





EFFECTIVENESS OF GRATITUDE JOURNALS ON OPTIMISM AND RESILIENCE AMONG DEPRESSION CLIENTS

 Vidhyashree M.S^{1*},  S. Srikumaran²

¹M.Sc Applied Psychology, Department of Psychology, Annamalai University, Anamalai Nagar, India.

²Research Scholar, Department of Psychology, Annamalai University, Anamalai Nagar, India.

*Corresponding Author: kumaransripsy@gmail.com

Article Info: - Received : 07 July 2024

Accepted : 26 July 2024

Published : 30 July 2024

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In the Modern era, technology plays a vital role that leads to experience of negative feelings. With respect to the evolving negative consequences the field of Positive Psychology has been developing. The therapeutic techniques in positive psychology are being used as the strategy overcomes those negative experiences. Among the different techniques, Gratitude Journal is the simplest form of maintaining positive notes about or on a day. Based on the theoretical evidences, it is noted that the negative experiences like Stress, Anxiety and Depression can be reduced using the practice of Gratitude Journals. The persistent sadness in the mood, lack of interest in every activity an individual involved that in turn affects the daily living is defined as the psychological illness called Depression. Depression occurs as a result of lack of positivity in an individual's perception and inability to bounce back from negativity. Whereas the optimism reduces and pessimism increases, depression plays a major role. This makes trouble in bouncing back from the negative feelings and Thoughts patterns. Thus the present study aimed to understand the effectiveness of Gratitude Journals on Optimism and Resilience among Depression Clients. For the study, 20 samples were collected from the Depression Clients who were already diagnosed with Mild level Depression around Villupuram District. The samples were selected through the method of Purposive sampling. The collected data were run through SPSS of version 23 to identify the significant differences based on the demographics and the pre and post-test. The result of the study discovered an improvement in optimism and Resilience among the Depression Clients after practicing Gratitude Journals for a month.

Keywords: *Stress, Anxiety, Depression, Gratitude Journals, Optimism, Resilience.*



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1. INTRODUCTION

Recent researches on the Psychology have been emerging in the field of Positive Psychology. Technological advancements lead to positive outcomes whereas it has some disadvantages. The technological terms like Digital Stress, Digital

Anxiety is popularized in the present days. The better quality of life, satisfaction, Well – Being, happiness are found to be eradicated and decreased. That in turn affects the mood state of individuals and also various reasons are combined together. In order to that the promotion of

resilience and optimism among Depression clients were being found out.

2. OPTIMISM

Optimism – a reflection of hope, belief on the outcome of any specific behaviour, things or situations. The ideology of being positive, favourable and desirable. The word optimism has been emerged from the term Optimum (Latin) meant as “best”. Therefore optimistic view denotes to expect a positive outcome. Gottfried Wilhelm Leibniz, German philosopher in 1759 coined the term Optimism in his work.

3. OPERATIONAL DEFINITIONS

Hopefulness: The attitude that good things will happen and that people’s wishes or aims will ultimately be fulfilled. Optimists are people who anticipate positive outcomes, whether serendipitously or through perseverance and effort and who are confident of attaining desired goals. Most individuals lie somewhere on the spectrum between the two polar opposites of pure optimism and pure pessimism but tend to demonstrate sometimes strong, relatively stable or situational tendencies in one direction or other (American Psychological Association, 2018) Reacting to problems with a sense of confidence and high personal ability. Specifically, optimistic people believe that negative events are temporary, limited in scope (instead of pervading every aspect of person’s life) and manageable (Martin Seligman) Optimism describes a positive orientation toward the future. Optimists are people who have the habitual tendency to expect positive future outcomes even when difficulties arise (Scheier and Carver, 1992).

4. CHARACTERISTICS AND TRENDS

Various researches in Positive Psychology reveal that optimism builds resilience. Further optimists tend to have;

- Good Morale
- Better quality of health
- Ability to cope with challenges
- Career achievement
- Academic achievement

The various benefits of optimism uncovered by the researchers include:

- Promotion of subjective Well-Being
- Promotion of subjective Happiness
- Better performance in work
- Improved Mood

- Good Quality of social relationships
- Development of positive emotions

5. TYPES OF OPTIMISM

Optimism is the umbrella term of expecting the positive outcome in any event. It has been classified into three main types (Dr. Trudel Fitzgerald).

- **Dispositional Optimism** – It is the type of optimism in which the individual have general expectation about future. Dispositional optimism is a generalized expectation about future (Suzanne C. Seger Strom). People with dispositional optimism have ideas about future and think of the challenges.
- **Explanatory Optimism** – Explanatory is a type that makes an Individual to take good things over negativity and keep on experiencing and being confident about good things and positivity. It is the think pattern that an individual could have.
- **Unrealistic Optimism** – Being illogical and having a thought pattern of hopefulness is termed as unrealistic optimism. It is also called as optimistic bias. This refers to the expectations of good things rather than bad things to happen.

6. LEARNED OPTIMISM

Learned Optimism is the process of recognising and challenging pessimistic thoughts in order to develop more positive behaviours. This helps to find new ways to manage tough situations and improve their overall well – being. Martin Seligman is known as the founding father of Learned Optimism.

7. BENEFITS OF LEARNED OPTIMISM

- Improve mood
- Improve well – being
- Boosting self esteem
- Encourage more positive Behaviour
- Overcoming difficult situations
- Improves physical health
- Lowering stress levels
- Improves Mental Health
- Increases Motivation
- Helps to live longer

8. ABCDE MODEL OF LEARNED OPTIMISM

ABCDE stands for Adversity, Beliefs, Consequences, Disputation, Energisation.

Adversity start by spelling out the situation and sticking to the facts and what actually happened. Beliefs are the chance to writing the thoughts during and after the situation. Consequences takes a look at the repercussions of these thoughts and how an individual feel and what happened then? Disputation is the hardest part of the exercise. Actively dispute beliefs that break your life balance and send into the downward spiral. A way around that is to think about it as if an individual giving advise to their best friend was in same situation , for which already an individual know all the details and how gently dispute thoughts without belittling their emotions? Energization (action) when individual have actually been effective in challenging the problem beliefs, an increase of energy, a sense of renewed hope or a minimum serenity.

9. RESILIENCE

Resilience is defined as, “the capacity to recover or bounce back, as is inherent in its etymological origins, wherein „resilience“ derives from the Latin words salire - to leap or jump, and resilire - to spring back” (Davidson et al., 2005). Masten(2001) opines, “that class of phenomena which is characterized by good outcomes in spite of serious threats to adaptation or development,” can be called Resilience. It refers to „bouncing back“ of an individual or system after a challenge or extreme homeostatic disturbance. While Carver (1998) considered resilience as the capacity to bounce back from “disruptions in functioning that result from stress appraisals,” and “to the ability to return to the previous level of functioning”; Walsh et al (2010) observed that being resilient includes not just surviving and being a casualty for life, it is also the ability to heal and to be strengthened to live life completely. Wagnild & Young quoted in 1993 that “the quality of resilience is attributed to individuals who, in the face of overwhelming adversity, are able to adapt and restore equilibrium to their lives and avoid the potentially deleterious effects of stress” (Bebbington, Sturt, Tennant, & Hurry, 1984; Rutter, 1985; Byrne et al, 1986; Richmond & Beardslee, 1988; O'Connell & Mayo, 1988; Beardslee, 1989; Masten & O'Connor, 1989; Caplan, 1990). Thus, resilience is that trait or attribute that any individual needs to not just exist but to live productively and happily despite the hardships that life throws at him.

Kadner (1989) conceptualized resilience as an individual’s ability to make a “psycho-social come back in adversity” and defined resilience as consisting of ego strength, social intimacy, and resourcefulness. Definitions like Kadners” point to resilience being a personality trait rather than a capacity that can be enhanced. In contrast, Tugade & Fredrickson (2004) describe resilience as the ability to recover from, “negative emotional experiences and adapt with flexibility to the changing requirements of stressful experiences.” One of the pioneers of resilience research, Garmezy (1993) regarded resilience to be “the power of recovery and the ability to return once again to those systems of adaptation and competence that characterized the individual before undergoing extreme stress.”

Fraser, Richman and Galinsky (1999), on the other hand, describe resilience “as the ability of individuals who adapt well to the extraordinary, achieving positive and unexpected outcomes in the face of adversity.” With intent to combine all the ideas prevalent in resilience research Masten et al (1990) defined resilience as “the process of, capacity for, or outcome of successful adaptation despite challenging or threatening circumstances.” This view of resilience as both the process and the outcome is quite acceptable to proponents of strength-based research among children and adolescents as it allows for a more positive approach towards mental health interventions aiding in resilient outcomes. Though there is some level of commonality in the approaches used to describe this concept, varied researchers have operationalized it differently to suit their research purposes.

10. OPERATIONAL DEFINITIONS

Resilience has been operationalized as a dynamic process involving an interaction between both risk and protective processes, internal and external to the individual, that act to alter the effects of an adverse life event (Rutter, 1985, 1999). The ability to rebound from adversity has often been framed in the context of risk factors and vulnerabilities that hamper resilient outcomes; and protective factors and assets that augment resilience of an individual.

11. RISK FACTORS

As suggested by Newman (2004), a factor or a permutation of factors that enhance the

probability of debilitating consequences in the face of adversity is called a risk factor. According to [Kaplan \(1999\)](#), certain acute stressors that an individual faces like sudden traumas or ongoing chronic struggles in physical, mental, academic and social arenas come together to increase the chances of poor outcomes at a challenging time. Examples of such factors are: mental disorder, poor socio-economic conditions, familial or societal violence and conflict, parental drug abuse, or even death of a parent.

A risk factor is also defined as a measurable characteristic in a group of individuals or their situation that predicts an unconstructive outcome on a specific outcome criterion ([Wright, Masten & Narayan, 2013](#)). Risk can also mean a probable negative outcome variable, a specific early predictor of unfavourable later outcomes, unfavourable life conditions (e.g., poverty) or irrational behaviour choices ([Kauppi & Shaikh, 2007](#)). [Fraser and Terzian's \(2005\)](#) definition of a risk factor is that "Broadly defined, the term risk factor relates to any event, condition, or experience that increases the probability that a problem will be formed, maintained, or exacerbated." This elucidates that the existence of any risk factors in an individual's life has the potency to aggravate the likelihood of that problem behaviour transpiring at a later point in time. However, any single risk factor does not ensure that a non-resilient outcome is inevitable. In fact, the presence of a risk factor suggests an increased chance or probability that such a problem might precipitate. Certain key points regarding risk factors have emerged from epidemiology and developmental psychopathology ([Cicchetti & Cohen, 1995](#); [Masten, 2001](#)).

12. PROTECTIVE FACTORS

In the words of [Rutter \(1987\)](#), "Protective factors usually are defined as individual or environmental safeguards that enhance a person's ability to resist stressful life events, risks, or hazards and promote adaptation and competence." These factors are factors that have specific importance for "positive adaptation at high levels of risk or adversity" ([Rutter, 1979](#)). Predictor of resilience can be termed protective factor only when it seems that it would offer some "shielding effect" during risk or adversity. Protective factors mediate the impact of adversity on adaptation. But it is not easy to identify

protective factors in studies of resilience. It is difficult to differentiate between protective factors and assets as most of the "significant correlates of good adaptation are themselves complex systems" or serve multiple functions ([Wright et al, 2013](#)).

The strength based focus of resilience research tries to explore the factors that were responsible for resilient outcomes. And investigators have identified positive attributes of individuals or their relationships and contexts that predict better adaptation. The ones that predict good outcomes at all levels of risk are often described as assets or resources. Having good cognitive abilities or a good sense of humour or having good parents is associated with better social adjustment in many studies, regardless of whether people experience risk or adversity. However, some predictors appear to be important or more important only under difficult circumstances; these are called protective factors ([Masten et al, 2013](#)).

Characteristics of an individual (temperamental and cognitive), the quality of the child's relationships and ecological factors and regulatory activities are three types of protective factors identified by [Greenberg, 2006](#). As mentioned previously, protective factor only operates when a risk factor is present. Although protective factors decrease an individual's vulnerability to risk, they do not necessarily enhance a person's potential in other areas ([Rutter, 1987](#)). Protective factors may not constitute pleasurable experiences in any ordinary sense of the term and may not be experiences at all, rather they may reflect qualities of the individual ([Rutter, 1985](#)). This is where an overlap between the concept of protective factors and personality traits occurs; however, [Rutter](#) insists that "personal qualities should not be interpreted as constitutional or unmodifiable traits."

Protective factors as studied in resilience are likely to have beneficial effects on those exposed to risks as opposed to those not exposed. In the words of [Dyer & McGuinness \(1996\)](#), "protective factors are specific attributes or situations that are necessary for a tangible process of resilience to occur."

13. REVIEW OF LITERATURE

[Sung et al. \(2023\)](#) conducted a study on Effects of Gratitude Journaling on Depression, Happiness

and Gratitude in Long – term hospitalized older adults with chronic Schizophrenia was concluded that the Gratitude Journaling had shown a significant improvement in happiness and reduced the severity of depression. It also found that happiness is positively correlated after administration of gratitude journaling intervention. The study included the sample size of 16 participants and provided 14 sessions of Gratitude writing over a 2 week period, each session for 15 minutes.

Stephanie M Rescigno et.al, (2022) in Promoting Mental Health in Young Adults: A brief Gratitude writing Intervention reduced brooding in people who Ruminates was attempted to identify the promotion of Mental Health among young adults using the Gratitude Writing Intervention by reducing brooding in people who tends to ruminate. The findings suggested that the gratitude writing reduced brooding in high – rumination college students and Gratitude writing also increased the positive affect among the participants.

Megawatul hasannak et.al, (2022) conducted a quasi – experimental study of gratitude journaling on students' academic resilience aimed to identify the effect of gratitude journaling on academic resilience among 16 students using non – randomized pre-test post – test design and the statistical analysis of non – parametric test (Whitney U – test). It was found that Gratitude journaling significantly increased students' academic resilience on the effect size score of 52.5%

14. NEED FOR THE STUDY

The present study is on the effectiveness of Gratitude journals on Optimism and Resilience among the Depression clients. The disturbance in mood is the general challenge facing by a maximum number of individuals in the society. The disturbance in extreme leads to the negative thought patterns that are commonly known as depression. In order to contribute for reducing depression and to promote positivity, the present study was reveals the simple tactic of maintaining gratitude journals. And the interconnections were identified in this study.

15. PROBLEM OF THE STUDY

The problem of the present study is to identify the effectiveness of Gratitude Journals

among the Depression Clients. The effectiveness was identified by promoting optimism and resilience among the particular population in this study. And so the title is framed as “Effectiveness of Gratitude Journals on Optimism and Resilience among Depression Clients”.

16. OBJECTIVES

- To analyze the significant differences in pre-test and post-test in the level of optimism and resilience among depression clients.
- To explore the significant differences in level of optimism and resilience based on demographic variables.

17. HYPOTHESES

H1: There will be a significant difference in the level of optimism after administering Gratitude Journals based on the Gender

H2: There will be a significant difference in the level of optimism after administering Gratitude Journals based on the Residence

H3: There will be a significant difference in the level of optimism after administering Gratitude Journals based on the Marital Status

H4: There will be a significant difference in the level of Resilience after administering Gratitude Journals based on the Gender

H5: There will be a significant difference in the level of Resilience after administering Gratitude Journals based on the Residence

H6: There will be a significant difference in the level of Resilience after administering Gratitude Journals based on the Marital Status

H7: There will be a significant difference in the level of Optimism and Resilience in the pretest & posttest after administering Gratitude Journals among depression clients

18. VARIABLES

- **Independent Variable:** Independent variable is the variable that causes a change in the dependent variable of the Study. It is capable of stimulation or Manipulation. The stimulant variable on the present study in accordance with the investigator is Gratitude Journals.
- **Dependent Variable:** A variable that is response for the stimulation of independent variable is known as dependent Variable. A change in the independent variable might affect the dependent variable. The

Dependent variable in the present study is Optimism and Resilience. The demographics i.e., Age, Gender, Residence and Marital Status are also were taken as dependent variable with respect to Gratitude Journals.

19. METHOD AND DESIGN

The data were collected from various Psychiatric clinics among the diagnosed depression Clients The participants were provided with the instructions regarding the preliminary test, Intervention and the post test. The willingness of the participants were ensured. The preliminary Data were collected from 20 individuals who were diagnosed with the Mild level Depression and the practice of maintaining Gratitude Journals was followed for the duration of 1 month. After a Week later the questionnaires were distributed and data were collected.

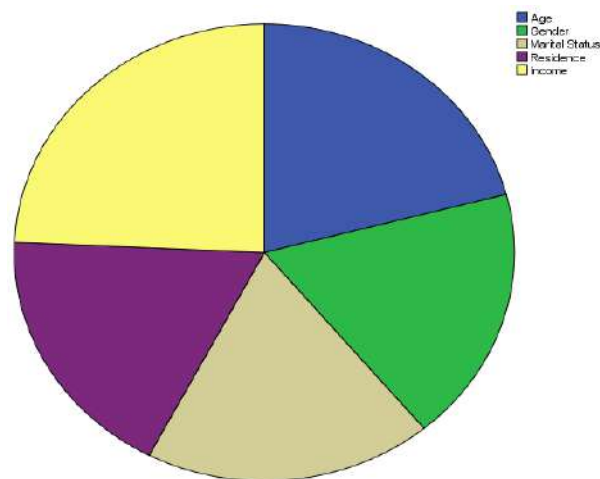


Fig-1: Distribution of respondents based on demographics

Sample Size: The sample size of the present study is 20, those who were already diagnosed with Mild Depression.

Sampling Technique: Purposive Sampling method was employed in the study for the collection of 20 samples.

Sampling Universe: Samples of the present study were drawn from Psychiatric Clinic in and around Villupuram District.

Distribution of respondents based on Demographics

Variable		N	%
Gender	Male	12	60
	Female	8	40

Age	25 – 30	7	35
	31 – 35	9	45
	36 – 40	4	20
Locality	Rural	8	40
	Urban	12	60
Marital Status	Single	7	35
	Married	13	65

20. INSTRUMENTS USED

- **Revised Life Orientation Test (LOT – R):** The LOT – R was developed by Scheier & Carver and it was revised in 1994. It is a 5 - point Likert scale from strongly disagree (0) to strongly agree (4). It consists of 10 statements as investigating the individuals thinking, feeling and perception. This scale is used to assess the level of optimism among the individuals. While constructing it has been classified into two dimensions. They are, Optimism and Pessimism scale. The test re-test reliability of the Revised LOT – R is .68. The reliability of each dimension are $\alpha = .70$ for Optimism and $\alpha = .63$ for Pessimism.
- **Resilience Scale (RS – 14):** The Resilience Scale (RS – 14) was developed by [Wagnild \(2009\)](#). It is a 7 – point Likert scale with 14 statements. The Likert point starts from strongly disagree (1) to strongly agree (7). The minimum score in the RS – 14 is 14 and the maximum score is 98.

21. INTERVENTION

Gratitude journals are the collection of things for which an individual is grateful for i.e., I am grateful for the help done by my therapist today. This can be noted down at the end of the day by an Individual on their own. Further instruct the following to the clients.

- Ask the individual to note 3 – 5 things for which they are grateful for (it’s mandatory)
- If the client feels hard to write 3 – 5 per day in the beginning let allow them to increase gradually from 1 – 2
- Ask them to be specific (mention any specific circumstance or person) e.g. am

grateful for my therapist as she made me to find this solution

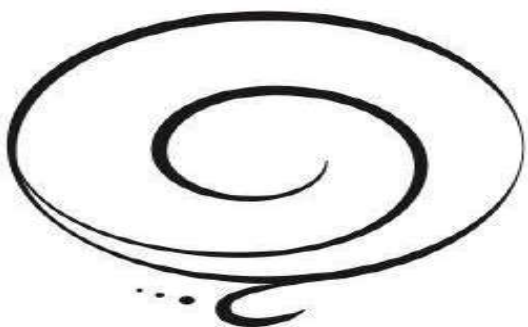
- Try to focus on person whom you are grateful to
- Make note of the surprises that takes place unexpectedly
- Be consistent in writing this journal
- Make sure that they don't maintain this journals in mobile phones or mind calculation. Just ask them to maintain using paper pencil.
- This could improve their well-being and further would be useful for my research work.

22. GRATITUDE JOURNALS

Gratitude Journals in general may called as Counting – one's Blessings. It's a Diary of things for which someone is being Grateful for. Tina Cell in the study related to Gratitude Journals found that Gratitude Journals helps in Suicidal Prevention and maintaining Mental Health among Individuals. Positive Psychology is the emerging field that holds many therapeutic techniques and practices to promote positivity and well – being among the Human Beings. In order to Positive Psychology and its promotion, Journaling and Practising Gratitude is the ease and True method of creating positivity

The purposes of the Journals are to pay attention to the good things in life or otherwise taking for granted rather than negative things and emotions. Gratitude is derived from the Latin word Gratus, meaning pleasing or Thankful. The aim of Gratitude Journals is to nurture an attitude of gratitude and shift focus away from negative thoughts. Gratitude disconnects an Individual from the Toxic, Negative emotions and ruminating that often accompanies them Universal Symbol.

Gratitude Symbol - A simple centre & 3 circular dots on the Lower exterior of the spiral



Gratitude Journaling is the method of promoting Gratitude. It involves the Participants making writing lists of several things for which

one is grateful regularly. The methods for doing Gratitude Journals includes,

1. Be specific as possible
2. Go for depth over breadth
3. Get Personal
4. Try subtraction not just addition
5. See good things as gifts
6. Savor Surprises
7. Aim of Variety
8. Write Regularly

The Gratitude Journals is about counting the blessings and enjoying better health and Happiness. Taking 15 mins per day or maintaining 3 or 2 times per week is important. The Gratitude Journals should be maintained in Notebooks or in Phone Noted and 5 things should be noted down by the Individual. This should be followed as routine , things could be relatively small also.

The goal of the Gratitude Journal is to remember a good event, experience person or thing in life – then enjoy the good emotions that common with it.

✓ Phase – I

The Participants were selected through Purposive sampling and they were instructed with the procedure of completing the questionnaires, maintaining gratitude journals and the final phase of completing Questionnaires. Then the participant consent were considered.

During Phase – I the Participants were asked to fill the Questionnaires. The LOT – R with 10 items and the Wagnild Resilience Scale with 14 statements were distributed. The common instructions as there is no right or wrong in the answers. Select the answer as soon as possible without skipping any questions were delivered. Then the Participants were asked to maintain the Gratitude Journals for 1 month as a routine by writing 3-5 specific things that made them to feel grateful on a daily basis.

✓ Phase – II

The Participants were asked to fill the questionnaires after maintaining the Gratitude Journals for 15 days as a Baseline test. The Gratitude Journals maintained by the participants were cross checked by the researcher.

✓ Phase – III

As the final phase of the study, after 30 days and 1 week later the participants were asked to assemble and fill the questionnaires.

23. RESULTS AND DISCUSSION

Table-1: Showing mean, standard deviation, t-value and p-value for Optimism after administration of Gratitude Journals with respect to gender

Variable	Sub-Variable	N	Mean	SD	t - value	p-value
Gender	Female	8	19.75	3.77	.646	.526
	Male	12	21.00	4.51		

p>0.05 (Not Significant)

From the table 1 independent sample t-test it was inferred that there is no significant difference in the level of Optimism after administering Gratitude Journals on the basis of gender ($t=.646$, $p>0.05$). Comparing the mean scores, males (Mean = 21.00, SD = 4.51) scored higher than the females (Mean = 19.75, SD = 3.77). This shows that the Null hypothesis is failed to reject.

Table-2: Showing mean, standard deviation, t-value and p-value for Resilience after administering Gratitude Journals with respect to gender

Variable	Sub-Variable	N	Mean	SD	t - value	p-value
Gender	Female	8	60.38	6.50	.980	.340
	Male	12	57.58	6.06		

p>0.05 (Not Significant)

From the table 2 independent sample t-test it was inferred that there is no significant difference in the level of Resilience after administering Gratitude Journals on the basis of gender ($t=.980$, $p>0.05$). Comparing the mean scores, females (Mean = 60.38, SD = 6.50) scored higher than the males (Mean = 57.58, SD = 6.06). This shows that the Null hypothesis is failed to reject.

Table-3: Showing mean, standard deviation, t-value and p-value for Optimism after administration of Gratitude Journals with respect to Marital Status

Variable	Sub-Variable	N	Mean	SD	t - value	p-value
Marital Status	Single	7	20.00	4.43	.384	.705
	Married	13	20.77	4.18		

p>0.05 (Not Significant)

From the table 3 independent sample t-test it was inferred that there is no significant difference in the level of Optimism after administering Gratitude Journals on the basis of Marital Status ($t=.384$, $p>0.05$). Comparing the mean scores, Married (Mean = 20.77, SD = 4.18) scored higher than the singles (Mean = 20.00, SD = 4.43). This shows that the Null hypothesis is failed to reject.

Table-4: Showing mean, standard deviation, t-value and p-value for Resilience after administering the Gratitude Journals with respect to Marital Status

Variable	Sub-Variable	N	Mean	SD	t - value	p-value
Marital Status	Single	7	59.00	6.05	.154	.879
	Married	13	58.54	6.56		

p>0.05 (Not Significant)

From the table 4 independent sample t-test it was inferred that there is no significant difference in the level of Resilience after administering Gratitude Journals on the basis of Marital Status ($t=.154$,

$p > 0.05$). Comparing the mean scores, Married (Mean = 58.54, SD = 6.56) scored and the singles (Mean = 59.00, SD = 6.05) Singles scored higher. This shows that the Null hypothesis is failed to reject.

Table-5: Showing mean, standard deviation, t-value and p-value for Optimism after administration of Gratitude Journals with respect to Residence

Variable	Sub-Variable	N	Mean	SD	t - value	p-value
Residence	Rural	8	18.75	3.01	1.59	.129
	Urban	12	21.67	4.53		

$p > 0.05$ (Not Significant)

From the table 5 independent sample t-test it was inferred that there is no significant difference in the level of Optimism after administering Gratitude Journals based on residence ($t = 1.59$, $p > 0.05$). Comparing the mean scores, rural (Mean = 18.75, SD = 3.01) urban (Mean = 21.67, SD = 4.53) scored higher. This shows that the Null hypothesis is failed to reject.

Table-6: Showing mean, standard deviation, t-value and p-value for Resilience after administration of Gratitude Journals with respect to Residence

Variable	Sub-Variable	N	Mean	SD	t - value	p-value
Residence	Rural	8	62.75	4.92	2.75	.013
	Urban	12	56.00	5.64		

$p < 0.05$ (Significant)

From the table 6 independent sample t-test it was inferred that there is a significant difference in the level of resilience after administering Gratitude Journals based on residence ($t = 2.75$, $p > 0.05$). Comparing the mean scores, rural (Mean = 62.75, SD = 4.92) and the urban (Mean = 56.00, SD = 5.64) rural scored higher. This shows that the alternative hypothesis is failed to reject.

Table-7: Comparison of Pre-Post optimism and Resilience after administering Gratitude Journals

Variables	Test	N	Mean	SD	t-value	p-value
Optimism	Pre-test	20	14.45	3.62	8.53	.001
	Post-test	20	20.50	4.17		
Resilience	Pre-test	20	41.70	8.15	7.27	.001
	Post-test	20	58.70	6.23		

$p < 0.05$ (significant)

From table 7 paired sample t-test, it is inferred that the mean value of Optimism in the pre-test is 14.45 and the mean value in post-test is 20.50. From this it is indicated that the level of optimism is increased after the administration of Gratitude journals. The obtained t-value is 8.53 (> 1.96) and p-value is .001 (< 0.05). There is a significant difference in the level of optimism among the depression clients after the intervention. This shows that the null hypothesis is failed to reject. Further the pre-test mean of resilience is 41.70 and the post-test mean of resilience is 58.70. This shows the increment in the level of resilience among the respondents. The

obtained t-value is 7.27 (> 1.96) and the p-value is .001 (< 0.05). Therefore there is a significant difference in the level of resilience among depression clients after the administration of Gratitude journals. This shows that the t-value in the table indicates that it has failed to reject alternative hypothesis.

The interpretation of the data was shown that there is a significant differences in optimism and resilience between the pre-test and post-test among the respondents. And there is no significant difference in Optimism based on gender, marital status and residence. Also there is no significant difference in resilience based on gender, marital

status whereas the residence had significant difference.

24. OVERVIEW OF THE STUDY

The major question that provoked the present study is

- Is there any improvement is noted in the levels of Optimism and Resilience among the Depression Clients through the Gratitude Journals?
- Whether the Depression Clients have lower level of Optimism?
- Whether the Depression Clients have lower level of Resilience?
- Is Optimism and Resilience has significant difference on Demographic variables (age, Gender, Marital Status, Residence)?

This exploratory study was to describe the significant difference in optimism and Resilience with regards the practice of Gratitude Journals. To verify the questions of the present study 20 samples were selected and asked to complete the activities from phase – I to phase – III. The results have been explored through descriptive statistics, statistical analysis of data (independent sample t-test and paired sample t-test).

For the second question – Whether the Depression Clients has lower level of Optimism? The data were collected using the self – reported questionnaire as a in – person. And the next question – Whether the Depression Clients has lower level of Resilience? Was verified using the questionnaire Wagnild Resilience Scale as a self – report. The final question was addressed by the t-test through the statistical package for social science (SPSS) version23. The overall score of Optimism and Resilience were tested based on the demographic variables.

25. CONCLUSION

The conclusion of the present study based on the evidence is listed as follows,

- There is no significant difference in the level of Optimism after administering Gratitude Journals based on gender
- There is no significant difference in the level of Resilience after administering Gratitude Journals based on gender
- There is no significant difference in the level of Optimism after administering Gratitude Journals based on Marital Status

- There is no significant difference in the level of Resilience after administering Gratitude Journals based on Marital Status
- There is no significant difference in the level of Optimism after administering Gratitude Journals based on Residence
- There is a significant difference in the level of Resilience after administering Gratitude Journals based on Residence
- There is significant difference in the level of Optimism and Resilience after administering Gratitude Journals

26. LIMITATIONS OF THE STUDY

- There is no particular age range considered in the present study.
- The mild Depression were taken into Consideration.
- The relationship, association were not employed in the present study.

27. IMPLICATIONS

The present study contributes the practice of Gratitude Journals to the Depression Clients so that the individuals with Depression may enhance their quality of Life, Mental health and also the positivity in their lives. The practice of gratitude journals helps the clients to escape from negative thoughts like suicidal ideation.

28. SUGGESTIONS FOR FUTURE RESEARCH

- The sample and size of sample should focus on larger scale.
- The systematic intervention can be provided in certain longer duration.
- Future researches should focuses on the comparison of various Interventions along with Gratitude Journals.

29. SUMMARY

The study was aimed to analyze the differences in the level of optimism and Resilience among the Depression Clients. The survey was conducted among the 20 depression clients using the Revised Life orientation test and Wagnild Resilience Scale. The Hypotheses formulated were tested through the statistical analysis in the present study. And the study concludes that there is an improvement in the level of Optimism and Resilience.

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Cite this article as: Vidhyashree M.S and S. Srikumaran (2024). Effectiveness of Gratitude Journals on Optimism and Resilience among Depression Clients, *International Journal of Emerging Knowledge Studies*. 3(7), pp. 403-413.