Can Group Interventions Facilitate Forgiveness of an Ex-Spouse? A Randomized Clinical Trial

Mark S. Rye
University of Dayton

Kenneth I. Pargament
Bowling Green State University

Wei Pan
University of Cincinnati

David W. Yingling
St. Mark United Methodist Church

Karrie A. Shogren
University of Kansas

Masako Ito
University of Dayton

This study evaluated the effectiveness of 2 versions of an 8-session forgiveness group intervention for divorced individuals. Participants (randomized, $n = 192$; analyzed, $n = 149$) were randomly assigned to a secular forgiveness condition, a religious forgiveness condition, or a no-intervention comparison condition. Measures of forgiveness and mental health were obtained at pretest, posttest, and 6-week follow-up. Participants in both intervention conditions increased significantly more than comparison participants on self-reported forgiveness of an ex-spouse and understanding of forgiveness. Participants in the secular condition showed a greater decrease in depressive symptoms than comparison participants. Intrinsic religiousness did not moderate intervention effects.

Keywords: forgiveness, divorce, religion, intervention, outcome study

Many divorced individuals believe they have been wronged by their ex-spouse and experience anger long after the divorce is finalized. Wallerstein (1986) found that anger and bitterness toward ex-spouses remained prevalent among both men (approximately 30%) and women (approximately 40%) 10 years after the divorce. Although anger may have some short-term benefits, hostility is related to a range of physical problems (Iribarren et al., 2000; Niaura et al., 2002). Furthermore, hostile conflict between divorced parents can have a negative effect on children (Amato & Keith, 1991; Emery, 1982; Johnston, 1994).

One means of coping with hostility following a divorce is through forgiveness. Forgiveness involves letting go of negative thoughts, feelings, and behavior in response to an injustice and may involve responding positively toward an offender (Rye & Pargament, 2002). Forgiveness should not be confused with other processes such as forgetting, condoning, legal pardon, and recon-

ciliation (McCullough, Pargament, & Thoresen, 2000). Unlike forgetting, forgiveness involves recognizing the injustice and pain the individual has suffered (Smedes, 1996). Unlike condoning and legal pardon, forgiveness does not excuse or exculpate the offender from responsibility for his or her actions (Enright & Fitzgibbons, 2000). Moreover, unlike reconciliation, forgiveness does not require the renewal of a relationship with the offender (Freedman, 1998).

Forgiveness may be particularly well-suited to the challenges faced by divorced individuals because it addresses the powerful negative thoughts and emotions experienced by many former spouses and can be pursued irrespective of whether there is ongoing conflict with an ex-spouse. Indeed, studies have found that forgiveness of an ex-spouse relates to better mental health (Ashleman, 1997; Bursik, 1991; Reed, 1998, as cited in Enright, 2001; Rye, Folck, Heim, Olszewski, & Traina, 2004). Forgiveness of an ex-spouse also relates to a more integrative approach to coping (Mazor, Batiste-Harel, & Gampel, 1998), better family relationships (Ashleman, 1997), and better coparenting (Bonach & Sales, 2002).

Although there is a dearth of research on how to facilitate forgiveness among divorced individuals, effective forgiveness interventions have been created for a variety of other populations, such as married couples coping with extramarital affairs (Gordon, Baucom, & Snyder, 2004), men whose partner had an abortion (Coyle & Enright, 1997), incest victims (Freedman & Enright, 1996), and college students who experienced a variety of types of wrongdoing (McCullough, Worthington, & Rachal, 1997). Although these interventions contain innovative strategies for facilitating forgiveness, most do not explicitly incorporate religious

concepts. Given the high prevalence of religious beliefs and practices in the United States (Gallup & Jones, 2000) and the fact that many individuals draw on their religious beliefs when forgiving (Rye & Pargament, 2002), research on religious forgiveness interventions is needed.

In theory, religion can enhance forgiveness by providing theological rationales, religious coping strategies, religious sources of support, and religious role models (Pargament & Rye, 1998). Rye and Pargament (2002) found that both secular and religious forgiveness interventions for college students led to similar improvements in forgiveness and well-being. However, Hart and Shapiro (2002) found that recovering alcoholics in a spiritually oriented forgiveness program exhibited greater improvements on forgiveness than participants in a secular program. Moreover, individuals who placed a higher value on spirituality benefited more from forgiveness interventions than individuals who placed a lower value on spirituality (Hart & Shapiro, 2002). Although these studies are useful, little is known about the role of religion in forgiveness interventions when the offense occurs in the context of a relationship that many people consider sacred, such as marriage.

Present Study

This study was designed to contribute to scientific knowledge about forgiveness in several ways. First, to our knowledge, this is the first study to examine how a forgiveness group intervention affects adult adjustment to divorce. Second, most previous research on forgiveness and divorce involved correlational designs, whereas this study used a randomized experimental design. Third, researchers have previously evaluated the effects of forgiveness interventions through exclusive use of self-report measures. To our knowledge, this is the first forgiveness intervention study that used measures of both self- and observer-report. Fourth, this study seeks to further understand the role of religion in forgiveness interventions.

The following questions were addressed. (a) Will forgiveness group interventions lead to more forgiveness among divorced individuals? It was hypothesized that participants in both a secular and a religious forgiveness intervention would improve more on forgiveness than participants in a no-intervention comparison condition. (b) Will forgiveness group interventions lead to greater mental health among divorced individuals? It was hypothesized that participants in both interventions would decrease more than comparison participants on depression and trait anger. (c) Will there be differential treatment effects between a religiously based forgiveness intervention and a forgiveness intervention in which religious concepts are not explicitly introduced? No a priori hypotheses were made with respect to this question. (d) Will treatment effects vary as a function of participants' religiousness? It was predicted that of the participants assigned to the religious condition, highly religious participants would show greater treatment gains than less religious participants.

Method

Participants and Procedure

Recruitment and Selection

Participants (randomized, $n = 192$; analyzed, $n = 149$) from a medium-sized Midwestern city were recruited through radio and newspaper ads;

announcements in church bulletins; a university e-mail distribution list; and brochures distributed to attorneys, psychologists, and members of the clergy. The recruitment ads indicated that the purpose of the intervention was to learn how to cope with divorce through forgiveness. Although this may have contributed to a selection bias, it is important to note that our comparison participants were recruited in the same manner. In addition, we wanted participants to know the focus of the program so they could make an informed decision regarding whether or not they wished to participate.

The participant selection process is described in Figure 1. Over the course of 16 months, 243 individuals contacted the study phone line. Interested individuals were contacted by phone and provided with additional information about the study. Individuals who had recently been physically abused by their ex-spouse were not included in the study because of the possibility that premature encouragement to let go of anger could make it harder to stay out of an unhealthy relationship (see Gordon, Burton, & Porter, 2004). As noted in Figure 1, 192 individuals were eligible for the study and were assigned to a condition using a modified random assignment procedure.[1] After assignment to conditions, intervention participants were placed in a group of 5–9 members based on their schedules and availability.[2] After eliminating intervention participants who did not complete surveys or attend at least half of the sessions (religious, $n = 13$; secular, $n = 13$) and comparison participants who did not complete surveys ($n = 17$), 149 participants remained (secular, $n = 49$; religious, $n = 50$; comparison, $n = 50$). Thus, analyses were based on "study completers" as opposed to all "intention-to-treat" participants.

Participants who were in individual or group therapy with a practitioner unaffiliated with the study were kept in the sample for several reasons. First, we believed that it would be unethical to forbid participants from seeking additional services if they needed assistance. Second, a chi-square analysis revealed no significant differences, $\chi^2(2, N = 149) = 3.81$, $p = .15$, across conditions with respect to the number of participants in additional therapy (comparison, $n = 23$; religious, $n = 14$; secular, $n = 16$). Third, we statistically controlled for outside therapy status in all outcome analyses. Finally, keeping these participants in the sample may have provided a better test of the real world effectiveness of the interventions because many individuals naturally seek individual or group therapy following a divorce.

Participants were administered surveys at three points in time[3] (i.e., pretest, posttest, 6-week follow-up) and returned the surveys by mail. To enhance return rate, we gave participants $25 for each completed survey.

---

[1] There were 14 intervention groups (7 religious, 7 secular). For Groups 1–4, a member of the research team used a coin toss to randomly assign participants to either the religious or the comparison condition. For Groups 5–8, individuals were randomly assigned by coin toss to either the secular or the comparison condition. For the remaining six groups, participants were randomly assigned using a random number draw to one of three conditions (i.e., religious, secular, comparison). This approach to random assignment was adopted because of the timing of the receipt of complete funding for the project and because, at the outset, we were not certain whether enough participants would sign up to run both versions of the intervention.

[2] Several individuals ($n = 11$) who were initially assigned to a treatment condition were reassigned to the comparison condition because scheduling conflicts precluded attendance at intervention sessions. In addition, several individuals ($n = 14$) who were initially assigned to the comparison condition were reassigned to a treatment condition to ensure each subgroup had enough members.

[3] The pretest survey was administered after randomization and approximately 1 week prior to the first intervention session. The posttest survey was given to participants immediately following the final intervention session (approximately 9 weeks after the pretest), whereas the follow-up survey was administered approximately 15 weeks after the pretest.
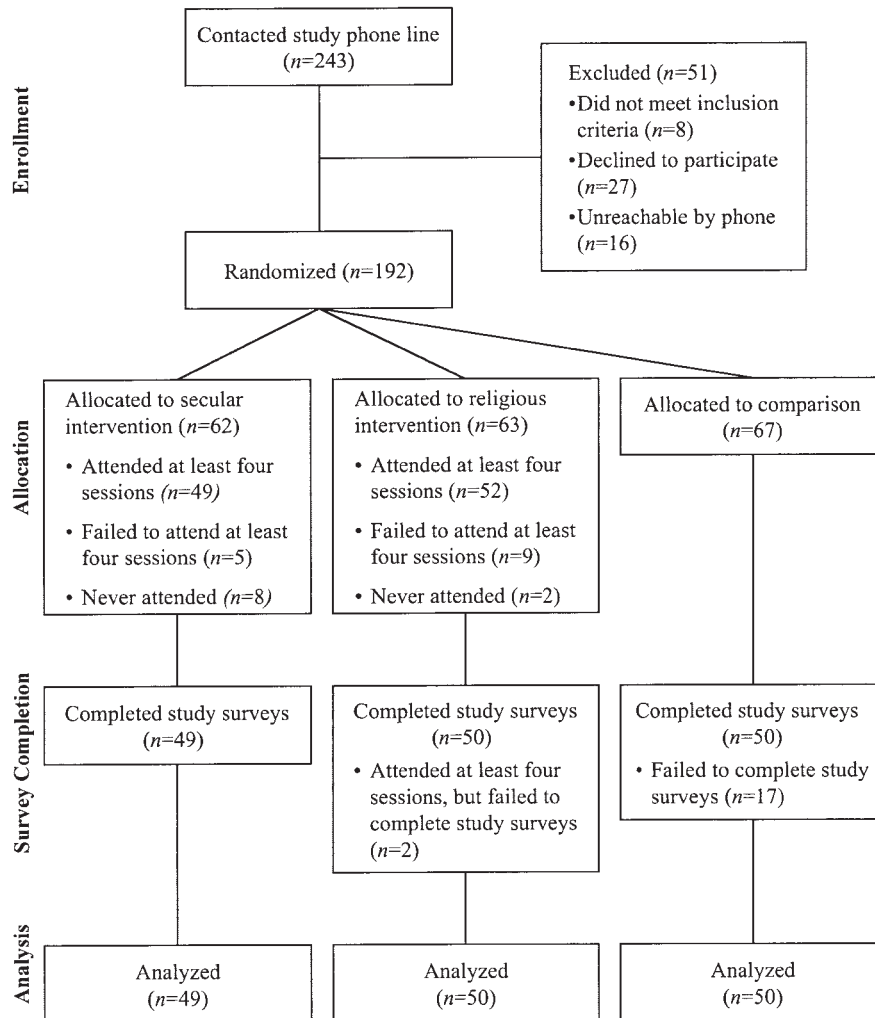
Figure 1.   Flow of participants through each stage of the study.

In addition, all participants completing surveys were entered into a lottery for a chance to win one of three cash prizes ranging from $50 to $200. Although participants were paid to complete research instruments, they were not paid to attend intervention sessions. The pretest packet contained an informed consent form that participants signed and returned with their pretest. Prior to data collection, this study was approved by institutional review boards at two universities (i.e., University of Dayton, Bowling Green State University).

Participant Characteristics

The majority of participants were female (75%) and Caucasian (88%). Other ethnic groups represented in the sample included African American (6%), Hispanic (4%), American Indian (1%), and Asian (1%). Participant ages ranged from 23 to 73 ($M = 45.48$, $SD = 9.79$). Participants' religious affiliations included Protestant (53%), Catholic (30%), and other (17%). The majority of participants (90%) indicated that they had children. Participants had been divorced between zero[4] and five ($M = 1.08$, $SD = .75$) times, and the average amount of time since their most recent divorce was 2.6 years ($SD = 3.10$; range = 0 to 18 years). The amount of time that participants had been married ranged from less than 1 year to 43 years ($M = 16.34$, $SD = 9.60$). When asked about current relationship status,

72% indicated that they were not dating, 19% indicated they were casually dating, 6% indicated that they were in a long-term dating relationship, and 3% indicated that they were remarried. In response to an open-ended question, participants reported being wronged by their ex-spouse in a variety of ways including infidelity (40%), broken commitment or unwanted relationship dissolution (32%), emotional/verbal abuse (25%), financial wrongdoing (18%), failure to fulfill obligations to spouse or children (17%), physical threats or abuse (14%), failure to address mental health issues (8%), wrongful accusation (7%), rape/sexual assault (2%), and other (7%).[5]

Nominated Participants

To obtain observer-report data, we encouraged participants to nominate an adult friend or family member to complete surveys regarding the participant's level of forgiveness. The relationships between nominated

---

[4] Some individuals were in the process of getting a divorce.

[5] Percentages add to more than 100 because many participants indicated that they were wronged in more than one way.

participants ($n = 109$) and study participants included friends (45%), parents (27%), siblings (13%), romantic partners (2%), and other (13%). The majority of nominated participants had conversations with the participant almost every day (53%) or several times per week (27%). Nominated participants had known participants an average of 26 years ($SD = 15.06$; range = 1–60 years).

Group Leaders

The five group leaders (2 men, 3 women) were blind to study hypotheses and ranged in age from 42 to 58 ($M = 51.80$, $SD = 6.98$). All leaders were licensed mental health practitioners who had been practicing between 7 and 28 years ($M = 17.60$, $SD = 8.71$). Initially, all of the leaders facilitated one secular and one religious group. Two leaders facilitated one additional group each, and one leader facilitated two additional groups. Thus, the five leaders facilitated a total of 14 groups (7 secular, 7 religious). Leaders were selected on the basis of their clinical skills and their interest in the project. All leaders indicated that spirituality was an integral part of their lives.

Interventions

Similarities Between the Secular and Religious Versions

Both intervention versions, which were adapted from forgiveness interventions for college women wronged by a romantic partner (see Rye & Pargament, 2002), consisted of eight weekly sessions lasting 90 minutes each. The interventions were composed of a variety of activities, discussion topics, and homework assignments designed to facilitate forgiveness toward one's ex-spouse.[6] The intervention content was based loosely on Worthington's (1998) REACH model of forgiveness, which involves the following steps: (R)ecall the hurt, (E)mpathy, (A)ltruistic gift, (C)ommitment to forgive, (H)old on to forgiveness. All group leaders were provided with a manual detailing the content of the intervention, and each participant was given an intervention workbook.

Sessions 1–3: Processing and coping with negative feelings. The first step of Worthington's model involves recalling the hurt. This step is important in group interventions because it provides participants with an opportunity to process their feelings, learn from the experiences of other group members, and identify commons areas of struggle. Thus, in the first session of both interventions, group leaders encouraged participants to discuss their feelings related to their ex-spouse's wrongful actions. Group leaders promoted reflection by leading participants through a guided meditation in which they envisioned the emotional burdens they were carrying related to the divorce. Participants completed a homework assignment in which they wrote a letter to their ex-spouse. The letter was not intended to be shared with the ex-spouse but rather was designed to help participants further express their thoughts and feelings. Sessions 2 and 3 of the interventions focused on strategies for coping with feelings of anger. Group leaders presented research concerning the effects of hostility on health (e.g., Iribarren et al., 2000) and children's ability to cope with divorce (Amato & Keith, 1991).

Sessions 4–5: Learning about forgiveness. The next two steps in Worthington's (1998) forgiveness model involve developing empathy for the offender and offering forgiveness as an altruistic gift. However, before moving forward with the forgiveness process, it is important that individuals have a firm understanding of the meaning of forgiveness (Enright & Fitzgibbons, 2000). Thus, during the fourth session, group leaders explained how forgiveness differed from forgetting, condoning, legal pardon, and reconciliation. During Sessions 5–6 of both interventions, group leaders discussed strategies for fostering empathy toward one's ex-spouse because there is evidence that empathy facilitates forgiveness (McCullough et al., 1997). Group leaders also presented research on how forgiveness relates to mental health and discussed some of the obstacles that divorced individuals face when trying to forgive.

Sessions 6–8: Moving closer toward forgiveness. The final steps in Worthington's model involve making a commitment to forgive and holding onto forgiveness. During the sixth session of both interventions, participants were invited to make a symbolic commitment to "let go" of anger through a forgiveness ritual. In the remaining sessions, participants considered the role of self-forgiveness in the healing process and generated strategies to prevent relapse of angry and hostile feelings. Both versions of the interventions concluded by encouraging participants to reflect on their forgiveness journey and their experiences in the group.

Differences Between the Secular and Religious Interventions

In the religious intervention sessions, group leaders actively encouraged participants to draw on their religious beliefs while working toward forgiveness. Although all major world religions value forgiveness (see Rye et al., 2000), the religious intervention focused on a Christian perspective because this corresponded with the belief system of most of the participants.[7] Throughout the religious intervention, group leaders encouraged tolerance for varying religious viewpoints expressed by group members. Moreover, the goal of the religious intervention was not to change participants' religious beliefs, but instead to encourage them to draw on their preexisting faith as a means of facilitating forgiveness.

Unlike the secular intervention, leaders of the religious intervention encouraged participants to draw on religious sources of support when forgiving. For example, group leaders invited participants to consider viewing forgiveness as a collaborative venture with God because research suggests that perceptions of support from God can be helpful in coping (Pargament & Brant, 1998). Participants in the religious intervention were also invited to consider whether prayer might enhance their journey toward forgiveness. Group leaders provided participants with time for silent prayer or reflection. Participants also completed two homework assignments related to prayer. One assignment involved reading about different forms of prayer (see Poloma & Gallup, 1991), whereas another reading assignment described how prayer helped a man forgive his ex-wife (see Jampolsky, 1999).

Furthermore, group leaders of the religious intervention discussed scripture passages during sessions. They focused on Christian scriptures to match the faith perspective of most participants. Bible passages were discussed that provided theological rationales for forgiveness, described religious role models for forgiveness, and offered comforting perspectives on how to cope with challenging life circumstances. Scripture passages and religiously based inspirational quotes were also provided in the participant workbook.

Comparison Condition

Participants assigned to the comparison condition received no intervention. They were provided with a list of free or low-cost community resources where they could obtain individual or group support to help them cope with divorce. In addition, comparison participants were provided with the opportunity to attend a free workshop on coping with divorce through forgiveness after the study was completed.

---

[6] More information about the interventions can be obtained by contacting Mark S. Rye.

[7] A few non-Christians elected to participate even though they were fully informed in advance of the possibility of being assigned to an intervention with a Christian focus.

Measures

Demographic and Background Information

Participants completed a variety of demographic and background questions pertaining to their divorce. Participants also indicated whether they were in individual or group therapy with a practitioner who was not affiliated with the study.

Participants completed two questions at pretest pertaining to frequency of attendance at religious services and frequency of prayer. Items were constructed on a Likert-type scale with response possibilities ranging from 1 (*never*) to 4 (*frequently*). In addition, intrinsic religiousness was assessed at pretest using the Hoge Intrinsic Religious Motivation Scale (Hoge, 1972). The scale consists of 10 items with a Likert-type scale format with response possibilities ranging from 1 (*strongly disagree*) to 4 (*strongly agree*). Means and standard deviations for this scale were as follows: comparison ($M = 29.92$, $SD = 5.25$), religious ($M = 29.38$, $SD = 5.49$), and secular ($M = 29.94$, $SD = 5.23$). In this study, Cronbach's alpha was .87. Scores on this scale can range between 10 and 40, with higher scores indicating higher levels of religiousness.

Primary Outcome Measures

Forgiveness outcome measures were designated as primary because the main goal and focus of the interventions was to facilitate forgiveness. The forgiveness measures are briefly described below.

Forgiveness. The Forgiveness Scale (Rye et al., 2001) was used to assess participants' level of forgiveness toward their ex-spouse. The scale consists of 15 Likert-type items with response possibilities ranging from 1 (*strongly disagree*) to 5 (*strongly agree*). The scale has adequate psychometric properties (Rye et al., 2001). In this study, the mean Cronbach's alpha across three points in time was .88. Scores on this scale can range between 15 and 75, with higher scores reflecting more forgiveness.

Observer Forgiveness. Participants nominated an adult friend or family member to complete the Observer Forgiveness Survey, which was created for this study. The survey, which consists of 17 Likert-type items with response possibilities ranging from 1 (*never*) to 5 (*very often*), assesses the observer's perspective regarding the participant's level of forgiveness toward his or her ex-spouse. Sample questions include, "X talks about how angry he or she is toward his or her ex-spouse" and "X talks about wanting to 'get back' at his or her ex-spouse." In this study, the mean Cronbach's alpha across three points in time was .91. Scores can range from 17 to 85 for Observer Forgiveness. Items were coded so that higher scores reflect increased forgiveness.

Forgiveness knowledge. The Forgiveness Concept Survey (Rye & Pargament, 2002) was used to assess knowledge of forgiveness. This was designated as a primary outcome measure because increased knowledge about forgiveness may facilitate the forgiveness process (Enright & Fitzgibbons, 2000). Moreover, the chances of adverse consequences from the forgiveness process may decrease when people understand how forgiveness differs from concepts like reconciliation, forgetting, condoning, and legal pardon. The scale consists of 10 Likert-type items with response possibilities ranging from 1 (*strongly agree*) to 5 (*strongly disagree*). The "correct" answers for this scale are based on the theoretical conceptualizations of forgiveness as outlined in the literature (e.g., McCullough et al., 2000). In this study, the mean Cronbach's alpha across three points in time was .70. Scores on this scale can range from 10 to 50, with higher scores reflecting greater adherence to the conceptualization presented during the intervention.

Secondary Outcome Measures

Measures of mental health outcome were designated as secondary because improving mental health was not a direct focus of the interventions. Nevertheless, we were interested in the effect of the interventions on mental health because significant emotional distress often accompanies divorce. The mental health measures are briefly described below.[8]

Anger. The general tendency to feel anger across situations was assessed using the Trait Anger Inventory (Spielberger, Jacobs, Russell, & Crane, 1983). The inventory consists of 10 items using a Likert-type format with response possibilities ranging from 1 (*not at all*) to 4 (*very much so*). In this study, the mean Cronbach's alpha across three points in time was .80. Scores on the inventory can range from 10 to 40, with higher scores reflecting higher levels of anger.

Depression. The Beck Depression Inventory (Beck, Steer, & Brown, 1996) was administered to assess symptoms of depression. The inventory consists of 21 multiple-choice items. Each response option is assigned a number (i.e., ranging from 0–3), with higher numbers corresponding to greater symptom severity. In this study, the mean Cronbach's alpha across three points in time was .88. Scores on this scale can range from 0 to 63, with higher scores reflecting more symptoms of depression.

Process Measures and Evaluation

Forgiveness strategies survey. Participants completed the Forgiveness Strategies Survey (Rye & Pargament, 2002) at posttest and follow-up. This scale assessed the degree to which participants used forgiveness strategies explicitly encouraged in at least one version of the intervention. Nine items were constructed on a Likert-type scale with response possibilities ranging from 1 (*never*) to 5 (*very often*). Sample items include, "I used another person who has forgiven as a role model to help me forgive" and "I relied upon support from my family when trying to forgive." These questions were analyzed separately to compare use of specific strategies across versions of the intervention.

Measures to assess adherence to intervention manuals. Several methods were used to assess leader adherence to intervention manuals. Following each session, group leaders completed a form containing questions about adherence to intervention manuals and participant attendance.[9] Group leaders reported that they generally adhered to the program manual and only introduced religious content in the religious intervention sessions. Similar to the approach of other researchers (see Addis, 1997), we further assessed adherence to intervention manuals through evaluation of audiotaped intervention sessions. Two audiotapes from each of the 14 groups were randomly selected for rating by individuals blind to intervention type. Several audiotapes ($n = 12$) were given to both raters in order to check for interrater reliability.[10] When discrepancies occurred between raters, the scores were averaged for use in subsequent analyses. Using a Likert-type scale with response possibilities ranging from 1 (*not at all similar*) to 5 (*extremely similar*), observers gave reasonably high ratings for similarity to

---

[8] Measures of hope and spiritual well-being were also administered, and no treatment effects were found. A ceiling effect may have been present for the hope measure, as the mean hope score at pretest was 25.50 ($SD = 3.19$; possible range from 6-30). Because of space concerns, only depression and trait anger measures are described in the article text.

[9] Attendance was high among participants in both the religious ($M = 7.28$ sessions, $SD = .93$) and the secular ($M = 7.12$ sessions, $SD = 1.11$) interventions. A *t* test revealed no significant difference on attendance across conditions.

[10] Correlations, which were computed to determine how well Rater 1 and Rater 2 matched on observer-rating items assessing similarly to manual content and time guidelines, were .51 for each item. Because the interrater reliability was so low, observer ratings with respect to adherence to treatment manuals should be interpreted cautiously. In retrospect, the observers needed more advance training to ensure that they were rating audiotapes in the same manner. In spite of the significant limitations of our approach, we report the ratings so as to provide an observer estimate of how well the leaders adhered to the manual.

Table 1
Correlations of Outcome Measures at Pretest

Outcome measure	1	2	3	4	5
Primary measures					
1. Forgiveness ($n = 149$)	—				
2. Forgiveness Concept ($n = 149$)	−.11	—			
3. Observer Forgiveness ($n = 105$)	.32**	.10	—		
Secondary measures					
4. Trait Anger ($n = 149$)	−.23*	−.01	.01	—	
5. Depression ($n = 149$)	−.39**	−.10	−.19	.30*	—

$* p < .01.$ $** p < .001.$

manual content (religious, $M = 4.15$, $SD = .75$; secular, $M = 3.70$, $SD = .94$) and adherence to suggested amount of time for activities (religious, $M = 3.73$, $SD = 1.05$; secular, $M = 3.70$, $SD = .70$). In most cases, the raters correctly identified the intervention type (Rater 1 = 80%, Rater 2 = 85%). All misidentified sessions involved religious sessions being mistaken for secular sessions.[11] Thus, the raters provided no evidence that group leaders actively introduced religious content into the secular sessions.

Results

Preliminary Analyses

Missing Data Analysis

We used hierarchical linear modeling (HLM) to analyze the growth curves of the nested data (i.e., repeated measures nested within individuals). In the HLM growth curve analysis, the Level 1 (repeated measures) data file is allowed to have missing values because HLM does not require complete values for each point in time. However, the Level 2 (individuals) data file should not have any missing values. Of the four variables containing missing data, only 0.67% to 2.68% of the data were missing. For these variables, we did mean (for interval variables) and median (for ordinal variables) replacements.

Correlations Among Outcome Measures

Correlations were computed to determine the relationships between all pretest primary outcome measures (see Table 1). Correlations were in the expected direction, with absolute values ranging from $|r| = .10$ to $.32$ for the primary outcome measures. It is important to note that Forgiveness was positively correlated with Observer Forgiveness ($r = .32$, $p < .001$). With respect to the secondary outcome measures, Depression was positively correlated with Trait Anger ($r = .30$, $p < .01$).

Relationships Between Demographic and Background Variables and Outcome Measures at Pretest

Correlations (for continuous variables) and analyses of variance (for categorical variables) were conducted to determine the association between demographic and background variables and pretest outcome measures. Age, gender, education, number of children, length of marriage, amount of contact with ex-spouse, current relationship status, and intrinsic religiousness were significantly associated with at least one of the five outcome measures

at pretest.[12] In addition to the variables identified above, outside therapy and intrinsic religiousness were controlled for in all analyses for major study questions.

Group Equivalence Analysis

An equivalence analysis was conducted comparing participants across all conditions for demographic and background variables and pretest outcome measures. There were no significant differences across conditions on demographic and background variables with the exception of religious affiliation, $\chi^2(4, N = 149) = 11.62$, $p < .05$. Specifically, there were more Protestants in the comparison condition ($n = 34$) than in the religious ($n = 24$) and secular ($n = 21$) conditions, there were more Catholics in the religious ($n = 18$) and secular ($n = 20$) conditions than in the comparison condition ($n = 6$), and there were similar numbers of participants with "other" or no religious affiliation across conditions. There were no significant differences across conditions on pretest outcome measures.

Analyses of Major Study Questions

Growth Curve Analysis

We used HLM to analyze growth trajectories across three points in time—pretest, posttest, and follow-up (see Table 2 for outcome measure means and standard deviations). The nested-structure growth analysis allows for the examination of linear (growth rate) and quadratic (acceleration) growth trajectories and for the examination of which growth trajectory best represents individuals' change over time (Raudenbush & Bryk, 2002; Snijders & Bosker,

---

[11] Most misidentified tapes came from Session 3, which contained the most overlap in content across versions of the intervention.

[12] Trait Anger was negatively correlated with age and length of marriage. In addition, Trait Anger scores were significantly higher for individuals without children as compared with individuals with children and for individuals who were dating or remarried compared with individuals who were not dating. Amount of contact with ex-spouse was positively correlated with Forgiveness and negatively correlated with Forgiveness Concept. Men scored significantly higher than women on Forgiveness, whereas women scored significantly higher then men on Forgiveness Concept. Participants with higher education levels scored lower on Depression and received higher forgiveness ratings from observers than less educated participants. Intrinsic religiousness was positively correlated with Forgiveness.

Table 2
Descriptive Statistics of Outcome Measures

Outcome measure	Religious (n = 50)		Secular (n = 49)		Comparison (n = 50)		Total sample (n = 149)	
	M	SD	M	SD	M	SD	M	SD
Forgiveness								
Pretest	41.58	10.69	41.47	9.52	44.88	9.31	42.65	9.92
Posttest	47.12	10.35	47.39	8.14	43.94	12.53	46.14	10.56
Follow-up	48.97	9.99	49.14	9.12	45.84	12.58	47.98	10.71
Forgiveness Concept								
Pretest	34.80	5.43	35.98	5.65	34.76	5.39	35.18	5.48
Posttest	37.44	4.79	38.40	4.25	34.66	5.39	36.82	5.06
Follow-up	37.22	5.41	38.18	4.58	34.56	4.85	36.64	5.16
Observer Forgiveness								
Pretest	53.58	11.31	50.54	11.46	53.23	12.48	52.33	11.61
Posttest	57.59	9.56	54.46	10.29	56.97	13.18	56.24	10.73
Follow-up	58.35	10.39	57.31	10.36	55.45	13.12	57.29	10.99
Trait Anger								
Pretest	17.99	5.56	17.97	5.28	18.04	3.58	18.00	4.85
Posttest	17.30	5.05	17.76	4.96	18.08	3.79	17.71	4.61
Follow-up	16.25	3.98	16.69	4.53	17.44	3.57	16.79	4.04
Depression								
Pretest	19.08	10.21	19.98	10.62	18.54	11.15	19.19	10.61
Posttest	14.21	9.62	11.89	7.43	16.46	11.12	14.20	9.65
Follow-up	12.80	8.98	10.97	8.70	15.67	11.87	13.16	10.08

Note. The sample sizes for Observer Forgiveness in religious, secular, and comparison groups were 37, 37, and 22, respectively.

1999). With a heterogeneous model in HLM (i.e., HMLM), there can be different variances of the outcome measures across time. Moreover, unlike other repeated measures analyses, HLM can examine the fit of data with an unequal number of repeated observations for each individual. We computed analyses for study completers (n = 149) as opposed to all intention-to-treat participants (168 participants completed at least one survey, 24 participants completed no surveys).[13]

In our study, we expected a quadratic growth rate of forgiveness. That is, we anticipated that the growth rate of forgiveness would be slower in the follow-up period (from Time 2 to Time 3) than in the intervention period (from Time 1 to Time 2). Statistically, a quadratic function provided a better model fit for our data than a linear function. For example, for the three primary outcome measures, the quadratic functions were all fitted by the data significantly better than were linear functions (see Table 3). Thus, on the basis of theoretical and statistical reasons, we modeled a quadratic function for our study. Other researchers using HLM (e.g., Raudenbush, Brennan, & Barnett, 1995; Scott & Wolfe, 2003) have similarly estimated curvilinear (i.e., quadratic) change using three points in time.

We could have run a 3-level HMLM with groups (run by intervention leaders) as the third level, but the between-groups variation (i.e., intraclass correlation coefficient; ICC), was minimum (0.03% to 5.41% with a mean ICC of 2.04% across the five outcome measures). Thus, 2-level heterogeneous HMLM growth curve analysis was sufficient for this study. We also could have run a multivariate HMLM for the five outcome measures simultaneously, but it would have made the interpretation for the heterogeneous HMLM growth curve analysis much more complicated. Instead, we did a univariate HMLM for each of the outcome

measures and used a Bonferroni correction within each subdomain (primary outcomes, $\alpha = .05/3 = .017$; secondary outcomes, $\alpha = .05/2 = .025$) to control for Type I error. Lastly, because our research questions and hypotheses pertained to greater improvements by intervention conditions, directional hypothesis testing (one-tailed test) was used.

Table 4 shows growth trajectory estimates from the heterogeneous HMLM growth curve analyses for all outcome measures. Besides controlling for the demographic and background variables identified in the preliminary analysis, the three treatment conditions, outside therapy, and intrinsic religiousness were modeled in all analyses. As shown in Table 4, religious (growth rate differ-

---

[13] Six intervention participants completed all three surveys but failed to attend at least half of the intervention sessions as required by selection criteria. Most participants with incomplete data completed the pretest only (n = 12), whereas 1 participant completed both the pretest and posttest. The total number of surveys completed at each point in time was as follows: pretest (religious, 60; secular, 55; comparison, 53); posttest (religious, 55; secular, 51; comparison, 50); and follow-up (religious, 54; secular, 51; comparison, 50). Follow-up HLM analyses revealed no statistical differences when including participants who completed all three surveys and met attendance criteria (n = 149) versus including all participants who completed at least one survey (n = 168). Taking all of these factors into consideration, we decided to report data from only participants who had completed all three surveys and who met attendance criteria.

[14] ES = effect size, which is defined as $\Delta = \dfrac{\beta}{\sigma_e}$, where β is the dummy coefficient of the grouping variable and σ_e is the individual level standard deviation after appropriate controls have been made (Tymms, Merrell, & Henderson, 1997). The ES is analogous to Cohen's *d*.

Table 3
Chi-Square Tests for Comparing Model Fit

Model	Forgiveness		Forgiveness Concept		Observer Forgiveness	
	Deviance	df	Deviance	df	Deviance	df
Linear function	3066.37	18	2479.22	20	2123.39	17
Quadratic function	3046.54	25	2461.54	26	2102.20	24

Chi-square test for model fit comparison (difference in deviance)

χ^2	df	χ^2	df	χ^2	df
19.83*	7	17.68*	6	21.19*	7

Note. The χ^2 value is the difference between two deviances, one for a quadratic function and the other for a linear function. The smaller the deviance, the better the model fit. The chi-square test tells us which model is fitted by data better by comparing the two deviances. A significant p value ($p = .0167$) suggests that the quadratic function is fitted by data significantly better than is the linear function.
* $p < .01$.

ence = 1.282, $p < .005$, ES[14] = 3.321) and secular (growth rate difference = 1.276, $p < .005$, ES = 3.306) participants had significantly higher growth rates than comparison participants on Forgiveness. Religious (acceleration difference = −.057, $p < .017$, ES = −3.563) and secular (acceleration difference = −.055, $p < .017$, ES = −3.438) participants also showed significant deceleration when contrasted with comparison participants. In other words, the rate of change for intervention participants between pretest to posttest was more rapid than the rate of change between posttest and follow-up (see Figure 2). Table 4 also shows that religious (growth rate difference = 0.523, $p < .017$, ES = 2.885) and secular (growth rate difference = 0.490, $p < .017$, ES = 2.703) participants had significantly higher growth rates than comparison participants on Forgiveness Concept (see Figure 3). In

addition, secular participants had significantly lower growth rates (growth rate difference = −1.079, $p < .005$, ES = −2.795) than comparison participants on Depression (see Figure 4). No significant growth curve trajectory differences were found when directly comparing religious and secular interventions (see Table 4). For the outcome variables that showed significant treatment effects, we calculated the proportion of variance in growth trends explained by the group differences. Results were similar when comparing intervention versus comparison conditions on the forgiveness measures (6.27% to 8.91% for growth rate; 0.00% to 13.04% for acceleration). On Depression, the proportion of variance accounted for when comparing secular versus comparison conditions was higher (5.52% for growth rate; 4.00% for acceleration) than when comparing religious versus comparison conditions (0.10% for growth rate; 3.70% for acceleration).

Additional Analyses

Final differences across conditions. We ran a multiple analysis of covariance to determine whether there were differences at follow-up on the three outcome measures with significant treatment effects. After controlling for pretest scores, the multivariate differences across conditions at follow-up were collectively significant, $F(6, 240) = 5.73$, $p < .001$. In addition, the univariate tests for each outcome measure were significant: Forgiveness, $F(2, 122) = 6.10$, $p < .01$; Forgiveness Concept, $F(2, 122) = 9.82$, $p < .001$; Depression, $F(2, 122) = 5.87$, $p < .01$. Finally, all contrast tests comparing intervention conditions with the comparison condition were significant, with the exception of religious versus comparison on Depression.

Single-item forgiveness question. To better understand the clinical significance of the findings, we asked participants to rate the extent to which they had forgiven their ex-spouse on a single Likert-type item with response choices ranging from 1 (*not at all*

Table 4
Growth Trajectory Estimates from Heterogeneous HMLM Growth Curve Analyses

	Outcome measures				
	Primary measures[a]			Secondary measures[a]	
Variable	Forgiveness (n = 149)	Forgiveness Concept (n = 149)	Observer Forgiveness (n = 109)	Trait Anger (n = 149)	Depression (n = 149)
Religious vs. comparison					
Growth rate	1.282 (.347)††	0.523 (.197)†	−0.201 (.423)	−0.042 (.156)	−0.461 (.367)
Acceleration	−.057 (.021)†	−.022 (.012)	.019 (.024)	−.003 (.009)	.017 (.022)
Secular vs. comparison					
Growth rate	1.276 (.345)††	0.490 (.197)†	−0.275 (.421)	0.022 (.155)	−1.079 (.367)††
Acceleration	−.055 (.021)†	−.020 (.012)	.038 (.024)	−.005 (.009)	.043 (.022)
Religious vs. secular					
Growth rate	0.006 (.344)	0.033 (.196)	0.074 (.366)	−0.064 (.154)	0.618 (.365)
Acceleration	−.002 (.021)	−.002 (.012)	−.018 (.021)	.002 (.009)	−.026 (.022)

Note. Growth rate and acceleration coefficients represent differences in growth curve parameters when comparing conditions (controlling for the demographic/background variables identified in the preliminary analysis). Directional hypotheses were tested for growth trajectories. Numbers in parentheses are standard errors.
[a] As suggested by Stevens (1986), a Bonferroni correction was used within each subdomain (primary and secondary). Thus, the significance level was $\alpha = .05/3 = .017$ for primary measures and $\alpha = .05/2 = .025$ for secondary measures.
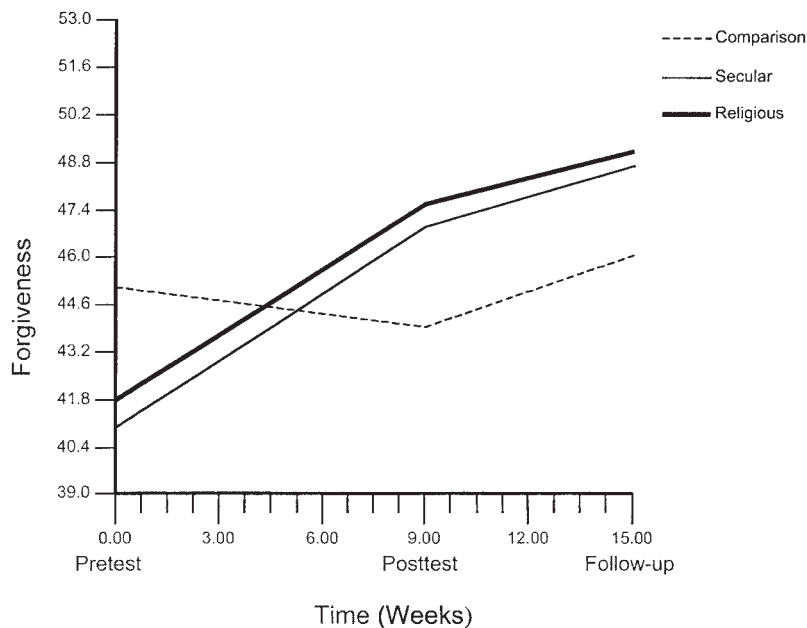† $p < .017$.   †† $p < .005$.

Figure 2. Growth curves of Forgiveness for each condition.

forgiven) to 5 (*completely forgiven*).[15] It is interesting that only a small percentage of participants indicated that they had completed the forgiveness process at posttest (religious, 12%; secular, 6%; comparison, 4%). A larger number of participants indicated that they had moderately forgiven or almost completely forgiven at posttest (religious, 60%; secular, 51%; comparison, 34%). Furthermore, a few participants indicated at posttest (religious, 8%; secular, 10%; comparison, 20%) that they had not at all forgiven their ex-spouse. A similar pattern of results was found at follow-up.

Moderator effects by intrinsic religiousness on growth trajectories. To determine whether intervention effects were moderated by intrinsic religiousness, we included the interaction effect between treatment conditions and intrinsic religiousness as an independent variable in the HMLM growth curve analysis. Of primary interest was whether there were significant moderator-interaction effects of intrinsic religiousness on growth trajectories: Growth Rate Coefficient × Treatment Condition × Intrinsic Religiousness and Acceleration Coefficient × Treatment Condition × Intrinsic Religiousness. After applying Bonferroni corrections, no significant moderator-interaction effects were found.

Reported use of forgiveness strategies. A multiple analysis of variance was computed for the 9 items of the Forgiveness Strategies Survey to determine whether participants' forgiveness strategies differed across conditions. No significant differences across conditions were found. Some of the most commonly endorsed forgiveness strategies at posttest included asking God for help or support (comparison, *M* = 3.86, *SD* = 1.26; religiously integrated, *M* = 4.08, *SD* = 1.19; secular, *M* = 4.06, *SD* = 1.21), relying on support from friends (comparison, *M* = 3.53, *SD* = 1.06; religiously integrated, *M* = 3.48, *SD* = .99; secular, *M* = 3.58, *SD* = 1.09), and relying on support from family (comparison, *M* = 3.35, *SD* = 1.16; religiously integrated, *M* = 3.36, *SD* = 1.06; secular, *M* = 3.02, *SD* = 1.18). A similar pattern of results was found at both posttest and follow-up.

Discussion

Effects of the Interventions on Forgiveness

On the basis of participant self-report, the interventions appeared to fulfill their primary purpose of facilitating forgiveness toward one's ex-spouse. Consistent with hypotheses, participants in the secular and religious interventions improved significantly more on the Forgiveness Scale than comparison participants. Specifically, intervention participants improved on self-reported forgiveness at posttest and maintained gains or continued to improve at 6-week follow-up. Other studies have similarly found that forgiveness interventions can facilitate forgiveness toward a specific offender (e.g., Al-Mabuk, Enright, & Cardis, 1995; Freedman & Enright, 1996; McCullough et al., 1997; Rye & Pargament, 2002).

Although there was evidence that intervention participants made progress toward forgiveness, they did not necessarily complete the forgiveness process. Perhaps it is not surprising that many participants did not complete the forgiveness process following an 8-week intervention. As mentioned earlier, divorced individuals are often deeply wounded by former spouses and maintain grudges for years following the divorce (Wallerstein, 1986). For this reason, forgiveness interventions for divorced individuals may need to be longer than 8 weeks. This suggestion needs to be considered in the context of practical concerns such as program cost and increased likelihood of attrition for longer interventions. However, there is evidence that longer interventions generally yield greater improvements on forgiveness (Worthington, Sandage, & Berry, 2000).

---

[15] A similar question appears at the end of the Enright Forgiveness Inventory (Subkoviak et al., 1995).
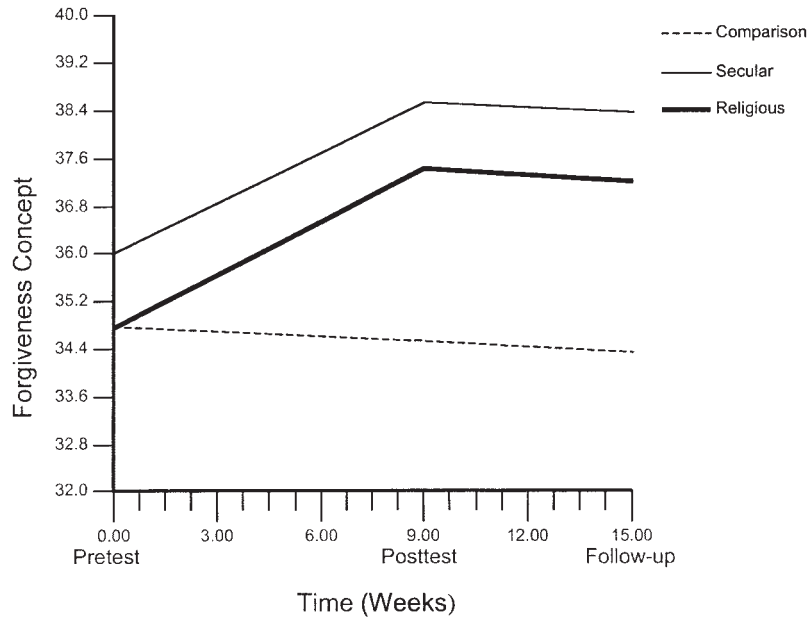
Figure 3. Growth curves of Forgiveness Concept for each condition.

It is interesting that data from the observer forgiveness surveys did not show significant differences in growth curve trajectories when comparing intervention and comparison conditions. It is possible that intervention participants were more likely than comparison participants to report improvements in forgiveness because of demand characteristics (i.e., cues about experimenter expectations). Perhaps some intervention participants were motivated to report increased forgiveness because they had spent a significant amount of time attending intervention sessions. Because partici-

pants knew that the primary intervention goal was forgiveness of an ex-spouse, they may also have been motivated by social desirability to report increased forgiveness over time. Although this risk was enhanced by explicitly stating the intervention goals at the outset, we felt it was important for participants to be able to make an informed decision regarding whether they wished to participate.

Although the possible role of demand characteristics cannot be dismissed, there are other plausible explanations for why observer report data failed to corroborate self-reported treatment effects. For
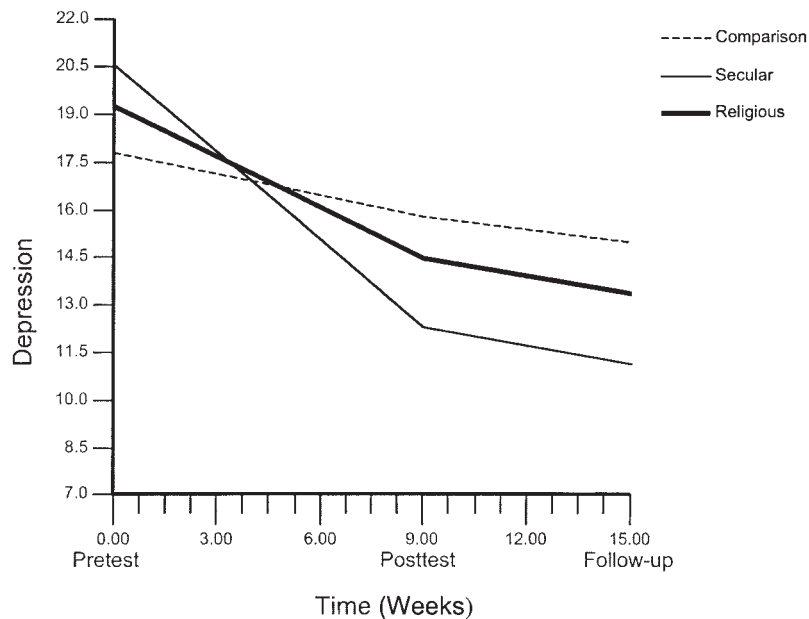

Figure 4. Growth curves of Depression for each condition.

instance, participants nominated observers who they felt comfortable with but who were not necessarily the most knowledgeable about the participants' level of forgiveness. Although nominated participants reported a high level of contact with participants, the contact did not always involve face-to-face encounters. In fact, some nominated individuals lived in distant locations from the participant who nominated them. Thus, some nominated participants may not have had adequate opportunity to observe possible changes in level of forgiveness. Moreover, intrapersonal changes related to forgiveness may occur before observable interpersonal changes. If true, longer term follow-up studies may be more useful when comparing participants across conditions on observer forgiveness ratings.

Consistent with hypotheses and previous research (e.g., Rye & Pargament, 2002), participants in both intervention conditions improved more than comparison participants on understanding of forgiveness. It is interesting that several participants indicated on open-ended questions[16] following the intervention that learning how forgiveness differed from other concepts (e.g., reconciliation, legal pardon, condoning, forgetting) was essential in helping them move forward with the forgiveness process.

Effects of the Interventions on Mental Health

This study provided limited evidence that the intervention improved mental health. Consistent with hypotheses, the secular intervention participants showed a larger decrease in depressive symptoms over time than comparison participants. However, contrary to hypotheses, no treatment effects for depression were found for the religious intervention. Furthermore, neither intervention version showed treatment effects for trait anger. The modest treatment effects on mental health measures were surprising given that other studies have shown forgiveness interventions can lead to decreased depression (e.g., Freedman & Enright, 1996) and anger (Coyle & Enright, 1997). Although the limited mental health benefits may reflect shortcomings of the intervention, it should be noted that improving mental health was not a primary focus of the intervention. The intervention focused on reducing anger toward a specific person (i.e., ex-spouse) but not on reducing generalized feelings of anger or hostility. Thus, it is unclear whether trait anger was an appropriate measure of program effectiveness. Moreover, participants were not selected based on level of emotional distress and did not display high levels of depression and trait anger at pretest. The participants, who had been divorced an average of 2.6 years prior to the intervention, may have had the opportunity to work through some of their emotional distress prior to the intervention. No significant adverse effects of the interventions were reported.

Comparisons Between Secular and Religious Forgiveness Interventions

It is interesting that no significant differences were found when directly comparing religious and secular participants on primary or secondary outcome measures. As noted earlier, only the secular condition participants showed significantly fewer depressive symptoms as compared with comparison participants. Aside from this finding, the pattern of results was remarkably similar across both intervention conditions and is consistent with the findings of

Rye and Pargament (2002). Similarly, Hart and Shapiro (2002) found no differences between secular and spiritually oriented forgiveness programs with respect to mental health. However, unlike the findings of this study, Hart and Shapiro (2002) found that participants in the spiritually oriented forgiveness program improved significantly more on forgiveness than participants in the secular program. One possible reason for the lack of differences across conditions in this study is that the intervention versions were more similar than dissimilar. Responses on the Forgiveness Strategies Survey also suggest that many secular participants were using religiously based forgiveness strategies even though they were not encouraged by group leaders during program sessions. For some individuals, religion or spirituality may be inherent to the forgiveness process (Pargament & Rye, 1998).

Consistent with previous research (Rye & Pargament, 2002), religiousness did not moderate treatment effects. Thus, the study uncovered no unique benefits for highly religious participants assigned to the religious condition. One possible explanation is that participants in all conditions reported using religiously based strategies to help them forgive. It is also possible that religiousness would act as a moderator if participants in the sample had a higher level of religiousness.

Study Limitations

An important limitation of this study involves the type of comparison condition that was used. Because the study did not include a standard psychotherapy condition, it is not possible to determine whether forgiveness interventions have benefits beyond traditional approaches to helping individuals cope with divorce. Furthermore, the possibility exists that program effects were due to the nonspecific curative factors of group therapy as opposed to the program content. However, forgiveness interventions have been found to improve mental health irrespective of whether a group (e.g., Al-Mabuk et al., 1995; Rye & Pargament, 2002) or an individual modality was used (e.g., Coyle & Enright, 1997; Freedman & Enright, 1996). In addition, nonintervention studies have shown that self-reported forgiveness of an ex-spouse relates to positive mental health outcomes (e.g., Ashleman, 1997; Bursik, 1991; Rye et al., 2004). On open-ended questions following our interventions, participants reported that both the supportive nature of the group and specific aspects of program content were helpful.

Another limitation of this study is the possibility that demand characteristics played a role in self-reported improvements of forgiveness by intervention participants. This possibility is increased by the fact that participants were informed of the goals of the intervention at the outset and the fact that no treatment effects were found on observer-report measures of forgiveness. However, as noted earlier, many nominated observers were not from the participants' household and thus may not have had an adequate opportunity to observe change. Further research is needed to determine optimal methods for obtaining observer report data on forgiveness. Regardless, researchers need to be cognizant of the possible role of demand characteristics in forgiveness intervention studies.

---

[16] More information about open-ended responses can be obtained by contacting Mark S. Rye.

In addition, the selection criteria used in this study may limit the ability to generalize the findings. Selected individuals indicated they would be comfortable if assigned to a group that encouraged participants to draw on their religious beliefs. Although this criterion enhanced informed consent, it may have resulted in a selection bias. Moreover, participants were not selected based on level of emotional distress, which may have made it difficult to detect change on mental health measures.

Clinical Implications and Suggestions for Future Research

In spite of the limitations mentioned above, the findings of this study may be useful to clinicians who are working with divorced individuals who want to forgive their ex-spouse. This study provides evidence that a group intervention can facilitate self-reported forgiveness of an ex-spouse. Although clients may make progress toward forgiving an ex-spouse following short-term group interventions, completion of the process may require interventions of a longer duration. Further research is needed to better understand the optimal timing for addressing forgiveness with divorced individuals and to determine when forgiveness is contraindicated. For now, we think it is unwise to make forgiveness the focus of therapy when an individual is currently being abused by an ex-spouse because anger may motivate some individuals to stay away from unhealthy relationships (see Gordon et al., 2004). Consistent with theoretical models of forgiveness (e.g., Enright & Fitzgibbons, 2000; Worthington, 1998), we believe clinicians should encourage clients to acknowledge and discuss their feelings about being wronged prior to moving forward with the forgiveness process. However, because some individuals were wronged long before they filed for divorce, the amount of time since a divorce may be a less important factor in readiness to forgive than other contextual factors (e.g., length of time since wrongdoing, nature of wrongdoing, motivation to forgive, coping skills of the client). Additional research is also needed to determine how the forgiveness process might differ for divorced individuals who have ongoing conflict with their ex-spouse (e.g., coparenting disputes) versus those who no longer have conflict. The findings of this study suggest that many clients use religious strategies when forgiving, even when religion is not explicitly addressed in therapy. Although this study provided no evidence that the religious intervention was superior to the secular intervention, some religious clients may appreciate having the opportunity to draw on their faith when working toward forgiveness.

References

Addis, M. E. (1997). Evaluating the treatment manual as a means of disseminating empirically validated psychotherapies. *Clinical Psychology: Science and Practice, 4,* 1–11.

Al-Mabuk, R. H., Enright, R. D., & Cardis, P. A. (1995). Forgiveness education with parentally love-deprived late adolescents. *Journal of Moral Education, 24,* 427–444.

Amato, P. R., & Keith, B. (1991). Parental divorce and the well-being of children: A meta-analysis. *Psychological Bulletin, 110,* 26–46.

Ashleman, K. (1997, April). *Forgiveness as a resiliency factor in divorced families.* Paper presented at the biennial meeting of the Society for Research in Child Development, Washington, DC.

Beck, A. T., Steer, R. A., & Brown, G. K. (1996). *BDI-II manual.* San Antonio, TX: The Psychological Corporation.

Bonach, K., & Sales, E. (2002). Forgiveness as a mediator between post divorce cognitive processes and coparenting quality. *Journal of Divorce & Remarriage, 38,* 17–38.

Bursik, K. (1991). Correlates of women's adjustment during the separation and divorce process. *Journal of Divorce & Remarriage, 14,* 137–162.

Coyle, C. T., & Enright, R. D. (1997). Forgiveness intervention with postabortion men. *Journal of Consulting and Clinical Psychology, 65,* 1042–1046.

Emery, R. E. (1982). Interparental conflict and the children of discord and divorce. *Psychological Bulletin, 92,* 310–330.

Enright, R. D. (2001). *Forgiveness is a choice: A step-by-step process for resolving anger and restoring hope.* Washington, DC: American Psychological Association.

Enright, R. D., & Fitzgibbons, R. P. (2000). *Helping clients forgive: An empirical guide for resolving anger and restoring hope.* Washington, DC: American Psychological Association.

Freedman, S. (1998). Forgiveness and reconciliation: The importance of understanding how they differ. *Counseling & Values, 42,* 200–216.

Freedman, S. R., & Enright, R. D. (1996). Forgiveness as an intervention goal with incest survivors. *Journal of Consulting and Clinical Psychology, 64,* 983–992.

Gallup, G., & Jones, T. (2000). *The next American spirituality: Finding God in the twenty-first century.* Colorado Springs, CO: Cook Communications.

Gordon, K. C., Baucom, D. H., & Snyder, D. K. (2004). An integrative intervention for promoting recovery from extramarital affairs. *Journal of Marital & Family Therapy, 30,* 213–231.

Gordon, K. C., Burton, S., & Porter, L. (2004). Predicting the intentions of women in domestic violence shelters to return to partners: Does forgiveness play a role? *Journal of Family Psychology, 18,* 331–338.

Hart, K. E., & Shapiro, D. A. (2002, August). *Secular and spiritual forgiveness interventions for recovering alcoholics harboring grudges.* Paper presented at the Annual Convention of the American Psychological Association, Chicago, IL.

Hoge, D. R. (1972). A validated intrinsic religious motivation scale. *Journal for the Scientific Study of Religion, 11,* 369–376.

Iribarren, C., Sidney, S., Bild, D. E., Liu, K., Markovitz, J. H., Roseman, J. M., & Matthews, K. (2000). Association of hostility with coronary artery calcification in young adults: The CARDIA study. *Journal of the American Medical Association, 283,* 2546–2551.

Jampolsky, G. G. (1999). *Forgiveness: The greatest healer of all.* Hillsboro, OR: Beyond Words Publishing.

Johnston, J. R. (1994). High-conflict divorce. *Future of Children, 4,* 165–182.

Mazor, A., Batiste-Harel, P., & Gampel, Y. (1998). Divorcing spouses' coping patterns, attachment bonding, and forgiveness processes in the post-divorce experience. *Journal of Divorce & Remarriage, 29,* 65–81.

McCullough, M. E., Pargament, K. I., & Thoresen, C. E. (2000). The psychology of forgiveness: History, conceptual issues, and overview. In M. E. McCullough, K. I. Pargament, & C. E. Thoresen (Eds.), *Forgiveness: Theory, research, and practice* (pp. 1–14). New York: Guilford Press.

McCullough, M. E., Worthington, E. L., & Rachal, K. C. (1997). Interpersonal forgiving in close relationships. *Journal of Personality and Social Psychology, 73,* 321–336.

Niaura, R., Todaro, J. F., Stroud, L., Spiro, A., Ward, K., D., & Weiss, S. (2002). Hostility, the metabolic syndrome, and incident coronary heart disease. *Health Psychology, 21,* 588–593.

Pargament, K. I., & Brant, C. R. (1998). Religion and coping. In H. G. Koenig (Ed.) *Handbook of religion and mental health* (pp. 111–128). San Diego, CA: Academic Press.

Pargament, K. I., & Rye, M. S. (1998). Forgiveness as a method of

religious coping. In E. L. Worthington (Ed.), *Dimensions of forgiveness: Psychological research & theological perspectives* (pp. 59–78). Radnor, PA: Templeton Foundation Press.

Poloma, M. M., & Gallup, G. H., Jr. (1991). *Varieties of prayer: A survey report.* Philadelphia: Trinity Press International.

Raudenbush, S. W., Brennan, R. T., & Barnett, R. C. (1995). A multivariate hierarchical model for studying psychological change within married couples. *Journal of Family Psychology, 9,* 161–174.

Raudenbush, S. W., & Bryk, A. S. (2002). *Hierarchical linear models: Applications and data analysis methods* (2nd ed.). Thousand Oaks, CA: Sage.

Reed, G. (1998). *Forgiveness as a function of moral agency in the context of infidelity and divorce.* Unpublished doctoral dissertation, University of Wisconsin—Madison.

Rye, M. S., Folck, C. D., Heim, T. A., Olszewski, B. T., & Traina, E. (2004). Forgiveness of an ex-spouse: How does it relate to mental health following a divorce? *Journal of Divorce & Remarriage, 41,* 31–51.

Rye, M. S., Loiacono, D. M., Folck, C. D., Olszewski, B. T., Heim, T. A., & Madia, B. P. (2001). Evaluation of the psychometric properties of two forgiveness scales. *Current Psychology, 20,* 260–277.

Rye, M. S., & Pargament, K. I. (2002). Forgiveness and romantic relationships in college: Can it heal the wounded heart? *Journal of Clinical Psychology, 58,* 419–441.

Rye, M. S., Pargament, K. I., Ali, M. A., Beck, G. L., Dorff, E. N., Hallisey, C., et al. (2000). Religious perspectives on forgiveness. In M. E. McCullough, K. I. Pargament, & C. E. Thoresen (Eds.), *Forgiveness: Theory, research, and practice* (pp. 17–40). New York: Guilford Press.

Scott, K. L., & Wolfe, D. A. (2003). Readiness to change as a predictor of outcome in batterer treatment. *Journal of Consulting and Clinical Psychology, 71,* 879–889.

Smedes, L. B. (1996). *The art of forgiving.* Nashville, TN: Moorings.

Snijders, T., & Bosker, R. (1999). *Multilevel analysis.* London: Sage.

Spielberger, C. D., Jacobs, G., Russell, S., & Crane, R. S. (1983). Assessment of anger: The State–Trait Anger Scale. In J. N. Butcher & C. D. Spielberger (Eds.), *Advances in personality assessment* (pp. 161–189). Hillsdale, NJ: Erlbaum.

Stevens, J. (1986). *Applied multivariate statistics for the social sciences.* Hillsdale, NJ: Erlbaum.

Subkoviak, M. J., Enright, R. D., Wu, C., Gassin, E. A., Freedman, S., Olson, L. M., & Sarinopoulos, I. (1995). Measuring interpersonal forgiveness in late adolescence and middle adulthood. *Journal of Adolescence, 18,* 641–655.

Tymms, P., Merrell, C., & Henderson, B. (1997). The first year at school: A quantitative investigation of the attainment and progress of pupils. *Educational Research and Evaluation, 3,* 101–118.

Wallerstein, J. S. (1986). Women after divorce: Preliminary report from a ten-year follow-up. *American Journal of Orthopsychiatry, 56,* 65–77.

Worthington, E. L., Jr. (1998). The pyramid model of forgiveness: Some interdisciplinary speculations about unforgiveness and the promotion of forgiveness. In E. L. Worthington, Jr. (Ed.), *Dimensions of forgiveness: Psychological research & theological perspectives* (pp. 107–137). Radnor, PA: Templeton Foundation Press.

Worthington, E. L., Sandage, S. J., & Berry, J. W. (2000). Group interventions to promote forgiveness: What researchers and clinicians ought to know. In M. E. McCullough, K. I. Pargament, & C. E. Thoresen (Eds.), *Forgiveness: Theory, research, and practice* (pp. 228–253). New York: Guilford Press.

New Editor Appointed, 2007–2012

The Publications and Communications (P&C) Board of the American Psychological Association announces the appointment of a new editor for a 6-year term beginning in 2007. As of January 1, 2006, manuscripts should be directed as follows:

- *Emotion* (www.apa.org/journals/emo.html), **Elizabeth A. Phelps, PhD,** Department of Psychology, New York University, 6 Washington Place, Room 863, New York, NY 10003.

Electronic manuscript submission. As of January 1, 2006, manuscripts should be submitted electronically via the journal's Manuscript Submission Portal (see the Web site listed above). Authors who are unable to do so should correspond with the editor's office about alternatives.

Manuscript submission patterns make the precise date of completion of the 2006 volumes uncertain. The current editors, Richard J. Davidson, PhD, and Klaus R. Scherer, PhD, will receive and consider manuscripts through December 31, 2005. Should 2006 volumes be completed before that date, manuscripts will be redirected to the new editor for consideration in 2007 volume.