

Forgiveness & the Healing Of Emotional Wounds

Dr. David G. Benner, Ph.D., C.Psych.

Distinguished Professor of Psychology and Spirituality
Psychological Studies Institute, Atlanta (Georgia, USA)

Chief Psychologist
Child and Adolescent Services, Hamilton (Ontario, Canada)

Director, Institute for Psychospiritual Health - www.psy.edu/iph

NOTE: This reading is adapted, with the author's permission, from "Free at Last: Breaking the Bondage of Guilt and Emotional Wounds" (Essence Publishing, 1998). Also note that copies of this book may be ordered from the publisher on-line at www.essence.on.ca; by e-mail at info@essence.on.ca; by fax (613-962-3055); or by surface mail at Essence Publishing, 44 Moira Steet West, Belleville, Ontario, Canada K8P 1S3.

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First, two observations:

- 1 A small percentage of people who come for psychotherapy sometimes get worse. A small percentage who come for help in counselling or therapy and are depressed (ie, have emotional wounds) sometimes leave feeling better about themselves, but they're angry or obnoxious.

Therapists sometimes confuse expressing anger with releasing anger. What is needed for emotional healing is the release of anger. Expression of anger is a part of that, but the real challenge is expression moving us towards the end of release. Forgiveness is that mechanism of releasing anger.

- 2 We may have a feeling of being quite incapable of forgiving a person and being quite angry with ourselves for having so much trouble with it. We feel we should be able to forgive. We can read all the books on a subject and know what has to be done, but never have the experience of actually forgiving someone who we feel caused us a past hurt.

Forgiveness – What it is and what its role is in healing.

The concept of forgiveness is conspicuously absent from psychotherapeutic theory and practice. A literature search on articles over the past 25 years shows fewer than 50 articles on forgiveness. In contrast anger is discussed in thousands of articles in these same journals. But the concept of release of that anger through forgiveness is not an option that's even been seriously considered by most psychotherapists. Some who have considered it reject its place in psychotherapy, considering that forgiveness ignores the demands of justice since many people simply do not deserve to be forgiven. These people hold that forgiveness in therapy is utterly unprofessional and irresponsible because if somebody doesn't deserve to be forgiven we are doing them a disservice by forgiving them and letting them off the hook. I think this is tragic.

Others feel uncomfortable with a concept they view as essentially religious. Others feel that forgiveness has no place in psychotherapy as they think of forgiveness as based on denial and that it leads therefore only to symptom suppression, not real healing. This they suggest makes it inappropriate in psychotherapy.

But what possibility is there for the healing of emotional wounds if forgiveness does not have any place in the process? I think very little. Given the tremendous amount of time therapists spend with people who have been abused, damaged, neglected and mistreated I've come to feel that the single most important thing that psychotherapists need is an understanding of the important place of forgiveness in the healing of emotional wounds.

Definition of Forgiveness

1. Forgiveness is not forgetting. The popular adage of "forgive and forget" (see Smedes¹, who said the publisher chose the title of his book because that's what sells) is misleading as it implies that forgiveness is

easy, which it isn't. It also suggests that we can tell its outcome once we've forgotten, that is, we know that forgiveness is complete once we no longer remember. To forget a hurt is to repress it. Forgiveness does not eliminate memory. Acts that have been forgiven are still available for recall. However, over time they should have less and less emotional pain attached to them. And more importantly they should have less and less anger associated with them.

2. Forgiveness is not to excuse. If we can excuse (condone) the behaviour of the person who hurt us, forgiveness is unnecessary. But on the other hand it is precisely because the behaviour of the person who hurt us is so inexcusable that we must forgive. Forgiveness is the only healing response to injustice. There are always reasons why the other person did as they did, but reasons are not excuses. To make excuses for the other person is to engage in rationalisation as a way of defending against the hurt. But in most instances of serious hurt, the behaviour that caused the hurt is genuinely inexcusable.
3. Forgiveness isn't the same as ignoring. Attempts to ignore the pain and hurt are also based on denial. Denial has no role in genuine forgiveness, which involves facing and dealing with the pain head on. Forgiveness involves accepting the experience as real, not attempting to minimize it. To ignore or overlook it is an attempt to change reality by selective attention. But such magical thinking does not produce genuine healing.
4. To forgive is not necessarily to extend unconditional trust. Some people resist forgiveness because they assume that if they forgive the person who hurt them they'll have to trust them. Trust has to be earned. Forgiveness doesn't have to be earned. Trust does. We will remember and we must act in the light of the memory if we are to be responsible to ourselves and to the other person. Genuine forgiveness does not mean that we must assume that others will never again hurt us. Nor does it mean that we should not take steps to minimize this possibility.

There are always reasons why the other person did as they did, but reasons are not excuses. To make excuse for the other person is to engage in rationalization, as a way of defending against the hurt, but in most instances of serious hurt, the behaviour that caused the hurt is genuinely inexcusable. An inability to extend unconditional trust is often the most appropriate thing. It does not mean however that we have not genuinely forgiven the other person. So forgiveness is not the same as unconditional trust.

If true forgiveness has nothing to do with fairness, forgetting, or even trustworthiness, what is it? Most simply, forgiveness is the conscious decision to let go. To let go of:

1. resentment.
2. the right to retaliate.
3. the right to hang on to the emotional consequences of the hurt.

When people are able to do this they move from victim-hood to healing. No longer in bondage to the past, they're now free to live their lives in the present. Free to live with vitality and to work towards the future with hope. This is emotional healing.

Forgiveness, according to Jewish philosopher Han Ahrent, is the only available remedy to the injustices of life. Apart from forgiveness people are destined to be victims of the unjust things that happen to them. This is precisely the way so many people who consult therapists feel. But their feelings obscure the truth. That is, they feel that they are victims of the bad things that have happened to them. True, bad things have happened to them, things that they did not deserve, things that they would have never chosen, but properly understood and experienced, forgiveness holds the key to change. Not to change the past, but to change their reactions to the past and their bondage to it. By means of forgiveness victims can become free of the tyrannizing bondage of injustice and can experience healing of their emotional wounds. This should never be thought of as easy. For any significant emotional injury will make forgiveness the hardest thing that anybody can be asked to do. But it is possible and it has therefore an important role in psychotherapeutic work designed to help people who have experienced emotional wounds.

The Forgiveness Process

Three models of the forgiveness process have been developed within the last decade.

1 A Five Stage Model – Lynn & Lynn (Catholic Brothers)

Building on the stages of death and dying, described by Elizabeth Kubler-Ross. Lynn & Lynn describe stages of denial, anger, bargaining, depression, and acceptance, as characterising the process of moving from hurt to forgiveness.

- 2 My own model of the forgiveness process describes three tasks of the forgiveness process:
 - a. Re-experiencing the feelings – the emotional aspects of forgiveness
 - b. Re-interpreting the experience – the cognitive (intellectual) aspects of forgiveness
 - c. Releasing the anger – the volitional aspects.
- 3 Vitz and Mango's five-stage model of forgiveness: denial, anger & hatred, resistance, depression, and resolution.

The models developed by Lynn & Lynn and Vitz & Mango are quite similar to each other. The differences between my model and theirs are more pronounced. At core these differences are differences in focus. The other two models describe stages in the process of forgiveness whilst my model describes the tasks (what to do) of the forgiveness process, rather than provide a map to help determine how well one is moving through the forgiveness process. I do not assume that there is anything automatic about this forgiveness process and am more concerned in describing what must be done to move from hurt to forgiveness. Mine is about TASKS – what to do. I assume that without genuine painful hard work people never arrive at forgiveness of significant hurt. The passage of time may be sufficient for forgetting and a degree of emotional numbing, but it is not sufficient for genuine forgiveness.

Genuine forgiveness requires that a person engage in the emotional, intellectual, and volitional work described by the three tasks that I have identified in my model. The model provides some tools to help people get unstuck in the forgiveness process.

What is an emotional wound?

Before reviewing the work involved in moving from the bondage of an emotional injury to the freedom of forgiveness and emotional healing it may be helpful to first consider what we know about the dynamics of emotional wounds. What is an emotional wound? The best-developed model for the dynamics of emotional pain is that presented by Hargrave. He applies a contextual family therapy perspective to the understanding of emotional wounds, because he thinks they normally occur within the family. Hargrave points out that the essential dynamics of an emotional injury are a violation of trust. Emotional wounds, he points out, occur when trust is betrayed: Parents physically or sexually abuse their children, spouses are sexually unfaithful to those to whom they promised fidelity, etc. In these ways people in relationship with each other violate the trust of those with whom they are in relationship and the result is an emotional wound.

While Hargrave is correct in identifying the core of an emotional wound as the violation of trust, it would perhaps be more precise to identify the cause as the perceived violation of trust. It is quite possible for a person to feel emotionally wounded in the absence of an objective violation of trust. Perception is (we must never forget) everything. Similarly many violations of trust go unnoticed and do not result in an emotional wound. Given these facts, we can say that emotional wounds have their origins in perceived violations of trust. Perceived violations that may have been either implicit or explicit.

But what exactly is an emotional wound? Hargrave suggests two optional feelings and behavioural consequences that form the essential dynamic of an emotional wound.

People whose sense of trust has been violated are likely to feel either

- 1 **rage**, as they experience uncontrolled anger towards the person whom they perceive as violating their trust, or
- 2 **shame**, as they accuse themselves of being unlovable and not deserving a trustworthy relationship.

In addition, they are likely to either behave in other relationships in an overly controlling manner or in a chaotic manner. Overly controlling as they seek to minimize the risks of further hurt, or chaotic, as they seem to despair of any hope that anything they can ever do will minimize the chances of further hope.

While Hargrave's understanding of the behavioural expressions of emotional pain is helpful, my clinical experience suggests a different emotional dynamic. Rather than two optional feelings, that is people experience either anger or shame, I suggest two alternating feelings, that people go through both of them. These are anger and sadness (or depression). Sadness sometimes manifesting itself in terms of clinical depression and despair, sometimes manifesting itself as a lower level sadness.

Although anger appears to be the first response to an emotional injury, it is actually a defence against an earlier and even more painful feeling. The first response to the experience of an emotional injury is usually a sense of loss. It's common for this loss to be covered by anger so quickly that most people are unaware that loss is a part of the response to hurt. However, it's a very important part of the whole process and we cannot gain freedom from the anger without facing the underlying sense of loss.

Emotional wounds always leave people with some diminished sense of self. It may be a loss of self-esteem, or possibly a loss of a sense of self-confidence, or competence. Often people report their emotional wound to be associated with a loss of innocence or possibly a loss of trust. Shadowing the basic assumptions by which life has been lived before the emotional wound also form an important part of the loss experience. Belief in one's invulnerability, the belief that events are predictable or controllable, the belief that life is fair, the belief that the world is benevolent or at least benign, or the belief that the self is worthy can all be shattered by traumatic experiences. The loss of these basic life operating assumptions is a major one, but whatever its form, feelings of loss form the deep and fundamental core of emotional wounds. While anger quickly comes as a defence against this feeling of loss the first response to emotional hurt always seems to be that of violation experienced as something having been taken away from me.

The dominant feelings associated with the experience of loss are those of vulnerability and sadness. The secondary feelings are being helpless, demoralized, abandoned, guilty, and shameful. These feelings are so distressing that few people are able to tolerate them for long. Anger arises as a way to defend against them.

Together then, anger and sadness form the two complementary faces of the experience of an emotional wound. However, because it's difficult to sustain both feelings at the same time it's most common to respond to hurt by alternating between the two feelings. For a while the person may be self-occupied and aware to some extent of the damage they have sustained by the experience of hurt. In this stage they experience sadness and possibly depression. They feel acutely vulnerable to further hurt and feel the need to retreat to some safe corner of their world. But then the pain gets too intense and they end their introspection by shifting their attention to the one who has hurt them. In so doing they move from sadness to angry feelings. Anger is thus a secondary emotional consequence. It serves as a defence against the sadness.

People can get stuck in either of these stages of sadness or anger. Chronic depression is a result of getting stuck in the feelings of loss. Such people are more in touch with their loss than with their anger. They shut down their emotions so as to no longer feel the hurt and the pain. They also tend to withdraw from other people and consequently feel increasingly estranged from themselves and others. Their life becomes more and more filled with despair and self-pity until they become so comfortable with their depression that they sometimes prefer it to restored life. Ironically depression has become so much a part of them that while it's a source of great pain it becomes a stable part of their identity.

On the other hand, chronic anger in any of its manifestations is also an easy place to get stuck in the healing process. Anger may be preferable to the painful feelings of loss because the individual experiences some relief from the vulnerability through their rage. Part of this comes from the sense of empowerment. People who have been emotionally wounded know what it feels like to be powerless and vulnerable. Their anger provides a welcome source of new strength. Letting go of this anger is therefore often difficult.

Before discussing the work of forgiveness in this healing process, we should note that a failure to address the underlying dynamics of loss is not the only reason why people get stuck in their anger and have trouble with forgiveness. In an excellent analysis of forgiveness from an object relation's point of view, John Gardiner notes that borderline personality disorder patients have an enormous difficulty with forgiveness because of their reliance on splitting and projection. He suggests that authentic forgiveness requires an integrated realistic perception of both the positive and negative aspects of self and others. Borderlines have difficulty with this. This is the reason that splitting (a tendency to see oneself as all good or all bad or to see others as all good or all bad) and projection (the tendency to project onto others the unacceptable bad within self), whether it occurs in borderline patients or others, makes forgiveness so difficult.

Gardiner's study of borderline pathology also leads him to suggest that a reliance on splitting results in impairment in empathy and that this also makes forgiveness more difficult. This is a profoundly helpful observation. As we'll see in what follows, the development of empathy for the offender is an essential component in the work of forgiveness. Any serious impairment in the capacity for empathy therefore will be an impediment to forgiveness.

The Three Tasks of the Forgiveness Process

One of the most commonly encountered problems in therapeutic work with Christians who have experienced emotional wounds is that knowing the extremely high value placed on forgiveness by Christianity, they are often too hasty to clear their conscience and attempt to forgive whoever hurt them. Christians don't have a monopoly on premature forgiveness, but they do show a massive tendency towards this. In fact, often very devout Christians will come for help quickly assuring the therapist that they have already forgiven who has hurt them. But they're telling the therapist that through clenched teeth. They're saying that they're not angry, that they've forgiven, but clenched hands and tight faces and teeth, show it's quite apparent that they haven't forgiven.

As a result of this they find themselves still stuck in anger or depression that they don't understand. The reason for this "stuckness" is that their acts of forgiveness were premature. Often somewhat ritualistically, before engaging in the hard work of the forgiveness process such efforts can actually impede genuine forgiveness because they suggest the work is already done. Genuine forgiveness, that is, the deep and meaningful release of resentment, victim-hood, and the right of retaliation, comes only as a result of hard work.

This hard work involves three spheres of personality and three different sets of therapeutic tasks. These tasks are interwoven and progress through them is never linear, so don't think you do one, then you finish it then you do another, and then you do the next. In process theories these tasks are interwoven. It's important therefore not to interpret this model in a mechanical manner. In describing the tasks of emotional healing, each of which addresses one primary sphere of personality, we're artificially separating things that in reality go together. Not only do the tasks overlap, but to some extent each involves the spheres of personality that are dominant in the others.

Whilst somewhat arbitrary therefore in describing separate emotional, intellectual, and volitional tasks that must be accomplished in the process of forgiveness, it does have the advantage of emphasizing the fact that emotional healing must involve more than the emotions. Too often therapists specialize in one sphere of personality, their therapy just addresses feelings, or they're cognitive therapists and just address thinking. They fail to address all the components of an emotional injury. Some may be very adept in uncovering repressed or denied emotions but fail to do the necessary intellectual processing of the trauma. Others bring a cognitive orientation and quite adequately help the person do the necessary intellectual work, but may fail to pay sufficient attention to the emotional and volitional work. Yet others bring a behavioural orientation to forgiveness work and correctly emphasize the choices that the person must make without adequately engaging in the emotional and cognitive tasks.

While each individual will differ in what emphasis is required, all three components of work are essential. So let's go through the three tasks in order.

Task 1 Re-experiencing the Pain – The Emotional Challenge

The fact that the healing of emotional wounds requires dealing with the emotions is quite obvious. But what exactly has to be done with those emotions? The principle lesson that has been learnt from the past 15 or so years of work in the emerging field of trauma psychology is that the individual must reconnect with the underlying pain in order to experience any genuine healing.

Efforts to resolve emotional wounds that resist or ignore reconnection with the underlying pain are based on denial or repression. Thus when people attempt to move towards forgiveness without passing through this stage of meaningfully re-experiencing the pain, have set themselves up to never experience genuine healing. Resistance to re-experiencing the pain has often felt like a step backwards. People often state that they felt those feelings deeply when the hurt occurred and feel therefore no need at present to go back to those feelings. But it is almost inevitable in emotional wounds of any significant magnitude that the pain gets short-circuited in the original experience. Attempts to escape the pain are so strong that the pain does not get processed. Instead the pain gets repressed, split-off, in some way not dealt with. This is the emotional work of feeling.

Processing the feelings is not the same as talking about them. The feelings must be re-experienced and expressed. Expression of the feelings associated with the emotional injury is a psychological damage repair mechanism. This is the reparative nature of mourning. Cathartic release of the underlying feelings associated with emotional wounds is necessary even if not sufficient for emotional healing. The essence of the emotional work of healing is allowing the person to experience all the feelings associated with the hurt. But as we noted earlier, at the basis of these feelings and at the core of emotional injury, is the experience of loss. Experiencing and expressing anger therefore is not sufficient. Anger needs to be explored but its roots in the experience of loss must also be identified. Mourning of these losses must be a central part of the emotional work that needs to be undertaken.

Mourning the losses associated with the emotional injury obviously requires identifying these losses. Patients often need help with this. A young woman seeking help around ambivalence about a relationship that was rapidly moving towards marriage reported in the first session childhood physical abuse at the hands of a cruel father. Fairly quickly she was able to get in touch with her anger at what had happened to her but she had much trouble moving beyond her anger. When asked what things she felt she might have lost as a result of living for so many years in a house with this tyrannical father she indicated that she couldn't think of anything. After a bit of prodding and further exploration and explanation of what the therapist was thinking about, she somewhat tentatively offered that well maybe what you mean is that I lost my sense of trust. That was a good beginning. Opening this gate then led to a number of other feelings of loss: a loss of childhood, a loss of innocence, a loss of a sense of safety, a loss of ideas about her family and about family in general – this may be a clue to the patient's ambivalence about marriage – and her loss of trust in God. Where was God that this happened to me? Where was God when it was happening to me? All of these losses were part of the sense of violation she experienced at the hands of her father. Opening herself to these experiences of her loss quickly moved her beyond her initial feelings of anger. She now felt a profound sense of sadness, feelings of grief for the little girl that had once been, but so quickly had to be changed into an adult. These feelings were profound. And mourning this loss, as well as expressing the associated anger, was the core of the emotional work that she had to undertake. Most therapists know how to help people with such work, and do it quite well. This is the bread and butter of what we do.

Task 2 Re-interpreting the Pain – The Intellectual Challenge

The second major task often introduces something new. That's reinterpreting the hurt, because emotional healing involves not just release of emotions but also reinterpreting the experience of the hurt. As recently identified by the proponents of narrative psychology, and as long recognised by advocates of cognitive approaches to therapy, it's our construal of what happens to us, more than that which actually happens to us, that either keep us sick or make us well. It's the stories we make up to make sense of our experience that either keep us ill or make us healthy.

The stories that we make up to make sense of our experience become parts of ourselves. This is the reason why victim-hood is so powerful. Victim-hood is not merely an explanatory story to make sense of something that happened, it becomes a part of identity. What we know about victim-hood as an identity is that it's not a good place to be. The cognitive challenge associated with the second major task in emotional healing is helping people re-story (re-tell the story of), their traumatic experiences. Make no mistake about it, they have already formed stories about what happened and why it happened. Humans do that automatically. It doesn't seem to be something about which we have a choice. The choice lies in what stories we create, that is, how we understand our experience.

Re-interpreting one's experience begins by exploring the story that has already been formed to make sense of experience. Narrative repair is the process of re-integrating the experience, of reconstructing its meaning. It involves taking the broken fragments about the person's assumptions about themselves and life and reweaving these together into a fabric that restores meaning. It involves a careful re-interpretation of the events of the trauma separating out events from interpretation. The events are what happened. The interpretation is the story, the attributions, the patterns of blame and responsibility, and the meaning or significance of the events. The interpretation is the adjustment of one's story to make the trauma and its consequences part of the narrative. It's the rebuilding of a worldview. The search persists until the negative events can be integrated into a coherent stable and adaptive conceptual framework that provides a source of predictability and order to life. Therapists can help in this process by helping the person tell their story. This is why it is so important that people just tell it over and over. One of the most important things that we do in therapy is helping people learn their story and they learn it by telling their story. This narrative part of the work is very essential.

Therapists can help in this process just by helping people tell their story bit by bit and with increasing coherence and by gently challenging assumptions as to how the story was formed. Remember the story isn't automatic. I created the story. The story was not imposed on me by external events or by what people did to me. I made up the story. That's the difference between the story and the events. By this sort of involvement we help people reconstruct their story.

In helping people deal with emotional wounds and move towards forgiveness therapeutic reconstruction of a story involves three separate but closely related accomplishments. All are related to the ability to see the offender with empathy and to see the self with realism.

1. Seeing the offender is like me. – The first of these is helping the person see the offender as like him or herself, to see the offender like me. This involves seeing the one who hurt me as like me, weak, needy, coping with inadequacies, acting out of self-interest that have impaired my abilities to see the needs of others.

2. Seeing the offender as separate from what they did to me – The second aspect of reinterpreting the experience is seeing the offender as separate from what they did. This involves moving beyond seeing the offender as a caricature, the villain, the monster, the devil, but seeing them as a person. Not only seeing them as the cause of their hurt. An inability to see the person who hurt us as a person, makes forgiveness impossible.
3. Seeing myself as like the offender – Finally, forgiveness will only be possible when the one who has been hurt can see themselves as like the one who has hurt them in some basic ways.

When we can see ourselves as like those who have hurt us in basic ways then we can move towards forgiveness. When I can see that I also have hurt others not necessarily out of malice, often out of insensitivity, when I can see myself as one who has needed and hopefully received forgiveness, then forgiveness of others is possible. I am unsure how someone who themselves has never been forgiven could ever find in themselves the ability to forgive another. Recalling how others have forgiven me and released me of my resentment and retaliation opens the possibility for me to forgive. That's the second task.

Task 3: Releasing the Anger – The Volitional Challenge

When all is said and done, forgiveness is simply the conscious decision to release the anger, relinquish the right to retaliation, and be willing to move beyond victim-hood. What must be said and done before people are generally capable of doing this is the work of the preceding two tasks. When this has been done adequately this third task is often anti-climatic. When it has not been done adequately its often impossible. Most often it's some where between these two extremes. Difficult but possible.

Most people need help in being realistic about this third stage of releasing the anger. They need to understand that forgiveness is a process. They need to understand that it has to be done over and over again. I often compare it to an image of waves from the ocean under conditions of a receding tide. Even after forgiving the person who has hurt them they will likely be again washed over by fresh waves of anger and sadness. Once again, time after time the challenge is to release the anger and mourn the losses. As each wave washes up over them they begin to notice that the strength of successive waves is less and less. The tide is beginning to go out. When forgiveness rather than resentment is embraced the tide recedes. Its also helpful for people to realise that forgiveness is always offered in the midst of confusion. They will never have all the answers to why things happened as they did.

Finally, its important to realise that forgiveness must be offered for what people do, not for who people are. Lewis Smedes, in "Forgive & Forget", says that we don't forgive people for who they are, we forgive them for what they did. I'm engaging in an unhelpful task for trying to forgive you for being an insensitive, uncaring, brutal slob, and monster. What I have to do is forgive you for what you did. I forgive that you did such and such to me. We need to understand that forgiveness needs to be about specific behaviours not about character traits.

Many people at this stage also need help in understanding the sources of their resistance to forgiveness. Some of those we talked about earlier. Sometimes this is a fear of returning to vulnerability. Other times it's a feeling that its their right to hold a grudge. Other times its a reluctance to relinquish the sense of power that their anger provides. Yet others may equate their non-forgiveness with the punishment of the one who hurt them. While others may feel they can only forgive if the other person requests it or deserves it. All of these are misunderstandings.

Each of these misperceptions regarding the nature of forgiveness must be addressed if they lie behind resistances to releasing one's anger. Vetz & Mangel suggest a number of signs of genuine forgiveness that can help both the therapist and patient assess progress through this volitional task. They point out that genuine forgiveness is associated with the ability to once again use one's anger constructively. I find this very helpful. They also point out that another evidence is an increase in genuine concern for and positive attitudes towards the person who has been forgiven. They point out how this contrasts to the signs of false forgiveness that is characterized by such things as denial and reaction formation. Such neurotic or pseudo forgiveness can easily be understood as being in the service of psychopathology that must be resolved before genuine forgiveness can be experienced.

Forgiveness and forgiveness alone has the power to break the controlling influence of the bad things that happen to people. When it does it forms an integral part of the healing of emotional wounds. When it is not a part of such healing people easily remain stuck in their anger. When it is a part of the healing process people can re-experience the pain of their hurt, re-interpret the experience and release the anger that results from it. This is the task that often requires the help of psychotherapists. Therapists who confront this task by being reminded of the crucial role of forgiveness will be better able to help those who seek their help.