

Forgiveness Therapy

UNIT ONE Chapter One

Unit One Content Summary

Those of us working in mental health professions are no stranger to the fact that clients are often beleaguered by intense and long-lasting anger about unjust treatment at the hands of others. And often that anger is sprinkled (or doused) with other negative emotions, such as sadness or anxiety. If these negative reactions to interpersonal conflict are persistent and troublesome, they can serve as the cause of intense suffering and in some cases, to the presence of diagnosable disorders. For others, a previously-diagnosed problem may be exacerbated by the emotional sequelae of unfair treatment. The purpose of this course is to give you, the mental health professional, a unique and empirically-based approach to use with clients who find themselves in such situations: forgiveness therapy.

As its name implies, chapter 1 gives us an overview as to what forgiveness is and how it is relevant in therapy. It will be immediately evident to you that forgiveness is not a "value free" concept. A forgiver (and his or her therapist) must have a clear sense of right and wrong, of what constitutes justice and mercy. We might call this the "philosophical" context of forgiveness. The "psychological" context is that of anger. We experience anger when we are frustrated (i.e. when we cannot have something we desire) or when another treats us unfairly. The latter is the context for forgiveness, and as the authors point out on p. 17-18, this anger has a very specific quality to it. Specifically it:

- is focused on a specific person or group
- can be intense
- can bleed into one's relationship with others
- can be extreme in its passivity or blatant hostility
- sometimes manifests as developmentally inappropriate (in a manner of someone much younger)
- is long-lasting
- is based on a real, objective injustice.

We will explore the meaning and context of forgiveness in depth in chapters 2 and 3.

Medical science has shown us that extended anger negatively affects our health, but the role of anger in the development of psychopathology is as yet unclear. In chapters 6-11, you will find rather convincing evidence that anger is linked to the experience of various psychological problems, but at present we don't understand much about the specific nature of that link. While much research remains to be done, our clinical experience suggests that forgiveness is a key to dealing with this anger. Both clinical and research experience suggest that following the phase model of forgiveness described in this chapter is a powerful tool for overcoming anger and for helping clients develop healthier thoughts, feelings, and behaviors in the context of interpersonal hurt. Briefly, this model involves the following periods in the healing journey:

- *uncovering*, where clients learn to narrate the truth about a hurtful incident and their reaction to it,
- *decision*, where they first consider and then commit to forgiving
- *work*, where they shift their attention to the offender, trying to understand him or her

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- *deepening*, where they consider their own forgiveness history and existential questions about the meaning and purpose of suffering and forgiveness.

While these steps are not rigid, as clients may move back and forth between them, the authors maintain that they are developmental in nature. In other words, a client will probably need to engage in uncovering before considering forgiveness, consider and "decide for" forgiveness before doing the work of forgiveness, and so on. Later clients may return to earlier issues (uncovering), or may approach the first stages of forgiving a new hurt, with a more mature level of understanding.

Now that we have a sense of what forgiveness involves, we can pause to define it more thoroughly. Borrowing from North (1987, p. X), we suggest that forgiveness can formally be defined in the following way:

People, upon rationally 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).

As we note, there are two central ideas here: the importance of morality (pursuing the good in the context of interpersonal relationships) and transformation (positive, qualitative change in the forgiver's own experience, their response to the offender, and perhaps their relationship to the offender). Chapters 2 and 3 expand our understanding of this detailed definition of forgiveness. For now, we stress how important it is for a clinician to have a sound understanding of forgiveness and to educate clients about what forgiveness is and is not. Indeed, in our experience, most of the disagreements between scholars and misunderstanding that take place in the clinician's office relative to forgiveness take place because of the differences in how people understand the concept.

We close this chapter with a series of cautionary notes for clinicians. You will notice several themes in these notes. First, forgiveness should always be a free choice on the client's part. Second, and relatedly, clinicians should be aware that important others may pressure a client to forgive or not to forgive, and what seems like a choice may actually be a dubious act of compliance. Finally, definitions matter. As noted in the previous paragraph, much misunderstanding about forgiveness results from parties having different concepts in mind.

Main Points

- The basic psychological context for forgiveness is anger at an objective hurt by another person.
- Forgiveness is developmental, in that it consists of several different phases.
- Forgiveness involves a rational assessment of the hurt, a decision to abandon the negative internal consequences of that hurt, and a commitment to respond to the offender with thoughts, feelings, and behavior based on one or more moral principles.
- There is much intra- and interpersonal variation in the forgiveness process.

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- Understanding what forgiveness is and is not is critical. The witness of thousands of years of philosophy, theology, and science demonstrates that forgiveness is a moral virtue, as it recognizes injustice and yet seeks to do good on behalf of another.

Clinical Exercise (for your professional development only; do NOT submit your answers)

Think about a client (or perhaps several) who is experiencing anger because of an interpersonal offense. How would you describe that anger? How does this person's anger hurt his own mental health and impede his own personal development? Does he realize how his anger affects him, and if not, what can you do to help him understand this?

Unit One Exam Items (your answers to these items must be submitted for evaluation)

1. The two basic elements of the definition of forgiveness are _____.
 - A. a sense of fulfillment and the ability to “let go” of the offense
 - B. being prepared to sacrifice oneself for the offender and fading memory about the offense
 - C. a concern with striving toward the moral good in interpersonal relationships and positive change in the life of the forgiver
 - D. reconciliation with the offender and a commitment to pursue justice
2. Which statement most accurately captures your authors' view on variability in the forgiveness process?
 - A. Clinicians should expect variability both within and between clients as they progress through the forgiveness process.
 - B. Variability is common between clients, but any one client will usually be quite consistent in the way he or she approaches forgiveness across different situations.
 - C. There is little variability in the way clients forgive; almost everyone progresses through the same steps along the same time-line.
 - D. The major source of variability is religious conviction or philosophy of life; if a client's worldview does not support forgiveness, there is no way he or she will ever be interested in forgiving.
3. In these chapters, one of the main techniques suggested for helping clients forgive is
 - A. expression of anger
 - B. journaling
 - C. hypnosis
 - D. the study of philosophy
4. According to this unit, why might forgiveness be important in the treatment of psychopathology?
 - A. Recent attempts at treating various psychological disorders with drugs do not seem to be working, so we must find another method of treatment.

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- B. Almost all psychopathology is a direct result of being offended by someone, and forgiveness can help cure these breaches in relationships.
 - C. Psychopathology usually arises from a sense of guilt, so if people seek forgiveness for their misdeeds, their psychological symptoms should disappear.
 - D. We have some evidence that anger is closely related to the onset of psychopathology, and forgiveness is one way to help people overcome anger.
5. Which of the following does NOT represent your authors' view of the kind of anger at the center of interpersonal offenses (and therefore, at the center of forgiveness)?
- A. It is long-lasting
 - B. It is based on a real injustice or hurt, not just on person's subjective perception of hurt
 - C. It can be directed at an object/event (such as a tornado)
 - D. It is often extreme and/or intense
6. Which phase of forgiveness involves a shift from focusing on oneself to focusing on the offender?
- A. The work phase
 - B. The decision phase
 - C. The deepening phase
 - D. The uncovering phase
7. The case of Miriam, found on pp. 22-25, suggests that often the most accessible place to begin forgiveness therapy is by helping the client change his/her _____.
- A. behavior
 - B. cognitions
 - C. affect
 - D. relationship with the offender
8. As mentioned in the *Cautionary Notes* section at the end of chapter 1, pursuing forgiveness in therapy should always be the free choice of the client him- or herself.
- A. True
 - B. False

Comments

If you have any questions or comments on this unit, please enter them below.

