

## Journey of forgiveness: Forgiveness therapy for orphaned adolescents

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**Abstract**

Female adolescents living in orphanages mostly have experienced adverse childhood experiences (ACEs) affecting their lifetime development. In order to recover from ACEs exposure, individual should be going through forgiveness. Hence, the intervention of this study aims to elicit forgiveness and investigate its effect on psychological well-being. There are 15 female orphaned adolescents participating in this study and experiencing at least one ACEs using convenience sampling. Intervention in the form of the Forgiveness Therapy module consists of three main sessions and two follow-up sessions. Measures toward changes in emotional forgiveness were conducted at three time points, and measures on psychological well-being were conducted at two time points. In addition to the Emotional Forgiveness Scale and Psychological Well-Being as quantitative measures, qualitative data were also collected. Results from repeated measure ANOVA showed positive effect of this intervention toward emotional forgiveness over time. Meanwhile, there is no significant improvement in psychological well-being even though the time difference between measures was set more significantly than the measures on emotional forgiveness.

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### INTRODUCTION

Children in Orphanages are more vulnerable to experiencing Adverse Childhood Experiences (ACEs). Previous studies in developing countries indicated that children and teens in orphanages are more vulnerable to coming in contact with ACEs and other traumatic events caused by a lack of family protection (Ahmad et al., 2005; Escueta et al., 2014). During preliminary interviews at the orphanage, neglect is not the only one of the ACEs they have experienced. Physical and sexual abuse are other forms of ACEs they may encounter. This exposure to ACEs then negatively affects the level of children and adolescents' psychological well-being (Herzog & Schmahl, 2018). Difficulties in some aspects of Psychological Well Being (PWB) (especially having positive relationships with others) were mainly caused by unfinished business, including anger and negative feelings for the wrongdoer (Salifu Yendork et al., 2022; Tsabar, 2021). Hence, forgiveness therapy might be helpful for the orphanage, especially to increase one's level of psychological well-being.

*Forgiveness* as a psychological construct broadly is defined as a process of decreasing negative resentment-based emotions, motivations, and cognition, along with enhanced positive

emotions (Worthington, Hook, et al., 2007; Worthington & Wade, 2019). Worthington (2007) describes two types of forgiveness: decisional forgiveness and emotional forgiveness. *Decisional forgiveness* is defined as the behavioral intention to resist an unforgiving stance and to alter responses to the offender, while emotional forgiveness is described as the transformation of negative unforgiving emotions with positive emotions toward the offenders.

As most of the orphanage residences were experiencing childhood trauma and were needed well-being improvements, full forgiveness which then proposed as emotional forgiveness appears to be more important in psychological intervention (Worthington & Wade, 2019). Taking gender into account, previous research found that females showed more vulnerability to the long-term effect of trauma, specifically toward their well-being (Ernawati et al., 2022; Thomas et al., 2022). Thus, intervention mainly targeting emotional forgiveness is necessary to enhance the well-being of female orphanage residents.

Forgiveness therapy, as the intervention of this paper, aims to help the participants emotionally forgive the wrongdoer and gain a higher level of psychological well-being. There is some evidence supporting this idea. Firstly, forgiveness was found to mediate the relationship between victims' ratings of the offense and their level of PWB, specifically through negative feelings (the victim's ability to leave negative thoughts and feelings associated with the offense) (de la Fuente-Anuncibay et al., 2021). Apart from that, previous studies found that emotional forgiveness particularly directly affects health and greater well-being (Choi et al., 2016; Worthington, Witvliet, et al., 2007; Yalçın & Malkoç, 2015). Furthermore, forgiveness therapy, proven by the meta-analysis research, is able to improve mental health and subjective well-being (Akhtar & Barlow, 2018; Harper et al., 2014). Other literatures presenting a higher level of forgiveness could help adolescents have better attribution and further attain a higher level of well-being (Lichtenfeld et al., 2019; Wulandari & Megawati, 2020). Hence, forgiveness therapy should be considered a potentially effective method of helping people who have experienced various forms of violence to improve their psychological health.

The intervention procedures are a self-directed workbook based on R.E.A.C.H. model that was adjusted to the Indonesian culture. Previous research conducted by Lin et al. (2014) among female youth has given some evidence that forgiveness therapy using R.E.A.C.H. has shown to be effective to improve emotional forgiveness, and the improvement was still maintained until one week after. In addition, the use of self-directed workbook can enhance the effects of forgiveness therapy on emotional forgiveness, as presented by Harper et al. (2014). By participating in the intervention, it was hypothesized that there would be an enhancement in both emotional forgiveness and psychological well-being among female adolescents living in orphanages.

## **METHOD**

### **Research Design**

A quasi-experimental design was used in this research. Participants attended all sessions of the intervention conducted in the orphanage house. Several instruments were administered to investigate the Adverse Childhood Experience, progress on the Psychological Well-Being level, also Emotional Forgiveness level of all the participants. The measure of emotional forgiveness was conducted three times: first, before the session as a pre-test; second, after the session as a post-test; and finally, as a follow-up session (2 weeks) after the session. The PWB measurement conducted twice (at pre session and follow up session). Besides, qualitative data collection method was conducted to obtain deeper and integrated data. This research has been conducted in concordance with the Declaration of Helsinki of ethical principles for research involving humans.

### **Research Participants**

There are 13 female residents (between the ages of) between the ages of 8 to 18 years old involved in this study. Participants were all females recruited from Private Christian Orphanage in Semarang City, Indonesia. Informed consent was signed by the participants and the guards as proof of agreement to attend the whole therapy session.

### **Measures**

There are three instruments all participants completed. First instrument is the Adverse Childhood Experiences Questionnaire (Felitti et al., 1998) translated into Bahasa Indonesia (Widyorini et al., 2022). This measure is used to investigate seven categories of ACEs experienced by the participants including physical abuse, verbal abuse, sexual abuse/harassment, living with family members who were substance abusers, violent family member, and mentally ill or ever-imprisoned family members.

The second measure was Psychological Well-Being Scale (C. Ryff et al., 2017) based on Ryff proposed framework. This 18-item scale instrument originated in English and developed for clinical use in USA, which was then adapted into Bahasa Indonesia (Wijaya et al., 2021). Bahasa Indonesia version of this instrument was valid (Pearson's product-moment  $r = .30 - .71$ ;  $p = .000 - .023$ ), and this final 13-item scale was reliable (Cronbach's alpha  $\alpha = .774$ ) PWB 18-items scale investigates several aspects which are environmental mastery, positive relationships, autonomy, personal growth, self-acceptance, and life purpose.

In order to measure the effects of this therapy on forgiveness, Indonesian version of Emotional Forgiveness Scale (EFS) was administered to all participants. This scale was first developed by (Worthington, Hook, et al., 2007) who also developed the R.E.A.C.H. framework of forgiveness therapy. EFS consists of 8 items which investigate one's presence of positive

emotion and reduction of negative emotion toward the wrongdoer. In addition, researchers also conducted a focused group discussion to gather data of the participants' experience during this therapy.

### Intervention Procedures

The intervention module used in this study was based on the principle from Rashid & P. Seligman (2018) and (Worthington, 2016), consisting of three main sessions and two follow-up sessions (shown in **Table 1**)

**Table 1.** Intervention Details

Session	Description
<b>Pre-Session</b>	This session started with pre-measure and followed by elaboration about effects of ACEs also the benefit of forgiveness
<b>Session 1: Introduction of Forgiveness &amp; Preparation</b>	Participants were asked to do personal journaling on the Handbook consisted three main topics: Definition of Forgiveness, Importance of Forgiveness and Self Preparation to Forgive
<b>Session 2: Forgiveness &amp; Action Plan</b>	In this session participants were asked to proceed with the forgiveness decision making using steps in the Handbook based on R.E.A.C.H concept. Participants were also asked to create forgiveness action plan for 7 days. Post-measure was conducted on the last part of this session.
<b>Action Phase 1</b>	During 7 days of Action Phase, participants were asked to make personal journal about their progress and supervised by Researcher through WhatsApp.
<b>Follow-Up Session 1</b>	Participants were asked to personally reflect their progress based on the daily journal. This reflection focusses on the obstacle and experienced changes. Material about self-forgiveness also presented to the participants.
<b>Action Phase 2</b>	During this week, participants were asked to proceed their plan and make daily personal journal to monitor the progress
<b>Follow-Up Session 2</b>	In group, participants' experiences of undergoing forgiveness were shared as verbal evaluation. Follow-up measure was conducted in this last session.

### Data Analysis Technique

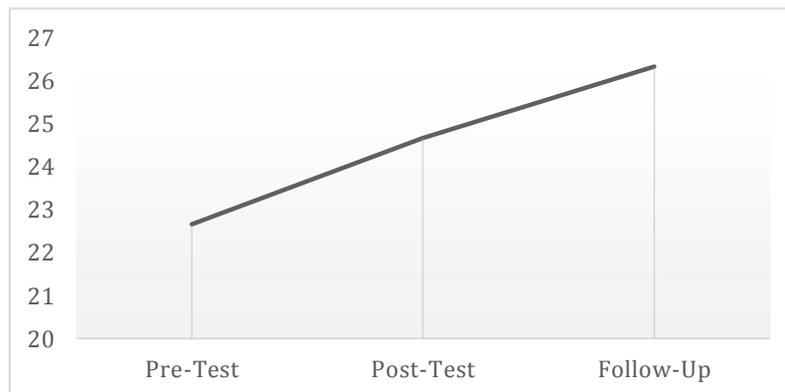
Quantitative data obtained in this study were analyzed using IBM SPSS Statistics ver.26. Since there are varied data obtained from this research, the researcher decided to conduct several statistical analysis techniques to process all the data. Descriptive analysis was used to analyze demographic data, ACEs experienced by the participants, PWB level, and Emotional Forgiveness level at each time point. Repeated measures ANOVA analysis was conducted to investigate the effects of this forgiveness therapy on emotional forgiveness. Data of PWB obtained were analyzed using Paired sample T-Test. Qualitative data were also processed using thematic analysis techniques in order to present more insight from forgiveness therapy.

## RESULTS AND DISCUSSION

Following the data collection, the Saphiro Wilk normality test was conducted among the residual to investigate the data distribution. The results show that all variables are normally distributed with  $p$  value  $> .05$ . Since repeated measures ANOVA will be used to investigate the effect of this intervention, a sphericity test was also conducted using Mauchly’s Test. It was found that the data of this research meet the assumption of variance homogeneity [ $\epsilon(2) = .89, p > .05$ ].

**Tabel 2.** Descriptive Analysis of Variables

Variables		Means	Std. Dev
Age		15.33	2.13
ACEs		2.08	1.83
EF	Pretest	22.67	5.77
	Posttest	24.67	5.11
	Follow Up	26.33	4.376
PWB	Pretest	83.58	8.393
	Follow Up	88.25	9.236



**Figure 1.** Score Difference of Emotional Forgiveness

**Table 2.** shows the descriptive statistic of variables measured in this research. Participants who completed the whole intervention sessions varied by age, ranging from 12 to 18 years old (means = 15.33). Secondly, ACEs score ranged from 1 to 6 (means = 2.08), which means participants were all experiencing different kinds of ACEs and a number of adversities during their childhood. There are some ACEs that the participants have experienced, such as verbal abuse, physical abuse, sexual abuse, emotional neglect, marital dissolution, domestic violence, living with mentally-ill family members, and imprisoned family members.

Respectively to Emotional Forgiveness, measures were conducted at three time points. There is an increase of emotional forgiveness over time, as shown in **Table 2** and **Figure 1**.

Further analysis was conducted on the data to investigate the effects of forgiveness therapy over time using repeated measure ANOVA. A significant effect of this intervention was found [ $F(2) = 4.049$  ,  $p = .032$ ].

In addition, a pairwise comparison with respect to time was conducted. Statistical results show no significant difference between the pre-test and post-test (2.00 ,  $p = .360$ ). The same results also illustrate a similar condition from the post-test to the follow-up (1.67 ,  $p = .861$ ). However, a statistically significant mean difference was found between the pre-test and follow-up (3.67 ,  $p = .029$ ).

**Table 3.** Mean Difference of Emotional Forgiveness

	Pre-Test	Post-Test	Follow Up
Pre-Test		2.00	3.67**
Post-Test			1.67
Follow Up			

\*\* :  $p < .05$

Psychological Well-Being is measured at two-time points: the first time point was prior to the intervention, and the second one was completed after follow-up session. In order to investigate the effect of this intervention on the level of PWB, paired sample t-test was conducted. Statistical result shows that there is no significant difference found with respect to PWB,  $t(11) = 1.44$ ,  $p > .05$ .

**Table 4.** Mean Difference of PWB (pre-follow up)

t	Std. Dev	df	p
1.44	11.228	11	.178

In addition to the quantitative data, qualitative data was collected to provide more clarity on the emotional state of the participants. There are several keywords expressing the feelings of participants toward the wrongdoer prior to the intervention which are: hatred (*benci*), avoidance (*tidak mau bertemu*), anger (*marah, kesal, jengkel*), and grudge (*dendam*). Answering the question about how they feel after the intervention/therapy, several varied keywords were mentioned such as: in the process of forgiving (*sudah mulai mengampuni, mau mengampuni walau masih susah*), have forgiven (*sudah mengampuni*), sense of relief (*lega*), and some stated no changes (*biasa saja, belum berubah, masih sama*). The third question is about the changes in their life after learning to forgive, and some of their responses are having new perspective (*mencoba lebih memahami orang lain, jadi berpikir dengan cara yang berbeda terhadap orang yang dianggap jahat*) and some of them even feel peaceful (*merasa damai, lebih tenang dan damai*)

## Discussion

Orphaned adolescents in this institution experienced varied ACEs, and they are from different regions of Indonesia. Specifically, several forms of ACEs are experienced by orphaned adolescents, such as verbal abuse, physical abuse, sexual abuse, emotional neglect, marital dissolution, domestic violence, and living with mentally ill or ever-imprisoned family members.

Those are several ACEs reported through the instrument; not all participants have experienced all kinds of ACEs as mentioned. However, there are still some possibilities of unrealized or unreported cases since participants come from diverse cultural backgrounds and might not be fully aware of experiencing ACEs due to how their culture perceives ACEs (Baumont et al., 2020; Salma et al., 2019; Widyorini et al., 2022). Further study on this culture-based perception of ACEs is expected to/ be conducted in the future to address this issue.

Psychological intervention in this study was developed using the principle from Worthington (2016) and Rashid & P. Seligman (2018). The module was arranged to be self-administered and led by a facilitator during the sessions. The results showed improved emotional forgiveness from the pre-test to the follow up session. In addition, qualitative data show changes from negative to positive emotions. Those results are in accordance with the previous findings that Forgiveness therapy using self-administered module and adopting the R.E.A.C.H approach appears to be effective to enhance emotional forgiveness among female adolescents (Harper et al., 2014; Lin et al., 2014). The results are also proven to support the idea from Lin et al., (2014) explaining that cultural background does play an important role on the effect of this therapy. Participants of this study came from Indonesia (although they originated from different areas) with similar background and religion. However, the mean difference is only significant compared to the pre-test and the follow up. This finding concludes that forgiveness takes a considerable amount of time. Based on the research conducted by (Worthington et al., 2000), it is found that the improvement of forgiveness is related to time spent in the therapy. The time between the pre-test and the post-test spent might not be enough for the participants to empathize with the wrongdoer. Hence, the gap between pre-test and follow up could facilitate the participants to promote emotional forgiveness.

The results taken from two-time-point test of PWB in the pre-session and the follow-up session showed no significant difference. It is still considered acceptable since PWB is a result of life changes in the development stages. Considering this condition, improvement might require more time than forgiveness variable measured (C. D. Ryff, 2014; C. D. Ryff & Singer, 2008). However, to ensure this intervention affected PWB, qualitative data was collected through group interviews, and some answers showed changes in several aspects of PWB. Framework from C. D. Ryff (2014) stated that PWB consists of autonomy, environmental

mastery, personal growth, personal relationships, purpose in life, and self-acceptance. There is improvement in the personal relationship since some participants develop more understanding toward others and develop new perspectives towards the wrongdoer. Those changes then might promote a positive relationship of the orphaned adolescents since developing ones is one of challenges the orphaned adolescents may face (Malla et al., 2019; C. D. Ryff, 2014). This positive improvement with respect to positive relationship is likely to facilitate orphaned adolescents to enhance PWB.

## CONCLUSION

This research aims to study the effectiveness of Indonesian self-administered Forgiveness Therapy in improving emotional forgiveness and psychological well-being. The result shows that there is a significant improvement in emotional forgiveness over time. In contrast to improvement in emotional forgiveness, there is no statistically significant enhancement of psychological well-being over time. In conclusion, this version of Indonesian Self-Administered Forgiveness Therapy is effective to improve emotional forgiveness. However, it has a non-significant impact on psychological well-being for a short period of time.

## Suggestions

Even though this experiment shows some good results, there are some limitations with respect to the method of this experiment. First, the time point of emotional forgiveness and psychological well-being are not the same. It was devised in that manner, considering emotional forgiveness is likely to change faster than psychological well-being. However, future studies duplicating this experiment may be taking this issue into account.

Second, this study has no control group since the participants were limited. Study using more significant number of participants should consider a control group design to examine the effect of this intervention further. Lastly, future researchers were suggested to conduct a longitudinal study to provide clarity on the effect of this therapy on psychological well-being. The study could also provide more insight into how long the effects of this therapy would last.

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