



SELF-FORGIVENESS AND SELF-COMPASSION IN TAEKWONDO ATHLETES-AN APPROACH TO TRAINING AND PERFORMANCE IMPROVEMENT

AUTOPERDÃO E AUTOCOMPAIXÃO EM ATLETAS DE TAEKWONDO - UMA ABORDAGEM PARA O TREINAMENTO E MELHORIA DO DESEMPENHO

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ABSTRACT

The purpose of this study was to examine the levels of self-forgiveness and self-compassion among taekwondo athletes as an approach to training and performance improvement based on a number of variables. Through convenience sampling, 532 taekwondo athletes (246 females, 286 males) were selected. Data were collected using the Self-Forgiveness Scale developed by Griffin Worthington et al. (2018) and adapted to Turkish by Kaya et al. (2021), and the Self-Compassion Scale Short Form adapted to Turkish by Yıldırım and Sarı (2018). The distribution of the participants's background information was displayed using descriptive statistics (e.g., percentages and frequencies) and skewness-kurtosis values were checked for normality. In addition to descriptive statistics, Mann-Whitney U and Kruskal-Wallis tests were used due to the non-normality of the data. Participants' self-forgiveness levels varied significantly by gender, age, athletic background, and category. No significant differences were found in the sub dimensions of SFDPS and SCS based on previous injuries (p>0.05). A discussion on the study's limitations took place, and suggestions for future research were provided.

Keywords: Taekwondo, Self-Forgiveness, Self-Compassion, Athlete, Training.

RESUMO

O objetivo deste estudo foi examinar os níveis de autoperdão e autocompaixão entre atletas de taekwondo como uma abordagem para treinamento e melhoria de desempenho com base em uma série de variáveis. Por meio de amostragem de conveniência, 532 atletas de taekwondo (246 mulheres, 286 homens) foram selecionados. Os dados foram coletados usando a Escala de Autoperdão desenvolvida por Griffin Worthington et al. (2018) e adaptada para o turco por Kaya et al. (2021), e a Escala de Autocompaixão Short Form adaptada para o turco por Yıldırım e Sarı (2018). A distribuição das informações básicas dos participantes foi exibida usando estatísticas descritivas (por exemplo, porcentagens e frequências) e os valores de assimetria-curtose foram verificados quanto à normalidade. Além das estatísticas descritivas, os testes Mann-Whitney U e Kruskal-Wallis foram usados devido à não normalidade dos dados. Os níveis de autoperdão dos participantes variaram significativamente por gênero, idade, histórico atlético e categoria. Não foram encontradas





diferenças significativas nas subdimensões do SFDPS e SCS com base em lesões anteriores (p>0,05). Uma discussão sobre as limitações do estudo ocorreu, e sugestões para pesquisas futuras foram fornecidas.

Palavras-chave: Taekwondo, Autoperdão, Autocompaixão, Atleta, Treinamento.

Introduction

Forgiveness is the emergence of compassion, sharing, tolerance, and understanding instead of exhibiting anger at situations in which people feel they have been mistreated in their interactions with other people, even if the agreement itself is acknowledged (Aydemir and Bayram, 2016). It is generally composed of three elements: forgiveness of self, others, and situations (Thompson et al., 2005). According to another definition, forgiveness is a tolerant response to a faulty behavior, considering the rules of morality (Karduz, 2019). According to Kara (2020), forgiveness signifies the capacity to convert unfavorable emotions and mental dispositions of individuals into favorable ones.

Researchers in the relevant literature emphasized on the need to distinguish between true and false self-forgiveness (Karduz, 2019). True self-forgiveness means the acknowledgment of wrongful behavior and the assumption of responsibility. On the other hand, false self-forgiveness refers to the refusal of wrongful behavior, holding others accountable, accusation of others, and denial of accountability for the consequences (Tangney et al., 2005). Hall and Fincham (2005) highlighted the importance of inner feelings and emotions in accepting responsibility for a mistake because if people enter the process of self-forgiveness without mentally filtering a wrong behavior they have exhibited; they will experience false self-forgiveness. Therefore, true self-forgiveness signifies a grave encounter with one's own inner thoughts and feelings. In other words, true self-forgiveness requires feelings of guilt, regret, and shame. Despite its similarity with true self-forgiveness, false selfforgiveness does not gain people moral and positive cognitive emotions since they have not experienced the feelings of true self-forgiveness. Denial, behavioral suppression, and false self-forgiveness appear in people who do not meet the criteria for true self-forgiveness (Hall and Fincham, 2005).



Compassion refers to the acknowledgment of specific emotions (e.g., pain, happiness, sadness, etc.) normal in human nature that each individual might experience through empathizing with those who experience them (Yıldırım and Sarı, 2018). By contrast, self-compassion refers to a situation when individuals gain the thought that they should share the pain of other individuals and awareness that they can experience negative, emotionally painful events in life like other people (Neff, 2003). Thus, people might reduce their sadness relatively by sharing other people's suffering. Individuals with high levels of self-compassion might be a source of self-morale in case of an incident and accelerate their recovery process (Saeighi Memeghani et al., 2020).

Self-compassion is essential for athletes, as they may be faced with the unfortunate news of a relative's death before engaging in any game, since a big percentage of athletes refuse to participate in such situations. Other athletes should be more sensitive to those who have experienced such an incident during the game. When those with a loss display aggressive behavior, other athletes should be more understanding, empathize, acknowledge that they might exhibit the same behavior in such situations, and display attitudes and behaviors accordingly (Uslu and Uslu, 2023).

Consisting of three complementary elements, self-compassion contains positive and negative dimensions: self-kindness versus self-judgment, shared awareness versus isolation, and consciousness versus over-identification (Yıldırım and Sarı, 2018). Self-kindness is having peace of mind; consciousness is being honest with one's feelings and thoughts, and shared awareness is the acceptance that the pain caused by bad events is a normal part of life and that this feeling is universal (Gün et al., 2020).

Self-forgiveness and self-compassion are crucial for Taekwondo athletes due to their impact on resilience, mental health, performance, and longevity in the sport. These qualities help athletes bounce back from setbacks, reduce negative emotions, enhance focus during competitions, and promote a sustainable commitment to training. Additionally, self-compassion contributes to positive relationships within the Taekwondo community, optimal learning from mistakes, and effective





emotional regulation in high-pressure situations. In the absence of prior investigations and studies into self-forgiveness and self-compassion among Taekwondo athletes, our study holds significant value and importance.

Method

Data Collection Instruments

Data were collected through the Self-Forgiveness Dual-Process Scale (SFDPS), Self-Compassion Scale (SCS), and researcher-designed Personal Information Form. The SFDPS was devised by Griffin Worthington, Davis, Hook, and Maguen (2018) to evaluate self-forgiveness processes. Initially comprising 50, the scale items were reduced to 26, and applied exploratory factor analysis (EFA). The analysis revealed a measurement tool consisting of 11 items and two factors, explaining 50.95% of the total variance. An item was later removed from the scale upon statistical analysis, reducing it to 10 items. The items were rated on a 7-point Likert scale (1= Strongly disagree, 7= Strongly agree). Overall, the scale comprised two sub-dimensions: value reorientation (VRO) and esteem restoration (ERS) (Kaya et al., 2021).

Adapted to Turkish by Yıldırım and Sarı (2018), the SCS Short Form consists of 11 items. The adaptation process included the assessment of construct validity, criterion-related validity, internal consistency coefficient, and test-retest reliability to examine the scale's psychometric properties. The EFA indicated that the scale had a single factor structure consisting of two subcomponents. The scale's factor structure was corroborated in the Confirmatory Factor Analysis (CFA), with an internal consistency value of .75. The test-retest measurements applied at 17-day intervals suggested a high level of correlation (Yıldırım and Sarı, 2018).

Data Analysis

Descriptive statistics (i.e., percentages and frequencies) were employed to display participants' background information, while data normality was assessed through skewness-kurtosis values. A quick analysis demonstrated that the data





were non-parametric. In cases where the normality assumption cannot be satisfied, researchers recommend the Kruskal-Wallis test to examine the difference between more than three independent groups and the Mann-Whitney U test for two independent groups (Baştürk, 2011; Orhunbilge, 2000; Alpar, 2014, Lorcu, 2015). In this respect, these nonparametric tests were employed since the assumptions required for parametric tests were not met.

Population and Sampling

A total of 532 active taekwondo athletes (246 females, 46.24% and 286 males, 53.76%) from Antalya, Mersin, Konya, Kayseri, Aksaray, Ankara, Gaziantep, Urfa, Trabzon, İstanbul, İzmir, and Erzurum (each situated in a different geographical region of Turkey) participated voluntarily in the study. The participants were determined through convenience sampling, also known as available or accidental sampling. Convenience sampling involves obtaining samples easily accessible for research (Özen and Gül, 2007).





Results

Table 1 – Demographic Information of Participants

Variables		f	%
Gender	Male	286	53,8
	Female	246	46,2
	Total	532	100,0
Age	11-15	346	65,0
	16-19	115	21,6
	20-23	21	3,9
	23 and above	50	9,4
	Total	532	100,0
Athletic Background	Less than a year	107	20,1
	1-3 years	137	25,8
	4-7 years	184	34,6
	8 years and above	104	19,5
	Total	532	100,0
Category	Poomsae	58	10,9
	Competitor	322	60,5
	Poomsae + Competitor	152	28,6
	Total	532	100,0
Previous Injuries	None	292	54,9
	Minor	150	28,2
	Moderate	72	13,5
	Serious	18	3,4
	Total	532	100,0





Table 1 indicates that 53.8% of the participants were male, 65.0% were between the 11-15 age range, 34.6% had an athletic background of 4-7 years, 60.5% were in the competitor category, and 54.9% had no previous injuries.

Table 2 – Distribution of Scalar Scores

Scale/Subdimension	Number of items	N	M	SD	P
SFDPS/VRO	5	532	5,0523	1,33679	,000
SFDPS/ERS	5	532	4,7489	1,63561	,000
SCS	11	532	3,1157	,54923	,000

Table 2 presents the participants' scores from the SFDPS subdimensions (VRO and ERS), the SCS, and the significance values of the Kolmogorov-Smirnov and Shapiro-Wilk tests administered for determining data structures. Accordingly, SFDPS/VRO had the higher mean, and the SCS had a mean of 3.11.

Table 3 – Mann-Whitney U Test Results on the Differences in Participants' Scalar Scores by Gender

Scale/Subdimension	Variable	N	Rank M.	U	p
SFDPS/VRO	Male	286	281,29	30.948,500	,017*
	Female	246	249,31		
SFDPS/ERS	Male	286	272,81	33.113,500	,270
	Female	246	258,11		
SCS	Male	286	265,97	35.330,500	,931
	Female	246	267,12		

Table 3 indicates no statistically significant difference between the SFDPS/ERS and SCS (p>0.05). However, a significant difference was observed between SFDPS/VRO and SCS. The scores of males (Rank M.=281.29) were significantly higher than those of females (Rank M.=249.31) (U=30.948.500, p=.017).



Table 4 – Kruskal-Wallis Test Results on the Differences between Participants' Scalar Scores by Age

Scale/Subdimension	Variable	N	Med.	Н	р
SFDPS/VRO	11-15	346	5,40	10,791	,013*
	16-19	115	5,00		
	20-23	21	5,20		
	23 and above	50	5,80		
SFDPS/ERS	11-15	346	4,80	15,083	,002*
	16-19	115	4,80		
	20-23	21	5,60		
	23 and above	50	5,80		
SCS	11-15	346	3,0909	1,294	,730
	16-19	115	3,0909		
	20-23	21	3,1818		
	23 and above	50	3,0909		

Table 4 suggests no significant difference between the ages of the participants and the SCS (p>0.05). However, the participants' scores in SFDPS/VRO and SFDPS/ERS differed significantly by age. A significant difference was found in SFDPS/VRO (H (3) =10,791; p=.013). Paired comparisons revealed that the difference was in the 11-15 and 16-19 age groups, with the scores of the 16-19 age group (M=5.00) were significantly lower than those of the 11-15 (M=5.40) (p<0,05). The other statistical significance was found in the SFDPS/ERS (H (3) =15,083; p=.002). Paired comparisons indicated the statistically significant difference in the 11-15 and 23 and above age groups, with the scores of the 11-15 (M=4.80) significantly lower than those of the 23 and above (M=5.60) (p<0,05). Additionally, the difference in the 16-19 and 23 and above age groups was statistically significant, with the scores of the 23 and above (M=5.60) significantly higher than those of the 16-19 (M=4.80) (p<0,05).



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Table 5 – Kruskal-Wallis Test Results on the Participants' Scalar Scores by Athletic Background

Scale/Subdimension	Variable	N	Med.	Н	p
SFDPS/VRO	Less than a year	10 7	5,80	10,685	,014*
	1-3 years	13 7	5,60		
	4-7 years	18 4	5,20		
	8 years and above	10 4	5,00		
SFDPS/ERS	Less than a year	10 7	5,20	6,451	,092
	1-3 years	13 7	4,60		
	4-7 years	18 4	4,80		
	8 years and above	10 4	5,20		
SCS	Less than a year	10 7	3,00	3,598	,308
	1-3 years	13 7	3,09		
	4-7 years	18 4	3,09		
	8 years and above	10 4	3,18		

The Kruskal-Wallis test results presented in Table 5 suggested a statistically significant difference between the participants' scores in SFDPS/VRO (H (3) = 10,685; p=.014) and athletic background. The difference in the SFDPS/VRO was in the "less than a year" and "8 years and above", wherein the first group (M=5.80) had significantly higher scores than the latter (M=5.00) (p<0,05).



Table 6 – Kruskal-Wallis Test Results on the Participants' Scalar Scores by Category

Scale/Subdimension	Variable	atego	N	Med.	Н	р
SFDPS/VRO	Poomsae		58	5,80	11,573	,003
	Competitor		32 2	5,20		
	Poomsae Competitor	+	15 2	5,40		
SFDPS/ERS	Poomsae		58	5,20	3,139	,208
	Competitor		32 2	4,60		
	Poomsae Competitor	+	15 2	5,20		
SCS	Poomsae		58	3,00	2,488	,288
	Competitor		32 2	3,09		
	Poomsae Competitor	+	15 2	3,09		

The Kruskal-Wallis test results presented in Table 6 implied a significant difference in the participants' scores in SFDPS/VRO by category (H (3) =11,573; p=.003). This difference was observed in the Poomsae and Competitor categories, with the scores of the first (M=5.20) significantly lower than those of the latter (M=5.80) (p<0.05).

Table 7 – Kruskal-Wallis Test Results on the Participants' Scalar Scores by Previous Injuries

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Scale/Subdimension	Variable	N	Med.	Н	p
SFDPS/VRO	None	29 2	5,40	,459	,928
	Minor	15 0	5,20		
	Moderate	72	5,20		
	Serious	18	5,50		

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SFDPS/ERS	None	29 2	5,00	3,704	,295
	Minor	15 0	4,80		
	Moderate	72	5,40		
	Serious	18	5,10		
SCS	None	29 2	3,0909	2,261	,520
	Minor	15 0	3,0909		
	Moderate	72	3,1818		
	Serious	18	3,0909		

The Kruskal-Wallis test results in Table 7 suggested that the participants' scores in the SCS and SFDPS subdimensions did not differ significantly by previous injuries (p>0,05).

Table 8 – Spearman Correlation Test Result on the Relationship Between Scales and Subdimensions

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Correlation Test Results	SFDPS/VRO	SFDPS/ERS	SCS	
SFDPS/VRO				
SFDPS/ERS	,255**			
SCS	,359**	,293**		
significance level 0.01				

^{**} significance level 0.05

Table 8 presents the results of the Spearman correlation test conducted to determine the relationship between the participants' scores in the scales. Table 8 included the results of only statistically significant (p<0.05 or p<0.01) cases and excluded the insignificant ones (p>0.05). Cohen's (1988) rating system was referred to interpret the correlation coefficient (r), which shows the strength and direction of the relationship. The r values in this system are categorized as follows: 0-0.09

(no), 0.10–0.29 (low), 0.30– 0.49 (moderate), and 0.50–1 (high) correlation. The correlation coefficient (r) indicates the direction of the relationship. Hence, a negative r value indicates a negative (nonlinear) relationship, and a positive r value indicates a positive (linear) relationship. Accordingly, there was a significantly low positive linear (r=.255; p=.000) correlation between SFDPS/VRO and SFDPS/ERS and a moderate positive linear (r=.359; p=.000) relationship between SCS and SFDPS/VRO. On the other hand, there was a significantly moderate positive linear (r=.293; p=.000) relationship between SCS and SFDPS/ERS.

Discussion and Conclusion

There was no significant difference between the genders of the participants and their scores in the SFDPS/ERS and SCS (p>0.05). However, the scores of males were significantly higher than those of females in the SFDPS/VRO. Bayraktaroğlu (2021) also found a significant difference in the self-compassion levels of athletes based on gender, which supports our findings. Crozier et al. (2019) examined the relationship between self-compassion perceived by athletes in their team and their own self-compassion, and they found no significant difference between males and females. Similarly, Tingaz (2020) found no significant difference in self-compassion based on gender. Çapan (2019) reported similar results, showing that the selfcompassion levels of university students did not differ by gender. However, in a meta-analysis study, Yarnell et al. (2015) concluded that males had higher selfcompassion levels than females. Sayın (2017) found no significant difference in selfforgiveness levels of university students based on gender. Solak Şimşek (2019) conducted a study with high school students and found no significant difference between gender and self-compassion. Similarly, Bacanlı and Çarkıt (2020) discovered no significant difference between gender and self-compassion. Lastly, Sivri (2019) identified no significance between self-forgiveness and gender.

Participants' scores in the SCA did not differ significantly by age (p>0.05). However, there were significant differences in the scores of participants in the SFDPS/VRO and SFDPS/ERS based on age. Specifically, the scores of the 16-19 age

group in the SFDPS/VRO were significantly lower than those of the 11-15 age group (p<0.05). Similarly, the scores of the 11-15 age group in the SFDPS/ERS were significantly lower than those of the 23 and above age group (p<0.05). Furthermore, the scores of the 23 and above age group in the SFDPS/ERS were significantly higher than those of the 16-19 age group (p<0.05). Walker et al. (2002) and Sivri (2019) found no relationship between age and self-forgiveness, while Toussaint et al. (2001) and Uysal (2015) reported significant differences between age and self-forgiveness.

Significant differences were also observed in the participants' SFDPS/VRO scores and their athletic background. Specifically, the scores in the relevant scale sub dimension differed significantly between the "less than one year" and "8 years and above" groups, with the scores of the first group significantly higher than those of the second (p<0.05). Çaglayan et al. (2017) found a significant difference between sportive practice and forgiveness levels in their research on individuals who did and did not engage in sports. However, Bayraktaroğlu (2021) discovered no significant difference between the self-compassion levels of athletes and sports branches.

Significant differences were also found in the participants' scores in the SFDPS/VRO by category. Specifically, the scores in the SFDPS/VRO were significantly lower in the Competitor category compared to the Poomsae category (p<0.05).

No significant differences were found in the sub dimensions of SFDPS and SCS based on previous injuries (p>0.05). However, Sivri (2019) found a significant difference between negative experiences (e.g., physical violence, sexual abuse, loss of loved ones, and divorce) and self-forgiveness. This result differs from our study, as the events in the lives of ordinary individuals may be analogous to the past injuries experienced by the athletes.

There is a strong relationship between self-forgiveness and self-compassion, and this connection is well-supported in psychological research. Both concepts are part of the broader framework of self-directed positive emotions, which contribute to mental health and well-being. Self-forgiveness and self-compassion are closely related psychological constructs that contribute to emotional well-being and mental

health. Self-compassion involves treating oneself with kindness and understanding in the face of personal failings, while self-forgiveness refers to the process of letting go of self-directed negative emotions, such as guilt or shame, after making a mistake (Neff, 2003; Hall & Fincham, 2005). Both concepts emphasize a non-judgmental and caring attitude toward oneself, which can alleviate the harmful effects of self-criticism and promote resilience.

Research indicates that self-compassion is a significant predictor of self-forgiveness. Neff and Pommier (2013) found that individuals with higher levels of self-compassion are more likely to forgive themselves for past mistakes. This is because self-compassionate individuals tend to recognize their shared humanity and approach their shortcomings with a balanced perspective, reducing the intensity of negative emotions and facilitating forgiveness (Wohl, Pychyl, & Bennett, 2010). Furthermore, self-compassion has been shown to reduce feelings of guilt and shame, which are major barriers to self-forgiveness (Barnard & Curry, 2011).

Overall, self-compassion and self-forgiveness work together to foster psychological resilience and improve overall well-being. By cultivating a compassionate attitude toward oneself, individuals are better equipped to forgive their mistakes and move forward in a healthy, positive manner.

Bayraktaroğlu (2021) examined the relationship between athletes' mental endurance and self-compassion and found a significant relationship between the two, which is consistent with our study. Roxas, David, and Caligner (2014) suggested that compassion involves being touched by the suffering of others, opening one's awareness to others' pain and not avoiding or disconnecting from it, so that feelings of kindness toward others and the desire to alleviate their suffering emerge.

Similarly, Sayın (2017) found a significant relationship between self-compassion and self-forgiveness levels among university students. Sivri (2019) also found a significant relationship between forgiveness and participants' levels of optimism. Additionally, Solak Şimşek (2019) discovered a significant relationship between self-compassion and subjective well-being in her study conducted with high school students. These studies provide further support for the importance of





examining the relationships between mental endurance, self-compassion, forgiveness, and other psychological factors in various populations.

Conflict of interest The authors report no conflict of interest with this study

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