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# Empathy and Moral Development

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IMPLICATIONS FOR CARING  
AND JUSTICE

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## CHAPTER 2

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# Empathy, Its Arousal, and Prosocial Functioning

People are innocent bystanders when they witness someone in pain, danger, or any other form of distress. The distress can involve physical pain or discomfort due to injury or disease, emotional pain over the loss or expected loss of a loved one, fear of being attacked, anxiety over failure or financial impoverishment, and the like. The moral issue in these situations is whether the bystander is motivated to help and if he is, the extent to which the motivation is self-serving or based on true concern for the victim. The bystander model is the prototypic moral encounter for empathic distress and related empathic affects. It is also the context for my theory of empathy development. In this chapter I give my definition of empathy, provide evidence that it functions as a prosocial motive, and then describe the mechanism by which it is aroused. In chapters 3 and 4, I present the theory of empathy development and discuss four empathy-based feelings that also function as prosocial motives: sympathetic distress, empathy-based anger, empathy-based feeling of injustice, and guilt over inaction. In subsequent chapters I deal with other types of moral encounters.

### DEFINITION OF EMPATHY

\* Empathy has been defined by psychologists in two ways: (a) empathy is the cognitive awareness of another person's internal states, that is, his thoughts, feelings, perceptions, and intentions (see Ickes, 1997, for recent research); (b) empathy is the vicarious affective response to another person. This book deals with the second type:

### *Innocent Bystander*

affective empathy. Affective empathy seems like a simple concept – one feels what the other feels – and many writers define it in simple outcome terms: One empathizes to the extent that one's feeling matches the other's feeling. The more I study empathy, however, the more complex it becomes. Consequently, I have found it far 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. The empathy-arousing processes often produce the same feeling in observer and victim but not necessarily, as when one feels empathic anger on seeing someone attacked even when the victim feels sad or disappointed rather than angry.

*defined*

× This is not to deny the importance of accurate cognitive assessment of another's feelings, what Ickes (1997) calls empathic accuracy. Indeed, a certain amount of empathic accuracy is built into my theory, although, unlike Ickes, I see empathic accuracy as including awareness of the model's relevant past and probable future – the model's life condition – an awareness that contributes importantly to an observer's empathic affect. For this and other reasons, dropping the requirement of an affect match between observer and model affords empathy far more scope and has other advantages, as we shall see.

My focus is empathic distress because prosocial moral action usually involves helping someone in discomfort, pain, danger, or some other type of distress.

### **EMPATHIC DISTRESS AS A PROSOCIAL MOTIVE**

Before reviewing the evidence that empathic distress is a prosocial motive, it is necessary to state what kind of evidence is needed. First, empathic distress must correlate positively with people's helping behavior. Second, empathic distress must not only correlate with but must also precede and contribute to the helping behavior. And third, like other motives, empathic distress should diminish in intensity

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## SOCIAL MOTIVE

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## Empathic Arousal and Prosocial Functioning

and one should feel better when one helps, but it should continue at a high level when one does not help. The evidence, which I now present, is supportive on all three counts.

a. *Empathic distress is associated with helping.* There are countless studies showing that when people witness others in distress, they typically respond empathically or with an overt helpful act, whichever is being investigated, and when data are available on both responses, subjects typically show them both. This research was reviewed by Hoffman (1981) and Eisenberg and Miller (1987). To update these reviews, fill in the gaps, and give you a feeling for the research, here are examples. Berndt (1979) found that a group of empathic sixth graders who discussed a sad incident in another person's life donated more time to making pictures for hospitalized children than did empathic children who discussed a sad event in their own lives. Davis (1983) found that college students who obtained high empathy scores on a paper-and-pencil measure donated more money to the Jerry Lewis Muscular Dystrophy Telethon than did their less empathic classmates. Empathic college students were more likely to volunteer and put in more hours of work at shelters for homeless families (Penner, Fritzsche, Craiger, & Freifeld, 1995). In a study by Otten, Penner, and Altabe (1991), psychotherapists who scored high on empathy measures were more likely to help college students with a work assignment (writing an article on psychotherapy) than psychotherapists who scored low.

In an experimental study, college students watched a confederate of the investigator working on an unpleasant task (Carlo, Eisenberg, Troyer, Switzer & Speer, 1991). The confederate became distressed and asked the subject to take his place. One group of subjects was given the alternative of sitting and watching the confederate suffer or taking his place, and another group had the option of leaving the experiment and going home. Three-quarters of the first group chose to take the confederate's place rather than continue to experience empathic distress. Remarkably, over half the subjects in the second group chose to take the confederate's place rather than go home, and those who did this were the more empathic members of the group.

Finally, it has been found that observers are quicker to help when

### *Innocent Bystander*

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the victim shows more pain (Geer & Jarnecky, 1973; Weiss, Boyer, Lombardo, & Stitch, 1973) and when their own empathic distress is high rather than low (Gaertner & Dovidio, 1977). The details of these three studies can be found in Hoffman (1978).

b. Empathic distress precedes helping. The above research shows the required association between empathic arousal and helping behavior. There is also evidence from 1970s' experimental research reviewed by Hoffman (1978) that empathic arousal precedes and motivates helping. The last and most interesting of these experiments was done by Gaertner and Dovidio (1977). In that study, female undergraduate students witnessed (through earphones) a situation in which another student (a confederate of the experimenter) stopped working on an experimental task in order to straighten out a stack of chairs that she thought was about to topple over on her. A moment later the confederate screamed that the chairs were falling on her, and then was silent. The main findings were that the observers' heart rate began to accelerate an average of 20 seconds before they rose from their chair to help the victim; and the greater an observer's heart-rate acceleration the more quickly she rose from her chair. In other words, the intensity of the observer's physiological (empathic) arousal was systematically related to the speed of her *subsequent* helping action.

c. Observers feel better after helping. The most direct evidence that empathic distress diminishes in intensity after an observer helps someone can be found in Darley and Latane's (1968) study in which subjects heard sounds indicating that someone was having an epileptic seizure. The subjects who did not respond overtly continued to be aroused and upset, as indicated by their trembling hands and sweaty palms; the subjects who tried to help showed fewer signs of continued upset. A similar finding was obtained in Murphy's (1937) classic nursery school study: When children helped others their empathic distress appeared to diminish; when they did not help their distress was prolonged. These findings suggest that empathic distress acts like other motives: When it is expressed behaviorally its intensity subsides. In the case of empathic distress, there may be an additional factor: The victim's expression of relief may produce a