

Gratitude as A Psychological Resource for Happiness among Community Health Workers

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ABSTRACT: High-quality healthcare institutions are characterized by the presence of healthcare workers who are not only professionally competent but also possess strong psychological well-being to provide optimal services. One important internal factor contributing to psychological well-being is gratitude, which is believed to be closely associated with happiness. This study aimed to provide empirical evidence regarding the relationship between gratitude and happiness among healthcare workers at public health centers in Rambang Niru District. The population consisted of all healthcare workers at community health center in Rambang Niru District South Sumatra Indonesia, with samples selected using a random sampling technique. This study employed a quantitative method with a simple regression approach. Data were collected using a gratitude scale and a happiness scale. Data analysis included validity and reliability testing, assumption testing, and hypothesis testing using SPSS version 27.0. The results indicated a significant positive relationship between gratitude and happiness among healthcare workers, suggesting that higher levels of gratitude are associated with higher levels of happiness. These findings highlight the importance of fostering gratitude as a strategy to enhance happiness and psychological well-being among healthcare workers, which is ultimately expected to positively impact the quality of healthcare services at public health centers.

KEYWORDS: gratitude, psychological, happiness

I. INTRODUCTION

In order to achieve organizational goals, human resources must be of high quality. Human resource empowerment can produce skilled, competitive, and optimal contributions for organizations if it is done well and methodically. On the other hand, human resources serves not only as an executor but also as a thinker and planner in fostering organizational vision. (Syarif et al., 2022) The case of Community Health Centers, which serve as the front line in Indonesia's primary healthcare system, the successful achievement of shared goals is highly dependent on human resources (HR). The presence of healthcare professionals who not only possess professional competence but also have high levels of happiness and psychological well-being is crucial for ensuring the quality of healthcare services amidst the complexity of tasks and field difficulties. (Nurhidayah et al., 2023)

The current medical workforce in community health centers is insufficient to meet healthcare needs across Indonesia, especially in 3T (frontline, remote, and underdeveloped) areas. Healthcare services; health research and development; availability of medicines, medical devices, and food; management, information, and regulatory systems; and community participation are the seven subsystems of the national health system. There is a significant difference between the two regions in terms of tangibility (availability of physical facilities), reliability (service reliability), empathy (healthcare worker care), accessibility (ease of access), and affordability (ability to pay). People in remote areas have more limited healthcare facility options, while people in cities tend to consider services in this regard to be better (Sarumpaet et al., 2021)

Most healthcare workers in various regions continue to face various problems in carrying out their duties to help the community. Field facts show that some doctors have not yet understood the important values of their work (Praptiningsih, 2023). As a result, many of them feel uncomfortable at work and don't work wholeheartedly, especially when faced with a heavy workload and limited available facilities. But healthcare workers don't just provide treatment; they also prevent disease, help people recover, and educate people about health. Elysa and Ariyanti (2022), the mismatch between professional ideals and experienced reality makes some healthcare workers less happy in the workplace, which in turn impacts the quality of service provided.

Seligman (2005), happiness is a complex emotional concept that encompasses pleasant experiences related to three dimensions of time: the past, the present, and the future. Ryan and Deci (2001), happiness is not just a fleeting experience of pleasure (hedonia). Conversely, happiness is the process of living a meaningful and authentic life, which is called eudaimonia. Eudaimonia is achieved when a person can fulfill three basic psychological needs: autonomy (a sense of freedom to make decisions),

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competence (a sense of ability to face challenges), and relatedness (a sense of having close and meaningful relationships with others).

Healthcare institutions play a crucial role in promoting public well-being, and their effectiveness is strongly determined by the quality of human resources, particularly healthcare workers. Beyond professional competence, healthcare workers are required to maintain good psychological well-being in order to deliver optimal, compassionate, and sustainable services. In primary healthcare settings such as public health centers, healthcare workers often face high workloads, emotional demands, and limited resources, which place them at risk of psychological strain. Therefore, attention to the psychological well-being of healthcare workers is essential, as it is closely related to service quality, job engagement, and patient satisfaction.

Within the framework of positive psychology, psychological well-being is not merely defined by the absence of distress, but by the presence of positive functioning and optimal experiences. One central construct in positive psychology is happiness. Seligman (2012), happiness encompasses positive emotions, engagement, and meaning, reflecting both affective and cognitive evaluations of life. One important internal factor that contributes to happiness is gratitude. Gratitude is defined as a tendency to recognize and appreciate positive experiences and the benevolence of others (Emmons & McCullough, 2003). Watkins et al. (2003), gratitude involves a cognitive orientation toward noticing and valuing the positive aspects of life, which in turn fosters positive emotions and adaptive coping. Empirical studies have consistently shown that gratitude is positively associated with happiness, life satisfaction, optimism, and psychological well-being (McCullough, 2002). Individuals with higher levels of gratitude are more likely to reinterpret stressful experiences positively, maintain hopeful perspectives, and experience greater emotional balance.

In the occupational context, gratitude has been found to function as a psychological resource that enhances well-being and work-related outcomes. Grateful individuals tend to perceive their work as more meaningful, report higher positive affect, and develop better social relationships in the workplace. For healthcare workers, gratitude may support emotional resilience by helping them appreciate the value of their professional role, the support of colleagues, and the positive impact of their services on patients. This psychological orientation is particularly important in primary healthcare environments, where service demands and emotional labor are relatively high.

Healthcare workers at public health centers in Rambang Niru District operate within diverse community health challenges and organizational limitations. These conditions highlight the importance of identifying internal psychological factors that support happiness and well-being. However, empirical studies examining gratitude and happiness among healthcare workers in primary healthcare settings remain limited, especially in the Indonesian context. Therefore, this study aims to investigate the relationship between gratitude and happiness among healthcare workers at public health centers in Rambang Niru District. This research is expected to provide empirical evidence on the role of gratitude in fostering happiness and to contribute to the development of psychological interventions that support the well-being of healthcare workers and the quality of healthcare services.

II. THEORETICAL FRAMEWORK

Seligman (2005), positive emotions in the past include feelings of satisfaction with achievements, relief after overcoming challenges, pride in success, and a sense of calm and peace due to a harmonious life. Positive emotions in the present include enjoying the current moment and feeling grateful for what one has. Happiness is a complex emotional concept that encompasses pleasant experiences related to three dimensions of time: the past, the present, and the future. Happiness can be described in terms of optimism, hope, and belief in good things to come. toward oneself, believe in life, and dare to face difficulties, Lyubomirsky (2001) stated that happiness, or well-being, is associated with a person's positive emotions and subjective conditions. He explained that happiness stems from how a person views and evaluates their life as a whole, and cannot be objectively measured. Seligman (2002) proposed that happiness can be divided into three main aspects: a. The pleasant life. Happy individuals are characterized by high levels of positive experiences, minimal negative experiences, and the ability to develop and maintain happiness in the future. b. The meaningful life. Meaning in life is formed when individuals view their lives as having purpose, value, and being understandable. c. Engaged Life: The term "engagement" is used to describe a condition where a person dedicates their full physical, cognitive, and emotional potential to the activities they are undertaking. This involvement is not limited to the workplace; it encompasses other activities such as hobbies and family interactions. Active participation in various activities increases a person's happiness.

Happiness is measured using Seligman's (2002) concept, which includes a pleasant life, an engaged life, and a meaningful life. On the other hand, gratitude is measured using Fitzgerald's (1998) concept, which includes feelings of appreciation, goodwill, and a tendency to be positive. McCullough et al. (2002), gratitude is defined as a general tendency to recognize and respond with feelings of thankfulness toward the role of others' kindness in individuals' positive experiences and outcomes. Therefore, gratitude is defined as the desire to acknowledge the contributions of others and express gratitude thru feelings.

Watkins et al. (2003) describe gratitude as an emotion that arises when someone recognizes and appreciates the kindness they have received. Meanwhile, Wood, Froh, and Geraghty (2010) state that gratitude is also a personal trait associated with a tendency

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toward positive thinking, which leads someone to view and interpret their life in a more positive way. In a religious view, gratitude is defined as accepting every blessing given by God and showing that gratitude thru good deeds.

Gratitude can increase happiness by strengthening individuals' experiences of positive events, promoting more adaptive coping strategies in difficult situations, improving the ability to remember and retain positive events, enhancing social relationships, and reducing depression, according to Watkins et al. (2003). Healthcare professionals who can show gratitude will have a positive emotional drive, optimism in life, and happiness both now and in the future. This shows that gratitude is very important for healthcare workers.

The results of research conducted by Sri and Itryah (2025) indicate a positive relationship between gratitude and mental health. This means that the more you are grateful, the better your mental health will be, including your happiness. Therefore, being grateful is one of the most important things in increasing the happiness of healthcare workers. In this study, the concept of happiness is measured by referring to Seligman's (2002) ideas, which consist of three main components: the pleasant life, the engaged life, and the meaningful life.

According to Seligman (2005), happiness is influenced by internal and external factors. Internal factors include social life, religiosity, marriage, money, and health; satisfaction with the past achieved thru gratitude and forgiveness; and optimism about the future. McCullough, Emmons, and Tsang (2002), there are four aspects of gratitude in individuals: 1. Intensity indicates how strongly a person experiences gratitude when facing positive events; 2. Frequency shows how often a person expresses or experiences gratitude in their life; and 3. Span indicates how broad the sources of gratitude are that an individual feels from various aspects of their life, such as family, work, and other social spheres.

III. METHODS

This study employed a quantitative correlational design to examine the relationship between gratitude and happiness among primary healthcare workers. The participants were healthcare workers employed at public primary healthcare centers in Rambang Niru District, Indonesia, consisting of medical and non-medical staff who were actively working and voluntarily agreed to participate. Gratitude was measured using a self-developed Gratitude Scale based on Fitzgerald's (1998) theoretical framework, encompassing appreciative feelings, goodwill toward others, and positive behavioral tendencies, while happiness was assessed using a self-developed Happiness Scale grounded in Seligman's (2002) conceptualization of pleasant life, engaged life, and meaningful life. Both instruments were presented in Likert-type formats ranging from 1 (strongly disagree) to 4 (strongly agree), with higher scores indicating higher levels of the respective constructs.

Prior to the main analysis, item validity was evaluated using corrected item total correlations and reliability was assessed using Cronbach's alpha coefficients, which demonstrated acceptable psychometric properties. Data were collected through self-administered questionnaires distributed directly to participants after they were informed about the study purpose and provided informed consent, with confidentiality and anonymity assured. Data analysis was conducted using SPSS version 27.0, beginning with descriptive statistics and assumption testing (normality and linearity), followed by Pearson's product-moment correlation to examine the relationship between gratitude and happiness and simple linear regression analysis to determine the predictive contribution of gratitude to happiness and the proportion of explained variance (R^2), with statistical significance set at the 0.05 level.

IV. RESULT AND DISCUSSION

A. RESULT

The descriptive analysis indicated that the majority of primary healthcare workers demonstrated high levels of gratitude and happiness. The categorization results showed that most participants were in the high gratitude category, indicating that healthcare workers generally tended to recognize positive aspects of their lives and work, appreciate the support of others, and acknowledge the value of their professional contributions. This finding suggests that gratitude was a prominent psychological characteristic among the participants. In terms of happiness, the results showed that approximately 85.53% of participants were classified in the high happiness category, while 14.47% were in the low category. This indicates that most healthcare workers frequently experienced positive emotions, were engaged in their professional activities, and perceived their work as meaningful. Prior to hypothesis testing, assumption tests were conducted and confirmed that the data met the requirements for parametric analysis. The results of the normality and linearity tests indicated that the data were normally distributed and that the relationship between gratitude and happiness was linear.

Table 1. Hypothesis test results

Model	R	R Square	Adjusted Square	Std. Error of the Estimate
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1	.751 ^a	.565	.562	4.42103
a. Predictors: (Constant), Gratitude				
b. Dependent Variable: Happiness				

Pearson's product-moment correlation analysis revealed a strong and statistically significant positive relationship between gratitude and happiness ($r = 0.751$, $p < 0.05$), indicating that higher levels of gratitude were associated with higher levels of happiness among primary healthcare workers. Furthermore, simple linear regression analysis showed that gratitude significantly predicted happiness. The coefficient of determination ($R^2 = 0.565$) indicated that gratitude accounted for 56,5% of the variance in happiness, while the remaining 43,5% was influenced by other factors not examined in this study. Based on these findings, H_0 hypothesis was rejected and the H_1 hypothesis was accepted, confirming that there is a significant relationship between gratitude and happiness.

B. DISCUSSION

The higher the level of gratitude possessed by healthcare workers, the higher their tendency to experience happiness. Conversely, a low level of gratitude is associated with a low level of happiness. Thus, healthcare workers with high gratitude generally exhibit feelings of satisfaction, positive emotions, and deeper happiness, while healthcare workers with low gratitude tend to experience dissatisfaction and less than optimal levels of happiness.

Healthcare professionals are able to view happiness as a result of their awareness of the meaning and contribution of their own lives. They feel valued, proud, and satisfied with their work, which brings deeper and more lasting happiness. This is evident in their empathetic and sincere service, attentive listening to patient complaints, and their best efforts to help patients. Conversely, healthcare workers see their jobs as meaningful, difficult, and emotionally taxing. Boredom minimally indicates work engagement and intrinsic interest in the work being done. As a result, work activity is considered self-actualization and a means of service, ultimately leading to gratitude and happiness among healthcare workers.

This condition indicates an engaged and meaningful aspect of life, which is when someone is actively involved in their activities and is able to see those activities as valuable and purposeful. A low level of boredom indicates high engagement, while the dimension of meaningfulness is reflected in awareness of the value of one's role and contribution in the job. Seligman (2005), happiness consists of three main dimensions: having a pleasant life (positive emotions), an engaged life (involvement in activities), and a meaningful life.

Health workers at the Rambang Niru District Health Center stated that gratitude develops into prosocial and relational attitudes, in addition to personal emotional experiences. This is evident in helping each other during service delivery, providing emotional support to tired colleagues, sharing clinical knowledge and experience, and encouraging peers to advance in their professional roles. Gratitude also helps strengthen social relationships, according to Emmons and McCullough (2003). One of the main virtues that plays a role in both increasing and protecting individual happiness and well-being is gratitude. As demonstrated by numerous studies on emotions, acts of gratitude play a significant role in improving the quality of human life. When someone is able to consistently maintain a balance between their personal and professional lives, they tend to be happier. Although there are many factors that influence happiness, such as economic conditions, marital relationships, social interaction, work, and health.

The research findings of Itryah (2022) indicate that gratitude and life balance are two important components that contribute to a person's happiness. This aligns with Seligman's (2005) idea of happiness, which views it as a deeper structure encompassing how a person understands, evaluates, and finds meaning in their life roles and experiences, rather than simply visible emotional states or behaviors. According to this view, happiness is not only expressed thru positive feelings, but also thru engagement, purpose, and meaning in the activities one undertakes. Therefore, the happiness of healthcare workers is not only reflected in how they technically complete their tasks, but also in how they view their work as something important and valuable in their lives.

From a religious perspective, God always gives everyone the opportunity to experience goodness, including the opportunity to learn and work, so everyone should be grateful for whatever they have. Itryah (2022), gratitude is influenced by a number of factors. These include love and affection, feeling valued, sufficiency in life, satisfaction, a desire to help others, and awareness of God's grace and blessings manifested thru worship and obedience. Gratitude doesn't arise on its own either.

Additionally, this research expands our understanding that beside gratitude, other factors can influence healthcare workers' satisfaction levels, such as job satisfaction, workload, work-life balance, and religiosity. Itryah et al. (2022) found that increased gratitude in working women, especially female teachers, is closely related to the fulfillment of work-life balance and religiosity aspects. The better the perceived work-life balance, the more religious the individual. Strengthening work-life balance and religiosity, especially in terms of life satisfaction and religious practices, can help increase gratitude.

This study adds concrete evidence that the relationship between gratitude and happiness also applies to healthcare workers, particularly those working in community health centers with complex service issues. Work experience, workload, and individual perceptions of the work environment can influence levels of gratitude. Gratitude, according to Emmons and McCullough (2003), is an affective disposition shaped by experience and the way a person interprets events in their life. Therefore, healthcare

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professionals who are more capable of shifting their focus from complaints and limitations to positive things tend to be more grateful.

V. CONCLUSIONS

The results of this study show that among healthcare professionals at public health centers (Puskesmas) in Rambang Niru District, thankfulness and happiness have a statistically significant and strong positive association. Higher levels of thankfulness are linked to higher levels of happiness, according to the correlation study, which produced a coefficient of $R = 0.751$ with a significance level of $p < 0.001$. Additionally, the coefficient of determination ($R^2 = 0.565$) indicates that thankfulness contributes significantly to the psychological well-being of healthcare professionals, accounting for 56.5% of the variance in happiness.

These findings support the acceptance of the alternative hypothesis and validate the rejection of the null hypothesis, supporting the theoretical view that gratitude is a valuable positive psychological resource in occupational contexts, especially in demanding healthcare settings. The results suggest that fostering appreciation may be essential for improving healthcare professionals' happiness and general well-being.

Practically speaking, this study emphasizes how crucial it is to incorporate gratitude-based interventions into workplace mental health programs for medical professionals. In primary healthcare settings, such programs may support long-term well-being, enhance job satisfaction, and promote pleasant emotional states. It is advised that future studies investigate causal links and look at gratitude-based therapies in various cultural contexts and clinical settings..

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