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Forgiveness and Disability: Reconsideration of Forgiveness as a Vital Component of the Rehabilitation Counseling Profession

Susan Stuntzner
Jacquelyn Dalton

Abstract -- Forgiveness and self-forgiveness is an area of growing interest in the allied helping professions. In recent years, the study of forgiveness has been expanded to a number of different populations. However, forgiveness as a construct, a model of understanding to cope with difficult and hurtful people, and as an intervention has not been fully considered and explored in the rehabilitation counseling profession. To help rehabilitation counseling professionals better understand the importance of forgiveness as it relates to disability, this article explains the meaning of forgiveness and self-forgiveness, barriers that inhibit the development of forgiveness, models of forgiveness, and empirical research supporting the utility of forgiveness. Following this, professionals are given information about how forgiveness may relate to the needs of persons with disabilities and professional implications for practice. Keywords: Forgiveness, self-forgiveness, disability, rehabilitation

Forgiveness is an area gaining momentum in some of the allied helping professions but it has not been fully recognized or discussed within the rehabilitation counseling profession (Stuntzner, 2008; Webb, 2007). In the past, topics such as spirituality in relation to coping with a disability have been explored alongside information and research on coping and adaptation. In recent years, counseling and psychology fields have begun to demonstrate consistent and increasing interest in compassion, resilience, and forgiveness. As a profession, rehabilitation counseling has begun to discuss and explore the value of compassion and self-compassion as potential agents related to coping and healing (Stuntzner, 2014). However, rehabilitation counseling has not considered or embraced forgiveness in relation to disability, rehabilitation needs, or coping and adaptation. Neither has the profession openly acknowledged that forgiveness may be warranted as a skill or an approach to assist persons with disabilities in confronting, addressing, and working through some of the hurtful experiences sometimes associated with disability.

In an effort to explore the value and importance of forgiveness, consider its potential relevance to persons with disabilities, and to determine how forgiveness may be further studied and applied within the profession, the authors reviewed articles and research pertaining to forgiveness.

Stuntzner and Dalton reviewed the professional forgiveness literature to determine if it had been consistently considered or applied to the profession of rehabilitation counseling and the needs of persons with disabilities. The intent of this article is to introduce rehabilitation counseling professionals to (a) constructs of forgiveness and self-forgiveness, (b) barriers which may inhibit the promotion of forgiveness, (c) some of the available models of forgiveness, (d) empirical research that supports the value of forgiveness and self-forgiveness, (e) applications of forgiveness and self-forgiveness to the issues encountered by persons with disabilities, and (f) professional implications of practice.

Understanding and Conceptualizing Forgiveness

Forgiveness and self-forgiveness has captivated the interest of scholars and researchers over the past two decades (Almabuk & Enright, 1995; Carson et al., 2005; Coyle & Enright, 1997; Enright & Fitzgibbons, 2000; Friedberg, Suchday, & Srinivas, 2009; Hall & Finchman, 2005; Hartwig-Moorehead, Gill, Barrio-Minton, & Myers, 2012; Hong & Jacinto, 2012; Jacinto & Edwards, 2011; McConnell & Dixon, 2012; Strelan & Wojtysiak, 2009; Toussaint, Owen, & Cheadle, 2012; Wade, Worthington, & Meyer, 2008). Forgiveness was promoted as a construct of

value in alleviating negative emotions and promoting positive traits by Enright and colleagues (1998) and Worthington (1998). Following the exploration of forgiveness was that of self-forgiveness (Enright, 1996) and, today, both continue to be expanded and researched within the literature (Carson et al., 2005; Enright & Fitzgibbons, 2015; Farley, 2011; Friedberg et al., 2009; Frise & McMinn, 2010; Hall & Finchman, 2005; Ho & Fung, 2011; Lin, 2001; Macaskill 2012; McConnell & Dixon, 2012; Osterndorf, Enright, Holter, & Klatt, 2011; Strelan & Wojtysiak, 2009; Svalina & Webb, 2012; Toussaint et al., 2012; Toussaint & Williams, 2008; Waltman et al., 2009; Webb, Toussaint, Kalpakjian, & Tate, 2010; Witvliet, Phipps, Feldman, & Beckman, 2004).

Both of these constructs are still relatively new in regards to their benefits to counseling professionals mainly because they are still emerging with the research. Compared to the knowledge available regarding the benefits of forgiveness interventions, little is known about the development or utility of self-forgiveness interventions in alleviating negative emotions and improving positive outcomes. Similarly, neither construct is defined in a universal manner or across disciplines (Ho & Fung, 2011), nor have they been considered in relation to individuals with disabilities and to the situations or hurtful experiences they encounter (Stuntzner, 2008). Therefore, much has yet to be explored and discovered about how forgiveness of oneself and others may be applied to the rehabilitation counseling profession and the needs of individuals with disabilities.

Yet, the literature, to date, does provide counseling professionals with some information about their similarities, and thus, potential benefits of forgiveness and self-forgiveness. For instance, both are applicable to hurts and injustices experienced by people, particularly when these offenses are intentional (Szablowinski, 2012). Neither of these constructs excuses or ignores the offense committed or the hurt experienced (Enright, 2001). Achieving forgiveness of oneself and of others is difficult and oftentimes a lengthy process (Smedes, 1998; Szablowinski, 2012). What differs between these two constructs is the direction or focus of who needs to be forgiven – oneself or others.

In an effort to clarify and understand forgiveness and its applicability to the rehabilitation counseling profession, contribute to knowledge enhancement, and increase overall comfort levels in addressing the topic of forgiveness and self-forgiveness, information about the meaning of these two terms are provided below. This information has the potential to assist rehabilitation counseling professionals in laying the foundation from which they can build their understanding and skills when applying forgiveness to the rehabilitation process or to the counseling relationship.

Forgiveness

Learning to forgive is not an easy task and the way in which people forgive may vary based on the individual and set of circumstances. Some may find it easier than others to forgive based on their spiritual or religious beliefs,

understanding of forgiveness, or on their perception of the severity of offense which has occurred (Jacinto & Edwards, 2011). Yet, when an offense represents an unjust or hurtful event, is something which has *repeatedly* occurred over time, or is promoted under the guise of a malice and deliberately hurtful intent, the prospect of forgiveness can be daunting and sometimes quite difficult.

More specifically, some may think they want to forgive the offender only to find it is too difficult to proceed forward in the desired fashion (Stuntzner, 2008). In situations such as these, it may be more beneficial for the person trying to forgive to first focus on forgiving another person than the one who is too difficult to forgive at this time. When this person has learned the process of or skills to aide in forgiveness, he or she may then apply what has been learned about forgiveness to that person at a later date (Stuntzner, 2008).

Despite its difficulty, forgiveness is a decision and an action known to benefit the forgiver who has been hurt or offended, not the person committing the offense (Enright, 2001; Enright & Fitzgibbons, 2000; Luskin, 2003). This benefit or gift to the forgiver is because the offended person has decided to face rather than suppress the hurtful and negative feelings held toward the offender, explore the possibility of forgiveness, and view the offending person in a more compassionate and kind manner (as a human being who is imperfect) - all of which often leads to an inner transformation of thoughts, feelings, and actions (Enright & Fitzgibbons, 2000, 2015).

Throughout the process of forgiveness, the offended or hurt person consciously chooses to pursue forgiveness, yet still is aware that he has been wronged (Frise & McMinn, 2010). The gift of fewer negative emotions, increased positive and peaceful feelings, and an improved outlook arise because the offended individual stops fighting the hurt and injustice which also aides in less stress, rumination, anxiety, and anger (Wade et al., 2008), gives up the desire for revenge (Frise & McMinn, 2010), and takes responsibility for changing the way one thinks and feels (Luskin, 2003). It is through this process of taking responsibility for how one thinks and feels that the individual learns to take control of one's life, exert personal power, and behave in ways that can promote internal healing (Luskin, 2003).

Self-forgiveness

Self-forgiveness, similar to forgiveness of others, involves the ability to recognize, face, and work through negative emotions so that the individual can achieve a calmer, more peaceful state of being. Yet, self-forgiveness differs in that it is typically associated with the ability to forgive oneself for some action committed that either hurts oneself or others or is considered self-destructive to one's well-being (Luskin, 2003). Rather than anger, anxiety, and depression being the primary focus for negative emotions as in forgiveness, self-forgiveness is primarily associated with the experience of guilt, remorse, self-hatred, self-criti-

cism, self-blame, shame, and grief (Hong & Jacinto, 2012; McConnell & Dixon, 2012; Szablowinski, 2012). This is not to say that negative feelings such as anger, anxiety, or depression won't be present because they may well be, but there tends to be an additional layer of emotions related to self-punishment and regret which is also present (Hong & Jacinto, 2012).

The decision of whether or not people pursue self-forgiveness can have positive or negative effects. Szablowinski (2012) explains that neglecting to recognize one's negative emotions and address them can lead to negative consequences such as the "slow erosion of a person's psyche or spiritual well-being" (p. 678). Enright (1996) posits that self-forgiveness is a healthy and adaptive process through which people can learn to reduce negative feelings such as guilt, shame, and remorse while replacing them with more loving, compassionate, accepting, and self-affirming thoughts, feelings, and behaviors. According to Flanagan (1997), self-forgiveness is useful in helping people recognize the need for internal change. Furthermore, it is through the process of self-forgiveness that a person learns to (a) accept oneself for not being perfect (Jacinto & Edwards, 2011; Worthington & Langberg, 2012), (b) transform or recreate oneself in a new way (Flanagan, 1997), and to (c) change his or her outlook on life (Worthington & Langberg, 2012).

Barriers in the Promotion of Forgiveness

While the notion of practicing forgiveness holds many benefits to the forgiver, as is evident throughout the research, it is not something that is always easy to do. People who are having a hard time embracing and engaging in forgiveness may either not be ready to forgive (Stuntzner, 2008) or may be engaged in some sort of behavior that inhibits their progress. Rehabilitation counselors working with persons with disabilities can assist individuals by working with them to determine if they are ready to forgive or if they have some potential barriers to first address. More specifically, rehabilitation counseling professionals can discuss or assess their clients if any of the following barriers or situations are present within their lives:

- (a) Unwillingness to ask for help with learning how to forgive or viewing the process of forgiveness as a weakness;
- (b) Lacking an understanding of what forgiveness is, how it might be relevant to their situation, or methods to achieve it (Wade, 2010);
- (c) Continuing to hold an emotional grudge and to mentally ruminate over the hurt or offense committed (Baumeister, Stillwell, & Heather-ton, 1995);
- (d) Thinking that negative feelings or actions (i.e., seeking revenge for the offense committed) will bring them the desired results of emotional

and mental freedom (Borris-Dunchungstang, 2007);

- (e) Holding a vengeful disposition and thinking that such a view will help one cope or solve their problem (Ysseldyk & Matheson, 2008);
- (f) Engaging in avoidance behavior of the hurt or emotional offense (McConnell & Dixon, 2012);
- (g) Resisting the process of "letting go" of their negative thoughts and feelings;
- (h) Placing explicit conditions on forgiveness and believing that they do not have to forgive until the offender has apologized or tried to make an amends (Toussaint et al., 2012); and
- (i) Believing they can only forgive oneself after they are forgiven by God or others (McConnell & Dixon, 2012).

Another area worthy of mention is the counseling professional's understanding and familiarity with forgiveness and self-forgiveness. Similar to any other skill practiced, rehabilitation counseling professionals who choose to use and integrate forgiveness into their counseling relationships will want to enhance their understanding of these constructs and approaches. Without such a familiarity, it may be harder for them to efficiently assist persons with disabilities in identifying their readiness to engage in forgiveness and any potential obstacles present within their lives, as well as assisting them in the forgiveness process as it relates to their individual needs.

Models of Forgiveness

Several models of forgiveness exist throughout the literature (Donnelly, 1982; Enright, Freedman, & Rique, 1998; Fitzgibbons, 1998; North, 1998; Worthington, 1998). Most of these models were developed around the same time frame as is evident from the dates of publication. Many of these conceptualized forgiveness as that which takes place either through a series of steps or phases; however, the number, content, and sequence may vary (Stuntzner, 2008). For example, many of these models recognize that a hurt has taken place which must be recognized, a conscious decision has been made to pursue forgiveness, a willingness to give oneself time to proceed through the forgiveness process is needed, and an intentional effort is made to view the offender in a different way – all of which will equate to a better quality of life and a more peaceful existence (Donnelly, 1982; Enright et al., 1998; Fitzgibbons, 1998; North, 1998).

Some models go beyond these stages and delve into the reality that the way the individual is currently thinking and feeling is not working, nor is it bringing them the desired results (Enright et al., 1998; Fitzgibbons, 1998). Scholars who adhere to this expanded view of forgiveness also promote the idea that forgiveness and skills pertaining

to forgiveness are acquired through a process which can be taught (Enright et al., 1998; Fitzgibbons, 1998). As people learn about forgiveness and its benefits, it is proposed they will become more committed and engaged in the process itself and the work that must be done to forgive.

Empirically speaking one of the most well-studied forgiveness models was developed by Enright and colleagues (1998). This forgiveness model has been used in a number of research intervention studies – all of which help support its utility and value in reducing negative thoughts and emotions and improving positive ones across numerous populations. Enright and colleagues (1998) forgiveness process is broken down into four phases and 20 units. The four phases presented in this model include the *Uncovering Phase*, the *Decision Phase*, the *Work Phase*, and the *Deepening Phase*. Within each of these phases are a number of units or guide posts used to explain the forgiveness process and the work that is to be completed while working on forgiveness.

For instance, the *Uncovering Phase* encourages exploration of suppressed and conscious negative thoughts and emotions and psychological defenses used to repress them. As people become aware of their negative thoughts and feelings, they gain insight into the ways they and their life have changed permanently which lays the foundation for them to continue onto the *Decision Phase*. Individuals who proceed onto the *Decision Phase* consciously recognize that forgiveness is needed and desired. As a result, they commit to the process of learning about forgiveness, and how the act of not forgiving and harboring negative thoughts and emotions is negatively influencing them so they can learn to reframe the offense and the offender in a kinder more loving manner (i.e., the *Work Phase*). It is through the *Outcome/Deepening Phase* that people learn to forgive, find meaning in their pain, come to understand they are not alone, and realize there is hope for a better existence (For a full review, see Enright and the Human Development Study Group, 1991).

As mentioned previously, the process of self-forgiveness is not as well studied nor are there as many models present to explain it. However, rehabilitation counseling professionals desiring to learn about self-forgiveness can review the work and model presented by Enright (1996), *The Process of Self-forgiveness*. This self-forgiveness process is broken down into the same four phases as the forgiveness process model and contains 20 units which comprise detailed steps that may take place within each phase.

Regardless of the model or approaches chosen by rehabilitation counseling professionals, it is important to recognize that each individual is going to vary in his or her process. Some may not experience all phases or steps, nor may they occur in a linear manner. Similar to the process of adjustment to disability, forgiveness of oneself and others is likely to be varied and individualized so it is important for rehabilitation counseling professionals to meet people where they are at and to try and select approaches and techniques that are most relevant to each individuals' needs.

Empirical Research Supporting the Utility of Forgiveness

Forgiveness as a construct, a process for healing, and as an intervention to help aide in dealing with difficult hurts and transgressions has gained the attention and interest of some allied counseling and helping professions. Over the past two decades, researchers and scholars have considered forgiveness as an area worthy of study and as a means to help people reduce negative thoughts and emotions and to improve both the feelings and the beliefs or views held toward the offending party. Following this expansion of forgiveness research was the recognition of self-forgiveness as another area in need of exploration, study, and understanding. As a result, some research has started to emerge in the realm of self-forgiveness, although not as much is known about this construct or how to effectively measure it (Macaskill, 2012).

Despite this increased interest and pursuance of study, forgiveness has previously been minimally applied to the needs, concerns, injustices, and potential emotional hurts sometimes encountered by persons with disabilities (Stuntzner, 2008). Having said this, some preliminary research has been conducted among persons with spinal cord injury (Willmering, 1999; Stuntzner, 2008; Webb et al., 2010) and persons with Traumatic Brain Injury (TBI; Farley, 2011) but much more has yet to be done to fully understand its applicability and value among persons with disabilities. In an effort to bridge the gap that appears to exist between our profession and other helping professions' understanding of forgiveness and self-forgiveness and to promote clarity and conceptualization of the value forgiveness holds for persons with disabilities, a review of the empirical research is provided.

Forgiveness

Earlier empirical studies of forgiveness as an intervention focused on hurts and injustices experienced by a number of different populations: (a) adult incest survivors (Freedman & Enright, 1996), (b) partners of persons choosing to have an abortion (Coyle & Enright, 1997), (c) elderly women (Hebl & Enright, 1993), (d) persons with cancer (Phillips & Osborne, 1989), and (e) college students experiencing hurt by their parents (Al-Mabuk & Enright, 1995). Findings from these initial studies demonstrated that forgiveness as an intervention or a process which was taught helped reduce negative feelings such as anger, resentment, depression, anxiety, and hopelessness (Coyle & Enright, 1997; Freedman & Enright, 1996; Hebl & Enright, 1993) as well as improve positive aspects and coping such as self-esteem, hope, psychological healing, and well-being (Enright & Coyle, 1998; Freedman & Enright, 1996; Hebl & Enright, 1993).

Following these earlier studies, the study of forgiveness has been conducted among several other populations: (a) persons with posttraumatic stress disorder (PTSD; Witvleit et al., 2004), (b) persons with cardiac problems

(Friedberg et al., 2009), (c) persons with spinal cord injury (Stuntzner, 2008; Webb et al., 2010; Willmering, 1999), (d) persons with TBI (Farley, 2011), (e) persons with low chronic back pain (Carson et al., 2005), (f) persons with substance abuse issues (Lin, 2001), (g) persons from religious faiths (Toussaint & Williams, 2008), (h) counselors-in-training (CITs; Hartwig-Moorhead et al., 2012), (i) adult children of alcoholics (Osterndorf et al., & Klatt, 2011), (j) persons in outpatient physical therapy (Svalina & Webb, 2012), and (k) persons with coronary artery disease (Waltman et al., 2009).

Results from these forgiveness studies found that forgiveness interventions and therapeutic approaches (a) reduce negative emotions such as anger, anxiety (Friedberg et al., 2009; Lin, 2001; Osterndorf et al., 2011; Stuntzner, 2008; Waltman et al., 2009) and depression (Friedberg et al., 2009; Osterndorf et al., 2011; Waltman et al., 2009), (b) decrease the negative phases of adjustment to disability (i.e., Shock, Denial, Internalized Anger, Externalized Hostility; Stuntzner, 2008), and (c) assist in reports of less stress (Friedberg et al., 2009).

Forgiveness was also reported to have positive effects for many of the populations. More specifically, it was (a) reported as a probable factor in the adjustment to disability process (Willmering, 1999), (b) declared to potentially increase a person's sense of life satisfaction (Webb et al., 2010) and physical health (Svalina & Webb, 2012), (c) found to have a positive relationship with resilience (Farley, 2011), (d) reported to increase forgiveness in higher amounts among persons of faith than in nonreligious groups (Toussaint & Williams, 2008), (e) found to improve self-esteem and to develop better relationships with other people (Osterndorf et al., 2011), and (f) discovered to help aid in people choosing better problem-solving skills (Waltman et al., 2009). Additionally, other forgiveness research has found it to be positively correlated with personal control (Webb, 2007), reported it to contribute to better mental health and to possibly reduce suicides (Worthington & Scherer, 2004), and discussed it as a potential factor in improving a person's immune system and functioning (Worthington & Scherer, 2004).

Self-forgiveness

To date, self-forgiveness has been referenced in relation to predictors that lead to self-forgiveness and factors correlated with self-forgiveness. Some information is provided in relation to particular groups of people such as veterans who may find it particularly difficult to engage in self-forgiveness (Witvliet et al., 2004; Worthington & Langberg, 2012).

A review of the literature on self-forgiveness indicates that certain predictors assist people in learning or being willing to self-forgive as well as those that cause people difficulty. McConnell and Dixon (2012) state that people who report being of faith, having a spiritual relationship with God, and feeling forgiven by God have a higher probability of engaging in self-forgiveness. Similarly, people

who have committed a transgression toward oneself or another are likely to pursue self-forgiveness if they feel forgiven from others (Hall & Finchman, 2005; McConnell & Dixon, 2012). Research also stresses that some individuals report having difficulty forgiving themselves for offenses that occurred accidentally (Szablowinski, 2012) or when they experience self-condemnation and self-criticism (Worthington & Langberg, 2012).

Self-forgiveness has been studied among specific populations such as military veterans. Witvliet and colleagues (2004) stress that specific factors inhibited their ability to self-forgive. More specially, these scholars state that veterans who experienced depression, anxiety, and/or symptoms of PTSD found it more difficult to self-forgive. Similarly, Macaskill (2012) states that people who experience high levels of anxiety have a harder time forgiving oneself. According to Worthington and Langberg (2012) people who report or experience high levels of shame have difficulty with self-esteem which may affect whether people view themselves as worthy of self-forgiveness. Additionally, Macaskill (2012) indicates that people who are angry are less likely to be able to forgive oneself, since "anger is a predictor of self-unforgiveness" (p 45).

Relevance of Forgiveness to Individuals with Disabilities

Forgiveness and self-forgiveness have much relevance and applicability to individuals with disabilities. As mentioned earlier, forgiveness is a construct considered when people have been emotionally and mentally hurt and offended by another person and when some perceived injustice or offense has occurred. Because of the offense and transgression, people do not view themselves or their life in the same way, and they often begin to harbor emotions, thoughts, and grudges, which impact their lives in a negative manner. Furthermore, these deep-seated experiences sometimes erode at the person's inner self, all the while affecting their self-esteem, self-perception, sense of peace, and serenity. These perceptions and feelings may then affect their outlook on life.

While every person who has been slighted and hurt or has been the recipient of some interpersonal or societal transgression may not feel the need to forgive, it is very relevant to the experiences and transgressions sometimes committed against or towards persons with disabilities. As a collective and across disability types, many people are treated unfairly, unkindly, and unjustly because of their disability or due to other peoples' perception of disability. Living with a disability is often viewed by "outsiders" as a negative and undesired experience and is associated with several negative connotations by society (Wright, 1991). These societal attitudes often manifest themselves in biases, stereotypes, condescending behaviors and remarks, and situations which are not only uncomfortable but have the ability to transmit negative messages about disability to the person living with one (Smart, 2009; Stuntzner, 2012). In situations such as these, the offenses and transgressions

may be person-specific such as someone well known and familiar to the person with a disability or they may be broader, almost “face-less” because they occur so frequently throughout a person’s daily interactions (Stuntzner & MacDonald, 2014).

Another way forgiveness may be relevant to persons with disabilities is in relation to the cause of their disability or to the perceived cause of it (Stuntzner, 2008). When a disability has been acquired or obtained in ways that was not related to anything persons with disabilities have done, there may be a need to forgive God or someone else (Stuntzner, 2008). For instance, if a person received a spinal cord injury or a TBI due to the actions of a drunk driver while the driver came out of the accident unscathed and with no injuries, there may be a need or desire in which the person holds anger and resentment toward the offending party. Similarly, the pursuit of forgiveness may be warranted if a person has enlisted to serve in the military and because of his or her active service, he is discharged and returned to his community with a leg amputation and PTSD due to the magnitude of challenging experiences witnessed and experienced. In situations such as these, the person may have been healthy prior to enlistment and then due to the range of experiences and actions of others, now finds oneself with two or more diagnoses and health conditions that he had nothing to do with.

Major changes because of disability may be another reason to consider forgiveness. Much has been written throughout the literature about changes and losses that occur in peoples’ lives because of disability. Some of these changes include loss of social support and friends, loss of key relationships or marital partners, loss of employment opportunities and financial health, loss of insurance, poor care giving, just to name a few (Stuntzner, in press). While forgiveness has historically been described as a process that happens between two people (Enright, 2001; Enright & Fitzgibbons, 2000), it is the authors’ belief that forgiveness may be related to repeated negative circumstances (Stuntzner & MacDonald, 2014). More specifically, in the case of employment, health insurance, or lack of access to resources, people may be dealing with specific people from whom they asked for help or it may be an agency or organization (made up of numerous people) that represents a continuation of barriers, challenges, or biases.

Forgiveness may be a topic and issue of importance to family members and significant others who are an important part of peoples’ life. It may be possible that a person learns to come to terms with the disability and its associated life changes quite well; yet, it is the other people and relationships surrounding the person with a disability that are having difficulty moving on. Because family members or others are challenged by the presence of their loved one’s disability, their inability to forgive or move on may affect and be detrimental to the coping process of the person with a disability.

Beyond the notion of forgiveness of others is that of self-forgiveness. Self-forgiveness may be of relevance when persons with disabilities have hurt themselves or oth-

ers in some way which is causing them to seek a sense of reparation or to make an amends. Self-forgiveness may be witnessed when the person with a disability took some action or made a decision which could have contributed to the disability occurring in the first place. Self-forgiveness may be useful when a person with a disability has done something, even if unintentional and by accident, that lead to hurt and harm in another person. An example of this would be someone who was driving a car that ended up getting in a serious wreck and injuring other passengers quite severely. Tied to self-forgiveness is the fact that some people may be self-critical or on the receiving end of others’ criticism which can make it more difficult to embrace and practice self-forgiveness (Witvliet et al., 2011).

Regardless of the exact situation or set of circumstances, it is believed that forgiveness and self-forgiveness have much application to the varied and often hurtful experiences encountered by person with disabilities. Similarly, it is well-documented throughout the adjustment to disability literature that persons with disabilities sometimes experience negative emotions such as anger, resentment, anxiety, and depression and are challenged in redefining their self-concept and in rebuilding their self-esteem.

All of these areas have been explored in relation to forgiveness with other populations and have shown positive results in alleviating the hurt while building positive well-being; therefore, it appears the practice and promotion of forgiveness among persons with disabilities could be another venue through which people learn to cope better, improve their adaptation to disability skills, and have a better quality of life (Stuntzner, 2008). Furthermore, forgiveness of oneself or others is a process and set of skills that once learned in one context or relationship can then be applied to another. And after all, aren’t we in the business of trying to help persons with disabilities learn as many skills and approaches as possible so they can to help themselves and live a better life?

Implications for Rehabilitation Counseling Professionals

Because forgiveness has not been readily explored and integrated into the profession, the implications of what it would mean and contribute to professional practice are vast. Forgiveness of oneself and others is something probably most all people can relate to and may see the need for it one-time or another, not only persons with disabilities. This is due to that fact that most people have probably been slighted, treated unfairly, or gravely hurt at some point. During these experiences people have had to decide if they were going to forgive themselves or someone else. Further, actions pertaining to forgiveness, acceptance, and compassion for another may have occurred as they strive to work through their forgiveness of the committed offense.

For instance, people may have been hurt, offended, or treated poorly by a boss or supervisor. Some may know the experience of hurt and pain in their personal life or in the close relationships held with trusted others, perhaps some-

one they trusted explicitly who violated that bond and committed some sort of personal betrayal. Others may have been severely hurt through the offenses committed by another human-being (i.e., robbery, intentional crime committed, abuse). For those who are not able to identify with this list, other experiences may abound or perhaps these individuals strive to not hold onto negative and hurtful thoughts and emotions as a way of life or as a part of a personal belief system. Understanding those who do not hold grudges is also of relevance.

In any of these instances, the one commonality is that persons with disabilities and persons without disabilities are united by the experience of hurt, betrayal, or deep-seated offenses cast their way as a part of life. Whether it is today or another, people are faced with the decision of whether or not to forgive when hurt, followed by the positive gifts and release associated with forgiveness or the heavy burdens and difficulties associated with not forgiving. Beyond the potential for personal experiences associated with forgiveness are the ways rehabilitation counseling professionals, educators, and researchers can use and integrate forgiveness into their practice and research. Some of these are explored in the following sections.

Counseling Professionals in Practice

Rehabilitation counseling professionals interested in learning more about forgiveness and its potential application to the lives of the people they serve may find it beneficial to learn more about forgiveness and self-forgiveness. Professionals' knowledge and understanding can be enhanced through professional trainings and seminars offered either in the community or through professional counseling organizations and conferences (i.e., ACA, ARCA, NRCA, NCRE), as well as through books, self-study videos, websites pertaining to forgiveness (www.internationalforgiveness.com/; Worthington, 2006). Such training(s) can provide counselors with (a) a more clearly cultivated understanding of forgiveness, (b) benefits and positive aspects of forgiving (i.e., a new set of skills to deal with difficult people, a skill associated with resilience; Farley, 2011), (c) approaches or models to achieving forgiveness, and (d) counseling techniques which may be integrated into the counseling relationship (i.e., unmet letter, empty chair technique, psycho-educational groups on forgiveness; Hong & Jacinto, 2010; Worthington, 2006). Counselors may also learn to use or create interventions which either teach persons with disabilities about forgiveness (i.e., *Stuntzner's Forgiveness Intervention: Learning to Forgive Yourself and Others*) or integrate forgiveness as a component of another intervention (i.e., *Stuntzner and Hartley's Life Enhancement Intervention: Developing Resiliency Skills Following Disability*). Similarly, they may adapt existing forgiveness interventions to the needs and issues encountered by persons with disabilities (i.e., *Forgiveness is a Choice: A Step-by-Step Process*). Furthermore, the more rehabilitation counseling professionals learn about

forgiveness, the easier it will be for them to assess and identify peoples' readiness to forgive. Being ready to forgive is extremely important because for some it is not any task and requires a lot of personal effort when the hurt is severe.

Rehabilitation counseling professionals can enhance their understanding of forgiveness by going through the process themselves. Counseling professionals unfamiliar with the forgiveness process may also find it of value to pick a person or situation and work through the chosen forgiveness process so they have the insight and understanding of what it is like to forgive (Enright, 2001). Additionally, such an experience may build a firmer foundation for relating to the people they counsel. It may also help them to understand the value of being ready to forgive and to identify how powerful barriers can be in the healing process.

Educators and Researchers

Rehabilitation counseling educators and researchers may also find the concept of forgiveness and self-forgiveness of interest. Educators who learn about forgiveness and what it has to potentially offer persons with disabilities are in an excellent position to incorporate it into their courses. More specifically, depending on the information used, they may integrate forgiveness and self-forgiveness into courses pertaining to coping and adaptation of disability (i.e., *Psychosocial Aspects of Disability*), family counseling and theories, counseling theories, counseling techniques, group counseling, or substance abuse and disability. All of these courses hold the potential to cover content related to forgiveness, forgiveness models and approaches, counseling theories and techniques which may be used to facilitate forgiveness, as well as that which identifies and explains the way forgiveness or self-forgiveness may be related to disability, the needs of people with disabilities, and coping and adaptation to disability.

Researchers also have a role in the understanding of forgiveness as it relates to persons with disabilities. Because little research has been discussed, conducted, or promoted within the profession pertaining to forgiveness, rehabilitation counseling researchers have a wide array of options from which to choose. For starters, they may review existing forgiveness models and assessment instruments and determine if these are adequate to meet the needs of persons with disabilities or if new forgiveness models, approaches, and assessments are better suited. In the event such models and assessments are created, they can then be empirically studied along with the development and implementation of forgiveness interventions (i.e., *Stuntzner's Forgiveness Intervention: Learning to Forgive Yourself and Others*). As forgiveness intervention studies are completed, researchers and rehabilitation counseling professionals are afforded the opportunity to learn more about how these interventions impact peoples' coping, adaptation to disability, thoughts, emotions, self-concept, and so forth. Throughout this process, researchers may discover new variables related to forgiveness, self-forgiveness, and disability.

Additionally, because little research exists for any group of people about which coping skills and approaches are most valuable at different times throughout the forgiveness process, researchers could spend time understanding this aspect of forgiveness (Strelan & Wojtysiak, 2009; Worthington & Scherer, 2004). Further, researchers may decide to conduct qualitative studies to better determine which situations and interactions persons with disabilities report as the most unjust and harmful so they have a better idea of how forgiveness may be applicable to this group of people. Also of relevance and interest is the identification of traits and characteristics held by those who report having an easier time forgiving those who transgress against them (Strelan & Wojtysiak, 2009). In sum, the possibilities are many and the choices provided for research appear rather applicable to the needs of persons with disabilities.

Conclusion

Forgiveness is an area of increasing interest in counseling, psychology, and other helping professions. As this area of research has become more understood, scholars have begun to explore self-forgiveness although less is known about this particular construct. Despite the expansion of research studies, articles, and interest in this area (i.e., forgiveness and self-forgiveness), forgiveness has yet to be fully recognized within the field of rehabilitation counseling. In prior years, spirituality was recognized and discussed as an important component to persons with disabilities and as a coping strategy. More recently, the profession has recognized the importance and relevance of the Positive Psychology Movement and of the exploration of compassion and self-compassion (Stuntzner, 2014) - all of which are positive strides in considering other areas of study which appear to be highly relevant to persons with disabilities.

The consideration of forgiveness is an expansion of this progression within the field and appears to hold many benefits and relevance to the needs of persons with disabilities, particularly in regards to being a means through which they can learn to develop or enhance skills which can be used in multiple settings and in dealing with hurts, transgressions, offenses, and difficult people. Rehabilitation counseling professionals who want to use and infuse forgiveness into their work with persons with disabilities are encouraged to learn what they can about it and to encourage people to use it as another means of coping and healing following hurt and personal offenses.

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