

Forgiveness-Hope Relationships Considering the Risk of Depression: Samples from Public School Students in A Religious Country

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ABSTRACT

This study described forgiveness-hope relationships among normal adolescents and those at high risk of depression in Indonesia, which is considered a religious country. This quantitative study involved 713 adolescents from a state vocational school in Semarang, obtained purposively in both sample groups (male = 64.1%; $n_{\text{High Risk}} = 42$; $n_{\text{Normal}} = 671$). Measurements used the DASS-Depression, Forgiveness Scale, and State Hope Scale. Data distributions supported non-parametric tests. Statistical analysis particularly used Spearman's Rho correlation. Additional analyses used descriptive statistics and Mann-Whitney U. The study resulted in a significant positive correlation between forgiveness and hope in each sample group; the correlation coefficient was greater in the high-risk sample ($r_{xy \text{ normal}} = .184$, $p < .001$; $r_{xy \text{ high-risk}} = .413$, $p = .006$). When the correlation in the normal sample was significant for each gender, the correlation in the male high-risk sample was not significant alone ($r_{xy} = .374$, $p = .104$). Specifically, both genders of the high-risk sample benefited from their pathways but not the agency subscale. Among all the forgiveness dimensions in the high-risk sample, only forgiveness of situations contributed to hope ($r_{xy} = .437$, $p = .004$), unlike the normal sample, which had the least contribution ($r_{xy} = .109$, $p = .005$). The results indicated that forgiveness may encourage better hope in more depressed adolescents, especially female adolescents. Targeting forgiveness in situations is the primary goal for depressed adolescents, thus encouraging efforts to find coping strategies regardless of their capacity. Further experimental studies can be suggested.

Citation:

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INTRODUCTION

Depression is one of the leading causes of disability and impairment in the world, with more than 280 million people worldwide affected (World Health Organization, 2021). Depression can even lead to suicide, which is the fourth most common cause of death among people aged 15-19 (World Health Organization, 2020). Among Indonesian adolescents, Idris and Tuzzahra (2023) recorded that 29.1% of the 3603 samples in Indonesia had depressive symptoms based on data from the Indonesian Family Life Survey 2014. Meanwhile, another study on 786 samples of Indonesian adolescents in Bandung by Dhamayanti et al. (2020) recorded a depression prevalence of 5.47% based on measurements using the Children's Depression Inventory and a structured psychiatric interview. Further, several studies have found that experiencing depression in childhood-adolescence is associated with a variety of adverse outcomes, including low academic achievement (López-López et al., 2021), failure to complete secondary school, unemployment, pregnancy/parenthood (Clayborne et al., 2018), depression recurrence, and higher severity of symptoms in the future (Roberts et al., 2021).

However, being religious and studying religion in school does not necessarily make adolescents immune to mental health problems like depression (Bulut et al., 2021). Even if the evidence shows that religiosity should have a positive association with aspects of mental health (Malinakova et al., 2020), according to a survey from Tamir et al. (2020), Indonesia is a religious country because 98% of the respondents deemed religion to be an important part of their lives. Defining oneself based on religious beliefs held significant significance among Indonesians, resulting in a scarcity of individuals identifying as religiously unaffiliated, such as agnostics and atheists, within the country. Indonesian laws ensure the freedom of religion; practically applying this right requires individuals to align themselves with one of the six recognized official religions: Buddhism, Catholicism, Confucianism, Hinduism, Islam, or Protestantism (Iswara, 2020).

Despite being a predominantly Muslim nation, scholars have observed that Indonesia does not qualify as an Islamic state or a completely secular one. Instead, religion is primarily framed as a socio-political matter within the country's democratic and nationalist framework (Diamant, 2021; Iswara, 2020). As a result, religious lessons became one of the compulsory subjects that must be learned in school. Even so, regarding depression among adolescents, religion always encourages humans to stay hopeful even when faced with the deepest troubles, as there is always God's mercy. QS Yusuf verse 87 reads, "And never give up hope of Allah's soothing mercy; truly no one despairs of Allah's soothing Mercy, except those who have no faith." Thus, a good bond with God will make a person have better mental functioning, as the Quran mentions, "...And whosoever puts his trust in Allah, then He will suffice him..." (Quran 65: 3; Bulut et al., 2021).

Hope is one of the qualities involved in depression. For adolescents, in general, hope plays an important role. Hope empirically can predict personal well-being in life among adolescents (Botor, 2019). It positively relates to positive psychological constructs such as self-compassion (Jiang et al., 2020), happiness with life, life satisfaction, and resilience (Botor, 2019; Bowers & Bowers, 2023). Hope relates to academic functioning in an educational setting, including school engagement and academic achievement (Bryce et al., 2019). It also helps consolidate personal identity during adolescence and sets the stage for future educational and career goals (Fraser et al., 2021). How hope has positive implications seems to be related to more adaptive functions such as planning and problem-solving (Bowers & Bowers, 2023). Islam sees hope as a light source but should be coupled with fear and reliance on God (Bahmani et al., 2018). Hope in Islam is for worldly or temporary and *ukhrawi* or afterlife (Wahyuna & Fitriana, 2020).

Hope is no exception when it comes to stressful situations, specifically transgression-related events. Stressful situations, specifically transgressions such as those experienced in childhood, may result in low hope and affect emotions, even behaviors. Muñoz and Hanks (2021) found that painful adversity experiences during childhood could lower hope into adulthood, as explained by the limited abilities of survivors to focus on present goals due to rumination as a byproduct of trauma, thereby lowering hope. Moreover, these may lead to self-destructive behaviors and greater obstacles. Depression as a negative emotional state and its symptom, i.e., suicide ideation, can finally be predicted by hope, as a study by Pharris et al. (2023) among adolescent samples shows.

At least two major concepts of hope relate to the interrelationship of hope and depression: dispositional hope, aligning with the understanding of hope as a trait, and state hope. Trait hope, as well as state hope (Snyder et al., 2021), contain two components: a cognitive set based on a reciprocally derived sense of successful agency (goal-directed determination) and pathways (planning to meet goals). Agency taps the individual's perceived capacity for initiating and maintaining the actions necessary to reach a goal. While pathways tap the perceived ability to generate routes to one's goals (Snyder et al., 2021). The difference is that trait hope is conceptualized as a stable and enduring cognitive set reflecting general rather than specific outcome expectations. The different roles of agency and pathways subscales regarding their relationship with depression have been investigated previously (Ritschel & Sheppard, 2018).

Hope as a trait has been investigated for depression using various measures. Kaleta and Mróz (2020) observed a negative correlation between these variables. Trait hope was also researched by Oakey-Frost (2022), explaining that it negatively predicted suicide cognitions. Nurdiyanto (2020) also found that hope was one of the reasons why suicidal ideation was suspended. A study by Pharris et al. (2023) on depressed adolescents supported the above description that hope could buffer their level of depression and suicide attempts.

In other studies on samples from more diverse populations, hope as a state may act as a dependent variable where its presence is predicted by other variables, including self-compassion (Todorov et al., 2019), gratitude (Witvliet et al., 2019), and spirituality (Espedal, 2021). Furthermore, these predictors are likely to be linked to the presence of depression, which also turned out to predict the state of hope (e.g., Todorov et al., 2019). Meanwhile, hope as an independent variable has been evaluated systematically in the educational setting by Marques et al. (2017), finding that it positively predicted academic achievement (including grade point average) and student assets but otherwise negatively predicted liabilities. The correlation is stronger for elementary, junior high, and high school students than for undergraduate and graduate students.

Besides the two conceptualizations related to hope above, hopelessness –as briefly mentioned earlier– is widely known to be consistently associated with depression. A study in patients with chronic disease by Liu et al. (2020) concluded that high hopelessness predicted suicidal ideation, mediated by depression and demoralization. According to the hopelessness theory of depression (Abramson et al., in Haefel et al., 2017), some individuals have cognitive vulnerability, which will increase the chance of depression when interacting with stressful life events. When individuals who have cognitive vulnerability encounter stressful life events, they tend to (a) attribute these events to stable and global causes, (b) view these events as likely leading to other negative consequences, and (c) interpret these events as evidence that they are unworthy and deficient. Individuals who generate these negative conclusions are hypothesized to be at risk for hopelessness, which is seen as a proximal and sufficient cause of depression.

There is a 'vicious cycle' of hope and depression, meaning that once depression reaches a higher level, effort may be useless. Based on the hopelessness theory of depression, as explained by Liu et al. (2015), the interaction between cognitive vulnerability and adverse life events can trigger feelings of hopelessness, which in turn leads to the development of depression – not only as a first onset but also as a recurrence or relapse. The appraisal that there is no hope may lead to depression –characterized by low activity–further lowering hope. These are what happens next until the increasing depression level –without any intervention– will degenerate the overall psychological function. Therefore, individual resources may be different between those who are in a normal psychological state and a depressive state, which becomes the background of this study.

Depression symptoms occur as a result of prolonged negative responses to stressful events that also affect the state of hope. As Muñoz and Hanks (2021) exemplified, stressful situations may involve transgressions close to forgiveness or unforgiveness. Forgiveness has been investigated, but limitedly, as one of the variables that are inter-correlated with depression and hope. Kaleta and Mróz (2020) further examined the mediation effect of forgiveness on the correlation between hope and depression. The general level of forgiveness, as well as

overcoming unforgiveness, fully mediated the correlation between hope and depression symptoms. The findings demonstrated that the tendency to forgive might be a mechanism through which hope reduces the odds of depression (Kaleta & Mróz, 2020). The mechanism of trait forgiveness contributing to depression among adolescents was investigated, for example, by Zhang et al. (2020), resulting in a direct effect or was partially atemporal mediated by cognitive reappraisal and expression suppression. Hope expresses cognitive reappraisal regarding capacity or ability related to certain circumstances (Snyder et al., 1996).

Forgiveness is important in religion, which is taught to make people understand the limitations of themselves and the perpetrator as human beings. It is a good way to deal with unpleasant situations (Warsah, 2020). As proposed by Thompson et al. (2005), forgiveness as disposition is a dialectical process through which people synthesize their prior assumptions and the reality of the transgression into a new understanding of the transgression, transgressors, transgression sequences, and, potentially, of themselves, other people, or the world. Therefore, considering transgressors, there are three dimensions of forgiveness, according to Thompson et al., and forgiveness in general itself, i.e., oneself, others, and situations.

With hope and depression, the forgiveness dimensions have been studied and appear to make unique contributions. Kaleta and Mróz (2020) distinguished the negative (reduction of unforgiveness) and positive (positive forgivingness) scales. Thompson et al. (2005) found that the reduction of unforgiveness of others was not related to hope and depression, in contrast to the reduction of unforgiveness of oneself and situations. On the other hand, positive forgiveness of others, oneself, and situations was significantly related to hope and depression.

Hope and forgiveness are positive psychological variables examined together for their role in several studies. Both hope and forgiveness are robustly associated with self-compassion (Booker & Perlin, 2020), which in turn is implicated in reducing levels of distress (Rahmandani et al., 2021) and depression (Pullmer et al., 2019). In another study, forgiveness and hope are jointly investigated for their role as mediators in the correlation between meaning in life and subjective well-being; hope and forgiveness fully mediate the correlation between meaning in life and subjective well-being (Yalçın & Malkoç, 2014). Research on the correlation between forgiveness and state hope, taking into account depression levels, is still limited, so it needs to be conducted.

Another variable considered in the current study was gender and its effect, which was quite consistent in distinguishing the above variables. Kaleta and Mróz (2022) suggested that forgiveness and its affective correlates were distinguished by gender. Another study among adolescents that examined the association between trait forgiveness and depression by Zhang et al. (2020) also concluded that the mediating effect of cognitive reappraisal, which relates to the emotion-

regulation process in females, was significantly greater than that in males. Quintana-Orts and Rey (2018) also discovered differences between genders in terms of the mediating role of forgiveness in the association between depression and suicidal thoughts and behaviors.

Hence, forgiveness correlates positively with hope among adolescents, but the contribution will be different depending on the level of depression risk and gender. Therefore, this study aims to describe the correlations between forgiveness and hope among adolescents by considering those who were at normal and high risk of depression, as well as those who were males and females. Forgiveness related positively to hope in both samples, while their descriptive comparisons would show differences. Furthermore, hypotheses surrounding these variables are more exploratory since two different samples considered the dimensions/subscales of these variables and gender, for which research was still limited. Precisely, this report wants to describe how this topic applies to adolescents who are taking non-religious formal education in a religious country, namely Indonesia. Furthermore, religious education in formal education in Indonesia, even if it is a religious country, is limited to approximately three hours per week (Ministry of Education and Culture, 2018). Researchers target students in public high schools, especially state vocational schools, focusing on graduates with a ready-to-work profile.

METHODS

This quantitative study used a cross-sectional design with self-reported questionnaires. This method was intended to retrieve data from the subjects and simultaneously observe the variables of research interest. Self-reported questionnaires were used, taking into account their feasibility in the target population. The variables in this study were forgiveness and hope. Researchers also considered other variables to be controlled for, namely the level of depression symptoms and gender.

Research Subjects

A total of 909 adolescents from an A-accredited state vocational school in Semarang, Indonesia, who were initially obtained through cluster random sampling techniques, were involved in data collection using the paper and pencil test method in 2019. Subjects that involved several classes from grades 1 to 3 had depression symptom levels in the normal, mild, moderate, severe, and profound categories, respectively 73.82% (n=671), 12.65% (n=115), 8.91% (n=81), 3.3% (n=30), and 1.32% (n=12).

Table 1 shows demographic characteristics and descriptive statistics of age involving 713 subjects ($M_{Age} = 15.9$; $SD_{Age} = .91$; Male=64.1%) who were purposively obtained from those in the normal category (n=671 [94.11%]; $M_{Age} = 15.9$; $SD_{Age} = .9$; Male=65.13%), and in high-risk, particularly severe and

profound categories of depression symptom levels (n=42 [5.89%]; $M_{Age} = 15.9$; $SD_{Age} = .9$; Male=47.62%).

Table 1. Demographic Characteristics and Descriptive Statistics of Age in Each Sample Category

	Sample Category								
	All			High Risk			Normal		
	N	M_{Age}	SD_{Age}	N	M_{Age}	SD_{Age}	N	M_{Age}	SD_{Age}
Sex									
Male	457	16	.91	20	16	1.17	437	16	.9
Female	256	15.8	.86	22	16	.87	234	15.8	.9
Grade									
1 st	276	15.2	.58	16	15	.37	260	15.2	.59
2 nd	287	16.1	.63	12	16.2	.83	275	16.1	.62
3 rd	150	17	.46	14	17	.39	136	17	.46
All	713	15.9	.91	42	15.9	.9	671	15.9	.9

Instruments

Depression in this study was measured using the Depression Anxiety Stress Scale (DASS), originally developed by Lovibond and Lovibond (1995) and measures the three dimensions specified in the tripartite model (Brown et al., 1997), one of which is low positive affectivity (DASS-Depression). The DASS-Depression of the short-form version of the DASS-21 consists of 7 items and has been tested in a large non-clinical sample (Henry & Crawford, 2005). The Indonesian version of DASS-21 was the one Damanik adapted (2011). Cronbach's α for DASS-Depression was .799. Participants were asked to choose one of the responses within the range of 0 to 3 ('0' means 'the response does not suit me at all, or never' to '3' means 'very much matches me, or very often') on each item to describe their experiences during the past week. The total score was obtained from the sum of all responses multiplied by two. Five levels of depression symptoms were obtained through categorizing scores, i.e., 'normal' (score $x < 10$), 'mild' (score $10 \leq x < 14$), 'moderate' (score $14 \leq x < 21$), 'severe' (score $21 \leq x < 28$), and 'profound' (score $x \geq 28$).

The forgiveness scale used in this study was compiled by Rahmandani et al. (2016) based on Thompson et al. (2005) by paying attention to the three dispositions of forgiveness. A total of 274 college students were involved in the tryout. Respondents were asked to choose one of the responses on each item that best described themselves. The scale consists of 40 items, divided into three subscales: self-forgiveness, forgiveness of others, and forgiveness of situations. This Likert scale consists of four responses for each item, namely "Strongly Disagree," "Disagree," "Agree," and "Strongly Agree." In favorable items, they are scored 0, 1, 2, and 3, respectively, while in unfavorable items, they are scored 3, 2, 1, and 0, respectively. The score for each dimension is derived by adding the scores on all items representing each dimension, while the total score for forgiveness is the sum of all item scores. Cronbach's α for this scale was .867.

In this study, hope was measured using the State Hope Scale (Snyder et al., 1996), which is a six-item scale and contains an agency subscale (a cognitive set based on a reciprocally-derived sense of successful agency or goal-directed determination) and a pathways subscale (planning to meet goals). This scale was adapted into Indonesian using forward and backward translation procedures and was reported by Salma et al. (2020). Cronbach's α in this study population was .701. Respondents were asked to take a few moments to focus on what was going on in their lives and select the number that best described how they thought about themselves and put that number in the blank provided (on an 8-point scale, with 1 = Definitely False, 2 = Mostly False, 3 = Somewhat False, 4 = Slightly False, 5 = Slightly True, 6 = Somewhat True, 7 = Mostly True, and 8 = Definitely True). The even-numbered items are agencies, and the odd-numbered items are pathways. Subscale scores for agencies or pathways are derived by adding the three even- and odd-numbered items and the total State Hope Scale score is the sum of all six items.

Procedures

Data collection on classes and cluster random sampling were carried out not long after the principal and communication gave the official approval was established with the appointed subordinate teacher. The questionnaire was self-administered in 2019 using pencil and paper. Before filling out the form, the subject received research information and agreed to be involved voluntarily by signing the informed consent. Data was collected in the classroom, with two people in charge (one researcher and one trained research assistant) observing the process.

Statistical Analysis

Data analysis in this study used non-parametric statistics by considering the results of the Kolmogorov-Smirnov One-Sample normality test (presented in Table 2), which showed that the distribution of data on the variables in each sample was not normal. The Kolmogorov-Smirnov values for all variables in the normal sample have $p < .001$. In contrast, the high-risk sample has $p < .001$ to $p = .049$ ($p < .05$), except for forgiveness of self ($p = .200$), others ($p = .074$), and the agency subscale of hope ($p = .200$). All values of Kolmogorov-Smirnov with $p > .05$ were considered normal, and conversely.

Table 2. The Results of Normality Assumption Test Using One-Sample Kolmogorov-Smirnov Test

	Depress- ion	Forgive- ness	Forgiveness Dimensions			Hope	Hope Subscales	
			Self	Others	Situations		Agency	Pathways
Samples at high risk of depression								
Test Statistic	.287	.136	.082	.130	.171	.138	.108	.139
Asymp. Sig. (2-tailed)	.000 ^c	.049 ^c	.200 ^{c,d}	.074 ^c	.003 ^c	.043 ^c	.200 ^{c,d}	.040 ^c
Normal Samples								
Test Statistic	.195	.052	.077	.061	.090	.069	.109	.118
Asymp. Sig. (2-tailed)	.000 ^c	.000 ^c	.000 ^c	.000 ^c	.000 ^c	.000 ^c	.000 ^c	.000 ^c

Note:

a. Test distribution is Normal.

c. Lilliefors Significance Correction.

b. Calculated from data.

d. This is a lower bound of the true significance.

Spearman's Rho correlations were used to observe the correlation between forgiveness and hope in general and according to the dimensions of forgiveness or hope subscales in each sample and for each gender. The researcher also analyzed the data using descriptive statistics and the Mann-Whitney U test. Descriptive statistics explained each sample's mean and standard deviation according to gender. In contrast, Mann-Whitney U tests were used to see the difference in the variables' scores between samples and genders in each sample. All data analysis in this study used software, i.e., the Statistical Package for the Social Sciences (SPSS) 22.0 for Windows and Microsoft Excel.

The flowchart of the relationship between the variables involved in this study can be seen in Figure 1. Forgiveness (X_1) is hypothesized to have a positive association with hope (Y). At the same time, the levels of depression (X_2) and gender (X_3) are also taken into account in the analysis. Typically, such a chart indicates the moderating effect of the two variables. However, the moderation test was not carried out considering the data distribution (which would later become a suggestion for further research). Therefore, the differences in the correlations are observed descriptively.

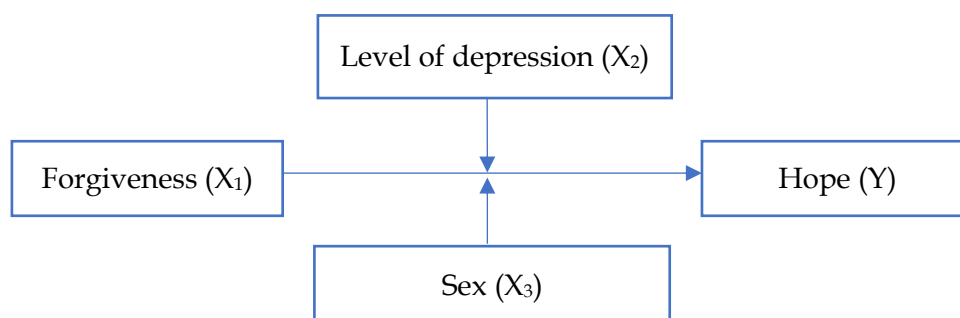


Figure 1. The Flowchart of the Relationship between the Variables

RESULT AND DISCUSSION

Result

Descriptively, Figure 2 shows the differences in the means of all variables between sample categories and genders, while Figure 3 shows the differences in standard deviations. Inferentially, the significance of these differences can be seen in Table 3. There were clear significant differences in all variables between samples based on depression categories, indicating that those who were normal had higher forgiveness and hope in general (as well as according to their dimensions and subscales) than those who were high-risk ($p < .001$). The results also showed that gender differed in levels of general forgiveness in those who were normal ($z = -4.535; p < .001$), specifically that males had higher levels of self- and situation forgiveness than females. For high-risk people, forgiveness was not differentiated by gender ($z = -.403; p = .687$), but males had higher self-forgiveness and otherwise lower forgiveness of others than females. In addition, gender did not differentiate hope in both sample categories of depression.

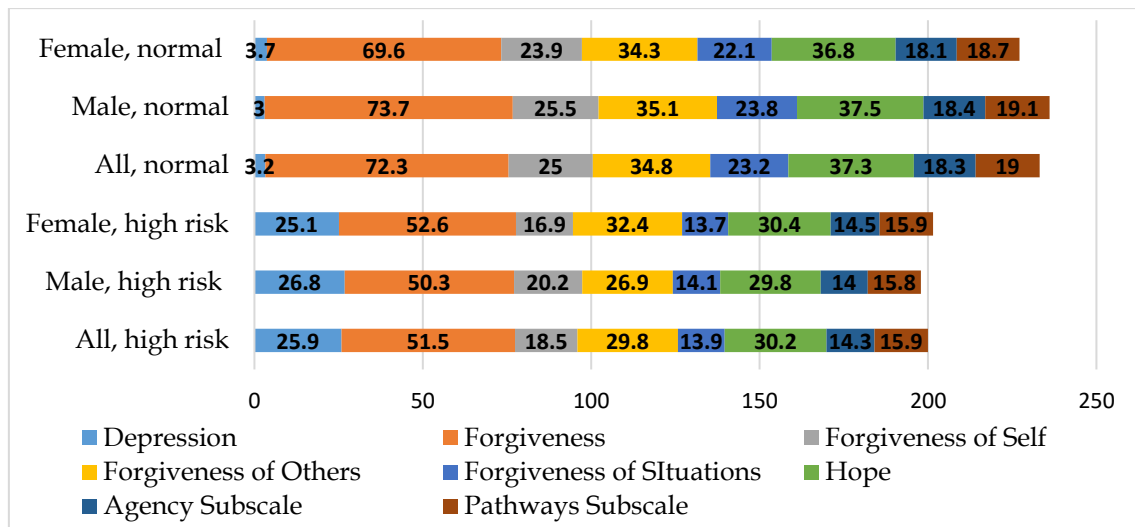


Figure 2. Chart of Mean of All Variables between Sample Categories and Sexes

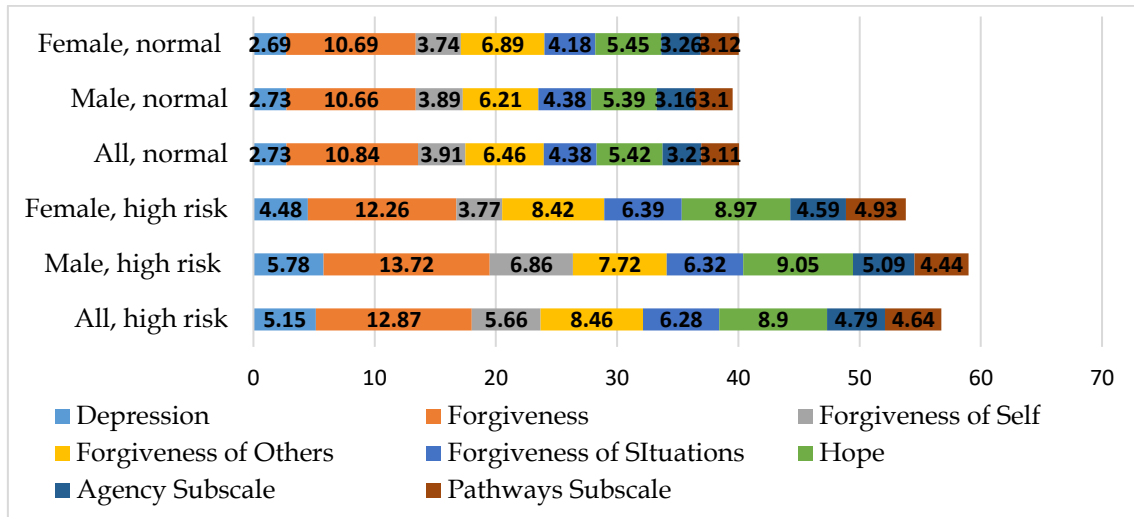


Figure 3. Chart of Standard Deviation of All Variables between Sample Categories and Sexes

Table 3. The Tests of Variables Differences Using Mann-Whitney U

Z (Grouping Variable)	Depression	Forgiveness	Forgiveness Dimensions			Hope	Hope Subscales	
			Self	Others	Situations		Agency	Pathways
Z (Category of depression)	-11.112***	-8.899***	-7.443***	-3.769***	-8.794***	-5.508***	-5.667***	-4.429***
Samples at high risk of depression								
Z (Sex)	-1.309	-.403	-2.222*	-2.145*	-.519	-.568	-.607	-.468
Normal Samples								
Z (sex)	-3.488***	-4.535***	-4.860***	-1.152	-4.669***	-1.530	-1.188	-1.761

Note: *) $p < 0.05$; **) $p < 0.01$; ***) $p < 0.001$ (2-tailed)

Table 4 contains the results that answer the purpose of this study, namely that there were significant positive correlations between forgiveness and hope in both sample groups, normal ($r_{xy} = .184$; $p < .001$) and high-risk ($r_{xy} = .413$; $p = .006$). The correlation coefficients were greater in the high-risk sample, but this inference needs to be applied carefully, considering the large difference between the two sample sizes. Almost all correlations (including those that were specific based on dimensions and subscales) in the normal sample were significant for both genders, except among males where there was a forgiveness dimension left, namely situations that were not related to hope ($r_{xy} = .028$; $p = .565$).

Table 4. Spearman's rho Correlations among Variables

	All Normal (N=671)					All High Risk (N=42)				
	Depre- sion	Forgi- veness	Dimensions of Forgiveness			Depre- sion	Forgi- veness	Dimensions of Forgiveness		
			Self	Others	Situa- tions			Self	Others	Situa- tions
All										
Depression	-	-.264***	-.236***	-.103**	-.274***	-	-.535***	-.232	-.260	-.433**
Hope	-.161***	.184***	.176***	.182***	.109**	-.196	.413**	.103	.238	.437**
Agency	-.150***	.124**	.149***	.126**	.067	-.227	.315*	.073	.136	.356*
Pathways	-.116**	.194***	.161***	.190***	.122**	-.177	.470**	.153	.292	.463**
Male										
Depression	-	-.282***	-.199***	-.152**	-.247***	-	-.656**	-.235	-.344	-.648**
Hope	-.186***	.126**	.141**	.135**	.028	-.243	.374	.250	.185	.384
Agency	-.138**	.096*	.141**	.100*	.020	-.048	.210	.118	.089	.241
Pathways	-.181***	.114*	.118*	.126**	.030	-.381	.464*	.408	.138	.478*
Female										
Depression	-	-.171**	-.249***	-.002	-.257**	-	-.428*	-.383	-.104	-.261
Hope	-.100	.285***	.227***	.265***	.253***	-.171	.429*	.065	.168	.488*
Agency	-.166*	.166*	.156*	.166*	.150*	-.370	.327	.113	-.026	.383
Pathways	.023	.320***	.216**	.293***	.274***	.000	.515*	-.006	.324	.562**

Note: *) $p < 0.05$; **) $p < 0.01$; ***) $p < 0.001$ (2-tailed)

The male correlation was insignificant between forgiveness and hope in the high-risk sample ($r_{xy} = .374$; $p = .104$). The inspection of correlations based on forgiveness dimensions and hope subscales in the high-risk sample was different and more unique than the normal sample. Specifically, forgiveness in the high-risk sample (also separately specific for each gender) only contributed to hope, especially for females ($r_{xy} = .488$; $p = .021$). It was insignificant in males ($r_{xy} = .384$; $p = .095$). Interestingly, in the normal sample, forgiveness was the lowest among all dimensions ($r_{xy} = .109$; $p = .005$). In both genders of the high-risk sample, forgiveness in general and specifically forgiveness provided benefits on their pathways ($r_{xy} = .464$ -.562; $p = .006$ -.039) but not on the agency subscale ($r_{xy} = .210$ -.383; $p = .079$ -.375). This finding also applied to the normal sample, where the correlation coefficients to pathways subscale ($r_{xy} = .194$; $p < .001$) were greater than to agency subscale ($r_{xy} = .124$; $p = .001$).

Finally, in addition, forgiveness generally contributed negatively to depression in both sample groups and both genders. Forgiveness by dimensions contributed uniquely. Furthermore, in contrast to the normal sample, depression in the high-risk sample was not related to hope or its subscales.

Discussion

Forgiveness and Hope in Both Sample Groups Were Significantly Positively Correlated – The Pathways Subscale Was More Beneficial than the Agency Subscale.

The above results concluded significant positive correlations between forgiveness and hope in both sample groups, normal and high-risk. The correlation mechanism between the two variables may be mediated by the role

of the socio-cognitive variable in dealing with stressful situations or transgressions. According to Thompson et al. (2005), as mentioned before, transgressors or offenders here include others, situations, or even oneself. Washington-Nortey et al. (2023) concluded that forgiveness played an active role in forgivers' socio-cognitive readjustment toward transgression, particularly their reappraisal of the wrongdoing and repositioning toward the offender. Washington-Nortey et al. added that forgiveness initially and significantly predicted increased empathy and decreased perceived severity over time regarding transgression. Contreras et al. (2020) also explained the role of socio-cognitive variables between transgression-related events in children (i.e., exposure to domestic violence) and violence against their parents when they were teenagers. When a child witnesses violence at home and there is no resolution to transgression, it can be attributed to dysfunctional components of social-cognitive processing. Some of these components (like feeling angry and reacting aggressively) are positively correlated to child-to-parent violence motivated by reactive reasons; other components (like anticipating positive consequences of violence and finding justification for it) are positively correlated to the instrumental use of the violence against parents (Contreras et al., 2020).

Forgiveness as an adaptive coping mechanism implies softening the appraisal of events. Conversely, the absence of an appropriate coping mechanism for exposure to transgression implies intergenerational transmission of violence. Both studies involve the role of socio-cognitive variables, whether they are functional (for forgiveness) or dysfunctional (for unforgiveness). Warsah (2020) observed that, as an important concept in religion, forgiveness is a cognitive attempt to understand and accept the limitations of oneself and the transgressor(s) so that one can conform to unpleasant situations.

Furthermore, another study emphasized how socio-cognitive processing plays a role in problem-solving, where hope is also considered (Avry et al., 2020). According to Avry et al., socio-cognitive processes involving other parties in task-related problem-solving include sustaining mutual understanding, information pooling, reaching consensus, transactivity, task management, and time management. These processes work in a variety of situations. Along with the socio-cognitive process used to master the task, hope can also arise as a prospective and activating emotion of achievement (Avry et al., 2020). Hope synergizes with the learner's focus, leading to ongoing activity or prospective or retrospective outcomes. Rasi and Moula (2015) concluded that socio-cognitive empowerment-based intervention contributed to several mental capacity developments, including (a) the chance for a hopeful life accompanied by goal-directedness and positivity, which is interconnecting with other mental capacities, i.e., (b) deliberative problem solving and decision making, (c) social awareness achievement through learning spaces, and (d) self-perception.

Hope is related to socio-cognitive and problem-solving. Previous studies proved that problem-solving as a process supported by socio-cognitive factors had

implications for hope. According to Snyder et al. (2021), a cognitive set that drives an individual's perceived capacity for initiating and maintaining the actions necessary to reach a goal (agency) and perceived ability to generate or find alternative routes to one's goals under challenging circumstances (pathways). Also, forgiveness provided greater benefits on the pathways subscale than the agency subscale. People with high forgiveness are encouraged to seek strategies for dealing with stressful situations or the consequences of transgression, even when they are not quite sure of their capacities.

Bowers and Bowers (2023) promoted positive youth development across non-WEIRD (Western, educated, industrialized, rich, and democratic nations) contexts by considering the role of hope. Hope pathways contributed more to positive thinking and direct problem-solving than hope agencies (with fewer but significant correlations). Even when there was no correlation between hope agency and planning and overall coping use, a correlation occurred between hope pathways and planning and overall coping use. However, this result appears to contradict the teachings of Islam, emphasizing that agency and pathway thinking should go hand in hand. According to Islamic beliefs, agency thinking is necessary for accomplishing goals, strengthening faith, and nurturing the spiritual soul, where the increase in 'guidance' is due to their spirituality. Meanwhile, pathways are considered human efforts to achieve worldly and spiritual goals. The Holy Quran (Tobe'h: Ayat71) states, "assuming virtue and sincerity in doing things that make Allah and his Prophet (PBUH) happy and avoiding sins and things that make Allah and his Prophet (PBUH) sad."

The Correlation Coefficients Were Greater in the High-Risk Sample than in the Normal Sample. Specifically, the correlation coefficients were greater in the high-risk sample than in the normal sample. In other words, forgiveness contributed to greater hope in those with a high risk of depression. Although the variable level was significantly lower in the high-risk group, assuming there was a similarity in forgiveness in both samples, the high-risk group felt more hope than the normal group. As described before, there is a likelihood of solving the problem when someone forgives. That problem-solving will be more meaningful for those affected by stressful situations or transgressions. The effect of forgiveness on at-risk adolescents who were severely impaired due to those situations or events allows them to understand better that the anger they feel has negative effects, better understand forgiveness, and learn that forgiveness is a very helpful option (Freedman, 2018). This understanding makes the idea of how to let go of anger the most helpful. This mechanism is naturally insignificant in individuals with fewer negative effects due to the situation or event. Zhou et al. (2013), on a college student population, discovered that the sample group that had recovered from a history of depression reported higher scores on certain cognitive and affective strengths as compared with the "currently depressed" or "without a history of serious depressive episodes" sample group. Fusome strengths mediated the correlation between depression recovery and coping strategies, including

forgiveness and hope, in addition to love, gratitude, bravery, and a love of learning.

Bahmani et al. (2018) analyzed the findings from an Islamic perspective. The equilibrium between hope and fear, the recommended emotional state, results from a true inner faith leading to the wholehearted practice of divine law and ethics (Bahmani et al., 2018). Those with a greater risk of depression will feel more fear than those at normal levels, so hope contributes more. Nevertheless, as highlighted by Bahmani et al. (2018), severe fear and hope are pathological conditions for the human soul as they result in disobedience to God and engage. When environmental factors such as facing death disrupt the balance and instill fear in a patient with a terminal illness, for example, spiritual support becomes essential to restore equilibrium by increasing the emotion of hope.

Forgiveness of Situations Was the Only Dimension Significantly Related and the Biggest Contributor to the High-Risk Group. Another specific result is that all dimensions of forgiveness in the normal group were significantly related to hope. In contrast, forgiveness was the only dimension significantly related and the biggest contributor to the high-risk group, indicating each forgiveness dimension's different roles. The contribution of situation forgiveness to hope in the normal group was the lowest among all dimensions (specifically for males, it was unrelated to hope). Based on descriptive statistics (means and standard deviations), normal individuals tended to 'agree' that their higher degree of forgiveness (in general and according to dimensions) has a share of higher hope. However, as the severity of the problem increases to a high-risk level, some individuals lose control over themselves and others. Hence, the pattern of correlations between the two forgiveness dimensions of self and others and hope becomes inconsistent and insignificant. Normal individuals are likelier to show variations in the correlation between this forgiveness dimension and hope (the direction is not clear enough, especially for males, and it is insignificant). Normal individuals may perceive situations as being under or out of control, forgivable, or unforgivable.

Forgiving in the high-risk group is the opposite. That group is thought to be deeper in ruminating on stressful situations or transgressions and perceiving the situation as uncontrollable, resulting in high levels of distress and depression symptoms. The difference in the correlation coefficients in the two samples may also be supported by the other results, which showed the significance of differences in all variables between samples, that those who were normal had higher forgiveness and hope than those who were high-risk, in general as well as according to their dimensions and subscales. Measures of standard deviations and variances must have been taken into account. As an added result, forgiveness generally contributed negatively to depression in both sample groups and both genders. However, in contrast to the normal sample, depression in the high-risk sample was unrelated to hope or its subscales.

According to helplessness theory, the depressed state refers to the inability of individuals to pursue, utilize, or attain effective practical responses so that they seem to have given up hope that it is possible to control important environmental events effectively and voluntarily. They accept that bad things will mess them up and have little control over them (Gazzaniga, 2018). Individuals who experience long-lasting and intricate challenges believe their responses and events are unrelated. The situation occurs, and the learning attained debilitates imminent learning and leads to inactivity. As a result, they will be unsuccessful in addressing any issue, even when a viable solution exists (Mohanty et al., 2015). Concerning these explanations, granting forgiveness towards situations is expected to help people, especially those with high levels of depression, feel relieved and achieve higher hope. Specifically, between the two genders, females showed this, while males showed a significant correlation, especially with the pathways subscale. The reasons why pathways subscales are correlated have been explained before, while gender subscales are described below.

Forgiveness has not been studied specifically from the Islamic view. Rather than that, forgiveness in Islam is more directed at being forgiven by God, in addition to self-forgiveness and forgiveness of others (Uyun et al., 2019). This result is interesting because the unforgiveness of situations may be related to the rejection of God's fate. Instead of blaming God, who rules his fate, one chooses to blame situations. However, it differs in Islam, where one prefers to take responsibility for his actions and not just blame things outside himself, including others and circumstances or situations (Mohammad, 2012). One must remember that God is wise, and decrees are right, just, good, and fair. Therefore, Muslims must submit and surrender to His Will (Mohammad, 2012).

Unique Differences According To Gender. Both genders in the normal sample had almost all significant correlations between forgiveness and hope (including those specific based on dimensions and subscales). However, forgiveness among males was unrelated to hope. The correlation between forgiveness and hope in males was insignificant in the high-risk sample compared to females. However, both genders agreed that forgiveness, especially forgiveness, applied to the pathways subscale of hope.

A comparison of both genders in each group also showed that gender differed in levels of general forgiveness in those who were normal; specifically, males had higher levels of self- and situation forgiveness than females. For those who were high-risk, forgiveness in general was not differentiated by gender, but males had higher self-forgiveness and otherwise lower forgiveness of others than females. However, gender did not differentiate hope in each sample category of depression, either generally or based on its subscales.

We try to explain –but lack evidence– through previous studies such as those by Jiang et al. (2018) that may support result differences by gender among adolescents, particularly those in the high-risk group. Jiang et al. concluded that hope was negatively related to adolescent non-suicidal self-injury and that hope

(specifically the dimension of pathways thinking but not agency thinking) attenuated the association between depressive symptoms and non-suicidal self-injury among females. Hope plays a greater role in depressive female adolescents in reducing non-suicidal self-injury symptoms. However, those results may unequivocally contradict the study by Quintana-Orts and Rey (2018), concluding that forgiveness moderated the correlation between depression and suicidal ideation for males but not for female adolescents. Among male adolescents, the correlation between depression and suicidal thoughts and behaviors weakens as levels of forgiveness increase. Contradictory results in the two previous studies above suggest consideration that certain specific variables related to the population involved may have played a role in the results of the current study. Further exploration can be carried out in future research.

CONCLUSION

This study showed positive correlations between forgiveness and hope in normal and high-risk sample groups. The contribution of forgiveness might be greater in high-risk samples. When the correlations of the high-risk samples were compared descriptively by gender, the forgiveness dimensions, and the hope subscales, unique results were obtained.

Despite all the results, this study contains several considerations, i.e., (a) differences in sample sizes and (b) statistical analysis techniques. As references for proving the hypothesis, the correlations in the high-risk group were less significant than those in the normal group because of differences in sample sizes, where a small sample size will have a greater error. Likewise, statistical analysis techniques still applied non-parametric statistics because the data was abnormal, so comparisons and conclusions must be made carefully.

While it is understandable why the sample size of the high-risk group was far smaller than the normal group, it is still necessary to consider a larger number of samples in the high-risk group. The possibility of using parametric statistics also needs to be taken into account. Further, mediating and moderating effects among the variables are suggested, such as using sex and depression levels in the correlation between forgiveness and state hope. The rationale is that the differences between the two groups appear to be related to the severity of the perceived impact of the stressful situation, transgression, and gender. Factors thought to mediate, such as socio-cognitive or cognitive appraisal toward the stressful situation or transgression in the correlation between forgiveness and hope, both in general and based on dimensions and subscales, can also be re-examined in future studies in this population.

Further, the review of forgiveness and hope among the sample of young people in this study has not been able to fully describe expectations that align with religious views, in this case, from the perspective of Islam as the majority religion. The development of religion-based forgiveness and hope instruments can be suggested. In addition, further research can use spirituality or religiosity as a

mediator or moderator to provide a better explanation. Practically, religious education on this matter in public schools that is sensitive to the stage of development can also be further suggested.

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