

University of Louisville

ThinkIR: The University of Louisville's Institutional Repository

Electronic Theses and Dissertations

8-2017

Self-forgiveness in Japanese adolescents.

Tetsuo "Ted" Sato
University of Louisville

Follow this and additional works at: <http://ir.library.louisville.edu/etd>



Part of the [Counseling Psychology Commons](#)

Recommended Citation

Sato, Tetsuo "Ted", "Self-forgiveness in Japanese adolescents." (2017). *Electronic Theses and Dissertations*. Paper 2756.
<https://doi.org/10.18297/etd/2756>

This Doctoral Dissertation is brought to you for free and open access by ThinkIR: The University of Louisville's Institutional Repository. It has been accepted for inclusion in Electronic Theses and Dissertations by an authorized administrator of ThinkIR: The University of Louisville's Institutional Repository. This title appears here courtesy of the author, who has retained all other copyrights. For more information, please contact thinkir@louisville.edu.

SELF-FORGIVENESS IN JAPANESE ADOLESCENTS

By

Tetsuo “Ted” Sato
B.S. Indiana University, 2005
M.S. California State University, 2010

A Dissertation Submitted to the Faculty of
the College of Education and Human Development of University of Louisville
in Partial Fulfillment of the Requirements for the Degree of

Doctor of Philosophy in Counseling & Personnel Services

Department of Counseling and Human Development
University of Louisville
Louisville, Kentucky

August 2017

SELF-FORGIVENESS IN JAPANESE ADOLESCENTS

By

Tetsuo “Ted” Sato
B.S., Indiana University, 2005
M.S., California State University, 2010

A Dissertation Approved on

July 31, 2017

By the Following Dissertation Committee:

Dissertation Chair
Mark M. Leach, Ph.D.

Dissertation Co-Chair
Hongryun Woo, Ph.D.

Committee Member
Patrick Pössel, Dr. rer. soc.

Committee Member
Brad Shuck, Ed.D.

ACKNOWLEDGEMENTS

I would like to express my sincere appreciation to my advisor and dissertation chair, Dr. Mark Leach, for the past 5 years of inspiring me and providing directions to be a psychologist. I also want to thank my committee co-chair, Dr. Hongryun Woo, and members, Dr. Patrick Pössel and Dr. Brad Shuck, for their feedback and encouragement. I was very fortunate to have very supportive and inspiring cohorts and friends in the graduate program. Lastly, I would like to express my greatest appreciation and love to my parents and siblings, who were willing to send me to the U.S. to study psychology and have supported me in a variety of ways.

ABSTRACT

SELF-FORGIVENESS IN JAPANESE ADOLESCENTS

Tetsuo “Ted” Sato

July 31, 2017

The literature of forgiveness has been proliferated the last two decades (Davis et al., 2015b), but it has primarily focused on forgiveness of others and the research of self-forgiveness has just increased in recent years (Worthington & Langberg, 2012). Woodyatt and Wenzel (2013a) proposed a process-oriented approach of self-forgiveness while considering three possible responses to the self (i.e., genuine self-forgiveness, pseudo self-forgiveness, and self-punitiveness) after interpersonally offending others. Self-forgiveness among children and adolescents and in Japanese culture was discussed. The association of self-forgiveness to depressive and anxiety symptoms, and culturally and developmentally unique factors (i.e., fear of negative evaluation and social support) were also explained. The purpose of the current study is to examine how each response of the process-oriented approach of self-forgiveness may predict depressive and anxiety symptoms among Japanese high school students and how culturally and developmentally unique factors are related to self-forgiveness and psychological symptoms. High school seniors (N = 151) in Japan participated in this survey study. The path analysis did not show that genuine self-forgiveness significantly predicts less anxiety and depressive symptoms, but self-punitiveness was significantly related to greater levels of those symptoms. Also, fear of negative evaluation was shown to have mediation effects on

those relationships. Unexpectedly, those who have a high level of pseudo self-forgiveness tended to have less depressive symptoms, and social support positively predicted severe depressive symptoms. Clinical implications regarding psychological symptoms of Japanese adolescents are discussed, and limitations and future directions of self-forgiveness are explained while considering collectivistic culture and its effect on self-forgiveness.

TABLE OF CONTENTS

CHAPTER I: INTRODUCTION.....	1
Forgiveness of Others.....	1
Psychological Benefits and Distress Regarding Forgiveness of Others.....	3
Factors Facilitating Forgiveness of Others.....	4
Self-forgiveness.....	6
Process-oriented Approach of Self-forgiveness.....	9
Self-forgiveness and Taking Responsibility.....	11
Self-forgiveness and Shame and Guilt.....	15
Self-forgiveness in Children and Adolescents.....	18
Self-forgiveness in Japan.....	20
Self-forgiveness and Anxiety and Depression.....	23
Depression and Anxiety in Children and Adolescents.....	26
Fear of Negative Evaluation.....	28
Relationship between Self-forgiveness and Fear of Negative Evaluation.....	29
Relationship between Fear of Negative Evaluation and Anxiety..	31
Social Support.....	34
Relationship between Self-forgiveness and Social Support.....	36
Relationship between Social Support and Depression.....	38
Current Study and Hypotheses.....	43

CHAPTER II: METHODS.....	46
Participants.....	46
Data Collection.....	47
Measures.....	47
Demographic Questions and Offensive Interpersonal Event.....	47
Translating Measures.....	48
Process-oriented Approach of Self-forgiveness.....	48
Anxiety and Depression.....	49
Fear of Negative Evaluation.....	50
Social Support.....	51
Data Analysis.....	52
CHAPTER III: RESULTS.....	55
Preliminary Analyses.....	55
Path Analysis.....	55
CHAPTER IV: DISCUSSION.....	62
Clinical Implications.....	69
Recommendations for School Counselors and Techers.....	72
Limitations and Future Directions.....	73
Summary.....	77
REFERENCES.....	78
CURRICULUM VITAE.....	93

LIST OF TABLES

TABLE	PAGE
Table 1: Shapiro-Wilk Test of Normality.....	53
Table 2: Bivariate Correlations, Means, Standard Deviations, and Ranges.....	56
Table 3: Removed Not-Specified and Predicted Paths.....	57
Table 4: Significant Not-Specified and Predicted Paths in the Final Path Model.....	60

LIST OF FIGURES

FIGURE	PAGE
Figure 1: The Proposed Path Model of Self-Forgiveness on Anxiety and Depression....	45
Figure 2: The Final Path Model of Self-Forgiveness on Anxiety and Depression.....	59

CHAPTER I: INTRODUCTION

In this introduction, first, forgiveness of others, its psychological benefits, and factors facilitating forgiveness of others are briefly explained to provide a direction of how the research of state self-forgiveness, rather than dispositional self-forgiveness, is important to understand the process to achieve self-forgiveness. Then self-forgiveness and a relatively new approach (i.e., process-oriented approach) to self-forgiveness are discussed through responsibility taking and feelings of shame and guilt. Since the main purpose of the current study is to assess adolescents' responses after interpersonally offending others in collectivistic culture, self-forgiveness in youth and self-forgiveness in Japan are explored. Consequences of self-forgiveness may influence psychological well-being; therefore, anxiety and depressive symptoms related to self-forgiveness are investigated. Lastly, fear of negative evaluation and social support as culturally and developmentally important variables, and their relationships to self-forgiveness and psychological symptoms are discussed.

Forgiveness of Others

Forgiveness literature has been proliferated the last two decades (Davis et al., 2015b) and focused on forgiveness of others (interpersonal forgiveness) and self-forgiveness (Hall & Fincham, 2005). Also, forgiveness can be categorized into dispositional and state (specific transgression) forgiveness (Eaton, Struthers, & Santelli, 2006). Both dispositional and state forgiveness of others were framed in an interpersonal offense, where both victims and perpetrators of wrongdoing are involved. Broadly

speaking, research in dispositional forgiveness of others focuses on general tendencies to forgive others and tends to relate psychological benefit of forgiving others (cf. Webb, Colburn, Heisler, Call, & Chickering, 2008), while research in state forgiveness of others focuses on a specific offense and tends to address its mechanism and the factors promoting victims' forgiveness in addition to psychological benefit of victims who forgive perpetrators (cf. Exline & Zell, 2009). Forgiveness of others has been identified as a key role to maintain close relationships, and forgiveness in friendship is especially important due to the nature of voluntary relationships (Finkel, Rusbult, Kumashiro, & Hannon, 2002). Studies have shown that forgiveness of others is not associated with forgetting the offenses or pardoning the offender, and forgiving is not erasing the betrayal from memory nor reconciling with the offender (Enright, Gassin, & Wu, 1992; Finkel et al., 2002).

The forgiveness literature has provided some definitions of forgiveness of others; a commonly agreed upon definition of forgiveness of others is "intraindividual prosocial change toward a perceived transgressor situated within a specific interpersonal context" (McCullough, Pargament, & Thoresen, 2000. p. 9). Victims who forgive their perpetrators become motivated to act prosocially toward them by reconciling their differences, working together on interdependent tasks, and admonishing ill will. On the other hand, victims who fail to forgive their perpetrators become motivated to act by avoiding them or even a willingness to take revenge (Fehr, Gelfand, & Nag, 2010). Forgiveness enables individuals to display positive behavior, cognition, and affection in place of negative reactions associated with transgressions (Al-Mabuk, Enright, & Cardis, 1995; Enright et al., 1992).

Psychological Benefits and Distress Regarding Forgiveness of Others

Psychological benefit of forgiveness of others has shown in a variety of studies using both dispositional and state forgiveness of others. Lawler-Row and Piferi (2006) provided some insight into how dispositional forgiveness was related to psychological benefits through survey data. Their result showed that highly forgiving participants reported less depression, less stress, greater subjective well-being, and greater psychological well-being. Some longitudinal studies also assessed the relationship between forgiveness and psychological distress, including depression. Toussaint, Williams, Musick, and Everson-Rose (2008) conducted a longitudinal study to examine dispositional forgiveness and its differential associations with depression in adults. After controlling for religiousness/spirituality and demographics, their analyses on data from a nationally representative sample of adults in the U.S. showed that women who reported greater forgiveness of others were more likely to have decreased odds of developing depression. Orcutt (2006), using a longitudinal design, examined the relationship between state (i.e., offense-specific) forgiveness of interpersonal transgression toward an offender and one's distress in a sample of female undergraduate students. The analysis revealed that state forgiveness toward the offender was a significant predictor reducing psychological distress including depression, anxiety, and stress, even after controlling for the initial impact of symptom severities. Both dispositional and state forgiveness of others are similarly beneficial to psychological well-being of those who are interpersonally offended.

Factors Facilitating Forgiveness of Others

Both interpersonal and intrapersonal factors facilitate intentions to forgive offenders. Literature of state forgiveness of others, rather than dispositional forgiveness of others, provides some key elements facilitating one's forgiveness to the perpetrators in a specific offense. For example, relationship commitment provides a positive motivation to forgive another's transgression. One's desire to remain in a relationship when faced with a transgression minimizes the negative impact of the conflict and leads to reestablishing a harmonious relationship. Relationship closeness between a victim and an offender has been an influential factor of forgiveness. Specifically, victims tend to forgive their offenders if those offenders are closer to them than less well-known offenders (Karremans & Aarts, 2007; McCullough et al., 1998). Therefore, interpersonal elements, such as one's commitment in the relationships, desire to remain in the relationships, and closeness to the offenders, are all facilitating victims' forgiveness toward the perpetrators.

The literature of state forgiveness of others suggested that an apology after a perceived transgression, another interpersonal element, is also associated with forgiveness (McCullough, Worthington, & Rachal, 1997). Apology leads to forgiveness especially when victims perceive a great level of sincerity from the offenders, the apologies with offenders' feelings of guilt, and the apologies proceeding prior to victims' accusation toward the offenders (Schumann, 2012; Weiner, Graham, Peter, & Zmuidinas, 1991). McCullough et al. (1997) conceptualized forgiveness as a motivational change facilitated by empathy. Empathy is characterized as a vicarious emotional reaction to perceived emotional experiences of others and is a primary emotional response associated

with forgiveness because forgiveness is often related to an individual's ability to take others' perspectives and understand the offender (McCullough et al., 1997). Empathy enables victims to understand the transgression in light of their previous behaviors and to consider transgressors' emotions and motivations. If victims understand their own behaviors and the transgressors' emotions, empathy may reduce victims' motivation for revenge and may increase the motivation to forgive (Exline, Baumeister, Zell, Kraft, & Witvliet, 2008; McCullough et al., 1997). When those who are offended receive a genuine apology from the offender, they increase their empathy toward the offender and finally forgive the offender.

In addition to empathy, some research focusing on state forgiveness of others has shown that perspective taking is significantly correlated with forgiveness (Konstam, Chernoff, & Deveney, 2001; Mellor, Fung, & Mamat, 2012). The study of domestic couples who were in the process of separation assessed the relationship of multiple measures of forgiveness with empathy and cognitive perspective taking. The results showed that both empathy and cognitive perspective taking were significant predictors of forgiving offenders (Welton, Hill, & Seybold, 2008).

The literature of dispositional and state forgiveness of others seems to be integrated well and have a shared understanding of a definition of forgiveness of others (Fehr et al., 2007) and its psychological effects such as distress, depression, anxiety, and well-being, (Lawler-Row & Piferi, 2006; Orcutt, 2006; Toussaint et al., 2008). However, the research in state forgiveness of others, but not dispositional forgiveness of others, has provided facilitating factors of victims' forgiveness, including relationship with the offenders (Karremans & Aarts, 2007; McCullough et al., 1998), empathy (Exline et al.,

2008; McCullough et al., 1997), and perspective-taking (Konstam et al., 2001; Mellor et al., 2012). The research findings of what facilitate victims' forgiveness, in addition to its psychological effects, has been translated into a practical intervention that frames forgiveness of others as one potential effective way to cope with stress-related psychological adverse consequences of unforgiveness (Worthington, 2006; Worthington & Scherer, 2004; for a meta-analysis, see Wade, Hoyt, Kidwell, & Worthington, 2014).

In the literature of forgiveness of others, studies on state forgiveness of others have provided a great insight of interpersonal and intrapersonal factors facilitating forgiveness in addition to its psychological benefits. Therefore, the author of the current study believes that focusing on state self-forgiveness would provide detailed understanding of a process of self-forgiveness and more insight for factors related to self-forgiveness than discussing dispositional self-forgiveness.

Self-forgiveness

The forgiveness literature has primarily focused on forgiveness of others; studies of self-forgiveness have only increased in recent years (Worthington and Langberg, 2012). Several scholars have proposed definitions of self-forgiveness, however, only Enright (1996) and Davis et al.'s (2015a) definitions will be discussed here because Enright's (1996) definition has received great recognition in the literature and Davis et al.'s (2015a) definition incorporated scientific findings. Enright (1996) defined self-forgiveness approximately 20 years ago and has been used in many studies, defining self-forgiveness as "a willingness to abandon self-resentment in the face of one's own acknowledged wrong, while fostering compassion, generosity, and love toward one-self" (p. 115). Enright also proposed a phase model of self-forgiveness, consisting of four

phases. The uncovering phase involves dealing with negative consequences of wrongdoing such as denial, guilt, and shame. In the decision phase, after realizing negative feelings associated with the offense, the offender realizes his or her needs to change those feelings, starts considering self-forgiveness, and then commits to forgiving himself or herself. The working phase includes self-awareness, compassion, and accepting the pain. During the last phase, the outcome phase, one finds new meaning and purpose. However, this phase model of self-forgiveness is not supported by much research.

After numerous years of study and examination of self-forgiveness literature, Davis and his colleagues (2015a) recently proposed a comprehensive definition of self-forgiveness, conceptualizing self-forgiveness as an emotion-focused coping strategy within an adapted stress-and-coping model, involving reducing negative and increasing positive thoughts, emotions, motivations, and behaviors regarding oneself. Self-forgiveness involves offenders' repairing damage to their self-concepts to resolve emotional stress such as guilt, shame, anger, regret, and disappointment. These emotional distresses result from their incongruent perceptions between their values and behaviors. Therefore, if an offense and its consequences are perceived by an offender as threatening, the offender will experience stress-response reactions consisting of emotional distress. Self-forgiveness is considered as a transformative coping strategy by which offenders purposefully modify or transform their self-concept to a new self-concept integrating their own responsibility of the offenses with their previous sense of self-worth. Those two definitions explain self-forgiveness in a great detail. However, the author of the current study believes that most self-forgiveness measures fail to consider

these detailed definitions of psychological responses after committing interpersonal offense. Tangney, Boone, and Dearing (2005) explained that existing measures of self-forgiveness assess forgiveness as an outcome (i.e., endpoint) without considering the process that is crucial to lead to that outcome. Most study of self-forgiveness use a one-dimensional measure such that higher scores of the measure are considered as forgiveness and lower scores of the measure are related to failure to forgive. However, one-dimensional measures may not accurately assess offenders' responses because the measure assumes that offenders have only two responses after committing transgression (i.e., forgive or failure to forgive), and studies using that measure seem to produce some results that were not always consistent with their definitions of self-forgiveness (e.g., Fisher & Exline, 2006; Tangney et al., 2005). Therefore, a more accurate measure is necessary to assess offenders' responses after their own interpersonal transgressions. Woodyatt and Wenzel (2013a) proposed a process-oriented approach of self-forgiveness, considering multiple responses after one's offense.

The author of the current study believes that another measurement issue is related to dispositional and state self-forgiveness. Whereas the literatures of dispositional and state forgiveness of others share the component of interpersonal offenses, research in dispositional and state self-forgiveness seems to be different. Interpersonal transgression is an essential framework in state self-forgiveness. However, dispositional self-forgiveness does not necessary involve interpersonal transgression, and widely used measures (e.g., *the Forgiveness of Self scale*, Mauger, Perry, Freeman, Grove, McBride, & McKinney, 1992; *the Heartland Forgiveness Scale (HFS)*, Thompson et al., 2005) do not include interpersonal transgression but only focus on one's mistakes or failures in

general. Because the literature of state forgiveness of others has contributed facilitating forgiveness of others (Karremans & Aarts, 2007; McCullough et al., 1998; Exline et al., 2008; McCullough et al., 1997; Konstam et al., 2001; Mellor et al., 2012), the study of state self-forgiveness would be more beneficial to understand offenders' responses and facilitate self-forgiveness. The approach of Woodyatt and Wenzel (2013a) involves interpersonal offense and measures state self-forgiveness; therefore, the current author believes that Woodyatt and Wenzel's approach (2013a) to self-forgiveness would provide more information how offenders forgive themselves.

Process-oriented Approach of Self-forgiveness

Woodyatt and Wenzel (2013a) examined what would happen to the offender after transgressing against someone, the mechanism of how damaged positive self-regard (i.e., compassion and love toward self) is restored, and how the offender is motivated for prosocial behaviors toward the victim. They proposed a process-oriented approach of self-forgiveness, exploring three possible responses to the self after interpersonally offending others: genuine self-forgiveness, pseudo self-forgiveness, and self-punitiveness. Woodyatt and Wenzel (2014) defined genuine self-forgiveness as a process of releasing the self from ongoing self-punishment without minimizing the responsibility of the offense, harm to the victim, or blame of their offense. Genuine self-forgiveness is not just the reduction of self-punishment, but rather refers to the application of time and effort to think about and process one's wrongdoing and take responsibility related to the offense in order to restore one's moral self.

Woodyatt and Wenzel (2014) discussed the importance of understanding how the offender can arrive at this genuine self-forgiveness. The process of self-forgiveness

varies among offenders. Some of them directly arrive at genuine self-forgiveness, while the others may go through different paths. The first possible response after offending someone could be to externalize responsibility to reduce one's shame. This response is referred to as pseudo self-forgiveness, which is defined as the response "where an offender claims to have forgiven themselves but in actuality denies having done anything wrong, minimizing guilt by minimizing responsibility" (Woodyatt & Wenzel, 2013a, p. 230). Another response after an interpersonal transgression is self-punitiveness. Offenders who experience self-punitiveness feel high levels of guilt and shame and have desires to punish themselves (Woodyatt & Wenzel, 2013a). Worthington and Langberg (2012) further explained self-punitiveness as:

criticism and condemnation of oneself (along with accompanying moral emotions from among guilt, shame, remorse, regret, self-blame, etc.) due to perceived (a) moral wrongdoing (including omission of doing one's duty or acting in accord with one's conscience), (b) failure at living up to one's standards (which is also considered a moral failure), or (c) failure to live up to one's expectations (which might not be considered a moral failure at all) (p. 274).

Woodyatt and Wenzel (2013a) explained three types of responses after offending someone, but they did not address actual paths to achieve genuine self-forgiveness. Instead, Woodyatt and Wenzel (2013a) argued that achieving genuine self-forgiveness might need some time and effort. Depending on the offenders and type and/or severities of offenses, some offenders go through pseudo self-forgiveness and genuine self-forgiveness, and others may feel self-punitive at first and then arrive at genuine self-forgiveness. It might be necessary for some offenders to go through all three processes.

To explain this process-oriented approach and its relation to an one-dimensional concept used in most previous research, it is useful to explain the process facilitating genuine self-forgiveness. Taking responsibility and feelings of shame and guilt are important elements distinguishing among genuine self-forgiveness, pseudo self-forgiveness, and self-punitiveness.

Self-forgiveness and Taking Responsibility

In the process-oriented approach, genuine self-forgiveness is related to taking responsibility of one's own transgression, which leads to prosocial behaviors to the victims, whereas pseudo self-forgiving individuals tend to avoid taking responsibility and thus do not act prosocially toward victims. Offenders who use pseudo self-forgiveness tend to externalize their negative emotional responses in order to alleviate their painful feelings and discomforting thoughts. Those individuals claim to have forgiven themselves, however, they actually deny that they have done anything wrong and reduce their painful feelings by minimizing responsibility (Fisher & Exline, 2006; Hall & Fincham, 2005).

Offenders' responsibility taking is discussed further to differentiate genuine self-forgiveness from pseudo self-forgiveness. The study of Zechmeister and Romero (2002) may represent some weakness of one-dimensional self-forgiveness concept. In their study, each participant was assigned to write two narratives, as a victim and as an offender. Their results showed that those who forgave themselves often expressed regret and blamed themselves, but some of them also implied that their victims caused the offense than those who did not forgive themselves. Offenders who forgave themselves and described victims as deserving the offense seemed to achieve self-forgiveness relatively

easily. These results seem to conflict with definitions of self-forgiveness. However, a process-oriented approach may explain those results in a coherent way through genuine self-forgiveness and pseudo self-forgiveness. For genuine self-forgiveness to occur, perpetrators are first required to accept responsibility or blame for their offenses and second, fully experience with all the negative feelings (e.g., feelings of guilt and shame) resulting from their transgressions rather than rushing to release themselves from those feelings (Hall & Fincham, 2005; Holmgren, 2002). While genuine self-forgiveness is postulated on the assumption that the offender acknowledges one's own transgression in a sincere manner and accept responsibility, pseudo self-forgiving individuals fail to both acknowledge transgressions and accept responsibility. Thus, it might be plausible that some of forgiving individuals in Zechmeister and Romero's (2002) study is rather related to pseudo self-forgiveness. In addition, some participants of Fisher and Exline's (2006) study seem be related to pseudo self-forgiveness, too. They assessed college students' reflection of a time when they offended others, and their result showed that the participants were less likely to repent and to learn humbling lessons from their wrongdoing if they quickly and easily released their painful feelings. Therefore, acknowledge of their own wrongdoing and taking responsibility are unique features of genuine self-forgiveness, but not pseudo self-forgiveness.

Holmgren (2002) proposed two types of persons who prematurely forgive themselves without acknowledging their wrongdoing. The first type of person rationalizes the transgression in a way to avoid responsibility of the particular incident through engaging in self-deception. The inability to use one's sincere effort to understand the wrongdoing prevents the person from reaching self-respect and healing.

Holmgren's first proposal of forgiving the self prematurely is similar to the concept of pseudo self-forgiveness because those individuals resist acknowledging their own wrongdoing to prevent from experiencing all the negative feelings. Another type of person is able to remove the wrongdoing from his or her mind because the person simply does not care about the wrong act.

Avoidance is related to offenders' responsibility taking and further explains the difference between genuine self-forgiveness and pseudo self-forgiveness. After an incident of offending others, the individual has various behavioral and emotional reactions. Woodyatt and Wenzel (2013a) discussed that in order to continue to not taking responsibility and minimizing their wrongdoing, those who use pseudo self-forgiveness may avoid the victims and situations that may remind them of their offenses. That avoidance reduces the offenders' likelihood to experience negative feelings and painful thoughts resulted from acknowledging their faults related to the transgression. On the other hand, genuinely self-forgiving individuals do not necessarily need to avoid the victims, feelings, thoughts, and situations associated with their offenses to the victims. Therefore, avoidance is another key to differentiate genuine self-forgiveness from pseudo self-forgiveness.

As individuals with high pseudo self-forgiveness may avoid the victims and situations to keep away from taking responsibility, self-punitiveness is also related to avoidance. The research of Woodyatt and Wenzel (2013a) showed that those who scored high on self-punitiveness tended to avoid the victims and offense-related situations or thoughts. They discussed that at first, these individuals might avoid emotion-focused coping where a person experiences negative feelings, be unable to deal with the

experience, and attempt to suppress their own feelings through avoidance as a secondary response. However, their attempts to avoid are not always successful. When they fail avoiding, they may ruminate on their offenses and any related negative feelings toward themselves. They may acknowledge their own wrongdoing and take responsibility; however, those individuals may increase self-focus over time and undermine interpersonal restoration (Woodyatt & Wenzel, 2013a). Avoidance seems to relate to both pseudo self-forgiveness and self-punitiveness in different reasons.

Taking responsibility after offending victims facilitates offenders to restore damaged relationships with the victims. A study of Exline, Root, Yadavalli, Martin, and Fisher (2011) showed the relationship between taking responsibility and one's actual relationship restoration. They conducted a study to assess the relationship between reparative behaviors and self-forgiveness through a laboratory-based exercise of four experimental conditions with a 2 (responsibility/repair vs. not) X 2 (self-forgiveness vs. not) design. The responsibility/repair condition involved participants reflecting on their role in the offenses, envisioning them accepting responsibility, and brainstorming how they might be able to improve the relationships with the victims. The self-forgiveness exercise involved rating several attitudes related to the offense and identifying barriers to self-forgiveness.

The participants in the responsibility/repair only condition reported to offer more reparative behaviors toward their victims after a two-week period than those in the control group. The results suggested that prompts focusing on responsibility and relational repair influenced individuals' following reparative behaviors after committing offenses. Participants in both the responsibility/repair and self-forgiveness condition

reported marginally fewer reparative behaviors than those in the responsibility/repair only condition. In addition, greater self-forgiveness at the baseline predicted fewer reparations during the next two weeks. Those two results suggested that once people reduced their levels of negative feelings toward themselves related to the offenses, their motivation to offer reparative behaviors might decrease. However, the self-forgiveness exercise in this study might not be enough to achieve genuine self-forgiveness, which may require some self-examination at a greater level and going through emotional pain related to the offense. This experiment did not differentiate genuine self-forgiveness from pseudo self-forgiveness through taking responsibility, but showed that taking responsibility of one's wrongdoing facilitated the offender's actual behavior of restoring the relationship.

Summarized, taking responsibility is a key to differentiate genuine self-forgiveness from pseudo self-forgiveness. Pseudo self-forgiving individuals do not acknowledge their own transgressions and take responsibility through avoiding the victims and any offense-related situations. On the other hand, genuine self-forgiving persons first take responsibility of their own transgressions and then fully experience their negative feelings resulting from those transgressions without any avoidance. Also, taking responsibility, a unique characteristic of genuine self-forgiveness, leads to offenders' behaviors to restore damaged relationship. Next, the relationship between genuine self-forgiveness and self-punitiveness is discussed through feelings of shame and guilt.

Self-forgiveness and Shame and Guilt

The forgiveness literature has frequently discussed two negative feelings, shame and guilt, which occur after offending someone (cf. Carpenter, Tignor, Tsang, & Willett,

2016; Fisher & Exline, 2010). These two feelings may have a potential to differentiate genuine self-forgiveness from self-punitiveness.

Fisher and Exline (2006) provided detailed explanation of shame and guilt. While shame is a feeling representing a global perception of the individual's sense of being bad or immoral, guilt is a feeling considering a specific behavior as bad or immoral. Compared to the feeling of guilt, the feeling of shame was more greatly related to depressive symptoms and feelings of distress and painfulness (Kim, Thibodeau, & Jorgensen, 2011; Tangney, 1991; Tangney & Dearing, 2002). Fisher and Exline (2006) further provided two terminologies to differentiate constructs related to feelings of shame and guilt: self-condemnation and remorse. Remorse is defined as an offense-related response after one has guilt-related feelings like sorrow and regret, and seeing particular action as bad or immoral. On the other hand, self-condemnation, a more global negative perception toward the self, seems to be related to loathing and a desire for punishment for one's wrongdoing. Therefore, individuals with self-punitiveness could be considered to relate to self-condemnation and a feeling of shame. According to Fisher and Exline (2006), remorse is related to one's willingness to humble self and repent for one's wrongdoing. This result seems to suggest that individuals with genuine self-forgiveness have stopped shaming and condemning themselves but are not necessarily relieved from feelings of guilt and remorse.

Genuine self-forgiveness can be explained through a feeling of guilt, and that guilty feeling may motivate offenders to seek forgiveness from the victims. Both guilt and shame are often negatively arousing; however, guilt can serve an important role to restoring interpersonal relationships. Guilt appears to serve multiple relationship-

enhancing roles, including motivating people to treat others well and to avoid transgressions, adjusting inequalities, and allowing others in less influential positions to exert their influence over their relationships (Baumeister, Stillwell, & Heatherton, 1994). Feelings of guilt could be an appropriate emotional response after offending someone and could serve as a motivational role to seek forgiveness from the offended persons. Baumeister, Stillwell, and Heatherton (1995) assessed both spontaneous and partner-induced guilt through first-person accounts of interpersonal transgressions and guilt manipulations. Their results showed that when participants recalled and wrote about an instance where they became angry at someone, those who reported one's feelings of guilt about the instance were more likely to report apologizing to the victim to restore their interpersonal relationships, compared with participants who did not report their feelings of guilt. Those authors argued that those who genuinely forgive themselves might have feelings of guilt, which, in turn, encourages them to apologize to the victims and restore their damaged relationships.

In addition to a role of guilt as a relationship enhancer, shame has also been examined for its association with behaviors that could restore relationships. Riek, Luna, and Schnabelrauch (2014) assessed how feelings of guilt and shame would differently predict prosocial behaviors toward the victims. They discussed the relationship of genuine self-forgiveness to feelings of guilt and shame and restoring one's relationship with the victim. These researchers conducted a 2-wave longitudinal study of transgressors' shame and guilt and their relations to forgiveness seeking behaviors for their wrongdoing to someone in the past. The used path analysis revealed that reported feelings of guilt at time 1 predicted forgiveness-seeking behaviors at time 2; however,

feelings of shame did not predict forgiveness-seeking behaviors. The study suggested that guilt, but not shame, served as a motivational factor to increasing forgiveness-seeking behaviors, indicating that guilt is an important element facilitating forgiveness-seeking behaviors. These findings were supported by a previous study showing that guilt was associated with increasing empathy toward others (Tangney, 1991).

In summary, the feelings of shame and guilt differentiate genuine self-forgiveness from self-punitiveness. Those who achieve genuine self-forgiveness may feel guilt, an offense-related feeling of seeing a specific behavior as bad or immoral, and this feeling of guilt is a motivational factor to seek forgiveness from offended individuals. On the other hand, self-punitive individuals seem to have the feelings of shame and guilt, but rather characterized as having the feeling of shame, which is a global negative perception of self and does not lead to prosocial behavior but self-condemnation. However, the relationship of those two feelings with pseudo self-forgiveness has not been directly assessed.

Self-forgiveness in Children and Adolescents

Self-forgiveness can be more influential in adolescents' emotional health due to their development of social relationship and cognition. Erikson's psychosocial stage model is one of the most influential models to describe a life-long development of how individuals relate to their social world. According to that model, adolescents focus on developing their identities through social relationships with others, especially their peers. In the literature of other-forgiveness, Enright and Fitzgibbons (2015) discussed children's cognitive development of the ability to reason about forgiveness and its related factors. By early adolescence, they become capable of reasoning abstractly about justice, social relations, and forgiveness. Through more frequent and meaningful interactions with

peers, youths may have more complicated relationships with others as their ability of abstract thinking develops. In addition, they are still highly ego-centric and self-conscious. When adolescents hurt someone, their reactions to and reflections on the offending events would be more intricate and could produce more distress for them than the time when they were younger. Therefore, understanding the mechanism of self-forgiveness among adolescents is useful to promote their emotional well-being in their daily life.

After searching self-forgiveness and children through the PsycINFO, only one peer-reviewed study has been found about self-forgiveness among youths in the U.S. Westers, Rehfuss, Olson, and Biron (2012) investigated assessing the role of dispositional forgiveness of self and forgiveness of others among adolescents who engaged in nonsuicidal self-harm. Low self-forgiveness was associated with engaging in nonsuicidal self-harm for the reasons of a) regulating emotions such as getting rid of unwanted emotions and needing to feel something due to feeling numb or empty and, b) social functioning such as communicating with others or getting others' attention. Low self-forgiveness was also associated with greater lifetime frequency of nonsuicidal self-harm. Westers et al. (2012) explained that adolescents who engaged in nonsuicidal self-harm tended to be more perfectionistic and self-critical, putting high expectations on themselves and feeling the need to punish themselves. These characteristics are also common among adolescents who have low levels of self-forgiveness. Also, their result suggested that youths who are less likely to forgive themselves may look to others for a sense of empowerment or to request assistance. Some scholars explained that self-punishing behaviors were characteristics of low levels of self-forgiveness (Hall &

Fincham, 2005; Tangney et al., 2005). Greater self-forgiveness among youths is related to less frequent self-harming behaviors; however, much more research related to self-forgiveness among adolescents is needed to understand the mechanism of their self-forgiveness and how self-forgiveness is important to promote their psychological health.

Self-forgiveness in Japan

Forgiveness might have a more important role for individuals in collectivistic culture, even though forgiveness has been mainly discussed in individualistic culture. Compared to individualistic people, people in collectivistic culture, such as Japanese people, tend to have more value on interpersonal harmony and connectedness with others (Markus & Kitayama, 1991). In collectivistic culture, forgiveness as a way to reduce negative reactions of interpersonal conflicts is especially useful for their cultural value of social harmony (Hook, Worthington, & Utsey, 2009). One of the characteristics of Japanese culture is interdependence, where people are more connected to each other and endorse more values on the relationships with others. In this culture, conflicts with others could bring more significant disturbances to one's family, friends, school, and work place. Therefore, self-forgiveness as a mean to alleviate conflicts and distress would lead to harmonious relationships among Japanese people.

There are few studies of self-forgiveness in Japan; however, all those studies use dispositional measures based on one particular scale, the Heartland Forgiveness Scale (HFS; Thompson et al., 2005). The HFS is a psychometrically sound scale to assess forgiveness in samples of college students and adults in a community and has three factors: forgiveness of self, others, and situations. Because the HFS is a dispositional measure, the self-forgiveness subscale focuses on one's failure but does not involve

interpersonal offenses. Osanai and Furukawa (2005) created a Japanese version of the HFS (J-HFS), and its self-forgiveness subscale assesses how individuals can emotionally manage themselves when they make mistakes or learn from their own failures.

Ueda and Shiomura (2012) used the J-HFS to examine the relationship among forgiveness, self-construal, collectivism and religious beliefs of Japanese college students. Through confirmatory factor analyses, the researchers identified a three-factor model, consisting of other-forgiveness, self/situational-forgiveness, and self/situational-unforgiveness. The multiple regression analysis indicated that self/situational-forgiveness was positively related to independent self-construal whereas self/situational-unforgiveness was positively related to interdependent self-construal. These results suggest that those who highly value the interdependent self-construal are less likely to manage their emotions in the events of their own failures or mistakes than individuals with highly independent self-construal.

There are only two Japanese studies related to self-forgiveness among adolescents. Ishikawa and Hamaguchi (2007) created a dispositional forgiveness measure for middle and high school students after considering the Self, Other, and Situation Subscales of the HFS (Thompson et al., 2005). A confirmatory factor analysis revealed a three-factor model: active and passive self-forgiveness and other-forgiveness. They described active self-forgiveness as changing a negative situation to something positive such as making sense of their unfortunate situations, supporting their self-worth, and encouraging themselves. One of the items included, “even if I failed something, I try to think that I did my best.” Passive self-forgiveness was named this way because the items in this factor related to changing a negative situation to something neutral through assessing the

extent of self-blaming, depressive thoughts, and regret. One of the items included “when I cannot improve my performance as I like, I keep blaming myself.” The study revealed that both active and passive self-forgiveness were negatively correlated with internalized problems including trait anxiety and depressive symptoms, suggesting that students with high levels of active and passive self-forgiveness are less likely to have internalized problems. Furthermore, passive self-forgiveness is a stronger predictor of internalized problems than active self-forgiveness.

Ishikawa and Hamaguchi (2010) further assessed the relationship among these three factors of dispositional forgiveness (i.e., other-forgiveness, active self-forgiveness, and passive self-forgiveness) and three types of school adaptation (i.e., enjoyment of attending school, peer relations, and teacher relations) in adolescents, after controlling for social desirability. The multiple regression analyses showed that other-forgiveness promoted all three types of school adaptation, and active self-forgiveness promoted two types: enjoyment of attending school and peer relations. Multivariate analysis of variance revealed that students with high scores on all three types of dispositional forgiveness tended to adapt better at school, whereas students with low scores on those three types of forgiveness had a tendency to be maladjusted at school.

The results of the above three studies (Ueda & Shiomura, 2012; Ishikawa & Hamaguchi, 2007; Ishikawa & Hamaguchi, 2010) implied that, compared to individuals who greatly value independence, highly interdependent individuals were both less likely to forgive their own faults and emotionally manage their difficult situations, which leads to anxiety and depressive symptoms and also causes reduced enjoyment attending school and poor peer relations among adolescents. However, none of the forgiveness studies in

Japan has assessed state self-forgiveness specific to one's offense to others. Therefore, assessing a process-oriented approach of self-forgiveness in Japan may contribute to understanding the mechanism of how Japanese individuals forgive themselves after offending others and how their process is uniquely related to their psychological health.

Self-forgiveness and Anxiety and Depression

Psychological benefit of forgiveness has received a great attention in the forgiveness literature, and much forgiveness research has found the association of forgiveness with psychological distress, especially depressive and anxiety symptoms (for a meta-analysis, see Davis et al., 2015a). In the literature of internalized problems such as depression and anxiety, many researchers explain these symptoms in a broad context considering vulnerability factors such as temperament, emotion and information processing, emotion regulation, and selective attention (e.g., Beck, Emery, & Greenberg, 1985; Durbin & Shafir, 2008; Flynn & Rudolph, 2010; Krueger, 1999). Because self-forgiveness is an emotion focused coping strategy decreasing negative and increasing positive emotions, thoughts, and behaviors toward the self (Hall & Fincham, 2008; Worthington & Langberg, 2012), self-forgiveness may provide a specific explanation of why individuals who commit interpersonal transgressions may develop anxiety and depressive symptoms.

Self-forgiveness is related to various psychological symptoms through dispositional self-forgiveness. Mauger and his colleagues (1992) found that a failure to forgive oneself was significantly and positively correlated with depression, anxiety, distrust, lower self-esteem, and social introversion. A similar result was found in Maltby, Macaskill, and Day's (2001) correlational study of college students, showing that a

failure to forgive oneself was related to higher scores of neuroticism, depression, and anxiety in both men and women. This link of dispositional self-forgiveness to depression and anxiety was found in a variety of samples. For example, a study with a community sample of 3105 adults showed that self-forgiveness was negatively related to anxiety symptoms, depressive symptoms, and major depressive disorder (Sternthal, Williams, Musick, & Buck, 2010). Lawler-Row (2010) conducted a study assessing relationships among forgiveness, religiosity, and health outcomes through a sample of older adults. Her results revealed that self-forgiveness was positively correlated with psychological well-being and higher life satisfaction but negatively correlated with depressive symptoms and health symptoms of physical illness. Similar results were found in a sample of physically ill patients. Romero et al. (2006) conducted a study to evaluate whether a self-forgiving attitude was related to psychological adjustment of women who were treated for breast cancer at an oncology clinic. The result indicated that self-forgiveness was a unique predictor of mood disturbance (i.e., more positive mood and less negative mood) and quality of life including physical, social/family, emotional, and functional well-being.

Researchers have created various designs to further investigate the associations among self-forgiveness, depression, and other related variables. Wohl, DeShea, and Wahkinney (2008) assessed state self-forgiveness and its relationship to psychological well-being among college students who had just experienced unwanted ends of their romantic relationships. The result showed that self-forgiveness specific to those events was negatively correlated with both self-blame and depression. Also, greater self-blame predicted increased depression, and this relationship was mediated by self-forgiveness.

The result suggested that those who blame themselves at a greater level tended to fail to forgive themselves and, consequently, had greater depressive symptoms. Hirsch, Webb, and Jeglic (2011) conducted a cross-sectional study to assess relationships among dispositional self-forgiveness, depression, and suicidal behaviors in ethnically diverse college students who reported from mild to severe depressive symptoms. Through a mediation analysis, the study showed that the relationship between self-forgiveness and suicidal behavior was fully mediated by depressive symptoms, showing that a greater level of self-forgiveness was associated with less depression and, consequently, less suicidal behavior. In Macaskill's (2012) study, using path models to differentiate dispositional self-forgiveness and other-forgiveness through their associations with life satisfaction and mental health, self-forgiveness was shown to be a predictor of greater life satisfaction and general mental health. The study also revealed that trait anxiety negatively predicted self-forgiveness, suggesting that those who have anxious characteristics tend to have difficulties forgiving themselves. These studies using a variety of designs have explained how self-forgiveness are related to psychological outcomes, including depression and anxiety.

The self-forgiveness literature has consistently shown a failure to forgive oneself is related to depression and anxiety; however, all self-forgiveness literature related to depression and anxiety has conceptualized low scores of self-forgiveness as a failure to forgive oneself. Because the measures of the process-oriented approach of self-forgiveness were only recently created, there is no study so far of how the three responses of the process-oriented approach is related to depression and anxiety. Because pseudo self-forgiving individuals tend to avoid the victims and the offense-related situations and

self-punitiveness is characterized as a global negative perception of self, pseudo self-forgiveness and self-punitiveness might relate to anxiety and depression, respectively.

Depression and Anxiety in Children and Adolescents

The relationship between self-forgiveness and depressive and anxiety symptoms have been discussed in the previous section, but these symptoms in children might be different from adults' symptoms. Anxiety is one of the most common emotional problems in children and adolescents, and anxiety precedes other psychological symptoms, including depressive symptoms (Bauer, Yoder, Carroll, & Downs, 2016). Both anxiety and depression have been commonly reported in adolescents and disturb their daily lives (Knopf, Park, & Mulye, 2008). However, the assessment of depression and anxiety is complicated due to common symptoms, especially for children and youths (Anderson & Hope, 2008). There is considerable overlap between depression and anxiety in children when assessed by widely used self-report measures such as *Children's Depression Inventory* (CDI), *State-Trait Anxiety Inventory for Children*, and *Revised Children's Manifest Anxiety Scale* (RCMAS) which reflects poor discriminant validity. Consistent with this, according to Brady and Kendall's (1992) review of studies of children and adolescents, 15.9% to 61.9% of children and youths identified as depressed or anxious had a comorbid depression and anxiety.

Clark and Watson (1991) proposed the tripartite model of anxiety and depression to explain this existing overlap between depressive and anxiety symptoms and to differentiate one from another. They discussed that anxiety and depression share a common component of high negative affect, reflecting general emotional distress, but can be effectively differentiated through high physiological or somatic hyperarousal

associated with anxiety and low positive affect associated with depression. In this model, someone who is depressed would experience a high level of negative affect, a low level of positive affect, and an average level of physiological hyperarousal. An individual with anxiety would experience a high level of negative affect, an average level of positive affect, and a high level of physiological hyperarousal. Therefore, a total score of negative affect subscore and reversed positive affect subscore represents depression, whereas a combined total score of negative affect subscore and hyperarousal subscore represent anxiety. Lonigan, Hooe, David, and Kistner (1999) found that in their regression models, both positive affect and negative affect were significant, unique predictors of CDI and RCMAS scores in adolescents. After reviewing the tripartite literature in children and youths, Anderson and Hope (2008) suggested that the tripartite model was useful in explaining the association between anxiety and depressive symptoms in a community sample of adolescents.

Because the tripartite model conceptualizes anxiety and depression through positive affect and negative affect, cultural difference in the expression or experience of affect must be considered when assessing one's affect in a different culture. A lot of researchers have discussed a variety of affective expressions and experiences in diverse cultures; its discussion is out of scope in the current study (e.g., Bagozzi, Wong, & Yi, 1999; Chen, Bai, Lee, & Jing, 2016). When relating to the expression of positive and negative affect, affect literature focusing on cultural differences suggested that findings of affects of American individuals might not be directly applicable to Japanese individuals. The study of various emotions of diverse samples including European, Asian, and Latino American students and students in India and Japan, showed that college

students in Asian cultures, including Asian American, Japanese, and Indian students, scored lower on pleasant emotions and higher on unpleasant emotions than European and Latino Americans (Scollon, Diener, Oishi, & Biswas-Diener, 2004). Therefore, when assessing individuals in a collectivistic culture with the tripartite model of depression and anxiety, the interpretation of positive and negative affects needs some cautions.

The process-oriented model of self-forgiveness might be related to anxiety and depression. There might be other factors influencing on these relationships among adolescents in collectivistic culture. Fear of negative evaluation and social support seem to be very relevant to Japanese adolescents who committed an interpersonal offense because it is indicated that collectivistic individuals may have a greater level of fear of negative evaluation, which is known to predict anxiety (Norasakkunkit, Kitayama, & Uchida, 2012; Weeks et al., 2005), and social support has been reported to predict psychological symptoms among adolescents (Rueger, Malecki, & Demaray, 2010).

Fear of Negative Evaluation

Because adolescents are still cognitively egocentric and individuals in collectivistic culture may focus on how others think about themselves, fear of negative evaluation may have a significant influence on adolescents in collectivistic culture. Furthermore, fear of negative evaluation may uniquely relate to both self-forgiveness and anxiety. Fear of negative evaluation refers to one's apprehension about how others evaluate, which causes distress over these expectations (Watson & Friend, 1969). As a consequence of this fear, individuals may engage in compensatory coping behavior to avoid this perceived negative evaluation from others (Leary, 1983). Fear of negative evaluation is related to but distinct from social anxiety. Fear of negative evaluation

relates to fearfulness associated with being evaluated by others in an unfavorable manner while anticipating and/or participating in a social situation, whereas social anxiety is related to one's affective reaction to those situations. In other words, social anxiety is a response to fear of negative evaluation (Weeks et al., 2005).

Relationship between Self-Forgiveness and Fear of Negative Evaluation

Fear of negative evaluation could be related to an important element to promote a self-forgiveness process. Offenders who use pseudo self-forgiveness alleviate negative emotions (e.g., shame and guilt) associated with the transgressions through denying and minimizing their offenses (Woodyatt & Wenzel, 2013a). Understanding factors that increase or decrease such defensive attitudes may provide some insight into how to facilitate offenders taking responsibility. Woodyatt and Wenzel (2013b) conducted experimental and longitudinal studies to examine how both threats to belonging and confrontation from another person (i.e., other than the victim) uniquely influenced one's process of self-forgiveness among undergraduate college students. In the experiment, participants completed an attachment style inventory and randomly received fabricated test results depending on the experimental conditions (i.e., avoidant, secure, and preoccupied attachment groups). Participants in the avoidant attachment group received results that they were likely to have a future isolated from others and feeling alone. Participants in the secure attachment group received the feedback that they were likely to have a future of healthy and long-term relationships. Participants in the preoccupied attachment group received results that they were likely to have a future of difficulties and mishaps. Then they were asked to read and imagine themselves in a scenario where they were in a long-term committed relationship and had minor acts of infidelity while

intoxicated. The experimental result showed that participants who were told they would establish a healthy long-term relationship in the future, based on their attachment style, tended to report greater perceptions of harm to their partners through the scenario. On the other hand, participants who were told they would be isolated and alone in the future rated significantly lower on their perceptions of harm to their partner than participants in the other two groups. These results suggested that threats to offenders' needs for belonging increased their defensive attitudes through denying and minimizing their wrongdoings.

In addition to the attachment style, offenders' perception of negative evaluation from others may influence the defensive attitude and responsibility taking of individuals. In their longitudinal survey study (Woodyatt & Wenzel, 2013b), college students who had committed an interpersonal transgression in the past three days were able to participate in the study. Participants took surveys every two days for a total of five times, and they were assessed on their pseudo self-forgiveness, their perceived rejection or acceptance by others, their perception of victim's hostility toward themselves, and their experiences of confrontation from another person (other than the victims). The results indicated that subjective perception of rejection by others was significantly positively associated with pseudo self-forgiveness. Respectful confrontation from others was also negatively associated with pseudo self-forgiveness. These two longitudinal results revealed the effect of one's perception of belongingness to others on self-forgiveness. That indicated that perceptions of belongingness and also a respectful attitude from a third party, when confronting the offender, could reduce offenders' defensive attitudes through denying and minimizing their own faults (characteristics of pseudo self-

forgiveness) and possibly could facilitate genuine self-forgiveness. The experimental and longitudinal study suggested that genuinely self-forgiving individuals might have some confidence in their ability to belong to others and expect to receive respectful attitudes when being confronted. Therefore, they are able to acknowledge and take responsibility for their offenses without having any defensive attitudes. However, individuals with pseudo self-forgiveness may be afraid of being unable to belong to others and receiving confrontations with criticism, which leads them to have defensive attitudes. In short, genuinely forgiving individuals would have little fear of negative evaluation; however, those who score high on pseudo self-forgiveness would have greater levels of fear of negative evaluation.

Relationship between Fear of Negative Evaluation and Anxiety

Fear of negative evaluation relates to one's apprehension about being negatively evaluated by others while participating in social activities; anxiety is one's reaction to those situations. Some studies have examined the relationship between social anxiety and fear of negative evaluation. Foyt and her colleagues (2007) conducted a study to assess characteristics predicting anxiety levels of patients with social anxiety; these characteristics included fear of negative evaluation and the personality trait of harm avoidance. Harm avoidance is defined as a heritable bias in the inhibition or cessation of behaviors including the pessimistic worry of anticipating future problems, passive avoidance behaviors including fear of uncertainty and shyness of strangers, and rapid fatigability (Cloninger, Svrakic, & Przybeck, 1993). The result showed that severe fear of negative evaluation and a greater level of the personality trait of harm avoidance were associated with significantly higher social anxiety levels during the treatment. A multiple

regression analysis of social anxiety severity at 6-month and 24-month follow-ups revealed that the fear of negative evaluation played a significant role explaining the variance at 6 months but not at 24 months, whereas the personality trait of harm avoidance remained a significant predictor at both follow-up times. The study suggested that fear of negative evaluation was a strong predictor of social anxiety at least during the treatment and 6-month follow-up time.

The relationships of fear of negative evaluation to anxiety and depression were further examined by Wang, Hsu, Chiu, and Liang (2012) through the tripartite model of anxiety and depression. The authors assessed a hierarchical model of social interaction anxiety and depression to explain their comorbidity and the uniqueness of social interaction anxiety. After showing negative affect and positive affect were higher-order factors of social interaction anxiety and depression, hierarchical regression analyses revealed that fear of negative evaluation accounted for a significant amount of variance in social interaction anxiety after controlling for negative affect and positive affect, suggesting that fear of negative evaluation is a significant characteristic of social interaction anxiety. Fear of negative evaluation significantly accounted for a variance in social interaction anxiety and depression; however, the variance accounted in social interaction anxiety was much larger than the variance accounted for in depression. Wang et al. (2012) explained that fear of negative evaluation was related to depression even though there is no direct theoretical insight into that relationship. They suggested that negative evaluation from others might produce the biased schema of personal failure, which, in turn, deteriorates individuals' depressive mood. Therefore, fear of negative evaluation is a strong predictor of one's anxiety rather than one's depressed mood.

Fear of negative evaluation is a shared construct across cultures, but the level of importance of fear of negative evaluation related to anxiety may be different among people in independent and interdependent cultures. Norasakkunkit et al. (2012) conducted a study to assess how independent and interdependent self-construal was related to social anxiety among college students in the U. S. and Japan. In Western countries, the concept of self-focused social anxiety is well represented as social phobia, which is fear of embarrassing oneself in front of others; however, in Asian countries, the primary concern of other-focused social anxiety is one's potential for offending others or causing troubles for them due to one's own inappropriate behaviors or undesirable bodily features like repugnant body odor (Nakamura, Kitanishi, Miyake, Hashimoto, & Kubota, 2002). The study of Norasakkunkit et al. (2012) showed that independent self-construal was strongly related to the self-focused component of social anxiety whereas interdependent self-construal was only related to the other-focused component of social anxiety. Therefore, people living in interdependent self-construal cultures such as Japanese people might have more concern about how others negatively perceive themselves, which means that fear of negative evaluation may have a greater role on Japanese people's anxiety levels and emotional well-being, compared to those of individuals living in an individualistic culture.

A very limited number of Japanese studies has found an association between fear of negative evaluation and anxiety in adult samples. Ishikawa, Sasaki, and Fukui's (1992) study of clinical and nonclinical undergraduate student samples reported that fear of negative evaluation was significantly correlated with trait, state, and manifestation of anxiety. Another study of clinical and nonclinical adult samples in Japan revealed that

fear of negative evaluation had significant correlations with social avoidance and distress (Asakura, et al., 2002). Therefore, the effect of fear of negative evaluation on a variety of anxiety-related constructs was evident among Japanese adult samples.

The similar relationship between fear of negative evaluation and anxiety has also been shown among Japanese children. In a study assessing 5th to 12th grade students in Japan through self-report questionnaires, 7th to 12th grade students had higher levels of fear of negative evaluation than 5th to 6th grade students, indicating that students become more fearful of negative evaluation as they become older (Yamamoto & Tagami, 2007). Similar tendencies were also found in the study of Yamamoto (2007). Through students' self-reports and teachers' reports of children's fear of negative evaluation, the results showed that 10th to 12th grade students had more fear of negative evaluation than 1st to 9th grade students. These results suggested that the impact of fear of negative evaluation among high school students was stronger than the younger groups of children; therefore, understanding how fear of negative evaluation influences high school students' anxiety level is crucial for clinicians to promote their emotional health.

Social Support

Adolescents develop their cognitive abilities and increase their social interactions and relationship in a variety of ways, and individuals in collectivistic culture value on social harmony and connectedness with others (Markus & Kitayama, 1991). Therefore, social support may have significant influence on emotional health among collectivistic adolescents. The process-oriented approach of self-forgiveness, especially self-punitiveness, seems to relate to depressive symptoms among those who committed interpersonal transgression.

Researchers have provided a variety of definitions of social support through the model proposed by Tardy (1985), which is one of the most comprehensive models and has gained significant attention in the literature. Tardy (1985) addressed five dimensions in the conceptualization of social support: direction, disposition, description/evaluation, network, and content. Direction refers to whether one is to give or receive social support. Disposition refers to whether social support is simply available to someone or whether it is actually being used. Description/evaluation refers to whether one is evaluating his or her social support or just describing it. Network refers to the source(s) or the member(s) of an individual's support network, such as parents, family members, teachers, classmates, friends, and others. There are four types of content: emotional, instrumental, informational, and appraisal. Emotional support includes feelings such as trust, love, and empathy. Instrumental support includes resources such as money and time. Informational support refers providing information or advice on a particular area. Appraisal support is evaluative feedback to individuals. The social support is a broad construct and involves many different areas. However, most measures in social support have focused on only few dimensions or types of social support. Because there is no study assessing how social support relates to self-forgiveness, it is important to use a broadly defined social support measure to assess which area of social support is associated with the process-oriented approach of self-forgiveness.

One of the most comprehensive measures of social support in children and adolescents was created by Malecki, Demaray, and Elliott (2003), which is based on Malecki and Demaray's (2002) definition of social support. Their definition is broadly constructed and closely related to Tardy's model. They defined social support as "an

individual's perceptions of general support or specific supportive behaviors (available or enacted upon) from people in their social network, which enhances their functioning and/or may buffer them from adverse outcomes" (p. 2). Malecki and her colleagues' (2003) social support measure is a self-report scale to assess school children's perceived social supports in a comprehensive manner, including types (i.e., emotional, information, appraisal, and instrumental) and sources (i.e., parents, teachers, classmates, close friends, and school) of social support. This measure seems to be very comprehensive and appropriate to assess its relationship to self-forgiveness and depressive symptoms among adolescents in a school setting.

Relationship between Self-forgiveness and Social Support

Emotional support from others like friends and family might be helpful for offenders to reduce their negative and increase positive feelings and thoughts toward oneself. Therefore, assessing the relationship of self-forgiveness to social support would be beneficial to understanding how to promote those who are struggling to forgive themselves to forgive themselves genuinely. Fisher and Exline (2006) discussed that, for offenders who punish themselves, reducing feelings of self-condemnation could be a necessary process promoting their mental health. After considering and adapting the contents of interventions for interpersonal forgiveness (e.g., Enright & Fitzgibbons, 2000), Fisher and Exline (2006) suggested that an initial goal for self-punishers might be to provide the offenders with a supportive and safe interpersonal relationship where their values were affirmed. Once they feel safe in their environment, they may shift to showing genuine remorse, repentance, and humility from shame-related feelings and self-condemnation and finally achieve genuine self-forgiveness.

This transformational process corresponds to Worthington's (2006) conceptualization of forgiveness of others as a coping mechanism. Worthington (2006) explained that perceived injustices are stressors, and if those stressors become great threats, the offenders cope with the stressor, appraisal, or stress reaction. Worthington and Langberg (2012) also explained that if self-punitiveness was understood through the stress-and-coping model of interpersonal forgiveness, many potential coping mechanisms could reduce feelings of shame and self-condemnation, such as talking about these offenders' feelings with their friends and family members. Therefore, it can be assumed that self-punitive individuals may not have a trustworthy relationship with others, which enables themselves to express their feelings of shame and self-condemnation.

Griffin and his colleagues (2015) further discussed some constructs possibly reducing offenders' self-punitiveness. They assessed the efficacy of a self-forgiveness workbook intervention to promote genuine self-forgiveness and alleviate self-punitiveness among college students who committed interpersonal offenses. Through the analysis of hierarchical linear modeling, participants who took part in the workbook intervention significantly improved genuine self-forgiveness, self-forgiving feelings and actions, self-forgiving beliefs, guilt, and shame. They suggested that offenders needed to restore their damaged personal values and experience emotional restoration of positive self-regard, and those two actions were important factors to reduce self-punitiveness and increase genuine self-forgiveness among individuals with feelings of self-condemnation. One of the possible ways to restore one's personal values and positive self-regard might be through social support from others. Having social support, which emotionally connects self-punitive individuals to their family and friends, may restore their damaged

self-worth and self-respect. Therefore, those who are highly self-punitive would have little social support from others. On the other hand, highly genuinely self-forgiving individuals would have more social support from others. Because no study has assessed the relationship between self-forgiveness and social support, it is beneficial to assess how all aspects of social support (i.e., types and sources of social supports) are related to genuine self-forgiveness and self-punitiveness. Furthermore, for collectivistic individuals, their perceived support from others such as family and close friends seems to be vital to restore their violated personal values and positive self-regard because of their value on interdependent relationship and connectedness.

Relationship between Social Support and Depression

In addition to the link between social support and self-forgiveness, one's social support from others seems to be related to depressive symptoms in adolescents. Rueger et al. (2010) conducted a longitudinal study to assess the relationship between children's sources of perceived support (i.e., parent, teacher, classmate, friend, school) and their psychological and academic adjustment in middle school students. The data was collected after one month and at the end of the school year. Through correlational analyses, overall, there were significant associations between all sources of support and depressive symptoms, anxiety symptoms, self-esteem, and attitudes toward school. However, all sources of support were more greatly correlated to depressive symptoms than anxiety symptoms. Through multiple regression analyses of the data at the beginning of the school year, perceived parental support was a significant unique predictor of all outcomes (i.e., anxiety symptoms, depressive symptoms, self-esteem, and attitude toward school). The longitudinal analyses including the beginning and end of the

school year showed that parental support continued to be a unique predictor of depressive symptoms, self-esteem, and attitude toward school, but not anxiety symptoms. The study suggested that all sources of support reduced students' depressive feelings and increased their self-esteem, and parental support was the strongest predictor of those effects.

The relationships of a broadly-measured social support to psychological symptoms and well-being were further assessed by Stewart and Suldo (2011). The researchers examined how perceived social support from various sources predicted mental health symptoms and well-being in middle school students. Through correlation analyses, students' perceptions of social support from teachers, parents, and classmates were all negatively associated with both internalizing and externalizing symptoms and all positively associated with life satisfaction. The simultaneous regression analyses showed that parental support was the strongest predictor of both types of symptoms and life satisfaction, whereas classmate support was a significant unique predictor of internalizing symptoms and life satisfaction, and teacher support was a significant unique predictor of externalizing symptoms. Social support explained 45% of the variance in life satisfaction and 16% and 27% of the variances in internalizing and externalizing symptoms, respectively, suggesting that students' perceived social support may influence more on their well-being than mental health problems.

Social support among adolescents seems to have stronger relationship to their self-esteem and well-being than psychological problems. However, depressive symptoms have drawn more attention among researchers in the social support field. Using an in-depth measure of social support, Newman, Newman, Griffen, O'Conner, and Spas (2007) conducted a study combining longitudinal and cross-sectional designs,

assessing the relationship of peer and familial support to depressive symptoms among students experiencing the significant stress of transitioning from middle to high school. During the transitioning process to high school, students decreased their sense of school belongingness and their depressive symptoms were increased. The cross-sectional analysis indicated that parental support and school belonging were significantly associated with depressive symptoms. The longitudinal analysis further explained that a change in both peer and familial support were additional factors increasing depressive symptoms. Based on this study, it is assumed that an inability to receive support from peers and schools may exacerbate students' depressive symptoms during the stressful event of transitioning to high school. This study also indicated the importance of assessing adolescents' social support from a wide range of sources, including school, to understand their emotional problems.

Studies of school children in the U.S. generally supported that social support from a variety of sources predicts decreasing various psychological symptoms and increasing well-being. For Japanese individuals, perceived social support may have a more significant influence on their psychosocial functioning than in Westerners because of their greater level of relatedness with others. There is a very limited number of Japanese studies assessing the relationship between social support and psychological well-being in adolescents and college students. Okayasu, Shimada, and Sakano (1993) conducted a study assessing the effects of students' expectancy for social support on school stresses (i.e., stress related to relationships with teachers, relationships with friends, after-school clubs, and academics) and stress reactions (i.e., moodiness/anger, depression/anxiety, helplessness, and somatic symptoms) among middle school students. For boys, high

expectations for support from mothers, younger siblings, and teachers were significantly associated with reduced moodiness/anger and helplessness, but not depression/anxiety or somatic symptoms. For girls, all types of social support were negatively related to helplessness. Support from fathers and younger siblings was associated with depression/anxiety, while support from both parents and younger siblings was linked to moodiness/anger. The researchers discussed that mother's support was generally more effective for stress reduction among boys; however, girls benefitted more from father's support. In this study, social support generally effectively alleviated children's moodiness/anger and helplessness, but did not effectively reduce depression/anxiety and somatic symptoms. However, one of the characteristics of child depressive symptoms includes irritability and anger tantrums, and hopelessness is one of the depressive symptoms in both children and adults. Therefore, the results of the study suggested that social support might not reduce shared symptoms of depression and anxiety, but alleviated some of the depressive symptoms in middle school children.

A feeling of helplessness is one of the depressive symptoms, and the relationship of social support to helplessness was found in a variety of samples. Shimosaka's (2001) correlational analyses between helplessness and expectations of social support among middle school, high school, and college students showed that male students' expectations to receive support from teachers and friends/peers were negatively associated with helplessness related to self, and their expectations for receiving support from friends/peers and family were negatively associated with helplessness related to others. On the other hand, female students' expectations of familial support were negatively correlated with helplessness related to others. The results indicated that among

adolescents and college students, their expectations of social support from various sources were negatively related to their helpless feelings.

Social support is influential to psychological symptoms especially when individuals feel great stress such as transitioning to a new environment. Wada (1992) conducted a study to assess the relationship of perceived social support to emotional well-being, including depressive and anxious thoughts and loneliness, among freshmen just starting college. The result showed that perceived support from friends and parents had a significant effect on students' feelings of loneliness. Students who perceived support from parents were less likely to have depressive thoughts. The hierarchical multiple regression analyses revealed that the level of loneliness was determined by social support from friends, mostly emotional support. Students who actually received more social support than they desired were less likely to feel lonely and more likely to be satisfied with their college life. The results suggested that college students who received social support were less likely to have depressive symptoms, but social support was not related to anxiety symptoms.

Adolescents receive social support including various types and sources of support (Malecki et al., 2003), and social support is related to many outcomes including self-esteem (Rueger et al., 2010), well-being (Stewart & Suldo, 2001), and depressive symptoms (e.g., Newman et al., 2007). Among psychological problems, adolescents' social support seems to be more related to depressive symptoms, including helpless feelings and loneliness, rather than anxiety symptoms (Okayasu et al., 1993; Rueger et al., 2010; Wada, 1992).

Current Study and Hypotheses

Several studies have shown the associations of self-forgiveness to depression and anxiety, and the effect of self-forgiveness on psychological well-being, through a one-dimensional self-forgiveness (i.e., considering higher scores of the self-forgiveness scale as forgiveness and considering lower scores of the self-forgiveness scale as a failure to forgive; Maltby et al., 2001; Mauger et al., 1992; Wohl et al., 2008) but not through the process-oriented approach of self-forgiveness. The study of Woodyatt and Wenzel (2013b) indicated that offenders' greater perception of belongingness and lower levels of feelings of rejection from others may reduce the defensive attitudes of pseudo self-forgiveness, which, in turn, facilitates genuine self-forgiveness. In addition, Fisher and Exline (2006) and Worthington and Langberg (2012) discussed that finding supportive people to affirm offender's value and a safe place to talk about their feelings related to shame and guilt may reduce their self-punitiveness and promote genuine self-forgiveness.

The purpose of the current study is to examine how each response of the process-oriented approach of self-forgiveness predicts depressive and anxiety symptoms in Japanese high school students, and the possible mediation effects of fear of negative evaluation and social support on these relationships. Specific hypotheses are the following;

Hypothesis 1: Genuine self-forgiveness will be negatively related to depression and anxiety.

Hypothesis 2: Pseudo self-forgiveness will predict anxiety.

Hypothesis 3: Self-punitiveness will predict depression.

Hypothesis 4: Fear of negative evaluation will have mediator effects on the associations between genuine self-forgiveness and anxiety and between pseudo self-forgiveness and anxiety.

Hypothesis 5: Social support will have mediator effects on the associations between genuine self-forgiveness and depression and between self-punitiveness and depression.

Figure 1 shows the proposed path model in the process-oriented approach of self-forgiveness.

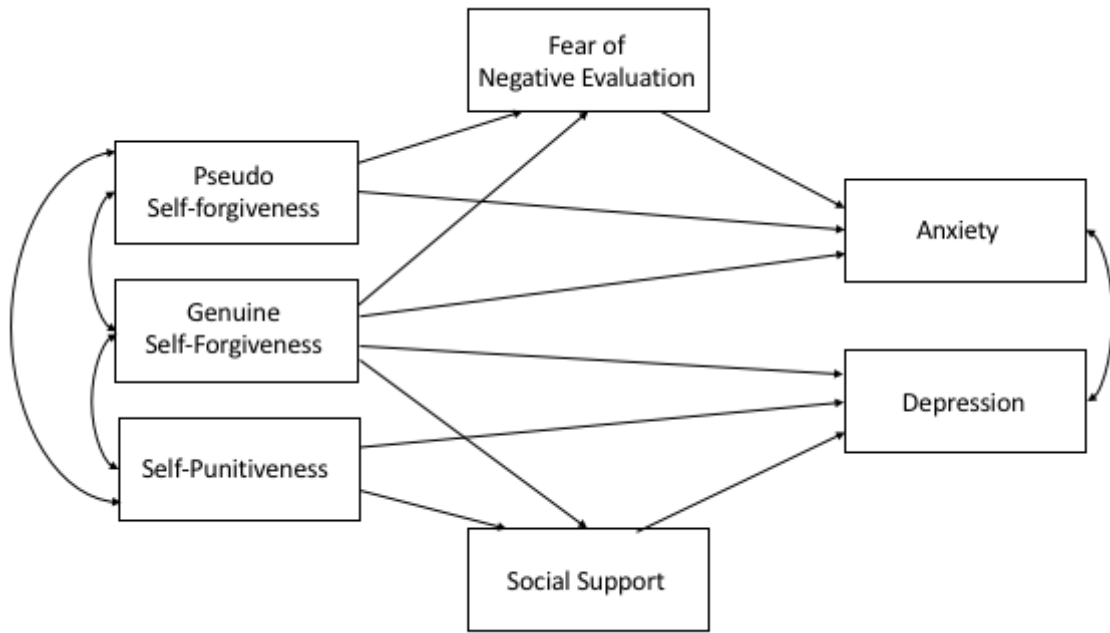


Figure 1.

The Proposed Path Model of Self-Forgiveness on Anxiety and Depression

CHAPTER II: METHOD

Participants

Participants were initially 310 seniors (ages 17 or 18) at a Japanese public high school in a large northern city. This high school was chosen because both the school size and academic achievements were relatively average in the area, and it was also a convenience sample through a connection at the school. Of those participants, 136 students (43.87%) did not report offensive interpersonal events, and they were removed from this study because of the uncertainty of whether they answered the questions based on their interpersonal offenses. Twenty three additional students were removed because of significant numbers of unanswered items, including students who did not complete the questionnaire and who skipped an entire measurement. Bennett (2001) explained that 10% or more of missing data were likely to lead to biased statistical analysis. Missing data were considered as completely at random, because eight students missed answering one question each, and these missing items were all different items. Their percentages of missing data within a measure were 10% or less; therefore, missing data were replaced by using the average of the measure of the subject. There were no extreme scores (defined as >3.5 standard deviations away from the mean). Therefore, data from 151 students were used in this study. Participants were 95 males (62.9%) and 54 females (35.8%), and 2 students identified themselves as sexual/gender minority. The mean age of participants was 17.43 ($SD = .50$).

Data Collection

The current study has received an approval from the institutional review board at a public university in the South region of the U.S. Prior to the data collection, informed consent was sent to parents of all senior students (316 students) to ask permission for survey participation. Informed consent was written in a way that if parents did not permit their children to participate in the survey, their children were not be able to participate while other students worked on the survey. Students were asked to give assent to completing the survey. Students were informed that participation was voluntary and taking the survey was considered assent. Three hundred ten students attended the school on the data-collection day because of 6 absent students, and all 310 students agreed to participate in completing this survey. The survey data were collected during their homeroom time through teachers, and their completion time was about 30 minutes.

Measures

Demographic Questions and Offensive Interpersonal Event

Students were asked to write their ages and describe their gender based on male, female, and the other, but no other identifying information was collected to ensure anonymity. When choosing the other, they were encouraged to write briefly regarding their gender. Questions about an offensive interpersonal event were based on Woodyatt and Wenzel's (2013b) procedure. Students were asked briefly to write the last interpersonal offense that they had committed. Examples that students wrote were "when I was sick, I ignored a friend" and "I had an argument with my mother." Then, they 1) rated how severe they thought it was at that time (1 = *not severe at all*, 7 = *very severe*), 2) wrote the types of offense after they were provided some offense types (e.g., betrayal

of trust, cheating on a boyfriend/girlfriend, fights/arguments, insult), 3) wrote the type of relationship with the victims after they were provided some relationship types (e.g., friends, boyfriend/girlfriend, peers, teachers, parents), and 4) rated the importance of the relationship with the victims from 1 (*not important at all*) to 7 (*very important*). The offense severity was assessed through the question, “How severe was the offense you committed?” The importance of the relationship was also measured through the question, “How important is the relationship to the person?”

Translating Measures

Three measures of the current study (i.e., *the Differentiated Process Scale of Self-Forgiveness*, DPSSF; *the Physiological Hyperarousal Scale for Children*, PH-C; and *the Child and Adolescent Social Support Scale*, CASSS) had to be translated from English to Japanese. They were translated from English to Japanese by the author, and a high school English teacher in Japan back translated them. The majority of discrepancies between translators was related to age-appropriate wording, and translations of the English teacher were incorporated. When translations had discrepancies regarding the content/meaning, the author explained these issues to the English teacher, and they reached consensus. Since the DPSSF has been written for adults, the Japanese translation was modified so that high school students can easily understand the content. For example, “wrongdoing” was worded as “bad thing that I did.” “Unforgivable” was worded as “unable to be forgiven.”

Process-Oriented Approach of Self-Forgiveness

All three subscales of *the Differentiated Process Scale of Self-Forgiveness* (DPSSF, Woodyatt & Wenzel, 2013a) were used: the 6-item Pseudo Self-Forgiveness

scale (PSF), the 6-item Self Punitiveness scale (SP), and the 7-item Genuine Self-Forgiveness scale (GSF). The DPSSF is conceptually distinguished between three self-responses after offending someone in order to process one's own behavior. The PSF scale assesses offenders' deflection of responsibility and belittlement of their wrongdoing, as well as anger over the treatment received and uncertainty of the morality of their actions. The SP scale refers to offenders' dejection, inability to move on, self-condemnation, and sense of deservingness of punishment, in addition to uncertainty over the cause of their actions. The GSF items are characterized as seriously acknowledging one's wrongdoing and working through his or her action and guilt. All three subscales use a 7-point Likert-type scale (1 = *do not agree at all*, 7 = *strongly agree*). The PSF items include "I feel the other person got what they deserved" and "I wasn't the only one to blame for what happened." SP items include "What I have done is unforgivable" and "I can't seem to get over what I have done." Some GSF items are "I have tried to think through why I did what I did" and "I am trying to learn from my wrongdoing." Alpha coefficients of PSF, SP, and GSF were satisfactory (.81, .85, and .85; Woodyatt & Wenzel, 2013a). Other studies reported that alpha coefficients of GSF and PSF items were .85 and .74-.79 (Woodyatt & Wenzel, 2013b, 2014). For the current sample of Japanese high school students, the Cronbach's alphas were .75 (95% CI = .68-.81) for PSF, .84 (95% CI = .80-.88) for SP, and .91 (95% CI = .89-.93) for GSF.

Anxiety and Depression

The Japanese version of the Positive and Negative Affect Schedule for Children (J-PANAS-C; Yamasaki, Katsuma, & Sakai, 2006) consists of 12 items of positive affect (PA) and 12 items of negative affect (NA) scales. Adolescents were asked to indicate

how they felt during the past few weeks on a 5-point Likert-type scale (1 = *very slightly or not at all* to 5 = *extremely*). PA items included “Delighted,” “Energetic,” “Lively,” and “Happy.” Some NA items are “Sad,” “Lonely,” “Blue,” and “Frightened.” The alpha coefficients of PA were .83 and .84 for boys and girls in grades 4-6, respectively, while the coefficients of NA were .85 and .84 in the two samples (Yamasaki et al., 2006). For the current data, the Cronbach’s alphas were .94 (95% CI = .93-.95) for PA and .82 (95% CI = .78-.86) for NA.

The Physiological Hyperarousal Scale for Children (PH-C, Laurent, Catanzaro, & Joiner, 2004) consists of 18 items assessing physiological hyperarousal characterized as bodily manifestations of autonomic arousal. The PH-C was translated into Japanese for the current study. Students were instructed to rate on a 5-point Likert scale (1 = *very slightly or not at all* to 5 = *extremely*) how often they have experienced autonomic arousals over the past few weeks. Some items are “Dry mouth,” “Sweaty hands/palms,” “Tingling,” and “Blushing.” In a student sample in grades 6-12, the alpha coefficient of the original English version of PH-C was .87 (Laurent et al., 2004). The Cronbach’s alpha of PH for the current sample was .92 (95% CI = .90-.94).

Fear of Negative Evaluation

The Fear of Negative Evaluation Scale (FNE; Yamamoto & Tagami, 2001) is a Japanese scale to measure youths’ fear of negative evaluation in Japan. The scale is based on the Brief Fear of Negative Evaluation Scale (BFNE; Leary, 1983), which is designed to measure one’s fear of negative evaluation, consisting of one’s apprehension about how others evaluate, distress over these negative evaluations, and one’s cognitive assumption of how the others will evaluate negatively (Watson & Friend, 1969). The

FNE also considers a youth's developmental level, school environment, and cultural difference. Some items include "I am usually worried about what kind of impression I make" and "When I am talking with someone, I worry about what they may be thinking of me." The FNE is a 10-item measure with a 5-point Likert scale ranging from 1 (*not at all characteristic of me*) to 5 (*extremely characteristic of me*). The alpha coefficient of the FNE among 7th, 8th, and 9th grade students was .87 (Yamamoto & Tagami, 2001). The Cronbach's alpha of FNE in this sample was .89 (95% CI = .87-.92).

Social Support

The Child and Adolescent Social Support Scale (CASSS; Malecki et al., 2003) is a 60-item self-report scale to assess perceived social support among 3rd to 12th grade children. Sixty items are from 5 different sources, including parents, teachers, classmates, close friends, and school. Each source consists of 12 items, measuring 4 types of perceived support: 3 items assessing emotional support (i.e., feelings of being loved or cared for), 3 items assessing informational support (i.e., receiving advice or information), 3 items assessing instrumental support (i.e., time, resources, or financial support), and 3 items assessing appraisal support (i.e., feedback). One example of an emotional support item from parent includes "My parents understand me." "My classmates give me ideas when I don't know what to do" is an example of an informational support item from classmate. Instrumental support items include "My teacher spends time with me when I need help." "My close friend nicely tells me the truth about how I do on things" is an appraisal support item.

The CASSS produces 5 subscale scores (i.e., parents, teachers, classmates, close friends, and school), and the total score is the sum of all 5 subscale scores. On each

subscale, students were asked to rate the frequency with which they perceived those 12 supporting behaviors based on a 6-point Likert-type scale (1 = *never*, 6 = *very often*). In addition, students also rated the importance of those behaviors to them based on a 3-point Likert-type scale (1 = *not important*, 3 = *very important*). The current study only used a total frequency score to assess its mediation effect. The alpha coefficient of the CASSS was .89 to .93 among 7th and 8th grade students (Rueger et al., 2010). The Cronbach's alpha for this study was .97 (95% CI = .96-.98).

Data Analysis

Data cleaning, means and standard deviations of all measures, their internal consistencies, and correlations among all variables were calculated using SPSS 23. All variables were at interval level, and values of the outcome variables were independent. Shapiro-Wilk's tests indicated normal distributions of depressive symptoms and social support but not of genuine self-forgiveness, pseudo self-forgiveness, self-punitiveness, anxiety symptoms, and fear of negative evaluation (see Table 1). However, visually inspecting their histograms and Q-Q plots indicated that all variables were approximately normally distributed. Homoscedasticity, meaning that the error term is the same across all values of the independent variables, was also tested through residual histograms, P-P plots, and scatter plots. There were no perfect linear relationships between two or more predictors, and their correlations were less than .80 (Field, 2009).

Path analyses were conducted using Amos 23 to investigate the associations among genuine self-forgiveness, pseudo self-forgiveness, self-punitiveness, anxiety symptoms, depressive symptoms, fear of negative evaluation, and social support. The path model was tested using maximum likelihood estimation. Goodness of model fit was

Table 1.

Shapiro-Wilk Test of Normality

	<i>W</i> Statistic	<i>p</i> -value
Genuine Self-Forgiveness	.96	< .01
Pseudo Self-Forgiveness	.97	< .01
Self-Punitiveness	.95	< .01
Fear of Negative Evaluation	.96	< .01
Social Support	.99	.28
Anxiety	.92	< .01
Depression	.98	.16

tested with multiple values. Chi-square (χ^2) was used as a traditional measure for overall model fit. Other goodness of fit measures used were the Comparative Fit Index (CFI), Tucker-Lewis Index (TLI), and Root Mean Square Error of Approximation (RMSEA). Hu and Bentler (1991) suggested CFI and TLI scores greater than .95 are preferred for a good fit. For RMSEA (LO90, HI90), a value equal to or less than .05 is a good fit, a value of .05-.08 is a moderate fit, and a value of .08-.10 is a marginal fit (Kline, 2011).

In the process of testing the proposed model, both theoretical and statistical considerations were considered. The steps of modifications were conducted based on Kenny's model (2001). First, the analysis included adding all not-predicted paths to make the just-identified (i.e., saturated) model, and significances of these paths were tested. The statistically significant not-predicted paths were retained whereas the nonsignificant not-predicted paths were removed from the model. Next, the predicted paths were tested in the model. The statistically significant predicted paths were retained while the statistically nonsignificant predicted paths were removed from the model. Then, the model fit of the final model was assessed with chi-square, CFI, TLI, and RMSEA.

CHAPTER III: RESULTS

Preliminary Analyses

On average participants rated their offense as moderately severe ($M = 4.03$, $SD = 1.81$), and the relationship with the victim as relatively important ($M = 4.89$, $SD = 2.03$). Reported offenses were all interpersonal offenses, with the majority of participants classifying their offense as an insult (31.8%), a fight or argument (22.5%), betrayal of trust (17.2%), ignoring (13.9%), act of selfishness (10.6%), or others (4%), including not respecting enough and not meeting others' expectations. The type of relationship with the victims was categorized as friends (64.4%), followed by parents (17.1%), siblings (7.5%), boyfriends or girlfriends (6.2%), and others (4.8%), including siblings, teachers, and strangers. Table 2 shows the means, standard deviations, range, and bivariate correlations for variables including, genuine self-forgiveness, pseudo self-forgiveness, self-punitiveness, fear of negative evaluation, social support, anxiety and depression. Genuine self-forgiveness and pseudo self-forgiveness, genuine self-forgiveness and self-punitiveness, and pseudo self-forgiveness and self-punitiveness were correlated at strengths of $r = -.30$ ($p < .001$), $.65$ ($p < .001$), and $-.33$ ($p < .001$), respectively. These correlations are consistent with the study of Woodyatt and Wenzel (2013a).

Path Analysis

The modifications of the proposed model were conducted. Not-predicted paths that were not significant were removed from the just identified model (see Table 3). These removed not-predicted paths were 3 paths from pseudo self-forgiveness to social

□ Table 2.
Bivariate Correlation, Means, Standard Deviations, and Ranges

	1	2	3	4	5	6	7
1. Genuine Self-Forgiveness	--						
2. Pseudo Self-Forgiveness	-.30***	--					
3. Self-Punitiveness	.65***	-.33***	--				
4. Fear of Negative Evaluation	.30***	-.04 <i>ms</i>	.35***	--			
5. Social Support	.10 <i>ns</i>	-.07 <i>ms</i>	.12 <i>ms</i>	-.07 <i>ms</i>	--		
6. Anxiety	.31***	-.22**	.49***	.33***	.08 <i>ms</i>	--	
7. Depression	.28**	-.42***	.41***	.23**	.29***	.58***	--
Mean (SD)	27.70 (11.43)	17.91 (7.55)	21.42 (10.07)	33.77 (10.56)	223.61 (51.91)	59.12 (19.59)	83.00 (12.70)
Range (min-max)	42 (7-49)	30 (6-36)	38 (7-45)	40 (10-50)	273 (87-360)	93 (30-123)	72 (40-112)

***p < .01, **p < .001, ns = not significant; 'Range' reflects minimum and maximum scores obtained

Table 3.

Removed Not-Specified and Predicted Paths

Removed Not-Predicted Paths	Standardized Coefficients	Significance (p-value)
Pseudo Self-Forgiveness → Social Support	-.031	.772
Social Support → Anxiety Symptoms	.039	.573
Error Term of Fear of Negative Evaluation ↔ Error Term of Social Support	-.125	.130
Removed Predicted Paths		
Genuine Self-Forgiveness → Anxiety Symptoms	-.059	.521
Genuine Self-Forgiveness → Depression Symptoms	-.055	.534
Genuine Self-Forgiveness → Fear of Negative Evaluation	.135	.180
Genuine Self-Forgiveness → Social Support	.042	.693
Pseudo Self-Forgiveness → Anxiety Symptoms	-.089	.228
Pseudo Self-Forgiveness → Fear of Negative Evaluation	.099	.218
Self-Punitiveness → Social Support	.090	.401

support, from social support to anxiety symptoms, and from error term of fear of negative evaluation to error term of social support. Then, significance of paths specified to be included in the model were assessed and removed if they were not significant (see Table 3). These removed predicted paths were 7 paths from genuine self-forgiveness to anxiety symptoms, from genuine self-forgiveness to depressive symptoms, from genuine self-forgiveness to fear of negative evaluation, from genuine self-forgiveness to social support, from pseudo self-forgiveness to anxiety symptoms, from pseudo self-forgiveness to fear of negative evaluation, and from self-punitiveness to social support. The final model (shown in Figure 2) demonstrated good fit, $\chi^2 (10, N = 151) = 9.764, p < .461$, CFI = 1.000, TLI = 1.002, RMSEA < .001. (90% CI .000-.087). All significant paths and correlations in the final path model were listed in Table 4.

Hypothesis 1 suggested that genuine self-forgiveness would negatively predict anxiety and depressive symptoms. However, the path model reported that genuine self-forgiveness does not significantly predict anxiety symptoms ($\beta = -.059, p = .521$) and depressive symptoms ($\beta = -.055, p = .534$). Hypothesis 2 predicted that pseudo self-forgiveness would be positively related to anxiety symptoms. The model suggested that pseudo self-forgiveness does not significantly predict anxiety symptoms ($\beta = -.089, p = .228$). Hypothesis 3 suggested that self-punitiveness would predict depressive symptoms. The path model revealed that self-punitiveness predicts depressive symptoms ($\beta = .235, p = .002$). Hypothesis 4 suggested that fear of negative evaluation would have mediator effects on the associations between genuine self-forgiveness and anxiety and between pseudo self-forgiveness and anxiety. Fear of negative evaluation predicted anxiety ($\beta = .179, p = .016$). However, the model showed that both paths from genuine

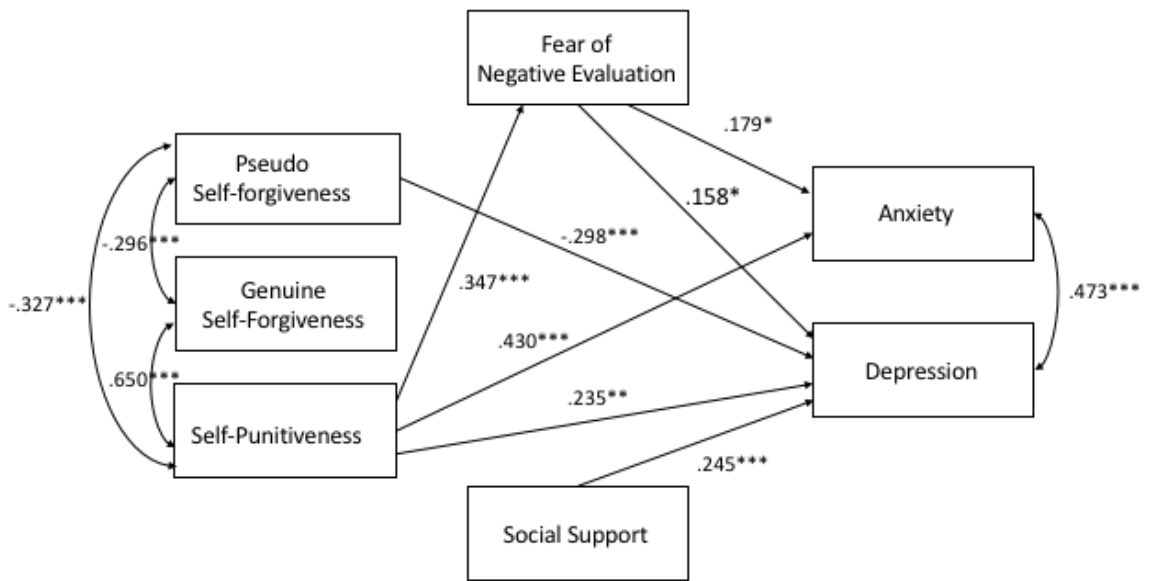


Figure 2.

The Final Path Model of Self-Forgiveness on Anxiety and Depression

* $p < .05$, ** $p < .01$, *** $p < .001$.

Table 4.

Significant Not-Specified and Predicted Paths in the Final Path Model

Significant Not-Predicted Paths	Standardized Coefficients	Significance (p-value)
Pseudo Self-Forgiveness → Depression Symptoms	-.298	<.001
Self-Punitiveness → Anxiety Symptoms	.430	<.001
Self-Punitiveness → Fear of Negative Evaluation	.347	<.001
Fear of Negative Evaluation → Depression Symptoms	.158	.029
Significant Predicted Paths		
Self-Punitiveness → Depression Symptoms	.235	.002
Fear of Negative Evaluation → Anxiety Symptoms	.179	.016
Social Support → Depression Symptoms	.245	<.001
Genuine Self-Forgiveness ↔ Pseudo Self-Forgiveness	-.296	<.001
Genuine Self-Forgiveness ↔ Self-Punitiveness	.650	<.001
Pseudo Self-Forgiveness ↔ Self-Punitiveness	-.327	<.001
Error Term of Anxiety Symptoms ↔ Error Term of Depression Symptoms	.473	<.001

self-forgiveness to fear of negative evaluation and from pseudo self-forgiveness to fear of negative evaluation are not significant ($\beta = .135, p = .180$ and $\beta = .099, p = .218$, respectively). Therefore, the model did not support these mediation effects. Hypothesis 5 predicted that social support would have mediator effects on the associations between genuine self-forgiveness and depression and between self-punitiveness and depression. Social support predicted depressive symptoms ($\beta = .245, p < .001$). However, paths from genuine self-forgiveness to social support and from self-punitiveness to social support were not significant in the model ($\beta = .042, p = .693$ and $\beta = .090, p = .401$, respectively). Therefore, social support did not have mediation effects.

In addition to significant predicted paths, the path analysis suggested that four not-predicted paths in the hypothesized model are significant in the current path model. Self-punitiveness predicted anxiety symptoms and fear of negative evaluation ($\beta = .430, p < .001$ and $\beta = .347, p < .001$, respectively). Fear of negative evaluation also predicted depressive symptoms ($\beta = .158, p = .029$). Therefore, fear of negative evaluation had mediator effects on the relationships between self-punitiveness and anxiety and between self-punitiveness and depressive symptoms. Also, pseudo self-forgiveness negatively predicted depressive symptoms ($\beta = -.298, p < .001$). The current path model explained 27.0% of the variance in anxiety symptoms and 31.1% of the variance in depressive symptoms.

CHAPTER IV: DISCUSSION

Self-forgiveness is a relatively new research area, and compared to forgiveness of other, the research on self-forgiveness are still limited (Carpenter et al., 2016). The process-oriented approach to self-forgiveness has been recently introduced after careful considerations of outcomes after one's offense, the mechanism of restoring damaged self-regard, and the offender's motivation for prosocial behaviors toward the victim (Woodyatt & Wenzel, 2013a). Factors facilitating forgiveness could be very unique to different cultures (Hook, Worthington, & Utsey, 2009), and the research on self-forgiveness in Japan is even more limited. The literature points to collectivistic individuals having a greater level of concerns regarding how others negatively view them (Norasakkunkit, Kitayama, & Uchida, 2012). Also, support from others has been reportedly related to psychological symptoms among adolescents (Rueger, Malecki, & Demaray, 2010). The current study sought to identify Japanese high school students' mental health outcomes after they offended someone and to examine how self-forgiveness is related to these outcomes. Specifically, the study sought to assess a possible model of process-oriented self-forgiveness considering culturally and developmentally salient factors (i.e., fear of negative evaluation and social support) to predict mental health outcomes among high school students in Japan.

It was predicted that genuine self-forgiveness would negatively predict both depression and anxiety symptoms. However, the path model in the current study showed that genuine self-forgiveness did not predict these symptoms. When considering one's

levels of pseudo self-forgiveness and self-punitiveness, genuine self-forgiveness was not significantly related to depressive and anxiety symptoms. This result contradicted previous primary studies (cf. Maltby et al., 2001; Mauger et al., 1992, and a meta-analysis (Davis et al., 2015a) with the latter one suggesting a significant negative association between self-forgiveness and psychological distress, especially depressive and anxiety symptoms. However, these studies did not consider the process-oriented self-forgiveness approach, but rather considered self-forgiveness as an endpoint (i.e., considering higher scores as forgiveness and lower scores as a failure to forgive) without considering process to reach self-forgiveness. The approach considering self-forgiveness as an endpoint seems to produce inconsistent results with some studies showing that forgiveness is related to unwillingness to repent and to learn humbling lessons from their offenses (Fisher & Exline, 2006) and that some offenders, who relatively easily forgave themselves, described victims as deserving the offenses (Zechmeister & Romero, 2002). Therefore, it could be assumed that, in this approach, a failure to forgive could be similar to self-punitiveness and the results of forgiveness could be similar to those of both genuine and pseudo self-forgiveness. Woodyatt and Wenzel (2013a) discussed that it is crucial for those who genuinely forgive oneself to attempt to understand one's wrongdoing and work through one's guilt. Acknowledging this process to achieve genuine self-forgiveness, it could be argued that genuine self-forgiveness does not necessarily decrease depressive and anxiety symptoms. It could be argued that pseudo self-forgiveness could reduce psychological symptoms but genuine self-forgiveness may not necessarily alleviate these symptoms because individuals who use genuine self-forgiveness have to go through painful feelings.

It was hypothesized that pseudo self-forgiveness is positively related to anxiety symptoms; however, the results of the current path model demonstrated that pseudo self-forgiveness does not predict anxiety symptoms, but participants with high levels of pseudo self-forgiveness are less likely to report depressive symptoms. There is no previous empirical data directly assessing the relationship between pseudo self-forgiveness and psychological symptoms. However, some scholars suggested that those who claim to forgive themselves actually deny what they have done wrong to reduce their painful feelings (Fisher & Exline, 2006; Hall & Fincham, 2005). Woodyatt and Wenzel (2013a) also explained that characteristics of pseudo self-forgiveness is denying their offense and minimizing guilt and shame. It is further suggested that those with high levels of pseudo self-forgiveness feel relatively positive about themselves and do not engage in self-punishment or self-hatred behaviors (Wenzel, Woodyatt, & Hedrick, 2012). Therefore, the initial hypothesis about the positive effect of pseudo self-forgiveness on anxiety symptoms was not supported; however, the negative relationship between pseudo self-forgiveness and specifically, depressive symptoms is consistent with previous studies (Fisher & Exline, 2006; Hall & Fincham, 2005; Woodyatt & Wenzel, 2013a). This result suggested that those who claimed to forgive themselves actually denied their wrongdoing and did not engage in restoring relationships with the victims, but consequently felt better about themselves.

The current path model confirmed that individuals with high levels of self-punitiveness tend to have more depressive and anxiety symptoms. Similar results have been found in previous studies, using the approach considering self-forgiveness as an endpoint, and these previous studies suggested that a failure to forgive oneself was

positively related to depression and anxiety (e.g., Maltby et al., 2001; Mauger et al., 1992; Sternthal et al., 2010). The research using the process-oriented forgiveness model also supported the current results of self-punitiveness' positive relationships to depressive and anxiety symptoms. Woodyatt and Wenzel (2013a) explained that those who experienced self-punitiveness felt high levels of shame and guilt and, therefore, they had desires to punish themselves, and this explanation further supports the current result that self-punitiveness positively predicted depressive symptoms. The positive association between self-punitiveness and anxiety symptoms is consistent with the result of the empirical study showing that offenders who experience self-punitiveness tend to avoid the victims and offense-related situations or thoughts (Woodyatt & Wenzel, 2013a). Therefore, the result that self-punitiveness predict depressive and anxiety symptoms was fully supported by the literature.

The relationships of both the process-oriented approach and the approach considering self-forgiveness as an endpoint to psychological symptoms were just explained through measurement issues and their difference in definitions. Further examinations on difference between the current results and the result of the self-forgiveness study in Japan may provide another perspective to understand the current results. It was unexpected that genuine self-forgiveness did not predict anxiety and depressive symptoms, because these results contradict the definition of genuine self-forgiveness and previous studies in the U.S. (cf. Sternthal, Williams, Musick, & Buck, 2010). Instead, self-punitiveness predicted these symptoms in the current study. However, the Japanese study of Ishikawa and Hamaguchi (2007) showed that "passive self-forgiveness" (i.e., self-forgiveness focusing on assessing the extent of self-blaming,

depressive thoughts, and regret) predicts more internalized problems than “active self-forgiveness” (i.e., self-forgiveness focusing on making sense of their unfortunate situations, supporting their self-worth, and encouraging themselves). The former type of self-forgiveness explained by these scholars might have similar characteristics of self-punitiveness, whereas the latter type of self-forgiveness might be more similar to genuine self-forgiveness. These similarities could imply that self-punitiveness is a stronger predictor of depressive and anxiety symptoms than genuine self-forgiveness, and the current study was able to find the positive effect of self-punitiveness on these symptoms but was unable to find the effect of genuine self-forgiveness on them. This inability to find the negative relationship between genuine self-forgiveness and symptoms might be related to interpersonal offenses. The Japanese measure used by Ishikawa and Hamaguchi (2007) was a dispositional measure and did not involve interpersonal offences; therefore, individuals did not go through painful feelings related to the offence toward victims but focused on their own failures. Japanese culture emphasis on interpersonal harmony; therefore, Japanese people might feel worse when they commit interpersonal offenses to someone even if they have reached genuine self-forgiveness, compared to those who forgive their failed personal issues. Therefore, the study of Ishikawa and Hamaguchi (2007) using “passive self-forgiveness” and “positive self-forgiveness” and the inclusion of interpersonal offenses together might explain the current result that genuine self-forgiveness did not predict anxiety and depressive symptoms.

The current path model did not support the predictions of both genuine self-forgiveness and pseudo self-forgiveness to fear of negative evaluation, and therefore, fear

of negative evaluation did not have mediation effects on the relationships between genuine self-forgiveness and pseudo self-forgiveness and anxiety symptoms. However, the current path model showed a mediation effect of fear of negative evaluation on the positive association between self-punitiveness and anxiety symptoms. This means that those with high levels of self-punitiveness are more likely to have anxiety symptoms, and this relationship is also explained through their fear to be negatively evaluated by others.

First, both genuine self-forgiveness and pseudo self-forgiveness did not predict fear of negative evaluation. These results contradict previous research findings that threats to belonging could possibly lead to pseudo self-forgiveness because these threats increased offenders' defensive attitude (i.e., minimizing their own faults) whereas one's perception of belongingness could possibly facilitate genuine self-forgiveness because this perception reduced such defensive attitude (Woodyatt & Wenzel, 2013 b). Second, instead, self-punitiveness was significantly, positively related to fear of negative evaluation. This is supported by Woodyatt and Wenzel's (2013a) explanation that those who have high levels of self punitiveness are likely to avoid the victims, offense-related situations, and thoughts because their emotion-focused coping does not work well to reduce their distress. In addition, some cultural factors might influence this positive relationship between self-punitiveness and fear of negative evaluation. The Australian study by Wong and Moulds (2014) reported that participants with Chinese ethnicity reported more fear of negative evaluation than participants with Anglo ethnicity. The one cross-cultural study assessing fear of negative evaluation in the U.S. and Japan further showed that interdependent self-construal is related to the other-focused component of social anxiety (e.g., one's potential to offend others or cause trouble for them due to one's

own inappropriate behavior) (Norasakkunkit et al., 2012). East Asians are more likely to think and pay attention to the world relatively holistically, whereas Westerners are more likely to think and pay attention to the world relatively analytically (Nisbett, Peng, Choi, & Norenzayan, 2001). Therefore, Japanese offenders with this holistic cognition might focus on wondering how other people negatively perceive them and their wrongdoings, and this rumination could be worsening anxiety and depressive symptoms.

Lastly, it was hypothesized that fear of negative evaluation has a significant positive relationship with anxiety symptoms. This result might be explained by previous studies showing that fear of negative evaluation is significantly associated with social anxiety (e.g., Cloninger et al., 1993; Wang et al., 2012), and a cross-cultural study suggesting that fear of negative evaluation may have a greater role on Japanese individuals' anxiety symptoms than these symptoms of individuals in the U.S. (Norasakkunkit et al., 2012). Therefore, the mediation effect of fear of negative evaluation on the relationship between self-punitiveness and anxiety symptoms suggested that fear of negative evaluation may be one mechanism by which self-punitiveness increased anxiety symptoms.

Through the assessment of not-predicted paths, the current model found that fear of negative evaluation predicts depressive symptoms. While not predicted, this is consistent with the suggestion of Wang et al. (2012) that negative evaluation from others might create the biased schema of personal failure, which increases one's depressive symptoms. Combining the positive associations of self-punitiveness with fear of negative evaluation and depressive symptoms, fear of negative evaluation had the mediation effect on the positive association between self-punitiveness and depressive symptoms. In other

words, fear of negative evaluation may be one of the mechanisms by which self-punitiveness increased depressive symptoms. Therefore, those who use self-punitiveness tend to have depressive symptoms, and one's fear to be negatively evaluated by others further increases this tendency.

It was predicted that both genuine self-forgiveness and self-punitiveness are significantly related to social support; however, these predictions were not supported. These results contradict previous studies suggesting that through establishing supportive and safe relationships with family and friends, offenders can talk and process shame-related feelings and finally achieve genuine self-forgiveness (Fisher & Exline, 2006; Worthington & Langberg, 2012). The current study also unexpectedly showed that regardless of one's response after offending someone, receiving social support from others such as parents, friends, and teachers is related to increasing adolescents' depressive symptoms. This result contradicts previous studies (e.g., Newman et al., 2007; Okayasu et al., 1993) and especially the study of Rueger et al. (2010) showing that various sources of support are negatively related to depressive and anxiety symptoms among adolescents. One of the possible reasons for this positive correlation between social support and depressive and anxiety symptoms might be related to the validity of the measure used to assess social support in this study. This study is the first study that the translated CASSS was used among Japanese adolescents, and careful examination of its validity, especially criterion validity, might be needed.

Clinical Implications

The current study provided some clinical applications that might be useful to people in collectivistic cultures, especially Japanese high school students. The current

result showed that self-punitiveness was positively associated with both depressive and anxiety symptoms; therefore, the screening of levels of self-punitiveness might be useful to anticipate anxiety and depressive symptoms among high school students regardless of whether they have interpersonally offended others because those who use pseudo self-forgiveness might not admit their offenses themselves. Regarding treatment, the study of Cornish and Wade (2015b) showed that a 8-week self-forgiveness intervention decreased self-condemnation and increased self-forgiveness for a specific offense, and these changes, in turn, decreased general psychological distress and increased trait self-compassion. Cornish and Wade (2015a) described a 4-component therapeutic model of self-forgiveness that was used for the intervention study of Cornish and Wade (2015b). Their model consisted of accepting responsibility, expressing remorse, desire for restoration, and obtaining the emotional state of self-forgiveness. This evidence-based 4-component therapeutic model in the U.S. might also be useful to a Japanese adolescent population because of its success reducing both self-punitiveness and general psychological distress.

Another implication is that treatments reducing fear of negative evaluation might alleviate psychological symptoms, especially among those who have high levels of self-punitiveness because of the mediation effects of fear of negative evaluation on the positive relationships between self-punitiveness, and anxiety and depressive symptoms. Clinicians may want to pay special attention to the unique role of fear of negative evaluation when understanding self-forgiveness and psychological symptoms among collectivistic individuals. In addition, Japanese high school students have greater levels of fear of negative evaluation, compared to elementary and middle school students

(Yamamoto & Tagami, 2007). Therefore, interventions focusing on their fear of how others think about them in a negative manner would be particularly useful for high school students to reduce psychological symptoms.

Careful considerations have to be made regarding the effect of pseudo self-forgiveness on reducing depressive symptoms. Even though this effect promoted psychological benefits, those who use pseudo self-forgiveness do not take responsibility of their offenses (Woodyatt & Wenzel 2013a), which, in turn, hinders the offenders' actual behaviors of restoring the relationships with the victims (Exline et al., 2011). An apology, one form of social reconciliation, from the offender is an important predictor promoting forgiveness, psychological health, and interpersonally healthy behaviors among victims (McCullough et al., 1997), especially when the apologies accompany a great level of sincerity from the offenders and the offenders willingly apology to the victims prior to victims' accusation toward the offenders (Schumann, 2012; Weiner, Graham, Peter, & Zmuidinas, 1991). Also, even though the current result showed that pseudo self-forgiveness predicted less depressive symptoms, this relationship could be temporally and the long-term effect of using pseudo self-forgiveness on psychological symptoms is unknown. Those who use pseudo self-forgiveness tend to avoid taking responsibility and, therefore, do not restore healthy relationships with the victims (Woodyatt & Wenzel, 2013a). If the Japanese offenders commit interpersonal offenses toward someone they have close relationships or at least frequently interact with, the inability to restore relationships with the victims might have detrimental effects on offenders' mental health because of their cultural emphasis on interpersonal harmony and connectedness with others (Markus & Kitayama, 1991).

Recommendations for School Counselors and Teachers

There are some recommendations for school counselors and teachers who work with adolescents, especially adolescents with collectivistic culture. This study showed that high school students might have some anxiety and depressive symptoms after they hurt others including their friends, family members, and teachers. After their offenses, they may have three types of responses. The first response is related to minimizing their offenses to feel better about themselves; however, they may not apologize to the victims, which may leave social conflicts. Another type of response after offending others is called self-punitiveness. Individuals with high levels of self-punitiveness may feel bad about themselves, what they have done, and victims. Therefore, they tend to have anxiety and depressive symptoms. The last type of response is called genuine self-forgiveness. Those with high level of self-forgiveness take responsibility of their offenses, think through what they have done, and try to restore the relationship with victims. Therefore, teachers may want to promote genuine self-forgiveness among their students especially after teachers notice students hurting others.

There are two other factors, possibly influencing the relationships of three types of responses to anxiety and depressive symptoms. These two factors are one's fear to be negatively evaluated by others and social support. The current study showed that one's fear to be negatively evaluated by others positively predicted anxiety and depressive symptoms and its mediation effect of self-punitiveness to these symptoms. In other words, one's fear to be negatively evaluated by others may be one mechanism by which adolescents with high levels of self-punitiveness tend to have anxiety and depressive symptoms. The current study did not show, but the social support literature indicates that

adolescents who receive various sources of support are less likely to have depressive and anxiety symptoms (e.g., Rueger et al., 2010). When seeing high school students who offend others, school counselors and teachers are recommended to provide judgement-free environment to reduce students' defensive attitude and warm environment where they can feel comfortable and supported to talk about their struggles and feelings (e.g., Fisher & Exline, 2006), rather than accusing what they have done wrong or suggesting what they should do.

Limitations and Future Directions

The current study has a number of limitations. The most salient limitation is an issue of causality, as the current study used a correlational design. Even though variables were analyzed in the order which is the most consistent with the theory of self-forgiveness (i.e., Self-forgiveness responses lead to psychological symptoms, and fear of negative evaluation and social support could influence these relationships), it is impossible to infer causality from the current design of this study. Future research may benefit from experimental designs (e.g., using scenarios) that enable to infer causality of self-forgiveness responses predicting psychological symptoms as a consequence and factors alleviating or worsening these symptoms.

Second, there were measurement issues in the current study. The FNE and J-PANAS-C have been validated in previous Japanese studies (Yamamoto & Tagami, 2001; Yamasaki et al., 2006), but the DPSSF, the PH-C, and the CASSS were used in the current study for the first time and only internal consistencies were assessed to check validities. Therefore, a thorough validity assessment (e.g., confirmatory factor analyses, assessing criterion validities) might be necessary to accurately assess claimed constructs,

especially the CASSS due to its unexpected positive relationships with depressive symptoms. Regarding assessing depressive symptoms, the current study combined reversed positive affect and negative affect to assess these symptoms. However, somatic symptoms related to depression have been well reported among Asians (e.g., Ryder et al., 2008). Therefore, the current study might not thoroughly capture Japanese adolescents' depressive symptoms.

Another limitation in the current study is a rate of participants who reported their interpersonal offenses (56.13 % of total participants briefly wrote their interpersonal offenses). Because the majority of forgiveness study recruited participants who just committed interpersonal offenses (c.f., Woodyatt & Wenzel, 2014) or did not report response rates (cf. Exline et al., 2008), the interpretation of the current response rate needs caution. After systematically analyzing response rates of 463 published studies in behavioral sciences and management journals, Baruch and Holtom (2008) reported the average response rate of 48.3 percent with a standard deviation of 22.2. However, data-collection methods of this review study included in-person, mails, emails, phones, and web, but not classroom settings like the current study. Therefore, it may not be appropriate to directly compare the current response rate with this average response rate of the Baruch and Holtom's study (2008). Responses of participants who did not report these offenses were removed from the current study because of the uncertainty that their responses were based on actual offenses. One of characteristics of pseudo self-forgiveness is avoidance; therefore, it could be suspected that those who have high levels of pseudo self-forgiveness might avoid reporting or thinking about their offenses. Another issue regarding this response rate is participants' ability to recall their offenses.

Rather than avoiding recalling their offenses, some participants might just not be able to recall their interpersonal offenses. Therefore, pseudo self-forgiveness and its relationships with other variables in the current study might not be accurate representations of actual responses after committing offences.

The current study assessed psychological outcomes of the process-oriented self-forgiveness and factors related to this self-forgiveness model and these outcomes in Japan. It would be helpful to explore how this process-oriented model itself is different in collectivistic cultures. For example, similar to the study of Woodyatt and Wenzel (2014), it would be beneficial to assess how this process-oriented self-forgiveness model relates to prosocial behaviors in collectivistic cultures. In the area of forgiveness of others, people in collectivistic cultures tend to forgive offenders decisionally (e.g., not seeking revenge, trying to act nice in public) even if they do not forgive offenders emotionally (e.g., holding resentment, feeling mad) due to their motivation to promote group harmony (Hook et al., 2009). Therefore, in the area of self-forgiveness, it might be suspected that Japanese offenders could be more likely to offer prosocial behaviors (e.g., offering restitution or seeking reconciliation with their victims) regardless of their forgiveness responses (i.e., genuine self-forgiveness, pseudo self-forgiveness, and self-punitiveness) because of their cultural emphasis on interpersonal harmony (Markus & Kitayama, 1991). An examination in this area would be beneficial to find uniqueness of self-forgiveness in collectivistic culture.

Another issue specific to self-forgiveness in collectivistic cultures are individuals' relatively holistic cognitions and their other-focused cognitions in anxiety. Individuals in collectivistic cultures tend to have holistic cognitions, attending to the entire environment

and assigning causality to it, compared to people in individualistic cultures (Nisbett et al., 2001). Regarding anxiety, collectivistic individuals tend to focus on how others might be embarrassed due to their own inappropriate behaviors, rather than how they might be embarrassed (Norasakkunkit et al., 2012). Both types of cognitions might have greater roles in understanding self-forgiveness in collectivistic cultures. For example, due to their holistic cognitions, collectivistic offenders might be influenced by third persons who are related to both offenders and victims, and their forgiveness responses might change based on how these third persons interact with the offenders. Also, because of their other-focused cognitions, collectivistic offenders might care more about victims' feelings, which, in turn, might lead to more severe psychological symptoms. By definition, guilt is related to genuine self-forgiveness whereas shame is related to self-punitiveness. If collectivistic offenders focus more on their offenses and victims' feelings, relationships of both guilt and shame to forgiveness might be greatly influenced. Therefore, it might be beneficial to examine how these cognitions (i.e., holistic cognitions and other-focused cognitions in anxiety) are related to responsibility taking, feelings of shame and guilt, the promotion of self-forgiveness, and psychological symptoms among collectivistic individuals. These examinations might be helpful to understand their unique forgiveness responses after offending others.

Finally, the current study focused on the offenders' perspective of wrongdoing; therefore, it is difficult to infer what needs to be done to promote social harmony between offenders and victims. Restitution would be beneficial to promote forgiveness of victims, but how the offenders provide apologies to their victims have to be considered because some victims may not feel safe in-person apologies from the offenders. In that case, for

example, apology letters or apology over the phone could be useful. The use of dyadic data, including both offenders' and victims' perspectives, to analyze the more complex relationships between offenders' needs promoting self-forgiveness and the effect of their self-forgiveness on the victim would be valuable to explore in future research.

Summary

This study was conducted at a high school in Japan to investigate how each response of the process-oriented approach of self-forgiveness is related to anxiety and depressive symptoms, and the possible mediation effects of fear of negative evaluation and social support on these relationships. A path analysis was conducted to assess these relationships. The current path model did not show that genuine self-forgiveness predicted anxiety and depressive symptoms but self-punitiveness was positively related to both anxiety and depressive symptoms. Also, fear of negative evaluation had mediation effects on these positive relationships. It was unexpected but increased social support was positively related to a high level of depressive symptoms and those who used pseudo self-forgiveness tended to have less depressive symptoms. Clinical implications to alleviate Japanese adolescents' psychological symptoms are discussed, and limitations and future directions of self-forgiveness considering collectivistic culture are explained.

REFERENCES

- 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.
- Anderson, E., & Hope, D. A. (2008). A review of the tripartite model for understanding the link between anxiety and depression in youth. *Clinical Psychology Review, 28*, 275-287.
- Asakura, S., Inoue, S., Sasaki, F., Sasaki, Y., Kitagawa, N., Inoue, T., & Denda, K., Koyama, T., Ito, M., & Matsubara, R. (2002). Reliability and validity of the Japanese version of the Liebowitz Social Anxiety Scale. *Seishin Igaku (Clinical Psychiatry), 44*, 1077-1084.
- Bagozzi, R. P., Wong, N., & Yi, Y. (1999). The role of culture and gender in the relationship between positive and negative affect. *Cognition and Emotion, 13*, 641–672.
- Baruch, Y., & Holtom, B. C. (2008). Survey response rate levels and trends in organizational research. *Human Relations, 61*, 1139-1160.
- Bauer, N. S., Yoder, R., Carroll, A. E., & Downs, S. M. (2016). Racial/ethnic differences in the prevalence of anxiety using the Vanderbilt ADHD Scale in a diverse community outpatient setting. *Journal of Developmental and Behavioral Pediatrics, 37*, 610-618.

- Baumeister, R. F., Stillwell, A. M., & Heatherton, T. F. (1994). Guilt: An interpersonal approach. *Psychological Bulletin, 115*, 243-267.
- Baumeister, R. F., Stillwell, A. M., & Heatherton, T. F. (1995). Personal narratives about guilt: Role in action control and interpersonal relationships. *Basic and Applied Social Psychology, 17*, 173-198.
- Beck, A. T., Emery, G., & Greenberg, R. L. (1985). *Anxiety disorders and phobias: A cognitive perspective*. New York, NY, US: Basic Books.
- Bennett, D. A. (2001). How can I deal with missing data in my study? *Australian and New Zealand Journal of Public Health, 25*, 464–469.
- Brady, E. U., & Kendall, P. C. (1992). Comorbidity of anxiety and depression in children and adolescents. *Psychological Bulletin, 111*, 244-255.
- Carpenter, T. P., Tignor, S. M., Tsang, J., & Willett, A. (2016). Dispositional self-forgiveness, guilt- and shame-proneness, and the roles of motivational tendencies. *Personality and Individual Differences, 98*, 53-61
- Chen, F. F., Bai, L., Lee, J. M., & Jing, Y. (2016). Culture and the structure of affect: A bifactor modeling approach. *Journal of Happiness Studies, 17*, 1801-1824.
- Clark, L. A., & Watson, D. (1991). Tripartite model of anxiety and depression: Psychometric evidence and taxonomic implications. *Journal of Abnormal Psychology, 100*, 316-336.
- Cloninger, C. R., Svrakic, D. M., & Przybeck, T. R. (1993). A psychobiological model of temperament and character. *Archives of General Psychiatry, 50*, 975-990.

- Cornish, M. A., & Wade, N. G. (2015a). A therapeutic model of self-forgiveness with intervention strategies for counselors. *Journal of Counseling & Development, 93*, 96-104.
- Cornish, M. A., & Wade, N. G. (2015b). Working through past wrongdoing: Examination of a self-forgiveness counseling intervention. *Journal of Counseling Psychology, 62*, 521-528.
- Davis, D. E., Ho, M. Y., Griffin, B. J., Bell, C., Hook, J. N., Van Tongeren, D. R., DeBlaere, C., Worthington, E. L., & Westbrook, C. J. (2015a). Forgiving the self and physical and mental health correlates: A meta-analytic review. *Journal of Counseling Psychology, 62*, 329-335.
- Davis, D. E., Hook, J. N., Van Tongeren, D. R., DeBlaere, C., Rice, K. G., & Worthington, E. J. (2015b). Making a decision to forgive. *Journal of Counseling Psychology, 62*, 280-288.
- Durbin, C. E., & Shafir, D. M. (2008). Emotion regulation and risk for depression. In J. Z. Abela, B. L. Hankin, J. Z. Abela, B. L. Hankin (Eds.), *Handbook of depression in children and adolescents* (pp. 149-176). New York, NY, US: Guilford Press.
- Eaton, J., Struthers, C. W., & Santelli, A. G. (2006). Dispositional and state forgiveness: The role of self-esteem, need for structure, and narcissism. *Personality and Individual Differences, 41*, 371-380.
- Enright, R. D. (1996). Counseling within the forgiveness triad: On forgiving, receiving, forgiveness, and self-forgiveness. *Counseling and Values, 40*, 107-126.
- Enright, R. D., & Fitzgibbons, R. P. (2015). Forgiveness therapy in child and adolescent disorders. In, *Forgiveness therapy: An empirical guide for resolving anger and*

- restoring hope* (pp. 171-202). Washington, DC, US: American Psychological Association.
- Enright, R. D., & Fitzgibbons, R. P. (2000). *Helping clients forgive: An empirical guide for resolving anger and restoring hope*. Washington, DC, US: American Psychological Association.
- Enright, R. D., Gassin, E. A., & Wu, C. (1992). Forgiveness: a developmental view. *Journal of Moral Education, 21*, 99–114.
- Exline, J., Baumeister, R. F., Zell, A. L., Kraft, A. J., & Witvliet, C. O. (2008). Not so innocent: Does seeing one's own capability for wrongdoing predict forgiveness? *Journal of Personality and Social Psychology, 94*, 495-515.
- Exline, J. J., Root, B. L., Yadavalli, S., Martin, A. M., & Fisher, M. L. (2011). Reparative behaviors and self-forgiveness: Effects of a laboratory-based exercise. *Self and Identity, 10*, 101-126.
- Exline, J. J., & Zell, A. L. (2009). Empathy, self-affirmation, and forgiveness: The moderating roles of gender and entitlement. *Journal of Social and Clinical Psychology, 28*, 1071-1099.
- Faytout, M., Tignol, J., Swendsen, J., Grabot, D., Aouizerate, B., & Lépine, J. P. (2007). Social phobia, fear of negative evaluation and harm avoidance. *European Psychiatry, 22*, 75-79.
- Fehr, R., Gelfand, M. J., & Nag, M. (2010). The road to forgiveness: A meta-analytic synthesis of its situational and dispositional correlates. *Psychological Bulletin, 136*, 894-914.

- Field, A. (2009). *Discovering statistics using SPSS, third edition*. London UK: SAGE Publications Ltd.
- Finkel, E. J., Rusbult, C. E., Kumashiro, M., & Hannon, P. A. (2002). Dealing with betrayal in close relationships: Does commitment promote forgiveness? *Journal of Personality and Social Psychology, 82*, 956-974.
- Fisher, M. L., & Exline, J. J. (2010). Moving toward self-forgiveness: Removing barriers related to shame, guilt, and regret. *Social and Personality Psychology Compass, 4*, 548-558.
- Fisher, M. L., & Exline, J. (2006). Self-Forgiveness versus Excusing: The Roles of Remorse, Effort, and Acceptance of Responsibility. *Self and Identity, 5*, 127-146.
- Flynn, M., & Rudolph, K. D. (2010). The contribution of deficits in emotional clarity to stress responses and depression. *Journal of Applied Developmental Psychology, 31*, 291-297.
- Griffin, B. J., Worthington, E. J., Lavelock, C. R., Greer, C. L., Lin, Y., Davis, D. E., & Hook, J. N. (2015). Efficacy of a self-forgiveness workbook: A randomized controlled trial with interpersonal offenders. *Journal of Counseling Psychology, 62*, 124-136.
- Hall, J. H., & Fincham, F. D. (2005). Self-forgiveness: The stepchild of forgiveness research. *Journal of Social and Clinical Psychology, 24*, 621-637.
- Hall, J. H., & Fincham, F. D. (2008). The temporal course of self-forgiveness. *Journal of Social and Clinical Psychology, 27*, 174-202.

- Hirsch, J. K., Webb, J. R., & Jeglic, E. L. (2011). Forgiveness, depression, and suicidal behavior among a diverse sample of college students. *Journal of Clinical Psychology, 67*, 896-906.
- Holmgren, M. R. (2002). Forgiveness and self-forgiveness in psychotherapy. In S. Lamb, J. G. Murphy (Eds.), *Before forgiving: Cautionary views of forgiveness in psychotherapy* (pp. 112-135). New York, NY, US: Oxford University Press.
- Hook, J. N., Worthington, E. J., & Utsey, S. O. (2009). Collectivism, forgiveness, and social harmony. *The Counseling Psychologist, 37*, 821-847.
- Hu, L., & Bentler, P. M. (1999). Cutoff criteria for fit indexes in covariance structure analysis: Conventional criteria versus new alternatives. *Structural Equation Modeling, 6*, 1-55.
- Ishikawa, M., & Hamaguchi, Y. (2007). Dispositional forgiveness and externalizing and internalizing problems: Junior and senior high school students. *Japanese Journal of Educational Psychology, 55*, 526-537.
- Ishikawa, M., & Hamaguchi, Y. (2010). The relationship between dispositional forgiveness and school adaptation in junior high school students. *Japanese Journal of Counseling Science, 43*, 120-130.
- Ishikawa, R., Sasaki, K., & Fukui, I. (1992). Standardization of Japanese version of FNE and SADS. *Japanese Journal of Behavior Therapy, 18*, 10-17.
- Karremans, J. C., & Aarts, H. (2007). The role of automaticity in determining the inclination to forgive close others. *Journal of Experimental Social Psychology, 43*, 902-917.
- Kenny, D. A. (2011, August). SEM: Path Analysis. Structural Equation Modeling.

Retrieved May 30, 2017, from <http://davidakenny.net/cm/pathanal.htm>

Kim, S., Thibodeau, R., & Jorgensen, R. S. (2011). Shame, guilt, and depressive symptoms: A meta-analytic review. *Psychological Bulletin, 137*, 68-96.

Kline, R. B. (2011). *Principles and practice of structural equation modeling (3rd ed.)*. New York, NY US: Guilford Press.

Knopf, D., Park, M. J., & Mulye, T. P. (2008). The mental health of adolescents: A national profile, 2008. San Francisco, CA: National Adolescent Health Information Center.

Konstam, V., Chernoff, M., & Deveney, S. (2001). Toward forgiveness: The role of shame, guilt, anger, and empathy. *Counseling and Values, 46*, 26-39.

Krueger, R. F. (1999). Personality traits in late adolescence predict mental disorders in early adulthood: A prospective-epidemiological study. *Journal of Personality, 67*, 39-65.

Laurent, J., Catanzaro, S. J., & Joiner, T. E. (2004). Development and Preliminary Validation of the Physiological Hyperarousal Scale for Children. *Psychological Assessment, 16*, 373-380.

Laurent, J., Catanzaro, S. J., Joiner, T. E., Jr., Rudolph, K. D., Potter, K. I., Lambert, S., Osborne, L., & Gathright, T. (1999). A measure of positive and negative affect for children: Scale development and initial validation. *Psychological Assessment, 11*, 326-338.

Laurent, J., Potter, K., & Catanzaro, S. J. (1994, March). Assessing positive and negative affect in children: The development of the PANAS-C. Paper presented at the 26th annual convention of the National Association of School Psychologists, Seattle,

WA.

- Lawler-Row, K. A. (2010). Forgiveness as a mediator of the religiosity—health relationship. *Psychology of Religion and Spirituality, 2*, 1-16.
- Lawler-Row, K. A., & Piferi, R. L. (2006). The forgiving personality: Describing a life well lived? *Personality and Individual Differences, 41*, 1009-1020.
- Leary, M. R. (1983). A brief version of the Fear of Negative Evaluation Scale. *Personality and Social Psychology Bulletin, 9*, 371-375.
- Leith, K. P., & Baumeister, R. F. (1998). Empathy, shame, guilt, and narratives of interpersonal conflicts: Guilt-prone people are better at perspective taking. *Journal of Personality, 66*, 1-37.
- Lonigan, C. J., Hooe, E. S., David, C. F., & Kistner, J. A. (1999). Positive and negative affectivity in children: Confirmatory factor analysis of a two-factor model and its relation to symptoms of anxiety and depression. *Journal of Consulting and Clinical Psychology, 67*, 374-386.
- Macaskill, A. (2012). Differentiating dispositional self-forgiveness from other-forgiveness: Associations with mental health and life satisfaction. *Journal of Social and Clinical Psychology, 31*, 28-50.
- Malecki, C. K., & Demaray, M. K. (2002). Measuring perceived social support: Development of the Child and Adolescent Social Support Scale. *Psychology In the Schools, 39*, 1-18.
- Malecki, C. K., Demaray, M. K., & Elliott, S. N. (2003). *A working manual on the development of the child and adolescent social support scale (2000)*. Unpublished manuscript. Northern Illinois University.

- Maltby, J., Macaskill, A., & Day, L. (2001). Failure to forgive self and others: A replication and extension of the relationship between forgiveness, personality, social desirability and general health. *Personality and Individual Differences, 30*, 881-885.
- Markus, H. R. & Kitayama, S. (1991). Culture and the self: Implications for cognition, emotion, and motivation. *Psychological Review, 98*, 224–253.
- Mauger, P. A., Perry, J. E., Freeman, T., & Grove, D. C., McBride, A. G., & McKinney, K. E. (1992). The measurement of forgiveness: Preliminary research. *Journal of Psychology and Christianity, 11*, 170-180.
- 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, NY US: Guilford Press.
- McCullough, M. E., Rachal, K. C., Sandage, S. J., Worthington, E. J., Brown, S. W., & Hight, T. L. (1998). Interpersonal forgiving in close relationships: II. Theoretical elaboration and measurement. *Journal of Personality and Social Psychology, 75*, 1586-1603.
- McCullough, M. E., Worthington, E. L. Jr., & Rachal, K. C. (1997). Interpersonal forgiving in close relationships. *Journal of Personality and Social Psychology, 73*, 321–336.
- Mellor, D., Fung, S. T., & binti Mamat @ Muhammad, N. H. (2012). Forgiveness, empathy and gender—A Malaysian perspective. *Sex Roles, 67*, 98-107.

- Nakamura, K., Kitanishi, K., Miyake, Y., Hashimoto, K., & Kubota, M. (2002). The neurotic versus delusional subtype of taijin-kyofu-sho: Their DSM diagnoses. *Psychiatry and Clinical Neurosciences*, *56*, 595-601.
- Newman, B. M., Newman, P. R., Griffen, S., O'Connor, K., & Spas, J. (2007). The relationship of social support to depressive symptoms during the transition to high school. *Adolescence*, *42*, 441-459.
- Nisbett, R. E., Peng, K., Choi, I., & Norenzayan, A. (2001). Culture and systems of thought: Holistic versus analytic cognition. *Psychological Review*, *108*, 291-310.
- Norasakkunkit, V., Kitayama, S., & Uchida, Y. (2012). Social anxiety and holistic cognition: Self-focused social anxiety in the United States and other-focused social anxiety in Japan. *Journal of Cross-Cultural Psychology*, *43*, 742-757.
- Okayasu, T., Shimada, H., & Sakano, Y. (1993). Alleviation effects of social support on school stress in junior high school students. *Japanese Journal of Educational Psychology*, *41*, 302-312.
- Orcutt, H. K. (2006). The prospective relationship of interpersonal forgiveness and psychological distress symptoms among college women. *Journal of Counseling Psychology*, *53*, 350-361.
- Osanai, A., & Furukawa, M. (2005). Development of a Japanese version of the Heartland Forgiveness Scale. *Annual Bulletin of Institute of Psychological Studies. Showa Women's University*, *8*, 51-57.
- Riek, B. M., Luna, L. R., & Schnabelrauch, C. A. (2014). Transgressors' guilt and shame: A longitudinal examination of forgiveness seeking. *Journal of Social and Personal Relationships*, *31*, 751-772.

- Romero, C., Kalidas, M., Elledge, R., Chang, J., Liscum, K. R., & Friedman, L. C. (2006). Self-Forgiveness, Spirituality, and Psychological Adjustment in Women with Breast Cancer. *Journal of Behavioral Medicine, 29*, 29-36.
- Rueger, S. Y., Malecki, C. K., & Demaray, M. K. (2010). Relationship between multiple sources of perceived social support and psychological and academic adjustment in early adolescence: Comparisons across gender. *Journal of Youth and Adolescence, 39*, 47-61.
- Ryder, A. G., Yang, J., Zhu, X., Yao, S., Yi, J., Heine, S. J., & Bagby, R. M. (2008). The cultural shaping of depression: Somatic symptoms in China, psychological symptoms in North America? *Journal of Abnormal Psychology, 117*, 300-313.
- Schumann, K. (2012). Does love mean never having to say you're sorry? Associations between relationship satisfaction, perceived apology sincerity, and forgiveness. *Journal of Social and Personal Relationships, 29*, 997-1010.
- Scollon, C. N., Diener, E., Oishi, S., & Biswas-Diener, R. (2004). Emotions Across Cultures and Methods. *Journal of Cross-Cultural Psychology, 35*, 304-326.
- Shimosaka, T. (2001). Apathy: Junior high, high school, and college students. *Japanese Journal of Educational Psychology, 49*, 305-313.
- Sternthal, M. J., Williams, D. R., Musick, M. A., & Buck, A. C. (2010). Depression, anxiety, and religious life: A search for mediators. *Journal of Health and Social Behavior, 51*, 343-359.
- Stewart, T., & Suldo, S. (2011). Relationships between social support sources and early adolescents' mental health: The moderating effect of student achievement level. *Psychology in the Schools, 48*, 1016-1033.

- Tangney, J. P. (1991). Moral affect: The good, the bad, and the ugly. *Journal of Personality and Social Psychology*, *61*, 598-607.
- Tangney J. P., Boone, A. L., & Dearing, R. (2005). Forgiving the self: Conceptual issues and empirical findings. In E. L. Worthington Jr. (Ed), *Handbook of forgiveness* (pp. 143-158). New York: Routledge.
- Tangney, J. P., & Dearing, R. L. (2002). *Shame and guilt*. New York, NY, US: Guilford Press.
- Tardy, C. H. (1985). Social support measurement. *American Journal of Community Psychology*, *13*, 187-202.
- Thompson, L. Y., Snyder, C. R., Hoffman, L., Michael, S. T., Rasmussen, H. N., Billings, L. S., Heinze, L., Neufeld, J. E., Shorey, H. S., Roberts, J. C., & Roberts, D. J. (2005). Dispositional Forgiveness of Self, Others, and Situations. *Journal of Personality*, *73*, 313-359.
- Toussaint, L. L., Williams, D. R., Musick, M. A., & Everson-Rose, S. A. (2008). The association of forgiveness and 12-month prevalence of major depressive episode: Gender differences in a probability sample of U.S. adults. *Mental Health, Religion & Culture*, *11*, 485-500.
- Ueda, K. & Shiomura, K. (2012). Forgiveness among the Japanese: Self-construal, collectivism, and religious faith. *The Japanese Journal of Personality*, *21*, 183-185.
- Wada, M. (1992). Effects of social supports on freshmen's psychological factors. *Japanese Journal of Educational Psychology*, *40*, 386-393.
- Wade, N. G., Hoyt, W. T., Kidwell, J. E., & Worthington, E. L., Jr. (2014). Efficacy of

- psychotherapeutic interventions to promote forgiveness: A meta-analysis. *Journal of Consulting and Clinical Psychology*, 82, 154–170.
- Wang, W., Hsu, W., Chiu, Y., & Liang, C. (2012). The hierarchical model of social interaction anxiety and depression: The critical roles of fears of evaluation. *Journal of Anxiety Disorders*, 26, 215-224.
- Watson, D., & Clark, L. A. (1991). The PANAS–X: Preliminary manual for the Positive and Negative Affect Schedule—Expanded form. Unpublished manuscript, Southern Methodist University, Dallas, TX.
- Watson, D., & Friend, R. (1969). Measurement of social-evaluative anxiety. *Journal of Consulting and Clinical Psychology*, 33, 448-457.
- Watson, D., Clark, L. A., & Tellegen, A. (1988). Development and validation of brief measures of Positive and Negative Affect: The PANAS scales. *Journal of Personality and Social Psychology*, 54, 1063–1070.
- Webb, M., Colburn, T. A., Heisler, D., Call, S., & Chickering, S. A. (2008). Clinical correlates of dispositional forgiveness. *Journal of Applied Social Psychology*, 38, 2495-2517.
- Weeks, J. W., Heimberg, R. G., Fresco, D. M., Hart, T. A., Turk, C. L., Schneier, F. R., & Liebowitz, M. R. (2005). Empirical Validation and Psychometric Evaluation of the Brief Fear of Negative Evaluation Scale in Patients with Social Anxiety Disorder. *Psychological Assessment*, 17, 179-190.
- Weiner, B., Graham, S., Peter, O., & Zmuidinas, M. (1991). Public confession and forgiveness. *Journal of Personality*, 59, 281-312.

- Welton, G. L., Hill, P. C., & Seybold, K. S. (2008). Forgiveness in the trenches: Empathy, perspective taking, and anger. *Journal of Psychology and Christianity, 27*, 168-177.
- Westers, N. J., Rehfuss, M., Olson, L., & Biron, D. (2012). The role of forgiveness in adolescents who engage in nonsuicidal self-injury. *Journal of Nervous and Mental Disease, 200*, 535-541.
- Wohl, M. A., DeShea, L., & Wahkinney, R. L. (2008). Looking within: Measuring state self-forgiveness and its relationship to psychological well-being. *Canadian Journal of Behavioural Science/Revue Canadienne Des Sciences Du Comportement, 40*, 1-10.
- Wong, Q. J. J., & Moulds, M. (2014). An examination of the measurement equivalence of the brief fear of negative evaluation scale across individuals who identify with an Asian ethnicity and individuals who identify with a European ethnicity. *Assessment, 21*, 713-722.
- Woodyatt, L., & Wenzel, M. (2013a). Self-forgiveness and restoration of an offender following an interpersonal transgression. *Journal of Social and Clinical Psychology, 32*, 225-259.
- Woodyatt, L., & Wenzel, M. (2013b). The psychological immune response in the face of transgressions: Pseudo self-forgiveness and threat to belonging. *Journal of Experimental Social Psychology, 49*, 951-958.
- Woodyatt, L., & Wenzel, M. (2014). A needs-based perspective on self-forgiveness: Addressing threat to moral identity as a means of encouraging interpersonal and intrapersonal restoration. *Journal of Experimental Social Psychology, 50*, 125-135.

- Worthington, E. J. (2006). *Forgiveness and reconciliation: Theory and application*. New York, NY US: Routledge/Taylor & Francis Group.
- Worthington, E. J., & Langberg, D. (2012). Religious considerations and self-forgiveness in treating complex trauma and moral injury in present and former soldiers. *Journal of Psychology and Theology, 40*, 274-288.
- Worthington, E. L., & Scherer, M. (2004). Forgiveness is an emotion-focused coping strategy that can reduce health risks and promote health resilience: Theory, review, and hypotheses. *Psychology & Health, 19*, 385–405.
- Yamamoto, J. (2007). How does the teachers' cognition of fear of negative evaluation in adolescents? *Bull. Educ. Res. Teach. Develop. Kagawa Univ, 14*, 93-100.
- Yamamoto, J., & Tagami, F. (2007). A study on the relationships between fear of negative evaluation and approval motivation in adolescents. *Japanese Journal of Counseling Science, 40*, 116-126.
- Yamamoto, J. & Tagami, F. (2001). Developing the scale of fear of negative evaluation. *Japanese Association of Educational Psychology, 180*.
- Yamasaki, K., Katsuma, R., & Sakai, A. (2006). Development of a Japanese version of the Positive and Negative Affect Schedule for Children. *Psychological Reports, 99*, 535-546.
- Zechmeister, J. S., & Romero, C. (2002). Victim and offender accounts of interpersonal conflict: Autobiographical narratives of forgiveness and unforgiveness. *Journal of Personality and Social Psychology, 82*, 675-686.

CURRICULUM VITAE

Tetsuo “Ted” Sato, MS

288 Night Sail Dr. S. Apt. 109
Memphis, TN38103
Phone: (323) 360-1945
E-mail: t0sato01@louisville.edu

EDUCATION

▪

- | | | |
|---------------|---|----------------------|
| Ph. D. | Counseling Psychology (APA Accredited)
University of Louisville, Louisville, Kentucky
<i>Dissertation: Self-Forgiveness in Japanese Adolescents</i> | Expected August 2017 |
| M. S. | Clinical Psychology
California State University, Fullerton, California | May 2010 |
| B. S. | Psychology, Minor in Mathematics
Indiana University, Bloomington, Indiana | December 2005 |

CLINICAL EXPERIENCES

▪

The University of Tennessee Professional Psychology Internship Consortium, APA-Accredited Internship

Memphis, TN
2017

August 2016 – July

Title: Predoctoral Intern

The Boling Center for Developmental Disabilities (BCDD) at the University of Tennessee Health Science Center (UTHSC) (Clinical Add-on)

August 2016 – July 2017

Supervisor: Sarah Irby, PhD

- Provide individual therapy to toddlers and children with Autism Spectrum Disorder (ASD) and coach parents in the implementation of Applied Behavior Analysis, including direct instructional techniques (e.g., Discrete Trial Training) and more naturalistic approaches (e.g., Pivotal Response Training)
- Develop and implement individual behavioral intervention plans to manage challenging behaviors
- Co-facilitate a social skills group targeting children with ASD
- Participate in Leadership and Education in Neurodevelopmental Disabilities (LEND) program

1st Rotation
2016

August 2016 – November

Major Rotation: The BCDD at the UTHSC

Supervisors: Laura Murphy, EdD and Lauren Gardner, PhD

- Conducted diagnostic interviews and psychological evaluations with children with developmental disabilities such as ASD, Intellectual Disability, Global Developmental Delay, Attention Deficit/Hyperactivity Disorders, Disruptive Behavior Disorders, Language Disorder
- Completed empirically supported autism assessments including the *ADOS-2*, the *CARS-2-ST*, and the *SCQ*
- Clinically trained to administer the *ADOS-2*
- Worked as part of an interdisciplinary team with pediatricians and speech pathologists

Minor Rotation: The Exchange Club Family Center

Supervisor: Catherine Collins, PhD

- Facilitated a male adolescent group for youths with anger and emotional issues and co-facilitated joint family sessions
- Co-facilitated a male adult anger management group
- Provided trauma-informed care through individual therapy to children, adolescents, and adults with issues related to child abuse and family violence

2st Rotation
2017

December 2016 – March

Major Rotation: Child and Adolescent Psychiatry at the UTHSC

Supervisor: Melissa Hoffmann, PhD

- Provide individual and family therapy incorporating evidence based treatment and family systems theory to children and adolescents with various psychological issues at the UTHSC and LeBonheur Child Psychiatry clinics
- Conduct diagnostic interviews and provide diagnoses as well as biopsychosocial formulations
- Consult and collaborate with professionals, such as psychiatrists, medical and mental health practitioners, school personnel, juvenile court
- Attend weekly didactic sessions with other division trainees

Minor Rotation: St Jude Children's Research Hospital, Department of Psychology

Supervisor: Andrew Molnar PhD

- Conduct comprehensive neuropsychological evaluations for children with catastrophic illness, such as brain tumors, acute lymphoblastic leukemia, sickle cell diseases
- Administer and interpret neuropsychological instruments, review medical record, interview to ascertain pertinent historical information, feedback to patients and their families, consult with health care professionals, and develop recommendations

3st Rotation
2017

April 2017 – July

Major Rotation: Center of Excellence for Children in State Custody at the UTHSC

Supervisor: Kristin Hoffman, PhD

- Serve children in or at risk of entering state custody

- Conduct clinical interviews and psychological testing of children and adolescents, review records, write Care Plans, participate in multi-disciplinary case conferences, and consult with DCS case managers, treatment providers, and caregivers
- Practice Learning Collaborative model for disseminating evidence-informed treatments into the community mental health system

Minor Rotation: **Child and Adolescent Psychiatry at the UTHSC**

Supervisor: Melissa Hoffmann, PhD

- Provide individual and family therapy to children and adolescents with various psychological issues at the UTHSC, incorporating evidence based treatment and family systems theory
- Conduct a diagnostic interview and provide diagnosis as well as biopsychosocial formulation of the case
- Consult and collaborate with professionals, such as psychiatrists, medical and mental health practitioners, school personnel, juvenile court
- Attend weekly didactic sessions with other division trainees

University of Louisville Counseling Center

Louisville, KY

August 2015 – May 2016

Title: Clinical Graduate Assistant

Supervisor: Ruby Casiano, PhD, Juan Pablo Kalawski, PhD

- Conducted psychological intake assessments and individual therapy with college students experiencing depression, anxiety, suicidal ideation, relational distress, and academic difficulties
- Provided consultation to peer practicum students
- Assisted in outreach presentations and information tables
- Participated in weekly multidisciplinary staff meetings with psychiatrists and psychiatric nurse practitioners

The Autism Center, Department of Pediatrics

University of Louisville School of Medicine

Louisville, KY

August 2015 – December

2015

Title: Practicum Student

Supervisor: Grace Kuravackel, PhD

- Provided modified cognitive-behavioral therapy to children, adolescents, and young adults with ASD and other comorbid disorders including depressive and anxiety disorders
- Co-facilitated a social skills group targeting adolescents with ASD
- Participated in training seminars related to ASD

Cardinal Success Program

The Academy @ Shawnee

Department of Counseling and Human Development

Louisville, KY

January 2015 – July

2015

Title: Practicum Student

Supervisor: Katy Hopkins, PhD

- Provided individual therapy to adolescents at a high school in a marginalized community and intervened with students in crisis
- Provided group therapy for in-school suspended students

- Co-facilitated a pregnancy/parenting group for students
- Completed psychological evaluations
- Consulted with teachers, school personnel, and parents about students with psychological and behavioral issues
- Conducted strength-based group therapy for elementary and middle school students at a community center during summer break

**Weisskopf Child Evaluation Center, Department of Pediatrics
University of Louisville School of Medicine**

Louisville, KY
2014

May 2014 – December

Title: Practicum Student

Supervisor: Eva R. Markham, EdD

- Conducted a variety of psychological assessments from toddlers to adolescents with developmental disabilities, including ASD, Intellectual Disability, Global Developmental Delay, Attention Deficit/Hyperactivity Disorders, and disruptive behavior disorders
- Completed empirically supported autism assessments including the *CARS-2-ST*, the *SCQ*, and some activities of the *ADOS-2*
- Worked as part of an interdisciplinary team with pediatricians, speech pathologists, and occupational therapists

The Brook Hospital

Louisville, KY
2014

August 2013 – April

Title: Practicum Student

Supervisor: Stelios Stylianou, PsyD

- Provided individual, group, and family therapy to adolescents in the substance use program, the psychiatric partial hospitalization program, and the psychiatric intensive outpatient program
- Conducted intake assessments and created individual treatment plans for adolescents in those programs
- Co-led a DBT group for inpatient adults with substance use disorders
- Worked as part of an interdisciplinary team with psychiatrists, nurses, social workers, and psychiatric technicians

Japan Primary Care Association

Ishinomaki, Miyagi Prefecture, Japan
2011

October 2011 – November

Title: Therapist in Training

Supervisor: Sayaka Kawase, LCSW

- Reached out to victims of the tsunami disaster in temporary housing
- Conducted play therapy with children
- Provided consultation and psychoeducation to parents related to children's emotional and behavioral reactions to the disaster
- Worked as part of an interdisciplinary team with physicians, psychiatrists, nurses, and volunteers

LHD, Inc Psychological Services

Orange, CA
2011

August 2010 – May

Title: Marriage and Family Therapist Intern

Supervisor: LaTonda Hardy-Davis, LMFT

- Provided individual and group therapy at two juvenile group homes
- Created individual treatment plans, implemented them, and evaluated children's progress
- Consulted with social workers and group home workers

Outreach Concern

Santa Ana, CA

September 2007 – June 2008 and January 2009 – June 2009

Title: Master's Practicum Student

Supervisors: Bernard Schwartz, PhD, Sandra Terifaj, LMFT, and Pamela Hernandez-Kaufman, MS

- Conducted individual therapy for elementary school students
- Consulted with teachers, school personnel, and parents regarding students' disruptive behaviors and emotional difficulties

PUBLICATIONS

▪

Mearns, J., Self, E., Kono, K., Sato, T., Takashima, E., Tresno, F., Watabe, Y., & Catanzaro, S. J. (2016). Measuring generalized expectancies for negative mood regulation in Japan: The Japanese language NMR Scale. *International Journal of Quantitative Research in Education, 3*, 109-127.

Leach, M. M., & Sato, T. (2013). A content analysis of the Psychology of Religion and Spirituality journal: The initial four years. *Psychology of Religion and Spirituality, 5*, 61-68.

PRESENTATIONS

▪

Sato, T. (2016, July). Group Therapy for International College Students in the U.S. In A. Di Fabio. (Discussant), *International perspectives on college counseling: Increasing counselors' international competencies in the era of globalization*. Symposium presented at the meeting of the 31st International Congress of Psychology, Yokohama, Japan.

Sato, T. (2016, March). *Difficulties of college students with ASD and treatment recommendation*. Invited presentation at the University of Louisville Counseling Center, Louisville, KY.

Sato, T., Leach, M. M., Mearns, J., & Nakajima, T. (2015, August). *Cross-cultural comparison of interpersonal forgiveness in the United States and Japan*. Poster presented at the annual convention of the American Psychological Association, Toronto, Canada.

Sato, T. (2013, April). *Effects of computer use for math homework on math scores, and math self-efficacy*. Poster presented at Spring Research Conference 2013, Lexington, KY.

Sato, T. & Mearns, J. (2010, June). *Negative mood regulation expectancies, attitude toward help seeking, comfort with affect, and suicidality of Japanese college students*. Poster presented at the Society for the Psychological Study of Ethnic Minority Issues, American Psychological Association-Division 45, Ann Arbor, MI.

RESEARCH EXPERIENCE

Post Traumatic Growth and Resiliency of Children and Adolescents with Cancer Project
St. Jude Children's Research Hospital, Memphis, TN August 2016 – present
Title: Research Member

Advisor: Sean Phipps, PhD

- Connectedness to parents and friends influencing posttraumatic growth in children and adolescents with cancer
 - Develop research questions
 - Analyze and interpret data
 - Write and review a manuscript
- Spiritual and existential coping as a resilience factor in children and adolescents with cancer
 - Contribute to develop research questions, and write and review a manuscript

Forgiveness Study Project, Department of Counseling and Human Development
University of Louisville, Louisville, KY. August 2012 – present

Title: Research Member

Advisor: Mark M. Leach, PhD

- Developed research ideas, planned, and conducted the research
- Prepared materials for IRB submissions
- Analyzed and interpreted data
- Prepared a conference poster

The DTAMS (Diagnostic Teacher Assessments in Mathematics and Science) middle school mathematics, Departments of Early Childhood and Elementary Education, Middle and Secondary Education, and Special Education
University of Louisville, Louisville, KY. August 2012 – Jul 2015

Title: Graduate Research Assistant

Advisor: William Bush, PhD

- Assessed the previous DTAMS items
- Created and evaluated new DTAMS items
- Prepared for meetings and pilot testing sessions
- Scored the testing results and entered the data

Content Analysis Project of *Psychology of Religion and Spirituality*
University of Louisville, Louisville, KY. August 2012 – January 2013

Title: Research Member

Advisor: Mark M. Leach, PhD

- Contributed to conceptualizing the organization of journal contents
- Analyzed and coded contents
- Contributed to a written section to a peer-reviewed article

The Negative Mood Regulation (NMR) Laboratory, Department of Psychology
California State University, Fullerton, CA. January 2007 – May 2010

Title: Research Team Member

Advisor: Jack Mearns, PhD

- Contributed to translating the original NMR items into Japanese and created new items with cultural consideration
- Created youth versions of the NMR and translated them into Japanese with cultural consideration
- Collected, entered, and analyzed data
- Contributed to a manuscript writing and reviewing

Cognitive Developmental Laboratory, Department of Psychology and Brain Science

Indiana University, Bloomington, IN.

August 2005 – July 2006

Title: Research Team Member and Paid Research Assistant

Advisor: Linda Smith, PhD

- Assisted with experimental plans, created experimental stimuli, conducted experiments, and coded data
- Recruited preschool children and their parents

Marital Violence Laboratory, Department of Psychology and Brain Science

Indiana University, Bloomington, IN.

August 2004 – December 2005

Title: Research Team Member

Advisor: Amy Holzworth-Munroe, PhD

- Coded interactions of distressed and non-distressed couples

TEACHING AND SUPERVISION EXPERIENCE

▪

Visiting Associate Professor

April 2015 –

present

Hokkaido University of Science, Sapporo, Hokkaido, Japan

- Taught several sessions per year
- Conducted and presented research with other faculty

Graduate Supervisor

January 2015 – July

2015

Department of Counseling and Human Development

University of Louisville, Louisville, KY

- Provided supervision to one master's-level student
- Facilitated group supervision to master's-level students

Part-Time Lecturer

January 2011 – May

2011

California State University, Fullerton, CA

- Instructed one section of an abnormal psychology class
- Created and administered course quizzes, assignments, and tests
- Conducted class lectures and held office hours

Guest Lecturer

December 2010

Mt. San Antonio College, Walnut, CA

- Taught one session on psychological disorders and psychotherapy

PROFESSIONAL AND ACADEMIC MEMBERSHIP

▪

American Psychological Association (APA) Student Member
Division 17: Society of Counseling Psychology
Division 52: International Psychology
University of Louisville ECPY Doctoral Student Organization

ATTENDED WORKSHOPS AND TRAININGS

▪

Levenson, H. (April 2016) Time-limited dynamic psychotherapy: An attachment-based, emotionally-focused, relational approach. CE training through Kentucky Psychological Association. Louisville, KY.
Medical School of South Carolina (March 2015). *Trauma-Focused Cognitive-Behavioral Therapy*. On-line CE training.
Rossman, K. & Thai, J. (March 2015) *Trans 101 for therapists*. Training at Spalding University. Louisville, KY.
Sheppard, T. (December 2014) *Group psychotherapy with children and adolescents: An introduction*. CE training at University of Louisville. Louisville, KY.
Delano, M. (October 2014) *Autism tips and strategies*. Training at University of Louisville. Louisville, KY.
Pelham, W. (September 2014) *Are we overmedicating America's children? Psychosocial, pharmacological, combined, and sequenced interventions for ADHD*. Training at University of Louisville. Louisville, KY.
Owen, J., Strokeff, J., & Manthos, M. (October 2013) *The couple therapy workshop*. CE training at University of Louisville. Louisville, KY.

PROFESSIONAL REFERENCES

▪

Mark M. Leach, PhD
Department Chair, Professor
Department of Counseling and Human Development
University of Louisville
Louisville, KY 40292
Phone: (502) 852-0588
Email: m.leach@louisville.edu

Dissertation Chair

Katy Hopkins, PhD
Clinical Coordinator, Instructor
Department of Counseling and Human Development
University of Louisville
Louisville, KY 40292
Phone: (502) 852-0632
Email: katy.hopkins@louisville.edu

Practicum Supervisor

Laura Murphy, EdD
Chief of Psychology
The Boling Center for Developmental Disabilities
The University of Tennessee Health Science Center
711 Jefferson Avenue
Memphis, TN 38105
Phone: (901) 448-6511
Email: lmurphy@uthsc.edu

Internship Supervisor

Lauren Gardner, PhD
Psychology Internship Director, Psychologist
Johns Hopkins All Children's Hospital
Child Development and Rehabilitation Center
880 Sixth Street South
Suite 420
Saint Petersburg, FL 33701
Phone: (727) 767-7124
Email: lgardn18@jhmi.edu

Internship Supervisor