

SJIIs were not the explicit goal for the four white female teacher participants in the study. Nevertheless, they allowed themselves to become vulnerable by surrendering aspects of their own privilege and authority to make decisions that may be uncomfortable but favorable for students. This is evident in the range of personal and professional adaptations necessary to maximize student outcomes (Warren, 2013). The teachers diligently pursued student-centered interactions that affirmed the unique social and cultural perspectives of the black male students who they taught. The conscious effort to both understand students' points of view (perspective taking) and reproducing or recycling deficit perspectives of these young men offers some evidence of empathy's utility for cultivating socially just interpersonal interactions with youth of color.

At the core of these teachers' interactions with students was their commitment to partner with each young man on every aspect of their academic, behavioral, and social/relational interactions. The teachers maintained high behavioral and academic expectations while at the same time differentiating the processes employed by the young men to help them meet those expectations. The women negotiated the boundaries of their professional relationships with the young men by making their voices, experiences, and realities central to the teachers' instructional decision making. Their interactions were messy and imperfect, some days good, some days bad, and always fluid—a work in progress. Trial and error and the teachers' capacity to respond to student feedback were found to be significant for improving the quality of each interaction over time. The key point is that SJIIs must consider the multiple social and cultural perspectives of the persons involved to ensure that all decisions made in such interactions do not advantage one set of cultural norms while at the same time systematically disadvantaging someone else's.

### Conclusion

Empathy is a robust, complex, slippery concept. It is the centerpiece of debate among intellectuals across multiple academic traditions. Still, empathy represents the essence of what it means to be human. Research in social cognitive neuroscience

and developmental psychology confirms that every human has the ability to empathize (Decety & Ickes, 2009). Alternatively, with whom empathy is applied, when, and how it is applied is a different story altogether. The quest for SJIIs represents the pursuit all human beings must engage in to ensure no one person feels devalued, beleaguered, or ostracized. Twenty-first-century endeavors to improve diversity and social justice must incorporate discussions of empathy. The quality of life for those on the margins of our society depends on it.

*Chezare Warren*

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## EMPATHY

### Definition

Empathy is the ability to take another's perspective and share the feelings of that person. A person with empathy can understand the other person's perspective without experiencing the same situation. For example, Peter could have empathy for Sarah when she shares about her pregnancy. Even though Peter does not know what it feels like to be pregnant, he can imagine Sarah's struggles, understand that she must be going through a difficult time, and therefore empathize with her. Low levels of empathy prohibit healthy interactions due to the difficulty of recognizing others' emotions, sharing perspectives, and adapting behavior appropriately to others' needs. High levels of empathy are associated

with increased social interaction and higher levels of maturity, and can lead to more successful relationships and more life satisfaction overall (Vachon, Lynam, & Johnson, 2014).

### *Differences with Similar Terms*

The true notion of empathy lies in the ability to remain in the feelings or perspective of another without needing to agree with the emotion. Sympathy, on the other hand, is when a person acknowledges someone else's situation but doesn't feel the same emotions as that person in the situation. A person with sympathy merely feels sorry for the other individual but doesn't take the time to share that individual's emotions. For example, Peter may be able to understand that pregnancy is difficult, but knowing that pregnancy is difficult would be the extent of his concern for Sarah. With sympathy, he would tell her that he was sorry she was having a difficult time and move on with his own life. With empathy, on the other hand, he would be able to experience her struggle by thinking and feeling it as his own. Sympathy limits the connection between two individuals because the concern only extends to the well-being of the other. Any further emotion, feeling, or thought may be disregarded.

### *Types of Empathy*

There are generally more terms within empathy. *Affective empathy* refers to a person's *emotional* response to another person's emotions. For example, Peter may feel Sarah's anxiety when Sarah tells him that sometimes she doesn't feel fit to be a mother. His affective empathy allows him to mirror what Sarah is feeling without being pregnant himself. *Cognitive empathy* refers to the ability to *think* about someone else's emotions and understand why he or she might be feeling that way. For example, Sarah may share with Peter that she doesn't feel as if her body is made for pregnancy because of all the health issues she's experiencing. Peter may be a physician and know that most women experience Sarah's health struggles during pregnancy, and he would be able to think about and understand how Sarah was feeling.

Although having both types is ideal for maximum empathy, one does not need to possess both

to have empathy; however, experiencing one type of empathy will likely result in the experience of the other, as they tend to coexist. Individuals with more levels of emotion will likely experience affective empathy before cognitive empathy, as they are able to easily identify with another's emotions without understanding why. For example, Sarah may share with Peter that she is terrified of becoming a mother, and Peter may immediately feel her anxiety. Individuals with higher levels of thought processes may identify more with cognitive empathy because they need to understand someone else's emotions before experiencing it on their own. For example, Peter may not be able to understand Sarah's concern of becoming a mother until she explains all of the reasons why she might be anxious about her upcoming role. Regardless of what type of empathy one experiences, affective or cognitive empathy is sufficient to share in another's emotion.

### *Gender Differences in Empathy*

Research has shown that girls are traditionally more inclined to show empathy for others than boys, and they are also more inclined to receive empathy from others than boys (Hastings, Zahn-Waxler, Robinson, Usher, & Bridges, 2000; Olweus & Endresen, 1998). More research has indicated higher levels of empathy in women than men from multiple angles: self-report questionnaires, more activity in emotional areas of the brain when prompted with empathy-related emotional judgment tasks, and an increased measure of relatable emotion with statements such as "it makes me sad to see a lonely stranger in a group" (Ruekcert, Branch, & Doan, 2011). However, further research has shown that women are in fact more empathic and helpful when it comes to personal relationships or friendships (Ruekcert et al., 2011). Although motives are not certain, Eagly and Crowley (1986) found that men are less likely to feel threatened and therefore more likely to help strangers than women.

### *Benefits of Empathy*

Increasing empathy has many benefits. High levels of empathy are associated with positive outcomes such as greater life satisfaction, better relationships, and increased opportunities for social and financial success (Gottman, 1998). High levels of empathy

within families could lead to lower separation and divorce rates, improved parent-child relationships, and overall increased familial satisfaction. Further, higher rates of empathy within couple relationships may lead to lower conflict and increased conflict resolution as each individual would more likely be able to understand the other's perspective (O'Brien, DeLongis, Pomaki, Puterman, & Zwicker, 2009). Each individual would not simply understand the other's perspective, but would go as far as to feel what the other is feeling, resulting in a genuine apology, discussion, or other means of healthy conflict resolution. In a professional context, workers, colleagues, and superiors would be able to communicate more effectively with empathy, resulting in increased work performance among all individuals and better camaraderie between team members and coworkers. Increased empathy would lead to better communication because individuals would be able to imagine someone else's anxiety, curiosity, or need for information and deliver that information in a more appropriate manner. Also, empathy may lead to better communication because workers may be able to understand others' circumstances and adjust expectations accordingly.

Engaging in an empathic conversation may strongly lead to both physical and emotional healing in hurting individuals. For example, the quality of health care is impacted by the quality of the relationship between the physician and patient. A large component of this relationship is empathy, where the physician develops a relationship of trust with the patient, which leads to better care and treatment outcomes (Bayne, Neukrug, Hays, & Britton, 2013). This relationship is not exclusive in a medical context—empathy within relationships between couples, family members, coworkers, friends, and other relationships would all benefit from two individuals showing each other empathy.

### *Recent Needs for More Empathy*

Growing trends in multiculturalism require individuals to be culturally sensitive to individuals in other races, ethnicities, and backgrounds. More educational institutions, workplaces, organizations, and social arenas are becoming increasingly diverse than before, resulting in a hodgepodge of upbringings, experiences, and perspectives among individuals

(Brouwer & Boros, 2010). Therefore, cross-cultural empathy is necessary for people to coexist in a harmonious manner. Ethnocultural empathy refers to the ability to take the perspective of another whose racial/ethnic background is different than one's own (Mallinckrodt et al., 2014). Ethnocultural empathy allows individuals to work together and thrive within multicultural contexts. Although all individuals are not from the same background, they are able to successfully communicate, share, and even experience thoughts and feelings despite their differences. As factors like technology increase globalization and internalization in all fields, ethnocultural empathy is essential in allowing diverse individuals to vicariously understand one another for productive relationships, work experiences, and task completion.

### *Recent Research Syntheses Related to Empathy*

**EMPATHY AND AGGRESSION** An extensive quantitative review (i.e., meta-analysis) study (Vachon, Lynam, & Johnson, 2014) found that empathy has a weak relationship with aggression in general ( $r = 0.11$ ) and also weak relationships with verbal aggression, physical aggression, and sexual aggression. Vachon, Lynam, and Johnson (2014) explained that the true relationship between empathy and aggression is diminished by measurement problems and by a narrow conceptualization of affective empathy that fails to capture the full range of the construct. For example, those who enjoy seeing others in pain are afflicted with more than a mere lack of empathy, and this dissonant emotion, pleasure at another's pain, is not included in the current measures of empathy. Based on a long history of clinical observation and data from multiple levels of analysis, empathy is deficient in aggressive behavior. Thus, Vachon et al. (2014) suggested that broadening the affective empathy construct beyond resonant responses to include callous and dissonant responses will unify basic research on empathy with clinical research on callousness, which will reveal a stronger relationship between empathy and aggression.

**EMPATHY AND VIOLENT VIDEO GAMES** Exposures to violent video games are related to more aggression, less empathy, and less prosocial behavior among children and adults. A meta-analysis

study found that exposure to violent video games is positively associated with aggressive behavior, aggressive cognition, and aggressive affect (Anderson et al., 2010). Exposure to violent video games was negatively associated with empathy and prosocial behavior. Further, exposure to violent video games was a *causal* risk factor for increased aggressive behavior, aggressive cognition, and aggressive affect as well as decreased empathy and prosocial behavior. There was no difference in susceptibility to aggression across Eastern and Western cultures or across gender, indicating that people in general were susceptible to the harmful effects of violent video games (Anderson et al., 2010). Recent longitudinal studies also confirmed long-term harmful outcomes of playing violent video games. Exposure to violent video games had more long-term effects on aggressive cognition and aggressive behavior than aggressive affect, indicating longer-lasting aggressive knowledge and behavior than aggressive emotions (Anderson et al., 2010).

Public policy debate is necessary regarding how to best deal with the risk factors of playing violent video games. Some of these techniques include: public education about the risks of playing violent video games; how parents, schools, and society at large can deal with the risks; and suggestions on healthy amounts of video game usage or alternatives to playing violent video games (Anderson et al., 2010).

Greitemeyer and Osswald (2009), however, found that playing *prosocial* video games *decreased* aggressive cognition, such as hostile expectations of others; aggressive responses in behavior, thoughts, and feelings; and hasty access to antisocial thoughts. These findings indicated that, although video games may not be positive or negative, the content of the video games was relevant (Greitemeyer & Osswald, 2009).

**EMPATHY AND ONLINE CHILD PORNOGRAPHY OFFENDERS** Online child pornography offenders and offline sexual offenders against children differ in levels of empathy. A meta-analysis study (Babchishin, Hanson, & VanZuylen, 2014) found that that offenders who restricted their offending behavior to online child pornography offenses showed greater victim empathy and lower antisociality than offline sexual offenders or mixed offenders (with both

contact and noncontact offenses). Compared to online child pornography offenders, offline sexual offenders tended to have more access to children and less access to the Internet, indicating that motivated offenders took advantage of the opportunities available to them (Babchishin et al., 2014). Compared to offline sexual offenders and mixed sexual offenders, online offenders (a) identified more with homosexual or bisexual orientations; (b) had more lifestyle and psychological barriers that prevented them from acting directly on their interests, such as lower victim access, fewer cognitive distortions, lower antisociality, and greater victim empathy; (c) had more identified sexual interest only in children; and (d) showed lower rates of contact sexual offenses, even according to their confidential self-report (Babchishin et al., 2014).

Mixed offenders showed similar Internet access tendencies as online child pornography offenders and access to children in between the online-only offender group and offline-only offender group. Among the three offender groups, mixed offenders were a particularly high-risk group in terms of sexual deviancy as they (a) were the most pedophilic (i.e., greatest sexual interest in children); (b) had greater access to children than the online sexual offender group; and (c) had the fewest psychological barriers to acting on their deviant impulses, such as antisocial behaviors (Babchishin et al., 2014).

**EMPATHY AND FORGIVENESS** Empathy is a major factor in the forgiveness process and has the largest impact on forgiveness. Empathy has a stronger relationship with forgiveness (i.e., a prosocial change toward the transgressor) than any other non-social-cognitive antecedent except for trait agreeableness (Riek & Mania, 2012). All outcomes are significantly related to forgiveness, demonstrating that choosing not to forgive may lead to a number of negative results. With the exception of agreeableness, state empathy was more strongly correlated with forgiveness than all assessed non-social-cognitive antecedents (Riek & Mania, 2012).

The relationships for forgiveness with religiosity, attributions, and negative emotions are stronger when a hypothetical, rather than actual, incident of forgiveness is used. This scenario indicates that religion increases the tendency to say individuals would hypothetically forgive rather than actually

forgive, and that forgiving in real-life situations may be more difficult when confronted with a real offense. Stronger correlations are generally found when hypothetical, rather than real offenses, are used to study forgiveness (Riek & Mania, 2012).

Conceptualizations and requirements of forgiveness change throughout development. Age is a moderator of some personality-level effects, suggesting that one's personality may have a larger impact on the forgiveness process as a person develops. Also, the impact of forgiveness on depression (i.e., forgiving people are generally less depressed) seems weaker in older adults. It is unclear why this would happen, although perhaps as a person ages, there are other factors introduced (e.g., family and workplace issues) that may impact depression more strongly than forgiveness-related issues (Riek & Mania, 2012).

**PSYCHOTHERAPY WITH EMPATHY** Higher empathy in therapists is associated with better psychotherapy outcomes. A meta-analysis study found that therapists' empathy is strongly related to a positive psychotherapy outcome (Elliott, Bohart, Watson, & Greenberg, 2011). This relationship is stronger for less experienced therapists, indicating that empathy may not be effective unless the client perceives it is grounded in authentic and genuine care for the client. Clients' perceptions of therapists' empathy is more strongly associated with positive therapy outcomes than therapists' perceptions of empathy (Elliott et al., 2011). Empathy is more associated with positive outcomes (a) in group therapy rather than in individual therapy; (b) with more severely distressed clients rather than with less distressed clients; and (c) in outpatient settings rather than in inpatient settings (Elliott et al., 2011).

**MULTICULTURAL EMPATHY AND TRAINING** Multicultural empathy can be increased with intervention programs. A meta-analysis study found that standardized intervention programs designed to prevent and reduce prejudice or improve positive intergroup attitudes in children and adolescents were effective, indicating that improved intergroup attitudes led to less discrimination or prevented violent behavior toward out-group members (Beelmann & Heinemann, 2014). The positive effects were not only sustained but also sometimes even higher than short-term changes. Interventions

based on direct contact experiences along with social-cognitive training programs designed to promote empathy and perspective taking were the most effective, above other interventions involving vicarious, extended, or indirect contact. Successful outcomes of empathy training interventions depended on whether the programs succeeded in initiating personal relationships and friendships between members of different ethnic groups. The importance of personal friendships made programs surrounding indirect contact impossible or very difficult. Promoting moral development was also effective for prejudice and intergroup attitude development. Interactive, structured, well-planned, and well-implemented programs were the most effective (Beelmann & Heinemann, 2014).

Almost all emotional indicators tapped positive aspects of intergroup attitudes (e.g., liking and sympathy and not disliking, anger, fear, or intergroup threat), which was not sensitive to intended changes. This outcome was because contact-based interventions promoted intergroup attitudes by changing negative emotions such as fear or intergroup threat, indicating that negative emotions played an important role in the development of serious prejudice and discrimination (Beelmann & Heinemann, 2014).

When the target out-group consisted of persons who were handicapped, empathy training programs were more effective when the target out-group consisted of ethnic groups, indicating that attitudes toward individuals who were disabled were easier to improve than ethnic out-groups. Interventions for minority groups who identified with the in-group were not effective when the interventions addressed majority group issues (e.g., prejudice against majority children). Further, these interventions were far less effective than interventions for majority groups that addressed minority group issues (e.g., prejudice against minority children). Despite the assumption that implementing interventions earlier was more effective (e.g., prevention is more effective in younger age groups), there were no differences in effectiveness of programs according to the age group treated (Beelmann & Heinemann, 2014).

**DECREASE IN EMPATHY AMONG COLLEGE STUDENTS** Empathy has been declining among college students

in the United States. A meta-analysis study found that *empathic concern* (i.e., others-oriented feelings of sympathy for the misfortunes of others; emotional aspect of empathy) is decreasing the most, followed by *perspective taking* (i.e., tendencies to imagine other people's points of view; cognitive aspect of empathy) among college students in the United States between 1979 and 2009 (Konrath, O'Brien, & Hsing, 2011). However, *fantasy* (i.e., tendencies to identify imaginatively with fictional characters in books or movies) and *personal distress* (i.e., self-oriented feelings of distress during others' misfortunes) showed no changes over time. The declines in empathic concern and perspective taking are more recent phenomena, occurring mostly after 2000. Today's college students tend to agree less with statements such as "I often have tender, concerned feelings for people less fortunate than me" and "I sometimes try to understand my friends better by imagining how things look from their perspective," compared to college students in the late 1970s and early 1980s in America (Konrath et al., 2011).

On the contrary, narcissism has been increasing among college students in America over a similar time period. Narcissism is negatively associated with empathy. Although empathy has been decreasing at a higher rate than the rate at which narcissism is increasing, the data indicates that today's college students, or young adults in general, are more self-concerned, competitive, confident, and individualistic than before (Twenge & Foster, 2008). One factor for this outcome may be the consistent advancement of technology, which may lead young people to care more about themselves than others or interacting face-to-face with others. For example, a 2006 survey found that 64 percent of young American adults between the ages of eighteen and twenty-five believed getting *rich* was the most important goal in life, and another 17 percent chose it as the second most important goal; moreover, only 30 percent chose helping others as their ultimate goal (Pew Research Center, 2007), indicating that today's young adults are far more self-centered in comparison with thinking of others.

### *Increasing Empathy*

Depending on personality, way of thinking, and upbringing, the average individual may or may not

have a natural inclination to empathy. However, anyone can increase empathy by engaging in the following techniques:

1. *Active listening.* Individuals may increase empathy by tracking their conversational partner's words through paraphrasing, reflecting emotion and meaning, and summarizing. These techniques entail repeating back to the other person what they just heard without echoing the words verbatim. Individuals should use their own words and express their understanding of the other's previous statement. Examples for all three techniques will be derived from the following scenario.

*Peter and Sarah are friends. They meet at a coffee shop to catch up after a long week.*

*Sarah: My day was horrible. I walked in four minutes late because there was an accident on the freeway so my bus was running behind. I am never late to work, but my boss yelled at me the moment I walked in for always being late. It's so unfair! I am a good worker and my boss usually loves me. I don't even know why she was so upset today. Maybe she was in a bad mood. Then, I had the longest day at work because I argued with my team and then spilled food all over myself during lunch. Not only that, I am feeling really inadequate on this new project because it's really out of my comfort zone. I don't know if I can do a good job with it.*

Paraphrasing includes repeating back what one just heard without using the other person's exact words. For this example, Peter might paraphrase back to Sarah by saying, "You had a hard day at work because your boss was angry even though you're usually on time." Reflecting emotion and meaning includes adding an emotion or meaning word that the other person might be experiencing through the situation. For example, Peter might tell Sarah, "You felt really misunderstood when your boss said you were late" or "You felt like it was really unfair for him to say that you were always late." Lastly, summarizing includes synthesizing all, or a large part, of the conversation and reporting the general understanding of what was just said. For example, Peter might summarize the above scenario by saying, "So today you got yelled at, fought with co-workers, ruined

your lunch, and you're not too comfortable with this new project. What a rough day!" Each technique includes an accurate portrayal of the other person's words. Therefore, active listening includes intently following the other person's narrative and leaving room for correction of one's own interpretation.

2. *Remaining nonjudgmental.* One of the biggest barriers to empathy is when one imposes his or her judgments on another's situation or feelings. Engaging in empathy includes seeing the view of another, meaning, figuratively placing oneself in the other's situation and attempting to encapsulate everything that person is experiencing: circumstance; emotions; future implications of the situation; impact on relationships; disruption of dreams, goals, and values; and more. Whether one can agree or relate with the individual is irrelevant. One way to remain nonjudgmental is to practice components of motivational interviewing, a counseling technique used to facilitate *change talk* without being judgmental or aggressively directive (Miller & Rose, 2009). Rather than correcting behavior or imposing one's own suggestions onto the other, the individual wishing to practice empathy should allow the other person to process his or her own thoughts pertaining to the situation by merely asking guiding questions and affirming thoughts and feelings along the way. Through this nonjudgmental dialogue, the conversationalist is able to listen to the other person without imposing his or her values and thus create a warm environment for the other person to decide how to proceed with the presented issue.
3. *Increased conflict resolution.* Individuals in any relationship can exhibit empathy by engaging in healthy conflict resolution. When a conflict erupts, both sides can benefit from wondering about the other's perspective before initiating a premature, rash conversation. In these circumstances, taking at least one hour to reduce primary emotions can be beneficial. Empathy is more likely to be achieved through a clearer perspective without intense emotions. Therefore, empathy can be increased by forcing oneself to calm intense, negative emotions before dialoguing with the other party in order to allow

for the ability to think more rationally. Once a calmer state is achieved, considering the other's reasoning, perspective, and purpose for his or her behavior may increase empathy and result in better conflict resolution.

### *Implications*

Current individuals spend so much time interacting with technology rather than human beings or with others through a screen rather than in real life. As a result, interpersonal dynamics such as empathy may continue to decrease dramatically in the next several years or decades (Twenge & Foster, 2008). Further, the convenience of technology may lead them to become more easily bored or frustrated when interacting with others, which may result in less empathic interactions. They may not have enough time to reach out to others and show empathy in a fast-paced world with highly accessible technology. Constant exposure to media and technology may desensitize people to the pain of others if people are continuously flooded by reports of crime, violence, and others that may also decrease empathy (Twenge & Foster, 2008).

Empathy began as a basic, animalistic need for social beings to interact with one another by adapting to, and relating with, the emotional expressions of others, resulting in an ability to coexist in a relatively harmonious manner (Vachon et al., 2014). Increased empathy could lead to many positive outcomes, including but not limited to prosocial behavior, increased life satisfaction, better work outcomes, improved relationships, and more altruistic behavior overall. In order to increase empathy everywhere, empathy training can be implemented in fundamental social learning contexts, such as schools, in order to prevent negative social behaviors such as bullying (Frey, Hirschstein, Edstrom, & Snell, 2009).

Continued research studying the effect of empathy on common interactions (e.g., marital relationships) is being conducted because of the positive factors associated with empathy. Empathy is being studied in a variety of contexts: couple relationships, parent-child relationships, in athletics, with learning disorders, in multicultural contexts, gender differences, and more (Conway, 2014; Mallinckrodt et al., 2014; Miller, Johnston, & Pasalich, 2014;

O'Brien et al., 2009; Ruekcert, Branch, & Doan, 2011; Sevdalis & Raab, 2013). Although empathy may be decreasing, and factors such as technology are reducing empathic tendencies, consistent research, programs, and implementation may continue to promote empathic behavior and continue developing more empathy in society.

*Kyung-Hee Kim, PhD*

*Sharon Kim, MS*

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## EMPOWERMENT

### Definition of Empowerment

The word *empower* arose in the mid-seventeenth century with the legalistic meaning “to invest with authority, authorize.” Shortly thereafter, it began to be used in a more general way, meaning “to enable or permit.” Following from this conception, World Bank (n.d.) defines empowerment as the process of increasing the assets and capabilities of individuals or groups to make purposeful choices and to transform them into desired actions and outcomes. Scholars such as Frensdall and Robbins (1995) define empowerment as the ability to enact, equip, or enable positive personal and professional change. Other scholars define empowerment as “a progression that helps people gain control over their own lives and increases the capacity of people to act on issues that they themselves define as important” (Luttrell, Quiroz, Scrutton, & Bird, 2009, p. 16). The Merriam-Webster Dictionary defines empowerment in both legal and general ways: 1) “to give official authority or legal power to,” and 2) “to promote the self-actualization or influence of.” Today, the word *empowerment* has itself been extended by its use in politics and psychology. Although definitions differ, they all address one or more of five common degrees of empowerment:

1. *Safety*. Safety is a prerequisite of empowerment. It means that individuals or groups feel secure in displaying their true identity and are provided with the necessary food, shelter, property, income, medical care, and companionship. When these basic needs are instead a constant concern (e.g., worrying about receiving tenure), people will feel afraid to express their true selves and thus be unable to fully realize their potentials (Boyanton, in press). This aspect of empowerment is similar to Longwe’s (1991) definition of “welfare degree” empowerment.
2. *Belief*. Belief means that individuals or groups believe that they have the necessary capabilities—including potential, talent, ability, skill, or intelligence—to make a contribution to themselves, others, or society. This belief is a result of the individual’s own perception (Holden, Barker, Meenaghan, & Rosenberg, 1999). This perception can be influenced by 1) their own self-efficacy (Klecker & Loadman, 1996); 2) the work environment (Short, 1994); 3) professional or personal efficacy (Frans, 1993); and 4) interpersonal strengths or strategies (Frans, 1993).
3. *Resources/opportunities*. This criterion means that individuals or groups are provided with the necessary resources or assistance to exercise their talents and potentials. Examples of resources/opportunities include access to education, training, technology, funding, status, language programs, books, teachers, knowledge, and skills (Huff & Johnson, 1998). This degree of empowerment is similar to the “access degree” empowerment by Longwe (1991) as well as the concept of “economic empowerment” (Luttrell, Quiroz, Scrutton, & Bird, 2009).
4. *Autonomy/participation*. Autonomy/participation means that individuals or groups are given substantial freedom and control during participation in deciding how to use resources and equipment. Such decisions are based on their own needs, interests, preferences, and goals (Klecker & Loadman, 1996). This internal locus of control is believed to be essential to empowerment (Koeske & Kirk, 1995). In fact, Page and Czuba (1999) defined empowerment as the process of gaining control over one’s life. This degree of empowerment is

similar to the “control degree” empowerment as defined by Longwe (1991), as well as the concept of “human and social empowerment” by Page and Czuba (1999).

5. *Outcome.* Outcome means that individuals or groups feel that their participation brings positive change to someone’s life, which, as a result, gives them a sense of self-worth or self-actualization (Maslow, 1987). Positive outcome occurs when one feels that their participation matters either to self or to others.

Since few people are privileged enough to fulfill all of these conditions, the above five empowerment degrees have to be understood through the lens of “power.” Our society is often divided into two groups: the empowered group and the disempowered. Empowerment is used specifically to address the disempowered group, such as helping them gain more control over their lives by obtaining food, shelter, recognition, resources, or autonomy from the empowered group. Depending on the types of power, the empowered and disempowered groups can be categorized into different subgroups, as shown in Table E.1.

### *History of Empowerment*

Empowerment has existed since humans invented the first tool to improve their living conditions. Although empowerment itself developed as early as the beginning of human civilization, the term *empowerment* did not develop its contemporary meanings until the 1900s when people became more aware of and resistant to the broken communal systems that unequally distributed power and supplies. The empowerment movement began as a means of addressing these inequalities and helping the disempowered.

Early empowerment movements in the United States mostly focused on the racial inequalities between Caucasians and African Americans. The abolition movement, one of the better known, dates back to at least the eighteenth century. One of the earliest successes for empowerment movements can be traced back to 1863, when President Abraham Lincoln executed the Emancipation Proclamation and freed the slaves. However, African Americans struggled for nearly another century to gain empowerment alongside freedom—a struggle that materialized finally in the civil rights

**Table E.1 Groups of the Empowered and Disempowered**

<i>Types of Power</i>	<i>The Empowered</i>	<i>The Disempowered</i>	<i>Examples of Redress</i>
Race	White	Colored	Civil rights movement, affirmative action, ethnic minority empowerment (Devore & Schlesinger, 1999); African American empowerment (Calhoun-Brown, 1998)
Gender	Man	Woman	Feminist movement, girl empowerment (Hyde et al., 1990; O’Brien & Crandall, 2003)
Sexual Orientation	Heterosexual	Homosexual	LGBT empowerment (D’Augelli, 1991)
SES	Upper class	Lower class	Empowerment of poor and homeless (Martin & Nayowith, 1988; Parsons, 1988); Economic empowerment (Luttrell, Quiroz, Scrutton, & Bird, 2009)
Language	Native/standard English speaker	Second-language speakers, Nonstandard English speaker	ESL programs; Minority language; Black English normalization
Age	Middle-aged	Elderly Youth Children	Youth empowerment (Wolin & Wolin, 1993); Elderly people empowerment (Parsons & Cox, 1994; Perlmutter & Hall, 1985)
Status/Structure	Officials Officers Jury judge	Lay people	Paulo Freire (1970), <i>Pedagogy of the Oppressed</i> ; Social structure and empowerment (Bartle, Couchonnal, Canda, & Staker, 2002; Carson, Carson, Roe, Birkenmeier, & Phillips, 1999)
Professional Role	Employer	Employee Consumer	Employee empowerment, patient empowerment (Kruger, 2000); Medical professional empowerment (Fisher, 1994); Consumer empowerment (Frese & Davis, 1997)
Household Role	Husband	Wife	Family empowerment (Wolin & Wolin, 1993)
Education	Intellectual	Illiterate	No Child Left Behind (2003)

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