



Effects of a brief grateful thinking intervention on college students' mental health

Tyler L. Renshaw*, Dana K. Rock

Department of Psychology, Louisiana State University, Baton Rouge, LA, United States

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ABSTRACT

Gratitude-based interventions have been shown to significantly improve positive indicators of mental health and reduce negative indicators of mental health. The present study used a randomized controlled trial design to test a brief grateful thinking-only exercise with a sample of college students ($N = 97$). Participants in the gratitude-based intervention condition ($n = 54$) were instructed to spend five minutes each day thinking about something they were grateful for, while participants in the activity-matched control condition ($n = 43$) were instructed to spend the same amount of time thinking about something they had learned recently. Descriptive results indicated that, compared to the control exercise, the grateful thinking-only exercise had greater therapeutic effects on happiness, life satisfaction, depression, stress, and negative affect. However, consideration of effect-size confidence intervals and associated inferential statistics suggested that we could not ultimately reject the null hypothesis. Overall, results suggest the need for including both activity-matched and passive control conditions within gratitude-based intervention research.

1. Introduction

Gratitude is likely one of the most well-researched of positive psychology's contemporary constructs (Peterson & Seligman, 2004). Indeed, the past decade has seen burgeoning interest in gratitude within scholarly press (e.g., Bono, Froh, & Forrett, 2014), semi-scholarly press (e.g., Froh & Bono, 2012), and even popular press (e.g., Williams, 2012). Yet despite such professional and public visibility, conceptualizing gratitude remains a difficult task. Emmons and McCullough (2003) have noted that gratitude “defies easy classification,” as it has been operationalized variously as “an emotion, an attitude, a moral virtue, a habit, a personality trait, or a coping response” (p. 377). The present study operationalized gratitude using the integrative definition offered by Furlong, You, Renshaw, O'Malley, and Rebelez (2013), which was derived from Emmon's (2007) conceptualization and defines gratitude as the “sense of thankfulness that arises in response to receiving any kind of personal benefit (be it material or nonmaterial) as a result of any transactional means (be it a personal encounter with another person, with nature, with an object, or even with ideas” (p. 755)). For the purposes of this study, then, gratitude was understood as a dispositional yet malleable behavioral trait, which can be targeted and changed via intervention.

Given the above definition, gratitude can be conceptualized as one of many positive mental health indicators. Research has demonstrated

that gratitude is positively associated with subjective wellbeing, negatively correlated with psychological distress, and positively associated with prosocial behavior (e.g., Krause, 2009; McCullough, Emmons, & Tsang, 2002; McCullough, Tsang, & Emmons, 2004; Ng & Wong, 2013; Park, Peterson, & Seligman, 2004; Renshaw & Steeves, 2016; Wood, Joseph, & Maltby, 2009). In their review of the empirical literature, Wood, Froh, and Geraghty (2010) concluded that “the size of the unique relationships between gratitude and subjective and eudemonic well-being appears substantial, suggesting that gratitude has a unique and distinct impact on well-being, and is a worthwhile subject for specific future research in the area” (p. 896). Interestingly, gratitude has also been shown to have meaningful associations with physical health. Studies have shown, for instance, that higher levels of gratitude are correlated with more robust levels of cardiovascular and immune functioning (McCraty, Atkinson, Tiller, Rein, & Watkins, 1995). Research has also shown that greater levels of gratitude are substantively correlated with more frequent exercise and fewer self-reported physical problems (Emmons & Crumpler, 2000). Taken together, the available evidence indicates that gratitude is positively associated with a wide-range of subjective and objective health indicators—suggesting it may be a key indicator of successful living that, if targeted for intervention, could yield collateral gains in other desirable areas of human functioning.

So far, several gratitude-based intervention studies have been

* Correspondence to: Louisiana State University, Department of Psychology, 236 Audubon Hall, Baton Rouge, LA 70803, United States.
E-mail address: trenshaw@lsu.edu (T.L. Renshaw).

conducted to investigate the effects of engaging in brief gratitude-based exercises on positive and negative mental health outcomes. The two most common intervention strategies used in research and practice so far include *grateful listing* and *grateful letter writing* (Davis et al., 2016). In the grateful listing exercise, participants keep a daily list or journal, for the duration of at least two weeks, of three to five things they are grateful for (e.g., Emmons & McCullough, 2003; Froh, Sefick, & Emmons, 2008). In the grateful letter writing exercise, participants write a letter, usually once a week or over the course of a week, expressing their gratitude to a particular person and then, sometimes, when it is finished, deliver and read the letter to the target person (e.g., Seligman, Steen, Park, & Peterson, 2005). Another, less-researched approach to gratitude-based intervention involves *grateful thinking-only*, sans writing (Watkins, Woodward, Stone, & Kolts, 2003). In this approach, participants simply reflect upon someone or something they are grateful for, which occurred in the recent past, for several minutes. Although the intervention research suggests that grateful listing and grateful letter writing have proven effective in several studies (Davis et al., 2016), so far only one study has demonstrated the effectiveness of grateful thinking-only. This study, conducted by Watkins et al. (2003), tested grateful thinking-only compared to two grateful writing conditions as well as a control condition—with results showing greater reductions in negative affect for the thinking-only group compared to the control condition, and greater improvements in positive affect for the thinking-only group compared to all other conditions. The therapeutic potential of grateful thinking-only exercises is also supported by the notable effects of other thinking-sans-writing exercises within the positive psychology literature, such as Lyubomirsky, Sousa, and Dickerhoofs (2006) findings showing that thinking-only about positive experiences had greater effects on wellbeing than either talking or writing about such experiences. Given the limited research in this vein so far, the overarching aim of the present study was to extend the research on grateful thinking-only exercises.

When testing the therapeutic effects of gratitude-based exercises within controlled research designs, it is imperative to consider both passive (or measurement-only) and active (or alternative-exercise) control conditions (Renshaw & Hindman, 2017). Active controls can be either activity-matched (i.e., similar in structure but not intended to be therapeutic) or psychologically active (i.e., dissimilar in structure but intended to be therapeutic), depending on if the purpose of the study is to demonstrate initial efficacy or superiority compared to previously validated interventions (Davis et al., 2016). Historically, scholars synthesizing the gratitude-based intervention research have raised concern over the nature of active control conditions used in gratitude-based intervention trials, as they have often been structurally dissimilar or anti-therapeutic (e.g., counting or journaling about hassles; Emmons & McCullough, 2003; Froh et al., 2008), with very few studies employing activity-matched conditions that allow for straightforward demonstrations of efficacy. The importance of activity-matched controls is also suggested by interesting findings noted in clinical psychology research, wherein simple, active, positive control exercises—such as systematic social interaction and journaling—have been observed to function as alternative interventions for reducing psychological distress (e.g., Stice, Burton, Bearman, & Rohde, 2007). Considering that most positive psychology interventions have been evaluated in relation to passive or waitlist controls and have yielded, at best, small effect sizes (Sin & Lyubomirsky, 2009), further research is warranted to clarify the differential effects of gratitude-based exercises compared to activity-matched controls (Davis et al., 2016). This is especially true for grateful thinking-only exercises because, so far, the active controls have all involved writing (Watkins et al., 2003) and are therefore not truly activity-matched.

Given the context sketched above, the purpose of the present study was to test the potential therapeutic effects of a brief grateful thinking-only exercise, in comparison to an activity-matched control exercise, on college students' mental health functioning. Participants in the

intervention condition were instructed to spend five minutes each day (over the course of two weeks) thinking about something they were grateful for, while participants in the control condition were instructed to spend five minutes each day (also over the course of two weeks) intentionally reflecting on something they had learned recently. This study was guided by two main research questions:

1. In comparison to the activity-matched control condition, does the gratitude-based intervention have greater effects on positive indicators of mental health, as indicated by improvements in self-reported gratitude, life satisfaction, happiness, and positive affect?
2. In comparison to the activity-matched control condition, does the gratitude-based intervention have greater effects on negative indicators of mental health, as indicated by reductions in self-reported depression, anxiety, stress, and negative affect?

Considering the research findings reviewed above, we hypothesized that, compared to those in the activity-matched control condition, participants engaging in the grateful thinking exercise would have universally greater improvements across all positive and negative mental health indicators. Moreover, we expected that findings from the present study would contribute to the literature by providing the first experimental evidence of the effects of a grateful thinking-only intervention in comparison to an adequately activity-matched control.

2. Method

2.1. Participants

Participants were 97 undergraduate students attending a large, public university located in the southern region of the United States. After enrollment in the study, 43 of these participants were randomly assigned to the activity-matched control condition, while the other 54 were randomly assigned to the grateful thinking-only intervention condition. Randomization was accomplished using software that assigned a condition to each participant prior to their completion of pretest measures. There was no attrition throughout the study. Ages of participants in the control condition ranged between 17 and 31 years ($M = 19.84$, $SD = 2.26$), with 86% identifying as female. Reported ethnicity for the control group was 81.4% White/Caucasian, 14% Black/African-American, 2.3% Asian, and 2.3% other or multiple ethnicities. Ages of participants in the gratitude intervention condition ranged from 18 to 25 years ($M = 19.98$, $SD = 1.72$), with 76% identifying as female. Reported ethnicity for the intervention group was 64.8% White/Caucasian, 22.2% Black/African-American, 1.9% Asian, 3.7% Indian/Pacific Islander, 3.7% Hispanic, and 3.7% other or multiple ethnicities. All participants were recruited via an online research management system administered by the university's Department of Psychology, which was only accessible to students enrolled in undergraduate psychology courses. The online recruitment advertisement for the study noted only that the purpose was to “test the effects of thinking exercises on aspects of psychological distress and wellbeing.” Participation in the study was open to all undergraduates who were at least 18 years of age and was not restricted by academic major, physical health, mental health, or any other personal characteristics. Participants were compensated by receiving partial course credit for participating in the study.

2.2. Measures

2.2.1. Gratitude Questionnaire-6 (GQ-6)

The GQ-6 is a six-item measure for assessing dispositional gratitude (McCullough et al., 2002). The majority of items are positively phrased (e.g., “I have so much in life to be thankful for”), whereas a couple of items are negatively worded (e.g., “When I look at the world, I don't see much to be grateful for”) and thus require reverse scoring. All GQ-6

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