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This PDF is a supplement to the podcast "Psychiatry & Psychotherapy" found on iTunes, Google Play, Stitcher, Overcast, PlayerFM, PodBean, TuneIn, Podtail, Blubrry, Podfanatic



There are no conflicts of interest for this episode.

On this week's episode of the podcast, I talk about the power of forgiveness. It's scientifically proven that forgiveness can affect our health. As mental health professionals, this has important impacts both personally and professionally. I have also included a downloadable PDF for you to give your patients to help you walk them through the act of forgiving.

What is forgiveness?

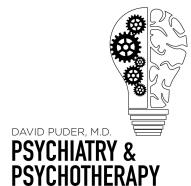
As a therapist, when I say the word "forgiveness," my patients can shut down if I don't explain it properly. Why? Because just the need for forgiveness is proof that they have been wronged. When we are wronged, it can be hard to let go of that hurt. That's why I wanted to start out by saying what forgiveness (and this episode) is <u>not</u> about.

Forgiveness is not:

- It is not approving.
- It is not excusing the action, denying it, or overlooking it.
- It is not just moving on (particularly not with cold indifference).
- It is not forgetting or pretending it did not occur.
- It is not justifying or letting go of possibly needed justice.
- It is not calming down.
- It is not a bargain or negotiation.
- It is more than ceasing to be angry.
- It is more than being neutral towards the other.
- It is more than making oneself feel good.
- It is one step towards reconciliation, but it is different from reconciliation, which requires a sincere apology from all parties.
- It is not dependent on the one you forgive—that would give the other power to control you by keeping you in your bitterness. Consider Corrie Ten Boom, who

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forgave the Nazis after losing her family in the Holocaust, or Marietta Jaeger who, after her daughter was kidnapped and brutally murdered, was able to forgive. People can forgive, even when the person who wronged them is unknown or dead.



- It is not a one time event, but may need to be repeated (sometimes the hurt comes back, sometimes you need to start every morning with forgiveness).
- It is not a restoration of full trust (trust takes time to develop or to be reinstated).

So what is forgiveness?

The Definition of Forgiveness:

Forgiveness is a process. It involves allowing yourself to feel the negative emotions you justly have towards an offense, and really putting the wrong into words in a congruent and authentic truthful way. Then choosing to release it, either giving it to a higher power, or letting it go to a cosmic sense of justice, or earthly legal justice system, and then continuing the process until negative affect is replaced with peace, empathy and compassion. When someone forgives they no longer have a portion of their daily life consumed in negative feelings towards the person or situation.

"People, on 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 harmful act or acts, has no right)" (Enright, 2015).

Elliot (2010) cited Enright and Fitzgibbons (2000) and came up with two types of forgiveness:

Decisional forgiveness: the experience of granting forgiveness without eliminating the emotion, but in this, resentment may continue. It involves a cognitive model where therapist works with the client one time to make decision to forgive.

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Emotional forgiveness: the patient must demonstrate changes in emotion and motivation toward their offender.

Studies show that:

Decisional forgiveness can reduce hostility, but it is only marginally effective in improving stress levels or emotional health (Elliot 2010 citing Baskin and Enright 2004, Worthington 2007). This means that emotional forgiveness is the goal of all forgiveness therapy.

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What's the most effective way to help our patients forgive?

Individual therapy that accomplishes Enright's 4 phases over 20 encounters is "clearly most effective" way to actually accomplish forgiveness. (Elliot 2010 citing Lundahl 2008)

Why should we care about forgiveness?

Forgiveness isn't a "nice thing to do," it has real health ramifications that have been thoroughly studied, and it's a fact that the act of forgiving can be a real change agent in therapy and long term health.

Here are the studies:

- People who live with depression and a history of maltreatment have an upregulation of their inflammatory response compared to those with no history of maltreatment (Danese et al. 2007 as cited by Elliot 2010)
- Unforgiveness is reflected in specific cortisol levels, adrenaline production, and cytokine balance (Elliot 2010 citing Worthington 2005)
- Cause-effect relationship between pain and anger is similar to the anger-depression relationship. some studies show that just the anticipation of pain is associated with anger. (Okifuji 1999)
- Chronic pain often arises from injury, or accident, thus anger is directed usually at the one responsible, or oneself. (Greenwood 2003)
- General intensity of anger is important, but also specific targets of anger seem to be essential factors in understanding adaptation to chronic pain. Some research has shown that inward anger is more common in those with chronic pain vs. those individuals with different targets of anger. A study using the MPI (multidimensional pain inventory- a 60 item self reported inventory to assess

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different aspects of chronic pain) showed that 88 people endorsed anger at themselves and scored 0.38 on the anger inventory. Those that endorsed anger at other targets all scored below 0.30. Anger should be viewed as a multifactorial construct in chronic pain. (Okifuji 1999)



Specifically, in chronic low back pain, a preliminary study of 61 adult patients with chronic low back pain (31 recruited from pain and palliative clinic, and 30 recruited from community) showed patients with higher scores on forgiveness-related variables ('current level of forgiveness' as measured by Enright Forgiveness Inventory and 'forgiveness self efficacy' as measured by the Forgiveness Self-Efficacy Scale) reported lower levels of pain, anger, and psychological distress.

Patients who scored (Carson 2005) analysis revealed that "state anger largely mediated associations between forgiveness variables and sensory pain, whereas the association between current forgiveness and affective pain was mostly independent of state anger."

What is bitterness?

When someone continues to hold on to unforgiveness, they can become what we would call "bitter." Bitter people are exactly like that word describes—so steeped in resentment that they become unpalatable.

Clues that someone may be bitter:

- Do they continually replay past hurts over and over?
- Do they hold onto the pain?
- Do they try to avoid someone?
- Do they quickly get angry with someone?
- Do they speak trashfully or verbally malign someone?
- Do they find that their bitterness is more associated with the proximity of the person who wronged them than the magnitude of the event?
- What percent of their emotional energy is spent on this topic?

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* Recurrent resentment affects all relationships and takes up room in one's emotional life.

What does research say about bitterness?

Ten years or more after a divorce, ½ of women and Yatununekapi
 ½ of men are still intensely angry at their former spouses, and anger becomes an ongoing, dominant presence in their children as well (Wallerstein).

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- Forgiving people have been found to have a lower blood pressure at baseline.
 (Larsen 2012)
- "Recalled experiences of betrayal that were less forgiven were associated with greater cardiovascular reactivity as indexed by greater diastolic blood pressure, mean arterial pressure, and rate-pressure product...higher trait forgiveness was negatively associated with lower resting blood pressure and better post-stress recovery." (Lawler 2005 citing Lawler 2003)
- Those who measured high in hostility, 20-25 years later, had higher rates of heart disease (Shekelle 1983, Barefoot 1983).
- When discussing the narrative of injustice, those with an understanding of forgiveness showed less anger expressions (Tina Huang, "Cross Cultural and Real-Life Validation").

How can someone forgive?

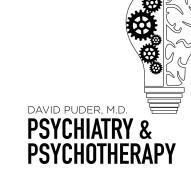
If the previous studies about the negative effects of not forgiving aren't enough, let's look at some of the positive effects of forgiving.

Personal health results of forgiving:

- Changes anxiety into inner peace, reduces symptoms of depression, anger, and paranoia (Dr. R. C. Hunter, 1978).
- Genuine acts of forgiveness lead to overall improvement in the person's emotional maturity and increases the capacities for courage, nurturance of others, and love (Dr. Morton Kaufman "The courage to forgive" 1984).
- Reduces fear. Impulses of anger and revenge subside and are replaced by more appropriate expressions of anger (Dr. Richard Fitzgibbons).
- Hypertension may be reduced (Huang 1990).

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- Patients with fibromyalgia who were taught forgiveness education had a significant decrease in symptoms (Lee, 2014).
- Incest survivors showed significant improvement after a 1 year forgiveness education process (Robert Enright, 1994, 1995).



• A study that looked at 20 psychologically abused and divorced women, some who had remarried and some who had not. All participants scored above 41 on the Psychological Abuse Survey was considered indicative of a present and serious pattern of emotional abuse. Randomized between forgiveness therapy (FT: based on the Enright model) with an alternative treatment (AT: anger validation, assertiveness, interpersonal skill building). The study found that the FT group showed a greater improvement in forgiveness, self-esteem, state anxiety, trait anxiety, depression, environmental mastery, finding meaning, post-traumatic stress symptoms all determined by pre-and post surveys and questionnaires. The FT group had an effect size of 1.79 and represents a shift from below normal levels to normative levels. (Reed 2006)

Spiritual Connection

Some patients highly value their higher power. You can ask them to turn to their spiritual power and ask for the grace to have the willingness to forgive. They can give the spiritual power the opportunity to work in their lives in that way. Some have had powerful forgiveness experiences with their higher power.

Steps in the process of forgiveness:

How can we help our patients forgive those who have wronged them? Sometimes our patients have experienced things that can hurt to even hear about. Helping them move from trauma and anger into a place of forgiveness so they can live a healthy emotional life can be difficult to navigate. But, it is a worthy journey to pursue.

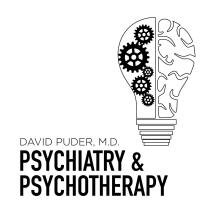
Here are the steps I walk through with my patients using a workbook sheets I have created. I have included a FREE DOWNLOADABLE PDF below that you can give to your patients to fill out. It walks them through the steps in detail, giving them a drawing

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to fill out and journaling exercises with specific questions to answer that will help them process their trauma and grief.

Further Reading on Forgiveness:

"Forgiveness is a Choice" Enright



Bradley, L. A., McKendree-Smith, N. L., Alberts, K. R., Alarcón, G. S., Mountz, J. M., & Deutsch, G. (2000). Use of neuroimaging to understand abnormal pain sensitivity in fibromyalgia. *Current Rheumatology Reports*, *2*, 141–148.

Brand BL, Alexander PC. "Coping with incest: the relationship between recollections of childhood coping and adult functioning in female survivors of incest." *J Trauma Stress*. (2003):185–93.

Enright, R. D. *Forgiveness is a choice*. (2001) Washington, DC: American Psychological Association.

Fernandez, Ephrem, and Dennis C. Turk. "The Scope and Significance of Anger in the Experience of Chronic Pain." *Pain* (1995) 61(2):165-75.

Greenwood K, Thurston R, Rumble R, Waters S, Keefe F. Anger and persistent pain: Current status and future directions. Pain. (2003);103:1–5.

Knight JR, Hugenberger GP. On Forgiveness. Southern Medical Journal. (2007). 100(4):420-421.

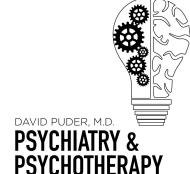
Larsen BA, Darby RS, Harris CR, Nelkin DK, Milam PE, Christenfeld NJ. The immediate and delayed cardiovascular benefits of forgiving. Psychosom Med. (2012) Sep;74(7):745-50.

Lawler, K. A., Jarred W. Y., Rachel L. Piferi, Rebecca L. Jobe, Kimberley A. E, and Warren H. J. The Unique Effects of Forgiveness on Health: An Exploration of Pathways. *J Behav Med Journal of Behavioral Medicine* (2005). 28(2): 157-67. Web.

Lee YR, Enright RD. "A Forgiveness Intervention for Women With Fibromyalgia Who Were Abused in Childhood: A Pilot Study." *Sprituality in Clinical Practice*. (2014). 1(3):203–217

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Lichtenfeld S, Buechner VL, Maier MA, Fernandez-Capo M. Forgive and Forget: Differences between Decisional and Emotional Forgiveness.PLoS One. (2015) May 6;10(5):e0125561.



Moons, Wesley G., Naomi I. Eisenberger, and Shelley E. Taylor. "Anger and Fear Responses to Stress Have Different Biological Profiles." *Brain, Behavior, and Immunity* (2010) 24(2):215-19.

Muscatello MR, Bruno A, Scimeca G, Pandolfo G, Zoccali RA. "Role of negative affects in pathophysiology and clinical expression of irritable bowel syndrome." *World J Gastroenterol*.2014;20:7570–7586.

Okifuji A, Turk DC, Curran SL. Anger in chronic pain: investigations of anger targets and intensity. J Psychosom Res. 1999;47(1):1–12.

Reed GL, Enright RD. The Effects of Forgiveness Therapy on Depression, Anxiety, and Posttraumatic Stress for Women After Spousal Emotional Abuse. Journal of Consulting and Clinical Psychology. (2006). 74(5):920 –929.

Schmidt S, Grossman P, Schwarzer B, Jena S, Naumann J, Walach H. "Treating fibromyalgia with mindfulness-based stress reduction: results from a 3-armed randomized controlled trial." *Pain*. (2011).152(2):361–9.

Strang S., Utikal V., Fischbacher U., Weber B., Falk A. "Neural correlates of receiving an apology and active forgiveness: an fMRI study." *PLoS ONE.* 9:e87654 (2014). 10.137.

White, JM. "Pleasure Into Pain: The consequences of long-term opioid use." *Addictive Behaviors*. (2004). 29:(1311-1324).

Winfield JB. Psychological determinants of fibromyalgia and related syndromes. *Curr Rev Pain*. 2000. 4(4):276-86.

Witvliet CVO, Phipps KA, Feldman ME. Beckham JC. "Posttraumatic mental and physical health correlates of forgiveness and religious coping in military veterans." *J. Trauma Stress.* (2004) 17:269–273.