

Effectiveness of Gratitude Therapy on Guilt Proneness

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Abstract:

With the uncertainties in its phase, adolescence represents a period of storm and conflicts with a sudden increase in the negative feelings such as guilt (National Institute of Open Schooling, 2015). Brain research shows that positive emotions, like gratitude, can benefit our bodies as well as minds positively (Lyness, 2013). In view of this, the present study tries to highlight how Gratitude plays a significant role in overcoming these negative emotions and developing a sound mental health. The study comprises of a pre-test and a post-test design wherein a quota of 200 students was selected for pre-test and a quota sample of 60 students scoring high onGuilt and Shame Proneness Scale (GASP) were selected for post-test. The results revealed that Students who had undergone gratitude therapy have shown significantly reduced guilt negative behaviour evaluation as well as guilt repair.

Key Words: adolescence, conflicts, guilt, gratitude and mental health,

Introduction

Human life completes its journey through various stages and one of the most vital stages is adolescence. Adolescence represents one of the greatest of these periods of crisis. In fact it is the stage of stress, strain and storm. It brings many ambiguities in life. During this phase one really does not know where he or she stands. It is believed that this uncertainty about one's role causes many conflicts (National Institute of Open Schooling, 2015). In view of this, the present study tries to highlight how Gratitude plays a significant role in mental health (Fabrega, n.d).

Of negative the feelinas experienced during this phase, feelings like guilt gain utmost importance. If we do something wrong that hurts someone else, we feel guilty. Guilt is a valuable emotion, because it helps to maintain our ties to the people in our community. It provides a painful consequence for actions that would weaken the groups that we belong to. Because guilt is painful, people often find ways to soothe their feelings by making up for their actions in some way. These repairs are also useful, because they help to restrengthen people's ties the to community that they have damaged. Guilt is a specific emotion that is



different from just feeling bad about an action. Guilt has positive power that guilt can have. Whenever one does something that could hurt another person, the wrongdoer run the risk of damaging his relationship with other, Hence, feelings of guilt lead one to be more generous to that person in a way that can demonstrate clearly that his relationship is valuable.

Brain research shows that positive emotions, like gratitude, can benefit our bodies and minds. Feeling grateful for what we have (instead of obsessing about what we don't) helps with many different aspects of our lives — like relieving stress and boosting determination to try again when things don't work out the way we want (Lyness, 2013). A number of researchers have defined gratitude as a positive emotional reaction in response to the receipt of a gift or benefit from someone (Roberts, 2004). Gratitude changes the way we interact with the world and promotes the thoughts and behaviors that are supportive of addiction recoverv (Promises Treatment Centers, 2015).

In view of this, some of the specific behaviors of adolescence such as guilt proneness are to be studied scientifically. The review of literature reveals the apparent dearth of studies on gratitude therapy especially in Goan adolescent This population. fact promoted the investigator to take up this challenge and throw light on the problem faced by the adolescence as well as to provide ways and means to overcome them in their personal and academic life. Hence, the present study is taken up with the following objectives and hypotheses.

Objectives of the Study

1. To investigate the prevalence of Guilt-Negative-Behavior-Evaluation,

Guilt-Repair and overall guilt proneness amongst college students.

2. To study the effectiveness of Gratitude Therapy on Guilt-Negative-Behavior-Evaluation and Guilt-Repair amongst college students.

Hypotheses

 H_{a1} : There will be significant difference in the pre-intervention (without gratitude therapy) and post-intervention (with gratitude therapy) scores of Guilt-Negative-Behavior-Evaluation and Guilt-Repair amongst college students

With the above hypothesis, the following specific hypotheses were also formulated and tested further:

Ha_{1.1}: There will be significant difference between pre-intervention (without gratitude therapy) and post-intervention (with gratitude therapy) scores of Guilt-Negative-Behavior-Evaluation amongst college students

 $Ha_{1,2}$: There will be significant difference between pre-intervention (without gratitude therapy) and post-intervention (with gratitude therapy) scores of Guilt-Repair amongst college students.

Methodology:

Sample of the study

The study was conducted on students of Parvatibai Chowgules College, Margao Goa, India, within the age group from 17 to 22. The study comprises of a pre-test and a post-test design wherein a quota of 200 students was selected for pre-test and a quota of 57 students was selected for post-test which was then rounded up to 60 students. The quota selected for the posttest consisted of the students who scored high on Guilt Proneness Scale. Students



who wished to volunteer were selected for the pre-test and students for post-test were requested to participate for the therapy.

Instruments used for the study Personal Data Questionnaire

Personal data sheet was used to collect demographic information of the subjects such as age, gender, educational qualification, early background, religion, social class, number of siblings, order of birth, Practice of physical exercise, Satisfaction in life and satisfaction in college life prepared for the purpose.

Guilt and Shame Proneness Scale (GASP)

Guilt and Shame Proneness Scale (GASP) developed by Cohen (2011), was used to measure the guilt and shame proneness of students. The Guilt and Shame Proneness scale (GASP) measures individual differences in the propensity to experience guilt and shame across a range of personal transgressions. The GASP contains four four-item subscales (Dimensions) Guilt-Negative-Behavior-Evaluation (Guilt-NBE), Guilt-Repair, Shame-Negative-Self-Evaluation (Shame-NSE), and Shame-Withdraw. GASP consist of 7 alternative response pattern ranging from '1- Very Unlikely', '2 -Unlikely', '3- Slightly Unlikely', '4-About 50% Likely', '5-Slightly Likely', '6-Likely', and '7-Very Likely'.

GASP Scoring: The GASP is scored by summing or averaging the four items in each subscale. Guilt-Negative-Behavior-Evaluation (NBE): 1, 9, 14, 16. Guilt-Repair: 2, 5, 11, 15. Shame-Negative-Self-Evaluation (NSE): 3, 6, 10, 13. Shame-Withdraw: 4, 7, 8, 12.

Gratitude Therapy (by Michael Hyland)

This therapy works at a deeper unconscious level to help a person feel better about one's own self. It helps the person think more positive about one's self. In this therapy the task is to focus on things that a person is thankful for. This therapy helps in appreciating rather than criticizing.

Method of data collection: In the present study primary data has been collected from 200 students. The investigator personally visited the class after obtaining the permission for appointment and met the Teachers of concerned class through different means of communication. The purpose and the nature of the visit were made known to them. Permission to administer the measures on the students was sought. The procedure contains a detailed explanation of the interventions conducted. The procedure was held in four phases as explained below.

Phase -1: This phase consisted of building a rapport with the individuals and administering the questionnaires.

Phase -2: High Guilt feelings as a problem was identified from the tool administered and discussed in the second session. Individuals with high Guilt feelings were further requested for therapy. The whole process therefore consisted of a total of 21 days.

Phase – 3: This phase focused on the effects of the daily practice of therapy (Gratitude therapy). At the completion of 21 days, a post-intervention study was carried out by asking the participants to fill in Guilt Proneness scale by Cohen (2011). A qualitative feedback regarding the therapy sessions was also obtained from the participants.

Phase- 4: A concluding session was carried out with each participant,



wherein the results of the postintervention questionnaires were discussed with the participants and further suggestions were provided to help them improve their daily functioning.Participants were also encouraged to carry on with the interventions in them and also live a healthy lifestyle.

Scrutinizing: The responses given by each participant are carefully scrutinized for wrong markings, omissions and commissions. Data Analysis/ Statistic: And answer sheets, which were complete in all respects, were retained and the rest were rejected.

The pre and post-intervention data were analyzed using (SPSS 17th version). Paired't'-test is applied to determine the significance of difference between the pre-intervention and post-intervention scores of a group. In the present study $Ha_{1,1}$ and $Ha_{1,2}$ is verified with the application of this test; that is the significance difference between the preintervention scores and post-intervention scores of Guilt Proneness and Gratitude therapy.

Results and discussion:

Table 1: Mean, SDs and Paired 't' Test Value for the Pre and Post Scores of Gratitude Therapy and Guilt-Negative-Behavior Evaluation (Dimension of Guilt Proneness) of Students

Variable	Group	Number	Mean	SD	t-value
Guilt- Negative-	Pre (Without Gratitude Therapy)	60	55.55	8.07	11.64***
Behavior Evaluation	Post (With Gratitude Therapy)	60	44.45	8.60	

Variable	Group	Number	iviean	SD	t-value
Guilt-	Pre (Without	60	55.55	8.07	11.64***
Negative-	Gratitude Therapy)				
Behavior	Post (With Gratitude	60	44.45	8.60	
Evaluation	Therapy)	80	44.40	0.00	
***P<0.001; Very Highly Significant					

An inspection of the mean scores				
presented in Table 1 reveals the following				
facts: Students who have experienced the				
gratitude therapy (Post) have shown				
below average in the guilt negative				
behaviour evaluation (44.45) and pre-test				
scores of students in guilt negative				
behaviour evaluation have shown above				
average (55.55).				

Further, a close inspection of the Table 1, reveals that the two groups namely students without gratitude therapy (Pre) and students with gratitude therapy (post) scores differ significantly from each other in their guilt negative behavior evaluation. In other words, students with gratitude therapy (post) are found to have significantly reduced scores in guilt

negative behavior evaluation (t = 11.65)P<0.001) compared to students without gratitude therapy (Pre).

Students showing high guilt negative behavior evolution in pre-test and showing significantly reduced guilt negative behavior evaluation after experiencing gratitude therapy may be due to the fact that individuals when engage in any form of negative behavior, their self-awareness itself results into a strong feeling of guilt .For example forging a parents signature over a mark sheet, even though the parents may not realize this, the individual feels an intrinsic form of guilt. This form of guilt is only felt once the action is complete. After engaging in that action, it is

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considered to be unethical. The gratitude therapy tries to lower this dimension by helping the students realize that brooding on their past deed will not lead to productive results, instead learning from their mistakes can help them avoid repeating them further.

An example of the statement in Cohen's (2011) Guilt and Shame

Proneness Scale; an individual lies to people and they never find out. This individual is likely to feel the guilt of lying. Through gratitude therapy researchers help students realize not to engage in lying further, because if one eliminates this behavior of lying, guilt will simultaneously be eliminated and thus person will feel better.

Table 2: Mean, SDs and Paired 't' Test Value for the Pre and Post Scores of Gratitude Therapy and Guilt Repair (Dimension of Guilt and Shame Proneness) of Students

Variable	Group	Number	Mean	SD	t-value
Guilt- Repair	Pre (Without Gratitude Therapy)	60	55.50	8.50	9.23**
	Post (With Gratitude Therapy)	60	44.50	8.24	

**P<0.01; Highly Significant

An inspection of the mean scores presented in Table 2 reveals the following facts: Students who have experienced the gratitude therapy (Post) have shown below average in the guilt repair (44.50) and pre-test scores of students in guilt repair have shown above average (55.50). Further, an observation of the Table 2, reveals that the two groups namely students without gratitude therapy (Pre) and students with gratitude therapy (post) scores differ significantly from each other in their guilt repair. In other words, students with gratitude therapy (post) are found to have significantly reduced scores in guilt repair (t = 09.23; P<0.01) compared to students without gratitude therapy (Pre).

Students showing significantly reduced guilt repair after experiencing gratitude therapy may be due to the fact that behavior or behavioral intentions here, are focused on correcting or compensating for the transgression. For example, "one would try to act more considerately toward one's friends". So when people realize that they have engaged into a bad deed, next time they will be more careful and aware to reduce doing it.

Conclusions: The obtained results and discussed facts have led to the following conclusions: Students who have undergone gratitude therapy in their daily mood have shown significantly reduced guilt negative behaviour evaluation. Students who have undergone gratitude therapy in their daily mood have shown significantly reduced Guilt repair.

Implications : Gratitude therapy as an intervention can help individuals live a healthy lifestyle by developing a positive attitude towards life experiences. The results of the study also indicated the need for proper and timely counseling for the students.

Future Recommendation / Limitations

Findings of the present study suggest and give hints for further research. Some



problems which seem to be important and essential are mentioned below:

1. The future study can be extended to wider geographical area and cultural diversities so that the studies may highlight the similarities or the differences, if any. So that the study can be generalized.

2. A detailed study on the impact of personal factors like gender, expressed life, satisfaction, educational qualification, number of dependents, birth order and health status etc. is required to arrive at definite conclusions.

3. Apart from the variables studied in the present work, studies relating to other variables such as type of personality, quality of work life, stress coping behavior, frustration tolerance, risk behaviors, etc., of the students are also desirable.

References:

Cohen, T. R., Wolf, S. T., Panter, A. T., & Insko, C. A. (2011), "Introducing the GASP scale: A new measure of guilt and shame proneness." Journal of Personality and Social Psychology, 100(5), 947-966. doi: 10.1037/a0022641 Fabrega, M. (n.d.), "*How gratitude can change your life.*" The Change Blog. Retrieved from http://www.thechangeblog.com/gratitude/

"Gratitude Lvness, D. (2013)а worksheet." Retrieved from http://kidshealth.org/PageManager.jsp?dn =American Academy of Family Physici ans&lic=44&cat_id=20948&article_set= 96001&ps=204 Promises Treatment Centers.(2015), "5 Steps to Cultivating an Attitude of Gratitude in Addiction Recovery." Retrieved from http://www.promises.com/articles/5-stepsto-cultivating-an-attitude-of-gratitude-inaddiction-recovery/

Roberts, C. (2004), "The blessings of gratitude: a conceptual analysis." In: Emmons RA, McCullough ME, editors. The Psychology of Gratitude. New York: Oxford University Press; 2004. pp. 58–78.

NIOS. (2015). "Adolescence and its challenges." Retrieved from www.nios.ac.in/media/.../Chapter-11.pdf

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