



As the year draws to a close, many of us – by habit or some inner prompting – will take time to step back and take stock: tallying the year’s achievements and setbacks, the things we did and failed to do, the regrets and the lessons learnt.

In that private reckoning, those of us who have made it through another year relatively unscathed remind ourselves to be grateful for all that has gone well – for good health, for catastrophes averted, for work that still pays the bills, for not being among those whose jobs have vanished overnight in yet another round of corporate cuts and layoffs. And grateful, too, that the juggernaut of artificial intelligence has, for now, spared us.

Gratitude in these circumstances would seem the reasonable and decent sentiment – though it doesn’t always come naturally or easily to most of us. We tend to have what psychologists call a “negativity bias”. Negative thoughts and events capture our attention more vividly and linger in our minds longer, while registering the positive often requires more conscious effort.

But as a recent study shows, cultivating gratitude may even prolong life – or at least for older women – according to research published on July 3, 2024, in the venerable medical journal *Jama Psychiatry*.

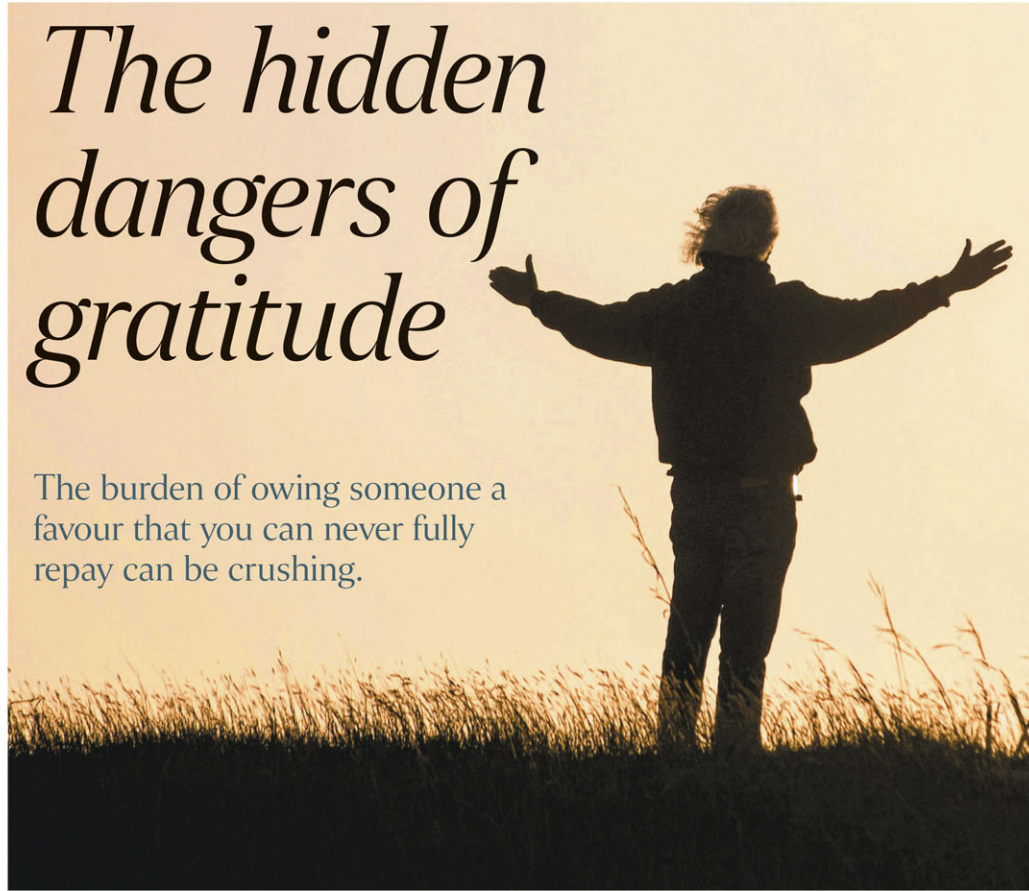
The study followed more than 49,000 retired female nurses in the United States, with an average age of 79, who completed a questionnaire assessing their sense of gratitude.

Over the next three years, nearly 10 per cent of these women died, most commonly from heart disease. However, those with the highest levels of gratitude had a lower risk of death compared with those with the lowest levels.

Gratitude is, therefore, something desirable – not just for

The hidden dangers of gratitude

The burden of owing someone a favour that you can never fully repay can be crushing.



Gratitude is a fully human and complex emotion, with psychological intricacies. For many people, gratitude is difficult to summon simply because life itself is grindingly hard, the writer says. PHOTO: UNSPLASH

its edifying effects, but also for the wide range of associated benefits demonstrated by a body of social-science research. It can make a person kinder – more helpful, generous, and compassionate – more satisfied with life and relationships, physically healthier, and more resilient to stress and depression.

Given all that gratitude appears to bestow, it seems only natural that it should be encouraged as a virtue to be consciously cultivated.

But is it really a virtue?

INGRATITUDE LIST

Some have touted the merits of keeping a regular – usually daily – gratitude list, in which one scans the day and notes the positive things, however small. The idea is that such a practice can, over time, reshape our habits of

thought, training us to look on the brighter side of life rather than brooding over worries or looking for things that make us feel hurt and wretched.

But such techniques do not always work – and may even backfire.

“Gratitude lists imply that those of us who are in pain are choosing misery and just aren’t working hard enough and that if we just think happy thoughts we’ll float up above our problems like the kids in *Peter Pan*,” wrote the author Liz Brown.

During a particularly distressing time in her life, she kept a gratitude list – a practice she persisted with for about a hundred days – even as it progressively made her feel ashamed to admit just how sad, heartbroken, and exhausted she was feeling.

Only when her therapist

suggested that she do the opposite and keep an “ingratitude list” – which got her to grieve what she had “lost, missed out on, been cheated of” – did things turn around for her. Not that writing down the things that made her miserable and angry made them vanish like magic, but it helped her identify the areas in her life that consistently caused her pain and needed to change.

Her ingratitude lists gave her clarity and focus, steering her away from shame and towards acceptance and action.

For many people, gratitude is difficult to summon simply because life itself is grindingly hard.

I’m wary of asking patients who are deeply depressed to keep a gratitude list or journal. And I am just as cautious about other popular recommendations like penning thank-you notes or

gratitude letters to people who have done them some good, or to do “savouring exercises”, which require them to be mindful of the good things around them in the moment and to feel grateful.

For patients in the depths of depression, mired in grief, loss and hopelessness, the exhortation to be thankful for something, anything, can feel like a maladroit injunction that invalidates their struggles. It may leave them feeling that something is fundamentally wrong with them for being unable to muster even an iota of gratitude, which leaves them feeling more defeated and inadequate.

COMPLEXITIES OF GRATITUDE

Gratitude is also a fully human and complex emotion, with psychological intricacies. There are two parts to it. First, we recognise the good in our lives – the gifts and benefits we have received. Second, we acknowledge that the sources of these come from outside ourselves: from other people, or from a higher power (for those who are spiritually inclined).

And it is where gratitude evokes that sense of obligation following an act of generosity that can never be fully repaid that it can become bedevilling and enslaving. “We wish to be self-sustained. We do not quite forgive a giver. The hand that feeds us is in some danger of being bitten,” Ralph Waldo Emerson once wrote.

In her book *Strangers Drowning*, Larissa MacFarquhar explored the ramifications of kidney donations and their unintended consequences. In one case, a spouse donated a kidney to the other – only for the recipient to later leave the donor because “the burden of gratitude had left the marriage irredeemably distorted”. In another, a man was so overwhelmed by a sense of obligation towards his donor sister that he couldn’t bear to look at her.

As MacFarquhar observed, there can be something “tyrannical” about such a gift. The donation of a vital organ binds the donor and recipient together – sometimes through “love, sometimes through guilt or

gratitude”. The latter can become so “dreadful... when no thanks seemed adequate and reciprocation was impossible”.

The burden of gratitude can be especially heavy when the donor is deceased – particularly if the donor was young and the death unexpected and tragic. Donor families, painfully aware of the magnitude of both their loss and their gift, sometimes feel a visceral bond with the recipient, seeing them as an extension of their loved one. As one grieving father unsettlingly said to the father of a girl who had received his late son’s heart, “We’ve always wanted a little girl, so now we’re going to have her and share her with you.”

Thus far, I have been spared the need of accepting such a life-saving gift, but I have been a beneficiary of much goodness and generosity.

We all begin life as infants, totally dependent on the care of others. As we age, and decline sets in, we once again become increasingly dependent. Between these two phases lie countless moments when we have needed the help, generosity, and kindness of others. There are those who have extended a helping hand in countless ways without asking for anything in return, and others who have forgiven us for our misdeeds and failings.

However self-conscious it may sound, I often feel that I have been given more than I deserve. Yet I don’t think that feeling is misplaced. It deepens my awareness of what I have and what I have had, and serves as a reminder never to take any of it for granted. More than that, it carries with it a sense of obligation – that I need to give something back, to do better for others, and to become a better version of myself.

I am grateful for my vocation as a psychiatrist, which allows me to be of use, to help others and give something back. I am also grateful to my patients, who – through their struggles and my relationships with them – have shaped me and taught me gratitude, and for that, I owe them.

• Professor Chong Siow Ann is a senior consultant psychiatrist at the Institute of Mental Health.