Gratitude

Des Mooney

Wexford VEC

May 2019

Follow this and additional works at: https://arrow.tudublin.ie/jsoc

Part of the Other Social and Behavioral Sciences Commons

Recommended Citation

Available at: https://arrow.tudublin.ie/jsoc/vol2/iss1/6

This work is licensed under a Creative Commons Attribution-Noncommercial-Share Alike 3.0 License.
Gratitude

Des Mooney
Smyly Trust Services

This article examines the practice and understanding of gratitude within the residential child care system. It seeks to understand how some of our young people interpret the idea of gratitude; sometimes as an intimidating manipulating force, at other times like an act of love. The article seeks to understand our human reactions alongside our professional responses and sets out to explore the practice of gratitude and the potential for loving relationships where healing can take place. The article positions gratitude as an act of love and the understanding of gratitude as the antithesis of envy.

Gratitude is not only the greatest of virtues, but the parent of all the others.

Marcus Tullius Cicero

Introduction

We work at the coalface of human hurt where emotions are raw. We work with profoundly hurt people. Is it acceptable that we ask them to say ‘thank you’ from time to time? Perhaps if we can get the young people to care about themselves a little bit more, they will care about others a bit more and be more open to feelings. One of these feelings is gratitude. For much of what we might see from our client group as take, take, take is actually one part distraction, one part survival and one part good fun; and showing gratitude just might be perceived as weakness.

Winnicott (1969) writes of a love that’s imperfect yet perfectly healthy. Vincent (2016, p. 8) notes, in her examination of love as a component of professional practice: “love is not simply an emotion or idea, it is not passive engagement. Love is active and intentional, and it is communicated through behaviours as well as words”. Smith suggests that “love is sometimes expressed more honestly by the way we treat others, than by the words we say to them” (Smith as cited in Vincent, 2016, p. 9). While it is love that Klein most closely links with gratitude; “the infant can only experience complete enjoyment if the capacity for love is sufficiently developed; and it is enjoyment that forms the basis for gratitude” (Klein, 1975, p. 188).
This article seeks to explore the role of gratitude in social care. What is gratitude? How do expressions of gratitude affect our perceptions of situations and people? What good is gratitude and does it have any social benefits? Does gratitude have a place in social care at all? This article also seeks to position the understanding of gratitude alongside that of envy, and position the act of gratitude as an act of love.

The Incident

This reasoning behind this article was born out of personal experience. How many times have you had your head in your hands as your mind spins with a mixture of tiredness, stress, anxiety and anger as you ask yourself why so and so is so ‘ungrateful, after all I’ve done for him/her’. I’ve said this about my own children, I’ve said this about the children I work with. I love them but sometimes I don’t love the behaviours. I was starkly reminded of this recently when I reflected on what had been a long and eventful day at work. Myself and my colleague were furious. This was amongst the many emotions we were experiencing as we wrestled with sleep deprivation, a barrage of hurtful and abusive language, unrealistic demands, and what on the face of it was a sense of entitlement on the part of two young people we work with. There was also this nagging sense of frustration that comes with doing a task that one knows will be analysed and questioned by others in the organisation and in the wider social care milieu. Did we do all we could? Why did it happen? If only I had. Have we recorded all the information in a non-biased way? Etc etc.

I had arrived into work the previous morning and after handover had approached the group of young people we work with and discussed a plan for the afternoon/evening. It was Christmas and the group needed to get out of the house for a few hours. We are very conscious that Christmas is a painful time for some of our young people. A community meeting was called and we checked in with the young people. How they were? What they got for Christmas? What would they like to do today? Had they any issues they needed to discuss? A plan was then put in place. McDonalds and the cinema, then home. TV, chill out and bed. The young people were in full agreement with the plan. Prior to leaving the house we checked in on each young person privately to see how they were and did they need anything. The young people and staff enjoyed the afternoon and evening and arrived back at the house at 8.30 p.m. At 10.30 p.m. two young people climbed out a window of the unit and headed out to a party. We were unable to stop them leaving and then spent the next few hours settling the other young people, making phone calls, writing reports and waiting for word of
the young people. And yes, worrying about the two young people about what may or may not have happened to them. The event concluded at 7 a.m. in the morning, with myself and my colleague having to make a trip, the two young people in tow, to a Garda station, where a complaint was made over the non-payment of a taxi fare against the two young people. The young people were extremely abusive towards us when they arrived back to the unit. So, not only did they keep us up all night with their antics, abuse us on arrival back to the unit and show not an ounce of remorse for their actions when they got back from the Garda station but they never even said thanks for taking them to the cinema and McDonalds. The ingratitude of it all! The ‘Nerve’!!

**Understanding the Complex Needs of Young People in Care**

Nelson and Lyubomirsky (2016) state that gratitude is difficult to classify, and note that gratitude has been classified “as a transient emotional state, a stable personality trait, a moral virtue, as well as a habit, a coping response, and an attitude” (Nelson & Lyubomirsky, 2016, p. 277). Park, Peterson, and Seligman note that “gratitude involves being aware of and appreciating good things that happen and taking the time to express thanks” (2004, p. 343). In addition gratitude may relate to one’s perceptions of the workplace and contribute to promote coping skills, and broaden one’s ability to consider alternative actions and is linked with positive emotions (Fredrickson, Tugade, Waugh, & Larkin, 2003; Wood, Joseph, & Linley, 2007). Emmons (as cited in Nelson & Lyubomirsky, 2016) further notes that a more common definition positions gratitude as a recognition of a positive outcome from an external source, including a felt sense of wonder or thankfulness for benefits received. Studies also note that gratitude is also linked to superior mental health. (Emmons & McCullough, 2003; Lambert, Fincham, & Stilman, 2012; Wood et al., 2007).

Melanie Klein in her much praised work *Envy and Gratitude and Other Works* (1975) notes that the effects of envy on the development of the capacity for gratitude and happiness. Klein (1975) notes how gratitude is linked to generosity, and the ability to share and trust in good figures. In her studies on object relations theory Klein (1975, p. 187) writes that:

>a child with a strong capacity for love and gratitude has a deep-rooted relation with a good object and can, without being fundamentally damaged withstand temporary states of envy, hatred and grievance, which arise even in children who are loved and well mothered.
She contends that the child’s first object relation, the relation to the mother’s breast and to the mother, is seen as a source of nourishment, and therefore, in a deeper sense, of life itself. The good object that Klein refers to includes the breast but also significant others with whom the infant relates. Throughout his or her earliest development the infant will undergo many unavoidable grievances which in turn reinforce what Klein (1975, p. 180) refers to as:

the innate conflict between love and hate, in fact, basically between life and death instincts, and result in a feeling that a good and bad breast exist. As a consequence early emotional life is characterised by a sense of losing and regaining the good object.

D. W. Winnicott (1969) acknowledged this when he wrote of a ‘good enough’ facilitating environment, and the ability to tolerate ambiguity, to see that both the ‘good’ and the ‘bad’ breast are a part of the same mother figure. Rodman (2003) states that both Winnicott and Klein propose that the child needs to realise that the mother is neither good nor bad nor the product of illusion, but is a separate and independent entity. Rodman (2003) also notes that Freud identified human beings as driven by powerful conscious and unconscious pleasure seeking instincts that need taming if morality and culture are to be possible with our cultural and personal problem being to transcend the human. Alternatively Winnicott (1969) argues that in good personal relationships there is an element of ‘subtle interplay’ that accepts the reality of human imperfection. Love means many things, “but it has to include this experience of subtle interplay, and we could say that you are experiencing love and loving in this situation” (p. 173). He describes the experience of babies who have ‘good-enough’ mothering as achieving integration. This integration, Winnicott maintains, is the basis for healthy emotional development and subsequently developing a sense of ourselves, within loving secure parenting, enables us to cope with life’s difficulties and anxieties. “For Winnicott, it is how to bear the exposure of being imperfectly human. Play, art, and love come powerfully to our aid, but there remains the inherent difficulty in regard to human contact with external reality”. (Nussbaum, 2012, p. 282). The development of an integrated inner world, that is ego-integration, is according to Winnicott a very critical achievement (Nussbaum, 2012).

In essence what Klein and Winnicott are discussing is the ability to self-regulate. To be aware of bad and good and to accept that we are safe within boundaries and parameters set by our closest loved ones, not all of which we agree with. If you can think of a child whose dominant experience is sadness and pain, consider that they do not see this as painful because this is their normal. On the other hand picture the same child witnessing someone else getting
something that illicits pleasure, love for instance, and it is easy to understand their source of envy. Their idea of normal is shattered. Described as ‘unintegrated’ these children have not experienced good enough parenting at all. Barbara Dockar-Drysdale (1993, p.20), describes the unintegrated child as ‘the frozen child’. Children like this are unable to show remorse or any concern and lack warmth because they are unable to experience or internalise healthy emotional approaches from others because neglect and abuse have characterised their earliest engagement with parenting figures (Dockar-Drysdale, 1993).

Klein (1975) describes envy as the “angry feeling that another person possesses and enjoys something else desirable, often accompanied by an impulse to take it away or spoil it”. Contemporary writing also recognises envy as an affliction” (Melanie Klein Trust, 2019, n.p.) Gratitude is seen as an expression of love while envy is the antithesis of this. Perhaps the only way to truly understand the role of gratitude then is to truly understand envy. For envy is not to have something someone else possesses; it is to destroy it. To merely have it is not enough. The jealous person can cope with other’s gifts. The envious person will only be sated by witnessing the misery of others. To be so unloved and unloving and to act callously towards another. To want somebody to not have something more than to actually want it yourself. In practice I have witnessed one young person not take another’s Gameboy console, but break it and leave it lying around; to be found, while watching the other person unravel in front of them. Schwarz (as cited in Emmons & Shelton, 2002, p. 465) writes “the ungrateful, envious, complaining man…cripples himself. He is focussed on what he has not, particularly on that which somebody else has or seems to have, and by that he tends to poison his world”. Oh to be that unloved is a painful place. Is this where the notion of a ‘broken-heart’ comes from?

Gratitude is commonly expressed by ex-residents when they come back to visit. A recent visitor, Oliver, spoke with gratitude, of the warmth, the availability of staff, and yes the ‘rules’ which he lived under while in residential care. Oliver spent two years living with us after a very chaotic infancy and early childhood with his mother. He explained that when he left to return to live with his mother all the structure, boundaries and sense of certainty disappeared and he spent years in some kind of emotional limbo, envious of the care being given to others. For having chosen to live with his mother he soon regretted this decision and yet was unable to express it. Oliver spoke of being uncared for and living alone for some time. Oliver also spoke of running around, being a ‘tearaway’, dabbling in drugs and delinquency while attempting to grow up by himself. Broken-hearted indeed.

Children who I have worked with and who have endured hunger, neglect and abuse will remind me that they were loved, even occasionally. As social care workers we can see
who of our group was shown love despite the circumstances with which they were removed to the care system. One such young person, Jenny, was able to tell us “I know me ma loves me, but she is too sick to mind me”. Jenny was able to have a successful passage through the care system, as well as sustaining her relationship with her mum. Jenny speaks with gratitude for the love and support she received from us the social care workers, while she also speaks with gratitude for the love she received from her mum. While the ones who received platitudes and downright lies are also sadly too obvious. No sense of self-regulation means they are much more likely to lash out at whatever injustice they perceive. In addition their sense of entitlement is overwhelming.

Think of some of the challenging behaviours we social care workers have to confront, as our charges lash out in anger at their perception of the treatment meted out to them. For much of their behaviour can be viewed as their unwillingness to confront their reality; while our task is to support them to make sense of it. Desiring of attention and love, seeking an identity and sense of self and belonging; and; not having experience of it before; looking in all the wrong places. Consider the two young people at the beginning of this piece. It is far easier to understand why they would do as they do when you consider their earliest circumstances. Both of these young people experienced similar kinds of abuse. One, Judy has had some extraordinary experiences in her short life. Living in residential care while witnessing her siblings continue to live at home, confused by hearing her mother say she “couldn’t handle her”, never welcome at home and uncomfortable in care, desperate to impress Judy has found a ready-made audience only too willing to satisfy the many needs in her life; among them love, belonging and intimacy. Only her lack of experience in such matters has brought with it more sadness. Many Facebook friends, no actual friends; boyfriends she is only to wiling to trust, who vanish as quickly as they appear; confused and confusing behaviours; great highs followed by great lows Judy is quick to trust and only too willing to help ‘birds with broken wings’. Why wouldn’t she? She shares many of their difficulties.

Another young person, Sheena, was the outcast in her family. Both parents, addicted to heroin, blamed her for anything and everything. Her father singled her out for special treatment. This included beatings, and abuse, we suspect she encountered, but still cannot speak of. “I kept a hammer under me bed” she has said. When she speaks she tells of huge favouritism towards others in her home. This favouritism continues as her mother speaks to her of being so hurt her ‘other’ kids are in care while failing to recognise the hurt of her daughter in front of her eyes, and yes, envy. That she is conflicted and unable to express this
is understandable. How can Sheena feel gratitude for the love she receives when it is absent from the one she craves it from? Barbara Dockar-Drysdale (1993, p. 20) writes of the ‘frozen’ child being:

of necessity, delinquent; he may easily become a ‘delinquent hero’, who gives permission to the other members of the group to break in, steal or destroy……we know that he cannot risk being left short of satisfaction for an instant, because the moment the level of pleasure drops, pain will flow in.

So Sheena and Judy do what they want, or seem to, they get bored easily, pick fights with some, and collude with others. They sometimes drop their guard, let us in. This can be a result of a self-harming episode, the result of being treated badly by someone else, or by their depression, or when one or other knows they have taken their behaviour to a dangerous level. At these times they will allow themselves to be looked after, whether it is to wipe the blood off their scratches and offer words of care; or sit and talk, really talk; or sit and say nothing; or go for a drive; or just be there. It is at these times I hear the words ‘thank you’. At these times I feel hope.

**Learning for Practice**

Now let me get this out of the way lest anyone reminds me. I know we should not ask the young people in our care to show gratitude to an organisation who are like a front office for the people who took them away from their families. In the absence of anyone else to rage to, about and against, we are the shock absorbers for their emotions. We are perceived as part of the group who decided that for their best interests they should live apart from their mothers, fathers and siblings. No we did not make this decision, someone else did. We may agree with it though. The fact is some young people are far safer living apart from their families. We know this. They know this. But it doesn’t make it easier, because when you ask a young person to accept this then you are also asking them to accept that all the hurt, pain, abuse, secrets and lies that led to their entrance into the care system actually happened. And that isn’t easy. And no amount of distracting behaviour is going to change that. So expecting thanks is not a good idea.

However encouraging little gestures, kindnesses and generosity in measured ways could in turn promote the idea of gratitude. Immanuel Kant (as cited in Watkins, 2001) casts gratitude as an imperfect duty and a moral obligation. Love, claimed Kant, was shared among
equals; and gratitude, creating a scenario where one is indebted to another, does not allow that. However Kant also noted that gratitude opens up the possibility of love. Like love, to express or receive gratitude is to show a piece of yourself, to be vulnerable; to risk and be worthy, and to be uncertain of the outcome. So I thank the young people for their company, their ideas, their sense of joy or their sense of being themselves. I thank them for teaching me how to look after young people and for allowing me to look after them. I encourage positive relationships where openness, honesty and emotions are foremost and trust is built, slowly. And I wait until the young people begin what for them will be an incredibly hard piece of work. To be open to the possibility of love again. I do not wait to be thanked. However I will accept smiles, nods gestures and slightly mocking references to kindnesses.

What of the role of gratitude between the various team members, the adults? Do we need such validation for the work we do? I would suggest that yes we do. Because it’s good to hear someone say thanks for a job well done, to be a recipient of a random act of kindness, a gesture, a quiet word, a warm hug or a nod of acknowledgement. Are we not role models? How can we cultivate an atmosphere of gratitude between the staff team? Emmons and Shelton (2002) pose the question can gratitude be nurtured? They note that a grateful outlook does not have to require a “life full of material comforts but rather an interior attitude of thankfulness regardless of life circumstances” (Emmons & Shelton, 2002, p. 465) and further note that by experiencing gratitude a person might be in a better place to control anger or other destructive emotions.

Mullin (2011), in her work on generosity and caring labour, notes that experiencing generosity from a paid carer may result in some uncomfortableness and lead to a feeling of indebtedness. On the other hand the same act may illicit feelings of gratitude. Mullins notes that the difference between indebtedness and gratitude was the sense that the caregiver acts out of goodwill rather than duty, that the care is provided in a respectful manner, and, that unlike indebtedness gratitude is implicated in the reciprocal and positive relationships. This suggest that the ability to show gratitude is linked to the ability to form and maintain positive loving relationships.

Adopting a cognitive behavioural approach Miller (1995) suggests a four step guide to nurturing gratitude which includes (a) identifying non-grateful thoughts, (b) formulating gratitude-supporting thoughts, (c) substituting the gratitude-supporting thoughts for the non-grateful thought, and, (d) translating the inner feeling into outward action. We must challenge ourselves to accept the parts of our thought process that may not quite be ‘good enough’ and
need minding surely will make us more open to that which is within others that needs minding. In essence it should make us more open to love and loving feelings.

Shelton (as cited in Emmons & Shelton, 2002, p. 465) links gratitude with a self-awareness that he/she is a moral being. McCullough and Tsang (2004) further identify the moral value of gratitude in terms of three functions (a) a moral barometer, (b) a moral motivator and (c) a moral reinforcer. The moral barometer is related to the positive transforming effects of receiving a benefit from another. The motivating factor encourages us to contribute to the welfare of another in the future. The reinforcing element relates to the “benefactor (third parties) being more likely to repeat their benevolent acts at later junctures and in different communal contexts. Through these three moral functions gratitude generates a virtuous circle of events with one good act creating another” (McCullough & Tsang, 2004, p. 311).

Through critical self-reflection on our work we can ask ourselves how we have contributed to the well-being of the community, to the individuals and to ourselves. Emmons and Shelton (2002, p. 466) note that setting aside time each day to:

- recall moments of gratitude associated with even mundane or ordinary events, personal attributes one has, or values people one encounters has the potential to interweave and thread together a sustainable life theme of highly cherished personal meaning just as it nourishes a fundamental life stance whose thrust is decidedly positive.

**Summary**

This article set out to explore gratitude in the context of love. The ability to say thanks and the difference between indebtedness and genuine gratitude have also been discussed. In addition the links between gratitude and envy and the unloved unloving state that the envious inhabit was explored. Sheena and Judy sometimes say ‘thank you’ for small blessings, for tea and toast at some ungodly hour, or a lift from God knows where, or our presence in the face of some crisis. We social care workers grant them something that was absent when they needed it most. Attention, kindnesses, generosity, care; unconditional. Vincent (2016), discussing love in the professional practice of child and youth care workers notes how “care, acceptance, empathy, sympathy, compassion, presence, recognition, respect, honesty, commitment, trust and a sense of community are all key components of loving interactions and loving relationships” (p. 8). These are invariably the very things absent from the lives of so many of our young people when we first meet them.
The act of gratitude and how this is fostered among the staff team and as a consequence throughout the entire community is significant. We are role models and the young are watching how we approach life’s challenges. The act of gratitude is less about the ‘act’ but much more about the feeling attached to it. So many of our young people have trouble connecting feelings and empathic responses and will watch for dishonesty. They will mimic thanks when it has no meaning and they will mimic thanks when it is real and supported by appropriate body language, tone and eye contact. In time it is hoped they will adopt gratitude as practice or habit, because they are part of something that is worth being grateful for.

The risk that some of our young people take; accepting the love and care of us social care workers is immense, let down as they have been and so badly. With this acceptance comes an acknowledgement that this is taking place within a relationship. The young person is seen as playing their part rather than being a passive viewer. So we take the risk and say thank you for letting us mind you, guide you, watch over you while you grow, develop and yes, stumble, stall, argue, harangue and challenge. And you take the risk, and say thank you for being minded, watched over and, having being allowed to be, just like us, imperfectly human.

References


---

¹This paper was originally published in The Therapeutic Care Journal and is reproduced in the Journal of Social Care with their permission