

Research Paper

Role of Gratitude, Forgiveness and Resilience in Quality of Life of Elderly

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ABSTRACT

The elderly face numerous challenges, and a variety of factors affect their mental health. The main objective of this research study was to find out the relationship between gratitude, forgiveness, resilience and quality of life. Elderly (N=200) from Haryana (India) were included in the study, whose age range was 60-75 years. Standardized tools namely John Flanagan's Quality-of-Life Scale, The Gratitude Questionnaire, Heartland Forgiveness Scale and The Brief Resilience Scale (BRS) were administered to collect the data from the sample. The findings revealed a significant positive correlation between gratitude, forgiveness, resilience and quality of life. Further, the findings establish gratitude, forgiveness, and resilience as significant predictors of quality of life among the elderly.

Keywords: *Quality of Life, Gratitude, Forgiveness and Resilience*

The term elderly or old age refers to individuals who are approaching or have exceeded the average human lifespan. The definition of old age is not universally defined, as its significance varies across different cultures. In January 1999, the Government of India implemented the 'National Policy on Older Persons,' which characterises a person above 60 years of age as 'elderly or senior citizen'.

The United Nations highlights that, especially in low- and middle-income countries, the ageing population is expanding at a rate never seen before and according to WHO (2025), the percentage of the world's population aged over sixty is expected to almost double from 12% to 22% between 2015 and 2050. Moreover, as per the Situation Analysis of the Elderly in India, 2011 report, the share and size of the elderly population is projected to rise from 5.6% to 12.4% in the year 1961 to 2026.

Ageing is a natural biological process accompanied by various challenges (WHO, 2024), such as physical and psychological problems like osteoarthritis, hearing impairment, vision loss, cataracts, and pulmonary problems (WHO, 2025). Social isolation and loneliness are radical consequences of psychological problems like depression (particularly as a result of

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decreased mobility) and dementia, the two main risk factors linked to the elderly (WHO, 2025).

Another significant issue with the current demographic shifts is the quality of life for the elderly. Elderly people with poor health and illness have a lower quality of life (QOL). Quality of life has been defined as “individuals’ perception of their position in life in the context of the culture and value systems in which they live and in relation to their goals, expectations, standards and concerns” (WHOQOL Group, 1993).

Mental health issues such as depression and dementia are frequently mentioned (Tiwari & Pandey, 2012). In India, between 35-40% of senior citizens suffer from mental health problems (Kumar et al., 2021), the prevalence of mental health conditions like depression, anxiety, and dementia is rising. This demonstrates the low and declining quality of life among the elderly. With the increasing life expectancy, it is expected that a high level of well-being and quality of life is maintained among older adults (Bowling, 2011). With the emergence and advancement of research in the area of positive psychology, positive psychology interventions are constantly exploring ways to enhance psychological well-being, happiness and quality of life among individuals.

Gratitude

According to Emmons (2004), “a sense of thankfulness and joy in response to receiving a gift, whether the gift is a tangible benefit from a specific other or a moment of peaceful bliss evoked by natural beauty.” In simpler terms, gratitude is the emotion that arises when a person recognises, acknowledges, values, and assigns a benefit that he has received to another.

Gratitude enhances an individual’s sense of well-being and quality of life in addition to helping to sustain reciprocal social exchanges and interpersonal bonds (Bono & McCullough, 2006).

Forgiveness

Forgiveness is defined by Thompson et al. (2005) as “freeing from a negative attachment to the source that has transgressed against a person.” In the view of McCullough (2000), “Forgiveness is a pro-social motivation, which is expressed through the decreased desire to avoid the transgressing person and to harm or seek revenge toward that individual and increased desire to act positively toward the same person.” According to Huang and Enright (2000), forgiveness is necessary in living a fulfilling life.

Bono, McCullough, and Root (2008) found in two longitudinal studies that an increase in forgiveness leads to stronger and better relationships as well as greater psychological well-being. A higher level of psychological resilience is associated with a greater propensity for forgiving (Svetlana Kravchuk, 2021).

Resilience

Luthans (2002a) has defined resilience as “the developable capacity to rebound or bounce back from adversity, conflict, and failure or even positive events, progress, and increased responsibility.” Resilience is defined by Rutter (2006) as “reduced vulnerability to environmental risk experiences, the overcoming of a stress or adversity, or a relatively good outcome despite risk experiences.” Resilience plays a significant protective role in the health of the elderly (Färber and Rosendahl, 2020). Researches conducted in the past document that

greater levels of resilience have been consistently associated with improved Quality of life. (Liu et al., 2017; K.K. Lim et al., 2020).

Objectives of the study:

- To explore the relationship between gratitude and quality of life (QOL) among the elderly.
- To explore the relationship between forgiveness and quality of life (QOL) among the elderly.
- To explore the relationship between resilience and quality of life (QOL) among the elderly.

Hypotheses of the study:

- There will be a significant relationship between gratitude and quality of life (QOL) among the elderly.
- There will be a significant relationship between forgiveness and quality of Life (QOL) among the elderly.
- There will be a significant relationship between resilience and quality of Life (QOL) among the elderly.

METHOD

Participants

The participants of the present research comprised two hundred (N= 200) elderly individuals between the ages of 60-75 years. The sample was randomly chosen from rural and urban areas in the state of Haryana, India. Those who voluntarily consented to participate were included.

Measures

The tools used in the study are as follows:

1. **John Flanagan's Quality-of-Life Scale (1970):** Particularly developed to assess the quality-of-life is a seven-point Likert scale. Meant to measure "the satisfaction with needs met", it assesses quality of life ranging from material and physical well-being to social, interpersonal relationships, civic activities, and personal fulfilment. The test possesses good psychometric properties with internal consistency reliability ($\alpha = .82$ to $.92$).
2. **The Gratitude Questionnaire (McCullough, 2002):** The GQ-6 is a unidimensional tool meant for the assessment of an individual's level of thankfulness /appreciation in everyday life. It is a six-item Likert-type seven-point scale, with responses ranging from "strongly disagree to strongly agree". The test has sound psychometric properties, with the internal consistency ranging from $.76$ to $.84$.
3. **Heartland Forgiveness Scale (Thompson et al., 2005):** It is a seven-point Likert-type scale with 18 items meant to assess individuals' forgiveness levels. Responses on the scale range from "almost always false than true" (1) to "almost always true of me" (7). The test has good psychometric properties, with a test-retest reliability coefficient of $.85$ and an internal consistency coefficient reported as $.80$.
4. **The Brief Resilience Scale (BRS) (Smith et al., 2008):** Comprised of six items, the BRS is a five-point Likert scale wherein participants were asked to rate each statement's level of agreement or disagreement with each item. The test possesses sound psychometric properties with a Cronbach's alpha value of 0.71 .

Procedure

After finalizing the sample, informed consent was gained from the participants as the first step, making sure suitable conditions for the administration were available. Rapport was established, and instructions preceded the process of clearing their doubts regarding the scales, if any. The administration was done in both individual and small group settings. The instructions were provided exhaustively, and it was always ensured that the participants felt like they could be honest and could ask questions at any point during and even after the administration. Fully-filled questionnaires were collected after the participants completed them, and their responses were scored according to the scoring instructions provided in the respective manuals. The data obtained after scoring were further put to statistical analysis, and inferences were drawn.

Statistical Analysis

The data procured from the present research study was put to analysis with the help of SPSS 22. The descriptive statistics (mean and standard deviation) and Pearson's Product Moment Coefficient of correlation were applied to compute the correlation among the variables. Considering the findings, to study the effect size of the variables the data was further put under regression analysis.

RESULTS

The principal objective of the present study was to explore the relationship between gratitude, forgiveness, resilience and quality of life among the elderly. After applying the appropriate statistical tools to the data obtained from the study, the detailed findings are presented in the following Table No.1.

Table 1: Descriptive statistics and intercorrelation matrix between gratitude, forgiveness, resilience and quality of life among the elderly (N=200).

Variables	M	SD	1	2	3	4
1.QOL	87.10	15.87	1			
2. Gratitude	31.13	06.87	.550**	1		
3.Forgiveness	85.64	12.61	.592**	.709**	1	
4. Resilience	19.58	03.66	.590**	.588**	.641**	1

***Correlation is significant at 0.01 level (2-tailed)

Table 1 presents the results of the descriptive and correlational analyses. Descriptive analysis depicted that the mean score of the participants on quality of life (QOL) (M=87.10, SD=15.87), on gratitude (M=31.13, SD=06.87), on forgiveness (M=85.64, SD=12.61), and on resilience (M=19.58, SD=03.66). The findings established significant positive correlation between QOL and gratitude ($r=.550$, $p<0.01$); the findings also establish a significant positive correlation between QOL and forgiveness ($r=.592$, $p<0.01$), QOL and resilience ($r=.590$, $p<0.01$), gratitude and forgiveness ($r=.709$, $p<0.01$), gratitude and resilience ($r=.588$, $p<0.01$) and further the findings conclude a significant positive correlation between forgiveness and resilience ($r=.641$, $p<0.01$).

Table 2 Multiple Linear Regression predicting quality of life (N= 200).

Predictors	B	SE B	β	t	Sig.(p)
Constant	19.124	5.958		3.210	.002
Gratitude	.409	.180	.177	2.268	.024
Forgiveness	.331	.104	.263	3.190	.002
Resilience	1.373	.311	.317	4.412	.000
R ²	.440				
F	51.401				.000

Dependent Variable: Quality of life

Predictors: (constant): Gratitude, Forgiveness and resilience.

As displayed in Table 2, quality of life emerged as a significant predictor against gratitude, forgiveness and resilience with $R^2 = .440$, $F = 51.401$, $p < .01$. The findings establish quality of life as a significant predictor with 44% variance of gratitude, forgiveness and resilience among the elderly. Table shows that gratitude ($B = .409$, $\beta = .177$, $p < .05$), forgiveness ($B = .331$, $\beta = .263$, $p < .05$) and resilience ($B = 1.373$, $\beta = .317$, $p < .01$) have a substantial impact on quality of life. Significant positive correlations between quality of life and gratitude, forgiveness, and resilience are also established, and the findings indicate that the elderly with higher quality of life also exhibit higher levels of gratitude, forgiveness, and resilience.

DISCUSSIONS

The findings of the study establish a significant positive relationship between quality of life, gratitude, forgiveness and resilience among the elderly. Furthermore, the findings reveal gratitude, forgiveness and resilience as significant predictors of quality of life among the elderly. The positive psychology movement has been helping in improving the quality of life of the elderly. Elderly is a stage where, along with physical changes, one also experiences a lot of mental challenges. Efforts have been ongoing to explore the factors that would work in improving and enhancing the quality of life of the elderly.

The present findings establish a significant positive association between gratitude and quality of life among the elderly. The present finding is consistent with Shdaifat and Alotaibi (2026), who reported with a sample of adults that gratitude significantly predicts well-being outcomes. Moreover, the present result is corroborated by the findings of Crouch et al. (2020), who reported that gratitude had a significant positive impact on quality of life among a sample of multiple sclerosis patients ($N = 128$).

Furthermore, the findings reveal a positive association of forgiveness with quality of life and also reveal forgiveness as a significant predictor of quality of life. The results are in agreement with the previous pilot study conducted by Gull and Rana (2013). In their qualitative study, they revealed that forgiveness plays a significant role in improving the quality of life and subjective well-being among adults belonging to different professions. Also, the study found that forgiveness enhances positive emotions (happiness, contentment and spiritual development) and improves social interaction among individuals. Forgiveness also reduces negative thoughts. Another study found forgiveness to be a significant predictor of well-being among adults (Shdaifat & Alotaibi, 2026). Furthermore, the findings are in agreement with the study conducted by Silva et al. (2025) on 30 older people, which indicated a positive relationship between willingness to forgive and perception of health-related quality of life, especially concerning aspects of the mental health, educational level,

cohabitation, and employment activity. Thus, forgiveness may significantly influence the emotional aspects of mental well-being and quality of life of the elderly.

The present findings establish a positive association between resilience and quality of life among the elderly, and also establish resilience to be a significant predictor of quality of life. The present findings are consistent with the study conducted by Kushta and Moliner Albero (2026), wherein with a sample (N=115) of older adults' researchers concluded that a higher level of resilience leads to better quality of life and reduces the symptoms of loneliness. The present findings are in agreement with Musich et al. (2022), wherein they reported a tendency to make less use of healthcare services, thereby indicating the maintenance of higher quality of life. Furthermore, Kumar and Dixit (2014) found a significant relationship among forgiveness, resilience, and gratitude. According to Brinkhof et al. (2021), resilience and older adults' quality of life are closely associated. The findings imply that resilience-related abilities help individuals in effectively adapting to age-related difficulties.

The findings of the present research study provide us with the understanding that the higher the level of gratitude, resilience and forgiveness, the greater the quality of life amongst the elderly. Based on these findings, the hypotheses of the present study, which proposed a significant association between gratitude, forgiveness, resilience, and quality of life in the elderly, are confirmed and accepted.

CONCLUSION

It is a shared understanding that elderly people today live in far more complex times than comparable elderly people from previous generations. Their life transitions, like family conflicts, loneliness, depression, dementia, dependence, substance abuse, crime and violence, culminate in the breakdown of an individual's well-being and their sense of belonging, leaving them to take drastic life-threatening steps.

The present research has documented the positive association between gratitude, resilience, forgiveness and quality of life. Based on the present research results, the data lead to the conclusion that there is a need to promote and practice gratitude skills, which can have a significant impact on increasing the quality of life among the elderly. For social workers, counsellors, and psychologists, this research may provide a unique insight into the understanding of quality of life as a significant and adaptive part of elderly lives, allowing them to sail through stressful life events adaptively. Resilience, gratitude and forgiveness are also established traits that may be taught and mastered as skills for improved quality of life and mental health, according to the present study.

Limitations and Further Directions

A key limitation of this study is its correlational design, which prevents establishing causal relationships among quality of life, gratitude, forgiveness, and resilience. Additionally, the sample was drawn from a specific geographic region, limiting the generalizability of the findings. As a correlational analysis, cause and effect are not assigned in this work. Another limitation of the study is that the sample size is small and specific to the elderly. Consequently, future studies could benefit from a larger sample size with detailed investigations that consider demographic factors and use advanced statistical methods along with interventional approaches.

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Conflict of Interest

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