EMPOWERING YOUTH: PROMOTING SUBJECTIVE WELL-BEING AMONG THAI ADOLESCENTS OF LOW SOCIOECONOMIC STATUS THROUGH POSITIVE PSYCHOLOGY INTERVENTION

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Abstract: This quiz-experimental study examined the effectiveness of a 10-hour workshop-based intervention program that incorporated positive psychology strategies. Participants in the study included 72 Thai adolescents age 14 to 17 years with low socioeconomic status from four Fai-Fah centers, two of which were randomly assigned to one of two experimental conditions: (1) the *Positive Empowerment for Adolescents* (PEA) group or (2) the expressive writing and reading control group. PEA is a series of positive psychology interventions including character strength enhancement, goal setting, problem solving skills, and gratitude journaling and letter writing. Data were collected on participants at pre-and-post intervention including self-report measures of life satisfaction, positive affect ratio, self-efficacy, and perceived social support, by using Brief Multidimensional Students' Life Satisfaction Scale (BMLSS), Positive and Negative Affect Schedule for Children (PANAS-C), Self-Efficacy Questionnaire for Children (SEQ-C), and Child and Adolescent Social Support Scale (CASSS) respectively. The results suggested that the PEA intervention program had a significant effect on the level of self-efficacy and perceived social support, although there were no significant effects on positive affect ratio. Surprisingly, the control group subjects showed a significantly higher level of life satisfaction than the experimental group. Integration of the expressive writing and reading found to be effective at raising life satisfaction from the control group, as well as elements of traditional Thai cultural practices such as meditation are recommended to help strengthen the PEA intervention program.

Keywords: Adolescents, Subjective Well-Being, Self-Efficacy, Perceived Social Support, Positive Psychology, Gratitude, Goal-Setting, Strength-Based Intervention, Problem-Solving, Low Socioeconomic Status.

Introduction

Adolescence is one of the most difficult developmental stages due to pubertal effects on cognitive capability, physical maturity, emotional adjustment, and intensified self-evaluation. Challenges are even greater for those who come from families of low

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socioeconomic status. This study attempted to improve the subjective well-being (SWB) of adolescents of low socioeconomic status in Bangkok, Thailand, taking a critical look at the effectiveness of an intervention program that incorporated positive psychology strategies.

Literature Review

Subjective well-being and adolescence: There are three elements or components in the model of subjective well-being (SWB) utilized for this study. The first component, *life satisfaction,* is one's assessment of one's own life. The second and third components are *positive affect* and *negative affect* which represent the emotional side of SWB.

There is a much smaller body of studies focused on children's and adolescents' subjective well-being compared to studies of adults. Adolescence is considered one of the most difficult stages in life due to the rapid changes in both physical and psychological aspects of the individual. It is a phase when individuals transform from children to adults. It is the period during which individuals wrestle most painfully with issues of authenticity because they have the cognitive ability to recognize contradictory attributes: one which typically reflects their true self, and one that represents displays of false-self behavior. However, they do not have the ability to resolve such conflicts (Harter and Monsour, 1992). Not surprisingly, adolescence has become one of the most explored developmental stages in psychological science.

Subjective well-being and low socioeconomic status: Research on well-being revealed a strong association between income and life evaluation at the individual level (Diener, 2010). Past research has also explored the impact of socioeconomic status on adolescents' level of well-being. For example, a study that looked at the relationship between low-income children's and adolescents' level of well-being and housing characteristics found that poor housing quality was strongly associated with children's and adolescents' development. Correlates included lower emotional and behavioral functioning and lower cognitive skills (Coley, 2013). Thus, it appears that there is a strong link between well-being and level of income.

Self-efficacy in adolescents: Self-efficacy beliefs are a person's beliefs about his or her own ability to produce desired outcomes through one's own actions (Lopez, 2009). These beliefs are among the most important determinants of the behaviors people choose to engage in and often determine how much effort they will put forth in the face of obstacles and challenges (Bandura, 1997). In addition, it is considered as one of the key characteristics promoted among adolescents. Adolescence is the developmental stage of finding self-identity and social belonging (Somogyi, 2003). It is the stage where self-esteem may be most repressed. Although self-efficacy and self-esteem are not the same, they are highly related. An increase in self-efficacy levels in a particular domain contributes to an increase in self-esteem in the same domain (Maddux, 1999). As a result, many researchers have studied the relationship between high self-efficacy beliefs and other beneficial outcomes.

Social Support: Social support refers to the social-psychological and interpersonal processes that maintain and promote health and well-being (Gottlieb & Bergen, 2010). Normally, the sources of social support for any individual inhabit the inner circle for that person and are usually composed of family members or close

friends. The types of social support include practical aid, socializing and companionship, cognitive guidance, reassurance of worth, and emotional nurturance (Bird, 2014). However, connection to social support does not imply that the person needs to be surrounded by, or is dependent on, those they value. Instead, it had been shown that receiving social support is not necessary for achieving beneficial outcomes; the mere perception that one has received support is often adequate (White, 2009). However, a sense of social belonging is central in adolescence for sustaining a sense of well-being, considering that this period can be one of the loneliest times in life if one experiences rejection, social isolation, or lack of social support (Fris én, 2007). Thus, it can be hypothesized that perceived social support is positively related to adolescents' life satisfaction. Malecki and Demaray (2002) posited four sources of perceived social support: parents, teachers, classmates, and close friends.

Positive Psychology and Adolescents: Positive psychology has introduced a new psychological perspective; that is, instead of continuing traditional approaches which focused on treating psychopathology, positive psychology emphasizes using the scientific method to study and to assist individuals and organizations in promoting and sustaining their well-being. Adolescence has been studied by many positive psychology researchers as it is a time of significant physical and psychological development. It is a period characterized by instability of self-image, decreased self-esteem, and increased self-consciousness (Berger, 2014). In many cases, these changes lead to negative outcomes such as antisocial behavior, delinquency, and aggression. As a result, the question of how youth can function and flourish in human systems has become a major topic of interest in positive psychology.

Positive intervention: Previous validations of positive interventions have shown that they are a structured means to measurably increase happiness and improve well-being (Seligman, Steen, Park, & Peterson, 2005). Empirical studies and meta-analyses have supported the efficacy and effectiveness of positive interventions. *Efficacy,* as defined here, means the capacity or potential to bring about significant results in clinical trials under controlled conditions, whereas *effectiveness* is the ability to yield results in non-controlled conditions. A meta-analysis of 51 different empirical studies on positive interventions found a strong correlation between the interventions and increased well-being as well as decreased depression (Sin & Lyubomirsky, 2009). As a result, positive interventions have been empirically demonstrated to be effective and are being widely applied by psychologists with many populations.

The current study was conducted to test the effectiveness in increasing the SWB of the *Positive Empowerment for Adolescents* (PEA) intervention program among Thai adolescents of low socioeconomic status. The program was inspired by evidence-based interventions from previous positive psychology studies on participants' levels of self-efficacy, perceived social support, and subjective well-being. The intervention program was mainly adapted from a study by Bird (2014) using combined activities that aimed to increase the subjective well-being of participants via activities such as goal setting, problem-solving skills, gratitude journaling, and character strengths awareness. With the view to investigate the effectiveness of the PEA intervention, it was necessary to compare two groups: an experimental group and a control group, using a *pre-post* repeated-*measures*, *design.*

Based on the previously mentioned links among subjective well-being, self-efficacy, perceived social support and positive psychology interventions, the research questions of current study are as follows: Is the positive psychology-based intervention effective in promoting subjective well-being among Thai adolescents of low socioeconomic status? Will the participants of the PEA intervention report significantly higher levels of subjective well-being (life satisfaction and positive affect), self-efficacy, and perceived social support?

In an attempt to answer the research questions, the researcher hypothesizes that the positive psychology-based intervention is effective in promoting subjective well-being among Thai adolescents of low socioeconomic status as evidenced by the participants of the PEA intervention reporting significantly higher levels of subjective well-being (life satisfaction and positive affect), self-efficacy, and perceived social support after participating in the intervention.

Research Design

In the current study, a pretest-posttest, controlled study was applied. The independent variables in the study consisted of Positive Empowerment for Adolescents (PEA) interventions, which are workshops that incorporate various positive psychology-based interventions. The dependent variables in the study include levels of subjective well-being, self-efficacy, and perceived social support.

Participants inclusion criteria: In order to be included in the study, participants must meet the following criteria (1) age between 13 and 18 years (adolescent); (2) Thai national; (3) household income is lower than the Bangkok average of THB 45,571; (4) attends school in Bangkok or nearby areas; (5) is willing to participate in the study; (6) must have been involved in the Fai-Fah program for less than six months, in order to avoid any beneficial effect from engaging in extracurricular activities offered at the center.

Intervention parameters, *Fai-Fah program by TMB:* As part of a long-term corporate social responsibility program initiated by the Thai Military Bank (TMB) that aimed to give back to communities, the Fai-Fah program was launched in mid-2009. With the goals of providing a safe environment for adolescents to spend their leisure time, participate in activities of their choice, or work on 'life skills' that enhance their psychological well-being, the program offers activities in the arts, music, and sports.

The current study was conducted at Fai-Fah centers across Bangkok, which took three weekend afternoons (a total of 10 hours) to complete. Since there are four Fai-Fah centers in Bangkok, subjects from two centers were randomly assigned to the intervention group, while subjects from the two other centers were randomly assigned to the control (non-intervention) group.

Positive empowerment for adolescent: Positive Empowerment for Adolescents (PEA) is aimed to increase adolescents' levels of subjective well-being. By the same token, Bird (2014) used similar positive psychology interventions with adolescents who were susceptible to risky behaviors over a period of two weeks. With the relative success of the aforementioned interventions, the current study adapted this program (with some modifications) in order to maximize the benefits for the Thai adolescents

with low social economic status background. The package of interventions that were included in the PEA workshops applied in current study included the following:

Character strength intervention: Adolescents assigned to PEA intervention groups were asked to complete (with help from a mentor) the online Thai version of the Revised Values in Action Inventory of Strengths for Youth (VIA-Youth) (Park & Peterson, 2006), to evaluate their top five signature character strengths. After completing the VIA-Youth inventory and receiving the results, the adolescents were divided into small groups to discuss their character strengths, note their differences, and explore how these can be used in the future to increase success in important aspects in their lives. The session required about two hours to complete.

Goal setting: This intervention introduced goal setting tools to help participants set both short- and long-term personal goals that are attainable and realistic, including a comprehensive evaluation of each individual's capacity to manage and work towards those goals. Past studies showed that people who set specific and challenging goals have higher ratings with regard to work performance and self-efficacy (e.g., Locke, 1996). During the workshop, participants in the PEA intervention group identified one to three short-term goals to work towards. The SMART goal setting method was introduced as being composed of five elements: Specific, Measurable, Achievable, Relevant, and Timely. The tool has been widely used in government, corporate, and education sectors (O'Neil, 2000). Using SMART goal setting tools, participants listed individual goals and created up to five plans with strategies to obtain those goals. In addition, participants were asked to integrate their personal strengths discovered from previous activity with those strategies. The session required about two hours to complete.

Movie watching workshop: This activity acted as a supplement to the character strengths and goal setting interventions. According to Rufer (2014), movies can be good tools to draw interest from adolescents and, if applied correctly, are an excellent way to trigger discussion of questions and topics. As applied in current study, participants watched the selected movie together, followed by a group discussion that utilized a prepared set of questions that are positive psychology-related. The animated film, "Big Hero 6" was chosen for use in this study since it touched on many of current intervention's key topics. In addition, the movie is inspiring, uplifting in tone, and is relevant to the human condition.

After the movie-watching session, a class discussion was held which centered on the following prepared questions:

1. What are Hiro's strengths? When a person realizes his strengths, how does it help him to pursue his goal?
2. What are Hiro's and Tadashi's life goals? Do they come easy? What characteristics do both share in common when pursuing their goals?
3. In the movie, the hero's team encountered the villain twice, both yielding very different results. What changed in the hero's team?
4. The movie provided many scenarios that involved grief and sorrow, as well as each person's approach on coping with that sorrow (Hiro *vs.* Callaghan); which approach do you think is healthy?
5. If you were Hiro, what things should you be grateful for?

To answer these questions, participants were divided into small groups with research staff who helped facilitate the discussions. The session required about two hours to complete.

Problem solving skills: This intervention introduced problem-solving skills training by focusing on present and prospective experiences as a means to increase their subjective well-being level. The PEA intervention groups participated in a series of school and social life-related problem-solving scenarios. Participants were introduced to the Six Steps Problem Solving Method, an approach that has been effectively incorporated by research practitioners in diverse fields of scientific study (Cottrell & Eisenberg, 2001). The Six Steps of Problem Solving model consists of the following components: (1) Defining the problem; (2) Analyzing the problem; (3) Developing possible solutions; (4) Selecting a solution; (5) Implementing the solution; and (6) Evaluating the outcome. *Problem solving* models can be used to address *issues* that occur regularly within the environment.

Next, the participants were divided into teams of three to five and given prepared problem scenarios. Each team worked together on how to solve the problem, and then performed a role-play scenario in front of everybody. After all teams have completed their role-playing exercise, the participants discussed how well the problem was handled as well as other plausible solutions. Examples of problem scenarios included: observing peers cheating on exams, handling threats of cyberbullying, dealing with school gossip and false rumors, and choosing a future career. After covering all the scenarios, the research staff provided constructive feedback to the group concerning their responses to the problem scenarios. The session required about two hours to complete.

Gratitude journaling and letter writing: In an adaptation of Froh and Parks' (2013) activities for teaching positive psychology, participants in the PEA intervention group were instructed to list five or more things that they felt grateful for over the past few months of their lives. More specifically, they were prompted to write individually for 15 minutes about what they were most grateful for and other positive experiences in life. Research staff clarified or provided examples of what could be counted as things to be grateful for, in case there were any questions from the participants during the journaling session. After the writing period, participants were asked to share their positive experiences and feelings of gratitude with the rest of the group.

In addition, before the last session of the intervention, participants were instructed to write a brief letter of gratitude to someone in their life who has influenced them in a positive way. The letter of gratitude could be either handwritten or typed, addressed to a family member, teacher, friend, or other community member. After completing their letters and bringing them to the last session, participants were given the opportunity to share with the rest of the group some details about who their letter was addressed to and for what reason. The session required about two hours to complete.

Positive interventions have demonstrated some initial empirical support for improving critical outcomes related to positive youth development. The topic of positive psychology is relatively new in Thailand, compared to other fields of psychology. Not surprisingly, there is a scarcity of Thai-based research studies on positive psychology interventions involving adolescents, especially those of low

socioeconomic status. Notwithstanding the lack of empirical evidence, the current study aimed to integrate package interventions and conduct a multi-modal intervention. According to Bird and Markle (2012), this approach appears to have produced larger effects than unimodal or single interventions. It is worthwhile to note that the order of intervention is based on the need to incorporate all the interventions in a short window of time from which this study is based (Bird and Markle, 2012) and Bird (2014). Similarly, the number of hours assigned for each intervention emulated their studies.

Control group: The control group was provided with reading and writing activities and facilities. Participants who were assigned to the control group participated in creative writing and structured reading periods which were adapted from a study by Bird (2012). At the start of the session, participants were given topics that they must write about. Some of the topics included: future career, what you wish for and why, what is the definition of ideal school. After participants finished their writing, they were, then, asked to share what they have written with the whole group, and discuss the rationale behind it. In addition, after participants had shared their work, they were separated into pairs and were asked to choose a book from the center's library to read. By including time for participants to share what they have read, the amount of time remaining for free reading could vary, depending on the time the instructor thought appropriate for each pair to present what they have read. The participants in the control group also engaged in a movie workshop. They were shown the same movie that was used in the PEA intervention – *Big Hero 6*. However, instead of discussing the movie using positive psychology-related questions, participants simply discussed general themes in the movie such as what they liked about the movie, and what were their favorite characters. In effect, the control group intervention also took a total of 10 hours and was also divided into three sessions. After the post measurements were completed, the researcher revealed the main purpose of the study, and the opportunity for participants to participate in PEA intervention was offered.

Instrumentation

Instrumentation in the current study consisted of a package of Thai-translated assessment measures deemed suitable for the key variables. The instruments were distributed in the form of self-administered survey questionnaires. The questionnaire included the following sections.

Part 1. Personal Information. This section aimed to obtain some basic information about the participants, namely: age, gender, and residential area. In addition, since the investigation focused on adolescents of low socioeconomic status, the question regarding family income was incorporated in the separate Informed Consent Form for parent or guardian to fill in.

Part 2. Brief Multidimensional Students' Life Satisfaction Scale (BMSLSS). The BMSLSS is a five-item self-report measure developed by Seligson, Huebner, and Valois (2003) to assess children and adolescents' satisfaction with respect to areas of life deemed most important for youth development, namely: family life, friendships, school experience, self, and where one lives. The measure has reported coefficient alphas of .75 for middle school students and .81 for high school students (Seligson et al., 2003). Zullig, Valois, Huebner, Oeltmann, and Drane (2001) also reported alpha

coefficients ranging from .80 to .85 when removing any single item from the assessment.

Part 3. Positive and Negative Affect Schedule for Children (PANAS-C). The PANAS-C is a 30-item self-report scale developed by Laurent et al. (1999). The scale aims to assess participants' levels of positive and negative affect which are key elements of subjective well-being. Computed Cronbach's alphas ranged from .87 to .89 for positive affect items, and .92 to .94 for negative affect items (Laurent et al., 1999). Additionally, a related study by Orkibi et al. (2014) yielded an alpha coefficient of .89 for positive affect and .90 for negative affect. In the current study, the positive affect ratio between positive affect and negative affect was calculated by the sum of positive affect divided by the sum of negative affect and treated as a single variable, as used in many past studies (e.g., Fredrickson & Losada, 2005; Orkibi et al., 2014).

Part 4. Self-Efficacy Questionnaire for Children (SEQ-C). The scale measures the participants' level of self-efficacy in three domains. Social self-efficacy refers to children's capability to react to social challenges; academic self-efficacy refers to children's perceived capability to master in academic area; and self-regulatory efficacy that pertains to children's capability to resist peer pressure to engage in risky activities. The scale is developed by Muris (2001) and has a strong reliability with a Cronbach's alpha of .88 for the total self-efficacy scale and between .85 and .88 for the subscales.

Part 5. Child and Adolescent Social Support Scale (CASSS). The CASSS is a 40-item multi-dimensional scale developed by C. K. Malecki and M. K. Demaray (2002) to measure the perceived social support of youths from four sources: parents, teachers, classmates, and close friend. The scale has a reliability coefficient of .95 for the total scale and ranged from .89 to .94 on the four subscales. A related study by Orkibi et al. (2014) found an alpha coefficient of .93 for the total scale. It can, thus, be concluded that the CASSS is reliable.

Data Collection Procedure

In the current study, 20 Thai adolescents were recruited from each of the four Fai-Fah centers around Bangkok for a total of 80 participants. Individuals from two of the centers were randomly assigned to the PEA intervention group, whereas those from the other two centers were assigned to the control group. The Informed Consent Forms for participating in both groups were distributed and explained in the current study. At the outset of the first intervention session, participants in both the intervention and control groups were asked to complete a pretest questionnaire. Finally, all participants were asked to complete the same set of questionnaires as a posttest exercise. All data were subsequently coded and analyzed.

Data Analysis

Descriptive statistics such as means and standard deviations were derived to analyze the impact of the intervention on subjective well-being. In order to test the stated research hypotheses, the current study utilized a mixed between-group and within-subjects repeated measures design via MANOVA.

Results

Participants. Out of a total of 80 participants selected for current study, 72 (male: *n*=34, 47%; female: *n*=38, 53%) completed all required workshop-based activities; eight from the experimental group dropped out because they were either unable to attend all workshop sessions or chose to discontinue their participation. Their ages ranged from 14 to 17 years, with a mean age of 14.9 years. Of the 72 participants, 32 from two Fai-Fah centers were randomly assigned to the experimental intervention group (male: *n*=14, 44%; female: *n*=18, 56%), and 40 from the other two centers were randomly assigned to the no intervention control group (male: *n*=20, 50%; female: *n*=20, 50%).

Results. MANOVA analysis was conducted to examine the impact of the intervention on the subjective well-being, self-efficacy, and perceived social support of adolescents of low socioeconomic status. The results of the test of within-subjects contrasts comprised the following: mean differences in life satisfaction in the experimental group = 0.212, whereas the control group = 0.865 ($p<.01$); mean differences in self-efficacy in the experimental group = 0.413, whereas the control group = 0.000 ($p<.01$); mean differences in perceived social support in the experimental group = 0.534, whereas the control group = 0.065 ($p<.01$); mean differences in positive affect in the experimental group = 0.169, whereas the control group = 0.178 ($p<.01$). Based on these results, it can be gleaned that the intervention program had significant impact on the participants' levels of self-efficacy and perceived social support, as demonstrated by the significantly higher mean differences for the experimental group compared to the control group, from pre- to post-intervention. However, it was also found that the intervention program did not yield any significant differences in the level of positive affect in both experimental and control groups; that is, the mean differences in positive affect for both groups were similar. Additionally, the results revealed that the intervention program had greater impact on the level of life satisfaction in the control group than in the experimental group.

Discussion

Hypothesis Testing: The current results partially supported the aforementioned hypothesis. The results of the tests of within-subjects contrasts for trial (pre-post) group interaction indicated that self-efficacy and perceived social support were significantly different across the experimental and control groups, suggesting that the intervention program was effective. However, the impact on the subjective well-being components of life satisfaction and positive affect did not support the hypothesis; that is, it was found that the intervention program yielded a more significant effect on the life satisfaction of the control group than the experimental group and there was no significant difference between the experimental and control group for positive affect.

Impact of the PEA intervention on self-efficacy and perceived social support: The statistically significant difference between the experimental and control groups indicates the effectiveness of the PEA intervention program in enhancing self-efficacy and perceived social support among Thai adolescents of low socioeconomic status. This finding is supported by Bird (2014) who also found statistical differences between the experimental and control group as a result of the intervention.

Furthermore, past research indicated that the problem-solving skill component of positive intervention is linked to increased self-efficacy. A review of the literature revealed a strong linkage between problem solving skills and enhanced self-efficacy (Ayres & Malouff, 2007; Cottrell & Eisenberg, 2001; Linares et al., 2005). Another current finding demonstrated that the PEA intervention has a greater significant positive effect on the perceived social support of the experimental group, compared to the control group. This result, however, cannot be supported by prior research because Bird's (2014) study from which the current study was adapted did not include this variable in the original study. Furthermore, there has been minimal intervention-based research in the field of positive psychology that focused on enhancing perceived social support. Nevertheless, Thoits (2011) and Seligman (2011) similarly proposed that perceived social support is a crucial factor in promoting well-being, both physically and mentally. The current study included gratitude journaling on the premise that this technique can help increase adolescents' level of perceived social support as it allows youths to step back and reflect upon what and who they have in their lives. On the whole, it can be said that the current study's findings on the impact of the PEA intervention program on self-efficacy and perceived social support are generally supported by past research derived from a review of the literature.

Impact of the PEA intervention on life satisfaction and positive affect: The current study found no significant impact of the PEA intervention on the positive affect ratio between the experimental and the control group, a finding that is aligned with past research. Bird (2014), likewise, reported no significant differences in both positive affect and negative affect across the experimental and control groups, as a result of this intervention. This researcher opines that the PEA intervention employed did not include any activity that was specifically aimed to improve emotional experience or emotion regulation. Another issue specific to the current study may be the background of the target population – adolescents of low socioeconomic status. According to Coley (2013), adolescents with low socioeconomic status are associated with lower emotional and behavioral functioning. Future researchers should consider including intervention components that are dedicated to promoting adolescents' emotion regulation such as mindfulness training (Broderick & Jenning, 2012).

The current investigation also found that the impact of the intervention on life satisfaction was significantly different between the control group and the experimental group but in the wrong direction, that is the control group showing a significantly higher increase in SWB. This is a finding that was not supported by Bird (2014) whose study components were adapted in this investigation. The disparity may be due to the intervention applied to the control group which included free-reading and creative writing. Past studies indicated that, unlike reading for study purposes, free-reading could be a source of pleasure (Wilhelm, 2016; Lu & Gordon, 2009; Cetin, 2012). It is quite possible that the adolescents involved in this study who had limited financial resources and who did not have access to a good selection of books perceived reading freely at the center as a pleasurable experience. In addition, creative writing and expressive writing have been found to have beneficial influence on psychological well-being (Ciotti, 2016; King, 2001; Lowe, 2006). Some researchers also used expressive writing and journaling as a medium for therapeutic purposes (Utley & Garza, 2011). Another explanation might due to the fact that Thailand can

be considered as a hierarchical society rather than a society in which equality is the emphasis (Hofstede, Hofstede, & Minkov, 2010). The Thai culture which may emphasize a more hierarchical structure is also reflected in its education system, which usually employs a one-way lecture style of study. Thus, it could be hypothesized that activities such as "free reading and expressive writing" are under-utilized in the Thai educational setting. So, when the control group was given the opportunity to engage in these activities, they may have especially enjoyed them, thus leading to a significant increase in their life satisfaction. As a result, with supporting evidences from previous researches and considering a cultural perspective, the control group's exposure to these activities as part of their intervention may have fortuitously increased their level of life satisfaction.

There are limitations in any empirical study and this present investigation is no exception. First, there are many well-being related variables other than self-efficacy and perceived social support that are associated with subjective well-being. Other variables should be considered in future studies, for instance self-expression and self-acceptance (Gouge et al., 1985), resilience (Baum et al., 1999), motivation (Morinville et al., 2013).

Second, there is a limitation in the research design and measurement method. For the research design, the current study did not implement a true random assignment of the participants to the experimental or control group. Instead, the intervention assignment was on center-based basis. In other words, participants were assigned based on the center they were located; thus, this design should be considered as a quasi-experimental design. Therefore, some of the factors that might influence the results may be due to such factors as differences in school qualities among different geographical areas of Bangkok. This might explain the non-equivalency of the groups in the pretests for current study.

Lastly, the results of current study only measured immediate post-intervention effects. It lacked the measurement of long-term benefits of the PEA intervention on Thai adolescent's well-being-related variables. Like other psychology-based interventions, immediate post-intervention effects are usually more observable, but these effects tend to subside with the passage of time. Time series designs in which the researcher keeps track of the effectiveness of the intervention for various periods of time is recommended to ensure the impact and sustainability of the intervention (Hanbury et al., 2013). As a result, follow up data should be collected and investigated from three months up to two years (Seligman, 2009) after the intervention delivery to determine whether there were any positive effects of the intervention that were maintained over time.

Implications of the Study: The current results have demonstrated that positive psychology-based intervention programs have the potential to be successful in promoting well-being among economically-marginalized Thai adolescents. Such programs are generally affordable and feasible, as they require minimal resources and can be delivered in the context of a wide variety of in-school and out-of-school settings. In particular, the positive psychology-based intervention applied in this study was proven to be successful in promoting adolescents' self-efficacy and perceived social support and could act as an alternative resource for education-based mental health professionals to apply with their adolescent clients.

The current findings can contribute to existing research knowledge on the topic of subjective well-being and positive psychology, in particular, the effectiveness of positive psychology-based interventions. The experimental aspects of this study could be adopted and applied in other populations in Thailand and beyond.

Conclusions: The current study aimed to empower adolescents by promoting their level of subjective well-being, comprised of life satisfaction and positive affect ratio, as well as two variables which were closely related to well-being, self-efficacy and perceived social support. The study explored the effectiveness of a positive psychology-based interventions using the quazi-experimental approach. Given the results, it can be concluded that the selected intervention had a significant effect on promoting adolescents' self-efficacy, and perceived social support but did not have the same effect on adolescents' life satisfaction and positive affect ratio. To this author's surprise, the non-experimental intervention component that consisted of free reading and expressive writing activities led to a significant increase in the control group participants' level of life satisfaction.

These findings shed light on introducing positive psychology-based interventions to Thai adolescents. It suggests the effectiveness of the interventions, especially in boosting self-efficacy and perceived social support. The interventions used in this study have the potential to lay a solid foundation for Thai adolescents' well-being, self-efficacy, and perceived social support.

Recommendations: First, the PEA program was a promising positive psychology intervention series; however, it was unclear which interventions caused specific changes. In addition, the free-reading and expressive writing interventions applied only to the control group were clearly found to have positive influence on life satisfaction. Future studies could include these interventions and assess the degree to which each component of the intervention has a significant effect on adolescents' life satisfaction, positive affect ratio, self-efficacy, perceived social support, and other indicators of positive youth development.

Second, future researchers are encouraged to review and adjust the positive psychology intervention utilized in the current study by including other useful elements such as mindfulness- and empathy-based activities. The intervention deployed in the current study relied heavily on Western-based positive psychology elements. It would be interesting to combine other elements of positive psychology into the program, especially elements present in Thai culture such as meditation and other Buddhism-based practices. In addition, adjusting the intervention to suit Thai participants could make the program easier for Thai mental health practitioners and educators to adopt the intervention components for use with their clients, with little or no resistance.

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