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Understanding and optimising gratitude interventions: the right methods for the right people at the right time

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ABSTRACT

Objective: Gratitude has consistently been associated with various beneficial health-related outcomes, including subjective wellbeing, positive mental health, and positive physical health. In light of such effects, positive psychology researchers and practitioners have often implemented gratitude interventions in an attempt to build individuals' orientations toward appreciation and thankfulness. Recent meta-analyses and reviews have revealed, however, that these interventions often have mixed effects on gratitude or other health outcomes. With this issue in mind, we aimed to identify (a) contextual considerations that may impact the effectiveness of these approaches, and (b) recommendations for the optimisation of gratitude interventions.

Methods and Measures: Seventeen mental health professionals or experienced health psychology researchers engaged in semi-structured interviews to address the research questions.

Results: Thematic analysis of the data resulted in three contextual themes—cultural considerations, personal characteristics, and life experience—that were discussed as factors likely to influence intervention effectiveness. With respect to recommendations, participants highlighted the importance of encouraging deep engagement in gratitude tasks, consistent repetition of those tasks, and the value of interpersonal expressions of gratitude.

Conclusion: Discussion is centred on suggestions for future research on gratitude and on implications for the implementation of gratitude interventions.

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Introduction

Gratitude is widely regarded as both a common (Chipperfield et al., 2003) and socially functional quality (e.g. Jans-Beken et al., 2020; McCullough et al., 2001) that can be understood at both state and trait levels. State gratitude reflects an appraisal of a received benefit as a positive outcome delivered by an external source, whereas trait

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gratitude corresponds to a wider life orientation toward noticing and being thankful for the positive in the world (Jans-Beken et al., 2020). Trait gratitude is associated with a range of positive wellbeing factors, including increased life satisfaction and subjective wellbeing (Jans-Beken et al., 2020; Koay et al., 2020), higher self-esteem and positive affect (Emmons & Stern, 2013; McCullough et al., 2004), and higher optimism (Emmons & Stern, 2013; Froh et al., 2009). This type of gratitude is also associated with better cardiovascular health (Cousin et al., 2021), higher quality sleep (Boggis et al., 2020), and improved immune function and quicker recovery from illness (Emmons & Stern, 2013).

With empirical evidence pointing toward significant benefits of gratitude, researchers have become interested in experimental and intervention efforts aimed at promoting this construct. A wide variety of methods have been employed to manipulate gratitude, although most efforts have involved elements associated with written gratitude lists, journaling, or interpersonal expressions (see Jans-Beken et al., 2020). Gratitude lists are often based on the Three Good Things exercise (Seligman et al., 2005); for these lists, participants are invited to nominate things for which they are grateful and which happened in a specified period. Journaling has often involved more detailed accounts of gratitude than lists, although the requirements for journal entries have varied across studies. Finally, interpersonal expressions of gratitude have typically involved letter writing in relation to felt gratitude toward another person; again, there is variability across studies in methodology in this design, with differences according to whether participants have been encouraged to share the expressions with the person for whom they are grateful.

Despite the proliferation and refinement of gratitude interventions in recent years, several reviews and meta-analyses have cast doubt on the effectiveness of these interventions. As early as 2010, Wood et al. (2010) warned of over-enthusiasm for these interventions due to prior researchers' use of non-neutral (negative) control conditions (Emmons & McCullough, 2003; Watkins et al., 2003). In 2016, Davis and colleagues addressed some of Wood et al.'s concerns by undertaking a meta-analysis on gratitude interventions relative to waitlist (i.e. measurement-only) control groups and 'psychologically active' (i.e. an alternative task to promote psychological wellbeing) control groups. Results from the meta-analysis were mixed. Gratitude interventions were found to outperform measurement-only controls on well-being (with a small effect size) but not gratitude, and gratitude interventions were found to outperform alternative-activity conditions on measures of gratitude (with a medium effect size) and well-being (with a small effect size), but not anxiety. Davis et al. concluded their meta-analysis by stating that "...enthusiasm for gratitude interventions should be tempered until longer, more powerful interventions have demonstrated stronger evidence of efficacy" (p. 29). In a more recent meta-analysis, Cregg and Cheavens (2021) found that gratitude interventions had modest effects on symptoms of depression and anxiety, and the authors recommended that individuals seeking to reduce depression and anxiety should seek methods with strong evidence of efficacy.

The mixed empirical evidence on the effectiveness of gratitude interventions has done little to deter the use of these methods in various self-help programs and therapeutic practice. Numerous popular self-help books on gratitude are available, and dozens of gratitude-focused smart-phone applications continue to attract users

(with some attracting over 1 million downloads). Additionally, many clinical psychologists embrace a positive clinical psychology approach (Wood & Tarrier, 2010), including gratitude training (Emmons & Stern, 2013), in at least some areas of their practice. Perhaps the continued popularity of gratitude techniques is due, at least in part, to their ease-of-use and higher levels of engagement relative to other techniques (see e.g. Geraghty et al., 2010a, b). An additional possibility is that there is widespread belief in the efficacy of these interventions irrespective of the mixed empirical evidence relating to efficacy. Even among scholars who are aware of the mixed empirical evidence, there is sometimes a recognition that limitations in many studies may undermine intervention effects. For instance, Wood et al. (2016) noted that many null results have been reported in gratitude studies in which undergraduate students have participated in return for course credit or as part of course requirements. The extent to which these types of participants have an internalised desire to better themselves through gratitude practice is questionable. Indeed, studies involving more diverse samples than undergraduate students have often yielded stronger results (e.g. McCullough et al., 2002; Seligman et al., 2005). Finally, it is possible that some individuals may rationalise the mixed findings in gratitude research by pointing to inconsistent and unsuitable measurement choices for both gratitude and wellbeing. Thus, it is possible that individuals seeking to improve well-being and reduce ill-being believe in the value of gratitude interventions irrespective of their awareness of the mixed empirical evidence to support their use.

In light of the continued appetite for gratitude interventions, research is needed to obtain insight on (a) the boundary conditions that influence intervention effectiveness, and (b) methods to improve intervention effectiveness. The purpose of the present study was to address these issues by soliciting information from individuals with experience in implementing and evaluating gratitude interventions. Specifically, we sought the perspectives of health psychology researchers and mental health professionals—two populations with different types of expertise and experiences with these interventions.

Method

Philosophical perspective and reflexivity

The philosophical approach for this study was anchored firstly to ontological relativism (the concept that multiple realities exist relative to the observer), and secondly to a subjectivist epistemology—the idea that the interviewer and the interviewee work together to co-generate new understandings (Denzin & Lincoln, 2013). The aim of the study was not to test a hypothesis but to gain deeper knowledge and understanding from the perspective and knowledge of the participants. In line with our approach, it was impossible to create an objective perspective regarding the data co-created by the interviewer and participants during the process. It is important to note that it is not practical to aim for objectivity in qualitative research (Sparkes & Smith, 2013). As such, it is crucial that these co-created realities (and the data derived from them) are situated socially, culturally, and historically. The subjective nature of the research required the researcher to engage in thoughtful, self-aware analysis of

the interaction and co-creation between participant and researcher (Finlay & Gough, 2003). This reflexivity also requires researchers to acknowledge the process that researchers derive their findings (Finlay & Gough, 2003).

With an emphasis on reflexivity, we note that the interviewer (and first author) in this study was a middle-aged, middle-class, white male who is university educated, currently residing in Australia, and had lived the first half of his life in the USA. These conditions presuppose a predominantly Western (and some may describe as privileged) view towards gratitude with minimal exposure to other cultural attitudes. Additionally, the interviewer self-professed to value the importance of gratitude in both his personal life and the broader community. The lead author considered himself to be higher than average in trait gratitude (although no formal assessment of this trait had been done). It is acknowledged that these subjective viewpoints, potential biases, and unique lived experiences informed and influenced the interview and analysis process. Ethics approval was granted for this study by the James Cook University Human Research Ethics Committee: Application ID: H8455.

Participants

A total of 17 participants took part in the study. Inclusion criteria for the study were (1) mental health therapists/clinicians AND/OR mental health researchers, who (2) self-declared some familiarity with literature on gratitude, and (3) self-declared some experience with administering gratitude interventions in the past. Thirteen of these participants worked as mental health therapists or clinicians (12 psychologists and one mental health social worker), and four participants were health psychology researchers and not clinicians. Six of the clinicians had been working as therapists for over five years, with the other seven having been therapists for less than five years. The four health psychology researchers who participated had, collectively, published in excess of 370 Scopus-listed articles in various fields in health psychology. All participants indicated both a pre-existing familiarity with the literature on gratitude and with the application of gratitude interventions. Participants ranged in age from 24 to 50 years old, with five participants identifying as male and twelve as female. The majority (15 out of 17) participants worked and lived in Australia; however, one researcher lived and worked in the USA, and another researcher lived and worked in Hong Kong. Of the participants who were clinicians residing in Australia, one recently immigrated from Chile, and one recently immigrated from Hong Kong. The clinicians reported utilizing various gratitude-enhancement activities for their clients, often varying methods on a client-to-client basis. Journal writing and variations on the 3 blessings exercise were commonly employed, one participant invited clients to 'email themselves', and some incorporated gratitude-thinking within meditative practices.

Procedure

Participants were invited by the researcher *via* email communication after being identified through professional contacts. Once participants had provided consent, the researcher emailed a five-minute audio recording with background information about

the rationale and purpose of the study. Three interviews were held face-to-face; the remaining interviews were held through video conference (*via* Zoom). All interviews, which were held between April 2022 and September 2022 were one-on-one sessions (one interviewer and one participant), except for one session which had two interviewees participating simultaneously with the researcher. Data were collected *via* semi-structured interviews that loosely followed an interview guide. The interview guide was focused on the two aims of the research (i.e. the boundary conditions that influence intervention effectiveness, and methods to improve intervention effectiveness). Open-ended questions focused on participants' reflections on their own experiences (e.g. 'please describe any prior situations where you have felt that gratitude interventions have been successful/unsuccessful) and on their recommendations (e.g. 'What recommendations might you have for improving the effectiveness of gratitude interventions?'). Interviews were recorded and were first transcribed using Microsoft Word transcription or Otter AI transcription, and then reviewed manually by the first author for accuracy. Our approach to data collection was guided by pragmatic constraints; data collection ceased when interviews began to repeat themselves and when they provided sufficient data to provide a coherent narrative of results (see Law et al., 2022, for similar approach; Saunders et al., 2018).

Data analysis

Braun and Clarke (2006) six-step procedure was adopted for thematic analysis. Specifically, the first author (1) familiarised himself with the interview recordings through active reflexive listening and review during the interviews, and during the transcriptions of the interviews; (2) coded the data gleaned from the interview process; (3) collated recurrent, potential higher-order themes and subthemes; (4) reviewed the appropriateness of the coding and themes throughout the process and made changes as needed; (5) created theme labels and definitions, and (6) reported the findings using the themes and representative quotes to help give evidence and support the themes. Essential to this process of thematic analysis is that a reflexive, recursive approach was used. This approach permitted a flexible examination of the interview transcriptions and adaptability regarding generating codes and subsequent themes without a focus on a specific theoretical framework.

Codes were first generated using explicit semantic similarities. However, as coding and re-coding proceeded, some codes were integrated into others due to latent or implicit data connections. A broad perspective was taken with coding, such that codes could be derived based on concerns, beliefs, recommendations, or any other salient construct. New codes were generated even during the latter stages of the analysis (and the subsequent write-up of the data). Themes were generated and defined, first using obvious shared qualities and meanings to group codes within themes. Some themes were integrated into larger overarching super themes; at other times, sub-themes were created underneath themes to better represent the variety of issues within a given theme. Composite codes were often swapped or reallocated during the process to help determine the most effective way to present the data as it related to gratitude interventions. During the thematic analysis, a series of 'critical friend'

meetings were held between members of the research team to refine the analysis and interpretation of data to address the research questions more accurately (see Muller et al., 2022, for similar approach). This process provided insight into the data that would not be possible with a singular viewpoint (Smith & McGannon, 2018).

Results

Two higher order categories were presented as (1) the contextual considerations influencing the effectiveness of gratitude interventions, and (2) enhancing the effects of gratitude interventions. These categories provide insight into the “*who and when*” of appropriate gratitude intervention and the “*how*” of optimised gratitude interventions. The two categories produced distinct themes and subthemes—definitions and example meaning units are shown in Table 1. Hereafter, to avoid confusion, we use the word ‘participants’ to refer to interviewees in our study, and ‘recipients’ to refer to individuals who may receive gratitude interventions.

Contextual considerations that influence gratitude intervention effectiveness

Most participants felt that contextual issues associated with social factors and recipients’ characteristics were important determinants of intervention effectiveness. One participant noted:

It’s just like how you practice it could differ from individual to individual in the same way how you learn it; the effect is potentially going to be different, but that’s going to be different depending on where we each started, you know, what state we were each in, emotionally, personality-wise, when we commenced this particular life skill, learning this life skill, the same way that, two people can start a diet and come from very different health places.

Three broad themes relating to contextual characteristics were discussed by participants in this study. These themes—life experience, personality and values, and cultural considerations—are described in the sections below.

Life experience

Some participants stated that adversity needs to be part of life experience for gratitude to resonate with the recipient: “I really feel like it’s much more applicable, or it’s easier for people that have experienced quite serious adversity and then they’re able to be a lot more genuinely grateful”. Another participant echoed a similar sentiment: “If someone hasn’t gone through the hardship, everything gets taken for granted”. Interestingly, participants highlighted that if recipients had *recent* adverse life experiences, gratitude interventions could be inappropriate or ineffective. One participant noted: “If someone’s going through a really tough period... it might be hard to find things to be grateful for”. Thus, participants’ discussions on adversity implied that experiences of adversity may be useful for comparative judgments to support gratitude, but if such adversity was acutely evocative of negative emotion, then gratitude interventions may be inappropriate. One participant witnessed

Table 1. Categories, themes, definitions and example meaning units for factors and recommendations to optimise gratitude interventions.

| Category | Theme | Description | Exemplar meaning unit | Summary of category findings |
|--|---|--|---|---|
| Contextual considerations influencing the effectiveness of gratitude interventions | Cultural considerations | How cultural background can influence gratitude intervention appropriateness and effectiveness | "Some cultures are more likely to value gratitude" | Gratitude interventions are likely to vary in effectiveness depending on recipients' cultural background, personality, personal values, and experiences with adversity. |
| | Personal characteristics | How personality and personal values influence gratitude intervention appropriateness and effectiveness | "If you were to interview the people who score highly on...gratitude, they would also score highly on things like self-esteem, self-acceptance, capacity to receive, and just attitudes towards believing that, in general, people are kind, and the world is a good place" | |
| | Life experience | How life experience, adversity (or lack of adversity), age and life stage influence gratitude intervention appropriateness and effectiveness | "My theory is that gratitude can be more beneficial at different age groups" | |
| Recommendations for the optimisation of gratitude interventions | Motivated engagement | How motivated and mindful recipient engagement with interventions is crucial to gratitude intervention effectiveness | "if you have someone who's not engaged, it won't work" | Aim to increase recipients' motivation to engage in interpersonal expressions of gratitude on a consistent basis. |
| | Consistent repetition of those tasks | How consistent implementation and repetition of gratitude tasks can positively influence gratitude intervention effectiveness | "I think for gratitude interventions to be effective, it has to be very, very routine and structured initially until it just becomes normal, it just becomes a usual part of your daily life" | |
| | Value of interpersonal expressions of gratitude | How interpersonal behaviour can influence the effectiveness of gratitude interventions | "for me, the social element would be crucial, and probably the biggest determinant of whether it was successful or not" | |

inappropriate and invalidating implementation of gratitude intervention when used with adolescent victims of abuse. This participant described one teen's reaction as follows:

I've kind of felt, why would I think about that, when I'm actively in this difficult circumstance? Why are you encouraging me to do that [practice gratitude] rather than talking to me about the people that are harming me?

Another told of a similar situation:

I was working with a girl who had a very traumatic history, including abuse and sexual abuse. And the therapist went in and started with gratitude therapy, and it did nothing for her, it probably would have had the opposite effect.

Age or stage in life were factors contributing to life experience. For instance, one participant said, "my theory is that gratitude can be more beneficial at different age groups. So, someone over 60 can have more benefit from a gratitude journal". Another participant shared a similar sentiment, "I think you get a lot better results from adults with that kind of thing because they can probably appreciate more the value of reflecting on, you know, positives and appreciation and so forth". However, age itself was not always considered important to participants, but rather *stage in life*, "I've met young people who've had a lot of experiences that are a young age. But I do wonder if there would be some crossover in terms of like life stage, and like brain development and that side of things".

Personality and values

Participants felt that certain foundational qualities in recipients, particularly those reflecting aspects of their personality or established values, were likely to determine the effectiveness of gratitude interventions. It was felt that gratitude activities would resonate most with those who possessed psychological resources that the activities could be scaffolded upon. In explaining this issue, one participant noted:

I do a lot of values-based work as part of positive psychology, which is often around people identifying what their values actually are... they might find it harder to identify what things they're grateful for if they don't have that foundation of kind of knowing what their values are.

Another participant echoed a similar sentiment in relation to the scaffolding of the activities on existing psychological resources: "people who typically already have a higher trait gratitude... are going to benefit more. But they also probably need it less". The effective scaffold of these activities was also discussed in relation to individuals attempting to improve other, related constructs: "I think [gratitude] is tied a bit to self-compassion... And gratitude can be a very significant part of that self-care of recognising that my life is actually good and I'm actually doing good things for myself". One participant provided a holistic assessment of the scaffold on existing personality and values resources:

If you were to interview the people who score highly on...gratitude, they would also score highly on things like self-esteem, self-acceptance, capacity to receive, and just attitudes towards believing that, in general, people are kind, and the world is a good place.

Although participants mostly discussed types of personality and values that were likely to increase intervention effectiveness, participants also felt that some types of

people may use gratitude interventions in a disingenuous or manipulative way. Discussion here centred on interpersonal expressions of gratitude, with one participant commenting:

If that person is a narcissist, or if that person is providing the gratitude in a relatively transactional way, and they don't get it back, well, I wonder whether there's those sorts of folks who, as a result of engaging in more acts of gratitude, but not necessarily having it reciprocated every time, start to get pissed off.

This perspective on a potential danger or limitation to interpersonal expressions on gratitude stood in contrast to most discussions about this format for gratitude interventions. In many discussions, positive aspects of (interpersonal) gratitude expressions were highlighted, including beneficial social exchanges and the facilitation of deep engagement in the gratitude exercise.

Cultural considerations

Another consideration for gratitude intervention appropriateness are the cultural aspects and influences at play. One participant suggested that there are “some cultures that are more likely to value gratitude”. While others believed that some cultures practiced gratitude more frequently, such as the Chinese sentiment of “saying that we should do one good thing every day” and that “it's part of our [Chinese] culture to say thank you to people”. Religion was mentioned by participants when exploring possible reasons for cultural variations in attitudes toward (practicing) gratitude. Many believed that religions cultivated an orientation toward gratitude, and religious rituals or tasks often incorporated gratitude practice either directly or indirectly. For instance, one participant stated, “I am a Christian individual, and I've found that in a prayer sort of setting that gratitude is actually really useful...just spending that intentional time reflecting on what I'm grateful for”. Further, in a broad discussion about Eastern philosophies and religions, another participant stated, “I really feel like it's much more applicable, or it's easier for people that have experienced [eastern philosophies/religions]”. Other than religion influencing gratitude practice and orientations, issues of nationality were also raised as part of a broad discussion on culture. In particular, one person highlighted that nationality could be leveraged to experience gratitude,

Here in Australia, you hear a lot of times like, Oh, we're quite lucky. We're lucky to be in Australia, because I think Australia in particular is a very grateful country or with grateful people, because they are aware ... Maybe their geographic position because Australia is... quite close to developing countries as well.

Enhancing the effects of gratitude interventions

The second category of participants' responses related to their thoughts on enhancing the effectiveness of gratitude interventions. Before highlighting the three themes associated with this category of responses, it is noteworthy that many participants felt that gratitude interventions were best implemented as an adjunct or supplement to other interventions or strategies. Some interviewees made statements such as, “I've

never used them as a standalone intervention” and “I certainly don’t use it in isolation”. Another went on to clarify that “it needs to be in adjunct with something else”. Participants did not elaborate on which other techniques may be most useful to use alongside gratitude activities; this issue may warrant further research.

Motivated engagement

Participants frequently spoke about the effectiveness of gratitude interventions hinging on whether recipients were motivated to engage with the intervention. Regarding motivation, one participant stated, “if you have someone who’s not engaged, it won’t work”. Another related that “in my experience, with the recipients that have actively engaged in the process, they seem to, from what they’ve described... they seem to have really good results from it”. In terms of ideas to increase motivation and engagement, participants discussed how recipients may benefit from the provision of preliminary information about the benefits of gratitude: “I think education around it would be really useful for me... some form of you know, trusted information up front that shows me the benefits of this thing”. Another participant reinforced a similar sentiment,

I would want someone to present it to me, I suppose, but specifically, it would be a fairly lengthy explanation of the concept. I tend to like exposition. So, someone would probably want to explain trait gratitude, a fairly comprehensive articulation, not just the benefits but what does it entail.

According to participants, the recipient also needs to know exactly how to best participate and engage in the intervention and some suggested a form of coaching approach by the therapist: “to treat it like a bit of a skill that you have someone that could somewhat coach you through it”.

Aside from recommending preliminary information about gratitude and how to appropriately engage with gratitude tasks, participants also noted the beneficial effects of activities that required reflection as opposed to activities that could be undertaken without much reflection. One participant stressed the importance of the reflective activity, “the more important thing, which is to reflect on the effects that has on you and on others, and to look at how you might do more of it”. Participants highlighted that reflections were more likely to be encouraged in journaling or interpersonal activities than with listing activities. One participant noted the benefits that may be derived from engagement with journaling-type activities:

[the] reflective component that I mentioned, of trying to identify what things are meaningful to me, things that I really value and appreciate... and then trying to notice and celebrate when I’ve had those things, so that I can both enjoy them more when they’re happening...and prioritise them in the future.

Consistent repetition

Participants discussed the importance of long-term, continued engagement with gratitude activities in order for the activities to yield benefits: “I think for gratitude interventions to be effective, it has to be very, very routine and structured initially

until it just becomes normal, it just becomes a usual part of your daily life". In discussing methods to encourage long-term use, participants highlighted that steps could be undertaken to ensure that recipients were sensitive to short-term effects of gratitude practice. According to one participant, well-designed gratitude activities should give immediate feedback to the participant to reinforce the behaviour: "if you're getting something out of it and you can feel that immediately, you're more likely to continue to do it and get those long-term effects". Another participant suggested stressing the possible positive outcome to help instigate the change: "...you do this, and you repeat it because...it's going to be beneficial for me".

Participants discussed various tools that could be used as prompts to facilitate such engagement. In addition to physical notebooks used for journaling gratitude reflections, participants suggested that digital technologies, and smart phones in particular, were likely to be extremely useful in encouraging consistent engagement with gratitude activities. One participant mentioned using social media to post a grateful reflection daily; another participant discussed using a voice recorder on one's phone instead of a written journal to help make the process easier and more spontaneous. One of the perceived benefits of smart phones was their capacity to provide prompts *via* automatic alarms and reminders, which were seen by participants as important for repeated and consistent engagement. By extension, gratitude-related phone applications—with their ability to provide guidance as well as reminders—were also seen as promising.

Interpersonal behaviour

Participants felt that gratitude interventions were likely to hold particular promise when they involved interpersonal expressions of gratitude. One participant noted: "for me, the social element would be crucial, and probably the biggest determinant of whether it was successful or not". Although participants recognised that individuals may be grateful for events or things rather than people, when prompted to consider effective gratitude interventions, many discussed interpersonal elements:

Sitting with therapists or researchers, whomever it may be, as well as the person who you're grateful to and almost in sort of couples therapy style sitting and talking through what you're grateful about, and having that person here, and reflect on and share how that makes them feel.

Aside from suggestions relating to the provision of gratitude to others, participants also discussed benefits associated with having others aware that one is attempting to build gratitude: "I'd want my partner and maybe even my kids at home to know what I was trying to do. And to be on the journey with my friends outside of those circles as well". Another suggested, "I think having someone to be accountable to would also be helpful, like if you were doing it in a group setting perhaps? Or if you just had a, you know a gratitude buddy". The issue of accountability arose in numerous interviews—participants felt that interpersonal expressions of gratitude were likely to promote deep engagement in the activity and create a platform for positive interpersonal relationships. These positive social exchanges were also highlighted as a possible reinforcer of the gratitude activity, supporting individuals' continued

engagement with gratitude expressions. Activities such as volunteering at a soup kitchen or doing other charity work were suggested as an opportunity to build gratitude. These activities were considered as engaging ways for recipients to feel thankful for their own lives and an opportunity to *receive* gratitude for their work. One participant explains the concept this way, “I think the best intervention would be to, to be involved with volunteer work...to help people in your life, in your university or your office”.

Discussion

The purpose of this study was to highlight contextual conditions that are likely to influence the effectiveness of gratitude interventions, and to identify methods to improve gratitude intervention effectiveness. Thus, the results of this study help to highlight *for whom* gratitude interventions may be most useful, *when* gratitude interventions may be most appropriately administered, and *how* these interventions could be designed for strongest effects. Interviews were undertaken with mental health professionals and health psychology scholars who were familiar with the literature on gratitude and with the application of gratitude interventions. Results revealed three themes—life experience, personality and values, and cultural considerations—relating to recipient characteristics that may moderate intervention effectiveness. Three additional themes (motivated engagement, consistent repetition, and interpersonal behaviour) were generated from participants’ responses in relation to ideas for enhancing the effectiveness of gratitude interventions.

With respect to contextual conditions that may moderate intervention effectiveness, participants discussed the importance of life experience, and the challenges and adversity associated with such experience, in supporting an appreciation orientation. It is possible that such experiences provide a reference point or juxtaposition for what one currently has or receives, thereby fostering a sense of gratitude. Participants acknowledged, however, that gratitude interventions may be perceived as invalidating or inappropriate when individuals are acutely (emotionally) triggered by adversity. These findings do not discount the potential for gratitude interventions to be useful for those with clinical concerns; indeed, there is evidence that positive psychology interventions are especially beneficial for these populations (Carr et al., 2021). However, the findings speak to the importance of a careful and considered use of gratitude interventions in clinical practice, particularly in relation to when they might be useful for those with stress-related conditions. Alongside participants’ discussion of life experience and adversity was a viewpoint that individuals with certain personal and shared (culture-related) values were most likely to benefit from gratitude interventions. Participants discussed religion and eastern cultural philosophies as supportive of gratitude interventions, a sentiment that has been reinforced by recent meta-analytic evidence showing that positive psychology interventions are most effective among non-western participants (Carr et al., 2021). Empirical work is encouraged to establish the elements of eastern cultures that are influential in driving these effects.

In discussing issues that may enhance gratitude intervention effectiveness, participants felt that gratitude activities were best placed as adjuncts or supplements to

other approaches. This finding aligns with recent evidence that positive psychology interventions are most effective when incorporating multiple elements (Carr et al., 2021). Gratitude tasks are often employed as part of cognitive behavioral therapy; indeed, many of our participants mentioned using gratitude activities as part of their practice of this therapeutic approach, and gratitude activities are often provided alongside other activities in online resource banks for this therapy. There is a natural fit between gratitude activities and cognitive behavioral therapy—the act of reframing events (cognition change) and undertaking exercises (behavior change) in the search for gratitude is consistent with the goals of this therapy. One practitioner in our sample also highlighted the use of gratitude exercises as a supplement to a values-based approach, as often seen in therapies such as acceptance and commitment therapy. In describing this link, the participant, who was a qualified psychologist, mentioned: “if people don’t know what they actually value, or what things feel valuable to them, or what things make them feel more happy, or have a positive impact in general on their moods, they might find it harder to identify what things they’re grateful for, because they don’t have that foundation of....knowing what their values are”.

In terms of components of gratitude activities, participants cited perceived benefits of interpersonal elements, although meta-analytic evidence does not point toward additional benefits of these designs as a broad category of approach (Cregg & Cheavens, 2021; Davis et al., 2016). Recent research has highlighted, however, that a more nuanced appreciation of this issue may be warranted. Specifically, in a large-scale study of nearly 916 participants, Walsh, Regan et al. (2022) observed that participants experienced greater social connectedness and support when their gratitude was expressed privately *via* text as opposed to withheld to self or expressed publicly. Perhaps digital text-based interventions result in less activation of negative feelings, such as indebtedness and guilt, that are sometimes associated with gratitude expression (e.g. Walsh, Armenta et al., 2022).

An appreciation of emotional responses to gratitude activities is particularly necessary in light of participants’ reflections on the importance of reinforcements in determining intervention adherence. Participants in the present study indicated that immediate feedback and reinforcement would be likely to determine recipients’ willingness to continue with the intervention in the longer term. Drawing recipients’ attention to positive feelings in the aftermath of gratitude interventions is one option to facilitate this process. In addition, with respect to the recommended practice of interpersonal expressions of gratitude, interventionists may wish to make efforts to minimise some negative affective consequences that can result from this method (see Walsh, Armenta et al., 2022). In terms of improving outcomes from each engagement with a gratitude activity, participants encouraged the provision of strong rationales about the purpose and potential of the interventions, as well as activities that required high, as opposed to low, cognitive effort to complete. Such recommendations align principles in self-determination theory (SDT; e.g. Ryan & Deci, 2000) and the elaboration likelihood model (ELM; Petty & Cacioppo, 1981), respectively.

With conjecture surrounding the effectiveness of gratitude interventions, theory-driven research—especially aligned with SDT and/or ELM—is recommended. These theories can provide structure and direction to unpack moderators and

mediators to intervention effects. SDT is premised on the idea that three basic psychological needs—for autonomy, competence, and relatedness—influence performance and sustainment in activities, as well as wellbeing outcomes from those activities (see e.g. Ng et al., 2012). In the context of research on gratitude, interventions that support these needs should theoretically carry more beneficial downstream effects than other types of interventions. ELM offers a paradigm to predict the circumstances under which individuals are likely to engage in more-or-less conscious processing of gratitude tasks, as well as the likely outcomes from those different levels of processing. Much like SDT, a wealth of evidence has accumulated to support the ELM's main contentions (for overview, see Petty & Brinol, 2011), but work is yet to uncover the utility of the theory in research on gratitude interventions.

With respect to study limitations, we acknowledge that the issue of data saturation in qualitative work is contentious, and that more interviews may have yielded new or different perspectives. With this issue in mind, we recommend that the views and recommendations of participants in this study are verified with further study, including using quantitative designs through which causal relationships may be inferred. An additional limitation of the work is that although cultural issues were raised as important considerations with respect to gratitude and its practice, we obtained a relatively non-diverse group of participants in relation to cultural background. It would be interesting to explore relationships between culture and gratitude in more detail in further qualitative research. Finally, ideas on more rigorous and sensitive ways of measuring the effectiveness of gratitude interventions were not addressed in our interviews. It was interesting that the practitioners/therapists in our sample often included gratitude tasks as part of more complex interventions (often cognitive behavioral therapy), and none measured gratitude as an outcome of their interventions. More research is encouraged in which controlled designs are used with clinical populations. Also, researchers should be especially sensitive to the dynamics between intervention length, intervention strength, and the measurement of gratitude and its possible consequences (e.g. wellbeing).

Conclusion

This study highlighted important perspectives from 'information rich' participants with respect to gratitude interventions. A range of contextual considerations—particularly recipients' cultural background, personality, personal values, and experiences with adversity—were identified as likely to influence gratitude intervention effectiveness. Further, tools and components of ideal or optimised gratitude interventions were also identified to assist future intervention efforts. Interviewees felt that a key goal for interventionists should be to increase recipients' motivation to engage in acts of gratitude on a consistent basis, and interpersonal acts of gratitude were seen as a particularly promising avenue for the promotion of gratitude. It is hoped that this study will stimulate further research into and applications of gratitude interventions.

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Data availability statement

The data that support the findings of this study are available on request from the corresponding author, JAD.

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