TO FORGIVE IS DIVINE, BUT IS IT ALWAYS HELPFUL? EXAMINING THE EFFECTS OF BRIEF FORGIVENESS INSTRUCTIONS IN HELPING FEMALE VICTIMS

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FEMALE VICTIMS

ABSTRACT OF THESIS

A thesis submitted in partial fulfillment of the requirements for the degree of Master of
Science in the College of Arts and Sciences

By
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Monica J. Harris, Ph.D., Professor of Social Psychology

Lexington, Kentucky

2005

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The purpose of the present study was to examine whether women who have been victimized can have a decrease in their negative affect by being exposed to the suggestion of one of two dimensions of forgiveness. The study also examined the moderating effect of several personality variables on participants’ reactions to the intervention. Seventy-nine women were given several personality and affect questionnaires before and after they listened to instructions for either granting forgiveness (interpersonal), letting go of their negative affect (intrapsychic), or relaxation (control). Results indicated that focusing on granting forgiveness was associated with more negative affect than the other two interventions. Main effects and moderating effects were found for certain personality characteristics such as self esteem and self efficacy. These findings provide conflicting support for the use of forgiveness therapy with victimized women by suggesting that some benefits may be gained, but personality characteristics should be considered before beginning this type of therapy.

KEYWORDS: Forgiveness, Victimization, Females, Affect, Personality, Self Esteem

Michelle K. Cardi
April 8, 2005

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Director: Dr. Richard Milich, Professor of Psychology and Monica J. Harris, Ph.D., Professor of Social Psychology
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Many individuals who have experienced interpersonal trauma (e.g. physical abuse, emotional abuse, sexual abuse) report feelings of increased anger, depression, guilt, and low self esteem. These negative feelings, in turn, influence their perceptions of the world, their self worth, and their relationships with others. Forgiveness therapy is one specific type of therapy which has been receiving attention recently because of its purported benefits for helping overcome interpersonal offenses, especially in decreasing negative affect. Forgiveness therapy typically occurs in a group format (e.g. Hebl & Enright, 1993; Luskin & Thoresen, 1998) and has been used to target an array of problems and a variety of interpersonal transgressions. The current study proposes to examine the effectiveness of forgiveness intervention in decreasing negative feelings associated with victimization.

Forgiveness therapy as defined by Enright and Fitzgibbons (2000) is a process that takes the client slowly from their current state of emotional hurt to one of letting go of their anger, to understanding their offender, and finally to making a moral expression of goodwill in the form of forgiveness toward their offender. The therapy is a blend of cognitive, developmental, social, and psychodynamic theories, and it can be used in conjunction with other types of therapies. Forgiveness therapy is based on a process model centered on stage and step theories (some related to grief). Often it takes time, from several months to several years, for clients to move from their current state of emotional hurt to one of forgiveness and reduction in negative emotions. Enright and Fitzgibbons (2000) stated in their book that the forgiveness process usually involves the therapist initially educating the client about the meaning of forgiveness and then allowing the client to decide whether the decision to forgive the offender is appropriate. Overall, forgiveness therapy proponents claim the therapy helps those who have been treated unfairly or cruelly to heal by uncovering their anger, reducing their excessive anger, increasing their sense of optimism and self esteem, and allowing feelings of empathy to develop – thus leading to a healthier mental state for the individual.

**Symptoms of Victimization**

Some commonly identified detrimental effects for victims include heightened levels of distress, which can lead to posttraumatic stress disorder (PTSD), substance abuse, depression, and anger (Kessler, Sonnega, Bromet, Hughes, & Nelson, 1995; Kilpatrick, Veronen, Saunders,
et al., 1987; Breslau, Davis, Andreski, & Petersen, 1991; Burnam, Stein, Golding, Siegel, Sorenson, Forsythe, & Telles, 1988). In addition, anxiety disorders such as panic attacks, phobias, and obsessive-compulsive disorder (Keane & Kaloupek, 1997), and problems of sexual dysfunction, have been commonly identified in victims (Letourneau, Resnick, Kilpatrick, Saunders, & Best, 1996). Empirical evidence suggests an increased risk for the development of bulimia nervosa in female crime victims (Dansky, Brewerton, Kilpatrick, & O’Neil, 1997). Many of these symptoms can be seen in those who experience childhood victimization in the form of emotional or physical abuse by parents, peers, or acquaintances, as well as for adults who have been victimized by a loved one or stranger (Herman, 1992; Kessler et al, 1995).

**Negative Affect and Lack of Forgiveness in Victims**

Among those who have a history of interpersonal victimization, common individual reactions include anger, distress, and lack of forgiveness toward the perpetrator of an interpersonal offense. Georgesen, Harris, Milich and Young (1999) asked 210 college students to generate a narrative about a salient event in their lives when they were the victims of teasing. The participants also filled out a measure of the Five Factor Model of personality, the NEO-PI-R, and reported on the frequency at which they had bullied others in childhood and the frequency in which their peers had teased them. The victim narratives were coded by raters for how much forgiveness (e.g., “I have grown to brush it aside”) and self-blame (e.g., “As a child, I would always try to butt in and get my two cents worth in and this would cause the other children to tease me”) were expressed. The results revealed that repeated peer teasing was associated with higher Neuroticism scores. Further, the more an individual was teased by peers, the less forgiveness of the perpetrator was expressed in the narrative. Thus, those who had been repeatedly teased as children apparently find it difficult to overlook the victimization and forgive their tormentors. This association was especially true for individuals who are already at risk for feelings of distress (i.e., those high in Neuroticism). Moreover, several studies found that individuals who were most forgiving had a tendency to be high in agreeableness and low on neuroticism (Ashton, Paunonen, Helmes, & Jackson, 1998; Mauger, Saxon, Hamill, & Pannell, 1996; McCullough & Hoyt, 1999).

Bollmer, Harris, Milich, and Georgesen (2003) replicated the victim narrative procedure of Georgesen et al. (1999), this time with a sample of 99 children (ages 10-13). Measures of victimization history were also collected from the children and their parents, as were measures of
internalizing problems (e.g., anxiety, depression). The results indicated that internalizing problems were positively associated with increased levels of peer victimization. Furthermore, similar to the results from Georgesen et al. (1999), peer victimization was positively associated with judges’ narrative ratings of anger, distress, blaming the perpetrator, and vividness of the narrative, and negatively associated with forgiveness of the perpetrator. Thus, the results of these two studies suggest that both adolescents and adults who have a history of repeated victimization produce narratives that reveal higher levels of distress and a reduced ability to forgive the perpetrator. In the adult sample, the finding was true even though the victimization experience had typically occurred several years earlier during the participant’s childhood. These results suggest that withholding forgiveness and holding on to anger is a natural consequence of being hurt repeatedly by others.

The Forgiveness Literature

Considering this finding, a question arises regarding the causal relationship between forgiveness and victimization and whether inducing people to forgive will help them deal more adaptively with the hurt. Although extensive findings within the forgiveness literature related to the use of forgiveness in helping people cope with negative effects associated with interpersonal offenses does not exist yet, there is general consensus (McCullough & Worthington, 1995; Freedman & Enright, 1996; Rye, 1997; Enright & Coyle, 2003) that forgiveness is effective in moving those who have been hurt forward in the process of healing. The idea of forgiveness is that it allows a person to achieve closure in order for that person to move on. The evidence from existing studies suggests that the process for forgiveness does demonstrate signs of effectiveness in alleviating anger, fear, anxiety, and guilt (Fitzgibbons, 1986).

The Definition of Forgiveness. A significant problem related to the idea of using forgiveness within therapy is how to define forgiveness. In 1998, Enright and Coyle defined forgiveness as a prosocial response or change in thoughts, emotions and/or behaviors about a hurtful event or transgressor. They asserted, however, that forgiveness is not the same as pardoning, condoning, forgetting, excusing, or denying the hurtful behaviors of a transgressor. Rather, a forgiving response offers individuals a way to experience less negative and more positive affect toward the person that hurt them (McCullough, Pargament, & Thoresen, 2000). One potential problem with this conceptualization of forgiveness is that this definition is not consistent with the connotation of forgiveness that many have learned throughout their daily
experiences. Most people assume the word forgiveness refers to the idea of allowing a transgressor to be “let off the hook” or to be forgiven their debt to the person whom they have hurt. Critics of forgiveness therapy found several holes and limitation in this particular definition of forgiveness. In response to those critics, Enright and Fitzgibbons (2000) refined the forgiveness definition in the following way:

People, upon rational determining that they have been unfairly treated, forgive when they willfully abandon resentment and related responses (to which they have a right), and endeavor to respond to the wrongdoer based on the moral principle of beneficence, which may include compassion, unconditional worth, generosity, and moral love (to which the wrongdoer, by nature of the hurtful act or acts, has no right). (p. 29)

Enright and Fitzgibbons continue to explain that in forgiveness therapy there is not an explicit focus of defining forgiveness for the client. They suggest, however, that the therapist must understand this definition of forgiveness in order to correct the misperceptions of forgiveness the client may have and to assist the client in better understanding the process of forgiveness.

*The Construct of Forgiveness.* Beyond the difficult task of defining forgiveness there is the issue of understanding the structure or composition of forgiveness. An examination of the forgiveness literature reveals that the construct of forgiveness is multidimensional and complex. Enright and Coyle (2000) state that forgiveness exists on a continuum, that is, it is a not an “all-or-none” phenomenon (p.32). In their book, they provide an example of how someone who has not begun to work on their forgiveness toward an offender will often have stable forgiveness scores. As this person begins to consider the decision to forgive, the scores on forgiveness measures might show more variability across retesting, thus demonstrating less stability. They suggest that forgiveness is a process of development that requires time to fully reach conclusion, and that the quality and depth of the wrongdoing contributes to the quality of an individual’s forgiveness. Overall, they state that it contains components of moral virtue and transformation. The idea of moral virtue within forgiveness centers on the idea of holding a sincere wish of beneficence toward a wrongdoer. Transformation within forgiveness includes a forgiver (a) changing his or her response to a wrongdoer, (b) experiencing a possible positive emotional change within the forgiver, (c) as well as improving her relationship with the wrongdoer.

Baumeister, Exline and Sommers (1998) have also attempted the difficult task of defining forgiveness. They define forgiveness as consisting of at least two dimensions – an internal,
intrapsychic state and an interpersonal act. According to Baumeister et al. (1998) these two dimensions are independent of one another, allowing the process of forgiveness to incorporate various combinations of these two dimensions. The intrapsychic dimension refers to the idea of no longer holding a grudge or ruminating about the hurtful event, whereas the interpersonal component refers to a more traditional, spiritual view of forgiveness, which implies a willingness to show compassion and empathy for the perpetrator (Sells & Hargrave, 1998). While the distinction between these two distinct components of forgiveness makes sense conceptually, very little empirical research has focused on the two components.

One study that attempted to examine these two components of forgiveness was done by Konstam, Marx, Schurer, Emerson, Lombardo and Harrington (2002). Within the study, Konstam et al. (2002) tried to identify the components of forgiveness that are most salient for clients and for counselors. Using Enright, Freedman, and Rique’s (1998) process of forgiveness, they asked respondents to rate 18 items related to possible actions that demonstrate or communicate forgiveness. Their results indicated that most respondents viewed forgiveness as it related to the self rather than the offender. This suggests that most individuals view the benefits of forgiveness to be for their personal well-being rather than the well-being of the offender or the relationship. Thus, they concentrate on the intrapsychic component and tend to ignore the interpersonal component of the forgiveness process. One of the current study’s major purposes is therefore to determine whether the two components of forgiveness are differentially efficacious in reducing negative affect.

Forgiveness as an Intervention. Some researchers have directly tested the notion that helping victims forgive may lead to positive outcomes for them. McCullough and Worthington (1995) recruited participants who had been victimized and exposed them to a brief format of forgiveness therapy. Using two different types of brief forgiveness therapy (interpersonal and self-focused interventions) and a waitlist control group, the researchers found that one-hour psychoeducational forgiveness interventions resulted in increased elements of forgiveness of an offender and that the effects appeared to be maintained over time. These results were similar to those found in other studies; however this particular study shortened the time period in which the participants were helped to develop forgiveness toward their offender. The brief time period used for the forgiveness therapy is powerful because many forgiveness researchers argue that
forgiveness is a developmental process, taking months to years to reach the final goal of achieving forgiveness.

Witvliet, Ludwig, & Vander Lann (2001) reported results which indicated that a relatively brief exposure to the concept of forgiving a perpetrator can produce positive emotional changes in the participants. This study examined whether altering an individual’s thoughts about a hurtful event can improve their emotional and physiological responses. Subjects identified an offender, and then they imagined forgiving and not forgiving their offender at various times throughout the experiment. During this procedure, the participants rated their emotional state during the imagery session, and their physiological responses were recorded. The results showed that the forgiving state produced more positive emotions, greater sense of control, and lower physiological responses in the participants. The Witvliet et al. (2001) study was another promising examination of the efficacy of brief forgiveness interventions, but one limitation was that the participants were not individuals who specifically reported having a history of victimization. The current study sought to extend the findings by Witvliet et al. by using a sample of victimized individuals. With this type of sample, the power of a brief forgiveness priming condition can be further tested, and the effectiveness of forgiveness can be determined for individuals with histories of emotional and physical abuse.

The results of Georgesen et al. (1999) and Bollmer et al. (2003), described earlier, indicated that it is individuals who have been repeatedly victimized who have the most difficulty forgiving the perpetrators. Although these individuals may have difficulty moving beyond their hurt, Enright and Fitzgibbons (2000) have suggested that those problems which stem from “deep trauma born of injustice will be particularly affected by forgiveness therapy” (p. 106). With a sample of female incest survivors, Freedman and Enright (1996) examined the effectiveness of forgiveness therapy. The results of this study revealed that forgiveness therapy helped to increase their positive affect, decrease their negative thoughts, but they did not show increases in their self-esteem. An unpublished dissertation by Rye (1997) examined college women who had been hurt in romantic relationships. The sample was distributed into three groups (1) a “secular” forgiveness condition, (2) a Christian-based forgiveness condition, and (3) a no-contact comparison group. The study’s findings suggested significant gains for the participants in the two forgiveness conditions. Specifically, the results revealed less anger, hostility and depression, and more hope, sense of well-being, and feelings of forgiveness. Enright and Fitzgibbons (2000)
state in their review of forgiveness intervention studies that the statistical tests used by Rye (1997) made it impossible to determine the differences between the two types of forgiveness which may have contributed to the improvements.

Nonetheless, it appears that many of the forgiveness intervention studies demonstrate the usefulness of forgiveness therapy with different types of clients and issues. In fact, Enright and Coyle (2003) state that among their various forgiveness intervention studies “there was not one instance in which a group experiencing forgiveness education showed a decline in psychological health. In fact, statistically significant improvements in variables like hope and self-esteem as well as significant decreases in anxiety and depression were more the rule than the exception” (p. 154). These are encouraging outcome results which provide great hope for the use of forgiveness therapy for many clients who have experienced great hurt and emotional harm from their life experiences.

Some researchers opine that a victim’s emotional harm is a direct effect of their refusal to forgive (Baumeister et al., 1998). If the act of forgiveness is a means through which people may be able to minimize or end their emotional suffering, then determining which aspect of forgiveness is responsible for these beneficial results would be of interest. Specifically, clarifying the active component within forgiveness would be important for implementing the use of forgiveness therapy with survivors of interpersonal victimization. McCullough and Worthington (1995) found that the initial act of focusing on the benefit of the self during forgiveness training may be more effective than focusing on the relationship or other benefits associated with forgiveness. Thus, one aim of this study is to examine whether instructing women who have been repeatedly victimized to focus on one of these two conceptualizations of forgiveness can help them cope with the negative feelings associated with these events. By examining both the positive and negative affect of women who have focused on either the interpersonal or the intrapsychic components of forgiveness, it should become more evident if both parts of the forgiveness construct can both decrease the negative affect while at the same time increase positive affect.

**Personality and Forgiveness.** The results of Georgesen et al. (1999) and Bollmer et al. (2003) indicated that it is individuals who have been repeatedly victimized who have the most difficulty forgiving the perpetrators. As mentioned earlier, those individuals who were higher on Neuroticism found forgiveness responses especially difficult. This connection was not surprising
considering Neuroticism is associated with more consistent and elevated levels of negative emotions. Alternatively, Georgesen et al. (1999) and Bollmer et al. (2003) both found that personality profiles which were low in neuroticism and high in agreeableness had a greater propensity to forgive their offender.

If personality factors have a direct result on one’s ability to forgive another person, especially a person who has inflicted harm, it may be an important factor to consider before beginning forgiveness therapy. The suggestion that therapists tailor their psychotherapies to specific characteristics of their patients has been around for many years. Aptitude treatment interaction (ATI) designs attempt to answer the call for matching patients to therapies by examined individual responses to therapies based on a measurable characteristic of the person or of their environment. As a result, ATI research findings guide therapists when they determine the appropriateness of a particular therapy for their client (Piper, Joyce, McCallum, Azim, & Ogrodniczuk, 2002). Some researchers purport that personality factors are crucial to the focus and outcome of therapy (Sanderson & Clarkin, 1993). They continue to suggest that both deficits and strengths should be assessed and allowed to guide the therapist to determine those therapies which will be most efficacious to the client.

*Design and Purpose of This Study*

The aim of the present study was to examine whether women who have been victimized can have a decrease in their negative affect by being exposed to the suggestion of one of two dimensions of forgiveness. My hypotheses for this study were as follows:

1. Both aspects of forgiveness, interpersonal and intrapsychic, would help women who have been victimized cope more effectively with the negative affect associated with their experiences relative to a relaxation control condition;

2. The intrapsychic aspect of forgiveness would be most effective in helping women to experience less distress related to hurtful events; and

3. Victimized women who have higher levels of agreeableness and lower levels of neuroticism would have better responses to the interventions than those women who are lower in agreeableness and higher in neuroticism. Additionally, women who were higher on optimism, but lower on self esteem and self efficacy would respond more positively to the interventions than those women who are lower on optimism and higher on self esteem and self efficacy would respond.
Participants

Seventy-nine women with a history of victimization, ranging in age from 18 to 51 years ($M = 19.92$), were recruited from the University of Kentucky’s Psychology 100 subject pool at a large Midwestern university. Of the sample’s 79 participants, 69 were Caucasian, six were African-American, three were Asian-American, and one was Hispanic. Those women who were among the upper quartile in victimization experience within the subject pool were recruited for participation in the study. Several criteria were used to keep certain individuals from participating in order to protect them from complications due to the nature of the study. The exclusion criteria used were (1) under the age of 18; (2) currently in psychotherapy for the treatment of their victimization experience; and (3) reporting that they were unable to talk or write about their victimization experience. The participants were also informed that they might find participation in this study to be distressing if they are sexual abuse survivors. Participants received class credit for participating in the study.

Design and Procedure

Screening phase. This study included a screening phase and an experimental phase. The screening phase refers to the mass data collection that occurred during the first week of the semester, where all introductory psychology students complete a variety of questionnaires administered by researchers in the psychology department. During the screening phase, participants were first given a victimization questionnaire, which provided a definition of physical and emotional victimization. The definition was stated as follows:

Many people experience victimization during their lives. Such victimization can take several forms. For example, in physical victimization, one person may attack another person physically (e.g. hitting, kicking, or slapping). Victimization can also occur in emotional forms; for example, one person may repeatedly belittle, yell or threaten another person or behave in an overly controlling, manipulative manner.

They were then asked four questions about the extent to which they have experienced physical and emotional victimization in childhood/early adolescence and in their high school and later years (see Appendix A). These questions were accompanied by a 7-point Likert-type response scale with anchors of “never happened” and “happened frequently.” All four response ratings on
the questionnaire were summed for each participant. Those women whose summed scores were either in the upper quartile or whose ratings were high for individual items on the screening measure were recruited for the study.

A shortened version of a dispositional measure of forgiveness (see Appendix B) developed by Mullet, Houdbine, Lauromonier, and Girard (1998) was also administered during the screening to determine the degree to which this trait moderated responses to the imagery scenarios used in the experimental phase of the study. The measure is a 36-item self-report measure that is designed to assess an individual’s propensity to use forgiveness. We selected 12 representative items in order to have a shorter measure for the screening session. As in the original scale, the shortened version of the dispositional forgiveness measure uses a 7-point Likert scale with anchors of “completely disagree” and “completely agree.” In this current study, the coefficient alpha with participants was .64. The reliability coefficient was lower than the other measures we used in this study. This suggests that some of the items in the dispositional forgiveness measure were not good indicators of forgiveness and may have had an effect on our results.

Participant recruitment. Once the screening data had been collected, we used the victimization questionnaire to identify those women from this population who had been more frequently or more severely victimized. Those participants who had an overall high summed score on all four questions (16-28) were recruited as well as those with a rating of “7” or “6” on any one question or two “5”s on any two questions. Forty-one percent of the women who completed the victimization questionnaire were eligible to be recruited for the study. Once identified, these women were contacted by phone and invited to participate in the study. The participants were advised about the nature of the study at this time. Specifically, they were told that the study was examining how victimized women might benefit from using different ways of thinking about their experiences. Additionally, the women were informed that they were not eligible to participate in the study if they meet any of the following criteria: (1) they were under the age of 18; (2) they were currently receiving psychological services for a past or current victimization; or (3) they would not feel comfortable writing in detail about, and answering questions about a past victimization experience. Furthermore, we advised them that if they were victims of childhood sexual abuse they may find the experience of thinking and writing about their experiences unduly distressing. They were instructed to inform us if they meet any of these
criteria without specifying which one (see Appendix C). When the eligible women were identified and they agreed to participate, we scheduled an individual session for the experimental phase of the study.

**Experimental phase.** When participants returned for the experimental phase, we asked them to fill out an informed consent form (see Appendix D). Next, we administered the NEO Five-Factor Inventory (NEO-FFI; Costa & McCrae, 1992). The NEO-FFI is a shortened version of the Revised NEO Personality Inventory, which is a five-factor model of personality measure that yields scores on Neuroticism, Agreeableness, Extraversion, Conscientiousness, and Openness to Experience. The NEO-FFI is a 60-item scale (12-items per personality domain), with respondents rating themselves on 5-point scales. Administration of the NEO-FFI takes approximately 10 to 15 minutes, and the NEO-FFI has coefficient alphas that range from .68-.86 (NEO-FFI; Costa & McCrae, 1992). The NEO-FFI was included because past research has indicated that certain personality dimensions were related to forgiveness (Bollmer, Harris, and Milich (2003); Georgesen et al., 1999). In the current study, coefficient alphas were .88 for Neuroticism, .76 for Agreeableness, .86 for Conscientiousness, .85 for Extroversion, and .66 for Openness.

The Revised Life Orientation Test (LOT-R; Scheier, Carver, & Bridges, 1996), the Generalized Self-Efficacy (GSE; Schwarzer & Jerusalem, 1995) measure and the Rosenberg Self Esteem (RSE; Rosenberg, 1965) measure were administered following the NEO-FFI. These three measures were administered to the participants in a counterbalanced order. The LOT-R is a 10-item self-report questionnaire that scores individuals on their tendency to respond to life with a positive approach. Respondents are asked to rate their responses to each item on a 5-point scale. The Generalized Self Efficacy (GSE) measure is also a 10-item self-report questionnaire that measures a person’s perception of their resourcefulness and fortitude. On this measure, participants rate themselves on a 4-point scale. The Rosenberg Self Esteem (RSE) is a self-report questionnaire that measures self esteem. The questionnaire consists of 10 items, and it yields a score of the participant’s sense of self respect. In this study, the Cronbach alphas for the LOTR, GSE, and the RSE were .80, .90, and .93, respectively.

Following the personality inventories, the Positive and Negative Affect Scale (PANAS; Watson, Clark, & Tellegen, 1988) was administered (see Appendix E) in order to collect a pre-manipulation assessment of participants’ emotions. The PANAS is a questionnaire that asks
participants to rate their current mood on twenty adjectives for different emotions and results in positive and negative affect scores. The PANAS uses a 5-point rating scale to allow participants to assess the extent to which they feel at the present moment in terms of the twenty listed emotions, such as distress, hostile, afraid, proud, and strong. The twenty adjective ratings are typically collapsed into two composite variables, positive and negative emotions, for analyses. In the current study, coefficient alphas for the negative and positive emotion composite variables were .86 and .87, respectively.

The participants were then randomly assigned to one of three experimental conditions, during which they listened to a 3.5 minute audiotape that suggested they try a particular response style to cope with victimization experiences. To begin the manipulation, the participant was seated in a comfortable chair. She was asked to recall a specific event in her lifetime where she was either hurt emotionally or physically because of another person’s hostile, aggressive, or hurtful actions toward her. The experimenter suggested that the event be one in which the personal violation was deleterious and long lasting. The participant then placed the headphones on her head and the audiotape began.

The three imagery scenarios consisted of an interpersonal response, an intrapsychic response, and relaxation exercises. The interpersonal instructions (see Appendix F), which will be referred to as the forgiveness manipulation, suggested that the participant recognize that an offender who hurts them has no legitimate claim to be forgiven; however, the participant can choose to focus on the humanity of the offender and possibly grant forgiveness anyway. It was stressed that the participant’s feelings of anger and hurt are justified; however, by operating on a higher moral level, the participant can find closure and meaning in the situation (Sells & Hargrave, 1998).

The intrapsychic instructions (see Appendix G), which will be referred to as the letting go manipulation, suggested that the participant respond to an interpersonal violation by disengaging from the negative affect in order to benefit her own well being and self-interest; in other words, by continuing to ruminate over the offense, they are allowing the perpetrator to hurt them further. The participants were told that they do not need to consider their feelings for the transgressor but rather should focus on “not renting the violator room in their head.”
In the relaxation/control condition (see Appendix H), participants were led through a slow muscle stretching relaxation approach (Poppen, 1988), wherein they were instructed to breathe slowly while alternately stretching and relaxing muscles.

**Narrative task.** Immediately following the audiotape instructions, participants were asked to write a narrative about the event in which they felt victimized (see Appendix I). This narrative methodology has been used successfully by Bollmer et al. (2003) and Georgesen et al. (1999). The instructions provided to participants were similar to those used in the Bollmer et al. (2003) study:

*It would help us to understand better the results of the study if we had more detail about the victimization experience you were remembering while listening to the tape. On this sheet of paper, please write a brief story of this event. Your story should have a beginning, middle, and an end. Please be thorough and as detailed as you possibly can and tell the full story about the event you were imagining during the audiotape exercise.*

Participants were given approximately 5 to 7 minutes to complete their narrative.

**Additional measures.** After the narrative, the Positive and Negative Affect Scale (PANAS) was administered a second time in order to collect participants’ rating for post-manipulation affect. In this current study, the coefficient alpha was for the negative and positive emotion composite variables were .89 and .91, respectively.

After the PANAS, the participants were given a questionnaire that asked them to rate on a 7-point Likert scale the amount of anger, distress, forgiveness, empathy, and rumination related to the event that they are currently experiencing (see Appendix J). Additional questions were asked about their sense of control in their lives, how long ago the incident occurred, their relationship with the person who hurt them, and whether they have previously forgiven the person. Factor analysis revealed that several of these items loaded onto the same factor, thus allowing us to collapse them into composite variables. Specifically, the amount of pain/distress and anger the women expressed in their narratives were highly related, and they were collapsed into a variable called negative emotions about event. The amount of empathy and current forgiveness toward the offender also loaded onto the same factor, and they were also collapsed into one variable referred to as positive emotions toward the offender.
The participants then completed a detailed victimization checklist (see Appendix K) that surveyed the various types of victimization experiences they have experienced such as verbal bullying, physical assault, sexual assault, or rape. There was also space available for them to report any other type of victimization they may have experienced that was not covered in the list. The questionnaire asked participants to report their relationships with the offender (e.g., romantic partner, family member, acquaintance/peer, or stranger), and the time in their life that the victimization occurred (e.g., childhood, high school or later). This information was asked so that we could describe the nature of victimization experienced in our sample as well as to determine if certain types of victimization are more amenable to one or more of our conditions. The results from this measure reveal that within their childhood and early adolescence, 71% of the women reported experiencing high levels of verbal bullying and abuse by a family member, and 65% were verbally bullied by an acquaintance/friend. The next most frequent type of victimization within this time period was physical victimization by a family member (35%). During their high school or later years, 70% of our sample reported frequent experiences of verbal bullying and abuse by a romantic partner, 71% by a family member, and 68% by a friend. Approximately 42% of these women also reported higher levels of verbal abuse by a stranger, and 29% and 15% experienced physical and sexual assault by a romantic partner, respectively. While 15% of the sample reported being raped by a romantic partner during this time period, 0% reported being rape by a family member or a stranger.

Finally, the Trauma Symptoms Checklist 40 (TSC-40; Briere & Runtz, 1989) was administered (see Appendix L). The TSC-40 is a 40-item self-report measure that assesses the type and severity of symptoms related to childhood and adult traumatic experiences. Participants are asked to rate the frequency with which they had experienced each of the symptoms within the previous two months. The response scale is a 4-point Likert scale with anchors of “never” and “often”. The measure provides six subscales and a total score, and it has reasonable predictive validity to a wide range of traumatic events and experiences (Briere & Runtz, 1989; Elliott & Briere, 1992). In order to have information on the amount of distress and trauma symptoms the participants had experienced prior to the experimental session, this measure was included. The representativeness of our sample was demonstrated by the results. Of those women who answered either “sometimes” or “often” to a particular symptom, 67% said they felt tired in the morning, and approximately 63% suffered from headaches, insomnia, and distractibility.
Alternatively, only 3-4% reported that they sometimes or often experienced disassociation, passing out, and a desire to physically hurt others. Overall, the greatest amount of symptoms reported by the sample were related to depression ($M = 9.9$), sleep disturbances ($M = 9.5$), and anxiety ($M = 8.2$). In this study, the overall average score for the TSC-40 was $M = 39$ and the Cronbach alpha was .93.

**Victim narratives.** Victim narratives were used to assess each participant’s reactions to and perceptions of their visualized past victimization experience after exposure to one of the three experimental conditions. Five research assistants were trained to code the victimization narratives for several identified themes. The themes that were rated were distress, anger, betrayal, fear during the event, blaming the perpetrator, blaming oneself, sense of guilt or shame, forgiveness or empathy toward the offender, and the impact of the event on the participant’s life. The narrative theme ratings were used to compute interrater reliabilities. Ratings were made on 5-point scales. Interrater reliabilities for the ratings ranged from .56 to .96, and the mean effective reliability was .79.

**Ethical considerations.** After completing the experimental phase of the study, participants were fully debriefed about the nature of the study. All participants were given an educational debriefing sheet that provided counseling information (see Appendix N). Prior to starting the experiment, experimenters were also trained by a trauma expert to monitor the participants for signs of distress. Contingency plans were in place for dealing with a distressed participant. If at any time a participant displayed visible signs of distress, the experimenters would terminate the experimental session immediately and a licensed clinical psychology faculty member would have been contacted to talk with the participant. Additionally, the participant would have been referred to available counseling services, one of which had agreed to see participants in this study on a same-day basis. This did not prove to be necessary during any of the participants’ sessions.
Chapter Three

Results

Main Effects of Forgiveness Intervention

Analyses of variance (ANOVA) were used to determine if significant differences existed among the three groups within the study. The three conditions, forgiveness, letting go, and relaxation instructions, were compared in terms of several outcome measures, including the post-intervention PANAS scores, the narrative ratings, and the post-narrative questionnaire items. When significant main effects were obtained, Tukey post-hoc tests were also conducted.

The results revealed both positive and negative effects due to the forgiveness manipulation (see Table 1). Contrary to predictions, a significant main effect for negative affect scores on the PANAS demonstrated that participants had greater negative affect scores when they received the forgiveness intervention than if they were assigned to the relaxation control group, with the letting go group not differing from either of the other two conditions, $F(2, 76) = 10.36, p = .00$. This suggests that those women who received the forgiveness instructions were more adversely affected by the idea of thinking about forgiving their offender.

On the post-narrative questionnaire, women who received the forgiveness condition reported their recalled victimization experience as having a greater impact on their lives than those women in the relaxation condition, $F(2, 76) = 4.09, p = .02$. Again, the letting go condition did not have a differential reaction. This seems to indicate that those women who were asked to consider forgiving their offender gave more consideration to the event and the repercussions of that event than those women who were asked to use relaxation in order to cope with their remembered event.

On the other hand, examining the post-narrative questionnaire revealed that the forgiveness condition was associated with higher amounts of positive emotions toward their offender than those women who were in the relaxation control group, $F(2, 76) = 5.53, p = .01$. The letting go condition did not differ significantly from the other two conditions. Two items on the post-narrative questionnaire were used to create this variable of positive emotions toward one’s offender. These two items asked participants to rate their amount of current forgiveness and their amount of empathy toward their offenders. Each of these items was also analyzed to determine main effects for the three conditions.
Results demonstrate that the forgiveness condition was associated with more current forgiveness toward the offender than the relaxation condition, with the letting go condition not differing from either of the other two conditions, $F(2, 76) = 5.02, p < .01$. This indicates that the suggestion of granting forgiveness allowed women to consider and possibly to commit to extending some amount of forgiveness toward their offender.

Examining participants’ rating of feelings of empathy toward their offender revealed that the forgiveness condition was associated with more empathy toward one’s offender than the relaxation condition, $F(2, 76) = 3.52, p = .03$.

Finally, analyses revealed that the letting go condition was associated with less anger than those women who received the relaxation intervention, with the forgiveness condition group not differing from either of the other two conditions, $F(2, 76) = 2.94, p = .05$. This indicates that those women who received the letting go manipulation were able to let go of their negative emotions, as instructed in the letting go condition.

**Moderating Effects of Personality**

A series of hierarchical regressions with planned contrasts were conducted to determine the moderating role of the personality measures on the experimental conditions in predicting both positive and negative affect from the PANAS. These regressions were hierarchical in nature, with the corresponding pre-intervention affect measure entered in the first step, dummy-coded experimental conditions entered in the second step, the target personality factor entered in the third step, and the interaction between condition and personality entered in the fourth step. The approach used followed the procedures suggested by Aiken and West (1991). Orthogonal contrast coding was used to compare the two experimental conditions (forgiveness vs. letting go) with the relaxation control condition, as well as to compare the two experimental conditions to each other. The contrast codes used for these analyses were those suggested by West, Aiken, and Krull (1996). All interactions were interpreted using predicted values 1 SD below and above the means of the personality variables and were probed using simple slope analyses following procedures recommended by Aiken and West (1991).

Main effects were found for several for five of the seven personality characteristics in terms of participants’ negative affect. As Table 2 illustrates, Neuroticism predicted participants’ negative affect such that higher Neuroticism scores predicted increases in negative affect. A main effect for self efficacy was also obtained, with higher self efficacy scores associated with
more negative affect. Some main effects for personality predicted decreased levels of negative affect. These included Agreeableness, Conscientiousness, and Optimism. As Agreeableness, Conscientiousness, and Optimism scores for the participants increased their amount of negative affect decreased. There were no significant main effects for self esteem or dispositional forgiveness.

Two significant interactions were present for self esteem and the experimental conditions (see Table 3). A significant interaction for the self esteem and the contrast code comparing the experimental conditions to each other was found for predicting positive affect, $\Delta R^2 = .07, F(2, 72) = 5.97, p < .01$. As demonstrated by Figure 1, participants who had high levels of self esteem and received the letting go instructions reported experiencing more positive affect post-intervention than women with high self esteem who received the forgiveness instructions ($B = 1.12, t = 3.45, p < .01, sr^2 = .14$). Women low in self esteem did not show any differential response to any of the interventions ($B = .13, t = .37, p = .712, sr^2 = .02$). In other words, the letting go manipulation was effective for the high self esteem group, but not for the low self esteem group. There were no differences for the contrast code comparing the two experimental conditions with the control condition at high and low levels of self esteem (both $t$-values $< 1.2$, ns).

In contrast, the interaction term for self esteem and the contrast code that compared the two experimental conditions with the control condition was significant for negative affect, $\Delta R^2 = .05, F(2, 72) = 3.52, p < .05$. The significant interaction was probed, and the results show that there were significant differences in negative affect for women who received either of the two experimental conditions than those who received the control instructions ($B = .57, t = 4.93, p < .01, sr^2 = .25$ see Figure 2). At low levels of self esteem, there were no significant differences in negative affect for the women in any of the three conditions ($B = .09, t = .56, p = .575, sr^2 = .01$). There were no differences for the contrast code comparing the two experimental conditions to each other at high and low levels of self esteem (both $t$-values $< 1.0$, ns).}

A significant interaction between Agreeableness and the contrast code comparing the experimental interventions with the control condition was obtained for the negative affect variable, $\Delta R^2 = .05, F(2, 72) = 3.91, p < .05$. As represented in Figure 3, the interaction reveals that women with low levels of Agreeableness and who received either the forgiveness or the letting go instructions experienced more negative affect than the women with low Agreeableness.
who received the relaxation condition (B = 7.88, t = 5.45, p < .01, sr² = .30). The experimental conditions, however, showed no differential effects for women high in Agreeableness (B = 2.09, t = 1.33, p = .188, sr² = .03). No significant effect was found for the contrast code comparing the two experimental conditions at either high or low levels of agreeableness (both t-values < 1.1, ns).

Finally, an interaction between dispositional forgiveness and the experimental conditions was significant for the negative affect variable. The interaction indicated that women with low dispositional forgiveness who received the relaxation condition experienced more negative affect than those women in the forgiveness and the letting go conditions (B = 4.86, t = 2.14, p < .05, sr² = .14). As Figure 4 demonstrates, women high in forgiveness had lower negative affect overall (B = -.69, t = -.33 p = .745, sr² = .07).
Table 3.1

Means and Fs by Condition

<table>
<thead>
<tr>
<th>Dependent Measure</th>
<th>Control</th>
<th>Forgiveness</th>
<th>Letting Go</th>
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<th>p</th>
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<td>17.15,</td>
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<td>Positive Affect</td>
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<td>27.74</td>
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<td><strong>Measure: Narrative Items</strong></td>
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<td>Negative Affect Toward Self</td>
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<td>3.58</td>
<td>3.90</td>
<td>1.35</td>
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<td>Sense of Betrayal</td>
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<td>3.01</td>
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<tr>
<td>Impact on Life</td>
<td>3.27</td>
<td>3.30</td>
<td>3.54</td>
<td>0.54</td>
<td>.596</td>
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<td><strong>Measure: Post-Narrative Questionnaire Items</strong></td>
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<td>Empathy and Forgiveness</td>
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***p<.001 **p<.01 *p<.05

*Note:* Entries that do not share a common subscript are significantly different from one another.
Table 3.2
Summary of Hierarchical Regression Analyses for Main Effects of Personality Variables Predicting Affect

<table>
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<tr>
<th>Personality Variable</th>
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<th>p</th>
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</thead>
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<tr>
<td><strong>Dependent Variable: Negative Affect</strong></td>
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<td>Neuroticism</td>
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<tr>
<td>Conscientiousness</td>
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<td>-2.18*</td>
</tr>
<tr>
<td>Optimism</td>
<td>-.19</td>
<td>-2.11*</td>
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<td>Self Efficacy</td>
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<td>3.94***</td>
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<td>Self Esteem</td>
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<tr>
<td>Dispositional Forgiveness</td>
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<td>-1.22</td>
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<td><strong>Dependent Variable: Positive Affect</strong></td>
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<tr>
<td>Neuroticism</td>
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<td>-1.22</td>
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<td>Optimism</td>
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<td>0.46</td>
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<td>Self Efficacy</td>
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<tr>
<td>Self Esteem</td>
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<td>Dispositional Forgiveness</td>
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***p<.001  **p<.01  *p<.05
Table 3.3
Hierarchical Regression Analyses for Interactions between Experimental Conditions and Personality Variables Predicting Change in Affect

<table>
<thead>
<tr>
<th>Interaction</th>
<th>ΔR²</th>
<th>F for Δ in R²</th>
<th>B</th>
<th>t</th>
<th>p</th>
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<td><strong>Dependent Variable: Positive Affect</strong></td>
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<td>Self Efficacy x Contrast code 1</td>
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<td>.901</td>
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<td>.426</td>
<td>.69</td>
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<td>.389</td>
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<td>Agreeableness x Contrast code 2</td>
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Table 3 (continued)

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*Note:* Contrast code 1 compares the forgiveness and letting go conditions vs. the relaxation/control condition. Contrast code 2 compares only the forgiveness and the letting go conditions against each other.
Figure 3.1

The Effects of Condition on Positive Affect for Low and High Self Esteem
Figure 3.2

The Effect of Condition on Negative Affect for Low and High Self Esteem
Figure 3.3

The Effects of Condition on Negative Affect for Low and High Agreeableness

![Graph showing the effects of condition on negative affect for low and high agreeableness. The x-axis represents experimental conditions (Relaxation, Forgiveness, Letting Go) and the y-axis represents negative affect. The graph compares low agreeableness (represented by diamonds) and high agreeableness (represented by squares).]
Figure 3.4

The Effects of Condition on Negative Affect for Low and High Dispositional Forgiveness
Findings from this study provided conflicting support for the theory that forgiveness can help to alleviate negative affect for those who have been victimized. Although this study provides some confirmation that forgiveness and letting go can reduce negative emotional reactions to hurtful events, several of the findings suggest that attempting to grant forgiveness to one’s offender may create more emotional harm, at least initially, for many women who have been victimized. Unlike many other forgiveness studies (Enright and Coyle, 2003; Witvliet et. al, 2001; McCullough, Pargament, & Thoresen, 2000; Rye, 1997; Freedman and Enright, 1996; Fitzgibbons, 1986), this study’s findings indicated that the act of thinking about forgiving one’s offender was associated with a tendency to experience more negative affect than if one thought about releasing her negative emotions or practiced slow muscle relaxation exercises. These results, however, appear to support a study by McCullough and Worthington (1995), which revealed that although one can gain benefits from thinking about forgiveness, the act of considering the benefits to the self rather than focusing on the offender may be more beneficial in the beginning phase of the forgiveness process.

Another finding from this study suggested that women who thought about forgiving their offender reported having more positive emotions toward their offender after hearing the suggestion of forgiveness, and they reported feeling more current forgiveness than women in the other two interventions. Further analyses also revealed that these same women reported that the hurtful event caused by the offender had a greater impact on their lives. This may suggest that the act of forgiving an offender may create a need in the injured person to qualify the amount of pain she has suffered because of the event. Although she may be able to extend forgiveness toward the offender, she may find that she needs to validate the significant hurt she suffered because of the other person’s actions.

One possible explanation is that forgiveness may threaten a person’s reason for feeling resentment and anger toward the person who caused her harm. A sincere attempt on her part toward forgiving her offender may lead her to feel a necessity to validate her negative emotions in another way, such as emphasizing the consequences she has suffered as a result of the offender’s actions. This does not necessarily imply that the participants exaggerated the hurt that they felt, but rather that they may have struggled with incongruence between their emotional hurt
and their possible desire to either comply with the forgiveness instructions or their own wish to forgive their offender. Consequently, these women may have experienced a more heightened sense of their negative emotions and the event’s impact on them. This further supports the idea that these women attempted to incorporate the suggestion of forgiveness for their offender as they listened to the forgiveness instructions. By striving to adopt a forgiving attitude, these women appear to have made an effort to extend the gift of forgiveness (at least mentally) and adopt more positive feelings toward their offender. Overall, the suggestion of forgiving an offender appears to have created conflicting responses by encouraging these women to extend forgiveness and empathy toward their offenders before they were able to process their own negative feelings about the incident.

Further investigation of the study’s findings shows that women who reported the highest amount of negative affect were those who received the relaxation intervention with women who received the letting go condition reporting the least amount of anger. Women who received the forgiveness intervention, on the other hand, did not show any significant differences from the women who received the letting go and the relaxation interventions. To understand these findings will likely require an additional study, but one can speculate about possible explanations. The forgiveness and the letting go interventions provided participants with alternative ways to think about their hurtful experiences. The letting go instructions appear to have helped women to reframe their thoughts about being victimized in a way that lessened either the amount of their negative affect, while forgiveness did not seem to provide the same level of benefits for the women who received the forgiveness intervention. Letting go may have provided women a way to reframe their thoughts and feelings in a way that was less threatening to their sense of self worth and indignation toward their offender. The more moderate approach of the letting go intervention may have provided an intermediate step that allowed women to make more significant changes in the amount of anger they felt because it did not ask them to set aside their negative feelings as a means to provide a gift to the person who hurt them.

Personality characteristics also appear to affect the women’s overall negative affect. The results from this study supported the hypothesis that women who were either low in Neuroticism or high in Agreeableness would have lower negative affect than those women who were either high in Neuroticism or low in Agreeableness. This is consistent with the findings from Georgesen et al. (1999) and Bollmer et al. (2003). Differential effects were found for other
personality variables, as well. For example, women who were high in optimism and conscientiousness reported less negative affect than those women who were low on these personality dimensions. Interestingly, women who were high in self-efficacy reported more negative affect post-intervention, controlling for pre-intervention affect, than those women who were low in self-efficacy. Perhaps, those women who are high in self-efficacy believe that they are capable of managing or solving their problems, and as a result, they may not like receiving others’ suggestions about how to best manage their issues. Self-esteem and dispositional forgiveness did not appear, however, to influence women’s predisposition for more negative feelings.

Several of the personality characteristics did help to predict how well women who had been victimized would respond to the idea of forgiving a wrongdoer or letting go of their negative affect. Of the personality variables measured in this sample, self-esteem played a dual moderating effect for positive and negative emotions. Women with high self-esteem experienced more negative affect after listening to the suggestion of granting forgiveness to their offender than those women with high self-esteem who either thought about letting go of their negative feelings or practiced the slow muscle-relaxation exercises. Interestingly, findings suggested that women with high self-esteem reported more positive emotions with the letting go condition than high self-esteem women in the forgiveness condition. These findings suggest that women with high self-esteem hold strong feelings about respecting and valuing themselves, which leads them to endorse behaviors and thoughts that assist them in protecting their dignity (Murphy, 2003; Neu, 2002). Women with high self-esteem may view the appropriate response to be holding an offender accountable for the hurt, which has been inflicted upon them, and many researchers (Murphy, 2003; Neu, 2002) have signaled that they suspect that some feelings of anger are appropriate and may indicate a developed sense of self-respect or self-esteem. Letting go likely helps women with high self-esteem maintain their feelings of self worth, while also giving them positive ways to deal with their negative emotions.

I also found that women who were low in Agreeableness and received either the forgiveness or the letting go instructions reported more negative affect than low Agreeable women in the relaxation condition. One possible interpretation of this finding is that women who were less agreeable found the suggestions of either component of forgiveness to be offensive.
This is probably a direct result of the typical interpersonal patterns of low agreeable individuals who often respond with more conflict-laden and defensive reactions with others.

Finally, dispositional forgiveness appears to have played a role in how women in the sample would respond to the idea of forgiveness and letting go of negative affect. Women with low dispositional forgiveness seemed to respond more negatively to the relaxation condition than the women with low dispositional forgiveness who received either the forgiveness or the letting go condition. This may suggest that the lack of a cognitive restructuring component in the relaxation condition resulted in these women rehearsing their hurt. Women with high dispositional forgiveness reported less negative affect overall. This suggests that women who had a greater predisposition to forgive were less emotionally reactive to the suggestion of forgiving, either interpersonally or intrapsychically. Due to their general tendency to forgive, this response was more familiar and likely more easily made.

Overall, these findings suggest that focusing on forgiveness as a means to alleviate painful negative emotions associated with a history or experience of victimization does not necessarily lead to this desired result – at least initially. Several explanations may help to account for this finding. Researchers such as Neu (2002) and Murphy (2003) have suggested that anger may not be the symptom about which we should be most concerned for victimized individuals. Murphy (2003) argues that the anger, resentment, and hatred are legitimate emotions that one will likely experience after being injured by another. To assume that these emotions are always detrimental to the injured person is a mistake because these emotions may help to protect important values (e.g. self-respect, self-defense, moral order) that are important to an individual. In fact, he references a sermon by Bishop Butler in which Butler suggests that anger and resentment are not a detriment to an individual unless these emotions become overwhelming and dysfunctional. Indeed, anger has been shown to have a negative effect on physical and mental health, but it may also provide benefits to an injured individual by way of providing them with the energy to fight back rather than falling into depression. Thus, individuals who are angry about their offenders’ behaviors may decide to release some of the negative emotions they feel such as sadness, guilt, or shame, but they may also retain their feelings of anger toward those persons and disregard the idea of granting forgiveness. In essence, this decision may allow them to move beyond the role of victim to that of an empowered individual.
This study’s findings appear to contradict some studies within the forgiveness literature. One example is the study by Witvliet et al. (2001). This study examined college students’ emotional and physiological reactions to a brief exposure to forgiving and not forgiving an offender. Their findings suggested that forgiveness produced more positive emotions and a greater sense of control for their participants. The current study, on the other hand, did not find an increased sense of control or an increase in positive affect related to forgiveness. One exception with regards to positive affect was with women who had high self-esteem. As mentioned previously, women in our sample who had high self-esteem reported gains in positive affect when they thought about letting go of their negative affect, but this was not found for those who thought about forgiving their offender. Furthermore, these same women indicated they experienced increases in their negative affect after considering forgiving their offenders. Overall, the current study has contrary findings to many of the other forgiveness studies related to possible gains with the use of forgiveness.

The contradictions may best be explained in several ways. Forgiveness may be a step-wise process as discussed by many of the forgiveness researchers (Enright et al., 1998; North, 1988). This would suggest that forgiveness requires adequate time for the process to occur. A more lengthy discussion about the decision to forgive one’s offender may help avoid strong negative emotional reactions to the suggestion of forgiveness. An increase in negative emotions may, however, be part of the process of forgiving, and the escalation may signal that a person in the initial stage of dealing with her emotional pain (Enright & Coyle, 1998). Another possibility is that women who have been victimized may need adequate opportunities to express their emotional hurt to others. This crucial step would likely allow her the ability to further consider letting go of her negative affect or forgiving her offender. Many clients, however, initially reject the idea of forgiveness for their offender (Enright & Fitzgibbons, 2000). Therefore, alternative approaches must obviously be available for clients who categorically reject forgiveness as a means to overcome their emotional pain.

Few studies have shown that forgiveness may actually lead to a reduction of psychological health (Enright & Coyle, 2003). This study, however, appears to be one of those few examples. Ultimately, this study’s findings seem to imply that although forgiveness therapy may have some benefits, there are certain cautionary considerations that should be taken prior to beginning forgiveness therapy. Some of the most obvious considerations appear to be the
individual’s personality, the type of victimization they have experienced, and the amount of negative affect they are experiencing.

Nevertheless, the study suffers from several limitations.

(1) Lack of generalization. First, the generalization of these findings is ultimately limited to women who have been victimized. Although the use of a specific and narrow group of participants is helpful in identifying those who might be harmed from the suggestion of forgiveness, it decreases the generalizability of these results to other groups. Additionally, the age range of participants’ was mostly restricted between the ages of 18 and 22 years. Although this allowed more control for our study, this also limited the extent to which we can discuss the relevance of these findings in terms of other types of individuals (e.g. males, clinical samples).

(2) Sample size. The study’s sample size (N = 79) was smaller than was anticipated. The researchers were initially expecting to recruit 120 females for this study, but due to difficulty recruiting women who had been victimized and other scheduling problems, the sample size may have limited the power for the study. Future studies addressing the appropriateness of this should attempt to have a sample size that will adequately demonstrate statistical power.

(3) Additional measures needed. A third limitation is the lack of certain measures within the study. For example, religiosity has been shown to relate to ability and willingness to forgive, and therefore many forgiveness studies have used various religiosity measures with their sample. Due to time restrictions during the initial screening phase, a religiosity measure was not included in this study, but it would have likely helped to identify those who are more willing and capable of forgiving a person who has hurt them. A sense of justice measure may have also been valuable for this study because it is inferred that an individual with a high sense of justice holds beliefs that an offender must pay a price for hurting another. The individual with a high sense of justice will thus likely hold onto her anger until she is convinced that the offender has received a sufficient punishment for the transgression.

(4) Adapted measure. Related to measurement issues, this study adapted a forgiveness measure by Mullet, Houdbine, Lauromonier, and Girard (1998) because of the time restrictions during the screening phase. Although representative items were used for the adapted version, the reliability of this measure was lower than that reported for the full-length version of the forgiveness measure. This likely affected the power of our analyses using the forgiveness personality dimension as a predictive measure.
(5) Relaxation as a control. The control condition used in this study was an intervention that led participants through a series of slow muscle relaxation exercises. Although the intervention was referred to as a control condition, in fact it is an active treatment that has been shown to demonstrate significant changes in physiological, emotional, and cognitive processes. Therefore, future studies may choose to find a true control condition in order to determine the effects of forgiveness and letting go interventions.

(6) Brief exposure. The study used a brief exposure of forgiveness, letting go, and relaxation. Future studies may use complete interventions in order to evaluate the differences between them and brief exposures. A complete forgiveness intervention may help to identify at what point of the intervention is a person likely to experience a decline in negative affect and an increase in positive affect. Use of an intervention may also reveal whether a series of steps must be taken before the suggestion of forgiveness can be considered in an effective manner and under what context (e.g. personality, amount of negative affect, time since event, type of victimization).

(7) Variations of victimization. Finally, we did not tease apart the type of victimization experienced by the participants and their reactions to the various experimental conditions. It is likely that those individuals who suffered the most severe transgressions would be less tolerant for the idea of forgiveness due to deeper emotional hurt suffered due to their experiences. Similarly, it may be that those who suffered more severe victimization chose to think about less traumatizing events, and as a result, they may have reported less emotional reaction to the experimental conditions.

Future research should continue to research the structure of the forgiveness construct. This study used a model of forgiveness that consisted of two components – interpersonal and intrapsychic. Several studies have attempted to address the distinction between the two components of forgiveness (Konstam, Marx, Schurer, Emerson, Lombardo & Harrington, 2002; Baumeister, Exline, & Sommers, 1998; Enright, Freedman, and Rique, 1998), and to demonstrate that many individuals focus on the personal benefits of forgiveness rather than the benefits to their relationship with the offender (Konstam et al., 2002). Thus, individuals tend to concentrate on the intrapsychic component and pay less attention to the interpersonal component of the forgiveness process.
Related to the structure of the forgiveness construct is the definition of the term forgiveness as it is used for therapy. Many individuals are familiar with the term as it is used in our everyday lives; however, the term is slightly different as clinicians use it. Nonetheless, significant problems exist with the consistency and precision of the term as it is used in the forgiveness literature. Although many in the field are addressing the issue, this continues to be one of the top priorities in order to ensure the quality of the forgiveness research. Researchers such as Konstam et al. (2002) and Hargrave and Sells (1997) have asserted certain characteristics of the definition of forgiveness, including the interpersonal and intrapsychic components of forgiveness and the exclusion of pardoning, condoning, or forgetting that the offender committed the offense. As a result, some writers in the area of forgiveness such as Konstam et al. (2002) claim that the definition of forgiveness is growing. Nevertheless, until the definition of forgiveness is well conceptualized and agreed upon within the literature, the definitions used by various research studies will likely continue to contribute to the confusion.

Beyond these crucial issues, there are many possibilities for future research related to forgiveness and its effectiveness for different individuals. Some researchers have suggested that anger may have a protective role for some individuals who have been hurt (Murphy, 2003; Neu, 2002). If so, future studies might attempt to understand what that role is specifically and for whom is it protective. Anger may be beneficial for certain individuals or groups within certain contexts, at least initially. There may also be differences in the target of the anger (e.g. self, other) and the quality of the emotion depending on the specific problem (e.g. rape, physical abuse, verbal bullying) experienced by the individual. By determining whether the anger is “self” or “other” focused clinician might be better able to determine whether forgiveness therapy is appropriate for a particular client. One possible hypothesis is that if an individual’s anger is “other” focused; his or her anger may be serving a more positive function than if the anger is directed at the self. Lastly, differences between anger and resentment could be examined in order to understand the distinction between them, their relationship with one another, and their possible drawbacks and benefits to the individual.

Future studies might also examine gender differences in treatment outcome for forgiveness therapy. Gender differences have been addressed in past research, and findings have suggested that men are able to forgive more easily than women. On the other hand, women appear to initiate discussions about forgiveness-related problems within therapy (Konstam et al.,
The Korstam et al. (2002) findings suggest that there are gender specific pathways to forgiveness, but to date there is no study that has provided a clear model to explain the differences between males and females.

Another relevant question is whether a model can be developed that helps to explain the characteristics beyond gender that might help predict those who will have good treatment outcomes versus those who will not. One suggestion might be the continued examination of personality and the forgiveness process. For example, one might look at the differences between optimists and pessimists as they work through the forgiveness process, and possibly determine if there are actually different processes for each of them. Studies might focus on whether certain thoughts or behaviors might explain the differences between optimists and pessimists, such as rumination and resentment, or feelings of empowerment and control.

Researchers might also try to develop a measure that could identify a person’s current stage within the forgiveness process. This would be yet another helpful diagnostic tool to help clinicians better predict when a person might be ready to think about the possibility of forgiveness. A measure that determines a person’s current stage of forgiveness could be useful for research studies by allowing researchers to map the progression and length of time required for various individuals to reach the desired goal of forgiveness therapy. Similarly, future studies should attempt to clarify the desired goals of forgiveness therapy. If these goals go beyond a reduction of negative emotions, then more studies should try to gauge the increase and decrease of both positive and negative emotions as individuals move through the forgiveness therapy process.

As many research studies have indicated, forgiveness as a therapy has the potential to alleviate or reduce many of the symptoms of those victimized. The results of this study suggest, however, that forgiveness therapy may not be universally beneficial. Although forgiveness has the potential to provide greater mental well-being and health for some, it may cultivate harmful emotions and detrimental effects for others. Future forgiveness research should focus on distinguishing receptive from nonreceptive populations and on isolating the stage of the healing process at which forgiveness therapy would be most effective. As with any new and relatively promising therapy, there exists a common tendency to look to such therapy as a panacea. The current study is but a piece of the puzzle in defining the effective boundaries of forgiveness.
References


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