Disability and forgiveness: An intervention to promote positive coping for persons with disabilities

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Disability and Forgiveness:
An Intervention to Promote Positive Coping for Persons with Disabilities
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Abstract

Disability is an event that forever changes a person’s life. Throughout the coping and adaptation process, many experience negative thoughts and feelings such as anger, anxiety, depression, and multiple forms of frustration. Some of these may be related to a disability, while others are by-products of the negative experiences, attitudes, and treatment of persons with disabilities. These include societal barriers and injustices and changes and losses that often accompany a disability. Counseling professionals can assist persons with disabilities in learning to improve their coping process by learning about approaches and, in this case, interventions to help promote healing and positive coping. In order to cultivate forgiveness, the present article clarifies the meaning of forgiveness and its relevance to persons with disabilities, discusses barriers to and benefits of forgiveness, and provides a rationale for developing the forgiveness intervention and information about the content and modules it contains. Implications concerning ways counselors can use the forgiveness intervention and future directions for study are also discussed.

Keywords: forgiveness, intervention, coping with disability, therapeutic approaches, counseling strategies, counseling
Learning Objectives

⇒ Increase professionals' knowledge of forgiveness, barriers to forgiveness, and benefits of forgiveness.

⇒ Improve professionals' understanding of the importance of forgiveness as it relates to the needs of people with disabilities.

⇒ Educate professionals about the proposed forgiveness intervention and its applicability to people with disabilities.

⇒ Discuss relevance of the intervention to professional practice and future directions for research.

Program Level: Advanced

Target Audience: counselors, psychologists, social workers, case workers, and allied helping professionals who work with persons with disabilities in a therapeutic setting
Disability is a term often viewed and associated with negative thoughts, beliefs, and feelings, particularly for people who do not understand it or how the experience affects people and their loved ones. Yet, for those who live with a disability, many learn to view it as simply a part of themselves along with a number of other personal and humanistic traits, rather than have it be the defining feature of who they are as a person (Stuntzner, 2012). According to the American with Disabilities Act (1990), a person with a disability is someone who “has a physical or mental impairment that limits one or more major life activities. Major life activities may include caring for oneself, performing manual tasks, walking, seeing, hearing, breathing, learning, and working” (Maki & Riggar, 2004, p. 7). Under the ADA, numerous disabilities are covered including neurological, musculoskeletal, physical, sensory, respiratory, cardiovascular, mental, psychological, and emotional conditions. Such a definition brings to our awareness that disability is a situation that can be quite complex, affecting people in numerous ways, and meaning different things to each individual. Furthermore, it implies that a person’s life has changed to the extent that there is a major alteration in personal functioning. This change in functioning, although not explicitly stated, is only one issue people with disabilities must address. Many others issues, concerns, and hurts often not seen or discussed, such as the way people are treated by others or society (i.e., negative societal attitudes, unemployment, lack of access to resources) (Smart, 2009) are just as important and relevant to a person’s coping process.

Disability is an event that forever changes peoples’ lives and that of their loved ones. Many not familiar with disability or the way it changes peoples’ lives may believe that positive coping and healing is about accepting and adapting to the condition. However, the coping and adaptation process is much more involved and often consists of multiple layers of hurt and offenses, which must be addressed. For instance, following a disability, people must learn to cope with the condition including: negative thoughts and feelings
such as self-criticism, grief, anxiety, depression, and blame (Boekamp, Overholser, & Schubert, 1996; Bulman & Wortman, 1977; Livneh & Antonak, 1997; Stuntzner, 2014a; Turner & McLean, 1989); changes in personal functioning or loss due to the disability (i.e., cognition, mental capacities, physical abilities); alterations in personal relationships (Crewe, 1999; Somers, 1992); negative attitudes, bias, and treatment from others and society (Smart, 2009; Stuntzner, 2012); and personal losses related to the presence of disability (i.e., lack of family or spousal support, changes in the person now that disability is present) (Stuntzner, 2015b). Similarly, some people may experience shattered world beliefs now that disability is present and anger towards oneself, others, or God (Lane, 1999).

As is evident, the possibilities for personal hurts, offenses, and changes are numerous following a disability. Whilst some persons with disabilities learn to cope with and move past the disability and its associated life changes, many do not. Some eventually figure it out but require more time and additional support (Marini, Glover-Graf, & Millington, 2012; Stuntzner, 2014b; Stuntzner & Hartley, 2014a). Compounding the situation, is the reality that few interventions exist to help persons with disabilities figure out how to cope, adapt, and heal (see Stuntzner & Hartley, 2014b). Similarly, there appears to be a void in the presence of forgiveness interventions specifically tailored to the needs, hurts, and personal experiences of persons with disabilities.

In an effort to explain forgiveness and its relevance to the coping, adaptation, and healing process of persons with disabilities, the authors discuss the meaning of forgiveness, barriers to and benefits of forgiveness, information about whether forgiveness is a skill or a process, relevance of forgiveness to disability, and the rationale for developing the forgiveness intervention. In the remaining sections, information is presented about the intervention’s development and format, professional considerations, and future directions for research.
Defining Forgiveness

Over the past 25 years, forgiveness has become an area of increasing interest in psychology, counseling, and the allied helping professions. Yet, it has not been fully embraced or applied to the healing process of persons with disabilities (Stuntzner, 2008; Webb, 2007). Since its conception and exploration throughout the literature, forgiveness has not been uniformly defined. However, many forgiveness scholars state that forgiveness is a skill or way of being that can be taught or cultivated and is a process that involves the reduction of negative thoughts, feelings, and behaviors and the increase of positive ones (Enright & Fitzgibbons, 2000, 2015; North, 1987; Thorensen, Luskin, & Harris, 1998). According to Enright (2001), forgiveness involves a change in how a person views, feels, and behaves towards offending person and such a change leads to an attitude of compassion and understanding. Learning to be more compassionate towards another person, particularly someone who has caused emotional or psychological pain and hurt, can lead to the practice of self-compassion and acceptance of oneself and situation (Stuntzner & Dalton, 2014).

Forgiveness has often been described as something that happens between two or more people (Enright, Freedman, & Rique, 1998). However, it is the authors' premise that in some instances there may be the need to forgive oneself (Enright, 1996), God, and the understanding that God did not cause something to happen (Stuntzner, 2008, 2015c), or events and situations, especially those that happen on a repeated basis (i.e., continued negative treatment of persons with disabilities by society) (Stuntzner, 2015c; Stuntzner & MacDonald, 2014b). In situations such as the last point mentioned, forgiveness may involve the inclusion of “multiple people or parties (i.e., agencies, organizations, legislative acts)” as these events continue to happen, are not the result of only one individual, and may be the representation of an environmental attitude or system within an organization or business (Stuntzner, 2015c, p. 15).
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Regardless of the working definition, professionals interested in facilitating forgiveness work among persons with disabilities are encouraged to explore the meaning and importance of forgiveness from their perspective and values (Stuntzner, 2015c). Conceptualizing forgiveness in a personal and meaningful manner can help people gain clarity about what forgiveness means and looks like to them and can be the start of learning to value and personalize the process of forgiveness. Having a personal investment in forgiveness can assist people in moving forward when they experience difficulties forgiving someone, as it is not easy to forgive when deep hurt has occurred.

Barriers to Forgiveness

Learning to forgive can be impeded or slowed by the presence of barriers. Barriers can be understood as those internal parts of ourselves that create additional hurdles and obstacles to address and overcome (Stuntzner, 2015b) prior to reaching the benefits and positive outcomes of forgiveness. People may not be aware of the ways they prevent themselves from forgiving. Thus, an important part of learning to forgive may involve the need to identify and reduce the barriers that exist (Stuntzner, 2015c).

Counselors working with persons with disabilities may find it beneficial to explore individualized and self-created barriers as a part of the forgiveness process. Understanding one’s own self-imposed barriers to forgiveness is important as they can complicate an already difficult situation, influence peoples’ thoughts, feelings, and behaviors, as well as their ability to heal (Stuntzner, 2015c). Common barriers that can impede peoples’ ability to forgiveness are discussed throughout the proposed forgiveness intervention and may include the following (see Stuntzner, 2015c, pp. 19-20 for full review):

• Holding in and suppressing negative feelings towards oneself and others (Kendall, 2007; Tutu & Tutu, 2004).
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- Blaming yourself, others, or God,
- Feeling self-righteous or filled with self-pity (Kendall, 2007),
- Thinking it is weak to forgive (Tutu & Tutu, 2014),
- Being afraid of what will happen if a person lets go of the hurt.
- Believing one cannot let go of the past.
- Feeling hopeless or apathetic.
- Waiting for another person to recognize the error of one's ways.

Benefits of Forgiveness

Counselors interested in exploring forgiveness with their clients may find it helpful to familiarize themselves with the benefits of forgiveness. Having a foundation of the ways it can improve peoples' lives is essential, because forgiveness is not always an easy task. Furthermore, some people may want to forgive, but remain skeptical it will help or that it is worth the effort. Some people may be stymied in their ability to forgive because they are unsure of what it is or how to achieve it. Still others are likely to “know” that forgiving helps but they have become detached or distant in their ability to truly remember the power and healing effect of forgiveness. For these reasons, counselors can approach forgiveness from an educational or enlightening perspective and assist individuals with disabilities in learning about the benefits of forgiveness and the ways it can help them.

Forgiveness can improve peoples’ lives in any number of ways. More specifically, forgiveness can help people reduce anger and resentment (McGary, 1989), decrease the tendency to hurt themselves or others (Fitzgibbons, 1986), reduce one’s desire for revenge against the offending person (Fitzgibbons, 1998), and change their adjustment to disability process so they experience fewer negative emotions as it relates to their
disability (Stuntzner, 2008). Forgiveness can also help people improve their relationships with themselves and others, enhance one’s satisfaction with life because they are no longer bound to the past, feel more serene and peaceful, and improve their ability to face and deal with their inner pain (Romig & Ventra, 1998). Forgiveness can also help people become stronger and more confident because through learning forgiveness, people realize they can do more than survive. Oftentimes, people discover they have the ability to heal and emerge as a new, and perhaps a better individual than previously imagined, and they learn to ascribe meaning to their experiences (Frankl, 1959; Smedes, 1996; Stuntzner, 2015c). This process can lead to much insight and personal growth.

**Understanding Forgiveness as a Skill and a Process**

Professionals who counsel persons with disabilities may wonder if forgiveness is a skill practiced or a process through which a person proceeds to achieve it. The authors propose that it may be either one, depending on how forgiveness is conceptualized and cultivated (Stuntzner, Dalton, & MacDonald, 2015). Much of the existing research by Enright and colleagues (Coyle & Enright, 1997; Enright et al., 1998; Enright & the Human Development Study Group, 1991; Hebl & Enright, 1993; Lee & Enright, 2014; Lin, 2001; Osterndorf, Enright, Holter, & Klatt, 2011; Stuntzner, 2008) describe forgiveness as a process since it takes time to forgive, and people learn skills through a series of phases or steps that can be applied to their hurts and offenses (Enright, 2001).

One well-studied forgiveness model developed by Enright and colleagues (1998) is a forgiveness process model that consists of four phases: the *Uncovering Phase*, the *Decision Phase*, the *Work Phase*, and the *Deepening Phase*. According to this model, during the *Uncovering Phase*, people learn to recognize negative thoughts and feelings that exist due to a lack of forgiveness and the impact of these on the individual. Following, people who want to pursue forgiveness may decide a change is needed within
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them for this to occur, thus, this inner awakening helps them make a decision or commitment to forgive (i.e., the Decision Phase). Next, in the Work Phase, people further examine their hurts and offenses in relation to the offender and work on re-framing the offender and the offense so they can release the negative thoughts and feelings and begin to replace them with more compassion, understanding, and caring. In the Deepening Phase, people learn how to bear the pain, understanding that they are not alone and isolated in their experience, and they find meaning in their experiences (Enright & the Human Development Study Group, 1991).

Forgiveness may also be conceptualized and practiced as a skill (Stuntzner et al., 2015a). From this perspective, forgiveness may be introduced or practiced as a part of an intervention that teaches coping skills. For example, Stuntzner and Hartley (2014b) developed a resilience-based skill intervention that teaches and cultivates specific skills found to be associated with resilience. One of the modules in this intervention discusses and addresses forgiveness as a skill that can be learned and, later, refined to help people be more resilient. Related is the notion that some people may learn specific skills such as self-compassion, mindfulness, or compassion and through the practice of these skills learn about forgiveness (Stuntzner et al., 2015a). Third and also of importance is the fact that some people may have difficulty forgiving. In these instances, it may be helpful to work with people on learning how to forgive themselves and to achieve some success in being able to do so before approaching forgiveness as a process or a way of life.

Application of Forgiveness to Disability

Forgiveness has rarely been considered, conceptualized, or applied to the context of disability. Yet, it appears to be very applicable to the experience of and to the needs of persons with disabilities (Stuntzner & Dalton, 2015). Disability is an experience or a situation that is often associated, directly or indirectly, with
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negative thoughts, beliefs, feelings, and events (i.e., blame, self-blame, criticism, anger, anxiety, depression, shame, loss of what was to be, negative treatment, bias, or discrimination). Throughout the coping process of learning to adapt to the disability and long after the moment has initially occurred, persons with disabilities are presented with events, people, and situations that challenge a person’s coping ability or, in many instances, reignite unpleasant thoughts, and feelings which must be addressed and worked through to maximize coping. Further, through the process of living with a disability, people often discover their worldview or beliefs about life, fairness, and God have been shattered and must be rebuilt. Other times, it may be the beliefs and views of their family that have been drastically altered and in needs of healing.

Forgiveness has much relevance for persons with disabilities, as there are multiple ways and contexts in which a person’s life has been affected, altered, or changed and to which forgiveness may be applied. More specifically, persons with disabilities may feel the need to forgive: (a) oneself, if the person feels he or she has done something to harm oneself in a destructive manner, or another (Luskin, 2002); (b) God or a higher being (Lane, 1999); (c) people who have committed offenses towards persons with disabilities and the offenses are directly related to the disability; (d) employers or societal offenses that convey a definite lack of acceptance (i.e., bias, stigma, lack of opportunities); (e) friends or family who cannot accept the disability and its associated changes; (f) collective hurts and offenses comprised of nameless faces which represent a series of hurtful, derogatory, and repeated events (Stuntzner, 2012; Stuntzner & MacDonald, 2014b); and (g) medical professionals who made a serious mistake and caused further injury to the person and the disability (see Stuntzner, 2015c for a full review). Similarly, persons with disabilities may report and discover a number of people and situations they need to forgive and several of the stated hurts and offenses may occur long after the initial onset of disability. For instance, Stuntzner (2008), in her forgiveness and coping study among persons with spinal cord injury, found that participants reported the need to forgive intimate partners and spouses, the person who caused the injury, employers, caregivers, oneself, friends of the same
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or opposite gender, and relatives. Additionally, some participants reported the need to forgive “other” people than those initially recognized as they went through the forgiveness intervention.

**Rationale for Forgiveness Intervention**

In the past decade or so, due to the influence of the Positive Psychology movement, there has been a burgeoning of interest and information on positive factors and traits associated coping and moving past difficult life events. Included throughout is the need to better understand issues such as forgiveness, compassion, self-compassion, mindfulness, gratitude, spirituality, resilience, and post-traumatic growth (see Marini & Chacon, 2012; McCullough, Root, Tabak, & Witvliet, 2009; Watkins, Van Gelder, & Frias, 2009) as well as the study of factors that promote positive well-being (i.e., forgiveness, attitude and outlook on life, and spirituality).

Additionally, the psychology profession and some allied professions have embraced the study and importance of forgiveness in helping people heal and move beyond serious hurts and offenses. Intervention forgiveness studies have been conducted among a number of populations including elderly women (Hebl & Enright, 1993), persons and families dealing with substance abuse issues (Lin, 2001; Osterndorf et al., 2011), partners of people who chose to have an abortion (Coyle & Enright, 1997), adult incest survivors (Freedman & Enright, 1996), persons with spinal cord injury (Stuntzner, 2008; Stuntzner, Hartley, Lynch, & Enright, 2015), and women with fibromyalgia who experienced childhood abuse (Lee & Enright, 2014), just to name a few. Forgiveness intervention studies have consistently demonstrated an ability to help people reduce negative emotions (i.e., depression, anger, anxiety) and promote positive emotions instead. Additionally, many studies indicate that forgiveness helps increase self-esteem (Enright & Coyle, 1998) and hope (Freedman & Enright, 1996), and affects adjustment to disability (Stuntzner, 2008; Willmering, 1999). More recently, research suggests that forgiveness may be a factor that improves peoples’
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health (Webb, Toussaint, Kalpakjian, & Tate, 2010) and is associated with important characteristics such as resilience (Farley, 2011).

Despite this increased study and interest in forgiveness, very few forgiveness intervention studies have been focused on persons with disabilities and their needs. Similarly, there appears to be a void of forgiveness interventions specifically tailored to the hurts and offenses that may be related to the presence of disability and the experiences of persons with disabilities. The focus of the intervention is tailored to address this void and the content provided throughout is directed at learning about forgiveness in the context of living with a disability.

Another point worthy of mention and as a key factor in the development of the proposed intervention, is participant data related to forgiveness and the desire of persons with disabilities to learn more about forgiveness. Stuntzner and MacDonald (2014a, 2014b) conducted two pilot studies on a 10-module resilience intervention for persons and women with disabilities. Participants were comprised of people living with “Post Traumatic Stress Disorder (PTSD), anxiety, bipolar, depression, fibromyalgia, chronic pain, lupus, narcolepsy, kidney failure, arthritis, and gout. Some participants lived with multiple conditions” (Stuntzner & Hartley, 2014, p. 8). Participants were exposed to forgiveness as a part of the modules and during the process, they indicated it would be helpful to learn more about forgiveness, and have more time to work on or explore it further. Additionally, some found it really difficult to forgive or work on it as a part of their healing process, although they indicated they wanted to. For this reason, the first author felt it was necessary and important to develop and empirically study a forgiveness intervention that was specifically tailored to the coping and adaptation needs and issues of persons with disabilities.
Format of Forgiveness Intervention

The proposed forgiveness intervention is a 141-page training manual and is comprised of seven logically and strategically ordered modules to guide facilitators and participants through the intervention. Due to the depth of the intervention, the authors are not able to cover it entirely throughout this article, but counseling professionals are welcome to contact the first author should they have questions or want to know more about the intervention. Additionally, the forgiveness intervention is intended to be offered at a future date following CEU approval, as a process or as separate forgiveness modules, which may be selected as training components. Information and modules will be available on the first author’s website, Healthier Living Following Disability.

While developing the proposed intervention, a thorough review of the forgiveness literature was conducted and matched with information and research that is associated with positive coping and adaptation following disability. Since forgiveness has rarely been applied to the needs and coping process of persons with disabilities and the minimal research and literature that is available suggests that forgiveness may be helpful (Stuntzner, 2008; Stuntzner et al., 2015a; Webb, 2007; Willmering, 1999), the authors felt it would be of value to consider and include information, content, and exercises that mirror a combination of the two areas and infuse components of spiritual practices (i.e., self-compassion, compassion, mindfulness, ways forgiveness improves a person’s life). Additional support for the need to include spiritual practices is discussed throughout the professional literature, given the fact that spirituality and spiritual practices are well-known factors found to improve the coping process of persons with disabilities.

Modules are ordered and presented in a sequential fashion where each one builds upon the previous module. This “building” and sequential process is to help lay the foundation for participants to learn about forgiveness, decide for themselves what it means to forgive, how they know they have forgiven, and its
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relevance to the needs of persons with disabilities. Additionally, participants are given the opportunity to identify barriers and issues that either prevent or inhibit their ability to forgive or, at a minimum, to release the hold their negative thoughts and feelings may have on them. They are also encouraged to explore meaning-making as it relates to their disability. All of these areas are covered in the first module and set the foundation of exploring forgiveness and its applicability to persons with disabilities before proceeding into the modules that follow. Also of importance is to note that the second module, as listed below, was initially developed to address specifically the needs of women with disabilities, as this is a particularly vulnerable and unattended population throughout research and society. Having said that, the cross-over between the needs of men and women with disabilities is vast, Thus, counseling professionals may still find much of the information useful and applicable to men, as well as to women. Collectively, the seven modules covered throughout the intervention are as follows (pp. 3 – 90):

1. Forgiveness and its Applicability to Disability

2. Women with Disabilities and their Experiences

3. Understanding the Benefits of Forgiving and the Costs of not Forgiving

4. Identifying if a Person is Ready and Willing to Forgive

5. Forgiveness Cultivation Strategies

6. Determining Personal Progress in Moving Towards Forgiveness

7. Review of the Skills and Modules for Future Practice

The forgiveness intervention was originally designed so that it may be presented as a group intervention, although counseling professionals may find it helpful to consider specific exercises when working with individuals and/or groups. The overall format of the intervention provides opportunities for
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people to learn, participate, share their own experiences, and receive psycho-educational instruction about:
(a) forgiveness; (b) forgiveness as it relates to the specific thoughts, feelings, and experiences of disability;
(c) self-assessment exercises to increase awareness of personal beliefs, feelings, and behaviors; (d) the
interrelationship between an individual’s thoughts, feelings, and behaviors and positive or maladaptive
coping (i.e., willingness to consider forgiveness vs. resistance); (e) selecting a focus or person to whom
they may want to apply forgiveness to; (f) exploration of the impact of forgiving versus not forgiving; (g)
identification if forgiveness is the right choice to pursue at this moment; (h) personal beliefs and expectations
about forgiveness and what a person hopes it brings to them; (i) forgiveness building skills and exercises (i.e.,
mindfulness, compassion, self-compassion, previously used skills that helped them forgive, weekly personal
goals and action plan activities); and (j) periodic assessment of personal progress made towards forgiveness.

At the conclusion of the intervention, participants have an opportunity to review comprehensively what they
have learned and to share their own narratives and personal story of the progress they feel has been made.
A part of this process may include identifying the positive changes they made within themselves, or those
others have noticed, sharing what they learned about forgiveness, identifying what was helpful and what was
not as a part of their forgiveness journey, followed by determining how they want to further their practice
and integration of forgiveness.

The proposed forgiveness intervention differs from other forgiveness approaches in that it exposes
and educates people to forgiveness in the context of living with a disability. Although other forgiveness
interventions exist (see Enright, 2001; Worthington, 2006), many are focused on helping people forgive when
hurt and offenses have occurred in a more humanistic, global sense. While these approaches are valid and
very useful, they do not understand disability or apply the concept of forgiveness to the experience of
disability which is often a multi-layered event that changes peoples’ lives in numerous ways.
Stuntzner’s Forgiveness Intervention (2015c) teaches people about forgiveness and its applicability to disability and the common hurts and offenses that occur while living with a disability. Each module is presented in a way that people have the opportunity to apply the information learned to their life with a disability and to their unique set of circumstances. Additionally, the intervention provides content and exercises more specifically geared towards women with disabilities and their unique set of experiences (i.e., Module 2). To date, existing forgiveness interventions do not appear to consider the potential differences in experiences and needs that occur for women or women with disabilities. Another way the forgiveness intervention differs from other approaches is in relation to some of the strategies used to explore and promote forgiveness. For example, each module contains self-assessment exercises that serve as an impetus for people to examine how well they are doing and coping in relation to each module topic. Furthermore, as a part of Module 5, Strategies to Promote Forgiveness, people are exposed to concepts and skills they can cultivate such as mindfulness, compassion, and self-compassion.

**Professional Implications for Practice**

Due to the magnitude of hurts and offenses often experienced by persons with disabilities, regardless of the disability type, the forgiveness intervention was developed for people living with various types of disabilities including physical, neurological, degenerative, mental, and emotional conditions. Counselors interested in exploring and teaching people with disabilities about forgiveness and its therapeutic value are encouraged to consider if the people they serve are ready and willing to pursue forgiveness and have the cognitive ability to complete the exercises. Although forgiveness is of value to everyone, and to anyone living with a disability, it is not an easy task or process to work on when deep hurt and offenses have occurred. For that reason, it is essential to work with people and determine if they are ready to forgive and do the work. Having said that, it is also important to have a sense if people have the mental and cognitive ability to
understand forgiveness and the proposed exercises to achieve maximum benefit. When this is not the case, counselors may want to consider ways they can tailor the information and exercises to meet their clients’ needs.

Counselors wanting to implement forgiveness therapy and interventions as a part of their practice are encouraged to increase their understanding of forgiveness, since this topic is not always easy for people to understand the magnitude and all that is involved. Counselors can enhance their understanding of forgiveness by attending training and seminars offered through their professional organization, conferences (i.e., ACA, Executive Summit), and by reading books (i.e., Forgiveness is a Choice: A Step-by-Step Process), reviewing self-study videos, and websites (i.e., www.internationalforgiveness.com/). Counselors may also contact the first author if they are interested in learning more about the proposed intervention and the possibility of continuing education credits (CEUs). Having a thorough understanding of forgiveness is essential, as it is a topic that is likely to look and be different for each individual. Thus, the more knowledge, information, and insight counselors have into forgiveness from multiple perspectives, the more comfortable they are likely to be in approaching it with the people they serve.

Future Directions

As indicated earlier, the presented forgiveness intervention is Phase 1 of the research process. Presently, the first author is in the course of getting ready to conduct an investigation and pilot-test the intervention among persons with disabilities. Phase 2 of the process is intended to examine its utility among individuals with disabilities who are a part of a combined gender group and among women with disabilities. The first study aims to acquire an understanding of the forgiveness intervention and how it helps persons with disabilities learn to forgive and improve their overall functioning and well-being (i.e., decrease negative thoughts and emotions). From this process, data can be collected to help determine if it adequately
addresses the specific needs and issues of persons with disabilities as these relate to forgiveness. Adjustments to various modules are required, as well as learning more about its effectiveness in helping people forgive. The second study that primarily focuses on the needs and forgiveness process of women with disabilities is of interest, given that much less is known about women with disabilities and their individual, personal, and coping needs than men. As a result, research and information are minimal and somewhat lacking when it comes to the personal and coping needs of women with disabilities (Nosek, 2012). Additionally, existing research suggests that women with disabilities are more willing to explore and participate in forgiveness studies compared to their male counterparts (see Rainey, Readdick, & Thyer, 2012). For this reason, it behooves the authors to consider initial and separate pilot-test studies comprised of mixed-gender and female participants. Participants should be recruited from agencies that serve persons with disabilities (i.e., Centers for Independent Living, Department of Vocational Rehabilitation Division, mental health agencies, and university services for students with disabilities) and the community as a whole.

The intended goal of the intervention is to determine if it serves persons with disabilities and provides them with a safe and secure platform to consider, explore, and cultivate forgiveness. This process is so that further studies are completed by specific groups such as persons with spinal cord injuries, post-traumatic stress disorder, veterans, and other persons with disabilities who feel they have been greatly offended and hurt. Hopefully, the proposed forgiveness intervention can be applied amongst people from ethnic minority groups as well. The collection of further information relating to the spiritual and/or religious beliefs of persons with disabilities is also important. As more information about forgiveness is collected, particularly pertaining to the relationship between people with disabilities and their needs, it is our hope that professionals in hospitals, treatment settings, vocational support programs, and the community can utilize and implement the forgiveness intervention in their work with persons with disabilities.
Conclusion

Forgiveness is highly applicable and relevant to people with disabilities and can be used as a means to reduce negative thoughts and feelings and to promote forgiveness and positive coping. Yet, forgiveness has been minimally studied among this group of individuals. Persons with disabilities who learn to forgive are likely to experience many positive benefits that can assist them in also improving their coping and adaptation abilities (Stuntzner, 2008) and quality of life. In an effort to assist professionals and persons with disabilities in learning more about forgiveness, its applicability to persons with disabilities, and ways to cultivate forgiveness, a seven-module forgiveness intervention has been developed. It is the authors’ hope that both parties can access and utilize the proposed forgiveness intervention to further the practice and implementation of forgiveness.
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CEU Questions

1. Disability is an event that forever changes peoples’ lives. When people experience a disability, there are many transgressions and offenses that occur and must be dealt with to improve a person’s coping process. Which of the following is not one of the ways forgiveness helps people with disabilities improve their functioning?
   a. Decreases anger, anxiety, and/or depression.
   b. Increases self-esteem.
   c. Affects changes in their adjustment to disability.
   d. Makes the offending person treat them nicer.

   Answer: D

2. People wanting to learn how to forgive sometimes experience obstacles in forgiving, and as a result are inhibited throughout their forgiveness process. All of the following but one are barriers to forgiveness mentioned in the article:
   a. Feeling self-righteous or filled with self-pity.
   b. Being able to let go of the past.
   c. Blaming yourself, others, or God.
   d. Waiting for the offending person to recognize the hurt they have caused you.

   Answer: B

3. Forgiveness is a way of approaching hurts and offenses experienced by persons with disability. Yet, it has rarely been applied to people with disabilities or their specific situations. Upon further review,
forgiveness has much relevance and applicability to people with disabilities. Some of the situations to which forgiveness may be applied and relevant for this population include:

a. People with disabilities sometimes have to work through feelings of blame, self-criticism, shame, or loss of what was to be.

b. People with disabilities may discover the need to forgive themselves or others.

c. People with disabilities notice they can improve their coping by learning to forgive employers or societal offenses that communicate the presence of bias, stigma, and discrimination.

d. People with disabilities may find they hold negative thoughts and feelings about medical professionals who make serious mistakes and/or have caused further injury.

e. All of the above.

Answer: E

4. The forgiveness intervention discussed throughout the article approached forgiveness as a skill that could be taught to persons with disabilities to help improve their coping abilities. Which of the following components were covered as components of the intervention?

a. Forgiveness as it relates to the experience of disability.

b. Exercises to help a person choose a focus or a person to forgive.

c. Forgiveness building strategies such as compassion, self-compassion, and mindfulness.

d. Self-assessment exercises to increase awareness.

e. B and C.
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f. All of the above.

Answer: F

5. Professionals were encouraged to learn more about forgiveness, as this can help them understand it more thoroughly from multiple perspectives. In an effort to help counseling and helping professionals gain an increased understanding of forgiveness, all but one of the following were recommended:

a. Attend conference and workshops about forgiveness.

b. Read books written by authors who discuss forgiveness.

c. Approach forgiveness with clients when the topic comes up and choose your options at that time.

d. Contact the first author about the forgiveness intervention if they are interested in possible CEUs.

e. Review self-study videos and websites that contain information about forgiveness.

Answer: C

"People become attached to their burdens sometimes more than the burdens are attached to them."

~George Bernard Shaw
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professor, Dr. Susan Stuntzner, on research pertaining to resiliency and coping. She has co-facilitated two resilience intervention studies with Dr. Stuntzner; one was among a mixed gender group and the other was a resilience intervention study for women with disabilities. Throughout these studies, one of the modules focused on spirituality and forgiveness. She hopes to continue research work on forgiveness, as well as in the areas of resiliency and compassion. Angela’s background and training position her well to work with persons with disabilities in a research, rehabilitation, and mental health counseling context.

“Our greatest glory is not in never falling, but in rising every time we fall.”

Confucius