

## Religion, Forgiveness, and Adjustment in Older Adulthood

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The concept of forgiveness illustrates the tremendous differences between the personal and social priorities of U.S. adults and the scientific agenda of mainstream social science. In 1991, Poloma and Gallup reported on a nationally representative sample of U.S. adults who were asked, “Which do you usually do when you feel that someone has deliberately done something wrong to you?” These respondents were given a variety of possible response options to choose. Among these options, 48% of respondents reported that they “tried to forgive,” and 45% reported that they “try to overlook it” when someone intentionally hurts them. Only 14% reported that they try to “hold onto resentment” and a mere 8% reported that they “try to get even.” If these self-reports are to be taken at face value, then it is safe to conclude that more people prefer forgiveness and similarly constructive responses to interpersonal transgressions over negative responses such as holding a grudge or seeking revenge. This clear preference stands in contrast to the scientific priorities given to revenge and forgiveness among social scientists. A search of PsycInfo abstracts revealed 803 articles from 1900–1990 that included the words “revenge,” “retaliation,” “retribution,” or their derivatives, whereas only 171 studies included the words “forgiveness,” “forbearance,” or its derivatives.

Despite this historical imbalance, the gap between the priorities of U.S. adults and the scientific work on forgiveness vs. revenge has begun to narrow. Indeed, research on forgiveness grew considerably during the 1990s, and this progress has continued into the 21st century. Recent

work has identified social-psychological antecedents to forgiveness (Exline & Baumeister, 2000; Fincham, 2000; Finkel, Rusbult, Kumashiro, & Hannon, 2002; McCullough, Bellah, Kilpatrick, & Johnson, 2001; McCullough, Worthington, & Rachal, 1997; McCullough et al., 1998), personality processes underlying forgiveness (McCullough, 2001; McCullough & Hoyt, 2002), the temporal process by which forgiveness unfolds (McCullough, Fincham, & Tsang, 2003), the process by which reasoning about forgiveness develops as people age (Enright, Santos, & Al-Mabuk, 1989; Mullet & Girard, 2000); the effects of forgiveness on physiological outcomes (Berry & Worthington, 2001; Witvliet, Ludwig, & Vander Laan, 2001), and the clinical benefits of forgiveness interventions (for reviews see Enright & Coyle, 1998; Worthington, Sandage, & Berry, 2000).

Recently, scholars have also turned to examining the relationships between religion and forgiveness (McCullough & Worthington, 1999; Rye et al., 2000; Tsang, McCullough, & Hoyt, in press). In this chapter, we propose that religion and forgiveness are connected in a way that is particularly relevant to the concerns of the present volume: We propose that (a) social and psychological changes that occur as people age create changes in religiousness and changes in the value people place on forgiveness, and that (b) these changes help explain the complex links between religiousness, forgiveness, and adjustment. Many aging processes might be useful for explaining why people become more religious as they age, or more forgiving as they age, or why the links of religion and forgiveness with health and adjustment might become stronger as people age, but we will explore one explanation in detail. Specifically, we draw heavily from the work of Laura Carstensen and her colleagues (e.g., Carstensen, Isaacowitz, & Charles, 1999) and suggest that age-related associations of religiousness and forgiveness reflect, at least in part, superordinate changes in socioemotional concerns that occur as people age.

From these propositions, and the existing data, we wish to suggest that the value of forgiveness as a resource for preserving social and emotional well-being, perhaps even along with physical health, will become especially poignant as people enter older adulthood. The present chapter provides a brief background of forgiveness in the psychological literature; outlines theoretical and empirical links between religion, forgiveness, and aging; describes research linking forgiveness to physical health as well as mental health; and raises arguments for the unique role of forgiveness in adjustment to aging. Finally, the chapter closes with conclusions about the role of forgiveness in well-being and recommendations for future research.

## **WHAT IS FORGIVENESS? CHARACTERISTICS OF TRANSGRESSION RESPONSES, PERSONS, AND SOCIAL UNITS**

To date, researchers have not agreed on a unanimous definition of forgiveness, although there are also many points of agreement. Enright, Freedman, and Rique (1998) considered forgiveness “a willingness to abandon one’s right to resentment, negative judgment, and indifferent behavior toward one who unjustly injured us, while fostering the undeserved qualities of compassion, generosity, and even love toward him or her” (pp. 46–47). Exline and Baumeister (2000) defined forgiveness as the “cancellation of a debt” by “the person who has been hurt or wronged.” (p. 133). McCullough, Pargament, and Thoresen (2000) proposed what they hoped could suffice as a consensual definition. Their definition emphasizes the changes a victim undergoes when he or she has forgiven a transgressor: Forgiveness is an intraindividual, prosocial change toward a perceived transgressor that is situated within a specific interpersonal context.

McCullough et al. (2003) have even used a multilevel modeling conceptualization of longitudinal growth to operationalize forgiveness specifically as a complex of prosocial changes in one’s basic interpersonal motivations toward a transgressor. Indeed, they have even suggested that, with longitudinal data in which an individual’s motivations toward someone who has offended them are assessed at multiple time points, it is possible to distinguish between forgiveness (change over time) and forbearance (i.e., degree to which a person is tolerant or lenient and able to refrain from responding destructively immediately following a transgression). They also showed that forbearance and forgiveness appear to have different psychological substrates.

But to understand forgiveness better for the purposes of this chapter, it is helpful to distinguish among the three senses in which the term “forgiveness” can be used (McCullough & Witvliet, 2002). Forgiveness can be defined as a response (as described in the above paragraph), a personality disposition, and as a characteristic of social units. At the level of the psychological functioning of a transgression recipient, McCullough and his colleagues (1997, 1998) recognize forgiveness as the convergence of three distinct but related motivational systems. Specifically, they defined forgiveness as a suite of transgression-related motivational changes toward a transgressor in which revenge- and avoidance-related motivations subside, and motivations toward benevolence or goodwill increase or re-emerge (McCullough et al., 1997). Moreover, McCullough and colleagues contend that forgiveness

functions as a result of increases in empathy for a transgressor. Essentially, forgiveness occurs when victims are able to act not on motivations inspired by their initial experience of righteous indignation and hurt-perceived attack, but on a desire to restore community, or at least a stance of goodwill, with their transgressors.

As a personality disposition, forgiveness reflects a trait-like tendency to forgive others across a variety of interpersonal transgressions. Most investigators who have examined forgiveness as a personality disposition have relied solely on self-reports of general tendencies to forgive typical transgressions (Mauger et al., 1992; Mullet, Houdbine, Laumonier & Girard, 1998) or hypothetical transgressions (Berry, Worthington, Parrott, & O'Connor, 2001; Hebl & Enright, 1993; Tangney, Fee, Reinsmith, Boone, & Lee, 1999). By contrast, McCullough and Hoyt (2002) estimated people's dispositions toward avoidance, revenge, and benevolence motivations across several transgressions (both actual and fictional) and then explored the relationships of these trait-like measures of forgiveness with the traits in the so-called "Big Five" or "Five Factor" personality taxonomy (e.g., McCrae & Costa, 1987). Results showed that stable, trait-like individual differences accounted for 22–36% of the variance in people's endorsements of avoidance, revenge, and benevolence in response to an array of transgressions. In particular, "Agreeableness" predicted lower revenge motivation and greater benevolence motivation, while "Neuroticism" predicted greater avoidance motivation and lower benevolence motivation.

As a quality of social units—marriages, for example (Fincham, 2000)—forgiveness resembles attributes similar to trust, intimacy, or commitment. A variety of relational factors have been found to be responsible for forgiveness. Not surprisingly, people are more inclined to forgive transgressors for less severe offenses (Boon & Sulsky, 1997). They are also more likely to forgive committed versus less-committed relationship partners (Finkel et al., 2002; McCullough et al., 1998) and apologetic versus unapologetic transgressors (Bono & Crano, 2002; Darby & Schlenker, 1982; Girard & Mullet, 1997; Weiner, Graham, Peter, & Zmuidinas, 1991). Moreover, people are more prone to forgive if they attribute less responsibility and intentionality to the transgressor (Bono, 2002; Bradfield & Aquino, 1999; Fincham, 2000).

### **RELIGION, FORGIVENESS, AND AGING: IS THERE A CONNECTION?**

We continue our exploration of forgiveness with three observations. First, we note that among adults, religiousness appears to increase with

age. To draw one example from the large population of studies on this point, Taylor and Chatters (1989) examined the associations of seven single-item measures of religiousness with age among over 2,000 Black American adults. For the women, scores on all seven measures were significantly and positively associated with age. For men, scores on six of the measures were significantly and positively associated with age. Similar age differences have been noted in samples from other nations as well (e.g., Tiwari, Mathur, & Morbhatt, 1980). Although some scholars have wondered if these age differences might be caused exclusively by period or cohort effects, the best evidence to date, which was drawn from a nationally representative longitudinal study of married adults, indicated that the influence of religion on daily life increased continuously throughout the life cycle (Argue, Johnson, & White, 1999), even after controlling for potential period and cohort effects.

Our second observation is that people who are older tend, on average, to be more forgiving and less vengeful than are younger people. This observation is very much in line with research conducted on a Dutch sample by Van Lange, Otten, De Bruin, and Joireman (1997). They found that higher percentages of older adults (i.e., approximately 82%) can be classified as having "prosocial" interpersonal orientations, as opposed to individualistic or competitive interpersonal orientations, compared to younger adults (i.e., approximately 56% of the adults under age 30). Empirical research has confirmed that willingness to forgive varies as a function of age, with young children generally being least willing to forgive and older adults being most willing (Enright et al., 1989; Girard & Mullet, 1997; Mullet et al., 1998; for a review see Mullet & Girard, 2000). For example, Mullet et al. (1998) examined the links between four aspects of people's attitudes toward forgiveness among a sample of French adults aged 18–90 years. The first two of these aspects—(a) a global measure of the extent to which people endorse revenge in lieu of forgiveness, and (b) a measure of the extent to which people let their personal feelings or social circumstances interfere with forgiving, were negatively associated with age. When younger adults forgive it tends to be motivated by personal and social considerations (e.g., because they are in a good mood, because family or friends think they should forgive, or because the consequences of the harm have been cancelled in some way). On the other hand, older persons tend to forgive mainly because of strong convictions that forgiveness should be practiced unconditionally (Girard & Mullet, 1997).

Our third observation is that people with religious and spiritual interests tend to report being, on average, slightly more forgiving and slightly less prone to vengeance than less religious/spiritual people.

The fact that forgiveness plays a central role in Jewish, Christian, Islamic, Confucian, Buddhist, and Hindu thought (Calian, 1981; Herford, 1964; Phillips, 1986; Solomon, 1986) certainly indicates a widespread belief that forgiveness is spiritually and perhaps psychologically or socially beneficial. The world's major Abrahamic religions (i.e., Judaism, Christianity, and Islam) endorse forgiveness even as a behavior by which people can emulate God. Beyond simply exhorting people to forgive each other (at least members of the in-group), religions encourage compassion and empathy—emotions that foster forgiveness (McCullough et al., 1997)—and they model forgiving actions through scripture and ritual (Pargament & Rye, 1998). Indeed, all of these components of religious meaning systems may promote forgiveness (Tsang, McCullough, & Hoyt, in press).

The first research to identify a positive relationship between religious involvement and forgiving was carried out three decades ago. Rokeach (1973) reported findings based on surveys of college students and adults (Rokeach, 1969; Tate & Miller, 1971) indicating that people who scored high on self-report measures of church attendance, self-rated religiousness, and intrinsic and extrinsic motivation for religious involvement—as measured by Allport and Ross's (1967) Religious Orientation Inventory—assigned being “forgiving” a relatively high priority in their value systems. Follow-up research by Shoemaker and Bolt (1977) supported and extended these findings by demonstrating that religious people (in this case, Christian students) also tend to endorse the belief that highly religious people *should* place a high value on forgiveness. Later research, which added measures of feeling close to God and amount of personal prayer, also found a positive relationship between religiousness and attitudes toward forgiveness (Poloma & Gallup, 1991). In fact recently, researchers employed the Schwartz and Bilsky (1995) cross-cultural values survey and hypothetical offense scenarios on a wide sample of almost 400 young and older adults of various ethnicities and corroborated this notion by finding significant positive associations between forgiveness judgments and self-rated measures of having a spiritual life and being devoted to religious beliefs (Bono, 2002).

Subsequent research on self-reported practices regarding religious involvement and forgiving behavior revealed consistent results. With Gallup data from a nationally representative sample of 1,030 U.S. adults, Poloma and Gallup (1991) found positive relationships between measures of self-reported religiousness (e.g., importance of religion, church membership, church attendance, prayer experiences) and forgiving behaviors when offended. Analyzing the same data set, Gorsuch and Hao (1993) found that individuals who reported themselves as hav-

ing higher personal religiousness (but not religious conformity) also claimed to have more motivation for forgiving others and fewer reasons for not forgiving transgressors (e.g., resentment and desire to see harm come to transgressors), compared to people lower in personal religiousness. Other researchers demonstrated a positive relationship between the disposition to be forgiving (as measured by the Forgiveness of Others Scale) and measures of spiritual coping resources in both clinical and non-clinical samples (Mauger, Saxon, Hamill, & Pannell, 1996).

Complementary research conducted by Enright, Santos, and Al-Mabuk (1989) revealed a positive relationship between religious involvement and moral reasoning about forgiveness. These researchers presented children, adolescents, and adults with two interpersonal dilemmas from the Defining Issues Test (Rest, 1979); administered Allport, Gillespie, and Young's (1953) Religious Belief Scale; and followed up with interview questions aimed at measuring judgments of the propriety of forgiveness in the dilemmas they read. The participants' responses were then analyzed vis-à-vis a six-stage model of reasoning about forgiveness, which Enright et al. developed out of Kohlberg's (1976) moral reasoning model. Results showed that people high in religious beliefs had more sophisticated moral reasoning regarding forgiveness (at least in terms of the Enright-Kohlberg model) than did less religious people. In particular, they were more likely to view forgiveness as being motivated by the recognition of all persons as unconditionally deserving of care and respect rather than viewing forgiveness as being motivated by pressure from other people, the value of maintaining social harmony, or the need to adhere to legal or religious authorities.

All of the research linking religion to forgiveness that we have described above indicates that people who are more religious tend to highly value forgiveness, believe that they should be forgiving, claim to be forgiving people, and believe that others should be forgiving out of the recognition of all people's common worth. Research on the association of religious involvement with measures of actual forgiveness behavior toward specific transgressions, however, has been inconsistent enough that we should pause to consider whether religious people actually are more forgiving in response to single, real-life transgressions. Using the Enright Forgiveness Inventory (Subkoviak, Enright, & Wu, 1992), a transgression-specific measure of forgiveness, Rackley (1993) found no association between religious involvement and forgiveness of one's spouse for a particular transgression. Similarly, with a sample of adults and their parents, Subkoviak et al. (1995) found only a modest overall association between personal religiousness and the extent to which people forgave a specific transgression ( $r = .09$ ).

McCullough and Worthington (1999) called this tendency for religiousness to be associated positively with global assessments of one's own values regarding forgiveness or disposition to be forgiving, but only trivially correlated with forgiveness responses to single, specific transgressions the *religion-forgiveness discrepancy*. They proposed that the religion-forgiveness discrepancy could be attributed to any of four possible causes: social desirability pressures among religious people to be more forgiving, problems with aggregation and specificity in the measurement of the two variables which may mask their relationship, measurement error due to recall or encoding biases, and the distal influence of religion being overridden by more proximal conditions associated with transgression-specific forgiveness.

More recent research has sought to resolve these psychometric issues and explain the observed discrepancy. Tsang et al. (in press) found that when self-reports of forgiveness are based on transgressions that are recalled under restrictive procedures (i.e. forcing participants to recall specific types of transgressions from within specific types of relationships) as well as aggregated across multiple transgressions, positive correlations emerge between religiousness and transgression-specific forgiveness (with religion accounting for approximately 4% of the variance in forgiveness). Therefore, studies with improved methods seem to support the proposition that religious individuals are, in general, slightly more forgiving than are less religious people, even though this association is not terribly strong (Cohen, 1988).

At present, the data make a fairly compelling case that both religiousness and forgiveness increase with age. Moreover, it appears that forgiveness and religion themselves are associated. Is this merely a coincidence, or is it possible that common developmental phenomena produce increases in religious concerns *and* increased valuing of forgiveness as people approach older adulthood? We suspect that the latter may be the case.

### **RELIGIOUSNESS, FORGIVENESS, ADJUSTMENT, AND AGING: CARSTENSEN'S THEORY OF SOCIOEMOTIONAL SELECTIVITY**

Carstensen's work on socioemotional selectivity theory (1991, 1993, 1995; Carstensen et al., 1999) may explain why concerns about both religion and forgiveness emerge in older adulthood and, as we will discuss presently, why forgiveness may turn out to be especially functional



for older individuals. Many investigators have noted that social contact declines during older adulthood (Lang & Carstensen, 1994). Although some have interpreted this trend as evidence for a general pattern of cognitive, psychological, and social disengagement, others including Carstensen and colleagues now posit that such changes are voluntary, resulting from changes in the salience of social goals. Essentially, when time is perceived as open-ended (i.e., during early adulthood), future-oriented goals and knowledge acquisition are of primary concern, but when time is perceived as limited (i.e., during older adulthood, as the end of life looms ever larger), present-oriented goals and emotional aspirations become predominant.

Therefore, as people gradually become older, social partners are chosen for their emotional value and social interactions are regulated in a way that optimizes emotional outcomes. Moreover, individuals become more vested in the relationships they seek to maintain, and the narrowing of contacts occurs not with spousal, family, or close relationships but rather with acquaintances (Carstensen, 1992). One possible result of this focusing of one's socioemotional investments in a narrower but more meaningful set of interaction partners is that the potential links between the well-being of interpersonal relationships and a person's health and well-being may become stronger as people approach older adulthood.

### **Could Increased Religiousness in Older Adulthood Reflect Socioemotional Selectivity?**

Of course, many have noted that among the many functions that religion can serve is the function of providing people with emotionally satisfying interpersonal and spiritual experiences. In this regard, religious concerns may become accentuated in older adulthood not simply because of a need to come to terms with one's own mortality (e.g., the meaning of life, concerns about the afterlife), but also because the interpersonal contacts that are fostered by interactions in religious settings can, for some, lead to emotionally satisfying *interpersonal* relationships too. Moreover, many investigators have noticed that God can serve the role of attachment figure, providing a relationship of warmth, support, and intimacy (Kirkpatrick, 1999). Insofar as God is perceived as a relational being, a growing desire to experience God through prayer, reading of scripture, and worship may help to satisfy the desire for emotional satisfaction that seems to become a preeminent concern in older adulthood.

### **Could Increased Forgiveness in Older Adulthood Reflect Socioemotional Selectivity?**

For similar reasons, forgiveness may come to be increasingly valued in older adulthood. Since the quality of relationships increases with time (i.e. relationships are chosen more selectively and important close relationships are maintained over more casual ones), forgiveness then poses great implications for the relational health of the elderly. Forgiveness helps salvage relationships, and naturally this quality becomes more important as the quality of relationships increases and the quantity decreases. Each instance of unforgiveness burns bridges that are much more intimately connected to people's lives and social goals, making unforgiveness more costly and forgiveness more precious for older individuals. In older adulthood, individuals may lose the perverse luxury of simply terminating relationships that are troubled and moving on to begin new ones.

Indeed, work on the life review indicates that there may be a direct link between forgiveness and the developmental tasks of people in older adulthood and that such bridge-burning stands at odds with the universal need to comprehend one's past experiences as a coherent story in late life (Butler, Lewis, & Sunderland, 1998). Butler et al. contend that some of the challenges in the life review may be to settle unresolved conflicts, right old wrongs, face one's regrets, make up with long-standing enemies, and reconcile one's close relationships. People who are less successful in this life review may be likely to sink into anxiety, guilt, depression, or even despair as they begin to confront dissolution and death. Thus, forgiveness may well be a prime mechanism for achieving a successful life review and being better prepared for the inevitable end of life. In Eriksonian terms, forgiveness may be a powerful tool for the elderly in realizing integrity over despair (Erikson, 1959). With this in mind, it is worth examining the research that focuses specifically on the benefits of forgiveness to physical health, mental health, and relational-well-being.

### **FORGIVENESS AND PHYSICAL HEALTH**

A decade of research has found religion to be beneficial to health and well-being, and many consider forgiveness to be one reason why this is so (Kaplan, 1992, 1993; Kaplan, Monroe-Blum, & Blazer, 1993; Levin, 1996; Koenig, McCullough, & Larson, 2001). Research that bears at least indirectly on the link between forgiveness and physical health includes

a raft of studies that have focused on the harmful effects of sustained hostility and anger on cardiovascular health (Miller, Smith, Turner, Guijarro, & Hallet, 1996; Williams & Williams, 1993). It is possible that the practice of forgiveness may be a key to reducing such sustained hostility (Kaplan, 1992). Though causal relationships between forgiveness and physical health have not yet been established in controlled empirical studies, there are reasons to believe that forgiveness may be beneficial to physical health through both cardiovascular and immunological pathways (see review by Thoresen, Harris, & Luskin, 2000). This is mainly because of the detrimental consequences of chronic anger, hostility, and blaming—concepts related to the forgiveness process. Sustained anger and hostility have been found to predict premature death (Miller et al.). The same is true with blaming others for one's misfortunes (Affleck, Tennen, Croog, & Levine, 1987; Tennen & Affleck, 1990). Furthermore, increasing positive emotional states rather than negative emotional states helps improve immunological and cardiovascular functioning (McCraty, Atkinson, Tiller, Rein, & Watkins, 1995).

More direct evidence that forgiveness may help produce such beneficial outcomes comes from recent research by Witvliet et al. (2001). In their study, participants who were asked to imagine forgiving a real-life offender showed improved functioning on measures of cardiovascular (heart rate, blood pressure) and sympathetic nervous system functioning (skin conductance levels, corrugator electromyogram), compared to those who were asked to imagine not forgiving a real-life offender. Not only did such psychophysiological responses parallel participants' self-reported emotions (i.e., they felt more negative, aroused, angry, sad, and less in control), but those responses also persisted into the postimagery recovery period. Moreover, the researchers argued that because people may intensify their hurtful memories and vengeful thoughts in daily life, such psychophysiological responses may even be more potent during natural reactions to offensive events. They concluded that their results provided a window into what happens to the body during experiences of unforgiveness and that such responses, if chronically exhibited, can severely erode physical health by influencing susceptibility to and progression of disease. Berry and Worthington (2001) also reported an interesting link between forgiveness and cortisol reactivity in response to relationship imagery.

In addition to physiological mechanisms, Thoresen et al. (2000) also suggest several psychosocial mechanisms that might explain the link between forgiveness and physical well-being. They suggest forgiveness may lead to increased optimistic thinking and decreased hopelessness, increased self-efficacy, higher levels of perceived social and

emotional support, and, for some, a greater sense of transcendent consciousness and communion with God—all of which might promote physical health.

### **FORGIVENESS, MENTAL HEALTH, AND WELL-BEING**

Excessive defensiveness, blame, and thoughts about revenge characterize a variety of psychopathologies (Greenwald & Harder, 1994). Also, Poloma and Gallup (1991) found in a nationally representative sample that people who are relatively more forgiving enjoy greater satisfaction with life, whereas more vengeful or resentful individuals tend to experience significantly lower levels of life satisfaction. Even the experience of forgiving God has been found to be related to lower anxiety and depressed mood (Exline, Yali, & Lobel, 1999).

Mauger and his colleagues (1992) developed and conducted research with a Forgiveness of Others Scale as well as a Forgiveness of Self Scale—both of which yielded correlations with some of the clinical subscales of the Minnesota Multiphasic Personality Inventory (Hathaway & McKinley, 1946). The latter scale, though, showed stronger correlations with depression, anger, anxiety, and low self-esteem than the former, suggesting that feeling forgiven may be more strongly associated with psychological well-being than is the act of forgiving other people. Similarly, Tangney and her colleagues (1999) found that the tendency to forgive others was also related negatively to symptoms of depression and anger, as well as to lower paranoid ideation and interpersonal sensitivity, while the tendency to forgive oneself was negatively related to depression, paranoid ideation, interpersonal sensitivity, and psychoticism.

Researchers also have investigated relationships between forgiving individual transgressors and various measures of psychological well-being. In a cross-sectional survey of 30 divorced or permanently separated mothers with children aged 10 to 13, Aschleman (1996) found that mothers who had forgiven the fathers for previous transgressions committed against them were more likely than unforgiving mothers to exhibit a greater sense of self-acceptance and purpose in life. They also showed less self-reported anxiety and depressive symptoms. Previous work by Trainer (1981) yielded similar results. Other research has not yielded convincing evidence, demonstrating either weak or nonsignificant correlations between self-reported measures of psychological well-being and forgiveness (Hargrave & Sells, 1997; McCullough et al., 2001;

Subkoviak et al., 1995). Though McCullough et al. (2001) found cross-sectional correlations with life satisfaction, they found no evidence that forgiving actually causes such improvements in an 8-week follow-up period.

In a review of the literature on forgiveness and mental health, McCullough (2001) suggested that the reason only some researchers find evidence of the link is because the link is, in fact, somewhat elusive in most situations. Subjective well-being and mental health are influenced by many psychosocial factors, and individual transgressions may not exert strong direct effects. Also, it is likely that forgiveness of only certain interpersonal transgressions (i.e., those that are serious enough) may buffer people from stress and lead to psychological benefits. This would explain why research by Aschleman (1996) and Trainer (1981)—which involved especially severe events—produced evidence, while other efforts have not. In a similar vein, Subkoviak et al. (1995) suggested that forgiveness may only help adjustment when it concerns transgressions in the context of spousal, romantic, and family relationships. Several researchers contend that future work in this area should focus not on the “main effects” of forgiveness on mental health but should instead examine specific relational contexts (Fincham, 2000; McCullough, 2001). It should be noted that this notion of forgiveness being especially beneficial in the context of serious relationship conflicts has important implications for the elderly, where important relationships increasingly play a central role.

Before discussing such implications and the relevant research linking forgiveness to adjustment in older adulthood, it is worth mentioning the research on forgiveness interventions that have been employed with promising results. This area of research has likewise been growing, with various forms (i.e., individual, group, and psychoeducational therapy) being successfully applied to a variety of clinical and non-clinical subject populations.

One of the first of these interventions was actually an experiment conducted on elderly women who had recently gone through a hurtful interpersonal experience (Hebl & Enright, 1993). These researchers randomly assigned the participants to an 8-week forgiveness intervention group or a discussion-only control group. Results demonstrated that women in the experimental group scored higher in forgiveness and willingness to forgive and that level of forgiveness was related to greater self-esteem, as well as lower levels of depression and anxiety. Extending on this work, Al-Mabuk, Enright, and Cardis (1995) conducted two group intervention studies (one that lasted 2 weeks and one that

lasted 6 weeks) with adolescents who felt that they had been inadequately loved by their parents. This intervention, designed to help the participants' forgive their parents, produced increases in self-esteem, reductions in depression and anxiety, improved attitudes towards parents, and greater levels of hope.

Finally, some interventions have revealed long-term benefits. A one-on-one forgiveness intervention with female victims of physical incest (by a male relative) yielded increases in forgiveness, hope, anxiety, and depression for people in the experimental group. Once participants in the wait-list control group went through the same treatment, they showed similar improvements (Freedman & Enright, 1996). Moreover, these improvements remained at a follow-up one year later. Using a similar experimental design on men who had been hurt by their romantic partners' decision to have an abortion, Coyle and Enright's (1997) intervention produced increases in forgiveness and decreases in grief, anger, and anxiety. The wait-list control experienced like improvements, and these benefits remained at follow-up 3 months later.

Worthington et al. (2000) summarized the effects of forgiveness group interventions with a meta-analysis of 12 studies. They found that the interventions were, on average, effective in improving participants' forgiveness scores by 43% of a standard deviation (Cohen's  $d = .43$ ) over the control group. Furthermore, they observed that more contact was more efficacious for clients than less contact, with interventions of six or more hours in length yielding 76% of a standard deviation (Cohen's  $d = .76$ ) over the control group and interventions of 4 hours or less in length yielding 24% of a standard deviation more (Cohen's  $d = .24$ ).

Less formal group involvements, such as religious groups and self-help groups, also appear to help people, in part, by helping them forgive. Wuthnow (2000) reported the results of a national survey of 1,379 Americans who participated in small, typically informal religious groups (e.g., prayer groups, bible study groups, or Sunday School) or self-help groups (e.g., self-help groups, women's groups, men's groups). One of the interesting commonalities that these informal religious and self-help groups seem to share is that they encourage forgiveness. Fully 61% of the respondents reported that their group had helped them forgive. Also, membership in a group that explicitly encouraged forgiveness was related to increases in self-reported successes in overcoming addiction, successes in overcoming guilt, and perceptions of encouragement when feeling discouraged.

## **FORGIVENESS AND RELATIONAL WELL-BEING**

Much of the potential for forgiveness to contribute to well-being may come from its potential for helping people to mend and preserve their supportive, close relationships, and several studies have revealed evidence that forgiveness may be beneficial to relational well-being. This seems especially likely when one considers that the lack of supportive relationships has been linked to a wide variety of psychological and physical diseases (Baumeister & Leary, 1995; House, Landis, & Umberson, 1988). Just as research has uncovered positive links to mental health, several studies have also revealed positive correlations with relational well-being (Nelson, 1993; Rackley, 1993; Woodman, 1991). McCullough and colleagues (1998) also found that the degree to which the partners in approximately 100 heterosexual romantic relationships reported having forgiven each other for two specific transgressions that had occurred in the history of their relationship (the most severe transgression ever and a more recent transgression) was positively associated, not only with their own satisfaction with and commitment to their romantic relationships, but also with their partners' satisfaction and commitment as well. These findings suggest that forgiveness is linked to both the forgiver and the forgiven's reports of relationship quality.

Conversely, other research has demonstrated that endorsing revenge as a conflict resolution strategy is positively related to difficulty maintaining close friendships (Rose & Asher, 1999). The more that the children in this study reported "getting back" at friends in imaginary conflict scenarios, the fewer best friends they had, the more their peers rated them as hostile and less positive, and the less accepted they were by their peers. Though this research was conducted on school children, it is safe to assume that such strategies become increasingly maladaptive as the maintenance of high-quality relationships take precedence. One would expect that adopting this interpersonal coping strategy early on in life could produce a pattern that, if maintained, would allow people to maintain good friends later in life. This indeed poses dim prospects for older individuals, who value close relationships more.

### **FORGIVENESS AND ADJUSTMENT IN AGING: REFLECTIONS OF SOCIOEMOTIONAL SELECTIVITY?**

In fact, given older adults' sharpened focus on maintaining a core network of close, emotionally satisfying relationships, it seems plausible

that forgiveness—which helps people repair breaches in close relationships—will be particularly strongly related to measures of health and well-being in older adults. One recent study, which is discussed in detail by another contributor to this volume (Musick, this volume), has yielded interesting evidence that this is actually the case. Toussaint, Williams, Musick, and Everson (2001) used national probability data to examine whether self-reported forgiveness was associated with psychological distress, life satisfaction, and self-rated health for adults in three age groups: 18–44, 45–64, and 65+. The extent to which respondents reported a tendency to forgive others who harmed them was positively correlated with psychological distress for all age groups, even after controlling for sex, race, education, income, marital status, a variety of measures of religiousness/spirituality, and even measures of self-forgiveness, feeling forgiven by God, and attempts to facilitate forgiveness through asking forgiveness or prayer. The strength of these associations was found to be stronger for the two older groups than they were for the group of adults aged 18–44. Moreover, Toussaint et al. (2001) found that forgiving others was associated uniquely and positively with life satisfaction for adults aged 45–64 and 65+, but not for adults aged 18–44. Finally, it was only for the oldest group of adults (aged 65+) that forgiveness of others was associated positively with self-rated health. For adults aged 18–44 and 45–64, the associations of forgiving others with self-rated health were negligible. Toussaint et al. interpreted this pattern of findings as evidence that forgiveness is ultimately beneficial for physical and mental health, especially among elderly adults, but that not all forms of forgiving may be beneficial (e.g., initiating forgiveness, insincerely forgiving or pseudo-forgiving, or forgiving related to personality characteristics such as neuroticism or low self-esteem).

Other investigators have found evidence that forgiveness is related to better physical or psychological adjustment in older adulthood (Hebl & Enright, 1993; Strasser, 1984), but Toussaint et al.'s (2001) evidence is particularly in line with our prediction that forgiveness should become more important for health and well-being as people age. People focus their socioemotional investments into a smaller and more meaningful set of intimate interpersonal relationships as they age, and the strength and stability of those relationships should become more predictive of health and well-being in the latter years. Insofar as forgiveness helps to maintain strength and stability in those key relationships, the ability to forgive seems to become more crucial for maintaining health and happiness into older adulthood.

More recent research by Krause and his colleagues (Krause & Ingersoll-Dayton, 2003; Krause, 2003) corroborated this finding that forgiveness



may be particularly salubrious for elderly adults. Qualitative research by Krause and Ingersoll-Dayton found that the manner in which elderly Christian adults go about forgiving their transgressors differs: some do it automatically, some require acts of contrition, and some require admission of wrong-doing and restitution if possible. Subsequent research (Krause) using a nationwide survey showed that this distinction is important for understanding the combined roles forgiveness and religion play (at least with respect to Christianity) among the elderly. He found that: (a) forgiving others was related to enhanced psychological well-being more so than merely feeling forgiven by God; (b) forgiving others unconditionally was related to greater psychological well-being than forgiving others on the condition that they earned it through contrition; and (c) those who feel forgiven by God are less likely to expect transgressors to perform acts of contrition than those who do not feel forgiven by God. Therefore, it may be useful for people to first consider what they may do to feel forgiven by God for transgressions they may have committed, and second, to trust that engaging in such a form of catechism may, in turn, help guide others who have wronged them so that they no longer need to focus on expectations of contrition from wrongdoers. Such an approach may help elderly adults maintain strength and stability in their relationships and perhaps their psychological well-being also.

## SUMMARY

The existing evidence from both cross-sectional and longitudinal studies suggests that religiousness increases as people age, and the existing cross-sectional evidence suggests that older adults are more forgiving, on average, than are younger adults. Moreover, it is clear that religiousness is encouraged by religious doctrine worldwide and seems to be more common in the lived experience of religious people. The links between age, religion, and forgiveness may be explained, at least in part, by thinking of them as responses to superordinate developmental changes in people's relational goals as they age (Carstensen, 1991, 1992, 1993, 1995; Lang & Carstensen, 1994; Van Lange et al., 1997). Forgiving becomes more important later in life because emotional gratification in relationships becomes a more important ingredient for well-being, as do close relationships with long-term friends and family.

Most of the scholarship positing links between forgiveness and health is either speculative and theoretical, or preliminary and exploratory. However, there are many reasons to believe that forgiveness is an

effective means for repairing and maintaining solid, strong interpersonal relationships, and thus, that an unwillingness or inability to forgive would be a risk factor for a variety of physical, mental, and spiritual hardships. Related research from nursing and care-giving only support this notion that forgiveness becomes more beneficial later in life (Mickley, Soeken, & Blecher, 1992; Mickley, Carson, & Soeken, 1995; Mickley, Pargament, Brant, & Hipp, 1998), and exciting recent research by Toussaint and colleagues (2001) on age-related differences in the forgiveness-health relationship confirm these observations.

Nonetheless, rigorous evidence of the sort that would allow us to conclude definitively that forgiveness leads to improvements in health and well-being, or prevents declines in health and well-being, has yet to be conducted. Epidemiological research with representative samples, controlling for the many demographic, psychological, personality, social, and physical health confounds that might be responsible for the forgiveness-health relationship, has only begun (see Musick, this volume, for a report on a very good start). Moreover, investigators have only begun to conduct the laboratory-based studies that would allow for intensive observations of the biomedical pathways that could explain such associations. Clearly, research on forgiveness, health, and well-being is only beginning, and is a long way from yielding definitive conclusions.

Even more tentative are any conclusions that one might draw regarding the role of forgiveness in adjustment among older adults. In addressing this specific issue, investigators so far really have only scratched the surface. However, as theoretical and empirical work progresses, it seems not unlikely that much of this work will confirm, though perhaps also qualify, what religions have taught for millennia regarding the salutary potential of forgiveness.

### **AUTHOR NOTES**

Preparation of this paper was supported by a grant to Michael E. McCullough from the Campaign for Forgiveness Research.

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