

Role of Gratitude and Resilience on the Mental Health of Elderly

Rohan Rawat* & Satya Gopal Jee**

*Department of Psychology, DAV PG College, Banaras Hindu University, Varanasi.

**Associate Professor and Head, Department of Psychology, DAV PG College,
Banaras Hindu University, Varanasi.

Received: July 13, 2018

Accepted: August 19, 2018

ABSTRACT

Mental health is an important aspect of human well-being. Though its definitions have been found to be oriented from human's basic cognitive functioning, there might be some untouched or unattended aspects which can be useful in practical applications or improvement of mental health up to a large extent. The current study intends to understand the role of positive attitudes like gratitude and resilience on mental health. The sample comprised of 98 young adults within the age range of 20 to 30 years and 99 elderly within the age range of 60 to 75 years. Data was gathered by using the Gratitude Questionnaire (McCullough et al. 2002), Resilience Scale (Mampane 2005) and Mental health inventory (Jagdish and Srivastava 1996). Findings suggest that resilience as well as gratitude followed by role model, self-awareness, commitment, and sense of control as the dimensions of resilience, play important role in prediction of mental health. The correlation of overall resilience and gratitude with mental health is also found to be as moderate and strong respectively. People who are emotionally and mentally resilient have strategies for coping with difficult situations and maintaining a positive outlook. They remain focused, flexible, and productive in bad times as well as good. Their resilience also makes them less afraid of discovering new things or an uncertain future.

Keywords: Mental Health, Gratitude, Resilience, Elderly, Young Adults

Introduction

Mental health can be defined as a state psychological, emotional, and social well-being, affecting how we think, feel, and act. It also helps in determining how we are able to handle stress, relate to others and, make choices. Marie Jahoda (1958), in her book 'The current concept of positive mental health', suggested the six approaches to understand the concept of positive mental health. First, the attitudes of an individual toward his own self. Secondly, the individual's style and degree of growth, development, or self-actualization as expressions of mental health. Various proposals place the emphasis on central synthesizing psychological function, which incorporates some of the suggested criteria defined in the above two. This function can be called integration, which is the third one. Fourth turns out to be the autonomy, which singles out the individual's degree of independence from social influences as most revealing of the state of his mental health. The fifth one is an individual's perception of reality, and the sixth one is environmental mastery.

Gratitude can be understood as a feeling of appreciation which is felt by and/or similar positive response shown by any recipient of kindness, gifts, help, favours, or other types of generosity, towards the giver of such favour. Some research evidence suggests that gratitude can be developed (Emmons, 2010). Resilience can be an individual's ability to successfully adapt to life tasks in the face of social disadvantage or any other highly adverse conditions. Using supportive relationships, role model, future aspiration, sense of control, commitment, problem-solving, giving and maintaining relationship, and self-awareness are some of the dimensions of resilience according to the previous researches (Mampane, 2006).

Researchers view resilience as a defence mechanism, which enables people to thrive in the face of adversity. Improving resilience may be an important target for treatment (Dmitry M. Davydov et al, 2010). Some research associated with resiliency education conducted in a large govt organization showed immediate and post-test improvement in resilience, locus of control, purpose in life, self-esteem, interpersonal relationships and job satisfaction (Glenn E. Richardson, Phillip J, 2002). While understanding gratitude as a positive attitude and emotion, some research findings support the idea that positive emotions play a critical role in contributing to the psychological and physical well-being of the individual (Michele M. Tugade et al, 2004). A strong association of gratitude and wellbeing have been seen in a clinical review (Wood, Froh, Geraghty, 2009). Gratitude may be broadly defined as an appreciation of what is valuable and meaningful to oneself. It represents a general state of thankfulness and/or appreciation. An existing body of research supports an association between gratitude and well-being, although occasional negative findings were also evident in the literature. Some research also indicates that there are a number of potential nuances in the relationship between gratitude and well-being which may eventually be relevant to the effective integration of gratitude techniques into psychotherapeutic treatment. There are many tools available for measuring gratitude. According to some authorities, the available techniques for enhancing gratitude and therefore, well-being

are relatively simple and easy to integrate into psychotherapeutic practice, although the characteristics of these techniques in terms of efficacy and sustained change remain largely unknown. Only future research will clarify the many questions related to assessing and enhancing gratitude (Randy Sansone, Lori Sansone, 2010).

Carefully going through some literature leads us to a question whether gratitude and resilience, the two positive attitudes of human cognition can have an impact on mental health or not. There have been very few studies with these aspects taken together, hence the current study aims to present the empirical evidence in the Indian context.

Objectives

1. To determine the relationship between different dimensions of mental health, resilience and gratitude.
2. To find out the role of gratitude, role model, self-awareness, commitment, and sense of control as a predictor of mental health.

Methods

Sample: The sample of 189 subjects was taken out of which, 98 were the young adults aging between 20 to 30 years, and 91 were the elderly aging between 60 to 75 years. Out of the total sample, 95 were females and 94 were males, 74 were graduates and 115 were postgraduates from Delhi and Varanasi region of India.

Tools: Following tools were used in the study-

- **Gratitude Questionnaire by McCullough, Emmons, and Tsang (2002):** 6 item long tool for measuring gratitude. Responded on a 7-point scale. Item 1,2,4,5 have a normal scoring range from 1 to 7, but 3 and 6 have a reverse scoring range from 7 to 1.
- **Resilience Scale by Mampene (2006):** total 25 items long tool for measuring resilience of an individual across eight dimensions- using supportive relationship (items - 1, 7, 12, 21, 24), role model (item- 25), future aspiration (item- 23), sense of control (items - 4, 9), commitment (items - 2, 10, 17, 20), problem solving (item - 3, 5, 13), giving and maintaining relationship (items - 8, 11, 19), self-awareness (items - 6, 14, 15, 16, 18, 22). Responded on a five-point scale. Scored in 0,1,2,3,4 format.
- **Mental Health Inventory (Jagdish & Srivastava, 1983):** The inventory measures mental health of normal individuals containing 56 items depicting six dimensions of mental health viz. positive self-evaluation (PSE), perception of reality (PR), integration of personality (IP), autonomy (Aut.), group oriented attitudes (GOA) and environmental competence (EC). The responses are made on a four-point scale from always (4) to never (1). Overall reliability coefficient was found to be 0.73.

Results

Table 1: Characteristics of Sample

Demographic Variables	Frequency	Percentage
Age 20 to 30 years	98	51.9%
60 to 75 years	91	48.1%
Gender Male	94	49.7%
Female	95	50.3%
Education Graduate	74	39.2%
Post Graduate	115	60.8%

Table 1 indicates that 51.9% participants were young adults and 48.1% were elderly in which 49.7% were male and 50.3% were female who have complete graduate (39.2%) and postgraduate (60.8%) degrees.

Table 2 Correlation analysis between gratitude, different dimensions of resilience and mental health.

	Positive Self Evaluation	Perception of Reality	Integration of Personality	Autonomy	Group Oriented Attitude	Environmental Mastery	Total Mental Health
Gratitude	.50**	.37**	.40**	-.10	.38**	.50**	.60**
Using supportive relations	.29**	.33**	.29**	-.09	.20**	-.04	.26**

Role Model	.35**	.24**	.29**	-.07	.35**	.53**	.50**
Future Aspirations	.38**	.36**	.33**	-.05	.40**	.41**	.52**
Sense of Control	.06	.09	.00	.11	-.02	-.22**	-.03
Commitment	-.36**	-.19**	-.21**	.18*	-.29**	-.44**	-.41**
Problem Solving	.42**	.39**	.36**	-.24**	.35**	.35**	.49**
Give and Maintain Relationship	.30**	.28**	.23**	.07	.30**	-.01	.29**
Self-Awareness	.38**	.43**	.35**	.00	.39**	.32**	.51**
Total Resilience	.35**	.42**	.34**	.00	.33**	.09	.40**

Table 2 indicates associations between gratitude, different dimensions of resilience and mental health. Correlation of total mental health with gratitude is .60** and with total resilience is .40** followed by other values as reflected above.

Table 3: Stepwise multiple regression analysis using mental health as a criterion and,gratitude & problem solving, role model, self-awareness, commitment, sense of control as a predictor variable.

Predictors	Criterion (mental health)						
	R	R ²	R ² change	B	β	t	F
Gratitude	.60	.36	.36	2.09	.60	10.24**	104.97**
Problem Solving	.66	.43	.07	3.04	.30	5.06**	72.23**
Role Model	.70	.50	.06	4.62	.27	4.83**	61.74**
Self-Awareness	.72	.52	.02	0.98	.17	2.92*	50.32**
Commitment	.73	.54	.01	-.87	-.15	2.74 ^{NS}	43.19**
Sense of Control	.74	.55	.01	-1.63	-.12	2.28 ^{NS}	37.70**

p<0.01 = significant at 0.01**, *p*<0.05 = significant at 0.05*; *p*>0.01 or 0.05 = not significant NS

Table 3 represents the stepwise multiple regression analysis using mental health as a criterion and, gratitude & problem solving, role model, self-awareness, commitment, sense of control as a predictor variable. Gratitude emerged as the best predictor of mental health (36%) followed by problem-solving, role model and self-awareness (7%,6% &2%). These findings suggest that with an increase in the level of gratitude and resilience, the mental health of the individual is increased.

Discussion

This study demonstrates a relationship between different dimensions of mental health, resilience, and gratitude for the sample of young adults and elderly, living in Delhi and Varanasi. With the help of this study, we were also able to find out the role of gratitude, role model, self-awareness, commitment, and sense of control as a predictor of mental health. According to our results, it was found that gratitude has a strong correlation and total resilience has a moderate correlation with total mental health. Gratitude is known to reduce many toxic emotions from our body, such as anger, jealousy, frustration, and regret. While eliminating these toxic feelings, gratitude highlights your positive emotions, like happiness, joy, and serenity. Some ways in which gratitude can contribute to positive mental health include healthier relationships, increased levels of self-confidence, improved sleep patterns, a stronger sense of empathy & forgiveness, and a stronger determination for hope & recovery. A huge body of empirical research proposes that gratitude is an important factor in enhancing mental health (Ryff et al. 2004, Emmons et al.2000). The dimensions of resilience which were moderately correlated with overall mental health are role model, future aspirations, commitment, problem solving and self-awareness. The dimensions of resilience were also correlated with mental health. Sense of control had a very weak correlation with overall mental health. Present results also confirm the finding of some previous studies where a positive correlation was found between resilience and mental health (Reza Ghanei Gheshlagh et al, 2017). Resilience is important because it helps in protection against the development of some mental health problems. It also helps us to maintain our wellbeing in difficult circumstances. These empirical findings suggest that resilience as well as gratitude are somehow a good sign of an individual's mental health and are also two significantly important

factors. Hence, resiliency education, gratitude training, and similar mental health strategies may be very effective in overall mental health promotion.

References

1. Alex M. Wood, Jeffrey J. Froh, Adam W.A. Geraghty (2009). "Gratitude and well-being: A review and theoretical integration". *Clinical Psychology Review*, Volume 30, Issue 7, Pages 890-905.
2. Andrew M. Colman (2010). "Dictionary of Psychology". Oxford university press, third edition.
3. Dmitry M. Davydov, Robert Stewart, Karen Ritchie, Isabelle Chaudieu (2010). "Resilience and mental health". *Clinical Psychology Review*, Vol: 30, Issue: 5, Pages 479-95.
4. Jagdish and Srivastava, A K (1983). *Mental Health Inventory*. Varanasi: Manovaigyanik Parikchan Sansthan. Richardson, Glenn & Waite, Phillip (2002). "Mental health promotion through resilience and resiliency education". *International journal of emergency mental health*, Volume: 4, Page(s): 65-75.
5. Marie Jahoda (1958). "Current concept Of Positive Mental Health". New York: Basic Books, Digitizing sponsor University of Florida, George A. Smathers Libraries with support from LYRASIS and the Sloan Foundation, Monograph series no. 1, Pages 23-64.
6. McCullough, M. E., Emmons, R. A., & Tsang, J. (2002). "The grateful disposition: A conceptual and empirical topography". *Journal of Personality and Social Psychology*, 82, 112-127.
7. Michele M. Tugade, Barbara L. Fredrickson, and Lisa Feldman Barrett (2004). "Psychological Resilience and Positive Emotional Granularity: Examining the Benefits of Positive Emotions on Coping and Health". *Journal of Personality*, 72(6), Pages 1161-1190.
8. Randy A. Sansone, Lori A. Sansone (2010). "Gratitude and Well Being: The Benefits of Appreciation". *Psychiatry (Edgmont)*. 7(11) Pages 18-22.
9. Reza Ghanei Gheshlagh, Kourosh Sayehmiri, Abbas Ebadi, Asghar Dalvandi, Sahar Dalvand, Sadat Seyed Bagher Maddah, and Kian Norouzi Tabrizi (2017). "The Relationship Between Mental Health and Resilience: A Systematic Review and Meta-Analysis". *Iran Red Crescent Med J*. 19(6):e13537. doi: 10.5812/ircmj.13537.
11. Robert A. Emmons and Cheryl A. Crumpler (2000). "Gratitude as a Human Strength: Appraising the Evidence". *Journal of Social and Clinical Psychology*: Vol. 19, No. 1, pp. 56-69
12. Robert Emmons (2010). "What is Gratitude". The Greater Good Science Center, UC Berkley. Retrieved from- <https://greatergood.berkeley.edu/gratitude/definition>.
13. Robert Emmons (2010). "What Good is Gratitude". The Greater Good Science Center, UC Berkley. Retrieved from- <https://www.youtube.com/watch?v=aRV8AhCntXc&feature=youtu.be>
14. Robert Emmons (2010). "Benefits of Gratitude". The Greater Good Science Center, UC Berkley. Retrieved from- <https://www.youtube.com/watch?v=RRrnfGf5aWE&feature=youtu.be>
15. Robert Emmons (2010). "Cultivating gratitude". The Greater Good Science Center, UC Berkley. Retrieved from- <https://www.youtube.com/watch?v=8964envYh58&feature=youtu.be>
16. Ruth Mampane, Cecilia Bouwer (2006). "Identifying resilient and non-resilient middle adolescents in a formerly black-only urban school". *South African Journal of Education*, Vol.26(3), Pages 443-456.
17. Ryff, C. D., Singer, B. H., & Diener, G. (2004). "Positive health: connecting well being with biology". *Philosophical Transactions of the Royal Society B: Biological Sciences*, 359(1449), 1383-1394.