Abstract

This article demonstrates:

1. How to track changes during psychotherapy using a wide variety of measures drawn from the fields of positive, cognitive and spiritual psychology and well-being. This assessment approach was first discussed over 20 years ago. (Friedman, 1982a; Friedman, 1982b)

2. How substantial and often dramatic changes in these measures can be demonstrated in a short time by using interventions drawn from the fields of cognitive, positive, spiritual and energy psychology. Many of these interventions can be found in the following articles, book and manual (Friedman, 1989; Friedman, 2000; Friedman, 2001; Friedman, 2002).

3. How forgiveness and gratitude play a key role in these changes in addition to major shifts in the energy of the clients.

4. How the Miracle Goal and One Question Question, the Psychological Uplifter, Pressure Point Therapy and the 16 Step Forgiveness Process can help catalyze substantial and often dramatic change in a short period of time.
Background

Clients are instructed over the phone that they will be asked to fill out some assessment scales in the waiting room before the initial consultation. At the end of the initial consultation they are instructed that they should come 10-15 minutes before future psychotherapy sessions to fill out a short series of scales in the waiting room. This procedure has been used successfully for many years. (Friedman, 1982a; Friedman 1982b; Friedman, 2002). Ninety-five percent of clients comply with this request when it is communicated as a natural and routine part of the consultation and therapy process.

Methods

In this study 25 distressed clients who were about to enter psychotherapy with Dr. Philip Friedman were first administered a series of assessment questionnaires:

Friedman Well-Being Scale (1992); Bradburn Well-Being Scale (1969); an adaptation of the Fordyce Happiness Scale (1988) called the Fordyce Well-Being Scale; Satisfaction with Life Scale (Diener et al. 1985); Friedman Belief Scale (1993); Friedman Affect Scale (1998); Friedman Quality of Life Scale (1996); Friedman Self-Worth Scale (1997); Friedman Meaning Scale (1997); Hopkins Stress Symptom Inventory (1973); Heartland Forgiveness Scale (2005); McCullough, Emmons and Tsang, GQ6 Gratitude Scale (2002); the Watkins GRATS-R Gratitude Scale (2003) and McCullough et. al’s (2003) Transgression-Related Interpersonal Motivations Scale (TRIMS).

All assessment scales were generally rather short and were selected or developed so that they could be easily administered, scored and tracked during psychotherapy. Clients were also readministered this set of scales every 5, 10, 15 and 20 sessions if they continued in therapy that long. Only clients who continued in therapy for 5 or more therapy sessions (which were most of them) were included in this study. Since this was a study conducted during the course of an ongoing clinical psychotherapy practice, no effort was made to develop a control group. This would of course be beneficial in future research.

Demographics

The average client was 42 years old. The clients in this study had a mean individual income around $50,000 and a mean family income around $90,000. There were 15 men and 10 women for a total of twenty-five clients. There were also twenty-five clients who were in therapy and filled out the assessment scales at the fifth therapy session; twenty-one clients at the tenth therapy session; thirteen clients at the fifteenth therapy session and ten clients at the twentieth therapy session.

Over half of the clients had been in psychotherapy previously, some a number of times. Many of the clients had symptoms of distress for many years, though others had only recently experienced symptoms of sufficient magnitude to seek professional help. Most clients previously experienced traditional psychotherapies of various kinds. In one instance, a client had experienced a number of energy therapies previously.

Typically, the average psychotherapy client at intake has a mean distress score on the Hopkins Stress Symptom Inventory of between 90 and 110. The mean distress score on the Hopkins
Stress Symptom Inventory for all 25 clients in this study was 108. A normal population score on the Hopkins Stress Symptom Inventory is 22. The mean well-being scale scores on the Bradburn, Fordyce and Friedman Well-Being scales for this sample of clients, respectively, were 29, 35, and 47, while the mean in general for a distressed clinical population on these measures is 32, 33 and 44 respectively. Lower scores indicate more emotional problems. The normal population score means are 55, 61 and 64 respectively for these measures. In general clients came in with a wide variety of personal, relationship and work related problems including traumas, phobias, anxiety, depression, anger, guilt, low self-esteem, marital and relationship problems etc.

**Interventions:**

There were ten key treatment interventions used in the early therapy sessions:

1. Assessment and Feedback. (session 1)
2. Goal Setting (session 1)
3. The Miracle Goal Question and the One Question Question described below) (session 1)
4. Encouraging small positive steps, positive feedback and support (session 1 and throughout)
5. The Psychological Uplifter, described below (end of session 1)
6. The Two Paths Model of Happiness/Change with Diagrams (end of session 2)
7. Lending Clients the book “Love is Letting Go of Fear” by Jerry Jampolsky. (end of session 2)
8. Lending Clients the book “Forgiveness: the Greatest Healer There Is” by Jerry Jampolsky. (end of session 3)
9. 16 Step Forgiveness Process, described below (usually session 4)
10. Pressure Point Therapy, described below (usually session 4).

**The Miracle Goal Question**

Given at the end of therapy session one along with the One Question, Question

Here is my typical introduction to this therapy approach:

Now that we have talked for a while and I have given you feedback on the assessment scales I want to change the focus. We are going to set some goals for the future: positive, beneficial and constructive goals; miracle goals as I like to call them. We will work to achieve these goals over the next three, six and twelve months.

Please pick up that pencil. Imagine that the pencil has just turned into a magic wand. Imagine that right before you go to sleep tonight you wave the magic wand and wake up three months from now. What positive changes would have taken place in your life? More specifically, how
would you think, feel, perceive, relate and behave differently and how would other people perceive you differently?

Then, imagine you wave the magic wand again three months from now, right before you fall asleep, and wake up six months from now. Again what positive changes would have taken place in your life? How would you think, feel, perceive, relate and behave differently and how would other people perceive you differently?

Finally, imagine that you waved the magic wand one more time, six months from now, and woke up one year from now. What positive changes would have taken place in your life?. How would you think, feel, perceive, relate and behave differently and how would other people perceive you differently?

The only caveat or restriction on the miracle goal question, as I like to call it, is that you can’t change the behavior of any person in the direction he or she doesn’t want to go. I will write down the “miracle goals” as you say them and help you shape them into positive, constructive goals over the next three, six and twelve months.

**The One Question, Question**

Before we do the ‘Miracle Goal Question’ though I would like to do the ‘One Question, Question.’ If you had one and only one question you would like to ask me, what would it be? That is, what would your most important question be if you could get an answer to it from me? Think about what you have told me in the interview and the feedback I have given you so far. I will do my best to answer that question. Another way to ask that question is: imagine you have finished the interview and you are driving home or back to work or wherever you are going and thinking about the therapy session. What question would you say to yourself you would have really liked to ask Dr Friedman, that you didn’t ask? That is the question.

**The Psychological Uplifter**

After setting goals with clients at the end of the initial consultation, all clients are taught one intervention to help them get started in a positive direction: the ‘Psychological Uplifter’. This intervention gives clients something constructive to do in a positive direction; gives clients hope; reduces emotional distress; reverses negative energy patterns and enhances self-esteem. It also facilitates a ‘miracle mindset.’ Like any other intervention, some clients practice it more diligently than others. Overall, though, it seems to catalyze very beneficial and positive changes. Most clients smile or laugh while doing it at the end of the initial consultation along with the therapist who models it for them.

"Even though I have this problem or negative emotion, (fill in the emotions e.g. fear, anxiety, hurt, anger, depression, sadness, frustration, guilt, shame, low self-esteem, marital, family, relationship and work problems, ____________ etc.) I accept myself deeply and profoundly and I am a good and magnificent person." This is repeated three times while rubbing on the ‘sore point.’ (just below the midline of the collarbone, on the chest). Then say, "I love myself unconditionally despite my problems, limitations and challenges" three times while rubbing on the ‘sore point.’ Then say "I am entitled to
miracles,” three times while rubbing on the ‘sore point.’

I recommend, “Do this ten to twenty times a day or as often as possible”

The above statements are then given to clients as a handout. They are asked to practice this frequently throughout the day, preferably ten to twenty times a day.

**Pressure Point Therapy**

Most clients were taught one of the levels of Pressure Point Therapy (PPT), usually in the fourth therapy session. Most clients experienced powerful benefits from Pressure Point Therapy. However, like all interventions, some clients took more strongly to it than others, and occasionally someone was uncomfortable with it. In that case any one of a number of other interventions were used, such as the Active Change Technique (ACT); Creating and Receiving Technique (CART); Light Imagery Grateful Heart Technique (LIGHT); or Relaxation And Positive, Posthypnotic Suggestions (RELAPPS) technique, all of which can be found in *Creating Well-Being* (Friedman, 1989) or the *Integrative Healing Manual* (Friedman, 2000). Sometimes, Laura Day’s ‘Healing Circle’ audiottape was used. (Day, 2000) or occasionally marital or relationship therapy sessions were held. Needless to say, these techniques were always introduced within a caring, empathetic, compassionate relationship context, accompanied by personal sharing and the use of educational and healing storytelling by the therapist. Moreover, the timing and style of implementing these techniques was always tailored to the needs of the individual client.

Pressure Point Therapy has been positively influenced by the excellent work of Callahan (2002), Craig and Fowle (1999), Diepold, Britt and Bender (2004), Fleming (1999), Gallo (2000, 2002) and Mountrose (2000, 2006). There are six Pressure Point Therapy Levels in all. (Friedman, 2000; Mountrose, 2006).

**Pressure Point Therapy Level Five**

1. Identify a feeling/emotion that is distressing you. This is usually triggered by a specific situation, person or circumstance.

2. Use the Psychological Uplifter first: Even though I have this distressing feeling/emotion (insert name of emotion) I accept myself deeply and profoundly, and I am a good and magnificent person. I love myself unconditionally despite my problems, limitations and challenges. I’m entitled to miracles.

3. Rate the feeling on a scale from 1-10. This is the *subjective units of distress* (SUDS) rating, in which 10 = the most distressed possible And 1 = no distress at all.

4. Briefly focus on the emotion/feeling (attune to the emotion/feeling)

5. Place two fingers in the middle of your forehead (MF), the first point, and hold them there for 5 seconds.

6. Does the distressing emotion, feel better, worst, or the same?

7. Tap 10 to 15 times at MF.
8. Does the emotion feel better, worst, or about the same?

9. Hold that point and take 3 slow deep breaths (breathe in through the nose and out through the mouth).

10. Does the emotion feel better, worst, or about the same?

11. What thoughts, feelings, images, or body sensations are coming up for you?

12. On a scale of 1 to 10 how strong is the emotion now?

13. Repeat each of the 4 steps (holding, tapping, holding and breathing and noticing what is coming up) for each of the following pressure points (locations)

14. The inside of the eyebrow.

15. The side of the eyes

16. Under the eyes.

17. Under the nose (above the lip)

18. Below the lip

19. Back of the neck

20. The collarbone points.

Repeat each step until the feeling/emotion is at a SUDS level of 1.

16-Step Forgiveness Process

This 16-step forgiveness process was almost always given to the client after he/she had read Jerry Jampolsky’s two books, ‘Love is Letting Go of Fear’ and ‘Forgiveness: the Greatest Healer There Is,’ after the second and third therapy sessions, respectively. The 16-step forgiveness process succinctly summarizes the main points regarding forgiveness in these two books and is also a good summary of many of the key ideas on forgiveness in ‘A Course in Miracles’ (1975) and ‘Creating Well-Being: The Healing Path to Love, Peace, Self-Esteem and Happiness.’ (Friedman, 1989).

1. Set the goal first: peace, love, harmony in relationships

2. Have a ‘little willingness;’ choose to be willing to forgive

3. Choose consciously to forgive, i.e. to begin to let go/release judgments, grievances, attack thoughts, shoulds.

4. Choose to see things differently: e.g. choose to see that anger covers up fear and fear is a call for love.

5. Realize that forgiveness (of self and others) is a process that unfolds over time.
6. Choose to let go of the hope of a different and better past.

7. Choose to be happy rather than right.

8. Choose to be compassionate with yourself and others.

9. Choose to see things from the other person's point of view and empathize with them.

10. Remember that an inch is a cinch, a yard is hard. Take one small step at a time.

11. Turn the forgiveness process over to the Holy Spirit or a higher power or force within you. The 'ego' doesn't want to forgive. The 'ego' is the part of the illusory mind that has separated itself off from God or the Higher Self and focuses on fear, grievances, judgments, attacks, resentments, hurts, victimhood and grudges. Remember that forgiveness is a learned process, attitude and shift in perception and beliefs. Most people need help from a higher part of their mind/Being to step aside from their usual perceptions of themselves and others and be able to discover and develop new ways of dealing with their lives.

12. Change the grievance/attack story (self or others) to one of acceptance or preference.

13. Let go of ‘unenforceable rules’ and ‘shoulds’ (they should have done X: I should have done Y).

14. Lighten up. Don't take things so seriously or so personally.

15. Remember that what you focus on expands. What you pay attention to grows. Focus on seeing/feeling the Christ, Buddha, Jehovah, Allah, God, magnificence/greatness in each person including yourself.

16. Remember that forgiveness is a key to happiness, holiness, innocence, peace, joy, divinity and love which are the essence of your Being and you “can” learn to recognize/remember that essence.

Case Study Describing a Clients Experience in His Own Words.

No more fear, pain, guilt, grief or anger

I knew what death was: hate, fear, and many other drastic words to say, 'I'm afraid'. My unmarried mother gave birth to me at the age of 16, in 1959. An Aunt/Uncle in South Carolina raised me. I knew fear very well. My uncle was an alcoholic and I was the one to clean him, put him to bed, and take his gun away from him when he felt like playing with it while drunk. I was 10 or 11 years old. That night I went to his room to help him into bed. It was a success. He was not fighting or throwing up. He had taken his pistol out of the drawer and I put it back in the drawer. He went to sleep. I continued my homework. I was sitting there on the foot of the bed, looking at myself in the mirror and suddenly the glass came at me. There was a very loud sound and I really didn't know what it was. I felt my body move just in time not to be hit in the head. He was not sleeping, but awake and playing with that damn gun. He was not concerned about me. He thought the bullet had hit my great grandmother. I was so afraid that night. I could not go to sleep. I didn't finish my homework. I just laid in the bed in fear. He pretended nothing happened after
that. No one ever said anything about it.

Years later, I was about to step into the world of deep anger, depression, grief, guilt, low self-esteem, marital and family problems. The anger I was feeling was about not having parents and not having an understanding wife. I was slowly becoming depressed and unable to step into the world of living and happiness. I was so empty inside. As time went by, I realized I was still dealing with a lot of grief. I lost a dear brother one month before my wedding to my beautiful wife. I watched my brother die. No one ever asked me if it was all right. No one ever talked to me about him or how his death helped change my life. I kept all these feelings hidden deep inside (so I thought). I learned from my wife that I was crying in my sleep. My brother was like a father to me. I never thought there would come a day I would bury him. Soon after his death and funeral, I got married in Canada, went on our honeymoon, relocated, and purchased a house. I had not allowed myself to feel the pain. I began to notice feeling guilty about leaving my family after his death. But now I had a wife who also needed my support as a husband. My dreams, hopes, and desires began to fade one by one. Now I was feeling so much guilt.

I've always known that helping others would be my calling. But what I did not know is how it would help me. As I was about to venture into the field of Case Management, it was required for each of us to make home visits and school visits. On this particular day, I had telephoned for a city taxi to take me to a home visit. At a red light, right before my very eyes, a young man of about 20, got out of the car in front of us. He walked passed the taxi, but made eye contact with each of us in the taxi. The guy pulled a handgun out of his jacket and fired into the car behind us. He quickly ran past the taxi, and got into the car in front of us. They began to go through the light and were shooting into the air. It took me back to 10 years of age. I experienced the same sound, the same anger, the same meanness and another opportunity where I could have been shot. As the weeks went by I found it very hard to go to work, to even go out into the field when I made it to work. I had a fear in me that would not go away. I found myself in a deeper depression. How could I tell my wife what had happened six months back, when working is very important to any family these days. I carried this burden for six months because I didn't want to disappoint her. But when the six month came I could not go any longer. I told her what had happened. She said she "understood and she would rather have me alive." That really felt good, but soon after that I could see the disappointment in her face. I could hear it in her voice. And I could do nothing but go deeper into the depression. I relived my childhood on that very day and I could no longer live with it.

I needed help. That event changed my entire life. I left that job. I promised myself that I would not put my life in danger for the mighty dollar. Even though I'm in a different state/city, the fear and pain was very real.

Still I didn't seek help from my current therapist until after another brother died suddenly a few years later. By that time I hadn't worked in two years.

I remember the very moment I decided to seek help. I just got the yellow page book and opened it without looking. It was very much a miracle that it would open to the page of a therapist who would help me through all this mess I had in my life.

When I made the call to his office to set the appointment I could feel that this would be the one to really help me. In our first therapy conversation, we spoke of all the evaluation sheets I had completed. I was off the chart for most of them. My stress symptom level was in outer space. He said it was 279, the second highest score he had
ever seen. There were things that made me cry. There were hopes and dreams I once had that were no longer part of me and I wanted them back. He instructed me through The Psychological Uplifter, which worked a miracle the very first day. I learned how to rid myself of negative thoughts, feelings, and other emotions. That Psychological Up-Lifter is part of my daily life and I know if more people would use it, they would soon notice results. I put it on my cell phone, so I could read it when I was stuck in traffic or at the mall.

Here is the beginning of my Psychological Uplifter: “Even though I have anger, depression, grief, guilt, low self-esteem, marital and family problems, I accept myself deeply and profoundly and I am a good and magnificent person”. The words are so powerful for me and I do think they could be powerful for all who are searching for peace and inner forgiveness. Depression is nothing to play with. It will bring you to the lowest of lows. You will find that you don’t even know yourself or can feel yourself.

Forgiving all things in my life is not an easy job; understanding the past of why I was treated in such a negative manner and the continued connection with the people who made me feel so bad about life and myself, seemed so sick. How could I love/like the people who hurt me? How could I continue to have a relationship with them? Trust me, it wasn’t easy, but it had to be done. I went into therapy to learn how to love, forgive, understand, and move forward in my life. My life is very important me and I desire to have wonderful things, people, and events in it.

I set a goal to seek peace in my life and relationships. Having a positive relationship was something I’ve always wanted with friends and family. The willingness to forgive came from within my spiritual self. I knew that my higher power would love me and forgive me, no matter what. So I wanted to be more like him and I found in my heart that through all of my pain, I could forgive others. It was going to take time to reach the total goal of forgiveness and peace. Some days I had to remind myself to “Let Go and Let God”. I knew in my heart I wanted too. But there were times when I would become so angry. I also realized that I could only change and heal myself. Those around me had to make their individual changes.

Forgiveness is an everyday test and I work on forgiveness every day of my life. Moving toward the better things of the heart: love, peace, joy, laughter, positive attitude and forgiveness. I want my soul to be free of the heartache I know so well. That’s why I choose forgiveness. I constantly refer to my copy of “A 16 Step Forgiveness Process” sheet. I have it in a binder and I keep it beside my bed. Whenever I feel the negative thoughts coming into my heart, I began to read it over and over. I soon move forward and give it all to my higher power.

The next therapy was the Pressure Point Therapy. I had no idea what the outcome would be. As I tried the exercise I could immediately notice a change within myself. I just focus on one emotion and work my way through the entire process of pressure points. and the more I continued this exercise, the better I felt. It will continue to be a tool for me to use no matter what’s going on in my life. It really keeps me at a very safe place in my mind, body, and spirit. I’ve worked through a lot of issues and I’m truly proud of myself for stepping out of the place I thought was safe. I’m feeling like I’m on top of the world and you know what, I deserve to feel this way. I’ve learned how to appreciate myself and others. I’m at peace, I’m living and I’m dreaming once again. In fact, by the end of the fifth therapy session I was feeling so calm and relaxed that I had a score of zero on the stress scale that my therapist gave me.
After finding the therapist I have now, I’ve made it through. I’m a stronger person. I’m a loving person, and a caring person. I know that I can do all things through my higher power that gives me strength to do so. I love myself and I’m alive to tell about it.

So for those of you who are not so sure about what approach to take to start your healing process, the magic of it all is to just take that first step to get help.”

Results

Figure 1 shows the changes in well-being that took place over the course of therapy using the Friedman, Bradburn and Fordyce Well-Being Scales.

Figure 1. Changes in Well-being

There were dramatic changes over the first five sessions and more modest though continuing changes over the further sessions. The changes between the first and fifth session were highly significant. Moreover, by the fifth session clients had reached a normative population score for all three measures.

Similar changes in well-being took place over the course of therapy using the Friedman Happiness and Quality of Life Scales (See Figure 2.) There were dramatic changes over the first five sessions and more modest though continuing changes after that. The changes between the first and fifth session were again highly significant, and by the fifth session clients had reached a normative population score for both measures.
Figure 2. Changes in Friedman Happiness and Quality of Life Scales

Table 1 shows the significance of change over the course of the therapy treatment for the well-being, happiness, quality of life and life satisfaction measures.

Table 1 indicates that on all six measures of well-being, happiness, quality of life, and life satisfaction, there were significant changes between therapy sessions one and five, and on five measures there was significant change between therapy sessions five and fifteen. There was also significant change on four measures between therapy sessions ten and twenty, and on one measure between therapy sessions ten and fifteen and between fifteen and twenty.

Table 1 Significance of Change for Well-Being, Quality of Life and Life Satisfaction Scales

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NS – non-significant
FWBC = Friedman Well-Being Scale
FQOLS = Friedman Quality of Life Scale
FHAPP = Friedman Happiness Subscale
BradWB = Bradburn Well-Being Scale
FornWB = Fornyce Well-Being Scale
SWLS = Diener et. al. Satisfaction with Life Scale.

The numbers in each cell indicate the probability that the change that occurred between any two sessions occurred by chance. For example, the probability that the changes in the FWBC
scale that occurred between therapy sessions one and five occurred by chance was .0001 or one in ten thousand.

Figure 3 shows the changes on the Hopkins Stress Symptom Inventory Total Score over the course of therapy.

**Figure 3. Changes in Stress Symptoms**

There were highly significant decreases in stress symptoms between the first and fifth sessions, with continuing but much more modest changes after that. By the fifth therapy session clients had almost reached the normative population score of 22 and had definitely reached it by the tenth session.

Figure 4 shows substantial changes in forgiveness and gratitude using the Heartland Forgiveness Scale and Watkins GRATS-R (revised) gratitude scale over the course of therapy.

**Figure 4. Changes in Forgiveness and Gratitude**
The Heartland Forgiveness Scale is a measure of dispositional or trait forgiveness. By the fifth session clients had reached the normative population score on both the forgiveness and gratitude measures. Again the changes between session one and five were highly significant and continued more modestly after that.

Figure 5 shows changes on the Heartland Forgiveness Inventory subscales: forgiveness of self, forgiveness of others and forgiveness of circumstances.

Once again there were substantial changes taking place between the first and fifth sessions such that the normative population score of 31 on all three forgiveness subscales was reached by session five though changes continued after that.

Figure 6 shows changes on the Transgression-Related Interpersonal Motivations Scale (TRIMS) a measure of unforgiveness directed toward one person who hurt you a great deal and is thus a state measure of forgiveness. The table shows significant changes on the total score and the two subscales scores of avoidance and revenge over the first five sessions continuing more modestly over time.
Table 2 shows the significance of change for the forgiveness and unforgiveness measures over the course of treatment. The Table shows that on all seven measures of forgiveness and unforgiveness there were significant changes between therapy sessions one and five while between therapy sessions five and ten there were significant changes on five of the measures. Only the TRIMS Avoidance measure (a measure of unforgiveness) showed significant change between therapy sessions ten and twenty, and between fifteen and twenty, however.

### Table 2. Significance of Change for Forgiveness and Unforgiveness Scales

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**NS** = non-significant;  **HFS** = Heartland Forgiveness Scale  
(T = Total score; S = Self subscale; O = Other subscale; C = Circumstances subscale)  
TRIMS = Transgression-Related Interpersonal Motivations Scale  
AV = Avoidant subscale;  **RV** = Revenge subscale

The numbers in each cell indicate the probability that the change that occurred between any two sessions occurred by chance. For example, the probability that the changes in the HFST scale that occurred between therapy sessions one and five occurred by chance was .001 or one in a thousand.

The next graph depicted in Figure 7 shows changes on gratitude, meaning and life satisfaction using the short GQ6 measure of gratitude, the Friedman Meaning scale and the Diener et. al. Satisfaction with Life Scale. Once more there were substantial and significant changes over the first five sessions continuing over time.
Figure 7. Changes on Gratitude, Meaning and Life Satisfaction

Table 3 indicates that there were significant changes on both gratitude measures between therapy sessions one and five and between therapy sessions five and ten. Only the GRATS measure of gratitude, however, showed significant change between therapy sessions ten and fifteen. There was no significant change on either measure between therapy sessions fifteen and twenty.

Table 3. Significance of Change for the Gratitude Scales

<table>
<thead>
<tr>
<th></th>
<th>Sess. 1-5</th>
<th>Sess. 5-10</th>
<th>Sess. 10-15</th>
<th>Sess. 15-20</th>
<th>Sess. 10-20</th>
</tr>
</thead>
<tbody>
<tr>
<td>GQ6</td>
<td>.004</td>
<td>.04</td>
<td>NS</td>
<td>NS</td>
<td>NS</td>
</tr>
<tr>
<td>GRATS</td>
<td>.002</td>
<td>.03</td>
<td>.05</td>
<td>NS</td>
<td>NS</td>
</tr>
</tbody>
</table>

NS = non-significant

The numbers in each cell indicate the probability that the change that occurred between any two sessions occurred by chance. For example, the probability that the changes in the GQ6 gratitude scale that occurred between therapy sessions one and five occurred by chance was .004 or four in a thousand.

Figure 8 shows the dramatic positive changes in cognitive and affective balance during the course of psychotherapy, especially during the first five therapy sessions. Cognitive balance is positive minus negative beliefs and affective balance is positive minus negative affects. Cognitive balance is measured using the forty item Friedman Belief Scale which has twenty positive beliefs and twenty negative beliefs on it. Affective balance is measured using the Friedman Affect Scale which has twenty five positive affects and twenty five negative affects on it. (Both the positive and negative affect scales are, in turn, divided into 5 subscales each). As you can see in Figure 7 changes continued throughout treatment after the first five sessions but at a slower pace.

Figure 8. Changes in Cognitive and Affective Balance
Figure 9 shows the change on the Hopkins Symptom subscales of depression, anxiety and anger.

**Figure 9 Changes in Depression, Anxiety and Anger**

Again there were significant to dramatic changes over the first five therapy sessions and these changes continued but at a slower pace thereafter.

**In Summary:**

Substantial and often dramatic changes in measures of forgiveness, gratitude, stress, quality of life, life satisfaction and well-being can take place in a relatively short time through interventions drawn from the fields of positive, cognitive, spiritual and energy psychology. Forgiveness and gratitude play a key role in these changes, as well as shifts in energy, beliefs and affect in clients. Specific interventions are suggested to help catalyze substantial and often dramatic changes, including the Miracle Goal and One Question, Question, the Psychological Uplifter, Pressure Point Therapy and the 16 Step Forgiveness Process.
This article demonstrates how it is possible to track changes during psychotherapy using a wide variety of measures drawn from the fields of positive, cognitive and spiritual psychology and well-being. A case study demonstrated how it is often possible to catalyze dramatic changes in a short period of time and assess the changes using well-established measures.
References


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