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Empathy

The term *empathy* - from the ancient Greek word *empathia* - which means literally 'in and with' (*en*) 'suffering or passion' (*pathos*) - was coined by Titchener, in 1924 on the analogy of sympathy, to convey the meaning of being able to recognize that other people have mental states, feel emotions, and have needs. Also the notion of *emfühlung*, borrowed from the aesthetics philosophy, and translated in 1909 by Titchener into an "inner feeling" or "one's way into" or, more precisely, "in the mind's muscle", can shed some light on what empathy is and how it expresses itself. These notions are conceptually close to the process of "entering into the life of someone else" that is at the core of empathy.

Empathy is recognized as a complex and interdisciplinary concept, involving theoretical perspectives from social and developmental psychology, neuroscience, criminology, law, philosophy, and ethics. The complexity behind it is also suggested by the instruments involved to attempt to measure it: empathy can be studied as a personality trait or as a mental state. It can be measured by self-administered scales or questionnaires, and also with more sophisticated neuroscientific techniques.

Empathy plays an important role in everyday life: it shapes human relationships, and the loss of empathy, or its deficiency or malfunctioning, contributes to breaking up human connections, and in precipitating conflicts and violence. Currently the concept of empathy is almost exclusively employed to refer to a situation in which, for instance, *person A* is able to identify or to feel directly the states of dissatisfaction of *person B*. It follows that empathy may activate a shared emotional condition, and then may sustain the action of intervening in favor of the dissatisfied and frustrated person B. The case of *A helping B* is the most documented research finding. The emphasis here is on the relational dimension of empathy, which connects individuals, who otherwise might endure the risk of remaining isolated. Empathy does not simply imply perceiving the sufferance or joy of a person experiencing that emotional state, but it is the recognition of it at a cognitive level: *knowing what the other person is experiencing*; and at an emotional level: *feeling what the other person is feeling*. In doing so, individuals become able to tune their behavior accordingly to what they are feeling in interacting or just observing somebody else. Hence, empathy involves the process of sharing other person's internal world of thoughts and emotions, and involves not only a way of learning about somebody's else state, but also an expansion of an individual experience that becomes a shared and relational one. The perception of discomfort or pleasure experienced by a person or a group, which is elicited by empathising, can in fact be better recognised when contacts between people are encouraged. In this sense we can distinguish between different dimensions of emotional empathy. Emotional empathy involves two dimensions: it may be reactive (e.g. emotions as a reaction to the emotional experiences of another person) or parallel (e.g. emotions that reflect those experienced by someone else). The former stems from a genuine interest in others and arouses positive feelings, while the latter can elicit either positive or negative emotions.

Many studies have focused their attention on the role played by empathy at the interpersonal and intergroup level of analysis. The former includes examining to what extent the empathetic person, apparently involved in helping somebody else, is instead looking for a personal advantage. The latter explores the extent to which the encouragement of reciprocation within interpersonal relationships (either real or just mentally represented) contributes to reduce in-group favouritism, out-group derogation, and prejudice, which are some manifestations of lack of empathy.

Empathy cannot be seen as a discrete "either or" capacity, so that one has it or not, but it is rather a process that can take shape and develop within the various possibilities of interaction with others, and can vary across life, cultures, and experiences. In a recent piece of work, Baron-Cohen stated that there are then different grades of empathy, as different levels and dimensions that characterize what is meant by being empathetic. This assumption is based on the key idea that people lie on an empathy spectrum that takes the shape of a Bell curve (from high to low): people

can be lined up on this individual difference curve, based on the level of empathy they are able to experience.

It follows that seeing empathy as a dimensional concept it is possible to explain why individuals behave differently with certain individuals and contexts, showing more or less empathy or emotional understanding of others and of situations. Hence, this can provide some insights as to why certain individuals, defined as psychopaths, are likely to have very low or zero degrees of empathy: a life at best misunderstood, at worst condemned as selfish.

Furthermore, studies show that empathy has also a neurobiological basis, apart from the psychological, cultural and social ones. Neuroscientists speak of the empathy circuit that includes various regions, some of which are involved automatically when coding our and other people's experiences, while other regions are involved when consciously thinking about one's own and other people's minds. A concise description identifies the medial prefrontal cortex (MPFC) as pivotal in the social information prospective and plays an important role in comparing one's own perspective with those of other's. This includes a dorsal and a ventral part. The dorsal part (dMPFC) plays a significant role in meta-representation that is thinking about other people's thoughts and feelings, as well as when we think about our own thoughts and feelings. The ventral part (vMPFC) is involved in self-awareness, and in positive and optimistic feelings. It is suggested that vMPFC contributes to storing information about the emotional valence of a course of action, what in 1994 Damasio called the *somatic marker*. Individuals seem to have such a marker for every action they make, and that only actions with positively valenced somatic markers will be repeated. Damages of the vMPFC show less automatic response in front of very distressful images of disaster, violence and mutilation. The orbitofrontal cortex (OFC) is involved in social judgement, and damages to this area may involve disinhibition. The caudal anterior cingulate cortex (cACC), which is active when a person experiences pain, and observe other people in pain, and the anterior insula (AI), which is involved in the process of self-awareness, and in experiencing a disgusting taste or in observing others showing disgust, are recognized as contributing significantly to the identification with another person's emotional state. These processes are likely to contribute to sustain and enhance empathy, which involves the ability to distinguish between different emotions. Furthermore, the recognition of a mirror neuron system that is active when one performs an action or when witness to someone else performing it was first addressed by Rizzolatti and Craighero. This system suggest that there are some forms of mirroring of actions and emotions that individuals experience *by proxy*. According to De Waal the most advanced forms of empathy develop from simpler forms, both from an ontogenetic and a biological level that constitute an underlying foci of what is defined as empathy. Emotional contagion is recognized as a precursor of more advanced forms of empathy, and it works by activating in others the same emotional state that it is observed in an observed person. The amygdala, defined by LeDeoux as the emotional brain, involves emotional learning and regulation processing that constitute what gives continuity, emotional flavour and memory to human interactions. Impairments in the emotional brain can lead to antisocial and violent conducts, in which the key feature lies in an inability of the person to respond to other's emotions, and modulate their behavior accordingly.

Research shows that the most advanced forms of empathy constitute the basis for attribution processes and perspective taking and represent the external aspects of empathy, which can be also indirectly be measured via behavioral reactions and social functioning.

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See also Altruism, Egoism and self-interest (psychological)

Further readings

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