ARTICLE

Empathy: A Review of the Concept

Benjamin M.P. Cuff
Department of Psychology and Behavioural Sciences, Coventry University, UK

Sarah J. Brown
Centre for Research in Psychology, Behaviour and Achievement, Coventry University, UK

Laura Taylor
Department of Psychology and Behavioural Sciences, Coventry University, UK

Douglas J. Howat
Faculty of Health and Life Sciences, Coventry University, UK

Abstract

The inconsistent definition of empathy has had a negative impact on both research and practice. The aim of this article is to review and critically appraise a range of definitions of empathy and, through considered analysis, to develop a new conceptualisation. From the examination of 43 discrete definitions, 8 themes relating to the nature of empathy emerged: "distinguishing empathy from other concepts"; "cognitive or affective?"; "congruent or incongruent?"; "subject to other stimuli?"; "self/other distinction or merging?"; "trait or state influences?"; "has a behavioural outcome?"; and "automatic or controlled?" The relevance and validity of each theme is assessed and a new conceptualisation of empathy is offered. The benefits of employing a more consistent and complete definition of empathy are discussed.

Keywords

affective empathy, cognitive empathy, definition, empathy, empathy assessment

The term "empathy" was coined over 100 years ago by Titchener, an adaptation of the German word *Einfühlung* (Wispé, 1986). According to Stotland and colleagues, discussions of empathy may even date back to "the beginnings of philosophical thought" (Stotland, Matthews, Sherman, Hansson, & Richardson, 1978, p. 11). Despite this extensive history, empathy is not a well defined notion. Instead, there are perhaps as many definitions as there are authors in the field (Decety & Jackson, 2004; de Vignemont & Singer, 2006).

Several problems result from this fact. Firstly, when interpreting research findings relating to "empathy," one must first determine precisely what is being studied, and the degree of confusion with related concepts. This can make the interpretation of outcomes difficult, compromising the comparability of studies (Brown, Harkins, & Beech, 2012; Gerdes, Segal, & Lietz, 2010). Secondly, there appear to be

differences in the way researchers and practitioners conceptualise empathy (Mann & Barnett, 2012), leading to a mismatch between the way empathy is researched and dealt with in treatment and education programmes that aim to enhance empathy. Thirdly, therapeutic difficulties can arise when concepts are understood differently (Book, 1988; Clark, 2010), with some understandings of empathy having greater therapeutic effectiveness than others (see Clark, 2010; Nightingale, Yarnold, & Greenberg, 1991). These issues, and suggestions for their resolution, are discussed further towards the end of this article.

While definition diversity should not necessarily be discouraged (e.g., Duan & Hill, 1996), efforts should be made to draw together knowledge to improve our understanding and to reduce confusion in the field. Although "there is no way to ascertain which definition is correct" (Eisenberg, Shea, Carlo, & Knight,

1991, p. 64), it is possible to compare and contrast how empathy is conceptualised, and discuss any differences, examining competing viewpoints in light of the current knowledge-base. The purpose of this article is to explore the range of current conceptualisations of empathy and present a discussion outlining similarities that are supported in the literature, and to formulate a new conceptual summary of empathy that can be used by future researchers/practitioners.

Identifying Areas of Confusion

A snowballing procedure was employed to identify definitions in the literature from key articles, and exploring avenues of interest from reference lists. This process was not intended as an exhaustive review, but was designed to capture definitions across a range of different viewpoints. Only English language articles were examined, as there was no provision for translation of non-English language sources.

A total of 43 distinct definitions/conceptual summaries were identified (see Table 1). A small number of these conceptualisations were not put forward by authors as formal "definitions," but were summary statements of the wider theoretical discussions of empathy. These informal methods of defining empathy were nevertheless reviewed alongside the formal definitions as they have the same relevance in terms of interpreting and understanding research findings. The present discussion is based upon shorthand conceptualisations (definitions) of empathy, rather than full-fledged models, for two reasons. Firstly, many models of empathy focus upon the wider empathic process (i.e., the process from perception to behaviour), which is beyond the scope of this article. Secondly, this method allowed us to capture a wider range of ideas and theoretical positions, as the majority of definitions are presented in the literature without such models. The conceptualisations identified are numbered in Table 1; to avoid lengthy citations, in the following discussion these conceptualisations are referred to using superscript numbers relating to their position in Table 1.

By breaking each definition down into individual clauses and examining similarities and differences, eight themes crucial to our understanding of the concept were identified and are discussed next.

Distinguishing Empathy From Other Concepts

Several notable attempts have been made to differentiate empathy from a range of associated concepts (see Batson, 2011; Eisenberg et al., 1991; Scheler, cited in Becker, 1931). Others (e.g., Batson, Fultz, & Schoenrade, 1987; Preston & de Waal, 2002) denote empathy as an overarching category, containing all associated concepts such as emotional contagion, sympathy, and compassion. To explain why empathy is commonly merged with associated terms, Ickes (2003) utilised Scheler's (cited in Becker, 1931) discussion on the related concepts of compathy (shared feelings due to shared circumstances), empathy (understanding another's emotions through perspective taking),

mimpathy (imitating another's emotions, without experiencing them oneself), sympathy (intentionally reacting emotionally), transpathy (emotional contagion, where one is "infected" by another's emotions), and unipathy (an intense form of transpathy). According to Ickes (2003), such terms differ across three dimensions: the degree of cognitive representations of the target's emotional state; the degree of emotion sharing; and the degree to which a self/other distinction is maintained. Ickes noted that empathy is located in the midrange for all three of these dimensions, and that the meaning of this term "has an inherent ambiguity that invites the kind of definitional debates that have continued unresolved since the term *Einfühlung* was first introduced nearly a century ago" (2003, p. 64). Nevertheless, Ickes (and Scheler) claimed that although such terms are related, there is an argument for their separation.

Perhaps the most frequent discussion with regard to this theme is the difference between empathy and sympathy. Several definitions[3, 5, 6, 11, 12, 23, 29, 33, 35, 38, 39] appear to merge concepts of empathy and sympathy, or at least do not make this distinction clear, whilst others argue against merging sympathy and empathy (e.g., Eisenberg et al., 1991; Hein & Singer, 2008; Scheler, cited in Becker, 1931). Eisenberg et al. (1991, p. 65) defined sympathy as "a vicarious emotional reaction based on the apprehension of another's emotional state or situation, which involves feelings of sorrow or concern for the other". The distinction between empathy and sympathy has been described as "feeling *as* and feeling *for* the other," respectively (Hein & Singer, 2008, p. 157; original emphasis). For example, when perceiving sadness in another, empathy will cause sadness in the observer (same emotion; feeling as), while sympathy will entail feelings of concern (different emotion; feeling for; Singer & Lamm, 2009). This is consistent with reported differences in the neurological processes underlying the two constructs (Decety & Michalska, 2010). Due to these distinct emotional implications, it is the current authors' view that empathy and sympathy should be separated. The emotion of "feeling for" another deserves a name and given its current treatment in the literature by many authors, "sympathy" lends itself as the most appropriate at this time.

Two other constructs commonly equated with empathy are compassion ("the feeling that arises in witnessing another's suffering and that motivates a subsequent desire to help"; Goetz, Keltner, & Simon-Thomas, 2010, p. 351) and tenderness (an expansive, "warm-and-fuzzy" feeling often elicited by the delicate and defenceless; Lishner, Batson, & Huss, 2011, p. 615). It is possible to differentiate tenderness, compassion, and sympathy. Tenderness has been linked to vulnerability in the target (i.e., a long-term need), whereas the motivation resulting from sympathy is targeted towards a current need (Lishner et al., 2011). While the distinction concerning compassion is less clear one suggestion is that compassion is a higher order construct, consisting of feelings of sympathy and pity (Goetz et al., 2010). As such terms are more concerned with one's feelings towards the other's plight, rather than the sharing of emotions, they are more closely related to sympathy than empathy (Kalawski, 2010; Lishner et al., 2011; Nakao & Itakura, 2009).

Table 1. List of identified empathy definitions.

#	Author(s)	Definition
1	Albiero et al. (2009, p. 393)	"The tendency to vicariously experience other individuals' emotional states … an emotional response that is focused more on another person's situation or emotion than on one's one … [which] can be either identical to or congruent with that of the other person involved."
2	Barker (2008, p. 141)	"The act of perceiving, understanding, experiencing, and responding to the emotional state and ideas of another person."
3	Barnett & Mann (2013, p. 230)	"A cognitive and emotional understanding of another's experience, resulting in an emotional response that is congruent with a view that others are worthy of compassion and respect and have intrinsic worth."
4	Baron-Cohen & Wheelwright (2004, p. 168)	"The drive or ability to attribute mental states to another person/animal, and entails an appropriate affective response in the observer to the other person's mental state."
5	Batson et al. (2005, p. 486)	"An other oriented emotional response elicited by and congruent with the perceived welfare of someone else."
6	Batson, Fultz, & Schoenrade (1987, p. 20)	"The other-focused, congruent emotion produced by witnessing another person's suffering involves such feelings as sympathy, compassion, softheartedness, and tenderness."
7	Clark (2010, p. 95)	"A way … to grasp the feelings and meanings of the client."
8	Cohen & Strayer (1996, p. 988)	"The ability to understand and share in another's emotional state or context."
9	Colman (2009, p. 248)	"The capacity to understand and enter into another person's feelings and emotions or to experience something from the other person's point of view."
10	Coplan (2011, p. 40)	"A complex imaginative process through which an observer simulates another person's situated psychological states while maintaining clear self–other differentiation."
11	Davis (1983, p. 114)	"A reaction to the observed experiences of another."
12	Davis (1996, p. 12)	"A set of constructs having to do with the responses of one individual to the experiences of another. These constructs specifically include the processes taking place within the observer and the affective and non-affective outcomes which result from those processes."
13	Decety & Lamm (2006, p. 1146)	"A sense of similarity between the feelings one experiences and those expressed by others."
14	Decety & Lamm (2006, p. 1146)	"The ability to experience and understand what others feel without confusion between oneself and others."
15	Decety & Michalska (2010, p. 886)	"The ability to appreciate the emotions of others with a minimal distinction between self and other."
16	Decety & Moriguchi (2007, p. 22)	"The capacity to share and understand emotional states of others in reference to oneself."
17	Dymond (1949, p. 127)	"The imaginative transposing of oneself into the thinking, feeling and acting of another and so structuring the world as he does."
18	Eisenberg, Fabes, & Spinrad (2006, p. 647)	"An affective response that stems from the comprehension of another's emotional state or condition, which is identical or very similar to the other's emotion, or what would be expected to feel."
19	Feshbach (1975, p. 26)	"A match between the affective responses of a perceiver and that of a stimulus person…. [definitions] must take into account both cognitive and affective factors."
20	Geer, Estupinan, & Manguno-Mire (2000, p. 101)	"The ability to perceive another person's point-of-view, experience the emotions of another and behave compassionately."
21	Goldman (1993, p. 351)	"A sort of 'mimicking' of one person's affective state by that of another."
22	Hein & Singer (2008, p. 154)	"An affective state, caused by sharing of the emotions or sensory states of another person."
23	Hoffman (2000, p. 4)	"An affective response more appropriate to another's situation than one's own."
24	Hogan (1969, p. 308)	"The act of constructing for oneself another's mental state."
25	Ickes (1997, p. 2)	"A complex form of psychological inference in which observation, memory, knowledge, and reasoning are combined to yield insights into the thoughts and feelings of others."
26	Johnson, Cheek, & Smither (1983, p. 1299).	"The tendency to apprehend another person's condition or state of mind."
27	Lazarus (1994, p. 287)	"Sharing another's feelings by placing oneself psychologically in that person's circumstance."
28	Oliveira-Silva & Gonçalves (2011, p. 201)	"The capacities to resonate with another person's emotions, understand his/her thoughts and feelings, separate our own thoughts and emotions from those of the observed and responding with the appropriate prosocial and helpful behaviour."
29	Pavey, Greitemeyer, & Sparks (2012, p. 681)	"The experience of sympathetic emotions and concern for another person in distress."

(Continued)

Table 1. (Continued)

#	Author(s)	Definition
30	Pease (1995, p. 202)	"The action of understanding, being aware of, being sensitive to, and vicariously experiencing the feelings, thoughts and experience of another of either the past or present without having the feelings, thoughts and experience fully communicated in an objectively explicit manner."
31	Pelligra (2011, p. 170)	"The ability to anticipate and share others' emotional states."
32	Preston (2007, p. 428)	"A shared emotional experience occurring when one person (the subject) comes to feel a similar emotion to another (the object) as a result of perceiving the other's state."
33	Preston & de Waal (2002, p. 4)	"Subject's state results from the attended perception of the object's state"
34	Rogers (1975, p. 2)	"To perceive the internal frame of reference of another with accuracy and with the emotional components and meanings which pertain thereto as if one were the person, but without ever losing the 'as if' condition."
35	Singer & Lamm (2009, p. 82)	"An affective response to the directly perceived, imagined, or inferred feeling state of another being."
36	Singer & Steinbeis (2009, p. 43)	"A distinction between oneself and others and an awareness that one is vicariously feeling with someone but that this is not one's own emotion."
37	Smith (1759, cited by Marshall et al., 1995, p. 100)	"An ability to understand another person's perspective plus a visceral or emotional reaction."
38	Stocks et al. (2011, p. 3)	"A category of emotional responses that are felt on behalf of others."
39	Stotland et al. (1978, p. 12)	"An observer reacting emotionally because he perceives that another is experiencing or about to experience an emotion."
40	Titchener (1909, cited by Duan & Hill, 1996, p. 261)	"A process of humanizing objects, of reading or feeling ourselves into them."
41	Van der Weele (2011, p. 586)	"A basically passive process of information gathering."
42	Wispé (1986, p. 318)	"The attempt by one self-aware self to comprehend unjudgmentally the positive and negative experiences of another self."
43	Zahavi (2008, p. 517)	"A basic, irreducible, form of intentionality that is directed towards the experiences of others."

Cognitive or Affective?

Perhaps the most discussed aspect of empathy is whether it is a cognitive or affective concept. Cognitive empathy is the ability to understand another's feelings, related closely to theory of mind (Blair, 2005). Affective empathy is concerned with the experience of emotion, elicited by an emotional stimulus. Some definitions are based upon only affective,[1, 6, 13, 21, 22, 23, 36, 38] or cognitive,[7, 15, 24, 25, 41, 42] components. However, many definitions[2, 3, 4, 5, 8, 9, 14, 16, 17, 18, 19, 20, 28, 30, 34, 35, 37] include both.

Research on personality and developmental disorders suggests that cognitive and affective empathy reflect two different constructs. For example, those with autistic spectrum disorder often appear to have cognitive empathy deficits, but average levels of affective empathy (Baron-Cohen & Wheelwright, 2004). Psychopathic individuals show the opposite pattern (Blair, 2005). Numerous neurological studies have also demonstrated distinct brain regions associated with each construct (e.g., Shamay-Tsoory, Aharon-Peretz, & Perry, 2009; Zaki, Weber, Bolger, & Ochsner, 2009). Nevertheless, due to extensive interaction, separation of the two concepts has been rejected (Baron-Cohen & Wheelwright, 2004; Duan & Hill, 1996; Singer, 2006). For example, Lamm, Batson, and Decety (2007) suggested that while affective empathy is automatically elicited, manipulation of cognitive elements can modulate affective elements. Given the previous discussion, an appropriate viewpoint might be that of Heberlein and Saxe (2005), in that whilst the affective and cognitive components can be separated, it is important to remember the interaction between the two processes. To give another perspective, Strayer (1987) suggested that the affective component is the content of empathy, whereas the cognitive component is the process via which this content is formed.

A further point to consider is whether empathy is necessarily restricted to an emotional context, or whether cognitive empathy can be considered "empathy" alone. For example, cognitive-only empathy could help therapists understand clients' thoughts and meanings, and teachers to recognise a lack of understanding in pupils (see Rogers, 1967, 1975). However, although inferring understanding and meaning in others uses very similar processes to cognitive empathy (e.g., perspective taking), the lack of interaction with any affective processes seems inconsistent with the widely accepted view of empathy as an emotional event (explicitly stated or implied by the majority of conceptualisations identified here). To avoid confusion, we recommend a different term for such scenarios, such as *empathic understanding* (Rogers, 1967).

Another debate relates to whether cognitive empathy and perspective taking (i.e., taking the perspective of the target, adopting their point of view) are the same construct. Several authors[9, 10, 17, 18, 27, 34, 37, 40] suggest they are. Nevertheless, there are notable counterarguments. For example, while perspective taking is important for theory of mind processes (Gery, Miljkovitch, Berthoz, & Soussignan, 2009), and is one method of achieving cognitive empathy, the two processes may not be

one and the same. There are other ways of understanding another's feelings without taking their perspective, such as reading facial expression (Besel & Yuille, 2010), accessing relevant memories of previous emotional situations (Eisenberg, 1986), imagining events in another place or time (Stinson & Ickes, 1992), and projection, where the observer assumes the target's emotional state to be the same as his/her own (Nickerson, 1999; Nickerson, Butler, & Carlin, 2011; Preston, 2007).

Congruent or Incongruent?

Some authors have explicitly argued that the empathic emotion of the observer needs to be congruent with that of the observed individual,[1,6] with several implying this to be the case with a "sharing" of emotions,[8, 16, 22, 27, 31, 32] or "experiencing" the other's emotions[2, 14, 20, 30] vicariously. For others, congruency may occur but is not necessary,[13, 18, 32] and some authors suggest that the emotion is congruent with the observer's perception of need or entitlement in the other,[3, 5, 23] thus congruent with the situation. Clearly there is a need to disambiguate this issue.

Some authors emphasise the importance of emotional congruency. For example, Rogers (1975, p. 4) conceptualised empathy as "entering the private perceptual world of the other and becoming thoroughly at home in it." Within a therapeutic relationship (which Rogers was primarily concerned with), one may be able to share and discuss emotions in depth. However, even the best therapist will be influenced by his/her own perspective, and the degree of congruency will depend upon this influence. Additionally, there are many examples outside of therapeutic relationships where empathy is felt without the opportunity for deep discussion of emotions (e.g., witnessing accidents), where the perspective and interpretation of the observer is the key source of information. Such perspectives and interpretations may or may not be accurate, and will be influenced by the observer's thoughts (i.e., projection) and personality (Scheler, 1954, cited in Stotland et al., 1978), and by priming effects (Hodges & Biswas-Diener, 2007). Therefore, the degree of emotion matching will be dependent upon empathic accuracy: the ability to "accurately infer the specific content of another person's successive thoughts and feelings" (Ickes, 2011, p. 57).

Also arguing for emotional congruency, Hein and Singer (2008) suggested that congruency is what separates empathy (congruent) from sympathy (incongruent). This is consistent with the idea that empathy is related to the other's feelings, while sympathy is a reflection of one's own (e.g., the feelings of concern that the observer holds for the target). However, this does not necessarily imply that the other's emotion is a perfect match to one's own. Levenson and Ruef (1992) argued that without accurate perception it will be difficult to respond compassionately. Presumably, however, an individual will respond based on his/her empathic experience, accurate or not. Naturally, cases of extreme incongruency, such as feeling anger as a result of mistaking sadness for anger in the target, will represent a failure of empathy.

According to de Vignemont and Singer (2006), neuroscientific evidence has yet to provide an answer to the debate on congruency, and testing for exact matching of emotion is nearly impossible (Preston, 2007). Nevertheless, the degree of congruency is dependent upon factors such as personal experience, imagination, simulation (Coplan, 2011) and the resources available for the verbal sharing of emotions. Accuracy is also dependent on how accurate the target is regarding his/her own emotions, which are often used as a measure of empathic accuracy (Batson, 2011). If the target fails to accurately decipher his/her own emotional state then the task of being empathically accurate is made more difficult for the observer. Each of these factors suggests that true empathic congruency will be difficult to achieve. Whilst the empathic emotion may be similar to the target's, it is unlikely to ever be the same (Stotland et al., 1978).

Subject to Other Stimuli?

The previous discussion assumes that an emotional other is present for the observer to perceive. With a few exceptions,[18, 30, 35] most authors make this assumption.[2, 6, 13, 20, 22, 29, 32, 39] However, some argue that direct perception may not be necessary. For example, Blair (2005) noted that empathy can either be in response to the emotions in another person or "other emotional stimuli" (p. 699). Such stimuli may exist in three circumstances. First, it is possible to encounter another person who has just experienced an emotional event (e.g., an accident), but who is minimising emotional cues (verbal, facial, etc.). We argue that observers may infer emotionality through perspective taking, imagination, or the retrieval of relevant memories. Neuroscientific evidence supports this contention as "intentional empathy" (asking people to empathise with others) activates empathy-associated brain areas in the absence of emotional cues (de Greck et al., 2012). Second, empathy for an absent target may be elicited by verbal statements from a third party (Blair, 2005; Polaschek, 2003), retrospectively (Barnett & Mann, 2013), and by inference from one's previous experience (Eisenberg et al., 1991). Third, empathy can also be evoked by stimuli about a fictional or imaginary person (Decety & Jackson, 2004; Pelligra, 2011; Singer & Lamm, 2009). People respond emotionally to emotional scenes in books and animated films, where there are no living entities present experiencing an emotion, relying on imagination in such cases. We argue that there is little functional difference between empathy for a real, fictional, or absent person. The key element to consider in the presence of an emotionally laden stimulus is that of perception and understanding in the observer, rather than actual emotionality in the target.

Additionally, a range of different emotions evoke empathy. "Negative empathy" (e.g., pain/sadness) is often given prominence in the literature. For example, Batson et al. (1987, p. 20) suggested empathy is "produced by witnessing another person's suffering." However, Fan, Duncan, de Greck, and Northoff (2011) identified a number emotions that can evoke empathy, including anger, anxiety, disgust, fear, happiness, pain, and sadness. Moreover, individuals may not have the same empathic capacity for different emotions (Eisenberg, 1986). For example, individuals may react strongly to "positive empathy" (e.g., empathy for happiness), but dampen negative empathy to minimise personal distress.

Self/Other Distinction or Merging?

It is also important to examine the internal self-oriented factors. Some conceptualisations[10, 14, 34, 36] maintain a clear self/other distinction: the observer is aware that his/her emotional experience comes from an external source (de Vignemont & Singer, 2006). None of the conceptualisations identified here state that the observer does not have this awareness.

The main argument for a self/other distinction comes from the need to separate empathy from related concepts. In particular, this distinction is what separates empathy from emotional contagion (Decety & Lamm, 2006; de Vignemont & Singer, 2006; Gerdes et al., 2010; Scheler, cited in Ickes, 2003). With empathy, the observer is aware that this feeling is a result of perceiving emotion in the other. With emotional contagion, the emotion is captured but the observer lacks this awareness and the observer believes this feeling to be his/her own

Neuroscientific evidence has demonstrated that observing another's pain activates the observer's brain areas responsible for pain (Singer & Lamm, 2009), reflecting some self-other merging. Jackson, Brunet, Meltzoff, and Decety (2006) reported the results of an *f*MRI study that demonstrated others' experiences are processed the same as our own, but the degree of activation in relevant brain areas depends upon the degree of separation (i.e., greater activation when taking a "self-perspective" compared to an "other-perspective"). Therefore, due to these shared processing systems some merging is evident. This merging aids empathy by providing a bridge between the self and other (Decety & Sommerville, 2003) and without some self-other merging it would be difficult to understand the other's emotion (i.e., cognitive empathy).

Trait or State Influences?

Over a quarter of the conceptualisations we identified[1, 4, 8, 9, 14, 15, 16, 20, 28, 31, 37] denoted empathy as an "ability" or "capacity," implying a stable trait concept. However, others suggest that empathic responses may be context specific (i.e., state influences), using words such as *situation*,[1, 23] or *context*.[8] The trait view implies that some individuals are more empathic than others, with this ability being stable across time. Anatomical differences (Banissy, Kanai, Walsh, & Rees, 2012), as well as both genetic and developmental factors (Eisenberg & Morris, 2001), account for some variability in empathic abilities. Further support emerges from studies into the deficits found in autistic and psychopathic individuals. Other effects of dispositional factors such as gender (e.g., Derntl et al., 2010) and education (Thomas, Fletcher, & Lange, 1997) have been reported.

Thus, there is little doubt that empathic responding is subject to trait, individual-difference factors. Nevertheless, considerable evidence supports the importance of situational, "state" factors. For example, sex offenders do not have generalised empathy deficits, but are able to avoid empathy for certain individuals or groups of people (Fernandez, Marshall, Lightbody, & O'Sullivan, 1999). Similarly, violent men have decreased empathic accuracy towards their spouses, compared to female

strangers (Clements, Holtzworth-Munroe, Schweinle, & Ickes, 2007). Moreover, a number of situational factors have been demonstrated to influence empathic responding, such as observer–target similarity (Eklund, Andersson-Stråberg, & Hansen, 2009), how much the observer values the target (Batson, Eklund, Chermok, Hoyt, & Ortiz, 2007), mood (Pithers, 1999), blame (Rudolph, Roesch, Greitemeyer, & Weiner, 2004), perceived power (Galinsky, Magee, Inesi, & Gruenfield, 2006), perceived need (Lishner et al., 2011), and cognitive load (Rameson, Morelli, & Lieberman, 2012). Thus, the evidence suggests that empathy is a result of the interaction between state and trait influences.

Has a Behavioural Outcome?

Another contention is whether empathy necessarily has a behavioural outcome. Although evidence suggests that empathy is often followed by a behavioural response (Eisenberg & Miller, 1987), several authors have argued that empathy has no associated behavioural outcome in the immediate sense. A few definitions[2, 20, 28] contain behavioural responses to empathy and several stage models of the empathic process contain some form of behavioural outcome (e.g., Betancourt, 1990; Marshall, Hudson, Jones, & Fernandez, 1995). The singular concept of empathy, however, is typically located at an earlier stage, suggesting the separation of empathy from response behaviours. For example, Polaschek (2003) argued that empathy may be felt without an associated behavioural response in cases of competing interests or situational factors (e.g., when action would cause danger to the self). Others have argued that behaviour is evoked by empathy only when mediated through sympathy (e.g., de Vignemont & Singer, 2006; Eisenberg et al., 1994), which is supported by experimental evidence (Lishner et al., 2011). Furthermore, helping behaviours can precede empathy, such as in cases of emergency (Pithers, 1999).

The evidence therefore suggests that although empathy often leads to behavioural outcomes, this is not always the case, and such behavioural outcomes may be mediated through other factors. We suggest, therefore, that it is more appropriate to acknowledge this element as being a behavioural motivation (see Hills, 2001), rather than having a direct behavioural component, due to those examples of nonaction presented before.

A further point to note is that empathy is not necessarily accompanied by a prosocial or helpful behavioural response. While empathy is normally associated with prosocial behaviours (perhaps due to lay use of the term; Hodges & Biswas-Diener, 2007), this is not always the case. For example, a good understanding of another's emotions can be used by psychopaths to manipulate their victims (Hart, Cox, & Hare, 1995), or used by businesspeople to undermine competitors (Hodges & Biswas-Diener, 2007).

Automatic or Controlled?

One final discussion point, although largely ignored in conceptualisations of empathy is whether empathy is automatically

elicited or subject to control. Hodges and Wegner (1997, p. 312) argued that empathy, like other states of mind, "can be produced by variables beyond our control." Indeed, neuroscientific studies suggest that empathy is automatically activated upon perception of an emotional other (Singer, Kiebel, Winston, Dolan, & Frith, 2004). However, empathy is a state of mind that we can reflect upon, control, and modify (Hodges & Wegner, 1997), using methods such as reframing (altering one's perspective or cognitions), suppression (not thinking about the situation), and exposure control (avoiding emotional situations); all of these require cognitive effort (Hodges & Biswas-Diener, 2007). Thus, the evidence suggests the influence of both automatic and controlled processes on empathy.

Summary

The conclusions from the previous discussions can be summarised as follows: There are functional differences between empathy and related concepts; empathy includes both cognitive and affective elements; the emotions of the target and observer are similar but not identical; other stimuli, such as imagination, can evoke empathy; a self/other distinction is maintained in empathy, although a degree of merging is necessary; empathy is affected by both trait and state influences; behavioural outcomes are not part of empathy itself; and finally, empathy is automatically elicited but is also subject to top-down controlled processes. Based upon an examination of these conclusions, we define empathy as follows:

> Empathy is an emotional response (affective), dependent upon the interaction between trait capacities and state influences. Empathic processes are automatically elicited but are also shaped by top-down control processes. The resulting emotion is similar to one's perception (directly experienced or imagined) and understanding (cognitive empathy) of the stimulus emotion, with recognition that the source of the emotion is not one's own.

Consistent with the previous arguments, our definition acknowledges the importance of both cognitive and affective factors, whilst qualifying emotional congruency based upon the accuracy of perception and cognitive understanding. Imagined stimuli are also acknowledged, as are the influences of both state and trait factors, and both automatic and controlled processes. The self/other distinction is identified but avoidance of the word "clear" leaves room for a degree of merging. Although it is to be noted that empathy may lead to behavioural outcomes, this definition of empathy purposefully avoids behavioural implications. Care has also been taken to avoid confusion with related concepts such as sympathy.

Implications

The purpose of this article was to raise awareness of the aforementioned issues, in an effort to develop a more widely shared understanding of empathy. Variations in conceptualisations have led to several issues. For example, early measurement scales are often criticised for the use of purely affective (e.g.,

Mehrabian & Epstein, 1972) or cognitive (e.g., Hogan, 1969) conceptualisations and for measuring constructs other than empathy (Joliffe & Farrington, 2006). Using a single definition will enable researchers to develop measures that conform to a shared understanding, allowing easier comparison between scales and study outcomes (Brown, Walker, Gannon, & Keown, 2013). Similarly, a clearer (and agreed upon) conceptualisation of related terms may allow for a clear distinction between such concepts, again allowing us to more easily interpret and compare research outcomes. Additionally, better understanding of the themes discussed here may promote research into situational factors that contribute to empathy, the range of stimuli that may elicit empathy, and the range of emotions that may elicit empathy (e.g., joy, pride).

Conceptualising empathy and related concepts with greater clarity can also benefit practitioners. For example, Mann and Barnett's (2012, p. 2) discussion suggests differences between practitioners' and researchers' conceptualisations of empathy, perhaps explaining the widespread implementation of empathy treatment programmes for offenders, despite a lack of research evidence for doing so. Future research could examine the differences in how researchers and practitioners define empathy and related concepts, and examine what exactly practitioners wish to change/develop in offenders. For example, it might be that perspective taking is a greater treatment need than empathy.

A clear distinction between empathy and sympathy, potentially achieved by clarity in definitions, also has importance in clinical education and practice. For example, Clark (2010, p. 95) stated that there are "qualitative differences" between empathy and sympathy, with each of these factors having benefits under different contexts. Clark summarises his discussion by suggesting that "a counselor's awareness of the appropriate use of empathy and sympathy has potential to foster therapeutic gain" (p. 100). Nightingale et al. (1991) provided medical physicians with a written vignette describing a patient who is upset, and asked them to respond either in an empathic ("I understand how you feel") or a sympathetic ("I feel sorry for you") manner. Those taking the more sympathetic approach to practice made greater use of hospital resources than those with an empathic approach. A clear understanding of the functional differences between sympathy and empathy in medical contexts may therefore have implications in medical education, when trying to optimise physicians' approaches to practice.

Conclusion

A new conceptualisation of empathy has been constructed based on careful consideration of previous conceptualisations, empirical evidence, and arguments presented by various authors in the field. Few authors to date have approached this task in such a way. By constructing an understanding of empathy through more informed approaches, we can make some headway into reducing the confusion that has plagued empathy research for more than a century, and pave the way for greater consistency in clinical practice. If empathy is defined using a more consistent approach, both research and practice will be enhanced as practitioners and researchers will be working with shared understand-

ings of these complex concepts. This will allow greater comparability between research findings, promote research in often overlooked areas, and enhance the theoretical grounding for clinical interventions and measurement.

References

[1]Albiero, P., Matricardi, G., Speltri, D., & Toso, D. (2009). The assessment of empathy in adolescence: A contribution to the Italian validation of the "Basic Empathy Scale." *Journal of Adolescence*, *32*, 393–408. doi:10.1016/j.adolescence.2008.01.001

Banissy, M. J., Kanai, R., Walsh, V., & Rees, G. (2012). Inter-individual differences in empathy are reflected in human brain structure. *NeuroImage*, *62*, 2034–2039. doi:10.1016/j.neuroimage.2012.05.081

[2]Barker, R. L. (2008). *The social work dictionary*. Washington, DC: NASW Press.

[3]Barnett, G., & Mann, R. E. (2013). Empathy deficits and sexual offending: A model of obstacles to empathy. *Aggression and Violent Behavior*, *18*, 228–239. doi:10.1016/j.avb.2012.11.010

[4]Baron-Cohen, S., & Wheelwright, S. (2004). The empathy quotient: An investigation of adults with Asperger's syndrome or high functioning autism, and normal sex differences. *Journal of Autism and Developmental Disorders*, *34*(2), 163–175. doi:10.1023/B:JADD.0000022607.19833.00

Batson, C. D. (2011). These things called empathy: Eight related but distinct phenomena. In J. Decety & W. Ickes (Eds.), *The social neuroscience of empathy* (pp. 3–16). Cambridge, MA: MIT Press.

[5]Batson, C. D., Ahmad, N., Lishner, D. A., & Tsang, J. (2005). Empathy and altruism. In C. R. Snyder & S. J. Lopez (Eds.), *Handbook of positive psychology* (pp. 485–498). Oxford, UK: Oxford University Press.

Batson, C. D., Eklund, J. H., Chermok, V. L., Hoyt, J. L., & Ortiz, B. G. (2007). An additional antecedent of empathic concern: Valuing the welfare of the person in need. *Journal of Personality and Social Psychology*, *93*, 65–74. doi:10.1037/0022–3514.93.1.65

[6]Batson, C. D., Fultz, J., & Schoenrade, P. A. (1987). Distress and empathy: Two qualitatively distinct vicarious emotions with different motivational consequences. *Journal of Personality*, *55*, 19–39. doi:10.1111/j.1467–6494.1987.tb00426.x

Becker, H. (1931). Some forms of sympathy: A phenomenological analysis. *The Journal of Abnormal and Social Psychology*, *26*, 58–68. doi:10.1037/h0072609

Besel, L. D. S., & Yuille, J. C. (2010). Individual differences in empathy: The role of facial expression recognition. *Personality and Individual Differences*, *49*, 107–112. doi:10.1016/j.paid.2010.03.013

Betancourt, H. (1990). An attribution-empathy model of helping behavior: Behavioral intentions and judgments of help-giving. *Personality and Social Psychology Bulletin*, *16*, 573–591. doi:10.1177/0146167290163015

Blair, R. J. R. (2005). Responding to the emotions of others: Dissociating forms of empathy through the study of typical and psychiatric populations. *Consciousness and Cognition*, *14*, 698–718. doi:10.1016/j.concog.2005.06.004

Book, H. E. (1988). Empathy: Misconceptions and misuses in psychotherapy. *The American Journal of Psychiatry*, *145*(4), 420–424.

Brown, S., Harkins, L., & Beech, A. R. (2012). General and victim-specific empathy: Associations with actuarial risk, treatment outcome, and sexual recidivism. *Sex Abuse*, *24*, 411–430. doi:10.1177/1079063211423944

Brown, S. J., Walker, K., Gannon, T. A., & Keown, K. (2013). Developing a theory of empathy and cognitions in sex offenders. *Journal of Sexual Aggression*, *19*(3), 275–294. doi:10.1080/13552600.2012.747223

[7]Clark, A. J. (2010). Empathy and sympathy: Therapeutic distinctions in counseling. *Journal of Mental Health Counseling*, *32*, 95–101.

Clements, K., Holtzworth-Munroe, A., Schweinle, W., & Ickes, W. (2007). Empathic accuracy of intimate partners in violent versus nonviolent relationships. *Personal Relationships*, *14*, 369–388. doi:10.1111/j.1475–6811.2007.00161.x

[8]Cohen, D., & Strayer, J. (1996). Empathy in conduct-disordered and comparison youth. *Developmental Psychology*, *32*, 988–998. doi:10.1037/0012–1649.32.6.988

[9]Colman, A. M. (2009). *A dictionary of psychology*. Oxford, UK: Oxford University Press.

[10]Coplan, A. (2011). Will the real empathy please stand up? A case for a narrow conceptualization. *The Southern Journal of Philosophy*, *49*, 40–65. doi:10.1111/j.2041–6962.2011.00056.x

[11]Davis, M. H. (1983). Measuring individual differences in empathy: Evidence for a multidimensional approach. *Journal of Personality and Social Psychology*, *44*, 113–126. doi:10.1037/0022–3514.44.1.113

[12]Davis, M. H. (1996). *Empathy. A social psychological approach*. Boulder, CO: Westview Press.

Decety, J., & Jackson, P. L. (2004). The functional architecture of human empathy. *Behavioural and Cognitive Neuroscience Reviews*, *3*, 71–100. doi:10.1177/1534582304267187

[13, 14]Decety, J., & Lamm, C. (2006). Human empathy through the lens of social neuroscience. *The Scientific World Journal*, *6*, 1146–1163. doi:10.1100/tsw.2006.221

[15]Decety, J., & Michalska, K. J. (2010). Neurodevelopmental changes in the circuits underlying empathy and sympathy from childhood to adulthood. *Developmental Science*, *13*(6), 886–899. doi:10.1111/j.1467-7687.2009.00940.x

[16]Decety, J., & Moriguchi, Y. (2007). The empathic brain and its dysfunction in psychiatric populations: Implications for intervention across different clinical conditions. *Biopsychosocial Medicine*, *1*(22). doi:10.1186/1751-0759-1-22

Decety, J., & Sommerville, J. A. (2003). Shared representations between self and other: A social cognitive neuroscience view. *Trends in Cognitive Sciences*, *7*(12), 527–533. doi:10.1016/j.tics.2003.10.004

De Greck, M., Wang, G., Yang, X., Wang, X., Northoff, G., & Han, S. (2012). Neural substrates underlying intentional empathy. *SCAN*, *7*, 135–144. doi:10.1093/scan/nsq093

Derntl, B., Finkelmeyer, A., Eickhoff, S., Kellermann, T., Falkenberg, D. I., Schneider, F., & Habel, U. (2010). Multidimensional assessment of empathic abilities: Neural correlates and gender differences. *Psychoneuroendocrinology*, *35*, 67–82. doi:10.1016/j.psyneuen.2009.10.006

De Vignemont, F., & Singer, T. (2006). The empathic brain: How, when and why? *Trends in Cognitive Sciences*, *10*, 435–441. doi:10.1016/j.tics.2006.08.008

[40]Duan, C., & Hill, C. E. (1996). The current state of empathy research. *Journal of Counseling Psychology*, *43*(3), 261–274. doi:10.1037/0022-0167.43.3.261

[17]Dymond, R. F. (1949). A scale for the measurement of empathic ability. *Journal of Consulting Psychology*, *13*(2), 127–133. doi:10.1037/h0061728

Eisenberg, N. (1986). *Altruistic emotion, cognition, and behavior*. Hillsdale, NJ: Lawrence Erlbaum Associates.

Eisenberg, N., Fabes, R. A., Murphy, B., Karbon, M., Maszk, P., Smith, M., … Suh, K. (1994). The relations of emotionality and regulation to dispositional and situational empathy-related responding. *Journal of Personality and Social Psychology*, *66*, 776–797. doi:10.1037/0022-3514.66.4.776

[18]Eisenberg, N., Fabes, R. A., & Spinrad, T. L. (2006). Prosocial development. In N. Eisenberg, W. Damon, & R. M. Lerner (Eds.), *Handbook of child psychology Vol. 3: Social, emotional and personality development* (pp. 646–718). Hoboken, NJ: Wiley.

Eisenberg, N., & Miller, P. A. (1987). The relation of empathy to prosocial and related behaviors. *Psychological Bulletin*, *101*, 91–119. doi:10.1037/0033–2909.101.1.91

Eisenberg, N., & Morris, A. S. (2001). The origins and social significance of empathy-related responding. A review of empathy and moral development: Implications for caring and justice by M. L. Hoffman. *Social Justice Research*, *14*(1), 95–120. doi:10.1023/A:1012579805721

Eisenberg, N., Shea, C. L., Carlo, G., & Knight, G. (1991). Empathy-related responding and cognition: A "chicken and the egg" dilemma. In W. Kurtines & J. Gewirtz (Eds.), *Handbook of moral behavior and development. Vol. 2: Research* (pp. 63–88). Hillsdale, NJ: Erlbaum.

Eklund, J., Andersson-Stråberg, T., & Hansen, E. M. (2009). "I've also experienced loss and fear": Effects of prior similar experience on empathy. *Personality and Social Sciences*, *50*, 65–69. doi:10.1111/j.1467–9450.2008.00673.x

Fan, Y., Duncan, N. W., de Greck, M., & Northoff, G. (2011). Is there a core neural network in empathy? An fMRI based quantitative meta-analysis. *Neuroscience and Biobehavioural Reviews*, *35*, 903–911. doi:10.1016/j.neubiorev.2010.10.009

Fernandez, Y. M., Marshall, W. L., Lightbody, S., & O'Sullivan, C. (1999). The child molester empathy measure: Description and examination of its reliability and validity. *Sex Abuse*, *11*(1), 17–31. doi:10.1177/107906329901100103

[19]Feshbach, N. D. (1975). Empathy in children: Some theoretical and empirical considerations. *The Counseling Psychologist*, *5*, 25–30. doi:10.1177/001100007500500207

Galinsky, A. D., Magee, J. C., Inesi, M. E., & Gruenfeld, D. H. (2006). Power and perspectives not taken. *Psychological Science*, *17*(12), 1068–1074. doi:10.1111/j.1467–9280.2006.01824.x

[20]Geer, J. H., Estupinan, L. A., & Manguno-Mire, G. M. (2000). Empathy, social skills, and other relevant cognitive processes in rapists and child molesters. *Aggression and Violent Behavior*, *5*, 99–126. doi:10.1016/S1359-1789(98)00011-1

Gerdes, K. E., Segal, E. A., & Lietz, C. A. (2010). Conceptualising and measuring empathy. *British Journal of Social Work*, *40*, 2326–2343. doi:10.1093/bjsw/bcq048

Gery, I., Miljkovitch, R., Berthoz, S., & Soussignan, R. (2009). Empathy and recognition of facial expressions of emotion in sex offenders, non-sex offenders and normal controls. *Psychiatry Research*, *165*, 252–262. doi:10.1016/j.psychres.2007.11.006

Goetz, J. L., Keltner, D., & Simon-Thomas, E. (2010). Compassion: An evolutionary analysis and empirical review. *Psychological Bulletin*, *136*(3), 351–374. doi:10.1037/a0018807

[21]Goldman, A. I. (1993). Ethics and cognitive science. *Ethics*, *103*(2), 337–360. doi:10.1086/293500

Hart, S. D., Cox, D. N., & Hare, R. D. (1995). *The Hare Psychopathy Checklist: Screening version*. Toronto, Canada: Multi-Health Systems.

Heberlein, A. S., & Saxe, R. R. (2005). Dissociation between emotion and personality judgments: Convergent evidence from functional neuroimaging. *Neuroimage*, *28*, 770–777. doi:10.1016/j.neuroimage.2005.06.064

[22]Hein, G., & Singer, T. (2008). I feel how you feel but not always: The empathic brain and its modulation. *Current Opinion in Neurobiology*, *18*, 153–158. doi:10.1016/j.conb.2008.07.012

Hills, A. H. (2001). Empathy and offender behaviour: The motivational context. In G. B. Traverso & L. Bognoli (Eds.), *Psychology and law in a changing world: New trends in theory, practice and research* (pp. 51–64). London, UK: Routledge.

Hodges, S. D., & Biswas-Diener, R. (2007). Balancing the empathy expense account: Strategies for regulating empathic response. In T. F. D. Farrow & P. W. R. Woodruff (Eds.), *Empathy in mental illness* (pp. 389–407). Cambridge, UK: Cambridge University Press.

Hodges, S. D., & Wegner, D. M. (1997). Automatic and controlled empathy. In W. Ickes (Ed.), *Empathic accuracy* (pp. 311–340). New York, NY: Guildford Press.

[23]Hoffman, M. (2000). *Empathy and moral development: Implications for caring and justice*. Cambridge, UK: Cambridge University Press.

[24]Hogan, R. (1969). Development of an empathy scale. *Journal of Consulting and Clinical Psychology*, *33*(3), 307–316. doi:10.1037/h0027580

[25]Ickes, W. (1997). *Empathic accuracy*. New York, NY: Guilford Press.

Ickes, W. (2003). *Everyday mind reading*. New York, NY: Prometheus Books.

Ickes, W. (2011). Empathic accuracy: Its links to clinical, cognitive, developmental, social, and physiological psychology. In J. Decety & W. Ickes (Eds.), *The social neuroscience of empathy* (pp. 57–70). Cambridge, MA: MIT Press.

Jackson, P. L., Brunet, E., Meltzoff, A. N., & Decety, J. (2006). Empathy examined through the neural mechanisms involved in imagining how I feel versus how you feel pain. *Neuropsychologia*, *44*, 752–761. doi:10.1016/j.neuropsychologia.2005.07.015

[26]Johnson, J. A., Cheek, J. M., & Smither, R. (1983). The structure of empathy. *Journal of Personality and Social Psychology*, *45*, 1299–1312. doi:10.1037/0022-3514.45.6.1299

Joliffe, D., & Farrington, D. P. (2006). Development and validation of the Basic Empathy Scale. *Journal of Adolescence*, *29*, 589–611. doi:10.1016/j.adolescence.2005.08.010

Kalawski, J. P. (2010). Is tenderness a basic emotion? *Motivation and Emotion*, *34*, 158–167. doi:10.1007/s11031-010-9164-y

Lamm, C., Batson, C. D., & Decety, J. (2007). The neural substrate of human empathy: Effects of perspective-taking and cognitive appraisal. *Journal of Cognitive Neuroscience*, *19*, 42–58. doi:10.1162/jocn.2007.19.1.42

[27]Lazarus, R. S. (1994). *Emotion and adaptation*. New York, NY: Oxford University Press.

Levenson, R. W., & Ruef, A. M. (1992). Empathy: A physiological substrate. *Journal of Personality and Social Psychology*, *63*(2), 234–246. doi:10.1037//0022-3514.63.2.221

Lishner, D. A., Batson, C. D., & Huss, E. (2011). Tenderness and sympathy: Distinct empathic emotions elicited by different forms of need. *Personality and Social Psychology Bulletin*, *37*, 614–625. doi:10.1177/0146167211403157

Mann, R. E., & Barnett, G. D. (2012). Victim empathy interventions with sexual offenders: Rehabilitation, punishment, or correctional quackery? *Sexual Abuse: A Journal of Research and Treatment*. Advance online publication. Retrieved from http://sax.sagepub.com/content/early/2012/08/20/1079063212455669

[37]Marshall, W. L., Hudson, S. M., Jones, R., & Fernandez, Y. M. (1995). Empathy in sex offenders. *Clinical Psychology Review*, *15*, 99–113. doi:10.1016/0272-7358(95)00002-7

Mehrabian, A., & Epstein, N. (1972). A measure of emotional empathy. *Journal of Personality*, *40*(4), 525–543. doi:10.1111/j.1467-6494.1972.tb00078.x

Nakao, H., & Itakura, S. (2009). An integrated view of empathy: Psychology, philosophy, and neuroscience. *Integrative Psychological and Behavioral Science*, *43*, 42–52. doi:10.1007/s12124-008-9066-7

Nickerson, R. S. (1999). How we know—and sometimes misjudge—what others know. Imputing one's own knowledge to others. *Psychological Bulletin*, *125*(6), 737–759. doi:10.1037/0033-2909.125.6.737

Nickerson, R. S., Butler, S. F., & Carlin, M. (2011). Empathy and knowledge projection. In J. Decety & W. Ickes (Eds.), *The social neuroscience of empathy* (pp. 43–56). Cambridge, MA: MIT Press.

Nightingale, S. D., Yarnold, P. R., & Greenberg, M. S. (1991). Sympathy, empathy, and physician resource utilization. *Journal of General Medicine*, *6*, 420–423. doi:10.1007/BF02598163

[28]Oliveira-Silva, P., & Gonçalves, O. F. (2011). Responding empathically: A question of heart, not a question of skin. *Applied Psychophysiology and Biofeedback*, *36*, 201–207. doi:10.1007/s10484-011-9161-2

[29]Pavey, L., Greitemeyer, T., & Sparks, P. (2012). "I help because I want to, not because you tell me to": Empathy increases autonomously motivated helping. *Personality and Social Psychology Bulletin*, *38*(5), 681–689. doi:10.1177/0146167211435940

[30]Pease, R. W. (Ed.). (1995). *Merriam-Webster's medical dictionary*. Springfield, MA: Merriam-Webster.

[31]Pelligra, V. (2011). Empathy, guilt-aversion, and patterns of reciprocity. *Journal of Neuroscience, Psychology, and Economics*, *4*(3), 161–173. doi:10.1037/a0024688161

Pithers, W. D. (1999). Empathy: Definition, enhancement, and relevance to the treatment of sexual abusers. *Journal of Interpersonal Violence*, *14*(3), 257–284. doi:10.1177/088626099014003004

Polaschek, D. L. L. (2003). Empathy and victim empathy. In T. Ward, D. R. Laws, & S. M. Hudson (Eds.), *Sexual deviance: Issues and controversies* (pp. 172–189). Thousand Oaks, CA: Sage.

[32]Preston, S. D. (2007). A perception–action model for empathy. In T. F. D. Farrow & P. W. R. Woodruff (Eds.), *Empathy in mental illness* (pp. 428–447). Cambridge, UK: Cambridge University Press.

[33]Preston, S. D., & de Waal, F. B. (2002). Empathy: Its ultimate and proximate bases. *Behavioral and Brain Sciences*, *25*, 1–20. doi:10.1017/S0140525X02350015

Rameson, L. T., Morelli, S. A., & Lieberman, M. D. (2012). The neural correlates of empathy: Experience, automaticity, and prosocial behavior. *Journal of Cognitive Neuroscience*, *24*(1), 235–245. doi:10.1162/jocn_a_00130

Rogers, C. (1967). The therapeutic conditions antecedent to change: A theoretical view. In C. Rogers, E. T. Gendlin, D. J. Kiesler, & C. B. Truax (Eds.), *The therapeutic relationship with schizophrenics* (pp. 97–108). Madison: University of Wisconsin Press.

[34]Rogers, C. (1975). Empathic: An unappreciated way of being. *The Counseling Psychologist*, *5*, 2–10. doi:10.1177/001100007500500202

Rudolph, U., Roesch, S. C., Greitemeyer, T., & Weiner, B. (2004). A meta-analytic review of help giving and aggression from an attributional perspective: Contributions to a general theory of motivation. *Cognition & Emotion*, *18*(6), 815–848. doi:10.1080/02699930341000248

Shamay-Tsoori, S. G., Aharon-Peretz, J., & Perry, D. (2009). Two systems for empathy: A double dissociation between emotional and cognitive empathy in inferior frontal gyrus versus ventromedial prefrontal lesions. *BRAIN*, *132*, 617–627. doi:10.1093/brain/awn279

Singer, T. (2006). The neuronal basis and ontogeny of empathy and mind reading: Review of literature and implications for future research. *Neuroscience and Biobehavioral Reviews*, *30*, 855–863. doi:10.1016/j.neubiorev.2006.06.011

Singer, T., Kiebel, S. J., Winston, J. S., Dolan, R. J., & Frith, C. D. (2004). Brain responses to the acquired moral status of faces. *Neuron*, *41*, 653–662. doi:10.1016/S0896-6273(04)00014-5

[35]Singer, T., & Lamm, C. (2009). The social neuroscience of empathy. *Annals of the New York Academy of Sciences*, *1156*, 81–96. doi:10.1111/j.1749-6632.2009.04418.x

[36]Singer, T., & Steinbeis, N. (2009). Differential roles of fairness- and compassion-based motivations for cooperation, defection, and punishment. *Annals of the New York Academy of Sciences*, *1167*, 41–50. doi:10.1111/j.1749-6632.2009.04733.x

Stinson, L., & Ickes, W. (1992). Empathic accuracy in the interactions of male friends versus male strangers. *Journal of Personality and Social Psychology*, *62*(5), 787–797. doi:10.1037//0022-3514.62.5.787

[38]Stocks, E. L., Lishner, D. A., Waits, B. L., & Downum, E. M. (2011). I'm embarrassed for you: The effect of valuing and perspective taking on empathic embarrassment and empathic concern. *Journal of Applied Social Psychology*, *41*, 1–26. doi:10.1111/j.1559-1816.2010.00699.x

[39]Stotland, E., Matthews, K. E., Sherman, S., Hansson, R. O., & Richardson, B. Z. (1978). *Empathy, fantasy and helping*. Beverly Hills, CA: Sage.

Strayer, J. (1987). Affective and cognitive processes in empathy. In N. Eisenberg & J. Strayer (Eds.), *Empathy and its development* (pp. 218–244). New York, NY: Cambridge University Press.

Thomas, G., Fletcher, G. J. O., & Lange, C. (1997). On-line empathic accuracy in marital interaction. *Journal of Personality and Social Psychology*, *72*(4), 839–850. doi:10.1037/0022-3514.72.4.839

[41]Van der Weele, C. (2011). Empathy's purity, sympathy's complexities: De Waal, Darwin and Adam Smith. *Biology and Philosophy*, *26*, 583–593. doi:10.1007/s10539-011-9248-4

[42]Wispé, L. (1986). The distinction between sympathy and empathy: To call forth a concept, a word is needed. *Journal of Personality and Social Psychology*, *50*, 314–321. doi:10.1037/0022-3514.50.2.314

[43]Zahavi, D. (2008). Simulation, projection and empathy. *Consciousness and Cognition*, *17*, 514–522. doi:10.1016/j.concog.2008.03.010

Zaki, J., Weber, J., Bolger, N., & Ochsner, K. (2009). The neural bases of empathic accuracy. *PNAS*, *106*, 11382–11387. doi:10.1073/pnas.0902666106