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ABSTRACT

When assessing the influence of empathy on prosocial motivation, analyzing empathy alone would lead to a misunderstanding. We must also assess other elements of the situation, such as the altruist's coping skills and situational constraints. In a similar manner empathy itself should be conceptualized as a process with many elements. One way to conceptualize these elements is to categorize them as to whether they are likely to develop in a cumulative, mechanistic, experience-dependent manner (content components of empathy) or to develop in a structural, organismic, process-dependent manner (structure components of empathy). Measures of content components show empathy developing at an early age; measures of structure components indicate continued development in childhood. Discrepant findings concerning the role of empathy in prosocial behavior may be resolved by considering the differential development of these components and by assuming that a minimal level of each is necessary for empathy to mediate prosocial behavior. For example, low or nonsignificant correlations between empathy and altruism have been found for children less than 7 years old. From 7 to 8 years and on, around the time Selman's stage II level of perspective-taking is achieved, significant correlations between empathy and altruism emerge. (Author/SS)

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THE ELEMENTS OF EMPATHY

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Empathy is just one of many variables which influence prosocial behavior. One of the problems with many current investigations of empathy and the role of empathy in prosocial behavior is the tendency to treat empathy as an isolated process. When assessing the influence of empathy on prosocial motivation a view of the entire social system must be maintained. Among the relevant elements in any analysis of a helping situation is the extent to which the potential altruist: is attending to the one in need; is empathic; is able to recognize the appropriate helping behaviors; has the skills and resources necessary to help; is assertive; and is influenced by social pressure or situational constraints. Although this is not a complete list of the relevant variables, it serves to indicate that the capacity for empathy, per se, is just one of several factors operating to influence a response to the needs of others. For example, Stotland (Note 1) reports that nursing students who scored high on his measure of empathy but did not have the skills necessary to help, were most likely to avoid contact with the patients, or, if not allowed to escape, to turn off their effect. In such a case analyzing empathy alone would lead to a misunderstanding. We must also assess other elements of the situation, such as the altruist's coping skills and situational constraints.

In a similar manner empathy itself should be conceptualized as a process with many elements. I have often argued that a good definition of empathy must include both an affective response by the observer and an awareness of the other's perspective (Iannotti, 1974; 1975b; 1977). As such, empathy is not merely an emotional response to another but responding with emotions

similar to another's, based on social perspective-taking processes. In this form, empathy cannot be conceptualized as a unitary process but rather as a process with multiple components which are not additive. The argument as to whether the development of empathy is through structural changes in processes or more mechanistic responses to situational factors continues because the elements of empathy include both process and content variables. Most attempts to measure empathy have involved reducing it to one, easily quantifiable component. Such reductionism may be useful for the purpose of measurement, but awareness of all of the elements must be maintained if we are ever to go beyond the present level of understanding. I am not arguing that the cognitive components are more important than the emotional components, or that we should discontinue the analysis of the separate elements. Instead, I will present evidence that both cognitive and emotional components are essential and that further analysis of these elements may contribute to the understanding of the overall process.

Structure vs. Content

One way to conceptualize these elements is to categorize them as to whether they are likely to develop in a cumulative, mechanistic, experience-dependent manner or to develop in a structural, organismic, process-dependent manner. The former, which might be labeled content components of empathy, are likely to include: the knowledge of social situations and the typical emotional responses to these situations; the ability to recognize or label emotions; and the intensity and appropriateness of one's own emotional response. Structural-developmental processes influencing empathy are: social perspective taking; the anticipation of another's behavior; and the variety of one's

described above. The age of competency for these skills and the age span for development depends on the complexity of the skill and the extent to which changes in process are involved. It is not surprising that we have found and will continue to find such disparate results when the measures of empathy assess different behaviors or different processes.

Minimum Criteria

Yet we must learn more about all of these elements if we are to understand empathy. For example, Coke, Batson, and McDavis (1977) have shown that neither role taking alone nor empathic emotion alone was sufficient to influence helping behavior. They conclude that "cognitive and affective processes do work together in motivating helping. Cognitive perspective-taking affects helping because it increases one's empathic emotional response [p. 31]"

It might be useful to assume that for empathy to mediate prosocial behavior there is a minimum level necessary for each of the components. For perspective-taking skills I would argue that the minimum competency necessary for prosocial behavior is Selman's stage 2 (Selman & Byrne, 1974), i.e., children not only realize that others have a different perspective, but are also able to assume different perspectives themselves.

My own research supports this argument. Measures of social perspective-taking, emotional responsiveness, and altruism were administered to 40 six- to seven- and 40 nine- to ten-year-olds. Social perspective-taking was measured with three of the hypothetical dilemmas described by Selman et al. (1974) and with Flavell's (1968) Nickel-Dime Game. The children's responses to these problems were used to evaluate their level of perspective-taking according to Selman's stages. Emotional responsiveness was measured as the

own emotional response. This division into components is somewhat artificial, since there is insufficient research at this time and these elements are clearly interdependent and interacting. Thus the analysis of any single component may be misleading.

Most measures of empathy tend to emphasize one or two of these elements to the exclusion of others. As would be expected, those measures which assess elements labeled as content components show empathy developing at an early age. Borke's (1971, 1972) measure emphasizes a content component, social comprehension. In it, children are asked to indicate the appropriate emotion for the depicted situation. My own research (Iannotti, 1975a, 1977) and Doug Sawin's (Note 2) have confirmed Borke's findings that such a skill develops before 6 years of age in the average child. The measure developed by Feshbach and Roe (1968) requires both social comprehension and emotional matching. They demonstrated that this measure requires more than social comprehension, and my own research supports their finding that six- and seven-year-old children show a high level of accuracy when the stimulus character is of the same sex as the subject (Iannotti, 1975a, 1977).

Deutsch (1974), Iannotti (1974; 1975a; 1977) and Kurdek and Rodgen (1975) have used empathy stimuli in which the character's affect is inappropriate to the situation. These measures require the differentiation of situational and affective cues and may tap process as well as content components. It would be expected that these process components continue to develop later and Iannotti and Kurdek et al. have reported continued development in these measures until at least nine or ten years of age.

Thus a variety of measures exist which require many of the skills

emotional response of the child to the situation of another when that situation was not consistent with the emotional cues of the other. The measure is described in detail elsewhere (Iannotti, 1975a) but briefly it involves eight short stories describing eight different pictures. The stories describe the situation only. The photographs show a child in these situations, but the child's emotional expression is inappropriate to the particular situation, e.g., a sad child at a birthday party. The subjects' nonverbal responses to the question "How do you feel now?" are used to indicate their emotional responsiveness. Contrary to past uses of the measure, emotional responsiveness was measured as the number of times the subject's emotional response was appropriate to the situational cues. Altruism was measured as the anonymous sharing of candy with a needy child.

It has been shown previously (Iannotti, 1978) that altruism and perspective-taking are positively related. In this analysis, however, it was demonstrated that establishing a minimum level for two components of empathy is a more productive strategy than analyzing the elements individually. Using criteria of stage 2 perspective taking and 63% (5 out of 8) accuracy on the affective measure, those boys who were high in both perspective-taking and emotional responsiveness shared significantly more than those who were high in either perspective-taking or emotional responsiveness. In the initial analysis, 22 boys met the first set of criteria and 30 boys met the second criteria. The amount of sharing was significantly less in the second group, $t(50) = 3.447$, $p < .01$, but so was their average age. The analysis was repeated matching for age. Again the group which was high in either perspective-taking or emotional responsiveness ($\bar{m} = 4.1$) shared significantly less than the group

that met the criteria for both perspective-taking and emotional responsiveness ($\bar{m} = 5.8$) $t(36) = 2.61, p < .05$.

If we accept these minimum criteria it may lead to substantial progress in our research on empathy. The disorderly findings of the past may become clearer once we take a careful look at the elements involved. For example, we might take the Stage 2 perspective-taking criterion and review some of the recent research. Stage 2 perspective-taking is usually achieved by children during the seventh and eighth years (Selman et al., 1974) so we might expect a change in the effect of empathy around this age. Surprisingly, this is in fact what we find. Hoffman (Levin and Hoffman, 1975), Yarrow (Yarrow and Saxler, 1976), Feshbach (Feshbach and Feshbach, 1969), Iannotti (1978), and others (Eisenberg-Berg and Lennon, Note 3; Marcus, Telleen, Roke, and McCarthy, 1978) have found low or non-significant correlations between empathy and altruism, and positive correlations between empathy and aggression, in children less than seven years old. This is contrary to what one would predict from the theoretical explanations of the role of empathy. However, the research with children seven and older, and adults tends to support the theoretical relationships (Feshbach & Feshbach, 1969; Mehrabian and Epstein, 1972). One explanation for these findings has been the lack of valid measures of empathy. However, this is exactly one of the points stressed above. Most of the measures available are somewhat simplistic assessments of a single element of the empathic response. Multiple measures or more complex measures tapping both content and process components, perhaps those using conflicting stimuli, may be necessary in future research. The perspective-taking component may be essential. It is interesting to note that when prosocial behavior has

been "enhanced" in children younger than seven, the children have undergone special training in perspective-taking skills (Tannotti, 1978, Staub, 1971). These may be just isolated examples. It is tempting, however, to go through the research and see exactly what is being labeled empathy, and to what extent minimum levels of the components of empathy may be inferred.

Some caution must be exercised, since it can easily be argued that an affective-cognitive process such as empathy involves more than the summation of its separate components. Given our present techniques for assessment, a division into components is the best we can hope for until more is understood about the process. I have emphasized perspective-taking here; however, all the elements deserve further study. I believe that we will make more progress when we do not conceptualize empathy as a unitary behavior such as emotional matching, but instead analyze it as an integration of experience-dependent and process-dependent components. Further research might be directed towards the analysis of these various components, their development, and the minimum competency required in each for an empathic response. To maintain a view of the process while continuing this analysis of the parts, future research might include the use of more naturalistic measures of empathy supplemented by objective measures of the components.

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