Research Paper

Impact of forgiveness on depression in young adults

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ABSTRACT

Depression has the highest burden as it is the leading cause of disability worldwide in terms of the total number of years lost due to disability. Forgiveness is a character strength and the present study explores if there is a relationship between forgiveness and depression. For this purpose, 81 (38 males and 43 females) adults between the ages of 20-40 years were studied, of these 81 participants, 51 individuals did not have depression, 26 individuals were non clinically depressed, and 4 individuals were clinically depressed. The participants under study were found to be from various parts of the country, more specifically, the sample was taken from Delhi and NCR region; Jaipur, Rajasthan; Bangalore, Karnataka. Participants who were clinically depressed patients were taken from Sapandana Nursing Home, Bangalore. The researcher used Heartland's Dispositional Forgiveness Scale and Beck's Depression Inventory -II (BDI-II) to assess the level of forgiveness and the severity of depression among the participants, respectively. The findings of the present study revealed that Forgiveness and Depression have a negatively significant correlation. There are gender differences in the level of Forgiveness, men are likely to be more forgiving of themselves and situations than women. In regard to gender differences seen in Depression, women more likely to be Depressed than men. In terms of group comparison, there was a significant difference in the level of Forgiveness among individuals with no Depression and Individuals with Depression. However, no significant difference was obtained in the level of Forgiveness between individuals with Clinical and Non-Clinical Depression.

Keywords: Forgiveness, Depression, No Depression, Clinical Depression, Non Clinical Depression

Forgiveness is known to have productive advantages while serving some prosocial functions (Chung & Lee, 2014). It helps by replacing anger for individuals, relationships, and societies. Thus, benefiting us. (Burnette, Davis, Green, Worthington, & Bradfield, 2009). A few clinicians have identified the positive effects of forgiveness. It has been observed that forgiveness leads to a disappearance of anxiety, anger, depression, and obsessions after forgiveness (Enright & Fitzgibbons, 2000; Fitzgibbons, 1986: Hunter, 1978). Other researchers, argue, that lack of forgiveness leads to an increase in negative affect, causing increased depression and emotional instability, which may lead to mental illness in severe cases (Hong, Jin, Hynn, Bae, & Lee, 2009; Kim & Im, 2006).

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Research has shown that forgiveness training, reduces depression, increases hopefulness, decreases anger, improves spiritual connection, [and] increases emotional self-confidence. Another research showed that people who are more forgiving report fewer physical and mental health problems, and fewer physical symptoms of stress. (Luskin, 2002). On the other hand, people who are unforgiving are at a higher risk for heart disease, high blood pressure, and a score of other stress-related illnesses. Medical and psychological studies have also shown that a person holding on to anger and resentment are at an increased risk for anxiety, depression, and insomnia, and is more likely to suffer from high blood pressure, ulcers, migraines, backaches, heart attack, and even cancer. The reverse is also true. Genuine forgiveness can transform these ailments. When stress, anxiety, and depression are reduced, so are the accompanying physical disorders. (Worthington, 2007).

Depression is one of the most prevailing mental ailments among the population, it is estimated to affect 350 million people worldwide (WHO, 2012). Depressive disorders are known to have an early onset, often seen at a young age; reducing people's functioning and the symptoms are recurring, in nature, making depression the leading cause of disability worldwide in terms of the total number of years lost due to disability (DSM V, 2013; WHO, 2012). Depression is also one of the leading causes of disability among both men and women, the burden of depression is likely to be 50% higher for women than men (WHO, 2008; 2012). It has also been noted that depression is the leading cause of disease burden among females in high-income and low- and middle-income countries (WHO, 2008; 2012). Research from developing countries suggest that maternal depression may be a risk factor for poor growth in young children (Rahman et al, 2008). The identified risk factor suggests that maternal mental health in low-income countries could be responsible for a substantial influence on growth during childhood, thus having an impact on not just one generation but also the next. (WHO, 2012). Depression is a common mental disorder that is accompanied with depressed mood, loss of interest or pleasure in any or every activity, decreased energy or fatigue, feelings of guilt or low self-worth, disturbed sleep or appetite, and poor concentration. Moreover, depression may be coupled with symptoms of anxiety. These problems can become chronic or recurrent and lead to substantial impairments in an individual's ability to take care of his or her everyday responsibilities, thus, hampering, an individual's social, emotional, occupational and psychological functioning. (DSM V, 2013). In some very severe cases, depression can lead to suicide, making it a preventable cause of death. Almost 1 million lives are lost yearly due to suicide, which translates to 3,000 suicide deaths every day. For every person who completes a suicide, 20 or more may attempt to end his or her life (WHO, 2012).

Sample

For the purpose of this study, a mixed sampling technique was used by the researcher. A convenient and a purposive sampling method was used. The research design thus included a mixed sampling technique with survey method research design. The sample consisted of individuals, aged between 20-40 years, from various professions such as engineering, management, information technology, and medicine. The sample consisted of literate individuals. The researcher attempted to study a total of 81 individuals; 38 males and 43 females. Among this sample, 51 individuals did not have depression, 26 individuals were non-clinically depressed, and 4 individuals were clinically depressed. Participants of the study came from affluent families and were from different parts of the country. The participants were found to have natives in Delhi and NCR region; Jaipur, Rajasthan; Bangalore, Karnataka. The sample of clinically depressed patients was taken from

Sapandana Nursing Home, Bangalore. A special permission from the hospital as well as the patient was taken to carry out the assessments.

Inclusion Criterion
- The age range of the participants will be 20-40 years.
- The participants of the study should provide consent.
- The participants of the study should be literate.

Exclusion Criteria
- Individuals below 20 years of age or above 40 years of age.
- Individuals not consenting to the study.
- Individuals with other psychiatric conditions.
- Illiterate individuals.
- Other genders.

METHODOLOGY

Objective of the Study
1. To identify if individuals who are more forgiving show lower symptoms of depression.
2. To identify if there are any gender differences for the same.
3. To identify if there exists any difference in level of forgiveness for people who are not depressed, non-clinically depressed or clinically depressed.

Hypothesis of the Study
H1: There is a significant relationship between forgiveness and depression.

H2: There is no significant level of difference in the degree forgiveness among men and women.

H3: There is no significant level of difference in the severity of depression among men and women.

H4: There is a significant difference in the level of forgiveness among individuals with no depression, individual with clinical depression and individuals with non-clinical depression.

Instruments
1. **Heartland Forgiveness Scale (HFS)** The participant's self-forgiving attitude was assessed using translated version of The Heartland Forgiveness Scale (Thompson et al., 2005). The scale was first translated into Hindi and retranslated into English before being administered for actual data collection. The Heartland Forgiveness Scale consists of 18 items, with three subscales consisting six-items each assessing forgiveness of self, others, and situations. Only the subset of six items meant for self-forgiveness was used in this study. Each item comprised seven-point Likert scale (1 = Almost always false of me; 7 = Almost always true of me). The participants were instructed to think about how they have responded to themselves when they have done something wrong. The wording of the items were generally in the direction of higher scores meaning more self-forgiveness, (e.g. With time I am understanding of myself for mistakes I've made and Learning from bad things I've done helps me get over them), and three of these items were reverse-scored so that a higher total score would indicate greater self-forgiveness. The Cronbach's alpha was reported to be .805.

2. **Beck's Depression Inventory II (BDI-II):** The BDI-II has become the most widely used psychometric measure of depression severity (Beck et al., 1996). The BDI-II is used to assess the severity of depressive symptoms in clinical populations and is commonly used to detect the presence of depression in general population samples. BDI-II is a 21-item questionnaire using a 4-point scale. The scores range as minimal range (0 - 13); mild depression (14 - 19); moderate depression (20 - 28) and severe depression (29 - 63). The recommended sensitivity and specificity of the scale is 88.2% and 92.1% (Smarr & Keefer, 2011).

Procedure

The aim of the present study was to identify if individuals who are more forgiving also showed lower severity of depression. The study also attempts to find gender differences for the same in the Indian population. The Heartland's Forgiveness Scale along with Beck's Depression Inventory – II, was administered on the participants to assess their individual levels of forgiveness and severity of depression, respectively. The selected age range of the participants was between 20-40 years. Before the collection of data, an informed consent was taken from the participants. The data for participants with no depression and non-clinical depression was collected via the use of face to face interaction, referrals through the college counsellor and some responses using Google forms were also taken. Data for the clinically depressed participants was collected from Spandana Nursing Home, Bangalore. Individuals who were diagnosed with depression were taken in this group, both inpatient and outpatient groups were included as participants. Individuals with co-morbid conditions were ignored. A special permission from the hospital as well as the patient was taken to carry out the assessments. A total of 12 responses were rejected for not meeting the inclusion criteria. 5 of which were of the individuals who showed no depression or were non clinically depressed. The other 7 responses were rejected due to not meeting the selected age range and showing comorbidity with another psychiatric condition. Once the data was collected, scoring was done manually. Later, IBM SPSS version 20 was used to analyze data and make inferences from the study.

RESULTS

The objective of the present paper was to assess and analyse if there exists a significant relationship between Depression and Forgiveness among young adults. The results of the present study are discussed below.

Table 1: Shows the Assessment for the Normal Distribution of Data using Shapiro-Wilk Test of Normality

Variables	Statistic	df	Significance
Depression	.942	81	0.001
Forgiveness	0.981	81	0.287

Shapiro- Wilk test is a standard test which is used to assess the normality of data. It can be seen from table 1 that the data for Depression is not normally distributed since its significance value is lower than 0.05 level of significance. On the other hand, the data for Forgiveness is distributed normally as its significance value is greater than 0.05 level of significance.

Table 2 Shows the Spearman Correlation Values for Depression and Forgiveness, Forgiveness of Self, Forgiveness of Others and Forgiveness of Situation

Variables	1	2	3	4	5
Depression (1)	1.00	-.474**	-.391**	-0.167	-.443**
Forgiveness (2)	-.474**	1.00	.793**	.609**	.836**
Forgiveness of Self (3)	-.391**	.793**	1.00	.311**	.547**
Forgiveness of Others (4)	-0.167	.609**	.311**	1.00	.293**
Forgiveness of Situation (5)	-.443**	.836**	.547**	.293**	1.00

***Significant at 0.05 and 0.01 level*

Spearman Correlation value was obtained to assess and understand the relationship between Depression and Forgiveness. A relationship between Depression and dimensions of Forgiveness was also established. It can be observed from Table 2 that there exists a significant negative correlation between Depression and Forgiveness (r: -.474**; N: 81; $p < 0.01$). Table 2 also depicts that Depression and Forgiveness of Self has a significant negative correlation (r: -.391**; N:81; $p < 0.01$). Through the table 2, it can also be observed that there exists a significant negative correlation between Depression and Forgiveness of Situation (r: -.443**; N:81; $p < 0.01$).

Table 3 Shows the Overall Scores of the Normal Distribution of Forgiveness on Independent Sample t-test.

Variables	Gender	N	Mean	Standard Deviation	t-value	df	Significance
Forgiveness	1 2	38 43	89.79 77.89	12.739 12.918	4.134	79	0.000
Forgiveness of Self	1 2	38 43	31.05 26.00	5.019 6.287	3.962	79	0.000
Forgiveness of Others	1 2	38 43	29.53 27.95	5.545 6.268	1.189	79	0.238
Forgiveness of Situation	1 2	38 43	28.95 24.02	5.291 5.878	3.942	79	0.000

The independent sample t-test was conducted to assess for gender differences in Forgiveness and the dimensions of Forgiveness. As seen from table 3, there exists a significant difference in Forgiveness between Men (Gender = 1) and Women (Gender = 2). It can be noted from table 3 that men are more forgiving than women. It can also be seen that there exists a significant difference in Forgiveness of Self and Forgiveness of Situation between Men (Gender = 1) and Women (Gender = 2). Through the table, it can be seen that Men are likely to be more forgiving of themselves than Women. Similarly, they are likely to be more Forgiving of the Situation than Women.

Table 4: Shows the Values of Mann - Whitney U for Depression Scores

	Forgiveness	Depression
Mann- Whitney U	396.500	0.000
Wilcoxon W	1342.500	741.000
Z	-3.981	-7.737
Asymp. Sig. (2-tailed)	0.000	0.000

Table 4 shows data and compares scores of Depressions between men and women. As seen, there exists a significant difference between the groups with the value being .000 ($p < 0.05$).

The table also compares the data for Forgiveness between men and women. The value being .000 (p <0.05)

Table 5: Shows the Kruskal- Wallis Scores across three groups: Group with No Depression, Non-Clinical Depression and Clinical Depression

Variables	Groups	N	Mean Rank	Chi- Square	p
Forgiveness	No Depression Non Clinical Depression Clinical Depression Total	46 31 4 81	50.65 29.08 22.38	18.222	0.000
Forgiveness of Self	No Depression Non Clinical Depression Clinical Depression Total	46 31 4 81	48.83 32.54 16..63	13.461	0.001
Forgiveness of Others	No Depression Non Clinical Depression Clinical Depression Total	46 31 4 81	44.67 37.27 27.63	3.207	0.201
Forgiveness of Situation	No Depression Non Clinical Depression Clinical Depression Total	46 31 4 81	49.72 28.65 36.50	15.108	0.001

Kruskall-Wallis test is used to find whether there exists a significant difference among the groups. It can be observed from the table 5 that the groups under investigation were groups with No Depression, groups with Non-Clinical Depression and groups with Clinical Depression. Table 5 shows that there exist differences in overall Forgiveness, Forgiveness of Self and Forgiveness of Situation, among groups with p- values being 0.000, 0.001, and 0.001, respectively. All p- values being < 0.05, indicating difference among groups.

Table 6: Shows Mann-Whitney Scores for Group with No Depression and Group Non-Clinical Depression

Variables	Groups	N	Mean Rank	Sum of Ranks	Mann- Whitney U	p
Forgiveness	No Depression Non-Clinical Depression Total	46 31 77	47.32 26.66	2176.50 826.50	330.50	0.000
Forgiveness of Self	No Depression Non-Clinical Depression Total	46 31 77	45.29 29.66	2083.50 919.50	423.50	0.003
Forgiveness of Others	No Depression Non-Clinical Depression Total	46 31 77	41.85 34.77	1925.00 1078.00	582.00	0.173
Forgiveness of Situation	No Depression Non-Clinical Depression Total	46 31 77	47.32 26.66	2176.50 826.50	330.50	0.000

Mann Whitney Test was used to locate which groups differ. Table 6 shows data and compares scores across groups No Depression and group with Non- Clinical Depression. As seen from the table 6, there exists a significant difference between the groups with the p-value being .000 (p < 0.05) for level of Forgiveness. The dimensions of Forgiveness were also accounted for. It can also be interpreted that there exists a difference on level of Forgiveness of Self between groups with the p- value being 0.003 (p <0.05) as well as on level of Forgiveness of Situation between groups with the p- value being 0.000 < 0.05.

Table 7: Shows Mann-Whitney Scores for Group with Non- Clinical Depression and Group with Clinical Depression

Variables	Groups	N	Mean Rank	Sum of Ranks	Mann-Whitney U	p
Forgiveness	Non-Clinical Depression	31	18.42	571.00	49.00	0.500
	Clinical Depression	4	14.75	59.00		
	Total	35				
Forgiveness of Self	Non-Clinical Depression	31	18.87	585.00	35.00	0.161
	Clinical Depression	4	11.25	45.00		
	Total	35				
Forgiveness of Others	Non-Clinical Depression	31	18.50	573.50	46.50	0.420
	Clinical Depression	4	14.13	56.50		
	Total	35				
Forgiveness of Situation	Non-Clinical Depression	31	17.63	546.50	49.00	0.500
	Clinical Depression	4	20.88	59.00		
	Total	35				

Table 7 shows data and compares scores across groups with Non- Clinical Depression and group with Clinical Depression. As seen from the table 7, there exists no significant differences between the groups with the p-value being p > 0.05 on the level of Forgiveness. The dimensions of Forgiveness were also accounted for. It can be observed from the table the there exists no significant difference between groups on the dimensions of Forgiveness since the indicated p- values are > 0.05.

Table 8: Shows Mann-Whitney Scores for Group with No Depression and Group with Clinical Depression

Variables	Groups	N	Mean Rank	Sum of Ranks	Mann-Whitney U	p
Forgiveness	No Depression	46	26.84	1234.50	30.50	0.028
	Clinical Depression	4	10.13			
	Total	50				
Forgiveness of Self	No Depression	46	27.03	1243.50	21.50	0.011
	Clinical Depression	4	7.88			
	Total	50				
Forgiveness of Others	No Depression	46	26.33	1211.00	54.00	0.173
	Clinical Depression	4	16.00	64.00		
	Total	50				
Forgiveness of Situation	No Depression	46	26.14	1202.50	62.50	0.290
	Clinical Depression	4	18.13	72.50		
	Total	50				

Table 8 shows data and compares scores across groups with No Depression and group with Clinical Depression. As seen from the table 8, there exists a significant difference between the groups with the p-value being 0.028 (p < 0.05) for level of Forgiveness. The dimensions of Forgiveness were also accounted for. It can also be interpreted that there exists a difference on level of Forgiveness of Self between groups with the p- value being 0.011 <0.05.

DISCUSSION

The primary aim of the present study was to assess if there exists a significant relation between depression and forgiveness among young adults, making it the first hypothesis under investigation. From the analysis of the results, it can be inferred that there is a significant negative Correlation between the levels of forgiveness and the severity of depression among adults as seen in table 2. This indicates that, on one hand, the individuals who are high on forgiveness are less likely to be depressed. On the other hand, we can see that individuals who are less forgiving are likely to be more depressed. The current finding can be supported by previous studies. It was seen that individuals who are more forgiving are less likely to experience negative affect such as low mood and are also less likely to attempt suicide than those who are less forgiving (Sansone, Kelley, Forbis, 2011). In another study which was conducted on 423 adults, it was found that forgiveness of oneself and others was negatively correlated, and seeking forgiveness was positively correlated with depression. Thereby, indicating that individuals who are over critical of themselves and are less forgiving of themselves are more likely to be affected by depression or symptoms of depression than those who are not overly critical of themselves and can therefore forgive themselves and others when the situation demands (Toussaint and Colleagues, 2008). A study conducted on 200 married females in the city of Hamedeyhe Ahvaz revealed that among married couples, marital forgiveness often acts as a mediating factor between self-compassion and depression. Thereby, decreasing symptoms depression as marital forgiveness was found to be an effective coping. (Rajabi, Hariavi, Taghi Pour, 2017). A study conducted on 773 adolescents in Italy also revealed that dispositional forgiveness lowers depression and is also seen as a protective factor against depression among adolescents. The study also stated that dipositional forgiveness helps reduce angry among adolescents by helping them effectively manage anger. (Barcaccia, Pallini, Pozza, Milioni, Baiocco, Mancini and Vecchio, 2019).

The second hypothesis states that there exist no significant gender differences in the level of forgiveness among men and women. The obtained t value obtained was found to be 4.134 (table 3). This t value was found to be significant, indicating that there is a significant gender difference in the level of forgiveness among males and females. Our current finding revealed that males are likely to be more forgiving than females. It was also seen that men are more forgiving of themselves and the situations. However, the literature review, suggests that there are no apparent gender differences in level of forgiveness and that men showed more empathy than women (Webb and Toussaint, 2005). This was found to be contradictory to our current findings. Another study conducted on 80 school teachers in Punjab, India, suggests that there appears to be significant gender differences among men and women on their levels of forgiveness, gratitude and spirituality indicating that females tend to be higher on forgiveness and spirituality while men are found to shows higher levels of gratitude. (Khan and Singh, 2013). A study conducted on a mixed sample of community dwellers and college students, revealed that older women tend to be more forgiving than men. The study also revealed that younger women showed higher levels of empathy towards their transgressor than younger men. (Swickert, Robertson, Baird, 2015). A study which was

conducted on a on 540 Spanish college students suggests that there are gender differences in avoiding one's transgressor and in revenge seeking behaviors. Men are likely to be more vengeful towards their transgressor and even engage in avoiding their transgressors than women, with men being significantly different in the trait of agreeableness and thus being less forgiving of the transgressor than women. The study even stated that the personality trait of agreeableness governed this behavior. (Rey, Lourdes, & Extremera, Natalio, 2016). Thus, the existing literature shows some mixed results. Our present finding can therefore be considered unique and of importance to the current Indian Population. The third hypothesis of the present study indicated that there are no significant gender differences in the severity of depression in young adults. The scores of the sample on Depression were not normality distributed. Thus, a Mann Whitney U test was used to find out the results of the current hypothesis. The results revealed that there exists a significant degree of gender difference between men and women in their severity of Depression. It can be understood from the analysis of results that females are more likely to be depressed than males. Our findings can be supported by present literature. A study conducted on a sample of 68 individuals in the Indian population revealed that females varied across men in symptoms of Depression, in the sense that, they were more likely to experience a perceived sense of failure along with social withdrawal than men. Men also differed in their symptom presentation, they were more likely to experience anhedonia, loss of pleasure in activities along with higher perceived functional impairment. However, it was also indicated that men and women showed equal levels of recurrent thoughts of death. (Biswas and Khess, 2013). Another study conducted on the Indian Population, revealed that women are more likely to experience depression than men when they are exposed to long term stresses. The study also stated that men are likely to show higher levels of impairment than women in social and occupational functioning than women when depressed. Females also showed higher levels of suicide attempts if they were more severely depressed and even showed lower levels of functioning if the depression was left untreated. (Deshpande, 2014). A study conducted in Singapore on patients of Major Depressive Mood Disorder, stated that the disorder was more prevalent in divorced or separated men than in women, it also indicated that widowed women are more likely to be depressed. (Louosa Picco, MPH, Mythily Subramaniam, Show Ann Chong, 2017). The fourth hypothesis of the present study indicated that there is a significant difference in the level of forgiveness among individuals with no depression, individuals with clinical depression and individuals with non-clinical depression. The results of the study indicated that the there was a significant difference among individual with no depression and individuals with clinical depression; no depression and individuals with non-clinical depression. The analysis also stated that there exists no significant difference in the level of forgiveness among individuals with non-clinical depression and clinical depression. The results have found support in the current literature. A study on 423 adults between 18 years and older, revealed that forgiveness of self and that of others was negatively correlated with the symptoms of depression. The study also stated that seeking forgiveness was positively correlated with depression in adults, the researchers also found that hopelessness was a mediating factor between forgiveness of self, forgiveness and others and depression. Hopelessness was thus associated with forgiveness of self and forgiveness of others. (Toussaint, Williams, Musicik, Everson- Rose, 2008). In a study conducted in Iran among three groups of individuals, a group with no depression a group with non-clinical depression and a group with clinical depression, were compared on their levels of forgiveness. It was revealed by the researcher that that there exists a significant difference in the levels of forgiveness between individuals without depression and individuals with depression. The study also indicated that there was no significant difference between non-clinical depressed and clinical depressed group in forgiveness and concluded that forgiving others protects

people against the negative effect of anger, hatred and revenge and prevents them from becoming depressed. (Fatemeh Fayyaza, Mohammad Ali Besharat, 2011).

In regard to the hypotheses testing, H1: There is a significant relationship between forgiveness and depression, the hypothesis is accepted as the correlation value is found to be of significance. H2: There is no significant level of difference in the degree forgiveness among men and women, the hypothesis is rejected as gender differences were found within groups**.** H3**:** There is no significant level of difference in the degree of depression among men and women, the hypothesis is rejected as there appears to be a significant gender difference between the two groups**.** H4: There is a significant difference in the level of forgiveness among individuals with no depression, individual with clinical depression and individuals with non-clinical depression, the hypothesis is accepted as there is a significant difference between these groups.

CONCLUSION

From the above discussion, it can be inferred that, males and females who score high on Depression, obtain lower scores on forgiveness. The data analysis reveals that individuals who have high forgiveness of self and situations, are found to be less depressed than those who are not self-forgiving or forgiving of the situations that occur, indicating that they are likely to be over critical of themselves. The study also indicates that there exists a significant gender difference among men and women in their levels of forgiveness. It was found that men are more forgiving of themselves and the situation than women. Women were also found to be more depressed than men according to the current study. The revealed that individuals with no depression, non-clinical depression and clinical depression vary in their levels of forgiveness. Individuals with no depression were found to be more forgiving than individuals with depression, whether clinical or non-clinical, suggesting that individuals with non-clinical and clinical depression do not vary in their levels of forgiveness. Therefore, the study suggests that forgiveness can be a protective factor for individuals which can help them fight against depression and its symptoms. As there was a significant difference among individuals with no depression and individuals with depression on their levels of forgiveness of themselves and the situation, it can also be understood that depression may be prevented if individuals are provided with forgiveness training so they are more forgiving of themselves and the situation around them. Thereby, increasing their overall levels of forgiveness, thus promoting positive affect.

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