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Qualitative Analysis of Psychologists' Views of Forgiveness in Counseling and Therapy

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Abstract

The primary goal of this research study was to qualitatively analyze perceptions of forgiveness and its meaning and application in counseling and therapy. The subgoals were to analyze psychological work with forgiveness in Slovak psychology practice, analyze the factors behind and consequences of forgiveness for clients and psychologists' perceptions of their ability to forgive. The research sample consisted of 82 psychologists (71 women and 11 men) who had at least six months experience of working with adult clients. Participant age ranged from 24 to 67 years ($M = 39.0$ years; $SD = 12.0$) and number of years of psychological practice ranged from six months to 42 years ($M = 13.2$ years; $SD = 12.2$). Data were collected through questionnaires containing open-ended questions. We used Modified Consensual Qualitative Research (Spangler et al., 2012) to analyze the data obtained. Ten domains were created in the data analysis. Psychologists perceived forgiveness to be an intrapersonal process and an important part of counseling and therapy. Participants mainly stressed the cognitive qualities of forgiving, such as accepting and understanding the other person and the situation. The results show that working with forgiveness is widely applicable to relational and personal problems. The role of the psychologist in this process is to accompany, help, and support the client on their forgiveness journey, which ultimately leads to positive consequences, including improved mental and physical health, better relationships, relief, higher self-esteem, and self-acceptance.

Keywords

forgiveness, psychologists, Consensual Qualitative Research-Modified Method, counseling, forgiveness therapy

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Qualitative Analysis of Psychologists' Views of Forgiveness in Counseling and Therapy

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The primary goal of this research study was to qualitatively analyze perceptions of forgiveness and its meaning and application in counseling and therapy. The subgoals were to analyze psychological work with forgiveness in Slovak psychology practice, analyze the factors behind and consequences of forgiveness for clients and psychologists' perceptions of their ability to forgive. The research sample consisted of 82 psychologists (71 women and 11 men) who had at least six months experience of working with adult clients. Participant age ranged from 24 to 67 years ($M = 39.0$ years; $SD = 12.0$) and number of years of psychological practice ranged from six months to 42 years ($M = 13.2$ years; $SD = 12.2$). Data were collected through questionnaires containing open-ended questions. We used Modified Consensual Qualitative Research (Spangler et al., 2012) to analyze the data obtained. Ten domains were created in the data analysis. Psychologists perceived forgiveness to be an intrapersonal process and an important part of counseling and therapy. Participants mainly stressed the cognitive qualities of forgiving, such as accepting and understanding the other person and the situation. The results show that working with forgiveness is widely applicable to relational and personal problems. The role of the psychologist in this process is to accompany, help, and support the client on their forgiveness journey, which ultimately leads to positive consequences, including improved mental and physical health, better relationships, relief, higher self-esteem, and self-acceptance.

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Introduction

Every one of us faces interpersonal offenses and transgressions in our lives. Whether we ourselves are the victims of the offense or have caused someone else pain, we have to face the negative consequences (Enright et al., 1991). Individuals may respond to offense through revenge-taking or forgiveness, which, according to McCullough et al. (2012), have become effective mechanisms for humans through evolution. The importance of forgiveness for the individual has been confirmed by many studies that have shown a positive relationship between forgiveness and both mental and physical health (e.g., Lee & Enright, 2019; Rasmussen et al., 2019), life satisfaction, self-esteem, positive affect, emotional processing, emotional expression, and the negative association between forgiveness and anxiety and depressive symptoms (Chen et al., 2018). According to previous qualitative research, members of the general population who are highly forgiving (Raj et al., 2016) and counselor trainees (Ikiz et al., 2015) think forgiveness has positive consequences. Therefore, it is natural that forgiveness forms part of psychological counseling and therapy.

Forgiveness is a complex construct that has been variously defined in the scientific literature. For example, according to Thompson et al. (2005), forgiveness transforms the victim's reactions from negative to positive by reframing the perceived offense. The source of the offense may be oneself (self-forgiveness), other persons (forgiveness towards others), or a situation such as a natural disaster. Enright (2001) sees forgiveness as a moral virtue: a willingness to give up one's right to feel resentment while fostering empathy and compassion for the offender. On the other hand, McCullough et al. (1997) view interpersonal forgiveness in terms of motivation and define it as a set of motivational changes, where the person's motivation to retaliate against the offender and to maintain alienation from them decrease and the motivation to exhibit goodwill toward the offender increases.

Two types of forgiveness are often distinguished in the literature: decisional and emotional forgiveness. Deciding to forgive involves the individual intending to treat the offender in the same way as before the offense, and emotional forgiveness means replacing negative emotions with neutral or positive emotions (Worthington & Scherer, 2004). According to the authors (Worthington & Scherer, 2004), decisional forgiveness does not necessarily mean the absence of negative emotions, but it can lead to emotional forgiveness.

Since interest in forgiveness first began to emerge, many quantitative studies have shown that individuals with a higher tendency to forgive have higher rates of various personality qualities including agreeableness, empathic concern, perspective-taking (Berry et al., 2005), social desirability, intrinsic religiousness (Brose et al., 2005), or closeness toward the offender (Strelan et al., 2016). Those who have a higher tendency to forgive also exhibit lower rates of negative experiences and personality qualities such as neuroticism (Berry et al., 2005; Brose et al., 2005), depression, hopelessness (Toussaint et al., 2008), anger, and hostility (Berry et al., 2005), as well as some offender-side factors; for example, the presence of an apology (Strelan et al., 2016).

Despite the existence of many different definitions, forgiveness experts agree that forgiveness does not mean condoning, ignoring, justifying, or excusing the transgression, or even reconciling with the offender (Enright et al., 1991; Freedman & Zarifkar, 2016). These misconceptions can disrupt the individual's interest in forgiveness, as well as the effectiveness of forgiveness work in psychological practice (Freedman & Zarifkar, 2016). For example, Ballester et al. (2009) found that when lay people believe that forgiveness is immoral, their resentment is higher. On the other hand, if they believe that forgiveness corresponds to a decrease in negative feelings and an increase in positive feelings toward the offender, they forgive more unconditionally. In addition, research has shown that both lay people (Freedman & Chang, 2010; Friesen & Fletcher, 2007; Kanz, 2000; Lawler-Row et al., 2007; Younger et al., 2004) and helping professionals, including counselors and therapists (Konstam et al., 2000) often either believe these kinds of misconceptions or do not have enough information about forgiveness. On the other hand, Ikiz et al. (2015) found that counselor trainees consider forgiveness to be an important part of the counseling process, particularly because of its capacity to resolve unfinished business and its positive consequences for psychological well-being and health.

Theoretical and experimental studies have described a number of different interventions and techniques that may facilitate forgiveness counseling, including Enright's process model of forgiveness (Enright et al., 1991), which is the best-known, and Worthington's REACH model (Worthington, 2006). However, Konstam et al. (2000) showed that counselors do not sufficiently understand forgiveness interventions and that many do not systematically use interventions in their practice. In addition, although some counselor trainees consider forgiveness, and the role of the counselor in it, to be important, other trainees do not consider forgiveness an important part of the counseling process (Ikiz et al., 2015). Counselor trainees also thought that a counselor who works with forgiveness should be able to forgive themselves,

which could make it easier for them to help clients work on forgiveness (Ikiz et al., 2015). Finally, research suggests that forgiveness work tends to be used by counselors who have more positive attitudes towards forgiveness (Konstam et al., 2000), both within the profession and in their private lives.

Although some previous research has focused on forgiveness from the helping professional's perspective, these studies were undertaken primarily in Western cultural contexts (Konstam et al., 2000; Morgan, 2017), included counselor trainees (Ikiz et al., 2015), or did not describe the frequency of participant responses (Glaeser, 2008). We believe that it is important to investigate forgiveness in various cultures and helping profession populations. Our study therefore aimed to analyze forgiveness in a larger sample of practicing Slovak psychologists, focusing on both their perceptions of forgiveness and the forgiveness work they do with their clients. Slovakia is a Central and Eastern Europe country, but as most of the forgiveness research has been done in Western countries, forgiveness research in Slovakia is scarce in general. Therefore, studying the understanding of forgiveness from the perspective of Slovakian psychologists will contribute to existing knowledge and to obtaining better conclusions in forgiveness research.

The main goal of this paper was to understand the perception, meaning, and use of forgiveness in counseling and therapy and to analyze psychological work with forgiveness by practicing Slovak psychologists. Other goals included understanding the forgiveness process and the role of forgiveness in psychologists' lives. In pursuit of our research goals, we used the following research questions: Q1: *What are psychologists' perceptions of forgiveness?* Q2: *How do psychologists use forgiveness in praxis?* Q3: *What factors do psychologists' think enter into the client's process of forgiving?* Q4: *What do psychologists think the consequences of forgiveness are for clients?* Q5: *What ability do psychologists have to forgive?*

Positioning the Researchers in the Study

Self-reflexivity, along with acknowledging the multiple roles and values of researchers, is considered central to the research process in qualitative research (Burck, 2005). We therefore describe our personal and research backgrounds relating to the research topic. Lucia Záhorcová is a post-doctoral researcher and psychologist. Her main research interest is the psychology of forgiveness. She offers counseling for students, adults, and bereaved parents, often using forgiveness interventions in her praxis. She received forgiveness intervention training from a leading expert in the field, Prof. Robert Enright. Miriam Masaryková and Žofia Dršťáková were, respectively, a postgraduate psychology student and an undergraduate psychology student under Lucia Záhorcová's supervision. Both are interested in forgiveness and eager to work with forgiveness in their future praxis. The motivation for our research stemmed from our interest in the topic, the lack of forgiveness research conducted in Slovakia, and the absence of formal training in forgiveness intervention/therapy in Slovakia. Our discovery that there are only a few qualitative studies aimed at understanding forgiveness in helping professionals, most of which are conducted in Western cultural contexts, motivated us to conduct this study in Slovakia. We hope that this study will help to improve psychologists' understandings of forgiveness and lead to the key aspects of the forgiveness process being included in training for psychologists.

Method

In our endeavors to answer our research questions, we selected the Consensual Qualitative Research-Modified Method (CQR-M; Spangler et al., 2012) as our qualitative data analysis method. We chose this method because it uses a "bottom-up" approach in which the

categories and subcategories stem from the data without any theoretical concepts being imposed on it. It is a systematic approach that involves discussions among several researchers in order to minimize biases and emphasize consensual decision-making. This method is appropriate for analyzing simple qualitative data from a large sample of participants. Here, we begin by describing our participants and then move on to the procedure.

Recruitment and Participant Sample

The criteria for participation in the research were: having a master's degree in psychology (which is the requirement for working as a psychologist in Slovakia) and active psychological work with adult clients for at least six months. We assumed that the experiences psychologists gain during their first few months of psychology work may not adequately reflect the reality of forgiveness work.

Miriam Masaryková and Lucia Záhorcová recruited potential participants through email and psychology groups on social media. We looked at the websites of Slovakian psychologists, found their email addresses, and emailed them a questionnaire which contained the consent form and information about the study. We shared the study information in psychology groups on Facebook: “psychológovia vo výcviku,” “psychológia – ponuky práce a ďalšieho vzdelávania,” and “psychológovia TU” (English translation: “psychologists in psychotherapeutic training,” “psychology – job offers and higher education opportunities,” and “TU psychologists – Trnava University”). A snowball sampling technique was used, whereby research participants who knew of another potential participant helped recruit other participants to the study and shared the questionnaire with them.

The study sample consisted of 82 psychologists (71 women and 11 men). The age of the participants ranged from 24 to 67 years ($M = 39.0$ years; $SD = 12.0$). The number of years of psychological practice ranged from 6 months to 42 years ($M = 13.2$ years; $SD = 12.2$). A majority of the sample ($n = 66$) reported providing psychological counseling in their practice, followed by psychotherapy ($n = 43$), psychodiagnostics ($n = 14$), and crisis intervention ($n = 1$). In terms of working with forgiveness, 64 participants worked with forgiveness, while 18 participants did not specifically target forgiveness work in their praxis.

Most participants reported working in counseling and general psychology service departments ($n = 25$), followed by private clinical psychologist work ($n = 21$) and clinical psychologist work in medical facilities ($n = 20$). The number of hours of counseling or psychotherapy per month ranged from 10 to 150 hours ($M = 56.4$ hours; $SD = 35.6$).

Thirty-nine participants had previously completed psychotherapy training, 23 were receiving ongoing training, and 20 participants had not yet received any psychotherapy training. In terms of psychotherapy approach, the most common were different kinds of systemic and family approach training ($n = 20$), followed by cognitive-behavioral psychotherapy ($n = 15$), psychodynamic and other depth-oriented approaches ($n = 9$), and person-centered therapy ($n = 8$). Several respondents reported completing more than one course of psychotherapeutic training. Participants mostly identified as Catholic ($n = 46$), as having no religion ($n = 22$), as Evangelical ($n = 7$) or of another religious faith ($n = 7$).

Protection of Human Subjects

Participants were fully informed about the research aims and conditions. They could terminate their participation at any time when completing the questionnaire. Participant confidentiality was guaranteed, and participants were informed that the data would be analyzed together for the whole group and that no personal data would be disclosed or published. We did not go through the formal process of seeking approval from the ethical committee, as this

is not required in our country (Slovakia) by the ethical standards and institutions if the study meets the criteria of low risk of harm to participants. Our study met these criteria as no sensitive personal information was stored, and it did not involve vulnerable or dependent groups. All procedures performed in this study were in accordance with the ethical standards and with the 1964 Helsinki declaration and its later amendments or comparable ethical standards.

Data Collection

Data were collected through online questionnaires. We decided to use online questionnaires for two main reasons: first, the COVID-19 pandemic, and second, to obtain a bigger sample of psychologists so we could draw optimal conclusions on ways psychologists understand and work with forgiveness. Before completing the questionnaires, participants read and agreed with the informed consent form located at the beginning of the questionnaire.

Consistent with the research problem and consensual qualitative research (Hill et al., 2005; Spangler et al., 2012), the first and the second author created a set of open-ended questions. The open-ended questions and the related research questions (i.e., the reasons for including all the open-ended questions) are reported in Table 1. All participants were asked, “Do you work with forgiveness in your praxis?” and could answer yes/no. Therefore, some of the questions were aimed at psychologists who worked with forgiveness and the remainder were aimed at those who did not work with forgiveness.

Table 1

Open-ended questions with related research questions

Type of participants	Open-ended question in the questionnaire	Related research question
All psychologists	How would you define forgiveness?	Q1: What are psychologists' perceptions of forgiveness?
	How would you describe your own ability to forgive?	Q5: What ability do psychologists have to forgive?
	Do you work with forgiveness in your praxis?	
Psychologists who do not work with forgiveness in their praxis	What are the reasons you do not work with forgiveness in your praxis?	
Psychologists who work with forgiveness in their praxis	How do you use forgiveness in counseling/therapy? What does your work with forgiveness involve?	Q2: How do psychologists use forgiveness in praxis?
	What types of problems or life situations do you most often use in your forgiveness work?	Q2: How do psychologists use forgiveness in praxis?
	How would you describe the forgiveness process your clients undergo? What does this process involve?	Q2: How do psychologists use forgiveness in praxis?

	What factors do you think support forgiveness in your clients? What factors do you think block forgiveness in your clients?	Q3: What factors do psychologists' think enter into the client's process of forgiving?
	How would you describe the role of the psychologist in the client's forgiveness process?	Q2: How do psychologists use forgiveness in praxis?
	What are the consequences of forgiveness for your clients?	Q4: What do psychologists think the consequences of forgiveness are for clients?

Data Analysis

For the data analysis, the Consensual Qualitative Research-Modified method (CQR-M; Spangler et al., 2012) was used. This type of data analysis was created for analyzing a large volume of simple qualitative data (Spangler et al., 2012). According to the authors, CQR-M combines consensual research with exploratory and discovery-oriented approaches, and so, is suitable for studying little-described phenomena. There is no limit to the size of the research group, which can vary from tens to hundreds of participants (Spangler et al., 2012). As with CQR, the authors recommend creating a team of at least two researchers, who first code the data separately and then compare the two versions of the analysis until they reach a consensus. In line with the recommendations of Spangler et al. (2012), a team of two researchers was created, consisting of Miriam Masaryková and Žofia Dršťáková; both were trained in CQR-M by Lucia Záhorcová, who teaches a qualitative course at the university and has done extensive research using this method. Miriam Masaryková and Žofia Dršťáková have used this method in previous studies. Miriam Masaryková created a set of domains copying the topics of the questionnaire items. Then Miriam Masaryková and Žofia Dršťáková separately analyzed the responses of the first 30 participants, creating new categories and subcategories from the data for each individual domain. Where necessary, some responses were given duplicate codes and included more than one category (number of statements with duplicate codes: 1.4% of all statements). At the same time, some statements had to be left out, especially those where participants had explicitly stated that they could not comment on the topic (number of uncoded statements: 1.8% of all statements).

The next step in the analysis was a team meeting and discussion, in which the categories, subcategories, and classification of statements was compared and revised until a consensus was reached. Subsequently, the next 30 questionnaires were analyzed separately by primary team members who again met and reached a consensus on the final coding. Data saturation was attained after 60 questionnaires; adding the final 22 did not change the category structure. The primary research team analyzed the rest of the questionnaires separately and met again to settle on the final analysis. Although no audit of the CQR-M analysis was necessary (Spangler et al., 2012), to maintain better objectivity and limit errors, the primary research team's data analysis was reviewed after each step by the research auditor, the second author of the study. After carefully reviewing the categorization of all the statements, the research auditor recommended changes to some of the names of the categories and subcategories to make them more representative of the statements belonging to them. Their recommendations were incorporated after thorough discussion by the primary research team and the analysis was adjusted accordingly.

In order to improve our understanding of the experiences of psychologists working with forgiveness, we wanted to describe a typical case that illustrates a typical experience of the

participants in the research group (Hill et al., 2005). Based on the most numerous categories and subcategories, we created a typical case of the forgiveness process in clients – as viewed by the psychologists – and a typical case of a psychologist in our research sample. The case also took the order of the participant statements into account. Both cases are described in the results section. In the final steps of the analysis, following the recommendations of Spangler et al. (2012), the team members selected a representative statement of each of the derived categories and subcategories. These statements were selected in order to appropriately illustrate each category or subcategory and provide better insight into their meaning for the reader.

Since our participants' responses were in Slovak, our first language, the coding and analysis were done in Slovak. To report the results, the participant responses were translated by team members from Slovak into English. There were no difficulties concerning the translation of the participants' responses.

This study was not preregistered. Researchers who wish to view the data that support the findings of this study may contact Lucia Záhorcová with a request that describes the purpose and intended use for the data.

Results

Here, we will first provide the results for each research question and then describe a typical case of a psychologist working with forgiveness in praxis.

(i) Q1: What are psychologists' perceptions of forgiveness?

For the first research question, we derived one domain from the data obtained, called *Definitions of Forgiveness*. Most of the participants (78%) defined forgiveness in terms of its *Cognitive Aspects*. Within this category, forgiveness was most often described as accepting the transgression, offender, or oneself (e.g., P8, woman: “to accept a situation, a fact that we don't identify with at first, which we don't like, which hurts us”). Other participants (15%) perceived forgiveness as letting go of the offender and the transgression, as the decision or act (18%), and as understanding oneself, the offender, or the transgression (11%).

Some of the participants' statements referred to the *Interpersonal Qualities of Forgiveness*: for example, one participant (P65, woman) explicitly stated that “*Forgiveness is a gift for someone who does not deserve that kind of gift.*” Also, some participants perceived forgiveness as reconciliation with the offender, whereas for others it was reconciliation with the situation. On the other hand, two participants stressed what forgiveness is not: “*I do not perceive forgiveness as justifying what happened, it's not the renewal of the relationship with the offender, nor is it a service to that person*” (P42, woman).

The second most frequent category was *Forgiveness as a Change, Positive Consequences*, which was present in the responses of 56% of the participants. Psychologists defined forgiveness as letting go of negative emotions, such as anger, pain, and resentment, and as experiencing positive consequences, such as freedom and peace (e.g., P41, woman: “*an activity guaranteeing inner peace*”). The subcategory of healing and reducing the negative consequences of the offense contained the following participant statement (P8, woman): “*metaphorically, the wound heals, leaving a scar that is no longer so sensitive to touch.*”

Interestingly, some psychologists ($n = 10$) perceived forgiveness as a process or a challenge, while for others ($n = 6$) it was an ability or a need.

(ii) Q2: How do psychologists use forgiveness in praxis?

The second research question was concerned with the way *psychologists work with forgiveness in praxis* and analysis resulted in the following domains: Aspects of Forgiveness Work in Praxis, Areas of Forgiveness Application in Praxis, The Process of Forgiveness in Clients, Psychologist's Role in the Forgiveness Process and Reasons for Not Working on Forgiveness in Praxis.

Domain: Aspects of Forgiveness Work in Praxis

The first domain within this research question was called *Aspects of Forgiveness Work in Praxis*. The most frequent category (66%) was *Working with Cognitions*, which is one of the most frequent categories in definitions of forgiveness as well. Psychologists mostly work with clients' insights and understanding of the offender, situation, and themselves (27%). Analyzing the situation (20%; e.g., P79, woman: "First, we go over what has to be forgiven – what belongs to them and what to others, what is his and others' responsibility..."), and educating the client (9%; e.g., P70, woman: "I tried to explain to the client that forgiving the other person doesn't mean justifying their actions") are also part of the process.

Some participants stated that their work with clients involved getting the clients to accept their own mistakes and others' mistakes (14%) and on taking responsibility in the process (6%). During forgiveness work, some psychologists used cognitive restructuring (5%), and some tended to evaluate progress and goals during the process to make it more effective (5%; e.g., P66, woman: "assessing the effect of forgiveness, or looking for and using more effective methods of forgiving").

The second most frequent category was *Working with Emotions* (23%). Expressing and processing various emotions, such as anger, resentment, and remorse seems to be important in forgiveness work. Some participants also stressed the importance of working with empathy and compassion, especially in terms of trying to see the offender as somebody who had been hurt in the past. Similarly, 23% of participants described using experiential, projective work to help their clients forgive. Psychologists use letter writing a lot, as well as imaginations, stories, role-model situations, and art therapy.

Qualities of the Therapist and Therapy were mentioned by 14% of psychologists as being essential in forgiveness work. For example, one participant said that forgiveness work required the therapist to show understanding, patience, and also that enough time is needed for a person to forgive. Some participants stressed the importance of the *clients' decision to forgive* or *need for forgiveness*, and that the work was very individual. Three participants said their work with forgiveness was mainly intuitive because they lacked specific training in this area.

Domain: Areas of Forgiveness Application in Praxis

Another domain was *Areas of Forgiveness Application in Praxis*. This domain represents the use of forgiveness work in relation to the problems the client brings to the psychologist. Psychologists most often (70%) use forgiveness work with *relationship problems*, especially in dating or married couples and those with family problems. Some participants also use forgiveness with relationship problems at work (3%) or problems with attachment (2%).

Often forgiveness is used with *personal problems* (53%), such as the death of a loved one and various other losses (17%), self-image problems (17%), remorse and feelings of guilt (16%), life decisions and crises (6%), or personality characteristics that a client want to change (6%).

Participants also use forgiveness in relation to trauma (14%), whether a childhood or a relationship trauma. Some psychologists mentioned working with forgiveness in relation to addictions (6%), violence (6%), or affective disorders (5%). Five psychologists said that they used forgiveness with all kinds of problems.

Domain: The Process of Forgiveness in Clients

Based on the way psychologists described the forgiveness process in their clients, a domain called *The Process of Forgiveness in Clients* was created. Psychologists mostly described the *Cognitive Aspects of the Forgiveness Process* (83%), with the most often mentioned category being acceptance of the transgression, oneself, or the offender (27%; e.g., P70, woman: “*accepting what has happened and possibly the person and their mistakes*”). Psychologists stated that clients first need to decide to forgive the person (23%), then understand and admit that they feel hurt (22%). Also, clients often need to view things from a different perspective (22%) and focus on internal processes (17%), including self-reflection and self-knowledge. To succeed in forgiving, clients need to be willing to see forgiveness as an option (14%) and let go of or release negative emotions and the feeling that they are the victims or that they are flawless (13%). Meaning-making (11%) and cognitive restructuring (11%) are sometimes essential parts of the cognitive forgiving process (e.g., P15, woman: “*often the client searches for answers to questions – ‘why me,’ and does not understand ... they ruminate about the past, think about what they could have done differently*”). It seems that clients need to understand why the transgression happened to them so they can enact a “*gradual change in attitude towards people, events oneself in the context of the new perspective, which results in cognitive changes*” (P71, man).

Under the *Emotional Aspects of Forgiveness* (41%), participants talked about experiencing and revealing negative emotions (20%). One psychologist (P3, woman) working with seniors said: “*when forgiveness is not successful, they often experience huge, indescribable anxiety before death. It is very painful for them.*” Other participants (19%) talked about the positive emotional consequences of forgiveness, especially in terms of experiencing peace, some also described catharsis in forgiveness (14%), working with the desire for revenge (3%), or with client’s humility (2%). For 20% of participants, the forgiveness process was long-term, difficult, or individual (e.g., P67, woman: “*it is a process that is individual for everyone, it cannot be rushed*”). Four psychologists mentioned working with self-compassion and self-esteem, and one specifically mentioned working with apology.

Typical Case of the Forgiveness Process in a Client

In Slovakia, the typical psychologist finds the forgiveness process differs according to the individual and takes a long time. At the beginning, clients are often not aware they have a problem with unforgiveness (or deny they do), convincing themselves that they do not need to forgive the offender. Clients often experience negative emotions such as anger and pain, or sometimes feelings of guilt, which build up during the process, and sooner or later the client needs to vent these feelings. They gradually recognize and admit the hurt they are experiencing, look for the source of the hurt and reasons why they were harmed, and try to understand the offender. They focus on their own internal processes and resources, get to know themselves better, and confront the situation. They then adopt a different perspective and come to understand and accept the situation, themselves, or the offender as they are.

Clients go through the process of becoming reconciled with the situation or the human imperfections using cognitive restructuring, which involves changing their thoughts, attitudes, and behavior patterns. Forgiveness is only achievable if the client is willing and motivated to

work on it. The decision to forgive is followed by the release of negative thoughts and emotions (e.g., anger, fear). At the end of the process, the client experiences the positive emotional consequences of forgiveness, especially feelings of relief, peace, and joy.

Domain: Psychologist's Role in the Forgiveness Process

Another domain is the *Psychologist's Role in the Forgiveness Process*. Most participants (78%) described the psychologist's role as one of *accompanying the client* through their forgiveness process (e.g., P36, woman: "*to accompany them... the client gradually finds their way into themselves*"). Another important role (31%) is *offering help and support* (e.g., P68, woman: "*to support the client so they don't lose strength even in cases where forgiveness has to be repeated*"). The psychologist should also *identify and offer insights* (25%). As one psychologist (P40, man) stated, "*they need to take courage from us and shed light on those parts that are not yet known to them, so they can put all the parts together and gain insights into the problem.*" *Facilitation* seems to be another important role, as it was stated by 14% of psychologists. According to a few participants, a psychologist should *take account of individuality without coercion* (11%; e.g., P5, woman: "*not pushing them into forgiving, the freedom to grow into forgiving*") and *educate a client* (9%; e.g., P57, woman: "*the psychologist 'intellectually nourishes' the client*"). Less frequent categories include *offering empathy and understanding* (6%), *providing safety and security* (6%), *normalizing feelings* (6%). One participant thought a psychologist needs to have personal experience and should master the concept of forgiveness themselves.

Domain: Reasons for Not Working on Forgiveness in Praxis

Reasons for Not Working on Forgiveness in Praxis captures the responses of psychologists who do not work on forgiveness in their praxis ($n = 18$). The most common reason for not working on forgiveness was *Lack of Information on Working with Forgiveness* (39%). One participant (P56, woman), for example, stated that she had "*been thinking about working with forgiveness for some time but don't know how to work with it.*" Other psychologists do not work with forgiveness because of a *different work focus* (22%) or because their clients *have no need for forgiveness* (22%). Finally, seven participants had not received any psychotherapeutic training. Among those who had received training, human-centered therapy ($n = 4$) and cognitive-behavioral therapy ($n = 3$) were the most common types of training. Two participants who had received human-centered therapy training stated that they did not work on forgiveness because their therapy work was non-directive (e.g., P22, man: "*Not specifically... I work on it as I do other issues the client brings up... I don't direct the therapeutic process. I can feel the client's needs, experiences of forgiveness and I stay with it the way I can handle it with the client*").

(iii) Q3: What factors do psychologists' think enter into the client's process of forgiving?

For the third research question, we created two domains, *Factors Helping Forgiveness* and *Factors blocking forgiveness*. Many factors emerged but many of them were referenced by a small number of participants. Within both domains, *Client-side Factors* was the most common category and psychologists primarily mentioned personality qualities. Helpful factors (67%) included personality qualities such as the ability to engage in self-reflection (34%), higher self-esteem (22%), higher personal maturity and personality integration (10%), and the

ability to communicate openly (5%) or to work on one's ego (3%). Subcategories represented by only one participant were lower neuroticism, higher extraversion, non-conflict, and resilience. According to 20% of participants, religiosity or a philosophy of life can also help a person forgive.

Personality factors blocking forgiveness (56%) are egoism, narcissism (17%), low self-esteem (9%), rigidity (9%), insufficient self-reflection (8%), but also bitterness (6%) and immaturity and lack of personality integration (6%). Less represented subcategories were irresponsibility, lack of discipline, neuroticism, antisocial personality, and perfectionism.

Psychologists mentioned various emotional factors that block forgiveness (56%), especially fear, distrust, reluctance, anger, emotion suppression, remorse, feelings of guilt, and the need for revenge. By contrast, various emotional factors (28%) can help a person to forgive. For example, psychologists referenced experiencing prosocial qualities (13%) such as greater empathy and compassion. Other helpful factors included feeling and expressing negative emotions, dissatisfaction and fatigue, desire for peace, and absence of fear.

Some psychologists also mentioned client motivation (13%) as an important factor in forgiveness, as well as previous experiences of hurt and forgiveness (9%). Qualities such as openness, respect, intelligence, hope, current mood, and health are also helpful in forgiving. On the other hand, forgiveness can be negatively influenced by clients' assumptions, cognitive schemas, lower intellect, psychopathology, actual mood, and health status.

Besides the personality and emotional factors, psychologists mentioned that it was important for the client to have the support of their therapist (20%) and social circle (17%), since lack of resources, a poor social network, and coercion from the therapist can negatively influence forgiveness. Sometimes, *Situational Factors* (11%) play a role in forgiveness, too. It may be easier to forgive when more time has passed since the hurt or when the offender apologizes, and harder to forgive when a person experiences the situations that remind them of the offence.

(iv) Q4: What do psychologists think the consequences of forgiveness are for clients?

The fourth research question was reflected in a domain called *Consequences of Forgiveness for Clients*. More than half the participants (55%) mentioned the *Health Consequences of Forgiveness* – improved physical condition and health (38%) but also mental state and health (34%), and especially improved well-being. Reduced anxiety, improved quality of life and a positive influence on psychopathology were also mentioned.

Forgiveness seems to have important *Personality Consequences* (47%), especially in terms of higher self-esteem and self-acceptance (34%), but also better insights, greater acceptance of situations, and personal maturity. The third most common category was *Emotional Consequences* (45%), mostly experienced as relief (28%; e.g., P47; woman: “*reduction in strong emotions can lead to mental relief*”), increased peace and serenity, freedom, increased empathy and compassion, trust and gratitude. The *Relational Consequences* of forgiveness were stressed by 27% of participants: forgiveness can improve close relationships or help create authentic relationships. A less common, but important, category is *Emphasizing the negative consequences of unforgiveness* (8%). One participant (P36, woman), for example, described it thus: “*The client then struggles with themselves, their self-hate deepens ... and this is the source of depression, anxiety, psychosomatic difficulties, relationship problems.*”

(v) Q5: What ability do psychologists have to forgive?

In the fifth research question, we focused on *analyzing the role of forgiveness in psychologists' lives* and derived from this the *Psychologists' Perception of their Ability to Forgive* domain. Most of the participants (63%) thought forgiveness was an important part of life. One respondent (P8, woman) said that *"hurts are necessary in close relationships and without forgiveness there would be no relationships."* 39% of psychologists work on improving their ability to forgive (e.g., P51, woman, *"I'm trying to develop it and I'm learning to work on my expectations"*). One psychologist (P12, woman) stated that her clients' strength helped her because *"...if we can do it together, I can do it alone – my clients help me a lot even if they do not know it."* Some participants thought that their ability to forgive improved with age, while others stressed that it was a lifelong process as there are always moments when we need to decide whether to forgive and sometimes it is even necessary to forgive repeatedly (e.g., P42, woman *"I have found that in some situations forgiving only once is not enough but needs to be repeated. If it is necessary to forgive someone or something new and I am aware that it is necessary to forgive, then I grieve and fight against it for a while, I resist, but after a while I do it and it always has a healing effect on me"*).

Just over a third (34%) of psychologists thought their *ability to forgive was adequate* (e.g., P40, man: *"I'm relatively good at forgiving others...I would say that it is not that bad even though I still have a lot to work on"*). Also, 26% participants thought their ability was *affected by time and the context*; for example, by the severity of the hurt (e.g., P56; woman: *"Depending on how much I have been affected by the thing I'm supposed to forgive. The more it affects me, the harder it is for me"*).

In our sample there were also some psychologists (12%) who thought forgiving was very *difficult* or thought that self-forgiveness was much harder to achieve than forgiving others. On the other hand, 10% of participants thought they had a *high ability to forgive* and claimed that they could forgive almost anything.

Furthermore, 7% of respondents thought that there is a scope for improvement and only one respondent does not feel the need to forgive in their life.

Typical case of a psychologist in our research sample

To illustrate how psychologists perceive forgiveness and work on it in practice, we have created the typical case of a psychologist, which is characteristic of our sample. The typical psychologist is someone whose associations with forgiveness and self-forgiveness are particularly emotional, either positive (e.g., love, peace, self-love) or negative (e.g., suffering, pain, anger, guilt, failure). They define forgiveness as acceptance (of the transgression, offender, or themselves) or letting go (of the offender, transgression, or negative emotions). For the typical psychologist this construct consists mainly of cognitive and emotional qualities. The typical psychologist considers forgiveness to be an internal, intrapersonal process, in which client factors (such as personality factors) intervene. Their forgiveness work includes working on the client's cognitive and emotional qualities, or the use of various experiential and projective techniques. Forgiveness is not only an important part of their own life, but also an important part of the counseling and therapeutic process. When working on forgiveness, the typical psychologist's role is to accompany, help, and support clients on their journey. This has only positive consequences, including improved mental and physical health and relationships, relief, or higher self-esteem and self-acceptance. Their work on this relates mainly to relationship problems and personal problems, such as the loss of a loved one, the person's relationship with themselves, and feelings of guilt.

Discussion

Forgiveness and its Use in Praxis

The first goal of our research was to analyze the meaning and use of forgiveness in counseling and therapy from the psychologist's point of view. Participants most often defined forgiveness as acceptance, whether that was acceptance of the transgression or accepting that the other person or they themselves were imperfect human beings, which is, of course, the most difficult part of forgiving (Worthington, 2006).

Definitions of forgiveness were consistent with those identified in previous research (e.g., Freedman & Chang, 2010; Ikiz et al., 2015; Younger et al., 2004). Participants defined forgiveness primarily as acceptance of the harm, oneself, or the offender, or as letting go of the offender, the transgression, or the negative emotions. Although the definitions in the previous literature primarily concern transformation and letting go of negative emotions or the desire for revenge (Enright et al., 1991; McCullough, et al., 1997; Thompson et al., 2005), accepting the offender, the pain, and the consequences of the offense is also an important part of the process (Enright & The Human Development Study Group, 1996). Furthermore, acceptance has proven to be the most common forgiveness association in bereaved parents, who may find it important to accept the unalterable situation of loss (Záhorcová et al., 2020).

Many participants thought forgiving was also a free and conscious decision, which is in line with the definition of Scobie and Scobie (1998), but also those of future counselors in the research by Ikiz et al. (2015). However, the decision to forgive is not the same as emotional forgiveness and therefore does not necessarily entail the replacement or absence of negative emotions (Worthington & Scherer, 2004).

According to the literature, forgiveness includes both emotional and cognitive, as well as behavioral qualities (Enright et al., 1991; Thompson et al., 2005), but these were not represented in our research. Instead, psychologists perceived forgiveness more at the cognitive level (e.g., rational reassessment, processing the situation or emotions) and at the level of positive consequences and changes (e.g., liberation, relief, peace, healing, a reduction in the negative consequences of the offense). Similarly, in previous research, forgiveness has been defined in terms of the consequences of forgiving, particularly achieving peace (Záhorcová et al., 2020; Záhorcová & Zelenáková, 2021), liberation (Záhorcová & Zelenáková, 2021), and healing (Záhorcová et al., 2020).

Although forgiving is not the same as forgetting (Fincham et al., 2005) or justifying the offense and does not require reconciliation with the offender (Enright et al., 1991), three participants in our research mentioned reconciliation with the offender, and one participant defined forgiveness as excusing the offense. However, in our research, fewer psychologists had misconceptions about forgiveness compared to psychology students (Kearns & Fincham, 2004), counselor trainees (Ikiz, et al., 2015), or lay people (Freedman & Chang, 2010; Friesen & Fletcher, 2007; Kanz, 2000; Lawler-Row et al., 2007; Younger et al., 2004). It seems that psychologists who have undergone psychotherapy training (either courses or self-experience training) and have encountered a range of different client life situations in their work may have a more accurate picture of forgiveness compared to the general population or counselor trainees. Overall, further qualitative research involving various types of populations is needed to obtain more results. For example, future research could provide insights into the way forgiveness is perceived by various types of populations and identify potential differences among them based on profession or background.

Forgiveness Work in Praxis

Although there are many models of forgiveness (e.g., Enright's process model of forgiveness, Worthington's REACH model), the psychologists in our research did not mention any of them. Although some participants have ranked the order of the individual steps of forgiveness work, they generally do not work systematically on forgiveness and do not have complete knowledge of the key principles, which is in line with the research of Konstam et al. (2000). This could be partly explained by the lack of interest in, and lack of scientific literature on, forgiveness in Slovakia.

In our research, psychologists mainly worked on cognitions, and in general, most activities are client-centered, as indicated in the research by Konstam et al. (2000). It seems that psychologists work primarily on analyzing the situation, on the client understanding and accepting both the offense and themselves, on taking responsibility, and on forgiving. As in research on marriage and family therapists (Olmstead et al., 2009), some of our participants highlighted the need for psychoeducation. Clients should know what forgiveness is and is not and should be able to distinguish it from other constructs (Freedman & Zarifkar, 2016); for example, from condoning, forgetting, excusing, justifying the offense, or reconciling with the offender. Although the cognitive aspects of forgiveness work seem to be the most important, it needs to be said that this result may be influenced by the type of psychotherapeutic training, as our research group mostly focused on systemic approaches and cognitive-behavioral psychotherapy, which largely work with cognitive aspects.

The results of our research show that psychologists target their forgiveness work primarily at the intrapersonal level, i.e., the client's internal experience (Konstam et al., 2000). Likewise, in the emotional area, their primary focus was on the expression, normalization, and processing of the client's emotions. By contrast, working with empathy and compassion is very under-represented in our sample, even though these are considered to be some of the most important parts of the forgiveness process (Enright, 2001; Klatt & Enright, 2011; Worthington, 2006). One of the reasons for this finding may be the lack of distinction between interpersonal forgiveness and self-forgiveness in our questionnaire items. However, it is also possible that, given that psychologists are not specifically trained in forgiveness work, they may lack some important knowledge of forgiveness work, such as working on fostering empathy and compassion toward the offender.

Many psychologists use experiential and projective techniques in their work, such as writing uncensored letters, symbolic techniques, or role-playing games, which several authors recommend (e.g., Greenberg et al., 2008; Hong & Jacinto, 2012). Our important research finding is the wide applicability of forgiveness work. This is consistent with the growing number of intervention research studies that cover different types of populations (e.g., Akhtar & Barlow, 2018; Cornish & Wade, 2015; Freedman & Enright, 1996; Reed & Enright, 2006). The psychologists in our research used forgiveness mostly when dealing with relational and personal problems, trauma, and psychopathology.

The Process of Forgiveness in Clients

Psychologists in our study also described the forgiveness process in clients, as well as the cognitive and emotional qualities emerging during the process. At the very beginning participants may deny they have a problem, which is in line with Enright's model of forgiveness (Enright et al., 1991). At the same time, however, the clients experience negative emotions which they gradually release through catharsis. An important step is realizing and admitting that the offense has occurred, as that is an essential part of working on forgiveness (Enright et al., 1991; Goertzen, 2003). According to our participants, in addition to acknowledging the

existence of the offense, it is important clients accept that the injustice can never be changed or undone, and that they accept both themselves and the offenders. Enright and the Human Development Study Group (1996) emphasize that it is important to accept and absorb pain so they do not transfer pain and other negative emotions to other people.

Our participants, as well as lay people (Záhorcová & Zelenáková, 2021), people who had experienced self-forgiveness (Kirshenbaum, 2008), and people on interpersonal forgiveness interventions (Browne, 2009) thought the decision to forgive the person was a key aspect of the process. But it does not necessarily lead to emotional forgiveness (Worthington & Scherer, 2004) as these are not identical concepts (Freedman & Zarifkar, 2016). Exhaustion stemming from the state of unforgiveness and the need to get rid of negative emotions or physical discomfort can contribute to the motivation to forgive (Browne, 2009).

In the process of forgiving, the perceived offense is reframed and the negative reactions to the offender are transformed into neutral or positive reactions (Thompson et al., 2005). The clients gradually start to understand the situation and are able to look at it from a different perspective. Besides the cognitive restructuring, there are also changes in emotions, and clients relinquish negative emotions and the right to take revenge (Enright et al., 1991). In the end, according to the authors, clients experience the positive consequences of forgiveness, which in our research were mainly positive emotions such as relief, feelings of peace, or joy.

According to several of the psychologists in our research, the process of forgiving varies from individual to individual, as indicated by qualitative research that has focused on experiences of self-forgiveness (Kirshenbaum, 2008) and interpersonal forgiveness (Browne, 2009) in lay people. We agree with Enright and the Human Development Study Group (1996) that forgiving is a flexible process in which the steps may occur in a different order and in which some may not occur at all.

Psychologist's Role in the Forgiveness Process

Helping clients overcome hurtful experiences is an important psychotherapeutic goal. According to most of the participants in our research, the psychologist accompanies clients through the forgiveness process (Browne, 2009), with the client's needs and goals always coming first (Freedman, 1998). This means that clients should under no circumstances be rushed or forced into forgiving. On the contrary, they should voluntarily choose to forgive when they are ready to do so (Klatt & Enright, 2011). Therefore, we believe that psychologists working with forgiving should have certain qualities: above all they should guide the whole process sensitively and respect the client's state of readiness.

Some participants in our research said that psychologists should provide help and support to clients (Ikiz et al., 2015) and, given the often-mentioned need to change cognitions and emotions, they should facilitate the process and offer/reveal new insights to the client. Similarly, Freedman and Zarifkar (2016) say that psychologists could introduce this approach to the client, support them in their decision to forgive, and educate them about their journey and the benefits of forgiveness.

Despite the results of Konstam et al. (2000) demonstrating lower rates of positive attitudes toward forgiveness in counselors of a psychodynamic orientation compared to those of a cognitive, behavioral, or systemic family orientation, the psychologists with psychodynamic training in our research did work with forgiveness. On the other hand, it seems that psychologists who have no training or focus on Rogers's person-centered therapy, which places the overall direction of the client's life and therapy into the client's hands (Bozarth, 2012), do not work with forgiveness. Since participants in the different psychotherapy groups were unequally represented in our research, there is a need for further research on the differences among psychotherapeutic approaches.

Factors of Forgiveness

Another of our research goals was to analyze the factors affecting the forgiveness process from the perspective of psychologists. The results suggest that psychologists perceive forgiveness primarily as an intrapersonal experience or process affected by client-side factors. This contrasts with the qualitative research of Ikiz et al. (2015), in which offender-side factors proved to be most frequent. In our research, only the absence of an apology and remorse emerged as blocking factors, whereas the offender apologizing was a helpful factor. Both of these are related to forgiveness (Bachman & Guerrero, 2006). The two categories applied to only one client, whereas lay people thought apologizing and admitting the mistake were the most important helpful factors (Záhorcová & Zelenáková, 2021).

Repetition of the offense, which was an important factor in the research on counselor trainees (Ikiz et al., 2015) and lay people (Záhorcová & Zelenáková, 2021), was represented to a very small extent in our research. Similarly, relational factors related to forgiveness, such as satisfaction, degree of commitment (McCullough et al., 1998), and the importance of the relationship with the offender, which were the most numerous motivational factors of forgiveness in the research by Younger et al. (2004), did not appear in our research. The reason for these differences may be the fact that we did not distinguish between interpersonal forgiveness and self-forgiveness in the questions asked. Therefore, we cannot determine how many psychologists were referring to interpersonal forgiveness and how many self-forgiveness, where we would expect client-side factors to dominate given the nature of the phenomenon. The differences between our research and previous research can also be explained by question design or sample selection. The psychologists in our research had at least six months' experience, whereas the research group in the research by Ikiz et al. (2015) comprised counselor trainees and the research by Younger et al. (2004) comprised university students.

According to our participants, various positive and prosocial qualities and fewer negative personality qualities and experiences help the person to forgive, which is in line with previous quantitative and qualitative research. For example, similarly to Glaeser's research (2008), the ability to self-reflect and personality maturity are important, helpful factors. Another significant category is self-esteem, which promotes forgiveness, as previous research has shown (Yalçın et al., 2017). Consistent with Glaeser's research (2008), personality qualities such as narcissism, rigidity, and, for one participant, perfectionism, were present. Our study has similarly proved that being trapped in anger, as well as feelings of guilt, fear, distrust, or suppressing emotions, blocks forgiveness.

In line with the research of Ayten and Ferhan (2016), who confirmed the relationship between forgiveness and religiosity, the religiosity and philosophy of life subcategory was a helpful factor for 20% of our participants. Similar results were found in qualitative research by Younger et al. (2004), in which 15% of participants belonging to the general population considered religious and spiritual beliefs as motivators for forgiveness, and in Ikiz et al. (2015), who found that life philosophy was represented more than religiosity among counselor trainees. The helpful factors stressed by our participants were safety and counselor's style (Glaeser, 2008), as well as the therapeutic relationship and the need for trust, help, support, and acceptance from the therapist, whereas coercion can prevent forgiveness. According to our research, other resources seem to be important for clients as well, especially social support, which can contribute positively to forgiveness (Akhtar et al., 2017).

Forgiveness Consequences for Clients

As part of another research goal – to analyze psychologists' views of the consequences of forgiveness for clients – we found that participants were aware of the positive forgiveness consequences, mainly in terms of the client's health. Quantitative research suggests a stronger relationship between forgiveness and mental health than physical health (Lee & Enright, 2019; Rasmussen et al., 2019), whereas qualitative research involving lay people has emphasized the psychological consequences (e.g., Browne, 2009; Raj et al., 2016). The participants of our research mentioned both categories to approximately the same extent. These differences may be down to the different research groups, as our research group consisted of psychologists who were describing phenomena in clients, whereas the other qualitative studies described the immediate experiences of the participants.

Achieving forgiveness means going through a process that results in relief and freedom (Browne, 2009), and this was mentioned by our research participants. In line with a study on lay people (Akhtar et al., 2017), other positive emotional consequences emerged, such as greater peace, serenity, empathy, compassion, or satisfaction. Also, we found support for previous research (Kirshenbaum, 2008; Raj et al., 2016) that showed that forgiveness can reduce anxiety. The decrease in other negative emotions was not mentioned as a consequence, but mainly as part of the forgiveness process.

It seems that the same mechanisms behind the transformation of thoughts and beliefs in individuals who have forgiven themselves (Kirshenbaum, 2008) can be found in interpersonal forgiveness. This is indicated in our finding that participants thought accepting the situation (Browne, 2009; Morgan, 2017) and better insights were a consequence of forgiveness. Changes in the person's relationship toward themselves are also important and manifest mainly in higher self-esteem and self-acceptance; these were also emphasized by widowed women in research by Raj et al. (2016).

From the perspectives of our participants, clients who go through the process of forgiving gain an opportunity to break away from the past, move forward, heal existing relationships, and create new ones, but achieving these steps may be blocked by negative emotions such as anger and resentment (Akhtar et al., 2017; Browne, 2009) or unrealistic expectations (Browne, 2009) that are typically associated with unforgiveness. The negative consequences of not forgiving, especially negative emotions, the inability to move forward, and mental health problems, were also highlighted by several participants in our research.

Psychologists' Ability to Forgive

The last of our research goals was to analyze psychologists' perceptions of their own ability to forgive. According to the results, many psychologists did not have a high ability to forgive, with up to 39% of the participants working on this and making conscious attempts at improvement. The responses of other participants, who thought forgiveness was challenging, support the claim that forgiveness is a complex process that requires hard work and sufficient time (Freedman & Chang, 2010). For several participants, forgiving others was easier than forgiving themselves, as compassion and reconciliation with oneself are challenging concepts, and many people are generally harder on themselves than on others (Enright & The Human Development Study Group, 1996).

Interestingly, in the qualitative research on counselor trainees, the participants did not state that there was a need to work on this ability (Ikiz et al., 2015). We believe this may be influenced by the fact that they had a higher number of psychologists who were good at forgiving and a lower number of psychologists who were adequate than was the case in our research. At the same time, the fact that the participants in our research have their own practices

and had received psychotherapeutic or self-experience training may play a role here. It may have brought the need for forgiveness work to the surface. Compared to previous research (Ikiz et al., 2015), it is clear that in our research the ability to forgive is less dependent on other factors, and similarly, only one participant did not feel the need to forgive. In interpreting these results, we should bear in mind that these are the participants' subjective statements, and quantitative research could obtain different results.

Although most participants did have a high ability to forgive, the vast majority of the sample thought forgiveness was an important part of their lives. The results show that the participants had largely positive attitudes toward forgiveness and, although helping professionals with more positive attitudes toward forgiveness have a greater tendency to work with the construct in practice (Konstam et al., 2000), in our research, most psychologists who did not work with forgiveness considered it an important part of their lives. In our opinion, the reasons our participants did not work with forgiveness – insufficient information about the concept, a different work focus, and the fact that their clients had no need to forgive – helps explain this trend. In conclusion, the psychologists in our research sample thought that forgiveness was an important part of both their own lives and the psychotherapeutic and counseling process itself.

Limitations

The present research study has to be interpreted in light of its limitations. Firstly, the sample size, although typical for the CQR-m method, does not allow us to generalize the results to the entire population of psychologists. Secondly, the wide range of years of participants' psychological praxis may have influenced attitudes toward forgiveness and forgiveness work. Thirdly, the questionnaire could have been completed by psychologists that considered forgiveness an interesting topic and had more positive attitudes towards it.

In addition, most of the open-ended questions did not distinguish between interpersonal forgiveness and self-forgiveness. Another limiting factor is the uneven distribution of women and men and the fact that most of our participants worked with systemic approaches and cognitive-behavioral psychotherapy. Therefore, future research in this area could focus on differences in forgiveness perceptions based on gender and on the psychologists' psychotherapeutic backgrounds. It could also be interesting to examine the differences between forgiveness and self-forgiveness work.

We think it is possible that some of our research findings may have been influenced by cultural factors. For example, our participants perceived forgiveness more as an intrapersonal process affected by client-side factors than as an interpersonal process affected by offender-side factors. Generally, they did not work with empathy and compassion toward the offenders. We presume that the individualistic culture in Slovakia may play a role here. When the stress is on the individual, psychologists may pursue more client-oriented work, centered on processing their own cognitions and emotions rather than developing understanding of the offender's cognitions and emotions. Another cultural factor that may have influenced our results is the religious affiliation of our participants. 65% of our participants identified as Christians and the predominant religion in Slovakia is Christianity. The religiosity of our participants can be seen in the fact that the majority of the psychologists in our sample (63%) considered forgiveness to be an important part of their lives. Also, 20% of the sample considered religiosity an important factor in helping a client to forgive.

Suggestions for Future Research

Our research demonstrated that there is a need for special forgiveness training, as the psychologists in our sample lacked some important knowledge about forgiveness work. Moreover, they showed great interest in such training. Therefore, we suggest that in addition to creating forgiveness-specific training, psychotherapeutic training in general could address the topic of forgiveness and emphasize different ways of working with the construct in practice. We think that for practitioners interested in using forgiveness work with clients, forgiveness training should focus on the theoretical background, practical activities, and raising awareness of the kinds of situations in which targeting forgiveness work is appropriate. For example, we believe that trainees could benefit from case studies that offer insights into the client's specific needs and forgiveness processes, as well as from role playing and other interactive learning techniques.

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