

Original Article

https://hnpublisher.com

Exploring the Relationship between Disenfranchised Grief, Embitterment and Gratitude among Women Undergone Pregnancy Loss



¹MS Scholar, Department of Psychology, University of Wah, Wah Cantt
²Assistant Professor, Department of Psychology, University of Wah, Wah Cantt
³MS Scholar, Department of Psychology, University of Wah, Wah Cantt
Correspondence: <u>Uw-22-psy-ms-004@student.uow.edu.pk</u>¹

ABSTRACT

Aim of the Study: Purpose of the present study is to examine the association between disenfranchised grief and embitterment for women who have undergone pregnancy loss. The study also plans to explore the buffering impact of gratitude on the relationship of disenfranchised grief and embitterment.

Methodology: Data from 200 married women who experience pregnancy loss was collected in person and online by using purposive sampling technique. For data collection three reliable scales were used, namely Perinatal Grief Scale (PGS) for disenfranchised grief, Post Traumatic Embitterment Disorder Self-Rating Scale (PTED) for embitterment, and The Gratitude Questionnaire – Six Item Form (GQ-6) for measuring gratitude.

Findings: Findings revealed that as disenfranchised grief increases embitterment also increases. Gratitude act as moderators between disenfranchised grief and embitterment. Gratitude helps to cope with embitterment.

Conclusion: The study found a strong positive correlation between disenfranchised grief and embitterment. Gratitude significantly moderates the relationship between disenfranchised grief and embitterment.

Keywords: Disenfranchised Grief, Embitterment, Gratitude, Pregnancy Loss, Recurrent Miscarriages, Stillbirths.

Introduction

Pregnancy loss is a uniquely painful experience. Pregnancy is an exciting time for many women to plan for their future. Regretfully, over 25% of pregnancies results in pregnancy loss (Cunningham et al., 2010). Research shows that about 20 percent of pregnancies terminate spontaneously within 22 weeks (Quenby et al., 2021). A pregnancy involves physical, psychological and emotional changes (Tyrlik et al., 2013). Within the literature, it is clear that Women who experience pregnancy loss tend to experience higher degrees of discomfort, anxiety, despair, and bereavement (DeMontigny et al., 2020). For women, their husbands and doctors losing a child is extremely difficult (Tomkiewicz & Kolarz, 2023).

Article History

Received: August 15, 2023

Revised: November 09, 2023

Accepted: December 10, 2023

Published: December 30, 2023



Grief has been identified as a common feature following pregnancy loss, but the traumatic nature of the miscarriage experience has largely been ignored. "Disenfranchised grief" is a term that alludes to despondency that, for unknown reasons, isn't socially recognized or freely endorsed. People who experience death of someone, only their grief is preferred and consider as a grief, whereas people who experience grief other than death is not acknowledge (Doka, 2002). Such as ending of pregnancy because there is no child to mourn, there is no memories to share with. They are likely to experience some form of disenfranchised loss (Tietsort et al., 2023) in which a person feel unvalued, unnoticed, unknown, and unimportant.

Loss of pregnancy is an occasion with causing extreme mental results. Pregnancy misfortune can be awful for ladies who are helpless against encouraging empowering pain, tension and outrage during loss (Lewis & Frydenberg, 2004). Grief is a person unique reaction to loss. It contains different responses including emotional, behavioral and cognitive responses like crying, regrets, depression, and unease, left out sentiments or even relief (Boelen et al., 2021). People who are alone in grief, for them to react and mourn on their loss can be more difficult. Regardless of the emotional or financial cost, it is important to recognize and try to meet the needs of people whose grief is not recognized by society (Doka, 2008). Study by Ramos et al., (2021) concluded that family and social network do not accept pregnancy loss as a grief, in response relationships of women deteriorated, and she felt increasingly alone. Compared to other forms of grief, the loss of a child involves a particularly difficult and complex grieving experience.

When grief is disenfranchised, people may internalized their emotions, suppressing their natural needs to mourn openly. This suppression of emotions may become unresolved feelings that may manifest as bitterness overtime. Women who experience disenfranchised grief regarding pregnancy loss often develop feelings of embitterment. It is imaginable that for most people, the loss of a child is one of the most traumatic experiences. Meanwhile, pregnancy loss is too often greeted with a shrug in society, it causes embitterment in most of the women. They have different sentiments of despondency, dishonor, worst, revenge and helplessness (Finney & Jackson, 2002).

Embitterment is a complex state of person's emotions especially with regard to dejection, injustice, and anger often resulting from perceived unfair treatment or negative life events. People who experienced these types of losses often explain feelings of uncertainty, doubt, contradiction, resentment, delinquency, fear, probing and burning (Badenhorst & Hughes, 2007).

Embitterment is burning feelings combined with frustration, self-blame, humility and a desire for revenge (Znoj et al., 2016). It can appear as a normal feeling, as part of another mental illness, and more severely it can form a mental health illness in the form of "traumatic embitterment disorder (PTED)" (Kühn et al., 2018). Study conducted by Cesur-Soysal & Ari in 2022 concluded that the three loss storylines differ in recognition of the loss, grief, and social and professional support of self and others. Next, attachment and social support are significantly related to ratings of the isolated grieving process.

When a person is confronted with a stressful situation, the manner in which he or she copes consists of a three step process from perception, through realization, and finally to action. Because of individual differences people respond to grief in different ways. The various ways people use gratitude as coping mechanism. Researches also suggest that people who are grateful are better able to cope with stress and regulate their emotions. Gratitude can bring us many benefits, such as better mental and physical health and better relationships. Gratitude is a feeling alike to appreciation. It is a feeling of happiness and gratitude in response to a fortunate opportunity or tangible gift. Gratitude is both a state and a quality (Jans-Beken et al., 2020).

Gratitude is a positive emotion and attitude that acknowledges and appreciates the kindness, help, or benefits received from others, nature, or a higher power, and it often involves a desire to give back or pay it forward (Emmons & McCullough, 2002). Gratitude helps people to develop more flexible thoughts and actions to create more coping skills which are more helpful for them (Chang et al., 2022).

Gratitude prevents toxic emotions, such as jealousy, anger, regret, embitterment and sadness, which can demolish our happiness (Emmons & McCullough, 2003). Gratitude is the act of recognizing and valuing the good things in one's life, even in the midst of adversity, and it is linked to greater well-being and life satisfaction (Wood et al., 2010).

Gratitude is the tendency to feel and express gratitude consistently over time and in different situations (Emmons & Crumpler, 2000). Gratitude increases well-being and life satisfaction, and reduces symptoms of anxiety and depression (Bohlmeijer et al., 2021). Emmons & Mishar (2011) have reviewed research showing that gratitude is strongly related to subjective well-being, and negatively correlated with depression and embitterment. Embitterment is a broad and complex construct that can be seen in a variety of settings and situations. Bitterness when it develops because it can develop into a chronic condition with both physical and psychological consequences (De Sousa & D'Souza, 2020).

Rationale of the Study

This study is unique because it is based in Pakistan and examines factors linked with the experiences of women who have experience pregnancy loss. Pregnancy may be a major life occasion and unsuccessful pregnancy is an occasion with worst mental outcome. As working on understanding of grief after perinatal loss is advance, that's why there is very little work has been done to address this type of grief. This type of grief is often minimize or ignored by society, which can lead to sense of isolation and emotional distress among women who experience it. Examining disenfranchised grief within the setting of pregnancy misfortune is crucial to shed light on the hidden emotional struggles that women face.

The reason for conducting this study is to recognize the extensiveness of embitterment within ladies who experience pregnancy loss. Examining the role of gratitude in the aftermath of pregnancy loss can help identify factors that promote emotional resilience and healing. This study purpose is to address this gap by systematically mapping the emotional landscape experienced by women who have undergone pregnancy loss. This study also includes unique combination of variables and tries to find out the indigenous knowledge. Current study aims to explore the relationship of disenfranchised grief, Embitterment and Gratitude. The study also points to investigate the moderating impact of Gratitude on the interaction of disenfranchised grief and embitterment. With these goals in mind following hypotheses were developed:

- 1. There is positive relationship between disenfranchised grief and Embitterment.
- 2. Gratitude is negatively correlated with Embitterment.
- 3. Gratitude moderates relationship between disenfranchised grief and Embitterment.

Method

Research Design

Cross sectional research design was utilized in current study. Data was gathered by using self-report measures. The psychometric properties of the instruments were explored, and proposed objectives and hypotheses were tested empirically.

Sample

The sample consisted of 200 married women who experience pregnancy loss during last five years. These pregnancy loss include both recurrent miscarriages and Stillbirths. Data was collected from Taxila, Wah, Rawalpindi and Islamabad by using purposive sampling technique. Demographic details included age ranging from 18-50 and education level of participants ranging from 10 years of education to PhD/MBBS.

Instruments

Perinatal Grief Scale. Perinatal Grief Scale was created by Toedter et al., (1988). The PGS consisted of 33 items of Likert type scale 1 (Strongly Agree) to 5 (Strongly Disagree). It has three components

counting Despair, Difficulty Coping, and Active Grief. Except 11 and 32 all items were reverse-scored. After reversing the items, higher scores indicated more intense grief.

PTED Self-Rating Scale. The scale was invented by Linden et al., (2009) as a self-responding scale to assess the seriousness of the side effect of embitterment, including 19 number of items. Each item was marked on a 5-point Likert scale (0= "Not true at all"—4= "Extremely true").

The Gratitude Questionnaire – **Six Item Form** (**GQ-6**). The six-item form was developed by McCullough et al., (2002). Participants respond 6 items on a 1 to 7 scale (1 = "strongly disagree", 7 = "strongly agree"). Acceptable scores extended from 5 to 35, with higher scores demonstrating an increased level of gratitude. Two items 3 and 6 are reverse-scored to inhibit response bias.

Procedure

The current study was affirmed by the Research Ethics Committee of University of Wah. Sample was approached by using personal contacts. After providing all the necessary information to the respondents, the questionnaires were distributed (personally and online). Informed consent was taken from members earlier to information collection. Only those members who provided informed consent to participate in the study were included. Participants were requested not to skip any item. There was no time limit associated with the completion of questionnaires. Later, on completion, questionnaires were inspected for the missing data. The SPSS (Statistical Program for Social Science) was used for data entry and data analysis.

Results

The objective to conduct the current study was to explore the association among disenfranchised grief and embitterment and to investigate the buffering effect of gratitude in the relationship between disenfranchised grief and embitterment. Descriptive statistics comprising of standard deviation, means and alpha coefficient were computed. Skewness and kurtosis were measured to check normality. Additionally, correlation was also computed to elucidate the association among variables. Regression analysis was conducted to evaluate the role of gratitude on the correlation of disenfranchised grief and embitterment.

Table 1: Descriptive Statistics and Cronbach's Alpha for the scales of disenfranchised grief, embitterment and gratitude (N=200).

Variables	K	α	M	SD	Range		Skewness	Kurtosis
					Actual	Potential		
Disenfranchised grief	33	.93	116.46	22.10	151	165	29	-1.02
Embitterment	19	.89	21.00	15.67	71	95	.67	.00
Gratitude	6	.69	29.14	6.91	41	42	-1.18	92

Table 1 shows alpha coefficients, descriptive statistics and normality statistics for all the studied variables. Normality statistics shows that skewness and kurtosis are in the acceptable range for claim of normality of data. The alpha coefficient of scales lies within 0.69 and 0.93 indicate that they are reliable for further analysis.

Table 2: Correlation Coefficient for the scales of disenfranchised grief, embitterment and gratitude (N=200).

	Variables	1	2	3
1	Disenfranchised Grief			
2	Embitterment	.178*		
3	Gratitude	038	031	

^{*}p<.05

Table 2 indicates relationship between disenfranchised grief, embitterment and gratitude among women experience pregnancy loss. Findings suggests that there is significantly positive relationship among disenfranchised grief and embitterment. It means that when disenfranchised grief increases embitterment increases. It also indicated that gratitude is negatively correlated with embitterment. It suggests that people who practice gratitude helps to decrease embitterment.

Table 3: Moderating impact of gratitude on relationship between disenfranchised grief and embitterment among women experience pregnancy loss (N=200)

			Embitterment		
Predictor			95%	CL	
	В	Se	UL	LL	
Constant	-98.1	26.4	-150.9	-46.7	
Disenfranchised Grief	1.03	.22	.60	1.47	
Gratitude	3.62	.88	1.87	5.37	
Gratitude x Disenfranchised Grief	031	.007	046	016	
R^2	.112				
ΔR^2	.081				
F	8.28				
ΔF^2	17.6				

Table 3 revels that gratitude is playing moderating role on the association among disenfranchised grief and embitterment (B= -.031, p< .001, $\Delta R2 = .112$). However the interaction effect of gratitude and disenfranchised grief on embitterment has significant negative relationship (B= -.031, t= -4.20, p= .000) moderator causes 0.8% variance in this relationship $\Delta R2 = 0.0801$.

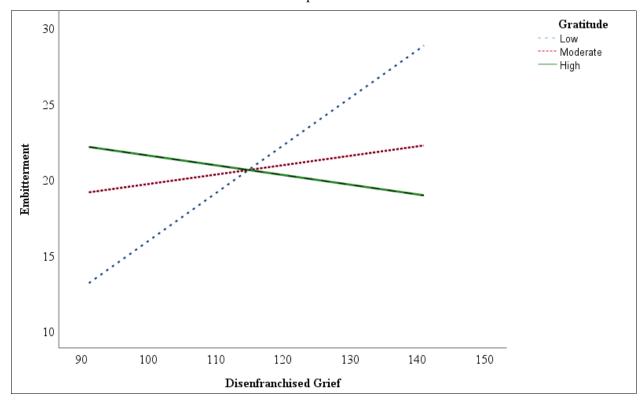


Figure 1 revealed that as disenfranchised grief increases embitterment also increases, whereas gratitude acts a moderator by decreasing embitterment.

Discussion

Intention to conduct this study was to examine relationship of disenfranchised grief, embitterment and gratitude. Moreover, the study also purposes to investigate the buffering impact of gratitude. Present study was quantitative. Sample was only those women who experience pregnancy loss.

According to the correlational results, disenfranchised grief and embitterment have a very strong positive correlation. As a result, when people experience disenfranchised grief, when their needs for emotional support in grief is not met, they develop feelings of resentful or embitterment. Whereas people who practice gratitude or shows thankful behavior on the things they had in their lives, they are less likely to develop embitterment. So, there is negative correlation between embitterment and gratitude.

"There is positive relationship between disenfranchised grief and embitterment" was the first hypothesis of the current study. Results in table 2 indicate that there is significant positive interaction among disenfranchised grief and embitterment. Disenfranchised grief often leads to lack of validation and understanding from others. When people don't receive support from others, they feel isolated and rejected, this feelings helps to develop embitterment. It suggest that when disenfranchised grief increases embitterment increases. The finding of the present study is aligned with previous studies which also suggest Embitterment is frequently related with other mental wellbeing issues counting discouragement, uneasiness and complicated melancholy (Chae et al., 2018). Hence the first hypothesis of current study is accepted.

Second hypothesis was "Gratitude is negatively correlated with embitterment". Results in table 2 also indicates that there is significantly negative correlation between gratitude and embitterment. Results supported the hypothesis that if gratitude increases, embitterment decreases. Previous studies also supported the hypothesis as Emmons (2002) concluded that the concepts of gratitude and embitterment reflect alternate extremes of each other, totally inverse states or ways of being. It has been discovered that gratitude produced low level of negative affect and higher level of optimism and life satisfaction (Zhang et al., 2022) and enhancing overall general wellbeing (Bohlmeijer et al., 2021)

Third hypothesis was "Gratitude moderates' relationship between disenfranchised grief and embitterment". Table 3 reveals that gratitude is playing moderating role on the association among disenfranchised grief and embitterment. Figure 1 also explains the role of gratitude on the relation of disenfranchised grief and embitterment, as disenfranchised grief increases embitterment also increases, whereas gratitude acts a moderator by decreasing embitterment. Previous studies also supported that grief and embitterment decreases if an individual practice gratitude. Arnout & Almoied, (2021) concluded that people who are grateful and practice gratitude allow them to concentrate more on life's blessing than to regret on what they are lacking. Gratitude is strongly related to well-being (wood et al., 2010). Gratitude is associated with a greater likelihood of positive outcomes including enhanced hope and happiness, better interpersonal relationships, and better physical health (Xiang & Yuan, 2021).

Limitations and Suggestions

The participants filled the questionnaire casually which might have affected the results. This study include the sample which is specifically those women who experience pregnancy loss, so it is suggested to include sample who experience other loses in future studies. As the Disenfranchised grief is a vast topic, further studies can counter other sample as well. Limitation of current study will allow other researchers to conduct future research properly.

One of the major limitation is that, this study is only on grief of women who experience pregnancy loss, grief of men after pregnancy loss is not consider in this study, so it is suggested to include men in further studies.

Implications

Present study will have great influence on psychologists, clinicians and therapists as they would address emotional responses like disenfranchised grief and embitterment, while also leveraging gratitude to foster emotional healing. Findings of the research will enhance the effectiveness of support systems for women undergoing pregnancy loss. Friends, family, and support groups can better comprehend the intricate emotional journey and offer more empathic and relevant support.

Conclusion

The present study examined the association among disenfranchised grief, embitterment, and gratitude within the women who experience pregnancy loss. Additionally, it also demonstrated how gratitude helps to cope with embitterment. It is crucial for a holistic understanding of their psychological well-being. This research can contribute to improved care and support for women navigating the challenging journey of pregnancy loss and ultimately help alleviate their emotional burden.

Acknowledgements

None

Conflict of Interest

Authors have no conflict of interest.

Funding Source

The authors received NO funding to conduct this study.

ORCID iDs

Rizwana Samreen ¹ https://orcid.org/0009-0000-8007-7339 Samina Rashid ² https://orcid.org/0000-0002-9758-1846 Sobia Bakhat ³ https://orcid.org/0009-0007-6255-4358

References

- Arnout, B. A., & Almoied, A. A. (2021). A structural model relating gratitude, resilience, psychological well-being and creativity among psychological counsellors. *Counselling and Psychotherapy Research*, 21(2), 470–488. https://doi.org/10.1002/capr.12316
- Badenhorst, W., & Hughes, P. (2007). Psychological aspects of perinatal loss. Best Practice & Research. *Clinical Obstetrics & Gynaecology*, 21(2), 249–259. DOI: 10.1016/j.bpobgyn.2006.11.004
- Boelen, P. A., Taris. T. W., & Van Eersel J. H. W. (2021). Grief reactions, depression, and anxiety following job loss. *European Journal of Psychotraumatology*, 12(1), 1905348. https://doi.org/10.1080/20008198.2021.1905348
- Bohlmeijer, E. T., Kraiss, J. T., Watkins, P., & Schotanus-Dijkstra, M. (2021). Promoting gratitude as a resource for sustainable mental health: results of a 3- armed randomized controlled trial up to 6 months follow-up. *Journal of happiness studies*, 22(3), 1011-1032. https://doi.org/10.3389/fpsyg.2021.799447
- Cesur-Soysal G., Arı E. (2022). How we disenfranchise grief for self and other: An empirical study. *OMEGA Journal of Death and Dying*, (0), .DOI. 10.1177/00302228221075203

- Chae, J.-H., Huh, H. J., & Choi, W. J. (2018). Embitterment and bereavement: The Sewol ferry accident example. *Psychological Trauma: Theory, Research, Practice, and Policy, 10*(1), 46–50. https://doi.org/10.1037/tra0000308
- Chang, O. D., Sánchez-Álvarez, N., Rey, L., Extremera, N., Kwon, M., & Li, M. (2022). Gratitude, emotional intelligence, and life satisfaction among older adults: Evidence for a broaden- and-build model or an amplification model? *Journal of Happiness Studies*, 1–15. https://doi.org/10.1007/s10902-022-00515-4
- Cunningham, F., McDonald, P., Gant, N., Leveno, K., & Gilstrap, L. (2010). Grief of Pregnancy loss. *William obstetrics*, 19th Edition, 661-690. https://accessmedicine.mhmedical.com/content.aspx
- De Sousa, A.; D'souza, R. (2020). Embitterment: The Nature of the Construct and Critical Issues in the Light of COVID-19. *Healthcare*, 8, 304. https://doi.org/10.3390/healthcare8030304
- DeMontigny, F., Verdon, C., Meunier, S., Gervais, C., & Coté, I. (2020). Protective and risk factors for women's mental health after a spontaneous abortion. *Rev Lat Am Enfermagem*, 28, e3350. doi: 10.1590/1518-8345.3382.3350.
- Doka, K. J. (2002). Disenfranchised grief. In K. J. Doka, Living with grief Loss in later life. *Research Press*, 159-168. https://doi.org/10.1037/14498-011
- Doka, K. J. (2008). Disenfranchised grief in historical and cultural perspective. *Handbook of bereavement research and practice*, 1st Ed, 223–240. https://doi.org/10.1037/14498-011
- Emmons, R. A (2002). Gratitude and the science of positive psychology. In C. R. Snyder & S. J. Lopez (Eds.), *Handbook of positive psychology* (pp. 459–471). New York:Oxford University Press.
- Emmons, R. A, & Mishar, A. (2011) Why Gratitude Enhances Well-Being. *Designing Positive Psychology*, 248-262. DOI:10.1093/acprof:oso/9780195373585.003.0016
- Emmons, R. A., & Crumpler, C. A. (2000). Gratitude as a human strength: Appraising the evidence. *Journal of Social and Clinical Psychology*, 19(1), 56–69. https://doi.org/10.1521/jscp.2000.19.1.56
- Emmons, R.A., & McCullough, M. E. (2003). Counting blessings versus burdens: An experimental investigation of gratitude and subjective well-being in daily life. *Journal of Personality and Social Psychology*, 84(2), 377–389. DOI: 10.1037/0022-3514.84.2.377
- Finney M, & Jackson P, B, (2002). Negative life events and psychological distress among young adults. *Soc Psychol Q*, 1(2):186–201. doi: 10.3346/jkms.2023.38.e15.
- Jans-Beken, L., Jacobs, N., Janssens, M., Peeters, S., Reijnders, J., Lechner, L., & Lataster, J. (2020). Gratitude and health: An updated review. *The Journal of Positive Psychology*, 15(6), 743–782. https://doi.org/10.1080/17439760.2019.1651888
- Kühn S, Düzel S, Drewelies J, Gerstorf D, Lindenberger U, Gallinat J (2018). Psychological and neural correlates of embitterment in old age. *Psychol Trauma*; 10(1), 51-57. doi: 10.1037/tra0000287.
- Lewis, R., & Frydenberg, E. (2004). Adolescents least able to cope: How do they respond to their stress? British Journal of Guidance & Counselling, 32(1), 25–37. DOI:10.1080/03069880310001648094
- Linden, M., Baumann, K., Lieberei, B., & Rotter, M. (2009). The Post-Traumatic Embitterment Disorder Self-Rating Scale (PTED Scale). *Clinical Psychology & Psychotherapy*, 16(2), 139-147. DOI: 10.1002/cpp.610

- McCullough, M. E., Emmons, R. A., & Tsang, J. (2002). The Grateful Disposition: A conceptual and Empirical Topography. *Journal of Personality and Social Psychology*, 82(1), 112-127. https://doi.org/10.1037/0022-3514.82.1.112
- Quenby, S., Gallos, I, D., Smith, R, K., Podesek, M., Stephenson, M, D., & Fisher, J. (2021). Miscarriage matters: the epidemiological, physical, psychological, and economic costs of early pregnancy loss. *Lancet*, 397(10285), 1658–1667. doi: 10.1016/S0140-6736(21)00682-6.
- Ramos, S, F., Jesus, B., Vaz, F, M., Correia, J, M., Mendes, J. (2021). Disenfranchised grief and early pregnancy loss. *European Psychiatry*, 64(1), 833–834. doi: 10.1192/j.eurpsy.2021.2202
- Tietsort, C. J., Tracy, S. J., & Adame, E, A. (2023). "You just don't talk about certain topics": *Sustainability*, 15(5), 4628. https://doi.org/10.3390/su15054628
- Toedter, L. J., Lasker, J. N., & Alhadeff, J. M. (1988). The Perinatal Grief Scale: development and initial validation. *American Journal Orthopsychiatry*, 58(3), 435-449. doi: 10.1111/j.1939-0025. 1988.tb01604.x
- Tomkiewicz J, & Darmochwał-Kolarz D. (2023). The Diagnostics and Treatment of Recurrent Pregnancy Loss. *J Clin Med.* 4768. doi: 10.3390/jcm12144768.
- Tyrlik, M., Konecny, S., & Kukla, L. (2013). "Predictors of pregnancy-related emotions". *Journal of clinical medicine research*, 5(2), 112–120. doi: 10.4021/jocmr1246e
- Wood, A. M., Froh, J.J., Adam W.A & Geraghty (2010). "Gratitude and well-being: A review and theoretical integration". *Clinical Psychology Review*, doi: 10.1016/j.cpr.2010.03.005
- Xiang, Y., & Yuan, R. (2021). Why do people with high dispositional gratitude tend to experience high life satisfaction? A broaden-and-build theory perspective. *Journal of Happiness Studies*, 22(6), 2485–2498. https://doi.org/10.1007/s10902-020-00310-z
- Zhang, L., Li, W., Ye, Y., Yang, K., Jia, N., & Kong, F. (2022). Being grateful every day will payoff: A daily diary investigation on relationships between gratitude and well-being in Chinese young adults. *The Journal of Positive Psychology*, 1–13. https://doi.org/10.1080/17439760.2022.2131606
- Znoj, H., Abegglen, S., Buchkremer, U., & Linden, M. (2016). The embittered mind: Dimensions of embitterment and validation of the concept. *Journal of Individual Differences*, *37*(4), 213–222. https://doi.org/10.1027/1614-0001/a000208