

Running head: EMPATHY

The origin of everything?

Empathy in theory and practice

Laurel J. Felt

Qualifying Exam Response

Dr. Stacy Smith's Question

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This question will focus on empathy as a construct. First, you should provide a definition (and critique) of empathy used by media effects scholars. Be sure to cover cognitive and/or affective components as well as debate surrounding empathy and how to measure it in the social science arena. Second, you should consider the role of empathy as an outcome/ an effect, a moderator of effects, or a mediator. This body of work should be explored within media effects theorizing and research as well as evaluation research pertaining to social and emotional learning curricula. Third and finally, overview how level of development and other individual and contextual factors may affect expression, experience, or manifestation of empathy.

The origin of everything?: Empathy in theory and practice

¹Scholars from diverse disciplines have long puzzled over the nature of empathy, often understood as the phenomenon of experiencing another's feelings². Besides pure science, application-oriented motives also spur research. Allegedly, empathy emerges naturally and early during the course of typical human development, and has been documented widely across time and place; therefore, empathy may be a distinguishing hallmark of humanity. Empathy's hypothesized relationships with socially productive sentiments (e.g., sympathy, compassion), motivations (e.g., morality, ethics, justice, altruism), and behaviors (e.g., helping, perspective-taking, moral reasoning) also argue for its intrapersonal and interpersonal importance. If empathy is indeed universal and central, does human development and harmonious civilization stem from empathy? Could empathy be the origin of everything?³

This paper will explore how empathy is best defined, contextualized, measured, monitored, and encouraged. First, this paper will analyze and critique multiple definitions of empathy used by media effects scholars and others, examining their conceptualizations of empathy as trait-based or state-based, cognitive, affective, or multidimensional, and associated with various other processes. Next, it will consider ways of measuring empathy, appraising various tools and their implications in research contexts. Then, it will review evaluations of media effects and emotional learning curricula that identify empathy as a

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mediator, moderator, and/or outcome variable, as well as problematize this research. Last, it will look at empathy in terms of an artifact of developmental capacity and lived experience. Finally, it will conclude with recommendations for future research and practice.

What is Empathy?⁴

Trait vs. State

First of all, is empathy a trait or a state? Duan and Hill (1996) cite a litany of scholars (e.g., Buie (1981), Sawyer (1975), Hogan (1969), Rogers (1957), Iannotti (1975), and Davis (1983)) who argue that empathy is a disposition or orientation. Work and Olsen (1990), in their investigation of the efficacy of a social problem-solving curriculum, implicitly revealed their understanding of empathy as a quality of an individual. While Wilson and colleagues (Wilson, Linz, Federman, Smith, Paul, Nathanson, Donnerstein, & Lingweiler, 1999) conceptualized empathy as “an emotional reaction in a particular situation,” they also identified empathy as “a trait or a more stable personality characteristic” (p. 12) and measured trait empathy.

Subscribing to a trait-based approach, though, oversimplifies data and risks research limitation by this “fixed mindset” (Dweck, 2006). If the level of one’s empathy, let alone its very presence, is tied to some uncontrollable and mysterious congenital condition, then efforts around empathy are either pointless or constrained by a ceiling effect. According to Wilson et al (1999), “some people

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are just more empathic than others” (p. 12). Yet real world experience and innumerable stories deny such reductiveness.⁵ Not only does people’s behavior change over time, but people’s behavior varies between contexts.⁶⁷

The nature and (mis)understanding surrounding resilience as a construct seems analogous to that of empathy, and so the reparative rhetoric around resilience might be instructive for reframing empathy. Luthar, Cichetti, and Becker (2000) deny resilience as a personal attribute and instead describe it as an outcome of a multidimensional, dynamic process (p. 548).⁸ At any given time, individuals may demonstrate uneven functioning across different domains – for example, their academic behavior might meet the definition of resilience⁹ while their interpersonal functioning might not. Resilience is thus construed as complex, situated, and negotiated. Empathy should be understood similarly, as the product of a multi-dimensional, dynamic process whose expression from moment to moment and/or across domains is contingent upon contextual factors.¹⁰

To further support empathy’s processual nature, Zillmann (1991) reviewed empathy definitions from dozens theorists in philosophy and psychology, including but not limited to Scheler (1913), Freud (1921/1950, 1993/1964), Katz (1963), and Mehrabian and Epstein (1972), concluding, “...all

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definitional approaches seem to address a process” (p. 136). Duan and Hill (1996)’s overview identified Barrett-Lennard (1962), Greenson (1960, 1967), Hoffman (1984), and Rogers (1949, 1951, 1957, 1959) as among those who viewed empathy as a “situation-specific cognitive-affective process” (p. 262).

Definitions and Dimensions

The nature of this process – specifically, the extent to which it is affective and/or cognitive and distinguished by affect match of various sorts – remains contested. The affective component refers to the hedonic phenomenon of experiencing emotion because it is co-felt by another, e.g., “feeling with” or “feeling for.” The cognitive component refers to thought processes such as: perceiving others correctly (e.g., empathic accuracy; Dymond, 1949; Kerr & Speroff, 1954); connecting to memories of prior experiences (e.g., self-focused role-taking; Hoffman, 2000); making inferences (Collins, Wellman, Keniston, & Westby, 1978); imagining oneself in the place of the other (e.g., other-focused role-taking; Hoffman, 2000); and differentiating between self and other (following Hoffman (1975), “... a clear awareness on our part that others are distinct beings (a concept called person permanence) who have unique identities (an awareness reflected in personal identity)” (Nathanson, 2003, p. 112). Affect match refers to physiological congruence (e.g., similarity in facial expression, heart rate, posture and/or body language) between an observer and the observed.

First, empathy’s affective and/or cognitive nature must be explored. According to some scholars, there are two types of empathy – affective and

cognitive. According to Duan and Hill (1996)'s review, "...an affective empathic state has been found to mediate helping behavior (e.g., Batson, Fultz, & Schoenrade, 1987; Eisenberg & Miller, 1987; Krebs, 1975; Toi & Batson, 1982), and a cognitive empathic state has been found to alter the pattern of attribution of others' behavior (e.g., Gould & Sigall, 1977; Regan & Totten, 1975). However, the relationship between these two types of empathy is not yet clear" (p. 265). Davis, Hull, Young, and Warren (1987) toe the bifurcation line. According to the authors, positive emotional reactions were affected primarily by cognitive empathy while negative emotional reactions were affected primarily by emotional empathy. But Davis et al (1987) treat their study as a validation of empathy's multidimensionality, asserting "it was only by defining empathy as a multifaceted construct – and then assessing its multiple facets – that the full scope of empathy's influence was apparent" (p. 131).

Most contemporary scholars embrace affective and cognitive components within the single term "empathy." Eisenberg and Fabes (2001) acknowledge these dual components by alluding to both an emotional response and a cognitive process of self-other differentiation, as in "...[empathy is] an emotional response that stems from another's emotional state or condition, is congruent with the other's emotional state or condition, and involves at least a minimal degree of differentiation between self and other" (p. 132). While Hoffman (2000)'s simple definition of empathy – "an affective response more appropriate to another's situation than one's own" (p. 4) seems to ignore the cognitive, he later

maintained that psychological processes are key (p. 30). Zillmann (1991) operated likewise. He first articulated a precise emotional process devoid of cognitive components:

Empathy, then, may be defined as any experience that is a response (a) to information about circumstances presumed to cause acute emotions in another individual and/or (b) to the facial and bodily expression of emotional experiences of another individual and/or (c) to another individual's behaviors presumed to be precipitated by acute emotional experiences, that (d) is associated with an appreciable increase in excitation, and that (e) respondents construe as feeling with or feeling for another individual (p. 141).

However, Zillmann allowed for the presence of cognition in the process, declaring, "...imagination indeed produces and enhances empathy, both the subjective experience and its physiological accompaniments" (p. 145). By applying his three-factor theory of emotion (Zillmann, 1978, 1979, 1983, 1984) to empathy, Zillman demonstrated his acceptance of empathy's multi-dimensionality. He also implicitly prioritized the affective over the cognitive, as his framework's dispositional and the excitatory components are affective whereas only the experiential is cognitive (p. 147).

Other researchers have also revealed their biases vis-à-vis the relative importance of affective versus cognitive components in their creation and/or utilization of certain scales to measure empathy (Nathanson, 2003). For example, the Interpersonal Reactivity Index (IRI; Davis, 1980) boasts four components, only one of which is cognitive – the other three are affective. Perhaps such an orientation is entirely warranted – in their evaluation of the IRI, Thornton and Thornton (1995) proposed the addition of yet another affective component.

Hoffman (2000)'s five stages of empathic distress are also tipped towards the affective, as the first three are triggered by affective stimuli whereas the final two are facilitated by cognition. So it appears that empathy is a process that is more affective than cognitive.

Affect match is an element commonly included in empathy's definition.

Besides explicitly unpacking the affective and cognitive components of empathy, Zahn-Waxler & Radke-Yarrow (1990)'s definition explored affect match:

... In some conceptualizations of the affective component, a strict or near match of another's emotions is required (e.g., sadness in response to another's sorrow, anger in response to another's anger) (p. 108).

Summarizing diverse theorists, Zillmann (1991) offered a consensus definition that also included affect match: empathy is "...a process by which persons respond emotionally to the emotions of others, and do so with some degree of affinity between witnessed emotion and their emotional reaction to it" (p. 136).

Mimicry may help to explain affect match. Synthesizing several neuroscientists' research, Goleman (2006) explained that "'mirror' neurons... reflect back an action we observe in someone else, making us mimic that action or have the impulse to do so" (p. 41). These mirror neurons are the mechanisms responsible for facial mimicry (Rizzolatti, Fogassi, & Gallese, 2001; Preston & deWaal, 2002), which has been documented across children and adults (Sagi & Hoffman, 1976; Bargh, Chen, & Burrows, 1996; Bernal & Berger, 1976). Because "afferent feedback from the facial muscles fosters expression-specific affect" (Zillmann, 1991, p. 142) – or, arranging one's face into a certain expression

facilitates experiencing the emotion(s) associated with that expression, such as happiness from a smile or consternation from a frown (Laird, 1974; Decety & Jackson, 2004; Decety & Moriguchi, 2007) – emotional empathy may be thusly explained. Some research suggests that merely observing faces and/or behavior triggers an emotional experience – no mirroring required (Goleman, 2006, p. 58).

The validity of affect match as an empathy indicator has not gone unchallenged. Blair (2010) dismissed mirror neuron based accounts of emotional empathy as inadequate since perception-action did not occur in one study when an observer had judged the observed's prior behavior as unfair (Vignemont & Singer, 2006). But this might still be framed as an empathic response – specifically, anti-empathy or counterempathy. Zillmann (1991) theorized that cognitive consideration of socially and/or individually sanctioned emotional behavior could instigate dispositional override, suppressing immediate affective reactions (p. 151). However, Ekman and Friesen (1978)'s work with micro-expressions suggests that the extent to which one can marshal one's face to reflect a cognitive priority is limited – our true emotions reveal themselves in action units, or muscle combinations, that flash across our faces for tenths of a second and are universally recognized (assuming one can process their rapid display).¹¹ Despite the desirability of appearing moved/excited/contrite, immediate affective reactions still appear.¹² Concluding that affect match should exclusively pertain to identical emotional and/or facial reactions, and that such a

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reaction is an integral element of empathy, seems prudent.

Relationships

According to the literature, empathy is associated with: personal distress and empathic distress¹³; perspective-taking; sympathy; prosocial behavior and aggression; and moral reasoning, justice, and altruism. The order in which these concepts are presented is meant to suggest a chronology, with each subsequent element cascading from the prior.

Perspective-taking.

Nathanson (2003) describes perspective-taking as “the cognitive mediator that is responsible for empathy” (p. 118). While perspective-taking’s referent can be perceptual, cognitive, or affective (Moore, 1990, p. 77), empathic perspective-taking is cognitive, described as a process “in which individuals display cognitive understanding of others' internal states and cognitions” (Eisenberg, Zhou, & Koller, 2001, p. 518). Such an undertaking requires insight and self-other differentiation.

Personal Distress and Empathic Distress.

Personal distress stems from empathy (Eisenberg, 2000) but its orientation is trained inward rather than outward. Batson (1987) describes it as a self-focused aversive reaction to another’s distress “...associated with helping primarily when helping is the only way to alleviate the helper's own vicariously induced distress; such helping is egoistically rather than altruistically motivated” (Eisenberg & Fabes, 1990, p. 133). Those who experience acute personal

distress may also avoid conflict and/or exposure to others' negative emotions.

Prosocial moral action, therefore, is rarely if ever an artifact of personal distress.

Empathic distress, a negative affective response triggered by another's distress, is other-focused and so may inspire prosocial moral action since those who experience it genuinely want to relieve others' suffering (Hoffman, 2000, p. 30). Hoffman (2000) identified five stages in the development of empathic distress, conjecturing that, with the third stage, "children's empathic distress is transformed in part into a feeling of sympathetic distress or compassion for the victim" (p. 6). This suggests a sort of evolution towards sympathy.

Sympathy.

Sympathy is commonly thought to stem from empathy and "... consists of feelings of sorrow or concern for others" (Zahn-Waxler & Radke-Yarrow, 1990, p. 108). Although Goleman (2006) looked down upon sympathy, describing it as a state "where we feel sorry for the person but do not taste their distress in the least" (p. 62), several prominent investigators (e.g., Batson, Turiel, Hoffman) identified sympathy as among the most important motivators of other-oriented moral responding (Eisenberg, Zhou, & Koller, 2001, pp. 518-519). It is perhaps the emotional distance – not alienation, just distance – inherent in sympathy that allows helpers to execute prosocial behavior unencumbered.

Prosocial Behavior and Aggression.

Empirical research has found that prosocial behavior and its opposite, aggression, is associated with elements of the empathy framework. In their study

of Brazilian adolescents, Eisenberg, Zhou, and Koller (2001) reported that sympathy and/or moral judgment mediated the relation between perspective-taking and prosocial behavior (p. 531). Investigations by Roberts and Strayer (1996, 2004), Wilson and colleagues (1999), Miller and Eisenberg (1988), and Feshbach (1969) confirmed that empathy and aggression are inversely related. “High levels of empathy may prevent aggressive interactions both by signaling the empathically aroused child to attend to the others’ emotion and by helping children anticipate how others will feel when they enact particular behaviors” (Schulz, Izard & Bear, 2004, p. 373).

Moral Reasoning, Justice, and Altruism.

Hoffman (2000) posited that moral principles stabilize empathic affect and so assure appropriateness of response, decreasing the likelihood of compromise by empathic over-arousal or under-arousal (Hoffman, 2000, p. 239). Empathy may facilitate the cognitive appraisals and emotional assessments upon which morality depends (Turiel & Killen, 2010, p. 43). Gibbs (2003) asserted that both sympathy and justice (in the form of one of its fundamentals, ideal reciprocity) motivated a commonly cited example of prosocial behavior¹⁴; likewise, Hoffman (2000) suggested that empathy “may provide the motive to rectify violations of justice to others” (p. 229).¹⁵ Turiel and Killen (2010) concurred: “we propose that feelings of care for others are necessary for the acquisition of concepts of equality and fairness, which ultimately lead to inferences about the

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appropriateness of impartiality and justice” (p. 42). Batson’s research advances the possibility that, under some conditions, altruism and prosocial behavior may be empathically based (Zahn-Waxler & Radke-Yarrow, 1990, p. 109)

This literature suggests that empathy is a dynamic, multidimensional process consisting of primarily affective as well as cognitive components, manifesting in affect match between an observer and the observed, related to the processes, behaviors, and concepts as articulated in Figure 1.

Investigating Empathy

Measurement

In the social science arena, various tools and methods have been utilized in order to attempt to measure empathy. Self-report scales are among the most common measure¹⁶; the sheer quantity of scales and their steady development over the years demonstrates that how to capture empathy has hardly reached consensus. While an exhaustive review of each tool is beyond the purview of this paper, examination of a few popular scales will illuminate some of the most important issues to consider.

The IRI (Davis, 1980) envisions empathy as a composite of four elements: perspective-taking, empathic concern, personal distress, and fantasy (“respondents’ tendencies to transpose themselves imaginatively into the feelings and actions of fictitious characters in books, movies, and plays” (Davis, 1983, p. 114)). Are such components accurate, parsimonious, and exhaustive? Whereas perspective-taking may precede (and follow) empathy, it does not necessarily

lead to empathy (i.e., in the case of detachment). Personal distress, meanwhile, may only follow empathy, occurring as a result of an empathic process. Are both components equally valid elements of the scale? Personal distress and empathic distress are quite similar, differing only in orientation. Are both components necessary? The same question can be asked of the fantasy scale, which is unique to the IRI. In terms of exhaustiveness, Thornton and Thornton (1995) criticized the IRI's failure to directly address the sharing of emotions between the observer and the observed, and suggested adding fifth dimension to the scale. However, Wilson et al (1999) used the IRI specifically in order to "reflect the tendency to emotionally share others' feelings" (p. 12). This suggests that scales' validity may be questionable and the ways in which they are interpreted varies.

deWeid et al (2007) took on the validation process, factor analyzing Bryant's empathy scale (1982) and finding it multi-dimensional (rather than uni-dimensional), narrow in scope (not covering the full range of emotions), and problematic vis-à-vis reverse-coded items. Reflecting on the theoretical implications of the scale's two dimensions, adding items that tap the omitted emotions, and addressing the reverse-coded items might amend this.¹⁷ However, the scale in its current form has been used for nearly 30 years by several prominent researchers (e.g., Eisenberg & Fabes, 1990; Strayer & Roberts, 2004), and so the collective corpus of data vis-à-vis empathy may be flawed.¹⁸

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Self-report tools in general are subject to critique. Due to social desirability bias (principally exhibited by adults), cognitive limitation (principally exhibited by children)¹⁹, and lack of access to meta-cognition (universally observed), the extent to which participants can and do offer accurate responses is limited. A meta-analytic review of empathy literature undertaken by Eisenberg & Miller (1987) found that self-report was particularly problematic, compromised by demand characteristics or other factors such as sex of the experimenter (Eisenberg & Fabes, 1990, p. 134)²⁰. Simple survey fatigue also may undermine the richness of data, although failing to ask enough questions on a construct could deliver an incomplete portrait.²¹

Subsequently, some researchers recommend gathering physical/physiological data. In the case of empathy, certain facial expressions and elevated heart rate and skin conductance might indicate empathy or empathic arousal (Levenson & Ruef, 1992). The facial action coding system (FACS; Ekman & Friesen, 1978) is most commonly used²². Since easily observable facial expressions can be falsified (Eisenberg & Fabes, 1990) or deliberately managed (Zillmann, 1991), only micro-expressions should be coded. This necessitates videotaping and transcribing, as data derived from real-time coding may prove erroneous and/or difficult to obtain, even among experienced coders. The time and expense associated with training, obtaining equipment, and setting it up may be appreciable, and since the camera's scope may be limited,

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so too may be the data. Reactivity may also affect participants and so bias the data. All of these issues pertain to heart rate and skin conductance measures as well. Moreover, participants may react to the placement of electrodes upon their bodies with fear or a sense of indignation or degradation (Eisenberg, Fabes, Bustamante, & Mathy, 1987). The precision of these latter measures also has yet to be conclusively determined²³.

In the face of these deficiencies, self-report measures may seem more attractive – easier to administer, more familiar – “the devil you know,” as the saying goes. But triangulation, or the use of multiple measures to capture data on the same construct, is the best choice. While this may add time and complexity to a research design,²⁴ it seems the only way to approach this volatile subject (for emotions are anything but stable), especially when such imperfect instruments are at hand. Strayer and Roberts (2004) achieve triangulation by utilizing self-report, interview, observation, and input from members of the participant’s network (i.e., friends, parents, teachers). This may be the most robust solution.²⁵

Manifestations

The mediated relationship between empathy and an outcome variable has been the focus of much research (e.g., Cialdini & Kendrick, 1976; Eisenberg & Miller, 1987; Batson & Coke, 1981; McKown, Gumbiner, Russo, & Lipton, 2009). However, empathy plays various roles in the enactment of social behavior. It may

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operate as a moderator, or an exogenous variable whose level impacts the strength and valence of a relationship between an independent variable (IV) and a dependent variable (DV), causing an interaction. Empathy also may mediate a relationship between an IV and a DV such that the direct path between these two variables is weaker (if not non-existent) than the indirect path through the mediator (Baron & Kenny, 1986). Finally, in the case of empathy-oriented interventions, empathy is the anticipated outcome or DV.

Moderation.

Empathy moderated the relationship between a social problem-solving curriculum and post-intervention teacher-rated adjusted change in students such that a high pre-level of empathy led to higher final scores (Work and Olsen, 1990). In the media effects arena, levels of empathy (measured and conceptualized in various ways) moderated reactions to and enjoyment of emotional mediated content; specifically: enjoyment of horror films (Tamborini et al, 1990) and sad films (Oliver, 1993; deWied, 1994); vicarious experience of suspense and distress while viewing suspenseful films (deWied et al, 1997); and perception of danger and personal risk from news stories (Aust & Zillmann, 1997). Among children, Zillmann and Cantor (1977) discovered that those who empathize with victim are less attracted to violent content, while those who empathize with aggressive perpetrators are more attracted to violent content.

Empathic moderation is problematic because it takes a trait-based approach to empathy, regarding empathy as a pre-existing condition of an

individual like SES, age, or gender. While these aforementioned studies identified the moderating effect of empathy, the validity of these findings is questionable. Rather than a generalized empathic capacity, scores on these measures might indicate whether empathic responding is an accessible heuristic (Shrum, 2002). Other, more helpful diagnostic measures might include emotional sensitivity, emotional expressiveness, and capacity and tendency to perspective-take.

Mediation.

Empathy as a mediator is commonly found in evaluations of entertainment-education (EE) and social and emotional learning curricula. For example, Bae (2008) reported that sympathy and empathy mediated the relationship between watching a television program depicting cornea donation and issue involvement, which led (via several other variables) to intention to donate. While Bae interpreted the higher response on sympathy than empathy to mean that empathy was an easier emotional response to evoke (p. 31), most of the literature cited in this paper suggests otherwise. Interestingly, empathy mediated the relationship between sympathy and issue involvement²⁶ rather than the other way around.

Other EE research found that identification/involvement with characters, which implies empathy or sympathy depending on the way in which this is operationalized (Cohen, 2001; Moyer-Guse, 2008), led to: interpersonal communication, proactive health behavior, and acquisition of storyline-embedded information (Wilkin, Valente, Murphy, Cody, Huang, & Beck, 2007, p. 466); self-

efficacy and interpersonal conversation, which led to social learning, which led to collective efficacy and paradoxical communication (Papa, Singhal, Law, Pant, Sood, Rogers, & Shefner-Rogers, 2000); interpersonal communication, self-efficacy, and collective efficacy (Sood, 2002). Accordingly, EE practitioners declare that “must be emotionally engaging” and “resonate emotionally” (Movius, Cody, Huang, & Berkowitz, 2007, p. 16).

Wilson et al (1999) evaluated a three-week, media-rich curriculum intervention that attempted to increase adolescents’ awareness of the consequences of their actions and keep them out of the criminal justice system. They found that the intervention, which relied heavily on empathy-based exercises, caused decreases in physical and verbal aggression indirectly, via increases in empathy (p. 17). Empathy may have mediated the relationship between cognitive and social skills training curricula, among other intervention tools, and positive development outcomes evidenced by recipients 15 years later (Hawkins, Kosterman, Catalano, Hill, & Abbott, 2008). Elements of the empathy framework – perspective-taking and sympathy – mediated the relationship between femininity and prosocial moral reasoning (Eisenberg, Zhou, & Koller, 2001). Sympathy also mediated the relationship between perspective-taking and prosocial moral reasoning (p. 528).

Outcome/effect.

Violent content has inspired several media researchers to search for empathy or aggression as an outcome. Nathanson (1998) found that offering

²⁶ sympathy also led directly to issue involvement, but less robustly

mediation instructions to children prior to their viewing of a violent cartoon led to less aggressive tendencies and more empathy for the victim. Zillmann (1991) hypothesized that gratuitous violence would trigger a response of “counterempathic euphoria” (p. 162), while complex characters (e.g., “bad heroes, good villains”) may produce affective indifference and insensitivity in child viewers since they are unlikely to care what happens to such personages.²⁷ This hypothesis likely followed Zillmann & Cantor (1977)’s discovery that when a protagonist in a film is neutral or positive, there is affective match in children, whereas a negative character does not inspire such congruence. Hoffner (1996) also discovered that liking a character predicted children’s empathic responding. Finally, Zillmann (1991) conjectured that because mass media enables access to more faces, empathic responding may benefit from practice; however, this advantage may be canceled out by the frenetic pacing of most film and television shows which, according to Zillmann (1991), “is likely to produce affective confusion and shallowness in both children and adults” (p. 161).

Social scientists have also sought the predictors of empathy. Roberts and Strayer (2004) comprehensively examined children’s empathy, concluding that parents’ empathy led to this outcome indirectly via children’s anger.²⁸ Children’s expressions of happiness, sadness, fear, and anger also mediated the relation between parents’ warmth and children’s empathy (p. 246). In 1996, this research team found that children’s emotional expressiveness, their expression of anger,

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the frequency with which they denied feeling sad, frightened, or angry, congruence between their facially expressed and verbally reported emotions, and role-taking accounted for 60% of the variance in children's empathy (Roberts & Strayer, 2004, pp. 229-230). Barnett (1984) found that experiencing an identical incident enhanced a young child's empathy towards a distressed age-mate.

While investigators of SEL curricula rarely articulate "empathy" as the explicit construct of interest, it is nonetheless integral to their work. Empathy is intensively practiced since it constitutes the "social awareness" skill, implied in outcome measures such as "positive social behaviors" (Durlak & Weissberg, 2007; Payton, Weissberg, Durlak, Dymnicki, Taylor, Schellinger, & Pachan, 2008), and probably functions as a mediator of prosocial outcomes.

Development of Empathy

Empathy is sensitive to both human development and contextual factors. Some scholars posit that empathic potential is inborn – humans are hard-wired to connect (Goleman, 2006). Experiments with newborns demonstrated that within their first few hours of life, infants exhibit mimicry of distress, e.g., crying in response to a fellow baby's wails (Sagi & Hoffman, 1976). As people mature and gain control over executive functioning, their empathic capacity also develops. Hoffman (2000) articulated five distinctly different modes of empathic arousal.

These include three that are preverbal, automatic, and essentially involuntary: motor mimicry and afferent feedback; classical conditioning; direct association of cues from the victim or his situation with one's own painful past experience... There are two higher-order cognitive modes: mediated association, that is, association of expressive cues from the

victim or cues from the victim's situation with one's own painful past experience, where the association is mediated by semantic processing of information from or about the victim; and role- or perspective-taking, in which one imagines how the victim feels or how one would feel in the victim's situation (pp. 4-5).

Wilson and Cantor (1985) explored developmental differences in empathy with a television protagonist's fear and indeed discovered that 3- to 5-year-olds reacted differently than 9- to 11-year-olds. They found that the younger children's cognitive limitation – specifically, their failure to recognize the nature of the character's emotion and perhaps their failure to role-take – diminished the extent to which they reacted emotionally as compared to older children. Since this appeared most strongly as a “between group” as opposed to “within group” result, it suggests that, at least among children, empathic responding is a function of cognitive developmental capacity.

Models of emotional development (e.g., Erikson, Greenspan, Fischer) plot emotional capacity along a timeline, with emotional range expanding as children age. This is also an artifact of cognitive development, though; they conceptualize emotional adeptness as depending upon ability to engage in emotional thinking, or construct emotion representations, fantasies, and self-concept.

This suggests that, with maturity, children may become more capable of understanding the significance of certain facial or gestural cues as well as the implications of certain situations and their likely effects. This may be due opportunity – the longer one has lived, the greater the likelihood that one has had an experience similar to the one observed and thus can understand it. It may also

be a function of children's increased cognitive capacity to transcend the self and closely to attend to others, to make inferences, to recall distal information, to differentiate between self and other (facilitated by theory of mind), and to engage in abstract thought (Berk, 2003). Piaget (1981) described these stages of intellectual development as sensorimotor, preoperational, concrete, and formal operational. From a purely biological/physical perspective, empathic capacity should increase in lockstep with cognitive development.

However, human beings are not raised in vacuums. As Bronfenbrenner (1977, 1986), Vygotsky (1978), Bandura (1977, 1986, 2002, 2004), Lerner and Benson (2003), and innumerable other scholars have illuminated, development is a transactive process in which environments shape individuals and individuals shape their environments. This prompted Zahn-Waxler and Radke-Yarrow (1990) to suggest, "It may be more fruitful to ask what are the conditions of development, temperament, family life, socialization, and culture that influence the diverse ways in which self-concern and concern for others are expressed and balanced within different individuals" (p. 126).

High-stress, abusive, and/or emotionally barren environments are not conducive to empathic development. On a biological/physical level, elevated cortisol levels (the stress hormone) may compromise the development of neural pathways (Phillips and Shonkoff, 2003). The experience of this stress or abuse may also normalize unempathic/aggressive behavior and motivate the creation of counterempathic mental representations of others (Arsenio & Lemerise, 2010).

Exposure to emotionally insensitive environments may stunt children's emotional development, limiting their emotional vocabulary, denying them the opportunity to better identify and regulate their own emotions, and depriving them of opportunities to perspective-take. Any and all of these circumstances are likely to limit the extent to which children can empathize with others (Hyson, 1994).

Thus, sensitive child-rearing is quite important. Hoffman (2000) recommended that parents make use of inductions or "confrontings" (p. 292). These are explicit invitations to children to consider how someone else is feeling. Focusing their attention on physical cues, such as gestures, posture, and facial expression, is useful for fostering empathy as it heightens awareness and boosts the probability of affect match. Hoffman (2000) also recommended explicitly asking children to perspective-take, as in "How would you feel if you were [insert person's name]?" This exercises children's capacity to perspective-take, as well as boosts the salience of a perspective-taking response (Shrum, 2002). Inductions also "form transgression-guilt scripts" (Hoffman, 2000, p. 292); according to Gibbs (2003), "... parental expression of disappointment after a transgression can stimulate the child to reflect and gain in moral self-relevance" (p. 121). Parents can also model inductions within the context of conflict.

Eisenberg frequently illuminates the role that experience and parenting may have on empathic responses. Skill at regulating and coping with emotional arousal may prevent flooding by personal distress and leave clear the pathway to empathy (Eisenberg & Fabes, 1990, p. 146), while boys' and girls' differential

treatment during childhood may explain gender differences in adolescent manifestations of empathy (Eisenberg, Zhou, & Koller, 2001, p. 530). As previously stated, Strayer and Roberts (2004) demonstrated the pathways between parents' treatment of emotion and children's empathy.

As children spend an increasingly significant amount of time in school/after-school contexts as well as with media products, the extent to which empathy is modeled and practiced in these environments also impacts their development. "In a national sample of 148,189 sixth to twelfth graders, only 29%–45% of surveyed students reported that they had social competencies such as empathy, decision making, and conflict resolution skills, and only 29% indicated that their school provided a caring, encouraging environment (Benson, 2006)" (Durlak, Weissberg, Dymnicki, Taylor & Schellinger. 2011, p. 405). This implies that interventions in these contexts are necessary.

Shrum (2002) offered two principles to explain the process by which social information influences judgment. The Heuristic/Sufficiency Principle states that people rely upon "sufficient" rather than exhaustive information to construct their judgments, with sufficiency determined by one's motivation and ability to process information. The Accessibility Principle states that certain information is more likely to be used depending on three characteristics: relative frequency and recency of activation, vividness, and relations with accessible constructs (pp. 71-72).

Therefore, future interventions – both in face-to-face settings and

modeled/facilitated by media – might endeavor to do the following:

- increase motivation to process others' situations (e.g., to more completely observe their feelings, reflect upon their perspective) by humanizing the other and demonstrating the positive impact of such processing upon behavioral outcomes;
- enhance ability to process others' situations by formal instruction in observation and perspective-taking, as well as correction of thinking errors;
- increase recency and frequency of empathic framing (i.e., other people have feelings and deserve respect) and behavior (i.e., attend to others' cues, take their perspective, discredit thinking errors) through practice
- boost vividness by focusing on detailed examples in one's environment and graphic, holistic mediated representations
- build relations with accessible constructs by linking nodes, or associating young people with siblings or older women as mothers, or confrontations as opportunities to demonstrate strength or learn about another.

Future research should investigate the longevity of interventions' impact;

whereas collecting data via immediate post-test is standard practice, returning later to monitor effects is rare – and yet, such information is of critical importance.

Conclusion

“Empathy is a fundamental building block for positive growth and development” (Zahn-Waxler & Radke-Yarrow, 1990, p. 110). This paper investigated empathy, exploring its definition, relationship to other variables, means of measurement, manifestation in the literature as a moderator, mediator and outcome, and emergence according to developmental capacity and lived experience. Due to empathy's primacy, universality, and centrality to thought and behavior, it may be the origin of everything. As such, it deserves more attention in terms of formal conceptualization, productive facilitation, and meaningful practice.

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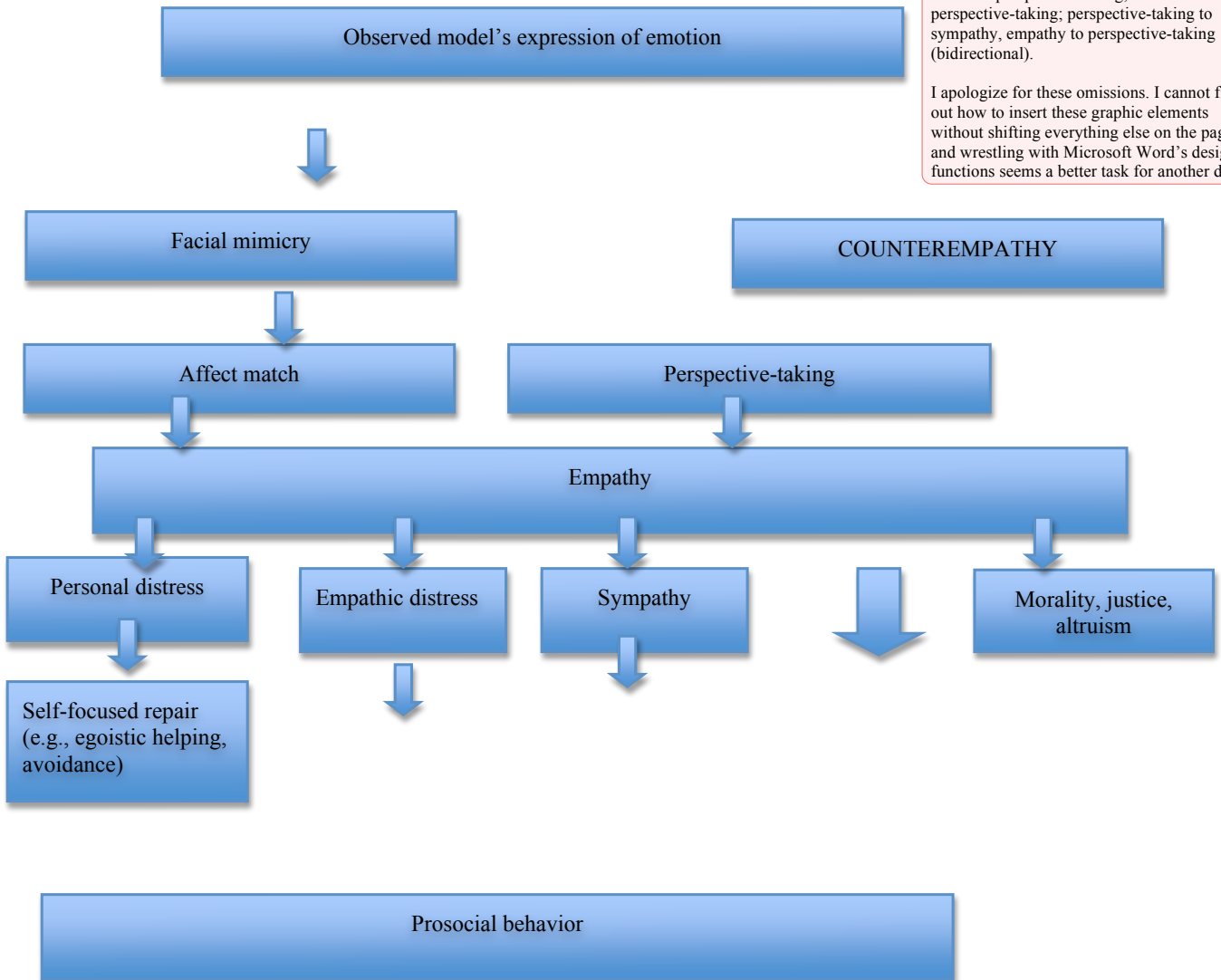
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Figure 1. Proposed empathy framework.

Laurel Felt 5/23/11 2:16 PM
Comment: There should be an arrow from: observed model to counterempathy; observed model to perspective-taking; affect match to perspective-taking; perspective-taking to sympathy, empathy to perspective-taking (bidirectional).
I apologize for these omissions. I cannot figure out how to insert these graphic elements without shifting everything else on the page, and wrestling with Microsoft Word's design functions seems a better task for another day...



¹ The beautiful young woman, breathless from her recent brush with danger, stormed into the kitchen and scanned the room. Empty. She cried out nonetheless, "Where are you?" With emotion choking her voice, the preternaturally sunny young woman uncharacteristically declared that she didn't like the unseen conversant's sense of humor anymore. "I wish there hadn't been any magic, and I wish you hadn't come here!" she declared, then threw herself in the cinders before the fire. "I love you, Prince Henry..." she whispered as she sobbed. This time, her words were not directed at her fairy godmother; rather, they gave voice to the deepest secret of Cinderella's heart.

This scene from *Faerie Tale Theatre: Cinderella* (Duvall & Cullingham, 1985) gripped many a young viewer – possibly, as was the case with this author, to their utter confusion. *They* hadn't narrowly escaped mortification at the ball. *They* hadn't been visited and abandoned unpredictably by a fairy godmother. *They* hadn't fallen in love with a winsome prince – in fact, due to their tender years, it's doubtful whether any of the viewers had ever fallen in love with anyone at all, royal or common. Yet they too felt, like Cinderella, frustration and sadness – perhaps some¹ even shared in her tears.

Children are not the only ones confused by such reactions.

² although definitions of empathy vary quite widely and this paper will explore this range and language.

³ The fields of media effects and social and emotional learning are productive sites from which to investigate empathy, as recent social trends associated with youth have inspired scholarly efforts in both disciplines. In terms of media, people wonder about the implications of youths spending so much time – more every year (Rideout, Foehr, & Roberts, 2010; Lenhart, Madden & Hitlin, 2005; Rideout, Vandewater, & Wartella, 2003), across more platforms (Lenhart, Ling, Campbell, & Purcell, 2010; Lenhart, Purcell, Smith, & Zickuhr, 2010; boyd, 2009), and increasingly simultaneously (Rideout, Foehr, & Roberts, 2010; Foehr, 2006; Rideout, Roberts, & Foehr, 2005) – accessing diverse content from screens of various kinds. Which influences upon empathy development, if any, are attributable to this significant attendance to mediated representations, violent or otherwise, which possibly displaces some engagement with others in non-mediated settings?

⁴ Opined Martin L. Hoffman (2000), expert in empathy and moral development, "To me, empathy is the spark of human concern for others, the glue that makes social life possible. It may be fragile but it has, arguably, endured throughout evolutionary times and may continue as long as humans exist" (p. 3). While such an explanation is irretrievably vague for scientific research purposes, its one area of specificity – namely, that it is *human* – would provoke pushback by investigators who have documented kindness among animals (Brothers, 1990; Peterson, 2011). Clearly, conceptualizing empathy is a complex undertaking.

⁵ Kind people often ignore beggars in the street – observe the street corners of any contemporary city, or read the parable of the Good Samaritan; criminals care for children – take a look at "Daddy and Me," a literacy program in which Riker's Island inmates record themselves reading aloud for their children (Heisler, 2010), or rent *Raising Arizona* (Coen & Coen, 1987) or *Leon: The Professional* (Besson & Besson, 1994). One might argue that sympathy rather than empathy is better exemplified in these cases; however, empathy may be a prerequisite for sympathy, preceding sympathy ontogenetically and sequentially.

⁶ Summarizing Buber (1923), communication scholar Arvind Singhal (personal communication, February 26, 2011) maintained that goodness is not an intrinsic quality but rather a process that is created in the space between people – it is a verb, not a noun, something we do with people, not something we are (or are not).

⁷ Additionally, invoking empathy as a categorical descriptor may limit research practice, and so fail to systematically explain deviation and enrich understandings. For example, investigators embracing a trait-based conceptualization of empathy might simply tally a person's empathic and unempathic acts in order to predict future behavior (i.e., the higher one's empathy score, the more likely one is to behave empathically). Data on contextual variables, such as physical state, relational partner, location, inciting incident, etc, would neither be collected nor analyzed since a trait-based approach does not regard such qualities as salient. Whether one's empathic acts vary systematically according to such variables, therefore, is impossible to ascertain. So the question of whether a more complete portrait of empathic behavior and a more robust regression equation to predict its manifestation would remain.

⁸ Ironically, they explain empathy as just that. "Note, however, that the phrase "resilient children" does not imply reference to a discrete personal attribute, akin to intelligence or empathy" (Luthar, Cichetti, & Becker, 2000, p. 548). This statement demonstrates the silo-ed nature of contemporary academia as such distinguished researchers fail to appreciate the true nature of empathy. Moreover, in terms of intelligence, Gardner (1983) would challenge it as discrete rather than multiple, Lave (1996) would challenge it as personal rather than communal, and Dweck (2006) would challenge it as fixed rather than amenable to growth.

⁹ ("the maintenance of positive adaptation by individuals despite experiences of significant adversity" (Luthar, Cichetti, & Becker, 2000, p. 543))

¹⁰ Shrum (2002) introduced a model to explain the process of media effects, or individuals' reactions to the stories, characters, and formal features that constitute mass media. If empathy is framed as "the reaction to

the observed experiences of another" (Davis, 1983, p. 114), then, at least in cases of mediation,¹ empathy is a possible media effect. While specific elements of Shrum's model will be explored later in this paper, its general explanation of behavior deserves mention here. The model suggests that how a person behaves is not determined by an in-born quality, but largely depends upon how s/he interprets the situation. Certain pre-existing variables may predict the outcome of this process, but it is a process nonetheless. Resilience research has shown that the presence of protective mechanisms and/or absence of risk factors in certain areas predict resilience, but its manifestation is not assured. Similarly, individuals' skills in perspective-taking or experience with empathic distress may predict empathic responses, it is not self-evident that individuals will engage in the empathy process.

¹¹ The cable television program *Lie to Me* is based on this micro-expression detective work.

¹² Hoffman (2000) contended that affect match could refer to a "...match between the observer's affective response to the observer's representation of the victim's life condition, and the victim's likely response to that same representation" (Hoffman, 2000, p. 84). In other words, rather than actually matching the victim's countenance (or imagined countenance, in cases of distance and/or retelling), the observer's attempt to react as s/he imagines the victim would react qualifies as a match. He elaborated,

It may be more useful to define empathy not in terms of outcome (affect match) but in terms of the processes underlying the relationship between the observer's and the model's feeling. The key requirement of an empathic response according to my definition is the involvement of psychological processes that make a person have feelings that are more congruent with another's situation than with his own situation (p. 30).

Herein lies the complication. According to well-known communication phenomenon *the third-person effect* (Davison, 1983), "...individuals tend to think that the media will have greater impact on others than on themselves" (Glynn, Ostman, & McDonald, 1995, p. 267). Researchers have documented third-person perceptions (TPPs) internationally (Tsafati, Ribak, & Cohen, 2005) and among children (Henriksen & Flora, 1999), establishing TPPs as quite common. So it would seem, when it comes to conceptualizing the influence of certain stimuli upon others, especially dissimilar others (Reid & Hogg, 2005), people tend to perform quite poorly. Hoffman (2000) supported this, testifying that the "...observer's imagination runs rampant... As a result, the observer's empathic distress can be more intense than the victim's actual distress – and presumably more intense than the observer's *actual* distress would be in the victim's situation" (p. 60). This final presumption is debatable, as third-person effect theorist Davison (1983) queried "Or, is it possible that we do not overestimate effects on others so much as we underestimate effects on ourselves?" (p. 14).

Regardless, the extent to which the observer's process and outcome replicates the victim's process and outcome seems modest.

¹³ also known as "empathic concern"

¹⁴ in which a Southern boy, to his own surprise, stopped harassing a young African-American boy, stood up to his friends, and apologized to the victim.

¹⁵ It was therefore surprising that Gibbs (2003) resisted Hoffman's "interpretation of justice or equality as a mere empathy alloy," decrying it as "inappropriately reductionistic" (p. 115).

¹⁶ and include, but are not limited to, the following: Affective Simulation Taste for Empathy (FASTE; Feshbach & Roe, 1968); Empathy scale (EM; Hogan, 1969); Questionnaire Method of Emotional Empathy (QMEE; Mehrabian & Epstein, 1972); Differential Emotion Scale (DES; Izard, 1972), DES II (Izard, 1977), (QMEE; Mehrabian & Epstein, 1972); Differential Emotion Scale (DES; Izard, 1972), DES II (Izard, 1977), DES III (Izard, 1979); I7 (Eysenck & Eysenck, 1978); Profile of Nonverbal Sensitivity (PONS; Rosenthal, Hall, DiMatteo, Rogers, & Archer, 1979); Interpersonal Reactivity Index (IRI; Davis, 1980); Bryant Empathy Scale for Children (1982); Empathy Continuum (EC; Strayer, 1993); Behavioral and Emotional Rating Scale (BERS; Epstein & Sharma, 1998); Ad Response Empathy (Escalas & Stern, 2003); Empathy Quotient (EQ; Baron-Cohen & Wheelwright, 2004); Assessment of Children's Emotion Skills (ACES; Schultz, Trentacosta, Izard, Leaf, & Mostow, 2004); Southampton Test of Empathy for Preschoolers (STEP; Howe, Cate, Brown, & Hadwin, 2008).

¹⁷ and perhaps entering questions for which there are obvious errors, thus performing the function for which reverse-coded items had been intended – catching "free-rider" respondents – without sacrificing the quality of the data.

¹⁸ Note: Eisenberg, Zhou, & Koller (2001) used the problematic IRI (Davis, 1983).

¹⁹ This has inspired the use of some nonverbal measures that make use of pictures/stories (e.g., Ianotti, 1975). Miller and Eisenberg (1988) critique these tools, however, because they often require children to switch rapidly among affective states if they are to appear empathic. They also point out that researchers who have used these tools did not differentiate between empathizing with positive or negative emotions; this,

however, seems to be omission that common to most researchers, regardless of tool, and deserves further exploration.

²⁰ It is somewhat ironic, therefore, that Eisenberg, Zhou, & Koller (2001) use self-report exclusively.

²¹ As a practice, utilizing etic research methodologies which only gather data on items of interest pre-determined by investigators has been questioned by some, as it risks “missing the story” (Davies & Dart, 1995) and leaves out the authentic voices of participants.

²² although Izard (1979)’s Maximally Discriminative Facial Movement Coding System (MAX) was a rival for a time

²³ “Decisions regarding the proper baseline and how to handle individual differences in baseline physiological responding are tricky ones” (Eisenberg & Fabes, 1990, p. 136).

²⁴ which probably implies more money as well

²⁵ One final thought on measurement: Since empathy is better conceptualized as a process rather than a trait, just what are we measuring anyway? Rather than recording the level of one’s empathy (if there is such a thing), it may be more productive to capture frequency and context, e.g., how often and under what conditions does one tend to react empathically.

²⁷ This is debatable. The characters’ complexity might make them more interesting and relatable, and support viewers’ ability to empathize with three-dimensional human beings.

²⁸ “More empathic parents had children who were less angry, an effect we had expected to be mediated by parenting. Such mediated effects were present— empathic parents were less controlling (i.e., empathic fathers were less authoritarian and empathic mothers made less use of anxiety and guilt control), as expected, a condition associated with less child anger. However, parental empathy was also associated with increased child anger because more empathic parents encouraged (or tolerated) their children’s emotional expressiveness” (Roberts & Strayer, 2004, pp. 245-246).