

Highly inaccurate perceivers tend to have poorer-quality relationships and more personal adjustment problems than highly accurate perceivers.

On the other hand, there is no consistent support for the following apparently fictional beliefs:

There are empathic superstars who can read other people's minds with perfect accuracy.

Women, in general, have greater empathic ability than men.

Longer-married couples are more accurate in reading each other than are newlywed couples.

Telepathy (ESP or psi) is the basis of our everyday mind reading ability.

### Practical Applications

The research on empathic accuracy promises to have many practical applications, including the following:

The screening and selection of potential counselors and therapists, physicians and caregivers, diplomats and negotiators, police and social workers, teachers, and salespersons

Empathy training for people in all of these professions that can be tailored to the specific target group(s) they serve

Empathy training for people with significant empathic deficits, such as abusive men and at-risk children and adolescents

Mutual empathy training for those in various types of distressed relationships.

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*See also* Empathy; Inference

### Further Readings

Ickes, W. (2003). *Everyday mind reading: Understanding what other people think and feel*. Amherst, NY: Prometheus Books.

of another person's current experience. Use of the word in English is relatively new, appearing at the beginning of the 20th century, often in discussions of art. Its origins are traced to the German word *Einfühlung*, which translates literally as "feeling into" (as in projecting oneself into something else). Besides generating research within the field of social psychology, the study of empathy has also figured prominently in client-centered psychotherapy.

Much has been made of the distinction between *empathy* and *sympathy*, but the two terms are often used interchangeably. When a distinction is made (particularly in philosophical contexts), empathy is often defined as understanding another person's experience by imagining oneself in that other person's situation: One understands the other person's experience as if it were being experienced by the self, but without the self actually experiencing it. A distinction is maintained between self and other. Sympathy, in contrast, involves the experience of being moved by, or responding in tune with, another person. Another common distinction is to use sympathy when referring specifically to the emotional side of empathy.

### Emotional and Cognitive Empathy

Within social psychology, empathy may refer to an emotional or cognitive response—or both. On the emotional side, there are three commonly studied components of empathy. The first is feeling the same emotion as another person (sometimes attributed to emotional contagion, e.g., unconsciously "catching" someone else's tears and feeling sad oneself). The second component, personal distress, refers to one's own feelings of distress in response to perceiving another's plight. This distress may or may not mirror the emotion that the other person is actually feeling. For example, one may feel distress, but not specifically depression, when another person says he or she is so depressed he or she wants to kill himself; similarly, one feels distress, but not actual pain, when one sees someone fall. The third emotional component, feeling compassion for another person, is the one most frequently associated with the study of empathy in psychology. It is often called *empathic concern* and sometimes *sympathy*. Empathic concern is thought to emerge later developmentally and to require more self-control than either emotional contagion or personal distress, although these earlier components (along with the ability to imitate) probably lay the groundwork for later, more sophisticated forms of empathy.

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## EMPATHY

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### Definition

Empathy has many different definitions, some with multiple parts. However, most definitions share the idea of one person's response to his or her perceptions

Empathic concern merits special attention for its role in triggering prosocial and helping behaviors. Research consistently finds a positive correlation between how much empathic concern individuals report feeling for another person (or group of people) and their willingness to help those people, even when helping requires some sacrifice (e.g., time, effort, or money). Many of the most noble examples of human behavior, including aiding strangers and stigmatized people, are thought to have empathic roots (although humans are not the only species that helps others in distress). Research on empathic helping has prompted an animated (and perhaps never-to-be-resolved) debate about whether empathic helping is truly altruistic (motivated by an ultimate goal to benefit the other person) or whether it is motivated by selfish rewards, such as reducing one's own distress caused by seeing another person's situation, saving one's kin (and thus some portion of one's genes), or securing public respect or the promise of reciprocal help in the future. Attempts to decide whether the helping behavior is selfless or selfish are complicated by the fact that self-interest and benefits to the other person may overlap.

The other side of empathy, the cognitive side, centers on the ancient philosophical "other minds problem": Our thoughts are ours alone, and we can never directly access the contents of another person's mind. Cognitive empathy refers to the extent to which we perceive or have evidence that we have successfully guessed someone else's thoughts and feelings. The spectrum of cognitive empathy includes very simple tasks such as visual perspective taking (e.g., standing in one's living room and imagining what a person outside can see through the window) and extends up to very complex mental challenges, such as imagining another person's guess about what a third person believes (e.g., "I think Fiona still believes that Seth doesn't know about what happened in Taiwan"). Whereas greater emotional empathy is associated with more intense emotions, greater cognitive empathy (often called *empathic accuracy*) entails having more complete and accurate knowledge about the contents of another person's mind, including how that person feels. Thus, cognitive empathy still requires sensitivity and knowledge about emotions. However, cognitive empathy generally does not include any reference to caring about the other person, thus allowing for the possibility of a kind of Machiavellian cognitive empathy that can be used to harm others (e.g., "know thy enemy"). This concept runs counter to most, if not all, conversational uses of the term *empathy*.

Cognitive empathy is intimately linked to the development of a theory of mind, that is, understanding that someone else's thoughts may differ from one's own. In a typically developing child, a coherent theory of mind emerges between ages 3 and 5 (although rudiments of this skill, such as following another person's gaze to understand what she is looking at, appear earlier). Theory of mind deficits is one major symptom of autism, a psychological disorder that usually appears early in life (other psychological disorders or brain injuries can also produce empathy deficits).

Exactly how people accomplish cognitive empathy has produced some debate. The simulation view postulates that people imagine themselves in the other person's place, a view that meshes nicely with false consensus effects and other egocentric phenomena studied in social psychology. The theory view argues that people develop theories about human thought and behavior that they then use to predict and explain other people's actions, explaining humans' ability to tailor their perspective taking to a particular other person. Successful perspective taking probably frequently requires drawing on both strategies.

## Measuring Empathy

A variety of methods have been developed to measure empathy and its various components. Many are self-report measures (i.e., people subjectively rate the extent to which they think they have traits or feelings related to empathy), but researchers have also created innovative and more objective measures, particularly for measuring empathic accuracy and counselors' empathy toward clients in therapy. Physiological measures (e.g., skin conductance, heart rate) and the coding of facial expressions are often used to assess emotional empathy. Most recently, researchers have used brain-imaging techniques to explore the brain areas and pathways that are activated when one is emotionally responding to another person's experience or trying to cognitively represent what that person is experiencing. These techniques have led to hypotheses about mirror neurons. These brain cells (initially found in monkeys) respond the same way when an action is performed by the self and when similar actions are observed being performed by another person (thus, possibly suggesting a neural basis for empathy's most primitive mechanisms).

Outcomes in empathy studies vary depending on which components of empathy are being assessed (e.g., factors that increase empathic concern may not also

affect empathic accuracy). The study of sex differences in empathy provides an example of the complexities of empathy: A prevalent gender stereotype exists that women are more empathic than men. Results consistent with this stereotype have been found when collecting self-report measures of empathic concern, but the pattern is less clear when using more objective measures, and sex differences generally are not found with measures of empathic accuracy except under certain conditions. Furthermore, although evidence has been found for stable empathic traits in people, empathy is perhaps better conceptualized as something that emerges from a complex interaction between (a) characteristics of the target of empathy and that target's situation and (b) the traits, experiences, and motivation of the empathizer, all embedded in a larger cultural context. Subjective perceptions of all of these variables, such as the perceived similarity between the empathizer and the target of empathy, are at least as important as objective reality in determining the experience of empathy.

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*See also* Altruism; Empathic Accuracy; False Consensus Effect; Projection; Theory of Mind

### Further Readings

- Batson, C. D., Ahmad, N., & Stocks, E. L. (2004). Benefits and liabilities of empathy-induced altruism. In A. G. Miller (Ed.), *The social psychology of good and evil* (pp. 359–385). New York: Guilford Press.
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## EMPATHY–ALTRUISM HYPOTHESIS

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### Definition

The empathy–altruism hypothesis states that feelings of empathy for another person produce an altruistic motivation to increase that person's welfare. In the

empathy–altruism hypothesis, the term *empathy* refers to feelings of compassion, sympathy, tenderness, and the like. Altruism refers to a motivational state in which the goal is to increase another person's welfare as an end in itself. (Altruistic acts are what are ordinarily called “good deeds.”) Note that this definition of *altruism* is different from the typical usage of the term, which is usually defined to mean an act of helping that involves considerable personal costs to the helper. Overall, the empathy–altruism hypothesis has generated a large body of research that answers important questions about why people help and fail to help, and offers insights into the roles played by different types of motives underlying human social behavior.

### Background and Importance

The empathy–altruism hypothesis arose out of a long-standing debate in Western philosophy and psychology about whether humans possess the capacity for altruism. For centuries, it was assumed that all human behavior, including the helping of others, is egoistically motivated. The term *egoism* refers to a motivational state in which the goal is to increase one's own welfare as an end in itself. Although there is little doubt that egoism can be a powerful motivator of helping behavior, some researchers have questioned whether all human behavior is motivated by self-interest. Specifically, some have suggested that people may help because they feel empathy for another person's welfare, which may lead to altruism. Those who have argued that empathy may be a source of altruism include naturalist Charles Darwin, philosophers David Hume and Adam Smith, as well as psychologists Herbert Spencer, William McDougall, Martin Hoffman, and Dennis Krebs. Social psychologist C. Daniel Batson formulated the empathy–altruism hypothesis as a revision and extension of the ideas developed by these philosophers and psychologists.

### Evidence and Alternative Explanations

The empathy–altruism hypothesis predicts that those feeling high levels of empathy for a person in need will be more likely to help than will those feeling less empathy. This prediction is well supported by research. However, a number of egoistic alternative explanations have been proposed to explain these findings. For example, those feeling high levels of empathy may feel more distress and, consequently, may be more likely to help because they are egoistically motivated