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Empathy

Nancy Eisenberg & Jeffrey Liew

Arizona State University & Texas A&M University

Empathy has been defined in a variety of ways in the psychological literature. Some define it as the ability to cognitively understand others' internal states, including their emotions. However, many developmental and social psychologists now use the term to refer to an affective response that stems from the apprehension or comprehension of another's emotional state or condition, and which is identical or very similar to what the other person is feeling or would be expected to feel. Thus, if a girl feels sadness due to observing another child who is sad, she is empathizing.

In real-life situations, it is likely that empathy often turns into sympathy, personal distress, or both (e.g., alternating). *Sympathy* is an affective response that frequently stems from empathy, but can derive directly from perspective taking or other cognitive processing. It consists of feelings of sorrow or concern for another (rather than feeling the same emotion as the other person is experiencing or expected to experience). *Personal distress* may also stem from exposure to another's state or condition; however, unlike sympathy, it is a self-focused, aversive emotional reaction to the vicarious experiencing of another's emotional state (e.g., discomfort, anxiety). Sympathy is considered a more advanced and more moral response than empathy or personal distress because it is other-oriented.

Empathy-related reactions develop across childhood. The precursors of empathy may be evident on the first few days of life: Young infants cry in more in response to the cries of other infants' than to a tape recording of their own cries. However, at six to 12 months of age, infants

often ignore or simply observe others' emotional reactions such as distress. At 12 to 24 months of age, children sometimes begin to show signs of true empathy. They may seem to be disturbed by another's distress, try to figure out why a person is distressed, and even try to help (e.g., share a toy or touch the other person). Some young infants simply seem distressed by observing another's distress or may exhibit positive emotion or aggression. Over the first two years of life, children seem to respond in increasingly appropriate ways, indicating that they realize that another person's distress is different from their own and they are increasingly likely to try to help a person with whom they empathize.

Martin Hoffman has argued that young children's empathy, and their reactions to experiencing empathy, become less self-focused with age and more likely to reflect sympathy. As children develop a deeper understanding of others' emotions and internal mental states (e.g., thoughts), they are better able to differentiate another's hurt or upset from their own and are more likely to try to alleviate it in appropriate ways. In fact, children's helping appears to increase in the first three years of life, probably in part because of their emerging capacity for sympathy. Although the research is not entirely consistent, it appears that sympathy increase during childhood and likely stabilizes sometime in adolescence.

C. Daniel Batson argued that people who experience empathy-based concern (or sympathy) for others are motivated to help whereas those who experience personal distress reactions are motivated to make themselves, rather than the other person, feel better. When people experience personal distress, they appear to be overly aroused and focus on their own aversive emotional state. There is evidence that preschool children who are prone to experience sympathy are relatively likely to try to help or share with others, whereas those who experience personal distress tend not to help with they can easily escape contact with the needy or distress

person. Children who are oriented to others' needs are more likely to assist another spontaneously and appear to be relatively socially competent. In contrast, those prone to personal distress seem to help primarily when peers request (verbally or nonverbally) help and are frequent targets of requests for assistance. Children who experience very low levels of empathy for others are relatively likely to engage in externalizing problems such as aggression and may be at risk for psychopathic tendencies.

Early sympathetic tendencies appear to predict subsequent sympathy and prosocial behavior. Preschool children who tend to provide relatively costly assistance (e.g., share objects they are using) spontaneously—that is, without being asked—tend to refer to others' needs when resolving hypothetical moral dilemmas. They also are higher in sympathy in late childhood, adolescence, and early adulthood, and more likely to assist other people. Thus, individual differences in prosocial tendencies, including sympathy and perhaps empathy, are somewhat stable across childhood.

Both heredity and socialization likely affect individual differences in children's empathy and sympathy. Identical (monozygotic) twins are more similar to each other in empathy and sympathy than are fraternal (dizygotic) twins. It is likely that genetic differences in children's emotional responsivity and in their ability to modulate and regulate their emotions affect children's capacities for empathy/sympathy. Children who are better regulated are more sympathetic than their peers, probably because they are less likely than less regulated children to become overwhelmed by empathy and, as a consequence, to experience personal distress when exposed to others' negative emotions. Children prone to intense negative emotions, especially anger/frustration, are relatively unlikely to experience sympathy, although those who experience

moderate levels of negative emotion and emotions such as sadness may be prone to sympathy, especially if they are well regulated.

A variety of parental practices have been linked with the development of empathy and, more specifically, sympathy, in children. Sympathetic parents who are warm and supportive, and whose children tend to have secure attachments with them, tend to have relatively empathic and sympathetic children. Moreover, children's levels of sympathy appears to be higher if their parents use inductive discipline—that is, if parents use reasoning during disciplinary encounters (e.g., point out the consequences of children's behavior for others). In contrast, punitive discipline appears to associated with relatively low levels of children's sympathy and helping behavior. Parents who express moderate levels of emotion in the family, and who allow children to express their emotions and help their children to cope constructively with emotions, are more likely to rear prosocial children.

There is evidence that tendencies toward empathy and sympathy, as well as prosocial behavior, vary across the sexes and cultural groups. In terms of sex differences, girls tend to report higher empathy/sympathy and display more in some situations (and help more). However, they are not higher in physiological or some facial indices of empathy/sympathy, suggesting that girls may be more empathic and sympathetic in part due to others' or their own gender-typed expectations.

Sociocultural factors appear to influence how individuals from different groups develop or express empathy, sympathy, or prosocial behaviors. Many, but certainly not all, traditional cultures (e.g., in Asia) emphasize concern to others' feelings and caring for members of the group. Social norms are implicit or explicit rules that groups create and use to guide appropriate and inappropriate values, beliefs, attitudes, and behaviors for group members. Typically,

parents, teachers, and family or community members indirectly or directly teach children about social norms regarding the caring for and helping of others. Such norms include the norm of social responsibility (e.g., one should care for or help others who need help), of giving (e.g., one should want to give or donate to others who are needy), and of distribution or equity (e.g., one should share with others who are needy). In addition to social norms, groups could differ in how they define the individual (“I”) and the collective (“we”) self. For example, traditional Asian and traditional Mexican cultures have typically been considered highly collectivistic because they often define the self through social connections with others. In collectivistic cultures, empathy is likely to be emphasized. Furthermore, different environments or contexts provide different developmental niches, including learning environments or activity settings. For example, children raised in traditional rural and agricultural communities such as the Gikuyu or the Luo of Kenya where children are expected to contribute to familial labor or chores tend to exhibit greater prosocially responsible behaviors than youth from industrialized societies without such expectations. Nonetheless, beyond group differences in sociocultural or contextual demands, it is important to consider differences in how individuals within particular groups differ in the degree or strength to which they internalize or adhere to group values and norms.

Suggested readings:

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