

The Relationship Between Gratitude Diaries, Depression, Anxiety and Psychological Well-Being*

Şükran Günlüklerinin Depresyon, Anksiyete ve Psikolojik İyi Oluşla İlişkisi

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Abstract

The purpose of the study to examine the relationship between gratitude diaries, depression, anxiety and psychological well-being. It is designed as two groups as experimental study, control and experimental group. There are total of 36 participants that kept the gratitude diary and 25 participants in the normal diary group. The data of the study were collected using the sociodemographic form, Beck depression and anxiety scale, psychological well-being scale, appreciation-gratitude scales. These scales were applied to the participants twice, before the 4-week study and then after. As a result, the rates depression and anxiety of individuals keeping a gratitude diary are lower compared to the individuals who do not keep a gratitude diary. In addition, the fact that keeping a gratitude diary increases the psychological well-being and individuals with high gratitude rates have a positive relationship with psychological well-being.

Keywords:

Positive Psychology, Gratitude, Depression, Anxiety, Psychological Well-Being

Öz

Bu araştırmanın amacı pozitif psikoterapi uygulamalarından şükran günlüklerinin depresyon, anksiyete ve psikolojik iyi oluş arasındaki ilişkisini incelemektir. Bu bağlamda deneysel bir çalışma yapılmış olup ön test-son test deneysel deseni kullanılmıştır. Deneysel çalışma, kontrol ve deney grubu olmak üzere iki grup olarak tasarlanmıştır. Deney grubu olan şükran günlüğü tutan grupta toplamda 36 katılımcı; kontrol grubu olan normal günlük tutan grupta; 25 katılımcı bulunmaktadır. Çalışmaya toplamda 61 kişi katılmış olup; katılımcıların yaş ortalaması 31,69'dur. Araştırmanın verileri Sosyodemografik Bilgi Formu, Beck Depresyon Ölçeği, Beck Anksiyete Ölçeği, Psikolojik İyi Oluş Ölçeği, Takdir Etme-Şükür Ölçekleri ile toplanmıştır. Bu ölçekler 4 haftalık çalışma öncesi ve çalışma sonrası olmak üzere iki kez katılımcılara uygulanmıştır. Buna ek olarak çalışma sonrasında deney grubunun tutmuş olduğu şükran günlükleri kelime sıklığı analizinde kullanılmıştır. Gerçekleştirilen analizler sonucunda şükran günlüğü tutan bireylerin depresyon ve anksiyete oranlarının; şükran günlüğü tutmayan bireylerin depresyon ve anksiyete oranlarına göre daha düşük olduğu bulunmuştur (Kontrol grubu depresyon ölçümü: $z=-2,546$; $p=0,011$; $cohen-d=0,140$ iken deney grubu depresyon ölçümü: $z=-5,023$; $p=0,001$; $cohen-d=0,715$). Şükran günlüğü tutmanın depresyon ve anksiyete belirtilerini azalttığı ve şükran duyma oranları yüksek bireylerin depresyon ve anksiyete ile negatif yönde çok kuvvetli istatistiksel ilişkileri olduğu sonucuna ulaşılmıştır (Kontrol grubu anksiyete ölçümü: $z=-3,704$; $p=0,001$; $cohen-d=0,2677$ iken deney grubu anksiyete ölçümü: $z=-5,103$; $p=0,001$; $cohen-d=0,510$). Buna ek olarak şükran günlüğü tutmanın psikolojik iyi oluşu artırdığı ve şükran duyma oranları yüksek bireylerin psikolojik iyi olma ile pozitif yönde ilişkileri olduğu da ulaşılan sonuçlar arasındadır (Kontrol grubu psikolojik iyi oluş ölçümü: $z=-2,728$; $p=0,006$; $cohen_d=0,584$ iken kontrol grubu psikolojik iyi oluş ölçümü: $z=-5,029$; $p=0,001$; $cohen_d=0,714$). Araştırmada elde edilen bulgular doğrultusunda şükran günlüğü tutmak normal günlük tutmaya göre $0.56/0.18= 3,11$ kat daha fazla psikometrik ölçümlerde iyileşmede olumlu yönde etki etmektedir.

Anahtar Kelimeler:

Pozitif Psikoloji, Şükran Duyma, Depresyon, Anksiyete, Psikolojik İyi Oluş

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INTRODUCTION

A considerable

In the Western world, we have a much higher standard of living than humankind has ever experienced. We have better health care, better food, better housing, better sanitation, more money, more social services, and greater access to education, justice, travel, entertainment and career opportunities. In fact, today's middle class lives better than many historical royal families. But still, people don't seem very happy. In any given year, approximately thirty percent of the adult population suffers from a known psychiatric illness. The World Health Organization (2020) states that depression is now the fourth most costly and devastating disease in the world.

Over the past two centuries, the average human life span has doubled. Despite this increase, have we been able to double the riches, pleasure, satisfaction and life satisfaction in our inner world? Over the last century, we have reduced infant mortality, eradicated many deadly infectious diseases, overcome food shortages, and developed energy, housing, and transportation systems that greatly reduce the devastating impact of extreme weather. We have developed ways to protect ourselves from many predators and have created machines to perform many unskilled tasks. We designed a lifestyle that includes education, sports, arts and entertainment activities and extended the life expectancy of the average person. Yet we are not happy, and many people are not happy most of the time (Diener, 1984; 2000).

Even looking at only two sources written at different times, the fact that they are universally gathered around a certain problem emerges: "The mental health of the person who cannot develop and transform despite all the things that develop and change." Traditionally, clinical psychology focused on psychological disorders and disabilities; Every day, people try to save individuals from their illnesses with new and effective methods and techniques in the treatment of psychological disorders (Diener, 2000). Although there are many methods with proven benefits and effectiveness, it has been shown that most people, whether they have a psychological diagnosis or not, are not satisfied with their lives, and their happiness rates and life satisfaction are quite low (Csikszentmihalyi, 1999). When we look at the "years of life adapted to dysfunction" and "years of life lost due to disability" used in calculating the burden of disease, it is seen that psychiatric diseases take the first place among the main disease groups that cause them. Among the 20 reasons that cause "years of life lost due to disability" by gender, five psychiatric diseases in men; It is observed that there are four psychiatric diseases in women (with unipolar depression being the first one).

Accessibility to mental health services is low and insufficient. First of all, the first step in the field of mental health is to take protective measures and develop practices for this purpose. Secondly, rather than focusing only on treating the disease, existing treatment and therapy methods need to be identified that will ensure the continuity of patients' well-being, are easy to apply and have high effectiveness. Depression is known as the top health problem in the world. Studies show that the suicide rate has increased even in adolescents and children in recent years. This increase occurred despite the use of many antidepressants and sedatives that have become widespread in recent years (Diener and Diener, 1996).

In addition, there are many difficulties that psychiatric diseases bring to individuals' lives.

Among these are high treatment costs, economic deprivation and loss of workforce. In diseases such as depression and anxiety, treatment often includes both psychiatric medication and psychotherapy. Sometimes treatments even need to be continued with hospitalization. In this case, if the expenses required for treatment are taken into consideration, treatment costs, which can shake the patient and his family when evaluated from an individual perspective, bring an economic burden. Small changes in an individual's life can have major positive effects on the prevention and treatment of diseases such as depression and anxiety. It is a fact that as mental illnesses increase day by day and, accordingly, life satisfaction and life satisfaction decrease, additional methods are required to the existing preventive and therapeutic methods.

Positive psychology, which is a complement to clinical psychology that offers schools and methods to overcome the problem, focuses on well-being and ideal human functioning, enabling psychology to take an active role in structuring positive qualities rather than merely correcting disorders, trying to reveal people's strengths and understanding how these aspects can be improved (Seligman and Csikszentmihalyi, 2000). Positive psychology, which set out for this purpose, has undertaken an important mission such as contributing to the health of the individual by focusing on the strengths or skills that can serve as a buffer against psychological disorders, making normal people neglected by psychology stronger and more productive, and revealing high human potential (Göçen, 2012).

Considering the fact that methods and methods aimed at increasing the psychological well-being of individuals can prevent the occurrence of psychiatric diseases such as depression and anxiety, which are likely to be experienced in the coming years, applications and methods that can be easily adapted to daily life, such as the gratitude diary application, are very low-cost and do not have side effects, can be used by individuals. It is of great importance in increasing their psychological health and resilience. In this context, the aim of our research is to provide individuals with practices that will increase their psychological well-being levels in their daily lives and to determine with scientific reality whether the gratitude diary practice is related to depression, anxiety and psychological well-being, on the way to removing them from the scope of psychiatric diagnosis. Thus, a scientific source and basis will be provided for therapy studies carried out with individuals with psychological disorders, especially depression and anxiety.

When all these are examined, it will primarily be protective and preventive by reducing individuals' susceptibility to depression and anxiety, and will contribute to their psychological well-being; In addition, developing a method that will accelerate recovery during the disease period emerges as a research problem. The problem of this research consists of the question "What is the relationship of gratitude diaries, one of the positive psychology applications, with depression, anxiety and psychological well-being?"

MATERIAL AND METHODS

The population of the research consists of two groups of adults of different ages, genders and professions between the ages of 18-65, living in Istanbul, Turkey. 36 people who could keep a gratitude diary for the experimental group and 25 people who could keep a normal diary for the control group were included in the voluntary study. The gratitude journal group consisted of 13 men and 23 women, and the control group that would keep a

normal diary consisted of 9 men and 16 women. A 4-week pretest-posttest experimental design study was conducted with participants who approved participation in accordance with informed consent. In the 4-week study, measurements were made by applying the Beck Depression Scale, Beck Anxiety Scale, Psychological Well-Being Scale and Gratitude/Appreciation Scale to both groups before and after the study.

DATA COLLECTION TOOLS

In the research, “Sociodemographic Information Form”, “Beck Depression Scale”, “Beck Anxiety Scale”, “Psychological Well-Being Scale” and “Gratitude/Appreciation Scale” were applied to the experimental study participants. A form containing information such as age, gender, educational status, and socioeconomic levels of the people who will participate in the study was prepared by the researcher for the participants.

Beck Depression Scale: Beck depression scale (BDI) was developed by Beck (1961) to measure the emotional, cognitive, somatic and motivational states of the individual. Although it was developed to evaluate depression symptoms in detail, it also enables the evaluation of cognitive status. BDI consists of 21 items. 2 items examine emotions, 11 items examine cognitions, 2 items examine behaviors, 5 items examine physical symptoms, and 1 item examines interpersonal symptoms. Each question was given one of the scores of 0, 1, 2, 3, and results ranging from 0 to 63 were obtained. The scores obtained were evaluated as 0-9 as no/minimal depression, 10-18 as mild depression, 19-29 as moderate depression, and 30-63 as severe depression. Its validity and reliability in our country were determined by Teğin (1987) and Hisli (1988). The cut-off point for BDI was determined as 17 points, and the Cronbach Alpha internal consistency coefficient was reported as 0.80. In this study, the Cronbach Alpha value was found to be 0.79.

Beck Anxiety Scale: (BAI) was developed by Beck (1961) to measure the severity of depression in individuals. The scale is a 21-item, four-point Likert type, self-report type. The Turkish adaptation of the scale was made by Ulusoy et al. (1998). It is used to determine the frequency of anxiety symptoms experienced by individuals. Provides Likert (sum of degrees) type measurement. There are 4 options in each of the twenty-one symptom categories. Each item receives points between 0 and 3. The higher score obtained from the scale indicates the severity of anxiety experienced by the individual. It was adapted into Turkish by Hisli (1988). Scores can be obtained from the scale between 0 and 63. A high total score indicates the severity of depression. A score of 0-9 from the scale is at a minimum level; 10-16 points are mild; 17-29 points can be interpreted as moderate depressive symptoms and 30-63 points as severe depressive symptoms. The Cronbach Alpha internal consistency coefficient of the Beck Anxiety Scale was determined as 0.92. In this study, the Cronbach Alpha value was found to be 0.90.

The Psychological Well-Being Scale was developed by Diener et al. (2010) to measure socio-psychological well-being as a complement to existing well-being measures. The Psychological Well-Being Scale includes some items based on social relationships, such as having supportive and rewarding relationships, contributing to the happiness of others, and being respected by others. The scale also includes 8 items based on having a purposeful and meaningful life, being interested in daily activities and being busy with a job. It was adapted into Turkish by Telef (2013). The Cronbach Alpha internal consistency coefficient of the

psychological well-being scale was found to be 0.87. In our study, the Cronbach Alpha value was found to be 0.85.

Gratitude/Appreciation Scale

Gratitude Scale: (The Gratitude Questionnaire, GQ-6) is a 6-item scale created by McCullough, Emmons and Tsang in 2002 to operationalize and measure the concept of gratitude. The items of the scale were designed as a one-dimensional 7-point Likert to measure the emotional intensity, frequency and severity of gratitude. The Turkish adaptation study was done by Göcen (2012). The Cronbach Alpha coefficient of the gratitude scale varies between (.76) and (.80). In this study, the Cronbach alfa value was found to be 0.78.

Appreciation Scale: (Appreciation Scale) is a gratitude scale created by Adler and Fagley in 2005 as a 7-point Likert scale. The original consists of 57 items and 8 subscales. Adaptation to Turkish was done by Göcen (2012). Appreciation Scale Cronbach's alpha coefficient (.94); It was determined that the sub-dimensions had coefficients varying between (.84) and (.62). In this study, the Cronbach alfa value was found to be 0.91.

DATA ANALYSIS

After obtaining ethics committee permission (Üsküdar University, 61351342/2019-199), volunteer participants from different age and professional groups were recruited for the control group to keep a gratitude diary and the experimental group to keep a normal diary. Participants in both groups were given forms and asked to fill them out before starting the study. Then, the experimental group was asked to write a gratitude diary for 4 weeks, and the control group was asked to keep a normal diary for the same period. Feedback was received from the participants that the diaries were written every day during this period. At the end of 4 weeks, the scales initially applied to the experimental and control groups were re-applied. Then, pre-test and post-test analyzes were conducted between and within these two groups. Wilcoxon signed-rank test and chi-square test analyzes were performed for differences between groups. In addition, the results of the gratitude scale subtests, gratitude for worship, comparative gratitude, gratitude for satisfaction, verbal gratitude, gratitude for close relationships, gratitude for the family, gratitude for possession-oriented gratitude and gratitude for awe-moment awareness, and comparisons between the groups were made.

While statistical significance, that is, p-value, tells us that the difference is not due to chance, effect size tells us how large the effect is. Although the differences are statistically significant, they may not actually be practically effective. For this reason, we also looked at the results of the data in terms of effect size. Although the calculation (d) developed by Cohen is the most widely used in calculating the effect size, calculations such as Hedge's d and Glass's delta- Δ can also be found in the literature. A general interpretation of Cohen's d can be interpreted as weak if the d value is less than 0.2, medium if it is 0.5, and strong if it is greater than 0.8. It is recommended that the effect size value be ≥ 0.5 in clinical studies. For this purpose, Cohen-d value, z-value and p-value mean values, psychometric measurements were taken together and compared between the groups keeping a normal diary and those keeping a gratitude diary. Comparisons were made with the non-parametric Mann-Whitney U test since there were 12 separate psychometric (sub)measurements and did not show a normal distribution.

RESULTS

No significant difference was detected between the groups in terms of gender ($df=1$, $p=.605$). It was determined that there were 9 male (36.0%) and 16 female (64.0%) participants in the normal diary keeping group, while there were 13 male (36.1%) and 23 female (63.9%) participants in the gratitude diary group. It was determined that there was no statistically significant difference between the groups in terms of marital status (Chi-square = 2.13, $df = 3$ and $p=.0529$). In the regular diary group, 11 were married (44.0%), 11 were single (44.0%), and 3 were divorced (12.0%). In the group keeping a gratitude diary, 22 were married (61.1%), 11 were single (30.6%) and 3 were divorced (8.3%). The average age of the participants in the normal diary group was 30.84 ± 6.61 years, and the average age of the participants in the gratitude diary group was 32.55 ± 7.68 years.

In the group keeping a normal diary, Beck Depression Scores (BDS) were determined to be 11.5 on average before the diary, but decreased to 11.0 points after four weeks. While 11 cases had lower scores (negative rank) compared to the first test, it was determined that there were score increases in 2 cases (positive rank). When the first and second tests were compared, a statistically significant difference was detected ($z=-2.546$ and $p=0.011$). In the group keeping a gratitude diary, Beck Depression scores were determined to be 14.55 points before the diary, but decreased to 10.0 points after the diary. While lower scores (negative rank) were observed in 33 cases compared to the first test, it was determined that there was no increase in scores in any case (positive rank). When the first test and the second test after the gratitude diary were compared, a statistically significant decrease in depression score was detected ($z=-5.023$ and $p=0.001$).

In the group keeping a normal diary, the initial anxiety score average before the diary was determined to be 14.40, while it was determined that the average score after the diary decreased to 13.60 points. While 16 cases had lower scores (negative rank) compared to the first test, it was determined that there was no increase in scores in any case (positive rank). First and second post-daily test scores When compared, a statistically significant decrease in anxiety was detected ($z=-3.704$ and $p=0.001$). In the gratitude diary group, it was determined that the average anxiety scores of the participants before the diary decreased to 15.50 and to 11.47 points after the diary. While 34 cases had lower scores (negative rank) compared to the first test, it was determined that there was no increase in scores in any case (positive rank). When the first and second post-diary anxiety scale were compared, a statistically significant decrease was detected ($z = -5.103$ and $p=0.001$).

The participants' "psychological well-being" scores were compared to the normal diary group. In terms of psychological well-being scores, it was determined that in the normal diary group, the score before the diary was 40.32, while it increased to 41.84 points after the diary. In terms of increase, 5 cases had lower scores (negative rank) compared to the first test, while 16 cases had increased scores (positive rank). When the first and the second test after the normal diary were compared, a statistically significant difference was detected ($z=-2.728$ and $p=0.006$). It was determined that the psychological well-being scores in the gratitude diary group increased from 39.00 points before the diary to 44.00 points after the diary. In terms of increase, lower scores (negative rank) compared to the first test were not detected in any case. Score increases were detected in 33 cases. When the first and second

psychological well-being scores after the gratitude diary were compared, a statistically significant difference was detected ($z = -5.029$ and $p = 0.001$).

Finally, it was determined that the gratitude scores increased from 21.24 points before the day to 21.52 points after the day in the group that kept a normal day. While 5 cases had lower scores (negative rank) compared to the first test, it was determined that there were score increases in 8 cases (positive rank). When the first and second gratitude scores after the diary were compared, no statistically significant difference was detected ($z = -0.980$ and $p = 0.327$). On the other hand, it was determined that the gratitude scores in the gratitude journal group increased from 23.33 at the beginning to 30.27 points after the journal. While 5 cases had lower scores (negative rank) compared to the first test, it was determined that there were score increases in 24 cases (positive rank). When the first and the second post-diary test were compared, a statistically significant difference was detected in terms of gratitude scores ($z = -3.685$ and $p = 0.001$).

Table 1.

Analysis results based on z, p and Cohen-d value to understand the effect of gratitude diary by bringing all psychometric tests together. Cohen-d effect sizes are higher in all psychometric measurements except verbal gratitude (0.491 vs. 0.191). Z-values were seen to decrease more significantly in all psychometric measurements. The p-value significances also reached a much more significant level of statistical significance in relation to these results.

	In Normal Diary Group			In the Gratitude Diary Group		
	z -score	p -value	Cohen-d	z -score	p -value	Cohen-d
Beck Depression 1-2	-2,546	0.011	0.140	-5.023	0.001	0.715
Anxiety 1-2	-3.704	0.001	0.267	-5,103	0.001	0.510
Psychological well-being 1-2	-2,728	0.006	0.584	-5,029	0.001	0.714
Thank God 1-2	-0.980	0.327	0.135	-3.685	0.001	0.286
Worship gratitude 1-2	-1.895	0.058	0.260	-4,170	0.001	0.443
Comparative gratitude 1-2	-1.089	0.276	0.134	-2.916	0.004	0.501
Satisfaction gratitude 1-2	-0.631	0.528	0.030	-4.802	0.001	0.718
Verbal gratitude 1-2	-0.689	0.491	0.093	-1.603	0.109	0.191
Gratitude for close relationships 1-2	-1,000	0.317	0.023	-4.053	0.001	0.435
Gratitude for the family 1-2	-1,342	0.180	0.074	-3.976	0.001	0.432
Gratitude for possession 1-2	-0.632	0.527	0.048	-4,729	0.001	1,065
Moment awareness gratitude 1-2	-1,732	0.083	0.131	-4,144	0.001	0.704

GRATITUDE DIARIES WORDS

All gratitude diaries were computerized and a single text was created. In this way, the frequency analysis of the words used in the gratitude diaries was made possible. The website <https://voyant-tools.org/> was used (Sinclair & Rockwell, 2024) for this and it provides very reliable text analysis in this regard. The collective text of the gratitude journals contained 55,291 total words and was found to contain 3,303 unique words. The average number of words per sentence was determined to be 12.3. The most used word in the collective text

they did and how they felt while doing it. As a result of the research, a significant increase in the positive affect levels of the group keeping a gratitude diary was reported in the post-test.

In another study, Kerr et al. (2015) examined the effects of gratitude and kindness on the pre-treatment well-being of a clinical group. In this context, clients were instructed to write five specific or more general things that made them feel grateful during the day for 14 days. According to the results of the research, it was determined that the feeling of gratitude is an experience that can be developed, and that the intervention increased the participants' sense of commitment, satisfaction with daily life, optimism and reduced the level of anxiety. When we look at this study, the results of our study are parallel to the literature.

Similar findings were found in the study conducted by Emmons and McCullough (2003). In this study, participating students were divided into three groups. The first group was asked to write down five things they were grateful for every day for 10 weeks, the second group was asked to write down things that bothered them, and the third group was asked to write down neutral things. In this process, all participants were asked to write and rate how they felt about life on a weekly basis, their expectations for the next week, and the extent to which they felt related to other people. As a result of the research, it was determined that the experimental group was more optimistic about the next week, felt better about their lives in general, and felt more connected with other people compared to the control group. In the same study, the experimental group's happiness levels were reported to be higher, their depression levels were lower, and their sleep quality and sleep duration were reported to be higher than the other groups.

Depressed individuals and people living with depressive symptoms have self-blame, anger towards life and themselves, feeling inadequate by thinking about what they do not have, negative and hopeless perspectives on the future, and pessimism-oriented thought styles. They generally revolve around certain negative thoughts and feelings. In depression, cognitive attention and the focus of the individual are on past regrets, things we do not have, inadequacies and deficiencies felt as a result of comparisons. By keeping a gratitude diary and recording the things for which he is grateful and grateful for each day, the individual directs all his attention to the people who helped him, the people, events or situations in his life for which he is grateful. In this way, he stays away from the sources that feed his thoughts full of negativity and pessimism. It can be said that the gratitude journal acts as a focus changer at this point. It takes the individual's attention away from negativities, shortcomings and inadequacies and turns it to the possessions and satisfactions that are forgotten or often ignored. The individual begins to see the strong personality traits he has, which causes him to use his potential over time. In this way, the person begins to repair his relationship with himself and begins to strengthen his interpersonal relationships. Because feeling grateful is directed towards both internal and external resources (Emmons, 2000; 2003; 2004; 2005). This becomes a resource that develops the person both emotionally and socially.

As the person who made negative social comparisons before expressing gratitude begins to become aware of what he has, he begins to think that he is rich and abundant and can use his resources more effectively and beneficially. Studies show that people who develop gratitude intervention experience more positive emotions such as joy, love, happiness and optimism; It is seen that gratitude protects people from harmful impulses such as jealousy,

anger, ambition and pain (Emmons, 2000). In our study, this is thought to be one of the main reasons why gratitude diaries reduce depression and anxiety scores.

In anxiety, the individual's mind is constantly preoccupied with dangers that may arise from uncontrollable events (accidents, diseases, disasters, etc.). Anxious individuals constantly monitor potentially dangerous stimuli and ignore non-dangerous, pleasant stimuli. This is a mechanism that works automatically and unconsciously in anxious individuals. In anxiety, selective perception is at the forefront. With the practice of gratitude diary, this selective perception ceases to be a collection of anxiety-increasing elements and completely changes its direction. It may be appropriate to use the definition of "focus changer" for the concept of gratitude, which is included in the individual's life with the gratitude diary.

As depression and anxiety symptoms begin to decrease and with the new perspective the individual brings to his life, psychological well-being and life satisfaction begin to increase. Some other research results show that gratitude increases positive emotions (Emmons and McCullough, 2003; Fredrickson, 2001 ; Lyubomirsky et al., 2005; 2013), increases optimism (Emmons and McCullough, 2003; Froh et al., 2009), and is protective against stress and depression (Wood et al., 2007; 2008; 2010), helps individuals reinterpret negative life events (Fredrickson, 2001), and increases prosocial behaviors (Froh et al. 2008 ; Grant and Gino 2010; McCullough et al., 2001; McCullough and Tsang 2002), contributes to relationship satisfaction (Lambert et al., 2009 ; Algoe, 2012), reduces the level of materialism (Lambert et al., 2009), and has a negative relationship with substance use, self-blame, denial and ignoring problems (Wood et al., 2010) and that it increases happiness and reduces depression (Seligman, 2008).

In recent research, the elevated level of gratitude observed in individuals with psychiatric conditions, along with its substantial negative correlation with depressive symptoms, underscores the significance of incorporating gratitude as a therapeutic resource in the clinical management of depression (Silas et al., 2024).

In addition to this, in investigations examining the influence of patient gratitude on health-care staff, a scoping review conducted by Aparicio et al. (2019) revealed that gratitude might yield significant personal and professional implications for healthcare professionals. A self-reported study involving oncology and emergency nurses from two Italian hospitals, as conducted by Converso et al. (2015), suggested that the perception of patient gratitude could serve as a protective factor against burnout. Additionally, Starkey et al. (2019) discovered that receiving expressions of gratitude predicted improvements in physical health among 146 nurses surveyed in Oregon, USA, as indicated by their satisfaction levels with patient care.

CONCLUSION

This research results also show that keeping a gratitude diary provides moment awareness and staying in the moment, draws the individual's attention from negative social comparisons to positive social comparisons, adds a new framework to the individual's life, reduces depression and anxiety, increases psychological well-being, and increases the daily positive words used. Additionally, from an evolutionary perspective, our minds appear to have evolved to help us survive in a world full of dangers. A primitive hunter-gatherer's

basic needs for survival and reproduction are food, water, shelter and sexuality. However, for these to have any meaning, it is necessary to survive. Therefore, the first feature of the primitive human mind is to pay attention to things that could harm it and to avoid them. The human mind has become more adept at foreseeing danger and avoiding it. And today, after hundreds of thousands of years of evolution, the modern mind is constantly on guard. However, nowadays, when we are far away from external dangers and there is no need to make an effort to survive, the danger-oriented mind is quite challenging for people.

Today, the reason for the increase in anxiety about things that will never happen is that the mental processes that used to be functional have lost their functionality today. This is where gratitude journals come into play, as a conscious and aware activity that helps to adapt the working mechanism of the brain, which bears the traces of the evolutionary process, to modern life.

Numerous studies, developed theoretical explanations, and models of the mechanism explaining the well-being of gratitude demonstrate that it can be used as a preventive, therapeutic, and developmental force in both clinical and non-clinical groups within the field of mental health. In this context, there is a need for research to elucidate the commonalities and differences of gratitude with other positive emotions, to determine whether there is a long-term benefit, and to identify any negative effects or costs, as well as to uncover the mechanisms explaining well-being. Furthermore, it is considered beneficial to introduce new methods and techniques for cultivating gratitude and to present research findings on its effectiveness and development across different age groups.

REFERENCES

- Adler, M. G., & Fagley, N. S. (2005). Appreciation: Individual differences in finding value and meaning as a unique predictor of subjective well-being. *Journal of Personality*, 73, 79-114.
- Aparicio M., Centeno C., Robinson C., & Arantzamendi M. (2019). Gratitude between patients and their families and health professionals: A scoping review. *Journal of Nursing Management*, 27(2), 286-300.
- Algoe, S. B. (2012). Find, remind, and bind: The functions of gratitude in everyday relationships. *Social and Personality Psychology Compass*, 6, 455-469.
- Beck, A. T., Ward, C., & Mendelson, M. (1961). Beck Depression Inventory (BDI). *Archives of General Psychiatry*, 4(6), 561-571.
- Beck, A. T., Epstein, N., Brown, G., & Steer, R. A. (1988). An inventory for measuring clinical anxiety: Psychometric properties. *Journal of Consulting and Clinical Psychology*, 56, 893-897.
- Csikszentmihalyi, M., (1999). If We Are So Rich, Why Aren't We Happy? *American Psychologist*, 54 (10), 821-827.
- Converso, D., Loera, B., Viotti, S., & Martini, M. (2015). Do positive relations with patients play a protective role for healthcare employees? Effects of patients' gratitude and support on nurses' burnout. *Frontiers in Psychology*, 6, 470.
- Diener, E. (1984). Subjective well-being. *Psychological Bulletin*, 95(3), 542-575.
- Diener, E., Emmons, R. A., Larsen, R. J., & Griffin, S. (1985). The Satisfaction with Life Scale. *Journal of Personality Assessment*, 49, 71-75.
- Diener, E., & Diener, C. (1996). Most people are happy. *Psychological Science*, 7, 181-185.
- Diener, E. (2000). Subjective Well-Being: The Science of Happiness, and a Proposal for a National Index. *American Psychologist*, 55, 34-43.

- Emmons, R. A., & Crumpler, C. A. (2000). Gratitude as a human strength: Appraising the evidence. *Journal of Social and Clinical Psychology, 19*(1), 56-69.
- 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*(2), 377-384.
- Emmons, R.A., McCullough, M.E., & Tsang, J. (2003). The measurement of gratitude. In S Lopez & CR Snyder (Eds.), *Handbook of positive psychology assessment* (pp. 327-341) Washington, DC: American Psychological Association.
- Emmons, R. A., & McCullough, M. E. (2004). *The psychology of gratitude*. Oxford University Press.
- Emmons, R. A., & Kneezel, T. T. (2005). Giving Thanks: Spiritual and Religious. *Journal of Psychology and Christianity, 24*(2), 140-148.
- Fredrickson, B. L. (2001). The role of positive emotions in positive psychology: The broaden-and-build theory of positive emotions. *American Psychologist, 56*, 218-226.
- Froh, J. J., Sefick, W. J., & Emmons, R. A. (2008). Counting blessings in early adolescents: An experimental study of gratitude and subjective well-being. *Journal of School Psychology, 46*(2), 213-233.
- Froh, J. J., Yurkewicz, C., & Kashdan, T. B. (2009). Gratitude and subjective well-being in early adolescence: Examining gender differences. *Journal of Adolescence, 32*(3), 633-650.
- Grant, A., & Gino, F. (2010). A little thanks goes a long way: Explaining why gratitude expressions motivate prosocial behavior. *Journal of Personality and Social Psychology, 98*(6), 946-955.
- Göçen, G. (2012). *A Field Research on Gratitude and Psychological Well-Being*. Unpublished Doctoral Thesis. Ankara: Ankara University Institute of Social Sciences.
- Hisli, N. (1988). Validity and reliability of the Beck Depression Inventory for university students. *Journal of Psychology, 7*(23), 3-13.
- Kerr, S. L., O'Donovan, A., & Pepping, C. A. (2015). Can Gratitude and Kindness Interventions Improve Well-Being? *Journal of Happiness Studies, 16*, 17-36.
- Lambert, N. M., Graham, S. M., & Fincham, F. D. (2009). A prototype analysis of gratitude: Varieties of gratitude experiences. *Personality and Social Psychology Bulletin, 35*, 1193-1207.
- Lyubomirsky, S., Sheldon, K. M., & Schkade, D. (2005). Pursuing happiness: The architecture of sustainable change. *Review of General Psychology, 9*, 111-131.
- Lambert, N. M., Fincham, F., Stillman, T., & Dean, L. (2009). More gratitude, less materialism: The mediating role of life satisfaction. *The Journal of Positive Psychology, 4*(1), 32-42.
- Lyubomirsky, S., & Layous, K. (2013). How do simple positive activities increase well-being? *Current Directions in Psychological Science, 22*(1), 57-62.
- McCullough, ME, Bellah, C.G., Kilpatrick, SD, & Johnson, J.L. (2001). Vengefulness: Relationships with forgiveness, rumination, well-being, and the Big Five. *Personality and Social Psychology Bulletin, 27*(5), 601-610.
- McCullough, M.E., Emmons, R.A., & Tsang, J. (2002). The grateful disposition: A conceptual and empirical topography. *Journal of Personality and Social Psychology, 82*(1), 12-127.
- McCullough, M. E., & Tsang, J. (2004). Parent of the virtues? The prosocial contours of gratitude. In R. A. Emmons & M. E. McCullough (Eds.), *The Psychology of Gratitude* (ss. 123-141). New York, NY: Oxford University Press.
- Seligman, M. E., & Csikszentmihalyi, M. (2000). Positive psychology: An introduction. *American Psychologist, 55*, 5-14.
- Seligman, M. E. (2008). PositiveHealth. *Applied Psychology, 57*(1), 3-18.
- Sinclair, S. & G. Rockwell. (2024). Contexts. *Voyant Tools*. Retrieved January 27, 2024, from <https://>

voyant-tools.org

- Silas, V., M., R., M., E., H.g., K., & R., H. (2024). Gratitude and religiosity in psychiatric inpatients with depression. *Depression Research and Treatment*. <https://doi.org/10.1155/2024/7855874>
- Starkey, A. R., Mohr, C. D., Cadiz, D. M., & Sinclair, R. R. (2019). Gratitude reception and physical health: Examining the mediating role of satisfaction with patient care in a sample of acute care nurses. *The Journal of Positive Psychology*, 14(6), 779-788.
- Telef, B.B. (2013). Psychological Well-Being Scale: Adaptation to Turkish, Validity and Reliability Study. *Hacettepe University Faculty of Education Journal*, 28(28-3), 374-384.
- Teğın, B. (1987). Depresyonda bilişsel süreçler: Beck modeline göre bir inceleme. *Psikoloji Dergisi*, 6, 116-121.
- Ulusoy, M., Sahin, N. H., & Erkmén, H. (1998). Turkish Version of the Beck Anxiety Inventory: Psychometric Properties. *Journal of Cognitive Psychotherapy*, 12(2), 163-172.
- Wood, A. M., Joseph, S., & Linley, P. A. (2007). Coping style as a psychological resource of grateful people. *Journal of Social and Clinical Psychology*, 26(9), 1076-1093.
- Wood, A. M., Maltby, J., Gillet, R., Linley, P. A., & Joseph, S. (2008). The role of gratitude in the development of social support, stress, and depression: Two longitudinal studies. *Journal of Research in Personality*, 42, 854-871.
- Wood, A.M., Froh, J.J., & Geraghty, A.W. (2010). Gratitude and well-being: A review and theoretical integration. *Clinical Psychology Review*, 30(7), 890-905.
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