Sierra Leone Forgiveness Project

Geopolitical Census

Sierra Leone is located on the west coast of Africa on the Atlantic Ocean, with Guinea situated to the north, Liberia on the southeast, and the Atlantic Ocean on the southwest. The country is small covering only a total area of 73,000 square kilometers and is divided into four regions: Northern, Southern, Eastern, and Western Area, where the capital, Freetown, is situated. There are 12 districts and 149 chiefdoms that use both modern and traditional governance styles.

Sierra Leone's latest census figures (Statistics Sierra Leone, 2006) show that the population is close to 5 million with 13 different ethnic tribes and 23 different languages. The two main religions are Islam and Christianity. The majority of citizens identify as Muslim (60%) and almost one-third continue to hold Traditional Beliefs. Religious tolerance is a unique feature of Sierra Leone and is not a factor in the creation of friction among groups.

Civil War

In 1991, rebel forces initiated the first power grab in eastern Sierra Leone. The country had a moment of hope in 1996 when popular former UN diplomat Ahmad Tejan Kabbah was elected president. In the following year the rebels consolidated power in the villages and countryside and threatened the stability of the capitol city of Freetown. In 1997, the rebels overthrew the president and brutally ruled the country for ten months. The ensuing three years saw power struggles between the rebels and the former government of President Kabbah. During this time the people of Sierra Leone experienced significant carnage, disruption and pain. Many civilians and soldiers joined the rebel forces while others were recruited against their will. An appalling number of children were recruited by force and used as child soldiers. In May 2000,

British troops were sent to Sierra Leone to stabilize the country and on January 18, 2002

President Kabbah declared that the civil war was officially over.

Seven-Year Aftermath

The decade-long war resulted in estimated tens of thousands of deaths, hundreds of

thousands maimed, mutilated and disabled, and more than 2 million people displaced from their

homes. Some are still refugees in neighboring countries. Rural-to-urban migration was

accelerated during the war as camps for displaced people were set up in and around the capital

city of Freetown contributing to massive overcrowding. People were slow to move back to their

places of origin which taxed Freetown's infrastructure beyond its limits resulting in food

shortages and an exorbitant cost of living.

The devastating effects of Sierra Leone's civil war on all areas of life cannot be

overestimated. In 2005, Sierra Leone was last on the United Nations Development Programme's

Human Development Index, measuring health, education and economic indicators (2007/2008

Human Development Reports). Life expectancy was 42 years, one of the lowest in the world.

One in four children dies before age five. Sierra Leone has the highest infant and maternal

mortality rate in the world no doubt due to an underfinanced and overburdened health care

system. More recently, Sierra Leone received the dubious distinction of being rated the worst

place to be a woman in Sub-Saharan Africa. One in eight women die during pregnancy or

childbirth and girls can expect to receive only six years of schooling. More than 80% of girls are

subject to female genital mutilation (FGM) and an estimated one-third of the country's women

and girls have suffered sexual violence. Widows struggle to get by, survivors of wartime rape

face stigma and discrimination, and men continue to assault women with impunity. In 2007 the

Parliament finally enacted laws that criminalize wife-beating and allow women to inherit

property. How well these laws will be enforced by the government and traditional leaders remains to be seen.

Many of the Sierra Leonean cultural traditions were strained and altered due to the war and resulting poverty and migration. For example, in 2007, it was estimated that countless girls had not gone through the traditional rite of passage into womanhood because of the war ("Female Genital Mutilation," 2009). This ceremony traditionally involved female genital mutilation. It lasts from six months to two years and is done with great secrecy. In addition, the Truth and Reconciliation Commission's (TRC) report on Sierra Leone pointed out that many other long-held traditions and cultural rituals were discarded as more and more people joined the war (Truth & Reconciliation Commission, Sierra Leone).

Cultural, Religious, and Ritualistic Forms of Coping

A variety of cultural traditions and rituals have been used in Sierra Leone by communities and aid workers to help those in the process of healing. The task is a daunting one; to help people deal with atrocities which are beyond words, as well as, aiding in the everyday concerns that make development problematic. Traditional cultural practices were extensively used by those attempting to heal during the war, even as people were still engaged in the fighting (Peddle, 1998). These same practices were again called upon to help with the reintegration of survivors, as well as, the perpetrators of the war after the fighting ended. Commonly used cultural traditions and rituals include: 1) storytelling, 2) singing of songs, 3) drumming and dancing, 4) pouring of libations, 5) cleansing ceremonies, 6) proper burials, 7) respect for the dead, and 8) forgiveness. Traditional cultural practices are also currently used in variety of health and human welfare initiatives such as fighting HIV/AID's, ending harmful traditional practices like female genital mutilation, understanding human rights, and other initiatives. It is thought that

using culturally appropriate interventions drawn from a community's experiences and knowledge can increase the long-term self-reliance of communities, families, and children (Peddle, Stamm, Hudnal, & Stamm, 2005). Interventions encourage all community members, including the children, to take active roles in stating the problems and in then coming up with workable solutions.

Forgiveness as a Culturally-Relevant Way of Coping with Trauma

The TRC in Sierra Leone promoted the idea that healing activities should be based on the culture and traditions of the people when possible. Hence, the TRC sought assistance from traditional and religious leaders to facilitate public discussions and help with resolving conflicts arising from past violence to promote healing and, if possible, reconciliation. Based on the South African TRC model, forgiveness was an important intervention in Sierra Leone. The President of the country provided strong leadership to promote forgiveness at every level throughout the country by pleading with the population to forgive one another. The religious leaders and traditional leaders were also instrumental in participating in many ceremonies of forgiveness and reconciliation. The intervention of forgiveness combined with the healing strategies of telling the trauma story have been used as a therapeutic approach in a number of countries with some success (Dubrow & Peddle, 1997; Schumm, 1995; Staub & Perlman, 2000). Forgiveness has also been used in ceremonies to promote healing (Johnson et al., 1995, Truth & Reconciliation Commission, Sierra Leone, 2004) and with refugees (Peddle, 2007).

In Sierra Leone, ceremonies were held in which the Chiefs acted on behalf of the community to symbolically acknowledge the wrongdoing and to smooth the way for victims and perpetrators to live together. The ceremony would be held in the village and a former rebel member would sprawl in the dirt begging for forgiveness for himself and all the other former

fighters in the village in front of the Chief and Headman. The Chief would then touch his head and accept him back into the community. While the Chief can extend forgiveness on behalf of the community, and was encouraged to do so by the TRC as a part of the healing process, the Chief cannot offer forgiveness on the *individual* level. This must be done when the victim and perpetrator meet.

Other interventions are needed to help individuals with this aspect of the forgiveness process. One of the difficulties with individual forgiveness involves the complications of intrapersonal and interpersonal dynamics. Though a community may have offered a form of symbolic forgiveness, certain individual members may still harbor resentment and wish for revenge. These intrapersonal and interpersonal issues are vital for victims to work through so that they can experience genuine forgiveness of their perpetrators and fully rejoin the forgiving community.

Approaches to Forgiveness Education

To understand the role of intergroup forgiveness as a mechanism of bringing peace to communities that have experienced violence is an important area of study. Recently an entire issue of the journal *Peace and Conflict: Journal of Peace Psychology* (Wagner, 2007) was devoted to this topic. Authors discussed the important, though sometimes controversial, role of intergroup forgiveness in paving the way to lasting peace in diverse settings such as Australia, Congo, South Africa, Chile, and Northern Ireland (Mellor, Bretherton, & Firth, 2007; Manzi & Gonzalez, 2007; Kadiangandu & Mullet, 2007; Ferguson, Binks, Roe, Brown, Adams, Cruise, & Lewis, 2007; Chapman, 2007). Though journal discussions provide confirmation that scholars recognize the importance of intergroup forgiveness in the peace process, little attention has been paid to the role of *intrapersonal* and *interpersonal* forgiveness as the cornerstone of intergroup

forgiveness. The reality is individual-level forgiveness research and intervention work in violent and troubled areas of the world has only begun.

Basic research is quite limited, but what does exist points to an important role for individual-level forgiveness to bring about reconciliation and peace. Good examples come from the work of Friedberg, Adonic, Von Bergen, and Suchday (2005), Kaminer, Stein, Mbanga, and Zungu-Dirwayi (2001), Stein et al. (2008), and Peddle (2007). Friedberg et al. measured individual-level forgiveness of others, stress, and rumination on the one-year anniversary of the September 11th terrorist attacks on America. What they found was that forgiveness of others predicted less rumination about the event and less stress. Furthermore, there was some evidence that forgiveness by lowering rumination appeared to have a beneficial association with stress.

Stein et al. measured participation and perceptions of the South African TRC and its relationship to forgiveness of others. They found that mere participation in the TRC was predictive of *less* rather than more forgiveness of others. Rather, positive perceptions of both victims' and perpetrators' experiences with the TRC were the important factors associated with increased levels of forgiveness. Kaminer et al. measured the experience of forgiveness and psychiatric status among South Africans living in the Western Cape region. Their results showed that lower levels of forgiveness were associated with higher risk of psychiatric morbidity. Peddle (2007) looked at the role of forgiveness in healing following trauma in refugees affected by war. She used both quantitative and qualitative measures. Both types of assessments revealed that those who were higher in forgiveness tended also to be higher in positive well-being.

Taken together, these studies suggest that in populations that have experienced traumatic social violence forgiveness may serve as an individual-level mechanism that reduces stress and promotes psychiatric health, two important factors in arriving at a state of peace. Furthermore,

forgiveness appears to be associated with one's perceptions of reconciliation efforts. To the extent that forgiveness is considered a necessary component of reconciliation (Worthington, 2006), then it is critical for peace workers to find and develop methods of fostering forgiveness which may then in turn bring reconciliation of warring parties.

Though proven approaches to fostering forgiveness in areas of the world with histories of violence and conflict are few and far between, there are a couple of examples that offer cautious optimism. The first example is Enright's work with children in Belfast, Northern Ireland (Enright, Knutson, Holter, Baskin, and Knutson, 2007; Holter, Martin, & Enright, 2006). In this work, Enright and his colleagues have used a process model of forgiveness similar to the one that has been used successfully in helping individuals that have experienced painful events (e.g., Freedman & Enright, 1996). The process model consisted of four major content units subdivided into 20 individual steps (Enright & Fitzgibbons, 2000). In Belfast, Enright et al. chose to work with young children in grades one through three. As a result, they needed an appropriate curriculum for children. They developed a three part curriculum that focused on five core themes including: 1) inherent worth, 2) moral love, 3) kindness, 4) respect, and 5) generosity. The results of Enright et al.'s (2007) work show that children receiving the forgiveness education show less anger and depression and more pro-social behaviors.

The second example of an effective approach to fostering forgiveness and reconciliation in an area exposed to violence and trauma is Staub, Pearlman, Gubin, and Hagengimana's (2005) intervention in Rwanda. Staub et al. worked with group facilitators in a nine day seminar that focused on psycho-educational and experiential aspects of reconciliation and healing. These group facilitators then offered the curriculum to 194 rural Rwandese. Pre-post evaluations of trauma symptoms and readiness to reconcile revealed that the intervention was successful in

reducing trauma symptoms and facilitating a readiness to reconcile. However, it should be noted that Staub et al.'s work was comprehensive and multidimensional and therefore, the benefit of this training is due only in part, to the promotion of forgiveness.

The final example of an effective approach to forgiveness education in victims of conflict, violence, and trauma is the work of Luskin and Bland (2000; 2001). Luskin and Bland worked with victims of violence from Northern Ireland in both studies. In the first study (Luskin & Bland, 2000), five women were brought to Stanford University for several days to complete the first Stanford-Northern Ireland HOPE Project. In the second study (Luskin & Bland, 2001) 17 men and women attended the second HOPE Project. In both cases, the forgiveness training focused on nine key components in the facilitation of forgiveness. They are: 1) telling one's story, 2) committing to forgiveness, 3) understanding what forgiveness is, 4) changing perspective, 5) stress relaxation, 6) adjusting unreasonable expectations, 7) refocusing on the positive, 8) empowerment, and 9) positively reframing one's story of hurt.

Participants in the HOPE projects showed measurable improvements in hurt, anger, depression, stress, optimism, and forgiveness. It is important to note that Luskin's approach to forgiveness focuses squarely on the individual and not on the group. While symbolic gestures of group forgiveness may be important in the quest for group reconciliation and peace, Luskin's (2002) approach is based on the logic that group forgiveness emerges through forgiving individuals. Hence, his attempt in Northern Ireland was to provide evidence of effective forgiveness education that could be used widely with victims of violence who were impeding progress toward peace. Luskin's model has been easily adapted and transferred to new individuals and new situations due in large part to the accessibility of his training to the lay

public. For this reason we chose to apply Luskin's forgiveness education in our work in Sierra Leone. It is to this project that we now focus our attention.

A Psycho-educational Forgiveness Intervention in Sierra Leone

Having already reviewed the cultural aspects of forgiveness and reconciliation in Sierra Leone and having described validated approaches to forgiveness education, we focus specifically on our attempt to apply Luskin's (2002) forgiveness training in Freetown, Sierra Leone. To prepare for working in the Sierra Leone culture, one dramatically different from where Luskin's curriculum had been developed, we gave great consideration to critical areas described by Peddle et al (2005) and Nader, Dubrow, and Stamm (1999) such as: place; time; religion, spirituality, and ceremonies; literature; primacy of the family-social status; death and dying; and coming in from the "outside." This provided us with a framework from which to design our education and research in a culturally sensitive way. Our main purpose and expectation was that by developing a culturally relevant version of Luskin's curriculum we could provide a positive stimulus toward reconciliation and peace through forgiveness education.

Overall Design and Methodology

Our project was both service- and science-oriented. We wanted to provide useful training in forgiveness but we also wanted to understand the effectiveness of this work. Hence, the design of our study entailed two parts: 1) curriculum development and implementation, and 2) intervention evaluation.

Curriculum

Development. To develop our forgiveness education curriculum we started with Luskin's established and validated *Forgive for Good* curriculum. We modified it to the needs of the Sierra Leone culture using Peddle et al.'s (2005) and Nader, Dubrow, and Stamm's (1999) work as a

guide to cultural sensitivity. The leaders of the forgiveness training in Sierra Leone (L.T., A.C., & A.S.) began by enrolling in a forgiveness course offered by Dr. Luskin. This course was offered via the internet, was fully interactive, and offered streaming video and private and public chat options. The course consisted of five 90 minute sessions spread over five weeks. During this time our team was in frequent conversation about the nature of forgiveness training and its essential elements. Our next step was to develop culturally-relevant *Forgive for Good* materials for Sierra Leone. During this phase of the curriculum development Drs. Toussaint, Peddle, and Luskin and team members Cheadle and Sellu worked collaboratively to take the original *Forgive for Good* materials and adapt them.

First, we adapted them to the Sierra Leone culture relying heavily on team member Anthony Sellu and Dr. Peddle to provide insight, suggestions, and modifications to ensure cultural appropriateness of the curriculum. Second, we developed two versions of the curriculum. One was suitable for adults and the other was suitable for children. In developing the children's version we relied heavily on the input of our teaching consultants (Ms. Jan Krinsley and Ms. Meagan Cox) from the Palo Alto California school district. Our consultants provided age-appropriate activities and guidance for delivering the *Forgive for Good* curriculum. These activities made the children's curriculum more experiential and helped make concrete some of the abstract concepts (e.g., imagery) presented in the adult version.

Materials. The curricular materials that resulted from the development work consisted of several items. First, Dr. Luskin found a donor to provide 100 copies of his book *Forgive for Good*. These books were brought to Sierra Leone and each adult participant was given a copy. Several other copies were provided to school administrators, staff, and teachers. The remaining copies were donated to local schools and libraries. Second, 50 bound copies of a culturally-

appropriate adult workbook based on Luskin's original workbook was developed and brought with us. Third, donors provided age appropriate supplies for use in delivering the children's curriculum. These ranged from incentives and treats (e.g. toothbrushes, teddy bears, pencils and pens) to materials used for visualization and imagery tasks (i.e., Polaroid camera).

Implementation. To implement the curriculum we (L.T., A.C., & A.S.) traveled to Sierra Leone in July 2007. We were hosted at the Dele-Peddle International School in Freetown, a preparatory school sponsored by the LemonAid fund (www.lemonaidfund.org). We spent five days at this school working with teachers and students. Our first day was spent only with teachers and consisted of providing an orientation and completing the baseline assessment. In the following four days we met with the teachers for approximately one and a half to two hours each day. During this time we discussed reading assignments, workbook exercises, and instructional strategies, as well as, answered questions and discussed issues such as civil war, societal forgiveness, and the Sierra Leonean culture. Per Sierra Leonean custom, we began each meeting with a prayer. We closed each session with guidance on how to provide forgiveness education to the nearly 150 children of the school. Each day teachers were both participants in the *Forgive for Good* curriculum and facilitators as they led students in their use of the age adapted curriculum.

Evaluation

Evaluating the effectiveness of our curriculum proved to be challenging for numerous reasons. First, we had to limit our evaluation to the teachers who completed the curriculum with us. In addition, we would have liked to have evaluated the children both before and after our training. However, the sheer number of children involved was so much greater than we anticipated and these numbers made measurement unwieldy. In addition we tried to limit our program to specified ages yet the crying need for intervention for all ages compelled us to take

all comers. Even though we chose our evaluation assessments carefully and piloted them before leaving, in Sierra Leone they required greater time to complete than we had anticipated. We had to prioritize and chose extra teaching rather than evaluation of children in addition to adults. Despite these challenges, we did succeed in providing the training to the teachers and children but only evaluated adults' changes in psychosocial variables from pre to post intervention.

Participants. Twenty four adult teachers (*M* = 33 years of age) participated in our evaluation effort. Thirteen of these teachers were randomly assigned to participate in the forgiveness training and 11 teachers were randomly assigned to a control group. We planned that the teachers assigned to the control group would receive the training following the initial evaluation phase of our work. Due to security threats at the school (i.e. armed robbery) where we were working, we were unable to complete the second phase of our training work. The teachers involved in the initial evaluation were more male (n = 16) than female (n = 7), more unmarried (n = 13) than married (n = 11), and parents of between zero and four children. The education levels of the teachers ranged from junior secondary school (roughly equivalent to middle school in the United States) to more than a four year college degree. Not surprisingly, monthly income indicated extreme poverty and ranged from $5 to $133 (*Median* = $60). All participants provided consent and volunteered freely to participate.

Measures. Our approach to assessment was multifaceted. We attempted to assess multiple aspects of psychosocial functioning that we expected might be impacted by our forgiveness education. These included forgiveness, gratitude and mental well-being (i.e., stress, depression, and happiness). *Forgiveness* itself was assessed using two standard forgiveness assessments. The Heartland Forgiveness Scale (HFS; Thompson et al., 2005) measured dispositional forgiveness, which is the tendency to be forgiving of oneself, others, and situations.

The Transgression-Related Interpersonal Motivations Inventory (TRIM; McCullough, Root, & Cohen, 2006) measured motivations (i.e., avoidance, revenge, benevolence) toward a specific transgressor. Both instruments use Likert-type response scales and consisted of 18 items. Though both the HFS and TRIM have demonstrated acceptable reliability and validity, in the present sample the reliability of these measures was insufficient on four out of the six possible subscales. Only the avoidance and benevolence subscales of the TRIM showed acceptable reliability (αs = .73 - .84).

$\quad$ *Gratitude* was assessed using the Gratitude Questionaire-6 (GQ-6; McCullough, Emmons, & Tsang, 2002). This scale assesses aspects of gratefulness, appreciation, and feelings about receiving from others. It contains six items that are rated on a Likert-type response scale. Previous research (McCullough et al., 2002) has shown acceptable reliability and validity for this scale. Reliability for pre- and post-assessments of gratitude were acceptable (αs = .65).

$\quad$ Mental well-being was assessed by looking at three domains of psychological health. *Stress* was measured with the 10-item version of the Perceived Stress Scale (PSS; Cohen, Kamarck, & Mermelstein, 1983) the most widely used measure of stress. The PSS measures perceived lack of control and uncertainty in an individual's life. Items are responded to on a Likert-type scale and acceptable levels of reliability and validity have been documented (Cohen, Kamarck, & Mermelstein, 1983). In the present sample the PSS showed acceptable levels of reliability for a short scale (αs = .53 - .65). *Depression* was measured through a commonly used assessment, the Center for Epidemiologic Studies-Depression 10-item Scale (CES-D 10; Radloff, 1977). This instrument measures on a Likert-type scale the frequency an individual experiences the most common symptoms of depression. The CES-D 10 is a psychometrically reliable and valid instrument (Radloff, 1977) and in the present study demonstrated acceptable levels of

reliability (αs = .60 - .67). The final domain measured was *happiness*. Happiness was assessed by measuring mood and satisfaction with life. Mood was assessed using the 20-item Positive and Negative Affect Schedule (PANAS; Watson, Clark, & Tellegen, 1988), and life satisfaction was assessed using the 5-item Satisfaction with Life scale (SWLS; Diener, Emmons, Larsen, & Griffen, 1985). Both measures utilize Likert-type response scales and have been shown to have acceptable psychometric properties (Watson et al.; Diener et al.). In the present study the reliability of the negative affect and the life satisfaction scales was acceptable (αs = .63 - .76), but the reliability of the positive affect scale was not.

Analyses. Our analyses compared the control group to the forgiveness education group on levels of forgiveness, gratitude, and mental well-being. We used analyses of covariance (ANCOVA) for these comparisons which allowed us to control differences between control and forgiveness groups at pretest and to compare differences in adjusted levels of forgiveness, gratitude, and mental well-being at posttest. Because of the pilot nature of this work and the small sample sizes involved in our statistical tests, we choose to apply an alpha level of .10 as significant. We paid special attention to the size of the differences in reporting our results. We do so in an attempt to balance between type I and type II errors (Cohen, 1977) and to ensure that the practical value of intervention efforts is not overlooked due to the lack of power to reject the null hypothesis.

<div align="center">Results</div>

Forgiveness & Gratitude

We treated our analyses of forgiveness differently than the other data. We computed change scores on the two reliable subscales of the TRIM which represented changes in avoidance and benevolence motivations from pre- to post-intervention. We then used ANCOVA to

calculate differences between control and forgiveness groups in changes in avoidance and benevolence while holding constant variations in the length of time since the transgression occurred. We did this because recent evidence (McCullough, Root, Berry, Tabak, & Bono, under review) suggests that forgiveness follows a distinct temporal pattern that is related to the time since the transgression occurred. By using time since the offense as a covariate, we remove the effect of time from our computations regarding the pre to post change in avoidance and benevolence across our forgiveness training. When we conducted this analysis we found that the control and forgiveness groups did not differ in a statistically significant fashion on the avoidance scale, $F(1, 21) = .53$, $p = .48$, $\eta^2 = .02$, but did differ on the benevolence scale, $F(1, 21) = 5.14$, $p = .03$, $\eta^2 = .19$. Furthermore, the size of this difference was large according to Cohen's rubric for determining effect size (Cohen, 1977). Participants in the forgiveness group showed much larger increases in benevolent motivations than those in the control group (see Figure 1).

Gratitude and Mental Well-Being

Our analyses of gratitude and mental well-being showed hoped for change on each outcome measure. In all cases we used ANCOVA to control for pre-existing levels of the variable and then compared the control and forgiveness groups at posttest. As compared to the control group, those who completed the forgiveness education showed lower levels of negative mood, $F(1, 20) = 3.57$, $p = .07$, $\eta^2 = .15$, stress, $F(1, 21) = 3.17$, $p = .09$, $\eta^2 = .13$, and depression, $F(1, 21) = 4.99$, $p = .04$, $\eta^2 = .19$, and higher levels of gratitude, $F(1, 21) = 3.73$ $p = .07$, $\eta^2 = .15$, and life satisfaction, $F(1, 21) = 5.17$, $p = .03$, $\eta^2 = .20$ (see Figure 2). In all cases, the size of the differences between groups was very large.

Analysis of Results

The main goal of our forgiveness education intervention was to develop a culturally-relevant version of Luskin's (2002) *Forgive for Good* curriculum for use in Sierra Leone and scientifically evaluate its effectiveness. Through the collaborative work of our team and consultants we developed cultural and age appropriate versions of the *Forgive for Good* curriculum and successfully delivered them in Sierra Leone. Our evaluation provides support for the effectiveness of our approach. Forgiveness education resulted in improved mental well-being and the development of more gratuitous dispositions among adult participants. Importantly, those who participated in the training showed dramatically improved levels of benevolent motives toward their offenders. Taken as a whole, these findings are similar to several studies showing important associations between forgiveness and mental health and well-being and positive effects of forgiveness education in developed countries (for reviews see, Toussaint and Webb, 2005; Wade, Worthington, & Meyer, 2005).

Given that participants were randomly assigned to the forgiveness education and control groups, threats to the validity of these findings as a result of selection factors are not likely. That is, often in this type of field work the effectiveness of different interventions has to be measured by comparing intervention and control groups where participants were allowed to determine if they wished to be part of the intervention or not. This causes serious problems in interpreting the effectiveness of the intervention itself, since the results could be due to the fact that those who chose to be in the intervention group may possess characteristics such as higher motivation, commitment, or personal relevance. Our randomized assignment procedure eliminates this confound.

Two other factors are important to note about our evaluation work. First, our education efforts used excellent assessment tools with long histories of use and strong psychometric characteristics. This is an improvement over studies of this type that often rely on personal anecdotes for evidence of effectiveness (Ross & Rothman, 1999). Second, our intervention was based on a standard forgiveness education curriculum. Hence, while small in scale and pilot in nature, our study may be the first randomized, controlled trial of forgiveness education in an impoverished area with a history of a bloody civil war

Discussion

In nations with a violent past the survivors face the challenge to make sense of these events and to restore hope for the future. This occurs simultaneously with continuing to cope with the physical and psychological scars of conflict, violence, and war. While many approaches may be used to help hurting people move forward, forgiveness appears to be a particularly hopeful means of coping. In Sierra Leone the devastation and hurt from a decade-long civil war is readily evident and the trauma and grief that Sierra Leoneans endured has not been easily overcome. Unanswered questions for the provision of psychosocial support and intervention are: 1) Can forgiveness be made culturally-appropriate? 2) Can attempts to promote forgiveness be effective in improving individual levels of well-being and peace?

Although cultures may exist where forgiveness interventions may be problematic, our experience in Sierra Leone suggests that attempts to bring about increased forgiveness are culturally-appropriate and well-received. Furthermore, we provide scientific evidence that these efforts can be effective agents of change in stimulating hope, well-being, and peace at the individual level. As Sierra Leone's bishop Joseph Christian Humper has stated, "Learning to forgive those who have wronged us is the first step we can take towards healing our traumatized

nation" (Humper, 2004). Our thinking is that forgiveness that is capable of healing nations must begin with individual citizens. Effective strategies that promote forgiveness at the individual level hopefully will create a groundswell of forgiveness that can offer resolution and relief that can cross the boundaries of states, nations, and cultures.