive reactions from others, which encourages the employee to continue with the positive behavior, thus increasing the employee's well-being and improving the social climate at work. In this article various positive interventions have been described and discussed, but they have been split into three levels, since they bring about changes in the individual's (1) behavior (by practicing virtues, kindness, gratitude, forgiveness, sharing good news, and investing in social relationships); (2) beliefs (blessings, cultivating optimism, and practicing savoring); or (3) goals and motives (pursuing goals, and increasing resilience). A main conclusion of these different strategies focuses on the importance of persisting in the use of the strategies over time, and also of using a variety of them. Moreover, a mix of collective and individual positive strategies would be desirable in order to enhance positive employees in positive organizations.

To sum up, we believe that organizations could be enhanced using positive interventions from the Positive Psychology framework. In this article, we have reviewed the research conducted on the concept and measurement of HEROs. The results have enabled us to determine what organizations display positive functioning and what individual and collective interventions promote flourishing within organizations. Enhancing organizations from a psychological point of view could be summed up by the saying "Healthy employees working in healthy organizations".

References

- Acosta, H., Salanova, S., & Llorens, S. (2012). How organizational practices predict team work engagement: The role of organizational trust [Special issue]. *Ciencia & Trabajo*, 7-15. Retrieved from http://issuu.com/cienciaytrabajo/docs/work_engagement
- Avolio, B. J. (1999). *Full Leadership Development: Building the Vital Forces in Organizations*. London: Sage.
- Bakker, A. B., Le Blanc, P. M., & Schaufeli, W. B. (2005). Burnout contagion among nurses who work at intensive care units. *Journal of Advanced Nursing*, 51, 276-287.
- Bakker, A. B., Van Emmerik, H., & Euwema, M. C. (2006). Crossover of burnout and engagement in work teams. *Work & Occupations*, 33, 464-489.
- Bandura, A. (2001). Social cognitive theory: An agentic perspective. *Annual Review of Psychology*, 52, 1-26.
- Bass, B. M. (1985). *Leadership and performance beyond expectations*. New York: Free Press.
- Biswas-Diener, R., & Dean, B. (2007). *Positive psychology coaching: Putting the science of happiness to work for your clients*. New York: John Wiley & Sons.
- Boehm, J. K., & Lyubomirsky, S. (2009). The promise of sustainable happiness. In S. J. Lopez (Ed.), *Handbook of positive psychology* (pp. 667-677). Oxford: Oxford University Press.
- Bryant, F. B., & Veroff, J. (2007). *Savoring: A new model of positive experience*. Mahwah, NJ: Lawrence Erlbaum.
- Buckingham, M., & Clifton, D. (2001). Now, discover your strengths. *Journal of Religious Leadership*, 2, 213-227.
- Cifre, E., Salanova, M., & Rodríguez-Sánchez, A. (2011). Dancing between theory and practice: Enhancing work engagement through work stress intervention. *Human Factors and Ergonomics in Manufacturing & Service Industries*, 21, 269-286.
- Clifton, D. O., & Harter, J. K. (2003). Strengths investment. In K. S. Cameron, J. E. Dutton, & R. E. Quinn (Eds.), *Positive organizational scholarship* (pp. 111-121). San Francisco: Berrett-Koehler.
- Cruz, V., Salanova, M., & Martínez, I. M. (in press). Liderazgo transformacional y desempeño grupal: Unidos por el engagement grupal [Transformational leadership and group performance: Linking by the group engagement]. *Revista de Psicología Social*.
- Del Libano, M., Llorens, S., Salanova, M., & Schaufeli, W. B. (2012). About the bright and dark sides of self-efficacy: Work engagement and workaholism. *The Spanish Journal of Psychology*, 15, 688-701.
- Dubé, M., Lapiere, S., Bouffard, L., & Alain, M. (2007). Impact of a personal goals management program on the subjective well-being of young retirees. *European Review of Applied Psychology*, 57, 183-192.
- Emmons, R. A. (2003). Acts of gratitude in organizations. In K. S. Dutton, J. E. Dutton, & R. E. Quinn (Eds.), *Positive Organizational Scholarship* (pp. 81-93). San Francisco: Berrett-Koehler.
- Emmons, R. A., & McCullough, M. E. (2003). Counting blessings versus burdens: An experimental investigation of gratitude and subjective well-being in daily life. *Journal of Personality and Social Psychology*, 84, 377-389.
- Emmons, R. A., & Shelton, C. M. (2002). Gratitude and the science of positive psychology. In C. R. Snyder, & S. J. Lopez (Eds.), *Handbook of Positive Psychology* (pp. 459-471). New York, NY: Oxford University Press.
- EU-OSHA, European Agency for Safety and Health at Work (2012). *Management Leadership in Occupational Safety and Health. A practical Guide*. Brussels: Business Europe.
- Frattaroli, J. (2006). Experimental disclosure and its moderators: A meta-analysis. *Psychological Bulletin*, 132, 823-865.
- Fredrickson, B. L. (2003). The value of positive emotions. *American Scientist*, 91, 330-335.
- Gable, S. L., Reis, H. T., Impett, E. A., & Asher, E. R. (2004). To whom do you turn when things go right? The intrapersonal and interpersonal benefits of sharing positive events. *Journal of Personality and Social Psychology*, 87, 228-245.
- George, J. M. (1996). Group affective tone. In M. A. West (Ed.), *Handbook of work group psychology* (pp. 77-94). Chichester: John Wiley and Sons.
- Hebl, J. H., & Enright, R. D. (1993). Forgiveness as a psychotherapeutic goal with elderly females. *Psychotherapy: Theory, Research, Practice and Training*, 30, 658-667.
- King, L. A. (2001). The health benefits of writing. *Personality and Social Psychology Bulletin*, 27, 798-807.

- Le Blanc, P. M., Schaufeli, W. B., Salanova, M., Llorens, S., & Nap, R. E. (2010). Efficacy beliefs predict collaborative practice among intensive care unit nurses. *Journal of Advanced Nursing*, *66*, 583-594.
- Llorens, S., Salanova, M., & Losilla, J. (2009). Liderazgo transformacional y capital psicológico positivo: Un estudio de caso en una empresa de construcción [Transformational leadership and positive psychological capital: A case study in a construction organization]. *Directivos construcción*, *220*, 48-56.
- Llorens, S., Salanova, M., & Rodríguez, A. (2012). How is flow experienced and by whom? Testing flow among occupations. *Stress & Health*. Advance online publication.
- Llorens, S., Salanova, M., Torrente, P., & Acosta, H. (in press). Interventions to promote Healthy & Resilient Organizations (HERO) from Positive Psychology. In G. Bauer, & G. Jenny (Eds.), *Concepts of salutogenic organizations and change: The logics behind organizational health intervention research*. Zurich: Springer.
- Llorens, S., Schaufeli, W. B., Bakker, A. B., & Salanova, M. (2007). Does a positive gain spiral of resources, efficacy beliefs and engagement exist? *Computers in Human Behavior*, *23*, 825-841.
- Lyubomirsky, S. (2007). *The how of happiness: a practical guide to getting the life you want*. London: Sphere.
- Lyubomirsky, S., Sousa, L., & Dickerhoof, R. (2006). The costs and benefits of writing, talking, and thinking about life's triumphs and defeats. *Journal of Personality and Social Psychology*, *90*, 692-708.
- MacLeod, A. K., Coates, E., & Hetherington, J. (2008). Increasing well-being through teaching goal-setting and planning skills: Results of a brief intervention. *Journal of Happiness Studies*, *9*, 185-196.
- McCullough, M. E. (2001). Forgiveness: Who does it and how do they do it? *Current Directions in Psychological Science*, *10*, 194-197.
- McCullough, M. E., Emmons, R. A., & Tsang, J. A. (2002). The grateful disposition: A conceptual and empirical topography. *Journal of Personality and Social Psychology*, *82*, 112-127.
- McCullough, M. E., Kilpatrick, S. D., Emmons, R. A., & Larson, D. B. (2001). Is gratitude a moral affect? *Psychological Bulletin*, *127*, 249-266.
- McDonald, G., Jackson, D., Wilkes, L., & Vickers, M. H. (2012). A work-based educational intervention to support the development of personal resilience in nurses and midwives. *Nurse Education Today*, *32*, 378-384.
- Nielsen, K., Yarker, J., Randall, R., & Munir, F. (2009). The mediating effects of team and self-efficacy on the relationship between transformational leadership, and job satisfaction and psychological well-being in healthcare professionals: A cross-sectional questionnaire survey. *International Journal of Nursing Studies*, *46*, 1236-1244.
- Peterson, C., & Seligman, M. E. P. (2004). *Character strengths and virtues: A handbook of classification*. New York, NY: Oxford University Press.
- Phillips, J. (2005). Knowledge is power: Using nursing information management and leadership interventions to improve services to patients, clients and users. *Journal of Nursing Management*, *13*, 524-536.
- Quick, J. C., Macik-Frey, M., Mack, D. A., Keller, N., Gray, D. A., & Cooper, C. L. (2006). Healthy leaders, healthy organizations: primary prevention and the positive effects of emotional competence. *Stress and quality of working life: Current perspectives in occupational health*. (pp. 137-153). Greenwich, CN: Information Age Publishing.
- Robertson, M. M., & Huang, Y. H. (2006). Effect of a workplace design and training intervention on individual performance, group effectiveness and collaboration: The role of environmental control. *Work*, *27*, 3-12.
- Rodríguez, A. M., Llorens, S., & Salanova, M. (2006). Taller de trabajo sobre inteligencia emocional en enfermeras: Eficacia a corto plazo [Workshop on emotional intelligence in nurses: Short time efficacy]. *Gestión Práctica de Riesgos Laborales*, *29*, 46-51.
- Ryan, R. M., & Deci, E. L. (2001). To be happy or to be self-fulfilled: A review of research on hedonic and eudaemonic well-being. *Annual Review of Psychology*, *52*, 141-166.
- Salanova, M., Bakker, A., & Llorens, S. (2006). Flow at work: Evidence for a gain spiral of personal and organizational resources. *Journal of Happiness Studies*, *7*, 1-22.
- Salanova, M., & Llorens, S. (2007). *Desarrollo de Recursos Humanos a través del aprendizaje para el cambio* [Human resource development through learning for change]. Madrid: Parthenon.
- Salanova, M., Llorens, S., Cifre, E., & Martínez, I. M. (2012). We need a HERO! Towards a validation of the Healthy & Resilient Organization (HERO) Model. *Group & Organization Management*, *37*, 785-822.
- Salanova, M., Llorens, S., Cifre, E., Martínez, I. M., & Schaufeli, W. B. (2003). Perceived collective efficacy, subjective well-being, and task performance among electronic work groups: An experimental study. *Small Group Research*, *34*, 43-73.
- Salanova, M., Llorens, S., & Rodríguez-Sánchez, A. (2009). Hacia una psicología de la salud ocupacional más positiva [To a more positive occupational health psychology]. In M. Salanova (Ed.), *Psicología de la Salud Ocupacional* (pp. 247-284). Madrid: Editorial Síntesis.
- Salanova, M., Llorens, S., & Schaufeli, W. B. (2011). Yes, I can, I feel good, and I just do it! On gain cycles and spirals of efficacy beliefs, affect, and engagement. *Applied Psychology*, *60*, 255-285.
- Salanova, M., Lorente, L., Chambel, M. J., & Martínez, I. M. (2011). Linking transformational leadership to nurses' extra-role performance: the mediating role of self-efficacy and work engagement. *Journal of Advanced Nursing*, *67*, 2256-2266.
- Salanova, M., Martínez, I. M., Cifre, E., & Llorens, S. (2009). La salud ocupacional desde la perspectiva psicosocial: Aspectos teóricos y conceptuales [The occupational health from the psychosocial perspective: Theoretical and conceptual aspects]. In M. Salanova (dir.), *Psicología de la Salud Ocupacional* (pp. 27-62). Madrid: Editorial Síntesis.
- Salanova, M., Martínez, I., & Llorens, S. (2012). Success breeds success, especially when self-efficacy is related to an internal attribution of causality. *Estudios de Psicología*, *33*, 151-165.
- Salanova, M., Peiró, J. M., & Schaufeli, W. B. (2002). Self-efficacy specificity and burnout among information technology workers: An extension of the job demand-control model. *European Journal of Work and Organizational Psychology*, *11*, 1-25.
- Salanova, M., & Schaufeli, W. B. (2009). *El engagement en el trabajo. Cuando el trabajo se convierte en pasión* [Work engagement: When work turns into passion]. Madrid: Alianza.
- Schaufeli, W. B., Dijkstra, P., & Salanova, M. (in press). *Engaged en el trabajo* [Engagement at work]. Madrid: Síntesis.
- Schaufeli, W. B., & Salanova, M. (2010). How to improve work engagement? In S. L. Albrecht (Ed.), *Handbook of Employee Engagement. Perspectives, Issues, Research and Practice* (pp. 399-415). Northampton, MA: Edward Elgar.
- Schaufeli, W. B., Taris, T., Le Blanc, P., Peeters, M., Bakker, A., & De Jonge, J. (2001). Maakt arbeid gezond? Op zoek naar de bevlogen werknemer [Does work make healthy? In search of the engaged worker]. *De Psycholoog*, *36*, 422-428.
- Seligman, M. E. P. (1991). *Learned optimism: How to change your mind and your life*. New York: Simon & Schuster.
- Seligman, M. E. P., & Csikszentmihalyi, M. (2000). Positive psychology: An introduction. *American Psychologist*, *55*, 5-14.
- Seligman, M. E. P., Steen, T., Park, N., & Peterson, C. (2005). Positive psychology progress: Empirical validation of interventions. *American Psychologist*, *60*, 410-421.
- Sheldon, K. M., Kasser, T., Smith, K., & Share, T. (2002). Personal goals and psychological growth: Testing an intervention to enhance goal-attainment and personality integration. *Journal of Personality*, *70*, 5-31.
- Sin, N. L., & Lyubomirsky, S. (2009). Enhancing well-being and alleviating depressive symptoms with positive psychology interventions: A practice-friendly meta-analysis. *Journal of Clinical Psychology*, *65*, 467-487.
- Staw, B. M., Sutton, R. I., & Pellod, L. H. (1994). Employee positive emotion and favorable outcomes at the workplace. *Organizational Science*, *5*, 51-71.
- Sutcliffe, K. M., & Vogus, T. (2003). Organizing for resilience. In K. S. Cameron, J. E. Dutton, & R. E. Quinn (Eds.), *Positive Organizational Scholarship* (pp. 94-110). San Francisco: Berrett-Koehler.

- Tedeschi, R. G., & Calhoun, L. G. (2004). Posttraumatic growth: Conceptual foundations and empirical evidence. *Psychological Inquiry, 15*, 1-18.
- Torrente, P., Salanova, M., Llorens, S., & Schaufeli, W. B. (2012). Teams make it work: How team work engagement mediates between social resources and performance in teams. *Psicothema, 24*, 106-112.
- Vera, M., Salanova, M., & Lorente, L. (2012). The predicting role of self-efficacy in the Job Demands-Resources Model: A longitudinal study. *Estudios de Psicología, 33*, 167-178.
- Viswesvaran, C., Sánchez, J. I., & Fisher, J. (1999). The role of social support in the process of work stress: A meta-analysis. *Journal of Vocational Behavior, 54*, 314-334.
- Weick, K. E. (1985). Systematic observational methods. In G. Lindzey, & E. Aronson (Eds.), *The Handbook of Social Psychology Bulletin* (pp. 567-634). Hillsdale, NJ: LEA.
- Xanthopoulou, D., Bakker, A. B., Demerouti, E., & Schaufeli, W. B. (2007). The role of personal resources in the Job Demands-Resources Model. *International Journal of Stress Management, 14*, 121-141.

