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*Gratitude and Quality of Life in a Personalist  
and Existential Approach*

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Wdzięczność i jakość życia w podejściu personalistycznym i egzystencjalnym

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ABSTRACT

In the article there is measured and discussed the relationship between dispositional gratitude and the holistic concept of quality of life in the personalist-existential approach, with a psychophysical, psychosocial, subjective, metaphysical and global dimension of the quality of life. The aim of this study is to identify the relationship between gratitude, measured with the GQ-6 Gratitude Questionnaire by McCullough, Emmon and Tsang in Polish adaptation of Kossakowska and Kwiatek, and quality of life, measured with the Sense of Quality of Life Questionnaire. The research questions was “Is gratitude related to the psychophysical, psychosocial, subjective, metaphysical and global dimensions of the quality of life in the personalist and existential concept?”. The study involved 148 students, aged 17–59 ( $M = 30.21$ ;  $SD = 10.09$ ). The results show the presence of low and moderate positive relationships between gratitude and quality of life in all dimensions. Moreover, the research discovered some gender differences in the correlations between gratitude and some dimensions of quality of life. Gratitude correlates with better quality of life in all spheres of human functioning – biological, social, subjective and metaphysical.

**Keywords:** gratitude; quality of life; personalist psychology; person-oriented psychology

INTRODUCTION

Quality of life is a concept used in various scientific disciplines, such as medicine, health sciences, economics, sociology, psychology and others. There is also no common definition of quality of life among researchers within psychology.

Most often it is considered a multidimensional, subjective and dynamic construct consisting of both positive and negative aspects of life (King, 2011). The quality of life can be defined in many areas, such as physical, psychological, social, somatic or spiritual, which points to the multidimensionality of this phenomenon (Schipper, 1991).

Quality of life has received a great deal of attention in children and adolescents (see Wallander, Schmitt, Koot, 2001). For instance, Bisegger, Cloetta, Von Bisegger, Abel, and Ravens-Sieberer (2005) have shown that children report a very good health-related quality of life, which is largely independent of gender. After the age of 12, however, the experienced quality of life falls in the majority of dimensions. A stronger decrease is present in females than in males. In other words, children have higher health-related quality of life than adolescents.

Quality of life is sometimes equated with well-being, defined as cognitive and emotional assessment of one's own life, which includes high levels of pleasant emotions, low levels of negative emotions, and high levels of life satisfaction (Diener, Lucas, Oishi, 2004). The most commonly used theories of well-being stem from different philosophical approaches to good life, which are hedonism and eudaimonism. Subjective well-being consists of a high positive impact, low negative impact and high life satisfaction, which is a conceptualization of emotional functioning (Joseph, Wood, 2010). In this approach, well-being means a satisfying and emotionally pleasant life. Eudaimonistic well-being, also called "psychological well-being", refers to a full and valuable life, accompanied by the use of its potential and personal growth (Ryan, Deci, 2001).

#### THE QUALITY OF LIFE IN THE PERSONALIST AND EXISTENTIAL APPROACH

The personalist-existential model of the quality of life derives from the mainstream of person-oriented psychology and philosophical anthropology (Straś-Romanowska, 2005). The assumptions about human life used in this concept of quality of life are provided by philosophical anthropology, mainly personalism, existentialism and the philosophy of dialogue. Human life is defined as being-in-the-world, i.e. conscious and reflective existence (Baran, 1991). The main forms of being-in-the-world are: a) experiencing the world and oneself in the world, b) being in dialogue with others, c) intentional action and d) becoming, i.e. creative personal development. These are specific forms of the sense of quality of life.

Quality of life is assessed subjectively. The assessment of the quality of life is an answer to the following questions: "How does a person live?" and "To what extent is he happy with his way of life?". In this concept, conscious, reflective experience, being in a dialogue with others, intentional activities and creative development take place on various dimensions (such as experiences, relationships,

activities and development). Four such dimensions were distinguished: psychophysical (biological), psychosocial (social), subjective and metaphysical (spiritual) (Straś-Romanowska, 2005).

The psychophysical area includes human biology, drives, physical appearance, temperament and vitality. This biological dimension in the form of experiencing the world and oneself in the world includes physical well-being. The dialogue of this dimension manifests itself in understanding and accepting one's own body. Intentionality includes pro-health behavior, whereas creative development takes place in the form of optimal aging. The quality of life in this dimension of mental life means biological adaptation. It is governed by the principle of homeostasis, which includes meeting the biological needs of the organism. The affective components of the mental life of this dimension are pleasure and physical pain.

The psychosocial sphere includes social relations, expectations of the environment, the level of adaptation, establishing and maintaining emotional ties, acceptance and self-esteem. Experiencing the world and oneself in the world in the psychosocial dimension takes the form of a sense of safety and social power. The dialogue of this dimension includes understanding with others and a sense of community. Intentionality manifests in social behavior, such as fulfilling roles and carrying out tasks. Becoming in this dimension means transgression through the growth of competence and social power. The quality of life in this dimension of mental life takes the form of social adaptation. It depends on meeting the principle of heteronomy, i.e. living in harmony with the environment and meeting social requirements. Satisfaction (pride, pragmatic sense) and dissatisfaction (sadness, disappointment, failure) are the affective components of the mental life of this dimension.

The subjective aspect of the quality of life means emphasizing one's individuality, independence, isolating from the social background, taking responsibility for one's own choices and decisions, the possibility of self-realization, being authentic and developing one's own interests. The subjective dimension in the form of experience includes a sense of freedom and authenticity, i.e. being oneself. The dialogue of this dimension manifests in self-understanding and self-acceptance, as well as in harmony with oneself. Intentionality includes self-interest behavior. Becoming occurs through self-updating. The quality of life in this dimension of mental life means subjective adjustment. It is governed by the principle of autonomy, and the affective components of this dimension's mental life are the joy of being (e.g. experiencing flow) and the burden of being.

The metaphysical sphere includes spirituality, the realization of universal, timeless values, such as good, truth, beauty, religious experiences, it is also giving meaning to life, also in the context of transience. The development of this sphere is conducive to the formation of moral responsibility and a declaration of behavior in accordance with one's conscience. Experiencing the world and oneself in the world

in a metaphysical dimension occurs in the form of metaphysical experiences (e.g. truth, good, beauty) and borderline experiences (suffering, death). The dialogue of this dimension includes metaphysical identity, i.e. consent to fate and “agreement” with transcendent beings. Action manifests in behaviors that implement absolute values. Becoming in this dimension means self-transcendence. The quality of life in this dimension of mental life takes the form of spiritual/existential adaptation, dependent on the principle of homonomy, i.e. living in accordance with moral principles and spiritual development, leading to a sense of the meaning of life, an affective component of the mental life of this dimension. Its opposite is spiritual suffering, i.e. existential emptiness and despair (Straś-Romanowska, 2005).

In the above concept, the quality of life is a complex and multidimensional phenomenon. The spheres of existence: psychophysical, psychosocial, subjective and metaphysical, have an impact on the internal integrity of a person in the development process, they are also relatively independent of each other (Straś-Romanowska, Frąckowiak, 2007). The model of the personal spheres constitute a harmonious arrangement. The metaphysical sphere is the factor organizing the personal whole.

In the concept of Straś-Romanowska (2005), the psychophysical and psychosocial spheres belong to the naturalistic dimension, i.e. the social world. The subjective and metaphysical spheres belong to the spiritual dimension, which is defined by seeking the meaning of existence. The psychosocial, subjective and metaphysical spheres belong to the area of culture in which there are patterns of behavior, values and ways of feeling and reacting in typical situations. This concept can be incorporated into eudaimonistic concepts due to the reference to one’s own experiences and the attribution of great importance to the realization of values.

The important question is why the concept of the quality of life in Straś-Romanowska’s approach is an important model and how it differs from other concepts of well-being and happiness. The Straś-Romanowska concept of quality of life has some similarities with other concepts of quality of life and well-being. For example, as King (2011) notes, most researchers agree that quality of life is a multidimensional, subjective and dynamic construct, which is consistent with the personalist and existential approach. Moreover, many concepts differentiate physical, psychological, social, somatic and spiritual aspects of quality of life (Schipper, 1991). Those aspects are included in the psychophysical, psychosocial, subjective and metaphysical areas of a personalist-existential approach.

On the other hand, personalist and existential approach to quality of life shows some differences in comparison to other quality of life concepts. For example, although Straś-Romanowska’s approach to quality of life is holistic, it has different dimensions of quality of life than other holistic concepts, such as Felce and Perry’s (1995) quality of life model, which consists of well-being in physical, material, social, emotional areas and the sphere of productivity.

The model integrates objective and subjective indicators, a broad range of life domains, and individual values. In this concept, the quality of life is defined as general well-being, with sixteen specific areas, such as mental health, physical health, sexual sphere, social skills, exercising, employment, education, leisure, recreation, sport, friendship, nutrition, home life, initiative and social life, marriage and participation, and family. This model, however, does not include any aspects of spiritual life, as a personalist-existential approach contains in its metaphysical sphere of quality of life.

Another well-known concept of quality of life was presented by the World Health Organization (1995) which included six general areas and 24 specific aspects of quality of life. The overall dimensions of the quality of life in this model include physical health, mental state, level of independence, social relationships, environmental features and spiritual area.

Veenhoven's approach is one of the theory of happiness based on human needs. According to this theory, happiness is a function of fulfillment of needs. Because of the fact that money is a universal instrument to satisfy many needs, the theory states that the level of well-being should depend on the absolute income level (Veenhoven, 1984). The theory of Straś-Romanowska does not refer directly to person's needs and does not refer to income. However, the psychophysical sphere concentrates on the biology of a human, so it must also include fulfilling the basic physiological needs.

Seligman's approach is one of the eudaimonistic theories of happiness (Czapiński, 2012), where the role of the values and sense in the experiences is accented. Seligman differentiates pleasures from gratifications, which come from the commitment to the activity that reveals human's virtues and character strengths. Another eudaimonistic well-being concept is the multidimensional theory of psychological well-being proposed by Ryff (1989). This approach includes six categories of well-being, such as: autonomy, self-acceptance, personal growth, purpose in life, positive relations with others and environmental mastery (Ryff, Singer, 2008). Straś-Romanowska's model is also eudaimonistic because it refers to experiences of the person and the concentration on values. However, what differs from the eudaimonistic concepts provided above, Straś-Romanowska's theory of quality of life includes also the more simple and basic biological level of functioning (in the psychophysical sphere of quality of life).

There is also some research including quality of life based on the assumptions of this model. For example, the research carried out among women in senior clubs (Żaba, Straś-Romanowska, 2019) showed that quality of life is related to self-efficacy and social support. Chronic disease turned out to be associated with a higher quality of life in the metaphysical sphere, with a reduced quality of life in other spheres. Another research show that satisfaction from work exerts influence on the quality of life of IT users (Kowal, Oleszkowicz, Straś-Romanowska, 2017).

To sum up, the personalist-existential model of quality of life includes the aspects of mental life concentrated on growth, values and experiences, as in the eudaimonistic concepts. What is more, Straś-Romanowska's theory gives a broader picture of human functioning, including its biological and spiritual aspects, which seems to be one of the broadest concept of quality of life.

### GRATITUDE AS AN AFFECTIVE TRAIT

A variable with strong relationships with quality of life, well-being, happiness, as well as health, social relationships and coping with stress is gratitude. Gratitude has many definitions, and modern concepts of this phenomenon in psychology indicate that it is not a homogeneous and unambiguous phenomenon (see Wolanin, 2019). Gratitude is included in the classification of the virtues proposed by Peterson and Seligman (2004), which derives from the paradigm of positive psychology, focusing on knowledge about happiness, joy of life and the strengths of the individual (Czapiński, 2012; Seligman, Csikszentmihalyi, 2000; Trzebińska, 2008). The classification of virtues was created as a counterweight to the classification of mental disorders occurring in different editions of the *Diagnostic and Statistical Manual of Mental Disorders* (DSM) and contains six universal virtues and 24 strengths of character. In order to distinguish traits favorable to well-being from other traits, the concepts of "virtues", "mental strength" and "character" have been introduced in positive psychology (Peterson, Seligman, 2004). The most basic psychological forces conducive to well-being are character strengths, and related strengths create virtues. Strengths of character are distinctive ways of displaying virtue, understood as gradable traits that describe individual differences (Peterson, Park, 2007). Virtues are a system of thoughts, beliefs, emotions, motivations, and actions that enable person to think and behave in a way that is beneficial to both the individual and society. Character is made up of virtues.

In this classification, gratitude belongs to the virtue of transcendence, alongside such strengths of character as appreciation of beauty and perfection, humor, religiosity, and hope (Peterson, Seligman, 2004). Character strengths are described as ubiquitously recognized and valued, although the manifestation of all of them by an individual is unlikely, if possible at all (Peterson, Park, 2007).

McCullough, Emmons, and Tsang (2002) characterize gratitude according to a hierarchical structure, similar to other affective states (Rosenberg, 1998). This structure includes gratitude as an affective trait, mood and state. The affective trait of gratitude implies a constant predisposition to react emotionally through the emotion of gratitude. Depending on the trait of gratitude, there is a mood of gratitude, i.e. a state that changes gently over time. The emotion of gratitude depends on both the affective gratitude trait and the mood. It means intense, sudden psychophysiological changes that arise as a result of a significant situation in the



environment. Gratitude in the concept of McCullough, Emmons and Tsang (2002) is a disposition understood as a generalized tendency to recognize and respond with the emotion of gratitude to the contribution of other people to positive experiences and achieved results. Gratitude in this concept has four aspects which are related dimensions: intensity, frequency, range, and saturation. The person with higher quality of gratitude experiences the emotions of gratitude more intensely than the person with the lower dispositional gratitude. Greater frequency of the trait of gratitude makes it possible to feel grateful often, e.g. many times a day and for the smallest manifestations of kindness or small favors. A wider range as an aspect of gratitude indicates the feeling of gratitude for more experiences and different aspects of life. The saturation aspect means that a greater tendency to experience gratitude makes one feel grateful to more people for a single positive effect, compared to those less likely to experience gratitude (see Wolanin, 2019).

More intense dispositional gratitude is associated with more frequent and more intense feelings of gratitude in everyday life. In addition, the general mood of those with more dispositional gratitude produces a feeling of gratitude regardless of the number of daily grateful events and emotional responses to those events (McCullough, Tsang, Emmons, 2004).

#### RELATIONSHIPS OF GRATITUDE WITH THE QUALITY OF LIFE

Many studies on the relationship between gratitude and quality of life refer, among others, to the concept of well-being (see Wolanin, 2020) or physical health, e.g. health-related quality of life (McGuire, Szabo, Murphy, Erickson, 2020). Gratitude may affect health (e.g. Crouch, Verdi, Erickson, 2020), which makes the trait especially interesting for health professionals. Research on gratitude indicates the presence of a positive relationship of this affective trait with better well-being consisting of positive influence, negative influence and life satisfaction (Emmons, Crumpler, 2000), as well as with optimism, happiness and positive effect (Emmons, McCullough, 2003). In a research on psychological well-being according to Ryff's (1989) concept, gratitude was positively associated with dimensions of well-being such as autonomy, personal development, life purpose and self-acceptance (Wood, Joseph, Maltby, 2009). Gratitude also correlated positively with well-being in the humanistic dimension in the real life dimension and negatively with the self-alienation dimension (Wood, Joseph, Maltby, 2008).

There are a few theoretical mechanisms underlying the relationship between gratitude and well-being (e.g. Wood, Froh, Geraghty, 2010; see Wolanin, 2020). These mechanisms tend to show that gratitude leads to higher well-being, not the other direction of the influence, i.e. that well-being improves the level of gratitude. For example, one mechanism refers to the broaden-and-build theory

of positive emotions (Fredrickson, 1998), which states that positive emotions broaden the repertoire of thoughts and behaviors, which helps in building personal resources. In this explanation, gratitude builds resources such as positive social relationships. Another mechanism of the relationship between gratitude and well-being is that coping with stress is a mediator between gratitude and well-being (Wood, Joseph, Linley, 2007). Another research show that there is a mediating role of perceived stress and mental health in the relation between gratitude and quality of life (Valikhani, Ahmadnia, Karimi, Mills, 2019). All these studies show the gratitude as a predictor of well-being and quality of life.

In addition to the correlation research, gratitude and well-being studies were also carried out in an experimental design. They demonstrated the impact of gratitude on well-being. For example, in their weekly reports, respondents indicated five things, which they were grateful for (Emmons, McCullough, 2003). The influence of gratitude on the increase of positive affect was also examined in the condition of thinking about one's benefactor, writing about a person to whom one feels grateful and writing a letter of gratitude. Under all conditions, there was an increase in positive influence on the subjects compared to the control group, with the greatest effect occurring in the group thinking of the person to whom they felt grateful (Watkins, Woodward, Stone, Kolts, 2003).

There is a growing body of evidence that gratitude and well-being are related. For example, gratitude was hypothesized to have an impact on mental health and positivity during the pandemic (Kumar, Edwards, Grandgenett, Scherer, DiLillo, Jaffe, 2022). It turned out that gratitude mitigated mental health difficulties and fostered positivity during adversity. Gratitude also exerts an impact on body image (Wolfe, 2022). Moreover, it is related to well-being with the mediating role of spirituality (Bali, Bakhshi, Khajuria, Anand, 2022).

## PARTICIPANTS AND PROCEDURE

### 1. Aim of the study and hypotheses

It is important to discuss what is the new information we learn from this study comparing to existing research results. The broad, holistic concept of quality of life developed by Straś-Romanowska gives the opportunity to compare full range of the quality of life dimensions in one research and to find relations of gratitude with the specific and global quality of life using one method.

The aim of this preliminary study is to demonstrate the relationship between dispositional gratitude and the quality of life in the personalist-existential approach.

Hypothesis: Gratitude is positively related to the individual dimensions of the quality of life in Straś-Romanowska's personalist and existential concept: psychophysical, psychosocial, subjective, metaphysical and global.



The main assumptions justifying the hypothesis are as follows: Gratitude correlates with some other concepts of well-being (e.g. Emmons, Crumpler, 2000; Emmons, McCullough, 2003; Wood, Joseph, Maltby, 2009), and the research of relationships between gratitude and psychophysical, psychosocial, subjective and metaphysical areas of quality of life could provide the broader picture of the role of gratitude in quality of life. The concept of gratitude as an affective trait and character strength, as positive psychology states, should be a disposition that contributes to greater happiness, also in the eudaimonistic view of happiness and well-being. That is why higher gratitude is expected to be positively related to quality of life. Theoretical and empirical studies on well-being and gratitude suggest rather the role of gratitude as the predictor of quality of life (and not reversely).

## 2. Participants

The study was conducted in a group of 148 people. The respondents were students of nursing, paramedics studies and pedagogy, mainly people already working in the profession, supplementing higher education. One hundred women (67.6% of respondents) and 48 men (32.4% of respondents) participated in the study. The Chi-Square Goodness of Fit Test showed that gender does not follow an equal distribution in a study sample,  $\chi^2(1, N=148) = 18.27, p < .001$ . Twenty-seven respondents were the students of pedagogy (undergraduate studies, 25 women, 2 men), 71 people were the students of nursing (supplementary graduate studies, 66 women, and 5 men), and 50 respondents were the paramedics students (41 men and 9 women). The subjects aged between 17 and 59, the mean age was 30.21, with the standard deviation equal to 10.09.

## 3. Method

### 3.1. Dispositional gratitude – GQ-6

The GQ-6 (Gratitude Questionnaire) tool, adapted by Kossakowska and Kwiatek (2014), measures the tendency to experience gratitude (dispositional gratitude) according to the theory of McCullough and Emmons. The scale consists of 6 statements rated on a 7-point scale (*I strongly disagree – I strongly agree*). Originally, the method consisted of 39 statements relating to 4 dimensions of gratitude: intensity, frequency, range, and saturation.

Factor analysis carried out on the basis of the GQ-6 questionnaire showed that at the root of the above aspects of gratitude there is one factor explaining 27% of the variance (McCullough, Emmons, 2002). Ultimately, the original version of the scale contains 6 items with the best parameters. The confirmatory analysis confirmed the fit to the 1-factor model. The internal consistency (Cronbach's

alpha) reliability of the original version was 0.82. The analysis of the reliability for Polish adaptation was 0.71. The alpha calculated in this study is 0.74.

### 3.2. The Sense of Quality of Life Questionnaire by Straś-Romanowska, Oleszkowicz and Frąckowiak (2004)

The Sense of Quality of Life Questionnaire was created on the basis of Straś-Romanowska's personalist and existential concept of the quality of life. It serves the subjective and multi-faceted level of life satisfaction and well-being. It contains 60 items on a 4-point scale (*strongly disagree, rather disagree, rather agree, strongly agree*). The criterion for selecting a particular category is the assessment of the level of subjective satisfaction (Straś-Romanowska, 1992). The respondent assesses the values, beliefs and everyday functioning separately in 4 areas:

- 1) psychophysical (human biology, drives, physical appearance, temperament, vitality),
- 2) psychosocial (social relations, expectations of the environment, the level of adaptation, establishing and maintaining emotional bonds, acceptance, self-worth),
- 3) subjective (emphasizing one's individuality, independence, isolation from the social background, taking responsibility for one's own choices and decisions, the possibility of self-realization, being authentic, developing one's own interests),
- 4) metaphysical (spirituality, the implementation of universal, timeless values, such as good, truth, beauty, religious experiences, giving meaning to life, also in the context of transience, the development of this sphere is conducive to the formation of moral responsibility and declaration of behavior in accordance with one's conscience).

The psychometric properties of the scale are satisfactory. Reliability (absolute stability for the adult overall score) is 0.65. The Cronbach's alpha internal consistency is 0.92 for the entire test. The estimation of alpha based on our data was also 0.92 for the entire test. The validity estimated as the agreement of the competent judges using the Kendall's  $W$  coefficient is 0.58, 0.50, 0.67, and 0.69 for individual subscales, respectively.

## 4. Procedure

The study was conducted as a desktop survey. The participants were informed of the anonymity of their results and the right to refuse to participate.

## RESULTS

### 1. Preliminary analysis

The average level of gratitude of the respondents was 33.06, with a standard deviation of 5.45. In the studies by Kossakowska and Kwiatek (2014), on the adaptation of the Polish version of the Gratitude Questionnaire, conducted on a sample of 238 people, the average results in terms of gratitude were 29.45 ( $SD = 6.04$ ). The surveyed women achieved, on average, slightly lower results in terms of the tendency to experience gratitude ( $M = 32.92$ ;  $SD = 5.54$ ) compared to men ( $M = 33.37$ ;  $SD = 5.28$ ), but the difference of means between the results obtained by women and men was statistically insignificant ( $t(144) = 0.46$ ;  $p = 0.64$ ). The above result means that men and women do not differ in terms of the intensity of the tendency to experience gratitude.

For the entire group of respondents, in the psychophysical sphere of the quality of life, the mean was 46.26 ( $SD = 6.29$ ). The mean results for the remaining spheres of the quality of life were similar and amounted to  $M = 47.32$  for the psychosocial sphere,  $SD = 6.56$ ; in the subjective sphere  $M = 47.99$ ,  $SD = 6.15$ ; for the metaphysical area  $M = 47.93$ ,  $SD = 5.19$ , and for the global sphere, the mean quality of life result was  $M = 189.07$ ,  $SD = 20.16$ . In the area of quality of life, the global result obtained in this study turned out to be higher than in the study conducted by Dębska, Bartosz, Guła-Kubiszewska, Starościak, and Kosendiak (2013), where average result in the global sphere of quality of life was 186.95.

### 2. The relationship between the personalist-existential quality of life and gratitude

Significant, positive relationships between dispositional gratitude and quality of life occurred for all spheres of quality of life, both in the entire study group and in the division of the respondents by gender (Table 1). The only exception was the lack of dependence in the group of women between gratitude and the psychophysical sphere of the quality of life.

Table 1. Pearson's  $r$  correlations of gratitude and individual spheres of quality of life

	Total ( $N = 148$ )	Female ( $N = 100$ )	Male ( $N = 48$ )
	gratitude		
Psychophysical	0.17*	0.09	0.33*
Psychosocial	0.38**	0.34**	0.50**
Subjective	0.30**	0.25*	0.41**
Metaphysical	0.42**	0.43**	0.42**
Global	0.38**	0.34**	0.48**

\* $p < 0.05$ ; \*\* $p < 0.01$ ; \*\*\* $p < 0.001$

Source: Authors' own study.

In the entire study group, the relationships were weak (for the psychophysical sphere:  $r = 0.17$ ;  $p = 0.049$  and for the subjective sphere:  $r = 0.30$ ;  $p < 0.001$ ) or moderate (for the psychosocial sphere:  $r = 0.38$ ;  $p < 0.001$ , the metaphysical sphere:  $r = 0.42$ ;  $p < 0.001$  and the global quality of life sphere:  $r = 0.38$ ;  $p < 0.001$ ). This means that the greater intensity of the tendency to experience gratitude goes hand in hand with the feeling of a higher quality of life in all its areas in the entire group of respondents.

As regards the gender of the respondents, the above relationships also existed (except for the lack of a relationship between the psychophysical sphere of quality of life and gratitude in women), and these relationships were slightly stronger in men. In the group of women, these relationships were weak (for the subjective sphere:  $r = 0.25$ ;  $p = 0.013$ ) or moderate (for the psychophysical sphere:  $r = 0.34$ ;  $p = 0.001$ , metaphysical sphere:  $r = 0.43$ ;  $p < 0.001$  and the global sphere:  $r = 0.34$ ;  $p < 0.001$ ). In men, these dependencies were moderate and slightly higher than in women (for the psychophysical sphere:  $r = 0.33$ ;  $p = 0.028$ ; for the psychosocial sphere:  $r = 0.50$ ;  $p < 0.001$ ; for the subjective sphere:  $r = 0.41$ ;  $p = 0.008$ ; for the metaphysical sphere:  $r = 0.42$ ;  $p = 0.005$ ; for the global sphere:  $r = 0.48$ ;  $p = 0.002$ ). The above results mean that a greater intensity of the trait of gratitude is associated with the feeling of a higher quality of life, both for women and men, in all spheres of quality of life, except for the psychophysical quality of life in women, for which no relationship with the tendency to experience gratitude was observed.

## DISCUSSION

The results of the study confirm the hypothesis for the studied group. Gratitude is positively related, at a low or moderate level, to all spheres of the quality of life in the personalist and existential approach.

Gratitude turns out to be positively related to the global quality of life, both in the group of respondents and in groups distinguished by gender, slightly higher in men than in women. This means that the higher the level of gratitude, the higher the global quality of life. The global quality of life score was the sum of the scores in the psychophysical, psychosocial, subjective and metaphysical areas of the quality of life.

The tendency to experience gratitude was associated with the psychophysical sphere of the quality of life at a low level in the entire group of respondents. In the calculations made with reference to the gender, gratitude was associated with this sphere of quality of life only in men. In individual spheres of quality of life, the relationship with gratitude may refer to those aspects that include a given dimension of the quality of life, presented in the concept of Straś-Romanowska (2005). Thus, for the psychophysical quality of life, the relationship with gratitude may refer to the relationship with physical well-being, understanding and acceptance of one's

own body, creative development in the form of optimal aging or the introduction of pro-health behaviors. Gratitude may be related to biological adaptation and the affective components of the mental life of this dimension, i.e. physical pleasure and pain. A higher level of gratitude is associated with many psychophysical aspects of human life. One of them is better sleep quality in people who are more likely to experience gratitude (Emmons, McCullough, 2003).

People who feel grateful are more likely to exercise more (Emmons, McCullough, 2003), which is a health-promoting behavior. Additionally, those who feel more grateful have better cardiac function, which is manifested by greater activity in the parasympathetic system, which is considered beneficial in the control of stress and hypertension (McCraty, Childre, 2004). The aforementioned connections of gratitude with the functioning of the organism at the physiological level are a manifestation of psychophysical health.

A greater tendency to experience gratitude is also associated with the subjective assessment of physical health, and the mediator of this relationship is mental health, health activity and the willingness to seek help in the event of health problems. The above effect is stronger for the elderly compared to younger adults (Hill, Allemand, Roberts, 2013).

In a metaanalysis of the influence of gratitude interventions on physical health (Boggiss, Consedine, Brenton-Peters, Hofman, Serlachius, 2020), subjective sleep quality was improved in 5/8 studies. Moreover, improvements in such aspects of physical health as blood pressure, glycemic control, asthma control and eating behavior were understudied yet demonstrated improvements (1/1). Inflammation markers (1/2) and self-reported physical symptoms (2/8) belonged to other outcome categories that remain understudied.

Gratitude was associated with the psychosocial dimension of quality of life in both sexes, more strongly in men than in women.

The personalist-existential concept of the quality of life (Straś-Romanowska, 2005) indicates that the relationship of gratitude with the psychosocial sphere of quality of life may consist of its relationship with social relations, expectations of the environment, the level of adaptation, establishing and maintaining emotional ties, self-esteem and a sense of safety and social power, understanding with others and a sense of community.

Gratitude can be associated with social behavior, such as role-playing and task fulfillment, as well as creative transgression through increased competence and social power. Gratitude may be related to social adaptation, living in harmony with the environment and meeting social requirements, and with the affective components of this sphere, i.e. with satisfaction (pride, a pragmatic sense) and dissatisfaction (sadness, disappointment, failure).

Gratitude, as it plays the role of a moral barometer (McCullough, Kilpatrick, Emmons, Larson, 2001), prompts us to pay more attention to the quality of

social relations and the appreciation of the help received. Moreover, gratitude encourages people to reciprocate help, support and other pro-social activities received from other people, not only towards their own donors, but also towards other people, which may contribute to building a support network and improving social relations. These may be reasons why a greater tendency to experience gratitude is associated with a higher quality of life in the psychosocial sphere. There is growing evidence that gratitude is related to social support (e.g. Wang, Chen, Zhai, Fan, 2022; Deichert, Fekete, Craven, 2021; Feng, Yin, 2021). A higher level of gratitude also reduces aggression (DeWall, Lambert, Pond, Kashdan, Fincham, 2012).

With the subjective dimension of quality of life, the relationships of gratitude appeared both in the group of women and men, but they were stronger in men. Relating the obtained results to the concept of the quality of life (Straš-Romanowska, 2005), the tendency to experience gratitude may coexist with emphasizing one's individuality, independence, isolation from the social background, taking responsibility for one's own choices and decisions, the possibility of self-realization, being authentic and developing one's own interests, a sense of freedom and authenticity, i.e. being yourself. Gratitude may also be associated with self-understanding, self-acceptance, with self-consent and promoting behaviors that respect one's own interest, as well as becoming through self-actualization, subjective adaptation and affective components of mental life, i.e. the joy of being (e.g. flow experiences) and the burden of existence.

One of the subjective qualities of a human being is wisdom, related to taking responsibility for one's choices and subjective adaptation. Gratitude is positively associated with wisdom (König, Gluck, 2013), which indicates the possibility of the development of the subjective sphere through both of these variables.

Another aspect of functioning in the subjective scope may be self-assessment. In a study conducted with a group of Chinese students, higher levels of gratitude were found to be associated with higher self-esteem (Lin, 2015). Self-esteem, in turn, turned out to be a mediator of the relationship between gratitude and well-being. This study did not measure the subjective aspect of quality of life, but it can be assumed that a higher level of self-esteem as a subjective quality of a person may also be associated with a higher quality of life in the subjective sphere, which would also explain the relationship of gratitude to the subjective dimension of quality of life. Also, studies of athletes (Chen, Wu, 2014) indicate that a higher level of gratitude contributes to an increase in self-esteem. Positive self-assessment is an important aspect of the subjective sphere of the quality of life.

The relationship of gratitude with the metaphysical sphere also turned out to be significant and it was on the similar level among men and women. The results show that gratitude may be associated with various aspects of the quality of life in the metaphysical sphere, i.e. spirituality, religious experiences, giving



meaning to life, also in the context of transience, as well as the realization of universal and timeless values, such as truth, goodness and beauty. It can be argued that gratitude is also related to the development of moral responsibility and to metaphysical experiences (e.g. truth, good, beauty) and boundary experiences, i.e. suffering and death, as well as metaphysical identity, i.e. consent to fate and “agreement” with transcendent beings. It can also coexist with behaviors consisting of the realization of absolute values and with becoming, which in this sphere consists of self-transcendence. Gratitude may be associated with spiritual and existential adaptation, i.e. living in accordance with moral principles and spiritual development, leading to a sense of the meaning of life, or spiritual suffering, i.e. existential emptiness and despair (Straś-Romanowska, 2005).

The obtained relationships of gratitude with metaphysical quality of life can also be explained thanks to research on the tendency to experience gratitude and the sense of coherence (Lambert, Graham, Fincham, Stillman, 2009). Thanks to the meaningfulness component, the sense of coherence is a concept similar to the sense of meaning in life. In the research of Lambert and colleagues (2009), gratitude was strongly and positively related to the sense of coherence, and this relationship occurred with the participation of the mediating variable in the form of positive re-evaluation, i.e. the process of perceiving negative events and circumstances in a positive light.

The relationship between gratitude and the sense of meaning in life is also indicated by studies on the role of the tendency to experience gratitude as a protective factor against suicide (Kleiman, Adams, Kashdan, Riskind, 2013). A higher level of gratitude turned out to be a factor protecting against suicide through a mediator in the form of increased sense of the meaning of life.

The relationship between the quality of life and the sense of meaning in life is positive and moderate (Kray, George, Liljenquist, Galinsky, Tetlock, Roesch, 2010). This means that having a sense of the meaning of life may be conducive to appreciating its quality, and a high subjective quality of life may help to find meaning in life. The concepts of the quality and meaning of life are linked by the sphere of spirituality, as a high subjective assessment of the religious sphere and personal beliefs may be an answer to the question about the meaning of life (Oleś, Oleś, 2010).

Apart from the positive relationships between dispositional gratitude and different spheres of quality of life, the important results are gender differences in these relations. The relationship between gratitude and psychophysical area of quality of life is the only one which is present only among men. The other relationships between gratitude and quality of life are stronger among men, except from the metaphysical dimension of quality of life, which correlates on similar level among both men and women. These results suggest that if a man is more grateful, it improves his quality of life more than in the case of a grateful woman.

Gratitude contributes to the development of the metaphysical dimension of quality of life to the same degree irrespectively of gender.

### CONCLUSIONS

The above considerations on the relationship between gratitude and individual spheres of quality of life require further research. The tendency to experience gratitude seems to be an important feature of the quality of life in its all spheres. Gratitude correlates with better quality of life in all its spheres, i.e. psychophysical, psychosocial, subjective and metaphysical. Higher correlations were present in the group of men, with the exception of metaphysical sphere of quality of life.

The most important implications of the research include the conclusion that gratitude is related to all dimensions of quality of life, which shows this affective trait a universally beneficial for quality of life of a human. This study shows that gratitude relates not only to emotional well-being, as research on subjective well-being show, but also to psychophysical, psychosocial, subjective and metaphysical aspect of functioning and assessment of happiness in these areas.

### LIMITATIONS OF THE RESEARCH

In the research, only simple statistics, including correlations were shown, which limits the possibilities to explain the mechanisms of relationship between gratitude and quality of life, which may require other statistical analysis, as the modeling of structural equations.

Another limitation is the selection of the sample and its small size. This preliminary study could be confirmed on a wider population.

To the methodological limitations of the study belongs the fact that the parametric properties for the Straś-Romanowska Questionnaire are rather weak (mainly validity). Validity refers to the accuracy of the scale used. As a result, the measurement of quality of life using this method might be less valid, which means that it not necessarily gave very accurate results that correspond to real characteristics of participants' quality of life.

### FURTHER RECOMMENDATIONS

Exercises aimed at developing gratitude, such as a letter of gratitude (Emmons, McCullough, 2003; see Wolanin, 2016), give an optimistic perspective on the possibility of working on this strength of character and indirectly on increasing the sense of quality of life. It is worth doing research to see if specific gratitude-related situations exert influence on particular aspects of quality of life. It is also

possible that other variables, such as greater underlying optimism, lead to higher scores on both scales of gratitude and quality of life, or that these are correlations merely between the language of the two scales rather than measuring two distinct and otherwise unrelated domains.

## REFERENCES

### LITERATURE

- Bali, M., Bakhshi, A., Khajuria, A., Anand, P. (2022). Examining the Association of Gratitude with Psychological Well-Being of Emerging Adults. The Mediating Role of Spirituality. *Trends in Psychology*, 30, 670–687. DOI: <https://doi.org/10.1007/s43076-022-00153-y>
- Baran, B. (1991). *Filozofia dialogu*. Kraków: Znak.
- Bisegger, C., Cloetta, B., Von Bisegger, U., Abel, T., Ravens-Sieberer, U. (2005). Health-Related Quality of Life: Gender Differences in Childhood and Adolescence. *Sozial- und Präventivmedizin*, 50(5), 281–291.
- Boggiss, A.L., Consedine, N.S., Brenton-Peters, J.M., Hofman, P.L., Serlachius, A.S. (2020). A Systematic Review of Gratitude Interventions: Effects on Physical Health and Health Behaviors. *Journal of Psychosomatic Research*, 135, 110165.
- Chen, L.H., Wu, C.H. (2014). Gratitude Enhances Change in Athletes' Self-Esteem: The Moderating Role of Trust in Coach. *Journal of Applied Sport Psychology*, 26(3), 349–362.
- Crouch, T.A., Verdi, E.K., Erickson, T.M. (2020). Gratitude is Positively Associated with Quality of Life in Multiple Sclerosis. *Rehabilitation Psychology*, 65(3), 231–238. DOI: <https://doi.org/10.1037/rep0000319>
- Czapiński, J. (2012). *Psychologia pozytywna. Nauka o szczęściu, zdrowiu, sile i cnotach człowieka*. Warszawa: Wydawnictwo Naukowe PWN.
- Deichert, N.T., Fekete, E.M., Craven, M. (2021). Gratitude Enhances the Beneficial Effects of Social Support on Psychological Well-Being. *Journal of Positive Psychology*, 16(2), 168–177.
- DeWall, C.N., Lambert, N.M., Pond, R.S., Kashdan, T.B., Fincham, F.D. (2012). A Grateful Heart Is a Nonviolent Heart: Cross-Sectional, Experience Sampling, Longitudinal, and Experimental Evidence. *Social Psychological and Personality Science*, 3(2), 232–240.
- Dębska, M., Bartosz, B., Gula-Kubiszewska, H., Starościak, W., Kosendiak, A. (2013). Badania porównawcze kwestionariuszami jakości życia. In: M. Straś-Romanowska (red.), *Prace Psychologiczne LXII. Drogi rozwoju psychologii wrocławskiej* (pp. 109–126). Wrocław: Wydawnictwo Uniwersytetu Wrocławskiego.
- Diener, E., Lucas, R.E., Oishi, S. (2004). Dobrostan psychiczny. Nauka o szczęściu i zadowoleniu z życia. In: J. Czapiński (red.), *Psychologia pozytywna. Nauka o szczęściu, zdrowiu, sile i cnotach człowieka* (pp. 35–50). Warszawa: Wydawnictwo Naukowe PWN.
- 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.
- Felce, D., Perry, J. (1995). Assessment of Quality of Life: Its Definition and Measurement. *Research in Developmental Disabilities*, 16, 51–74.
- Feng, L., Yin, R. (2021). Social Support and Hope Mediate the Relationship Between Gratitude and Depression among Front-Line Medical Staff During the Pandemic of COVID-19. *Frontiers in Psychology*, 12, 623873.

- Fredrickson, B.L. (1998). What Good Are Positive Emotions? *Review of General Psychology*, 2, 300–319.
- Hill, P.L., Allemand, M., Roberts, B.W. (2013). Examining the Pathways Between Gratitude and Self-Rated Physical Health Across Adulthood. *Personality and Individual Differences*, 54(1), 92–96.
- Joseph, S., Wood, A.M. (2010). Assessment of Positive Functioning in Clinical Psychology: Theoretical and Practical Issues. *Clinical Psychology Review*, 30, 830–838.
- King, C.R. (2011). Overview of Quality of Life and Controversial Issues. In: C.R. King, P.S. Hinds (Eds.), *Quality of Life: From Nursing and Patient Perspectives. Theory, Research, Practice* (pp. 31–41). Lincoln: Jones and Bartlett Publishers.
- Kleiman, E.M., Adams, L.M., Kashdan, T.B., Riskind, J.H. (2013). Gratitude and Grit Indirectly Reduce Risk of Suicidal Ideations by Enhancing Meaning in Life: Evidence for a Mediated Moderation Model. *Journal of Research in Personality*, 47(5), 539–546.
- Kossakowska, M., Kwiatek, P. (2014). Polska adaptacja kwestionariusza do badania wdzięczności GQ-6. *Przegląd Psychologiczny*, 57(4), 503–514.
- König, S., Glück, J. (2013). “Gratitude Is with Me All the Time”: How Gratitude Relates to Wisdom. *Journals of Gerontology. Series B: Psychological Sciences and Social Sciences*, 69(5), 655–666.
- Kray, L.J., George, L.G., Liljenquist, K.A., Galinsky, A.D., Tetlock, P.E., Roese, N.J. (2010). From What Might Have Been to What Must Have Been: Counterfactual Thinking Creates Meaning. *Journal of Personality and Social Psychology*, 98(1), 106.
- Kumar, S.A., Edwards, M.E., Grandgenett, H.M., Scherer, L., DiLillo, D., Jaffe, A.E. (2022). Does Gratitude Promote Resilience During a Pandemic? An Examination of Mental Health and Positivity at the Onset of COVID-19. *Journal of Happiness Studies*, 23(7), 3463–3483. DOI: <https://doi.org/10.1007/s10902-022-00554-x>
- Lambert, N.M., Graham, S.M., Fincham, F.D., Stillman, T.F. (2009). A Changed Perspective: How Gratitude Can Affect Sense of Coherence Through Positive Reframing. *Journal of Positive Psychology*, 4(6), 461–470.
- Lin, C.-C. (2015). Self-Esteem Mediates the Relationship Between Dispositional Gratitude and Well-Being. *Personality and Individual Differences*, 85, 145–148.
- McCraty, R., Childre, D. (2004). The Grateful Heart. The Psychophysiology of Appreciation. In: R.A. Emmons, M.E. McCullough (Eds.), *The Psychology of Gratitude* (pp. 230–257). Oxford: Oxford University Press.
- McCullough, M.E., Kilpatrick, S.D., Emmons, R.A., Larson, D.B. (2001). Is Gratitude a Moral Affect? *Psychological Bulletin*, 127, 249–266.
- McCullough, M.C., Emmons, R.A., Tsang, J.-A. (2002). The Grateful Disposition: A Conceptual and Empirical Topography. *Journal of Personality and Social Psychology*, 82(1), 112–127.
- McCullough, M.E., Tsang, J.A., Emmons, R.A. (2004). Gratitude in Intermediate Affective Terrain: Links of Grateful Moods to Individual Differences and Daily Emotional Experience. *Journal of Personality and Social Psychology*, 86(2), 295–309.
- McGuire, A.P., Szabo, Y.Z., Murphy, K.M., Erickson, T.M. (2020). Direct and Indirect Effects of Trait and State Gratitude on Health-Related Quality of Life in a Prospective Design. *Psychological Reports*, 123(6), 2248–2262. DOI: <https://doi.org/10.1177/0033294119868784>
- Oleś, M., Oleś, P. (2010). Sens a jakość życia. In: L. Suchocka, R. Sztembis (red.), *Człowiek i dzieło. Księga jubileuszowa dedykowana Księdzu Profesorowi Kazimierzowi Popielskiemu* (pp. 165–171). Lublin: Wydawnictwo KUL.
- Peterson, C., Seligman, M.E.P. (2004). *Character Strengths and Virtues: A Handbook and Classification*. Oxford: Oxford University Press.
- Peterson, C., Park, N. (2007). Klasyfikacja i pomiar sił charakteru: implikacje dla praktyki. In: A. Linley, S. Joseph (red.), *Psychologia pozytywna w praktyce* (pp. 263–282). Warszawa: Wydawnictwo Naukowe PWN.

- Rosenberg, E.L. (1998). Levels of Analysis and the Organization of Affect. *Review of General Psychology*, 2(3), 247–270.
- Ryan, R.M., Deci, E.L. (2001). On Happiness and Human Potentials: A Review of Research on Hedonic and Eudemonic Well-Being. *Annual Review of Psychology*, 52, 141–166.
- Ryff, C.D. (1989). Happiness Is Everything, or Is It? Explorations on the Meaning of Psychological Well-Being. *Journal of Personality and Social Psychology*, 57(6), 1069–1081.
- Ryff, C.D., Singer, B.H. (2008). Know Thyself and Become What You Are: A Eudaimonic Approach to Psychological Well-Being. *Journal of Happiness Studies*, 9(1), 13–39.
- Schipper, H. (1991). Guidelines and Caveats for Quality of Life Measurement in Clinical Practice and Research. In: N.S. Tchekmedyian, D.F. Cella (Eds.), *Quality of LIFE in Oncology Practice and Research* (pp. 25–31). Williston Park: Dominus Publishing Company.
- Seligman, M.E.P., Csikszentmihalyi, M. (2000). Positive Psychology: An Introduction. *American Psychologist*, 55, 5–14.
- Straś-Romanowska, M. (1992). *Los człowieka jako problem psychologiczny. Podstawy teoretyczne*. Wrocław: Wydawnictwo Uniwersytetu Wrocławskiego.
- Straś-Romanowska, M. (2005). Jakość życia w świetle założeń psychologii zorientowanej na osobę. In: M. Straś-Romanowska, K. Lachowicz-Tabaczek, A. Szmajke (red.), *Jakość życia w badaniach empirycznych i refleksji teoretycznej* (pp. 263–274). Warszawa: Instytut Psychologii PAN.
- Straś-Romanowska, M., Oleszkowicz, A., Frąckowiak, T. (2004). *Kwestionariusz Poczucia Jakości Życia*. Wrocław: Instytut Psychologii Uniwersytetu Wrocławskiego.
- Straś-Romanowska, M., Frąckowiak, T. (2007). Rola relacji międzyludzkich w budowaniu jakości życia osób niepełnosprawnych (perspektywa personalistyczno-egzystencjalna). In: J. Patkiewicz (red.), *Rola więzi w rozwoju dzieci i młodzieży niepełnosprawnej* (pp. 47–57). Wrocław: Studio Wydawniczo-Typograficzne Typoscript.
- Trzebińska, E. (2008). *Psychologia pozytywna*. Warszawa: WAiP.
- Valikhani, A., Ahmadnia, F., Karimi, A., Mills, P.J. (2019). The Relationship Between Dispositional Gratitude and Quality of Life: The Mediating Role of Perceived Stress and Mental Health. *Personality and Individual Differences*, 141, 40–46.
- Veenhoven, R. (1984). The Concept of Happiness. In: *Conditions of Happiness* (pp. 12–38). Dordrecht: Springer.
- Wallander, J.L., Schmitt, M., Koot, H.M. (2001). Quality of Life Measurement in Children and Adolescents: Issues, Instruments, and Applications. *Journal of Clinical Psychology*, 57(4), 571–585.
- Wang, D., Chen, X.Y., Zhai, S., Fan, F. (2022). Gratitude and Internalizing/Externalizing Symptoms among Adolescents after the Wenchuan Earthquake: Mediating Roles of Social Support and Resilience. *Journal of Adolescence*, 94(6), 867–879. DOI: <https://doi.org/10.1002/jad.12070>
- Watkins, P.C., Woodward, K., Stone, T., Kolts, R.L. (2003). Gratitude and Happiness: Development of a Measure of Gratitude, and Relationships with Subjective Well-Being. *Social Behavior and Personality*, 31, 431–451.
- Wolanin, A. (2016). Rozwój w kierunku szczęścia w psychologii pozytywnej. Trening sił charakteru a dobrostan człowieka. *Rynek – Społeczeństwo – Kultura*, (4), 26–31.
- Wolanin, A. (2019). Przegląd koncepcji wdzięczności w psychologii. *Polskie Forum Psychologiczne*, 24(3), 356–372. DOI: <https://doi.org/10.14656/PFP20190306>
- Wolanin, A. (2020). Wdzięczność a dobrostan człowieka – zależności i mechanizmy. *Polskie Forum Psychologiczne*, 25(4), 406–416. DOI: <https://doi.org/10.14656/PFP20200402>
- Wolfe, W.L. (2022). Does Gratitude Induction Buffer the Adverse Effect of Thin Ideal Media Exposure on Women’s Body Image? *North American Journal of Psychology*, 24(1), 7–26.
- 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., Joseph, S., Maltby, J. (2008). Gratitude Uniquely Predicts Satisfaction with Life: Incremental Validity above the Domains and Facets of the Five Factor Model. *Personality and Individual Differences*, 45(1), 49–54.
- Wood, A.M., Joseph, S., Maltby, J. (2009). Gratitude Predicts Psychological Well-Being above the Big Five Facets. *Personality and Individual Differences*, 46(4), 443–447.
- 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.
- World Health Organization. (1995). The World Health Organization Quality of Life Assessment: Position Paper from the World Health Organization. *Social Science and Medicine*, 41(10), 1403–1409. DOI: [https://doi.org/10.1016/0277-9536\(95\)00112-k](https://doi.org/10.1016/0277-9536(95)00112-k)
- Żaba, M., Straś-Romanowska, M. (2019). Jakość życia, samoskuteczność a otrzymywane wsparcie społeczne kobiet – członkiń klubów seniora. *Gerontologia Polska*, 27, 191–195.

#### ONLINE SOURCES

- Kowal, J., Oleszkowicz, A., Straś-Romanowska, M. (2017). Quality of Life and Satisfaction of Work among IT Users in Poland. In: J. Kowal, A. Kuzio, J. Mäkiö, G. Paliwoda-Pękosz, P. Soja, R. Sonntag (Eds.), *ICT Management for Global Competitiveness and Economic Growth in Emerging Economies. Innovations for Human Development in Transition Economies* (pp. 472–474). Retrieved from: <https://ssrn.com/abstract=3140412> (access: 10.09.2022).

#### ABSTRAKT

W artykule zmierzono i omówiono związek między dyspozycyjną wdzięcznością a holistyczną koncepcją jakości życia w ujęciu personalistyczno-egzystencjalnym, z psychofizycznym, psychospołecznym, subiektywnym, metafizycznym i globalnym wymiarem jakości życia. Celem pracy była identyfikacja związku między wdzięcznością mierzoną Kwestionariuszem Wdzięczności GQ-6 autorstwa McCullougha, Emmons i Tsang w polskiej adaptacji Kossakowskiej i Kwiatka a jakością życia mierzoną Kwestionariuszem Jakości Życia. Pytanie badawcze brzmiało: Czy wdzięczność jest związana z psychofizycznym, psychospołecznym, subiektywnym, metafizycznym i globalnym wymiarem jakości życia w ujęciu personalistycznym i egzystencjalnym? W badaniu udział wzięło 148 studentów w wieku 17–59 lat ( $M = 30,21$ ;  $SD = 10,09$ ). Wyniki wskazują na występowanie słabych i umiarkowanych, pozytywnych związków między wdzięcznością a jakością życia we wszystkich wymiarach. Ponadto badania wykazały pewne różnice między płciami w korelacjach między wdzięcznością a niektórymi wymiarami jakości życia. Wdzięczność koreluje z lepszą jakością życia we wszystkich sferach funkcjonowania człowieka: biologicznej, społecznej, subiektywnej i metafizycznej.

**Słowa kluczowe:** wdzięczność; jakość życia; psychologia personalistyczna; psychologia zorientowana na osobę