ABSTRACT: Forgiveness involves a sense of felt unity with one who has hurt us. From the point of view of development, a sense of unity can be regressive or progressive. It is argued that healthy forgiveness is transpersonal. Healthy and unhealthy forms of forgiveness can be understood by examining the prepersonal, personal, and transpersonal motivations for forgiveness. The central paradox in forgiving is defined as the other needing to be recognized as a different person before there can be a healthy sense of unity. The effects of trauma on the forgiveness process are discussed, as is the role of anger. The “many shores” within psychotherapy for getting to healthy (transpersonal) forgiveness are described.

(God and Job meet after Job has died.)

God  ... I’m going to tell Job why I tortured him
And I trust it won’t be adding to the torture.
I was just showing off to the Devil, Job ... 
(Job takes a few steps pacing.) Do you mind?
(God eyes him anxiously.)

Job  No, no I mustn’t.
’Twas human of You. I expected more
Than I could understand and what I get
Is almost less than I can understand ... 

—From Robert Frost’s, A Masque of Reason¹

INTRODUCTION

With the rise of the positive psychology movement and a greater attention toward spiritual issues within medicine and psychology, a discussion about forgiveness is gaining ground in the psychological and medical literature. A review of Ovid’s psycinfo and medline databases reveals a striking increase in articles, dissertations, and books about forgiveness. When six year periods are examined, from 2000 through 2005, there are 108 publications with a keyword of forgiveness in the medline database and 634 in the psycinfo database. From 1994 through 1999, there were 27 and 234 such publications and from 1988 through 1993, there were 17 and 128 such publications, respectively.

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Forgiveness has of course many contexts. Spiritually, one could feel forgiven or not forgiven by God, or could be forgiving or not forgiving of God. One can also be forgiving or not forgiving of oneself. Forgiveness can be collectively sought or granted by groups. An individual can seek forgiveness or not from another person, can feel forgiven or not forgiven by another person, or can be forgiving or not forgiveness of another person. It is this last context of forgiveness, whether one does or does not forgive another person, which is receiving the most attention in current psychological and medical literature.

Of interest to psychotherapists and to the general public, is the extent to which forgiveness may or may not promote health. There are four reported outcome studies of unilateral forgiveness after interpersonal injury using individual psychotherapy. Freedman and Enright (1996) studied individual psychotherapy with incest survivors using forgiveness as a treatment goal. The study had a waitlist control and an average length of intervention of 14.3 months. The intervention resulted in increased self esteem and hope and forgiveness, and decreased depression and anxiety. Coyle and Enright (1997) in studying a 12 week forgiveness intervention for men hurt by a partner’s abortion, found decreased anxiety, anger, and grief and increased forgiveness after treatment and at 3 month follow up as compared to waitlist controls. Lin, Mack, Enright, Kahn, and Baskin (2004) studied patients with substance dependence and found greater improvement in measures of anger, depression, anxiety, self esteem, and forgiveness as a result of 12 twice weekly individual sessions of forgiveness therapy versus a routine individual drug and alcohol treatment control. Most benefits remained at 4 months follow up. The York Forgiveness Project (Malcolm, Warwar, & Greenberg, 2005) examined patients who suffered distressing feelings related to a specific interpersonal emotional injury. Most patients were dealing with injuries caused by parents. They compared individual Emotion Focused Therapy to a psychoeducational group intervention for 12 weeks and found greater improvement in psychological symptoms and greater forgiveness in those patients receiving the individual Emotion Focused Therapy.

Many more forgiveness intervention studies have been conducted using interventions with groups (e.g. Al-Mabuk, Enright, & Cardis, 1995, Hebl & Enright 1993, McCullough & Worthington 1995, McCullough, Worthington, & Rachal, 1997, Rye 2005, Luskin et al., 2001.) Group forgiveness intervention studies have consistently reported some positive effects on mental or physical health, such as decreased depression, decreased anxiety, decreased anger, increased physical vitality, and increased optimism. Other studies have further examined the relationship between forgiveness and indicators of physiologic reactivity, demonstrating that forgiveness often correlates with lower blood pressure in particular and lower physiologic stress responses in general (e.g. Lawler et al., 2003, Lawler et al., 2005, van Oyen, Ludwig, & Vander Laan, 2001). Since hostility and anger have been linked to cardiovascular disease through increased sympathetic nervous system reactivity, it is hypothesized that the practice of forgiveness could contribute to decreased cardiovascular illness, but this is yet to be proven. Other hypothesized mechanisms for an effect of forgiveness on health have included the effects of anger on the immune system, decreased interpersonal stress generally, an association with more healthy behaviors such as not smoking, social support, and transcendent consciousness (Lawler et al., 2005). In examining multiple variables, Lawler et al.
Research on the psychological and physical health effects of forgiveness is promising but remains quite young. Studies have indicated an association of forgiveness to health measures in cross sectional or short term studies. There is not yet prospective experimental evidence of a decrease in actual rates of medical illness as a result of forgiveness intervention.

The association of forgiveness with positive mental and physical health variables has captured the attention of academic specialties and the popular media. Academically, forgiveness literature has been wide ranging. Areas of the brain activated in correlation with a consideration of forgiveness have been documented with imaging technology (Farrow et al., 2001). Reconciliation behaviors have been demonstrated in chimps and other social animals (de Waal, 2003). (An animal model of forgiveness, per se, does not exist.) In addition, the relationship between forgiveness and reconciliation is being explored. Through organizations such as The Templeton Foundation and The Campaign for Forgiveness Research, interdisciplinary contact and cross fertilization is being encouraged in the areas of forgiveness, reconciliation, and conflict resolution. The relationship between forgiveness and reconciliation is complex. For example, while there are many moving accounts of forgiveness associated with South Africa’s Truth and Reconciliation Commission, forgiveness was not a required element of the process (Kaminer, Stein, Mbanga & Nompumelelo, 2001). Nevertheless, part of the popular interest in forgiveness is of course tied to the hope that a greater understanding and practice of forgiveness can produce reconciliation between warring groups (e.g. Montville, 1989) as well as producing peace within the psyches of individuals.

Three additional features of the forgiveness literature are of particular relevance for psychotherapy. Intervention studies are carried out on willing participants who meet certain criteria. Individuals with significant psychopathology are often excluded from studies, so the safe and effective application of forgiveness interventions in a psychiatric population is not entirely clear.

A second important issue is that of timing. Many studies excluded individuals who had recent trauma, citing the need for an initial “grief response” (Luskin, 2004a) or a “normalizing of reaction” (Freedman & Enright, 1996) before forgiveness. However, in forgiveness studies, the time period since the trauma has ranged from months to years. Clearly, as Festa and Tuck (2000) suggest, “further study of forgiveness as a developmental process may support the intuitive sense among seasoned clinicians that forgiveness is a time sensitive event” (p. 85). Festa and Tuck go on to provide an important insight, “the ancient koine, Greek language, had two words for time. One was ‘chronos’ or the rough equivalent of ‘clock time’ or ‘calendar time’ . . . the other is ‘chiros’ or the ‘time of readiness’ or ‘fullness of time’” (p. 85). Forgiveness, they suggest, is more appropriately understood in the context of chiros time or the “time of readiness.”

A third aspect of the forgiveness literature, with particular relevance to psychotherapy, are two studies which demonstrate an association between a domestic
violence victim’s willingness to forgive and her likelihood of returning to the abusive relationship (Katz, Street & Arias, 1997; Gordon, Burton, & Porter, 2004). These studies are concerning, and stand in contrast to the generally positive health associations found to forgiveness in most studies.

THE ISSUE OF DEFINITION

Interestingly, one characteristic of the emerging field of forgiveness theory and research has been the lack of an agreed upon definition for forgiveness. The term is used with varying explicit and implied meanings, even by clinicians. While many authors offer definitions of what is “real,” “authentic,” or “genuine” forgiveness, the word is so incorporated into our language that it is used in varying ways. Sometimes an interpersonal process is being described, sometimes a purely intrapsychic one. Sometimes it emphasizes a “letting go” of an apparently unproductive painful emotional connection. At other times, a compassionate embracing of an offender is being described.

Forgiveness is often cited as one characteristic of spiritually or psychologically developed persons (e.g., Vaughan, 1998, or Sovatsky, 2003). Within transpersonal literature, it is also the name of a particular type of meditative practice, which Boorstein (1997) describes using (p. 79) clinically as a “transpersonal technique.” He describes how a forgiveness practice (pp. 35, 79, 94) can, through several different mechanisms, reduce suffering and improve functioning in individuals at all levels of psychological development.

Additionally the term forgiveness is used by transpersonal theorists in the more generic sense of resolving one’s blaming attitude over time. Wilber, in Grace and Grit (1991), the generous chronicle of his and his wife’s ordeal of her cancer and her eventual death, refers to forgiveness in two ways. First, he describes finding relief through the forgiveness practice prescribed in A Course in Miracles (Anonymous, 1975). In discussing this practice, he says “… forgiveness is the way I let go of my self and remember my Self. I found this practice extremely useful especially when I didn’t have the energy to meditate. My ego was so bruised, so injured – I had collected so many insults (real or imagined) – that forgiveness alone could begin to uncoil the pain of my own self contraction …” (p. 187). In addition to performing this practice, he describes coming to forgive his wife and working on the “slower process” (p. 202) of forgiving himself.

Further complicating the use of the term forgiveness is its role as a central concept within Christianity. Boorstein describes that prescribing the forgiveness practice found in a Course in Miracles can be particularly useful to many of those with Christian backgrounds. However, “those with other than a Christian background, or people whose Christian background was demoralizing … sometimes are put off by … Christian terminology.” (p. 8) Forgiveness is charged with many layered and entangled meanings and implications.

Perhaps the association of forgiveness with Christianity and its attendant cultural baggage for some has discouraged some transpersonal theorists from adopting the
Transpersonal psychology is more greatly influenced by transplanted Buddhism, thus avoiding some of the complicated and often unconscious associations that are attached to a culture’s historic and dominant religions. Buddhism contains concepts of forbearance, compassion, and pity but does not have a concept directly analogous to forgiveness (Hallisey, 2000). I would like to suggest however, that transpersonal theory has much to contribute to the forgiveness discussion. Precisely because of forgiveness’s multiple and tangled meanings, I believe transpersonal theory can be particularly useful in untangling the healthy from the unhealthy in the practice of forgiveness.

One characteristic of forgiveness which is core to transpersonal concerns is that forgiveness involves a sense of felt unity with one who has hurt us. In considering a sense of felt unity, Wilber’s transpersonal framework of development becomes quite useful in assisting us to recognize healthy and unhealthy forms of forgiveness. Influential forgiveness authors, such as Enright, appear to be describing a kind of forgiveness that is healthy by definition. In addition to his stated definition of forgiveness as “we forgive when we overcome the resentment toward the offender, not by denying our right to the resentment, but instead by trying to offer the wrongdoer compassion, benevolence, and love” (Enright & Fitzgibbons, 2000, p. 25) he also asserts that forgiveness is not “forgetting,” “condoning,” “excusing,” “justifying,” or “a manipulative pseudo-forgiveness” (pp. 28–29). By asserting that forgiveness is not any of these unhealthy things, he is describing a forgiveness that is healthy by definition. I argue in this paper that the only forgiveness which is healthy by definition is necessarily transpersonal. It necessarily involves entering a larger context and identifying with something larger than the self. Unfortunately, because human beings engage in often unconscious preperso nal and personal stage functioning, it is quite easy to become involved in brands of forgiveness (or to advocate for brands of forgiveness) which are not entirely healthy. Clinically, we have all seen cases where a forgiveness is unhealthy. The following case is an example.

**The Case of John**

John reports he was molested while growing up by his paternal uncle, his father’s much older brother. He has reason to believe that his father was also molested while growing up by this same man. When he learns that another young man of his generation was molested by this uncle, he decides to talk to his parents about his experience. He hopes they will express regret over what he went through as a child and he hopes that they will help limit this uncle’s access to other children.

Instead, John’s parents encourage him to put the past behind him and forgive his uncle. When John raises the issue of the uncle’s access to children, they tell him that his uncle is an old man, now in his mid sixties, and couldn’t possibly be interested in sex anymore anyway. They refuse to discuss the matter further and they continue to invite the uncle to family functions where there are children. When John continues to try to talk about his uncle with his parents and other family members, his parents’ question why John is making so much trouble for the family, and they suggest that, if he were a good Christian, he would be forgiving his uncle.
The issue of forgiveness is prominent in John’s thinking. Most of the time John feels that he does not want to forgive his uncle. John is angry and John is hurt. His uncle has not even admitted what he’s done, let alone apologized. But sometimes, especially when he has had more contact with his parents, John begins to think that maybe his family is right, maybe he is making too big a deal of this, maybe he should just forgive his uncle. At these times, John becomes even more despairing, and suicidal. I, as his therapist, feel at these times the anger with which John has lost touch. I feel angry at John’s family and angry with a pathological concept of forgiveness.

**A DEVELOPMENTAL PERSPECTIVE**

Forgiveness involves a sense of felt unity, but from the point of view of development, a sense of unity can be regressive or progressive, unhealthy or healthy. Here a transpersonal framework of development, as presented by Wilber (1982), and others, becomes quite useful. Within this framework, development is considered to contain three principal stages: the Prepersonal, the Personal, and the Transpersonal. It is recognized that we all have issues at all levels of development. Wilber captures this fact by referring to developmental *streams*. But for the sake of this discussion, these three stages provide a useful framework.

An additional transpersonal framework is that of Washburn (2003). In Washburn’s model the ego functions, such as reality testing and defense mechanisms, follow sequential development from prepersonal to personal to transpersonal stages as described by Wilber. Complementing this development of ego functions is the development of dynamic potentials such as senses of embodiment, the autosymbolic process (the symbol-producing imagination), sources of affective response, and life energy (libido and spirit), all of which exist in some form in the prepersonal stage but are not inherently prepersonal, and in fact have transpersonal potential. These dynamic potentials are therefore often developed by circling back to affects of earlier stages of development to liberate the potential and allow its expression in a more developed way. Hence, Washburn’s model combines the structural/hierarchical model of Wilber and the spiral dynamic perspectives of those whose roots are in depth psychology.

Kaminer, Stein, Mbanga, and Nompumelelo (2000) reviewed the existing theoretical models of forgiveness. They grouped models into four types: typographic models, which classify types of forgiveness, task-stage models that define the tasks involved in stages of forgiveness, models based on theories of personality and psychopathology and developmental models. They describe the advantages of these various types of models, asserting that the strength of developmental models of forgiveness lies in their firm theoretical grounding. Theories based on particular theories of personality and psychopathology account well for individual variation in the development of forgiveness. Task-stage models and typographic models are useful in their descriptive capacities. They call for an integration of models that can serve all these purposes and additionally include relational and contextual factors. The structural/hierarchical model of Wilber complemented by that of Washburn, serves many of these purposes. It is a developmental model with a firm theoretical grounding and it has the potential to integrate many schools of personality and
psychopathology theory. Wilber’s model, after all, is something of a meta-model which he developed as a way of integrating numerous theories of development. Within this model, individual differences can be explained in many ways, including in terms of differential development in various “streams.” This model has particular descriptive power as well, as it clarifies various brands of forgiveness, as I will now describe.

Many problems we encounter in working with the concept of forgiveness involve evaluating the maturity, the health, of some felt unity. More often than not as therapists, we have a sense of some unity’s relative health or un-health, but we’re working to help the patient understand or discover it. When one contemplates (or advocates) forgiveness, it can be for prepersonal, personal, or transpersonal stage reasons, or, quite often, a combination of those reasons.

**Prepersonal Stage Forgiveness**

Forgiveness can be a manifestation of prepersonal defenses. In the Prepersonal stage before the establishment of a well-functioning ego, a merger with the other is experienced, wherein the other is used as an extension of self rather than recognized as a separate person. Forgiveness can be a manifestation of prepersonal stage, boundary-distorting defenses, such as idealization, splitting, and projection. We all use these primitive defenses to some extent. But if they are a motivation for forgiveness, then the forgiveness has a prepersonal element and is not entirely healthy. For example, if someone were contemplating forgiveness because of an idealization of the offender, this would be prepersonal functioning. In this way, forgiveness is an essential part of the well known cycle of domestic violence (Walker, 1979). In fact, as noted earlier, women who are more forgiving may be more likely to return to abusive relationships (Katz, Street, & Arias, 1997; Gordon, Burton, & Porter, 2004). The victim forgives and returns because he or she is “in love,” but it is a prepersonal love, which excludes good ego functioning. Such a person would not be appreciating oneself and one’s offender as individual human beings, differentiated and bounded, each responsible for his own behavior and protection, each with his vulnerabilities and capacities to hurt. In this kind of traumatic bonding, a term coined by Dutton and Painter (1981), the victim is often seeking to view himself as an extension of his godlike offender. He has not yet achieved a realistic view of the situation. Such a person’s seemingly respectful and compassionate behavior towards the offender might appear virtuous. But in actuality, it would be immature and an example of confusing prepersonal with transpersonal functioning, termed by Wilber the Pre/Trans Fallacy (1982).

Washburn’s model may allow even further insight into traumatic bonding and the particular version of prepersonal forgiveness which can accompany it. An individual may be stuck in prepersonal process not only because of regression, but also because of a genuine transpersonal striving that gets ignited by the experience of certain prepersonal emotions. For instance, the emotional experience that accompanies the prepersonal defense of idealization in traumatic bonding may be the immature kin of a transpersonal awe. Without more mature ego functioning, the individual is unable to transform the immature into the mature form of the worshipful emotion. Nevertheless,
one may at a nonconscious level, sense its transpersonal potential, its importance, and be disinclined to leave it. Thus the pitfall of prepersonal forgiveness can contain both healthy transpersonal striving and unhealthy prepersonal ego functioning.

Puka (2002) describes well additional narcissistic (prepersonal) motivations for forgiveness. “It may be a hidden arrogance in forgiveness, not nobility, that fuels its personal empowerment, and this may be worrisome in therapy” (p. 142). He points out that the non-mutual nature of intrapsychic forgiveness can ignore the reality of the other and involve “presumption and preemption,” rather than negotiation and mutual decision. “It can be a masturbatory virtue in which we use another as a fantasy object” (p. 142).

None of this is to suggest that forgiveness cannot play a healthy role in the lives of those at a predominantly prepersonal level of development, such as those we might diagnose as psychotic, borderline, or narcissistic. Boorstein (1997) has described that transpersonal techniques, including forgiveness practice, can assist in mitigating the suffering and improving the functioning of those with significant prepersonal issues. This therapeutic use of forgiveness practice in those with significant prepersonal functioning must be distinguished from a defensive forgiveness undertaken with prepersonal motivations.

**PERSONAL STAGE FORGIVENESS**

Forgiveness can be a manifestation of personal stage defenses. In the personal stage, where there is a fairly well functioning ego, others are viewed as different rather than as extensions of the self. At this stage, conflicts exist between authenticity and social conformity, with duplicity being the characteristic defense.

Forgiveness can be an expression of social conformity at the expense of authenticity. Lamb (2002) warns that the cultural context of an oppressed class must be taken into consideration in assessing the health of forgiveness. She expresses particular concern over the advocating of forgiveness in women, saying, “the letting go of anger and resentment that is a part of so many definitions of forgiveness is in and of itself unhealthy for women. . . . Instead integration of anger and aggression with their identity . . . is ideal” (p. 164). She points out that the advocating of forgiveness may reinforce power relations, and stressing the social repercussions of forgiveness she questions, “Why is it that psychologists are so inclined to advocate forgiveness rather than apology. Why is there little media attention to the value of reparation?” (p. 167).

Power relations also exist within families and, as in John’s case, forgiveness of a perpetrator can be a capitulation to an unhealthy family system. John is involved in the personal stage dilemma of authenticity vs. social conformity. I see the concept of forgiveness often used to squelch authentic expression in favor of social conformity. In this way, forgiveness is used as a silencing. When someone is advised to forgive, even by the well-intentioned, an unconscious message transmitted or heard can be, *ignore what you know, ignore how you feel, and let us ignore it, also*. This personal stage forgiveness is not about anything larger. It is about dampening what is already there.
There is tremendous social and religious pressure to forgive and it can be tempting to jump to forgiveness in order to avoid fully facing internal and external realities, but because forgiveness implies resolution, a premature forgiveness, done for pre-personal or personal stage reasons, can be dangerous. Such a forgiveness ignores intrapersonal and interpersonal truths, allows for the perpetuation of social ills, and thwarts the processes of individual and collective healing and growth.

The Effects of Trauma on the Forgiveness Process: A Reintroduction of Prepersonal Functioning

John’s predicament is particularly dangerous. His suicidality when contemplating forgiveness is overdetermined. At the personal stage level, silencing that much of what he knows and experiences may feel like a death. But the other reason for John’s suicidality at the thought of forgiveness is that John’s traumatized condition reintroduces prepersonal functioning.

Healing from a wound recapitulates and can further development itself. This phenomenon may have first been described in the psychological literature by Melanie Klein (1940/1986) who explored how the trauma of loss reactivates infantile issues. In response to the trauma of his wife’s illness, Wilber (1991) appears to be describing a reintroduction of the prepersonal in his own functioning when he refers to his own ego contraction and to “imagined” injuries. When viewed from the standpoint of transpersonal development, the wounded individual, at first overwhelmed with strong feelings, can be seen to be revisiting elements of the Prepersonal stage. From this position of blurred boundaries, poorer ego function, the patient has to work at coming to terms with the reality of the wounding situation. Once the reality of the wounding situation is grasped and accepted, the patient has reclaimed and hopefully improved upon his personal stage functioning. The patient may go on to integrate the experience into an even larger context, which is the Transpersonal stage. Some “transpersonal techniques” such as prayer, meditation, or other ritual, may be helpful in the relieving of suffering and improvement of functioning, but, as is stressed by many authors, (e.g., Scotton, Chinen, & Battista, 1996, p. 412), a priority of treatment must be the establishment of healthy ego functioning.

Coming to terms with the reality of an interpersonal injury involves coming to recognize the reality of self and other as differentiated bounded human beings. Here is what I am calling the central paradox in getting to forgiveness. The offender must be seen as a different person and only then can there be any healthy sense of unity. The offender must be seen as a different person in order to get past prepersonal infantile interpretations of what is happening. Patton (2000), a pastoral counselor, emphasizes the necessity of seeing the other as different than self before forgiving. He also discusses how the victim is defending against his own shame, and the need to get beyond this (prepersonal process), before forgiving. Sandage (2003) discusses the intersubjectivity of the forgiveness process and the essential role of recognizing the subjectivity of the other.

Patients who are preoccupied with a particular past wounding are often stuck in early prepersonal defenses where the other is being used as an extension of self. The other
becomes “bad” and the object of all rage, because the patient has projected onto the other his own feelings of badness and inadequacy. The patient is usually struggling with feelings of badness or inadequacy because he has trouble coming to terms with the human vulnerability that resulted in his wounding. Alternatively, the patient may, as John does when he considers forgiveness, feel completely defeated, having projected onto the offender all of his own agency. In either case, whether the wounded patient is stuck in rage or defeat (or both) realistic views of self and other have not yet been established.

A danger inherent in introducing the idea of forgiveness to a traumatized individual is that forgiveness involves a transcending or giving up of anger. A useful function of anger is to promote personal stage functioning by helping an individual confirm his self-worth and establish an appropriate boundary between self and other. Without this personal stage functioning, a patient, such as John, is left with intense feelings of badness amidst prepersonal infantile logic. There is badness. Maybe I should kill myself, or, My rage isn’t allowed. I’ll use it on myself. Masters (2000) advocates what he calls Heart-Anger, describing ways in which anger facilitates both personal stage and transpersonal stage processes.

Anger helps guard and maintain various differences and boundaries … Anger thus generally reinforces subject-object distinctions; this may be useful in the case of needed differentiation … Yet anger may also help cut through dualistic positionings, at times even literally flaming through barriers to intimacy, so that subject and object can both be seen as different “positions” of the same fundamental reality. (p. 37)

When viewed in this way, anger can be seen as potentially promoting healthy forgiveness by aiding both personal stage differentiation and entry into a larger, transpersonal, context.

Suggesting forgiveness to someone who is traumatized can simultaneously rob him of potentially growth-promoting anger, while leaving him to feel blameworthy for not yet being ready to forgive. Attempts to forgive from such a place may either dig a deeper hole of helplessness or require dissociation. Many authors have voiced concern about forgiveness being potentially revictimizing (e.g., Herman, 1992; Lamb, 2002; Sandage, 2003).

Healthy forgiveness is a transpersonal process. As a transpersonal process, it involves entering and identifying with a larger context, but the larger context must be entered as an intact self. Unhealthy forgiveness involves sacrificing rather than transcending the self. Unhealthy forgiveness involves ignoring part of the present context rather than expanding into a larger context.

GETTING TO TRANSPERSONAL FORGIVENESS: THE MANY SHORES WITHIN PSYCHOTHERAPY

While there now exist “Forgiveness Therapies” which are expressly aimed at helping people to forgive, there is controversy within the current forgiveness literature about
whether it is wise for therapists to advocate forgiveness (Lamb & Murphy, 2002). This is tricky terrain. Forgiveness is both a transpersonal “technique” and a larger transpersonal process which can be unhealthily hijacked within the psyche for use as a prepersonal or personal stage defense. It can also be unhealthily hijacked socially as a means of squelching confrontations to the status quo.

Forgiveness is transpersonal and as such, it transcends the internal/external distinction. It is, in some sense, both intrapsychic and relational. Hence, there is inevitable confusion in trying to make sense of it from a more personal stage position where the internal/external distinction is inviolate. Forgiveness therapies, at times, resolve this problem by enforcing a definition of forgiveness as a purely intrapsychic process. However, I believe this does not do justice to the subject. Forgiveness involves a sense of felt unity with one who has hurt us. It is both intrapsychic and relational, even in circumstances where one decides to no longer have any physical contact with the offender.

In spite of these pitfalls and obstacles, there is a transpersonal thrust within development toward a larger context which can facilitate forgiveness. An injured individual deals with, as Frost’s Job described, “less than I can understand.” Attempting to achieve resolution within a relationship, where one has been injured by the blind narcissism (prepersonal process) of another, can feel like a black hole. The circumstance of such interpersonal injury cries out for a larger context within which meaning is possible. In any such impossible situation, we are programmed to seek the larger context. A healthy larger context provides meaning and does not resort to either prepersonal dehumanization of the other or personal stage duplicity. Any such larger context will naturally provide avenues for forgiveness. If the other is not dehumanized and we remain honest with ourselves, then, in the fullness of time, when we have completed the prepersonal and personal stage tasks that the wounding has given us, forgiveness can come.

There is disagreement about the best road to forgiveness. Some authors, such as Enright & Fitzgibbons (2000), stress an active decision to forgive, with the individual making this decision and then moving through various steps towards forgiveness. Others, such as Patton (2000), see forgiveness as one result of a larger process of healing, and argue that forgiveness cannot be approached directly, only obliquely. Wilber’s developmental scheme complemented by that of Washburn, by allowing for the delineation of prepersonal and personal stage motivations, illuminates the possible dangers involved in pursuing or advocating forgiveness. Forgiveness may easily serve immature defenses and because these processes can be largely unconscious, a cognitive appreciation of these pitfalls is not sufficient protection against their occurrence. The tasks involved in forgiveness are as daunting and miraculous as development itself. Cognitively-oriented cookbook approaches to forgiving do not do justice to the nature of the task. Perhaps in our advocating of forgiveness, we seek to control what cannot be controlled. As Haaken (2002) states, “classification systems [of forgiveness] may serve as defense against unsettling areas of ambiguity” (p. 173). One can, and perhaps does, spend lifetimes uncovering and working to correct the influences of limiting prepersonal defenses and limiting social and cultural patterns. If we are honest, we must say that we are never completely removed from them. And yet at the same time we are capable of, and are blessed by, the transpersonal.
The beauty of Job’s response to God in Robert Frost’s piece is that he did not ignore or deny his experience, while at the same time he asserted a unity with his offender. Similarly the only healthy approach we can have to forgiveness is to be honest about our predicament by being willing to continually discover and transform the prepersonal and personal stage processes that hold us back, while simultaneously fostering transcendence (or deepening or birthing depending upon one’s preferred metaphor) into the transpersonal.

This means that, within psychotherapy, fostering healthy forgiveness requires work on three levels to address prepersonal, personal and transpersonal stage tasks. First, the therapy must help the patient with ego functioning, shoring up their sense of themselves and assisting them to a realistic view of self and other. At times, as with a disturbed paranoid patient, the transpersonal technique of a forgiveness practice may provide relief and improve functioning. At other times, as with a patient traumatically bonded to an abuser, the practice of forgiveness may serve to keep someone stuck in prepersonal functioning by impeding differentiation.

Second, the therapy must be empowering, assisting the patient to recognize and counter unhealthy social and cultural messages which are often unconsciously held. Feminist therapies pay particular attention to such messages, termed “controlling images” (Collins, 1990). A controlling image can be a powerful unhealthy motivator for forgiveness. A controlling image for women is that good women are not angry. Lamb’s critique of forgiveness therapy is speaking to this fact. A controlling image for men is that strong men are not vulnerable. This cultural message promotes narcissism in men (Real 1997). Thus a man may embrace forgiveness as a way of maintaining prepersonal grandiosity and avoiding a full experiencing of his hurt and vulnerability. Controlling images for John were that good sons ignore information that is potentially disruptive to the family and good Christians always forgive. Resisting the controlling images espoused by his family was important for John’s achievement of personal stage authenticity.

Third, therapy can help the patient in the transpersonal task of identifying with a context larger than the self. I believe this is done in two principal ways. One way relates to psychotherapy’s process and the other to a particular therapy’s content. The process of psychotherapy promotes the transpersonal in its relationship to time. The therapist facilitates an attentiveness of a meditative type through the use of evenly suspended attention (Epstein, 1996). Therefore, regardless of the content of the therapy, even though it involves a discussion of past events, the very process of therapy allows for an exquisite attention to now, which in itself can create a timeless transpersonal experience for patient and therapist alike. Within such an experience, union with others, even those who have hurt one, can be known. Forgiveness, like psychotherapy itself, also bears this particular relationship to time. It has been said that that “forgiveness is giving up any hope of having had a different past.” What is referred to in that deceptively simple definition is a radical acceptance of, and full occupation of, the present. It is a simple but mammoth task for anyone who has been injured to accept that there is no going back to the way things were before the injury. Hence forgiveness, like therapy itself, though involving consideration of the past, has at its powerful core a radical willing acceptance of the present. Paradoxically, though one’s injury situates one in time, it
is the radical acceptance of this situation, of being unable to go back in time that can lead to an experience of timelessness. And it is the radical acceptance of not being able to go back in time that can lead to a healthy re-visioning of the past as having meaning within a larger transpersonal context. Being so fully in the present is an aspect of the process of therapy that provides an entrance into the generic larger context of the timeless transpersonal.

Psychotherapy also can help the patient to enter a particular transpersonal context by virtue of the particular content of the therapy. Ferrer (2002) describes the many routes to the transpersonal as an ocean with many shores. Analogously, in psychotherapy, there are potentially many ways to a larger, transpersonal, space that can permit an eventual healthy forgiveness. The shape of the particular larger context with which a patient identifies will depend upon what resonates for the patient and also with what resonates for the therapist.

I will briefly describe here a few larger contexts with which a patient such as John may identify in the course of therapy. I am describing three possible contexts based upon three different therapy orientations. Probably dozens of larger contexts could be described. With each type of therapy I mention, I will describe briefly the larger (ego-transcending) context it provides, opportunity for meaning within it, and how it could facilitate forgiveness. I will then describe how a model of transpersonal development can explain the effects of two currently used forgiveness interventions.

With a therapist sensitive to family systems, John could reflect more about his position in the generations of his family and come to think in terms of the network of human relationships across time. Just as Murray Bowen (1978) recognized that it takes generations to process trauma, John could come to recognize that we pass ourselves on, including versions of our own wounds, all of the time. He could come to appreciate and identify with the vast organic network of human relationship, within which we are both hurtful to each other and caring of each other. Placing his uncle’s actions and himself in this larger context, he may find forgiveness. John may come to believe that we each do our part if we improve somewhat generation to generation. In this way, he could find particular meaning in the job that he does with his own children or with others who are similarly vulnerable.

With a therapist sensitive to archetypes, John would have support for identifying with an archetype. He might resonate with the Hebrews’ time in the desert, Jesus’ time in the desert, as well as Innana’s or Persephone’s descent into the underworld. Viewing his experience as a drama, symbolic of some larger universal human experience, he may see both himself and his uncle as occupying roles in the drama, each role made possible only by the other. He may be able to identify with and empathize with a fellow player. In addition to finding meaning in his connection to living archetypes themselves, he may find meaning in the creative expression of these universal themes.

With a psychodynamic therapist, John might be led to reflect on what he likes least, what makes him most anxious, within himself. When the projections come home from his uncle and his parents, and even from his therapist, he may face his own black holes. When the projections are reclaimed, the duality for him of self and
other may be transcended. From such a place, some acceptance of his uncle may flow as though downhill, natural, and relieving. He may find meaning in the kinship with all other people that such a view implies.

As I have said, therapies from various orientations can provide the necessary support and larger context required to facilitate a healthy forgiveness. However, certain interventions have been specifically designed to facilitate either forgiveness or the resolution of interpersonal injury. I will discuss two very different interventions, which have been studied and demonstrated to often facilitate a forgiveness and discuss whether they would be appropriate for John. The first is the widely presented group forgiveness intervention program of Frederic Luskin, used in the Stanford Forgiveness Projects and subsequently in his *Forgive for Good* workshops. His is a nine step program which, after an initial telling and exploration of a person’s story of injury, discourages further telling of the victim’s narrative. He instead teaches the individual to quiet distressing affective states, encouraging the use of breathing exercises, meditation, or prayer. He additionally guides the individual in accessing experiences of love, gratitude, and appreciation for beauty. In the last step of the process, the individual forms a new heroic narrative. Luskin recognizes the defensive role that a preoccupation with grievance can serve. He encourages a fairly direct developmental movement in accordance with Wilber’s structural/hierarchal model by confronting individuals with the inescapable existential reality of interpersonal injury which is part of the human condition and simultaneously offering an avenue for transcendence in experiences of beauty and compassion. While he conceptualizes his program as working through cognitive behavior methods, he also recognizes the pursuit of forgiveness as potentially transformative (Luskin, 2004b). His methods can be seen to assist in the developmental tasks of accepting reality (personal stage functioning) and identifying with a larger context (transpersonal stage functioning). I believe that the discouragement of repetitive experiences of rage can be helpful to many people as it gives them permission to dislodge themselves from what can be unproductive, prepersonal process. Luskin’s workshops have been of assistance to many people; however, I would not recommend Luskin’s workshop to John who has difficulty accepting the validity of his anger and instead becomes suicidal. John is operating with a deeply held pathological conception of forgiveness. He would not be a candidate for any intervention that has forgiveness as an explicit goal.

While Luskin focuses on the phenomenon of a grievance, almost ignoring the particular content of an individual’s injury, the York Forgiveness Project (Malcolm, Warwar, & Greenberg, 2005) delves intimately into the content of the specific injury with an extension of Gestalt technique. Their technique engages the patient in an affectively charged imagined dialogue with the offender in what is termed Emotion Focused Therapy. What has been noted is that the character of these dialogs changes during the course of treatment, with the patient developing feelings of empathy for the offender and experiencing less distress. The key to this work appears to be the ability of a patient to work through a relational problem when the patient is provided an atmosphere of safety and is encouraged to tap the dynamic potentials present within imagination and emotionality. Here the ability of the patient to achieve resolution is best explained developmentally with the inclusion of an understanding of dynamic potentials as described by Washburn. The patient circles back to an
experience which includes regressed prepersonal reactions. Within the descent, the therapist reminds the patient, when necessary, of the real-world context. In this way, the maturity of ego functions is supported while the patient is simultaneously given the opportunity to access dynamic potentials, the liberation of which can vault him into a larger context.

At some point, John might be a candidate for Emotion Focused Therapy. This treatment has been studied with regard to its ability to facilitate forgiveness, but it does not use forgiveness as a goal, and so John would not need to grapple with his feelings about forgiveness before he is ready.

**TWO PITFALLS IN THE TRANSCENDENT NATURE OF FORGIVENESS**

In the above examples, I emphasized the transcendent transpersonal quality of healthy forgiveness. Here it is important to mention that a patient’s knowledge of, or experience of, transcendence does not guarantee that a forgiveness is completely healthy. Ken Wilber (2000) describes quite compellingly how a transcendent experience can break through into the experience of someone at any level of personality development. In this way, transpersonal experience can unfortunately be used to fuel some much more immature dynamics, and this can certainly happen with regard to forgiveness. In John’s case, for instance, he may glimpse the transcendent nature of forgiveness and take it as a sign that he should indeed sacrifice his authentic knowledge and feelings for the unity of social conformity within his family.

A second pitfall of the transcendent nature of forgiveness is that a person may berate himself for his other, non-forgiving, responses to having been wounded. In other words, if John glimpses the transpersonal view, he may feel all the more worthless for his inability to sustain it. John may work to sustain it through spiritual practice and study, but, in my view, it would be most healthy if he allows himself the freedom to return to all aspects of the experience.

**AREAS FOR FURTHER EXPLORATION**

While a transpersonal developmental framework which defines prepersonal, personal, and transpersonal stages is the most substantially developed contribution that transpersonal psychology can make at this time to the forgiveness field, there are other important areas for exploration. What are the transpersonal correlates and/or facilitators of forgiveness (or nonforgiveness)? Spiritual practices can be seen as enhancing both awareness and love which are certainly important components of forgiveness. Can we further describe and document the ways in which meditative practice, prayer, or shamanic practices, for example, affect forgiveness and nonforgiveness or vice versa? Can we further describe the ways in which forgiveness may or may not flow from particular transpersonal experiences? Now that there is expanding appreciation of the relational nature of the transpersonal (e.g., Ferrer, 2002), and the relational nature of forgiveness (e.g., Sandage, 2003) can we further describe what occurs in the interpersonal field during experiences of forgiveness or nonforgiveness?
CONCLUSION

Forgiveness is simple, but only in retrospect. There are healthy and unhealthy forms of forgiveness. I have argued that the only kind of forgiveness which is healthy by definition is transpersonal. A major contribution that transpersonal psychology can make to the forgiveness discussion is a developmental framework, guided by the work of Wilber and Washburn, within which healthy and unhealthy forms of forgiveness can be understood. Some transpersonalists often resist such potentially rigid frameworks or definitions. After all, the nature of the transpersonal can not be logically captured. Just as the therapist holds the patient in containment, however, “a theory then, acts as an important container for the therapist, a supporting structure that helps the therapist keep his own equilibrium” (Garland, 1998, p. 29). I do think it is helpful to have a developmental theory that we can fall back on as we seek to work as responsibly as possible with the concept and practice of forgiveness.

NOTES


2 Interestingly, even though Boorstein (1996) briefly discusses forgiveness practice in The Textbook of Transpersonal Psychiatry and Psychology (pp. 282–283), forgiveness is not listed in the book’s index. Related relational concepts such as compassion, altruism, and love are listed in the index.

3 Contextual and relational factors and the individual’s response to them can be appreciated from the point of view of the person’s realistic personal stage issues. Admittedly, the personal stage is relatively underdeveloped in transpersonal theory. Much more attention has gone towards the prepersonal and transpersonal stages and the issues involved in distinguishing prepersonal from transpersonal processes. Perhaps feminist transpersonalists can make particular contributions to the development of the personal stage (and its dynamic potentials) within transpersonal theory. I say this because attention to relational and contextual issues is a particular strength of feminist scholarship.

4 Wilber’s four quadrant model which allows consideration and exploration of the intersubjective (culture) and the interobjective (systems) factors allows for additional consideration of contextual and relational factors at play in forgiveness.

5 This phenomenon may have a transpersonal as well as a prepersonal aspect. Andrea McFarren (2002) in her unpublished Master’s Thesis, Bonding or Bondage, argues that the experience is archetypal, present in the collective unconscious, with its existence as an archetype contributing to the ease and power with which it can enter an individual’s experience. She cites the abusive figure of Yaweh and Job’s relationship to him as representative of the archetype.

6 Thus controlling images, while always thwarting personal stage authenticity, can also encourage prepersonal stage defenses.

7 This expression is often attributed to Anne Lamott, but actually she referred in her 1999 book, Traveling Mercies, to a source she could not recall, saying, “Who was it who said forgiveness is giving up any hope of having had a different past?” I have also heard the statement attributed to both Desmond Tutu and Carl Jung, but I have not found documentation of this.

REFERENCES


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