

The planned project is framed within the field of positive psychology, the main objective of which is to study what makes us happy, what improves our mood and increases our resources to deal with difficult situations. Psychologists more and more often study such phenomena, as happiness, optimism, gratitude. The last one is understood as an ability to acknowledge the beauty of the world and appreciate the positive aspects of life. Recently, there's been so much said about how frequent grateful feelings — even for the most trivial, unnoticeable aspects of reality — make us happier, more satisfied with life, healthier, less afraid and better functioning. The list of positive effects of gratitude seems to have no end.

I decided to examine, what would happen if I asked women with breast cancer and depression to write down the reasons for gratitude every day for 2 months. If gratitude really works — increasing the level of happiness and wellbeing — it is worth trying to teach sick people to notice reasons for gratitude in their lives. I also wanted to check, if women with depression and with breast cancer are grateful for the same, or different things, and if one of these groups is more susceptible to the healing power of gratitude.

For the first group, I chose women with breast cancer. Why? Because breast cancer is a predominant type of cancer in the Polish population, it constitutes 20% of all cancer types — and the number of the sick is still growing. They often regain physical health in the end, but the imprint that cancer leaves on their psychic, is unbelievable. 85% of the patients have symptoms of PTSD, depression, anxiety and negative thoughts. The latter do not enhance the process of recovery — indeed, they are the foundation of the vicious cycle of depression. Besides, being a volunteer worker in an oncological foundation, I observe that patients rarely seek professional health, even though they struggle through very difficult situations. It is because for them going to a psychologist is yet another appointment to make, a necessity to leave the house, sometimes additional expenses — and for a woman in chemotherapeutic treatment, each of these actions requires a lot of strength, which she usually does not have anymore.

The second clinical group I chose for comparison, is women with depression. Depression is a very prevalent problem, which affects twice more women, than men. It is the most frequently occurring disease in women. It is characterized, among others, by negative thoughts about the world, life and oneself. A depressed person falls into a vicious circle of negative thoughts and schemes, which is hard to break out from. The gratitude induction, used in the study, will require a change of thinking, despite the whole mechanism of depression. If, using gratitude induction, there is a way to replace negative thoughts with positive appreciation of the good things in life and break the cycle of depression — it is worth trying.

The participants of the study will be 160 women in two clinical groups: a) 80 women with breast cancer within 2 years after treatment and b) 80 women with depression. The latter ones will be initially qualified with an online depression scale, and then, in an interview conducted by a therapist. In each clinical group (depression and breast cancer) randomly chosen half of the participants will undergo the gratitude induction procedure on daily basis (these will be referred to as “experimental” groups).

The study will be two months long, during which there will be three kinds of measurement carried out. One of them, will take place twice: on the first and last day of the study. It will consist of an interview, an eyetracking study (with a device used to measure the time of eye fixation on different presented pictures), and a set of questionnaires, measuring for example quality of life. The most important part of the project will be the daily measurement, carried out every day for two months. There will be an application installed on the participants' phones, which will send them questions about their mood, twice a day. Thanks to such method, there will be a lot of fresh answers about the real-time mood of the participants. Moreover, the application will ask one half of the participants (the “experimental” groups) about their level of gratitude and reasons for feeling grateful.

There will also be an online diary, on a specially designed platform. Once a week, every week, the participants will be describing and assessing the most important events from the whole week, and answering questions about e.g. their quality of life, depression, well-being.

The experimental group's answers about their reasons of gratitude will be analyzed with a program called LIWC. The program uses an in-built dictionary, divided into 76 linguistic categories. LIWC analyzes the text, grouping the appearing words into categories, and then — providing a frequency distribution of them. In this way, we will be able to find differences between reasons for gratitude of both groups.

I believe that the project will contribute to the fact, that oncological and depressive patients will notice that their life is full of areas, people and events they can be grateful for - in spite of everything.