

Original Article

**TOWARD A CONCEPTUALIZATION OF
ETHNOCULTURAL EMPATHY**

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Abstract

Although a number of theoretical frameworks have been developed in previous empathy research, the extent to which these frameworks consider cultural and ethnic aspects is limited. This literature study reviews the most influential frameworks of general and ethnocultural empathy. The core components of ethnocultural empathy are identified as well as factors facilitating empathy for persons from other cultures. Most notably, the realization that people in other cultures have similar worries and goals should facilitate ethnocultural empathy, in both informal and professional contexts. This analysis can provide useful insights and tools for practitioners working with patients and clients from cultures other than their own.

Keywords: Empathy, culture, ethnicity, ethnocultural empathy, literature review

Introduction

Western society is becoming more ethnically and culturally diverse (Mlekov & Widell, 2003). Today people from various ethnic and cultural groups come in contact with each other on a daily basis in a variety of contexts. These individuals often experience the world in different ways which can have a profound impact on social interaction. It is therefore important to consider how misunderstandings can arise in both informal interaction and when professionals (e.g., psychologists, social workers, nurses, doctors, lawyers, teachers and police officers) interact with clients (Ibrahim, 1991).

One way to understand interaction between people from different ethnic groups is to study the relationship in terms of the presence or absence of empathy (Reynolds &

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Scott, 2002). Many researchers have asserted that empathy plays a central role in social interaction, in both informal and professional contexts (Davis, 1994). Empathy can counteract hostile attitudes and behaviors and thus improve relations between different ethnic groups and subcultures (Litvack-Miller, MacDougall, & Romney, 1997). Studies have shown a relationship between a lack of empathy and negative attitudes and aggressive behavior (for a review, see Davis, 1994). Other studies have shown that a lack of empathy leads to hostility toward ethnic groups (Stephan & Finlay, 1999), homosexuals (Johnson, Brems, & Alford-Keating, 1997), and to child abuse (Letourneau, 1981). Empathy can reduce intolerance, conflicts, and discrimination, and increase understanding, respect and tolerance between people with similar as well as different ethnic and cultural backgrounds (Wang et al., 2003).

While empathy research has important implications for intercultural interaction it has focused almost exclusively on empathic ability among individuals with the same ethnic and cultural background. It seems prudent to examine empathy in intercultural contexts since taking the perspective of a person from a different culture may be more difficult than taking the perspective of someone with the same cultural background. For example, misunderstandings can arise in everyday interactions (e.g., when people whose cultural background dictates negotiating prices argue with salespeople in stores where the price is non-negotiable, or stand too close to, or far from, a stranger due to different norms of personal space). Further, a major challenge facing health care professionals in Western societies is the treatment of new client groups with different cultural and ethnic backgrounds. To help meet these challenges research must be conducted on empathy between individuals and groups with different ethnic and cultural backgrounds in both informal and professional contexts.

Even if cultural aspects are sometimes implicit in research on empathy there is a clear lack of research identifying the specific characteristics of ethnocultural empathy in comparison with general empathy. The goal of this paper is to examine ethnocultural empathy. More specifically, the aim is to (a) review previous research on ethnocultural empathy, (b) identify limitations in this research, and (c) take the first steps toward a new conceptualization of ethnocultural empathy that addresses these limitations. We would also like to touch upon obstacles and opportunities for empathizing with people from other cultures.

Empathy

Empathy, like many other psychological phenomena, seems easy to understand at first blush. More careful inspection reveals it is an ambiguous concept which has been defined and operationalized in many different ways. Definitions of empathy vary with researchers, disciplines, and which aspects of empathy are emphasized (see Table 1).

Empathy originally comes from the Greek word “*empathia*,” which means having insight into another person’s reactions. In philosophy, empathy has been described as both the ability to understand another person and as caring for another (Eklund, 2011). During the 1900’s the concept, which is called “*Einführung*” in German, was developed and adapted by the German aesthetician Lipps (see Wispé, 1986). There are still numerous definitions and operationalizations of the concept of empathy in use (e.g., Eisenberg & Lennon, 1983; Hoffman, 1977; Rappaport & Chinsky, 1972; Rogers, 1975; Singer et al., 2006; Truax, 1972; Walton, 1933).

Table 1. Overview of Empathy Research

Person	Discipline	Aspect of focus
<u>Early</u>		
Edith Stein	Philosophy	Experience
G. H. Mead	Psychology	Thoughts
Carl Rogers	Psychology	Multiple aspects
Heinz Kohut	Psychology	Thoughts and feelings
Roy Schafer	Psychology	Feelings
Ralph Greenson	Psychology	Feelings
<u>Contemporary</u>		
Martin Hoffman	Developmental psychology	Feelings
Dan Batson	Social psychology	Feelings
Nancy Eisenberg	Developmental psychology	Feelings
William Ickes	Social psychology	Thoughts
Mark H. Davis	Social psychology	Multiple aspects
Jean Decety	Neuroscience	Feelings

Stein (1989/1917) investigated the phenomenon of empathy (*Einfühlung*), defined as “the experience of foreign consciousness in general” (p. 10). Stein was interested in how one acquires knowledge about foreign experiences rather than whether one cares about them. Stein’s interest regarding empathy is, however, not the only one possible; several philosophers before her focused on the ethical aspect of empathy.

Even though Stein’s philosophy, as well as her life, was characterized by a deep ethical dimension, her investigation of empathy does not seem to have been influenced by the philosophical tradition that studied the ethical side of empathy. As Husserl’s student, she came in contact with the phenomenon in a context where the emphasis was placed on empathy as understanding.

Eklund (2011) modified Stein’s definition from *the experience of foreign consciousness in general* to, briefly, *the experience of foreign experience*. In Eklund’s

view, the shorter definition has advantages. First, the notion that the empathy act and the empathy object consist of different psychological categories (experience versus consciousness) does not seem warranted. Second, the concept “in general” seems superfluous. In an analysis of this definition, Eklund expanded Stein’s characterization of empathy as feeling to include the two aspects understanding and caring. The empathy act and the empathy object are both *experiences* which are essentially feelings. According to Eklund, understanding seems not to be the essence of experience but rather an aspect of feeling. One can speak of a “thinking feeling,” or say that every feeling has cognitive content.

Eklund found the understanding component did not completely capture the essence of feelings. A second aspect is *caring*. For example when we are afraid, we understand that there is a threat, but also care about escaping the threat. Similarly, when we are curious we understand there is something to know, but also care about acquiring this knowledge. A feeling involves strong pressure or motivation to act (Frijda, Kuipers, & ter Schure, 1989).

Eklund applied this characterization of experience, to the empathy phenomenon. First, empathy includes an understanding of what the other understands. Second, empathy includes caring for what the other cares about. Brehm (1999) emphasized the motivational aspect of feelings: “Whatever the character of the emotion, whether fear or anger or empathy, it urges one to respond in a particular way” (Brehm, 1999, p. 2). The idea of a close link between empathy and concern is not new. According to Rogers (1975), there is a necessary connection between experiencing another person’s experience and caring for that person: “it is impossible accurately to sense the perceptual world of another person unless you value that person and his world - unless you in some sense care” (Rogers, 1975, p. 7). Concern for a foreign feeling is, in Eklund’s view, the same as “altruism”, “a motivational state with the ultimate goal of increasing another’s welfare” (Batson, 1991, p. 6). Empathy may be seen as a feeling that provides understanding and energy for helping other people.

Agreement with Previous Empathy Conceptualizations

Eklund’s view is consistent with the two philosophical traditions of describing empathy as understanding and concern. Further, his view reflects several recent conceptualizations.

The two clinicians Rogers and Kohut are often considered pioneers in the study of empathy in psychology. Rogers (1975) also depicted empathy as understanding, concern, and feeling the other’s feeling. Kohut’s (1984) and Eklund’s definitions share the notion of empathy as sensing the other’s inner world.

Eklund’s view is also similar in important respects to the definitions of the contemporary most influential empirical psychological researchers Hoffman, Batson, Eisenberg and Davis. Hoffman (1987) viewed empathy as an affective response more appropriate to another’s situation than one’s own; Batson (1987) as an other-oriented emotional response elicited by and congruent with the perceived welfare of another person; Davis (1994) as a multidimensional phenomenon that involves feeling similar feelings as the other, having feelings of empathic concern, and understanding the other. Most likely these authors are describing various aspects of the core phenomenon presented in Stein’s and Eklund’s views. In the present paper, we base our conceptualization on Stein’s and Eklund’s view because we believe Stein and Eklund

identified the essence of empathy. Further, this view has clear relevance in professional contexts since health care professionals must go beyond merely understanding their clients' views and also care about them.

Previous Empathy Research

Despite the lack of consensus regarding a definition of empathy, a substantial body of empirical results has been generated. The concept of empathy has been investigated in many ways, and there is a vast literature on the concept in a range of fields such as developmental psychology (e.g., Eisenberg & Strayer, 1987), social psychology (e.g., Batson, Håkansson Eklund, Chermok, Hoyt & Ortiz, 2007), personality psychology (e.g., Miller & Eisenberg, 1988), and clinical psychology (e.g., Duan & Hill, 1996).

The research that has probably gained the most attention recently in the field of empathy is the parallel efforts of various research groups to identify empathy's neurological correlates. One example is the research relating self-reports on Batson's empathy scale to neuronal response measures (Lamm, Batson, & Decety, 2007).

There is overwhelming empirical evidence that people with empathic ability have helpful attitudes and prosocial behavior in everyday and professional contexts (e.g., Batson et al., 2007; Davis, 1983; Eisenberg & Miller, 1987). Recent research has also shown experimental evidence that certain animal species can exhibit empathy-based unselfish helping behavior (Warneken & Tomasello, 2006).

While empathy has been convincingly related to factors such as helping and altruism there are important factors that can affect empathy ability that have not been studied systematically. One of the most important factors to arise recently in empathy research is culture/ethnicity (Lawrence & Luis, 2001; Wang et al., 2003).

Culture and Ethnicity

There are numerous definitions of culture in psychology, anthropology and related disciplines (Toomela, 2003). While the term culture first appeared in an English dictionary in the 1920s (Kroeber, 1949), the first use in an anthropological work was by Tylor (1871), who defined culture as the "complex whole which includes knowledge, belief, art, morals, laws, custom and any other capabilities and habits acquired by man as a member of society" (p. 78). According to Kroeber and Kluckhohn (1952), six major classes of definitions of culture are to be found in the anthropological literature: descriptive, historical, normative, structural, genetic, and psychological. Triandis (1996) argued that cultures can be studied and understood using both anthropological methods at the cultural level and psychological methods at the individual level. Triandis defined culture as "a pattern of shared attitudes, beliefs, categorizations, self-definitions, norms, role definition and values that is organized around a theme" (p. 412). Herskovits (1948, p. 17) suggested that culture is "the man-made part of the human environment." Wissler (1923) included speech, material traits, art, knowledge, religion, society, property, government and war. Hofstede (2001) defined culture as "any human collectivity or category: an organization, a profession, an age group, an entire gender, or a family" (p. 10). The concept of culture has also been described by Weinberg (2003) as an accumulation of values, rituals, traditions and customs created by people to understand, interpret and give meaning to the world. In this paper we employ this definition of culture because of its explicit emphasis on psychological processes.

Eysenck (2000) considered ethnocentrism to be placing one's own culture at the center when judging the world. People assume that their views and values are the only true ones, and believe that others should embrace them.

Previous Research on Ethnocultural Empathy

Empathy is a well-researched topic, but not in relation to culture and ethnicity (Green, 1998; Lawrence et al., 2001). The researchers who recognize the value of cultural and ethnic components have established a new empathy concept called ethnocultural empathy (Wang et al., 2003). This ability is also known as cultural competence, culture empathy and trans-cultural empathy (Green, 1998; Lawrence et al., 2001; Wang et al., 2003).

Ridley and Lingle (1996) were the first researchers to use and define the concept of "cultural empathy." They meant that cultural empathy goes beyond general empathy and includes understanding and acceptance of another's culture. According to Ridley and Lingle these insights enable therapists to have more open attitudes and provide necessary knowledge to work successfully with clients with ethnic backgrounds different from their own. They stated that cultural empathy "involves a deepening of the human empathic response to permit a sense of mutuality and understanding across the great differences in value and expectation that cross-cultural interchange often involves" (Ridley & Lingle, p. 22).

Wang et al. (2003) conducted three studies on the importance of cultural and ethnic aspects of empathy. They coined the term ethnocultural empathy drawing from theories of general and cultural empathy and attempted to operationalize the terminology. According to Wang et al. there are several aspects that distinguish ethnocultural empathy from general empathy. The first aspect is the need to consider the other person's cultural context. The other person should not be understood as an individual independent of the cultural context, but rather the individual's experience is interpreted and placed in a context. A second aspect that distinguishes ethnocultural empathic ability is the need to control one's own subjective perception in the form of prejudices against individuals and groups with cultural and ethnic backgrounds different from one's own. A third aspect that sets ethnocultural empathic ability apart is that aside from theoretical knowledge it is also dependent on practical experience with the other culture. One can encounter difficulty taking other ethnic perspectives if one has not had contact with individuals from other cultures, or perhaps not lived in other countries over an extended period of time, or has never been in similar situations as these ethnic groups. According to Wang et al. ethnocultural empathy has four components:

- Intellectual empathy is the ability to understand how a person with a different ethnic background thinks or feels (Empathic Perspective Taking, EPT).
- Communicative empathy focuses on the verbal expression of ethnocultural empathic thoughts and feelings toward members of other ethnic groups. This component can also be expressed through actions (Empathic Feeling and Expressions, EFE).
- Ethnocultural empathy consciousness is being conscious of how society, media and the job market treat other ethnic groups (Empathic Awareness, EA).

- Acceptance of cultural differences is concerned with accepting why people of other ethnic groups behave as they do, for example wearing traditional clothing, or speaking their own language (Acceptance of Cultural Differences, AC).

Green (1998) asserted that empathic ability according to the Western model is not universally applicable in a multi-cultural society with ethnic diversity. According to Green, if empathy is about having access to another's inner experience in the form of feelings and thoughts, then one must have a certain practical experience of the cultural context from which these feelings and thoughts originate. Hence, empathy without knowledge of the cultural background and practical experience with different ethnic groups may not lead to satisfying and fair treatment and helping behavior, particularly in health care situations. It is likely that the ability to be empathic toward others increases if the other is similar to oneself in terms of ethnicity, gender, age, or background (Hoffman, 2000).

Health care professionals often behave in a Western, European standard way toward their clients (Ridley & Lingle, 1996; Squire, 1990). This can understandably lead to misunderstandings and unsuccessful clinical treatments in health care (Mercer & Reynolds, 2002). Yet many educational programs such as clinical psychology, medicine, social work and teacher education lack courses that cover the importance of ethnicity and cultural aspects in interaction with people with ethnic backgrounds other than one's own. Many researchers think these educational programs for health care professionals should include and integrate knowledge about clients' ethnic and cultural background as a relevant element in the clinical and social treatment (Lawrence et al., 2001).

The implications of cultural empathy in therapeutic contexts were first considered when White American psychologists met an increasing number of clients with ethnic backgrounds other than their own (Lawrence et al., 2001). The therapists realized that they needed to increase their knowledge and competence concerning ethnic aspects to be able to give just and adequate therapeutic treatment to these client groups. Even the client groups reported that they were not treated empathically by the therapists (Lawrence et al.). This may explain the tendency for clients whose ethnic backgrounds differ from their therapists to terminate therapeutic treatment more frequently than clients with the same ethnic background as their therapists (Karlsson, 2005).

Toward a New Conceptualization of Ethnocultural Empathy

What is "ethnocultural empathy"? The concept "ethnocultural empathy" contains all the qualities of general empathy just as tennis racquet, racquetball racquet and badminton racquet all contain the general qualities of a racquet. One might be inclined to think that the general concept of empathy is sufficient. Is it really necessary to distinguish between "general" empathy and "ethnocultural" empathy? The term "ethnocultural" does not change the fact that the focus is on empathy. What the term ethnocultural contributes is a specification of the relationship between the empathizer and the other person. One might be tempted to argue that there is no limit to the possible ways in which empathizer and the other person might differ. However, it seems unreasonable to have a specific concept of empathy for each type of relationship. To achieve a balance between being too general and too specific we find it fruitful to identify a moderate level of specificity; empathy between persons from different cultures.

There are two fundamental commonalities among our conceptualization and that of Wang et al. (2003). First, along with Wang et al. we consider ethnocultural empathy as a multidimensional concept. Second, we both view ethnocultural empathy as something dynamic that can be learned and developed over time. However, we hope to more fully capture ethnocultural empathy by including additional aspects of the process not considered by Wang et al. We are critical about viewing ethnocultural empathy as existing only within the empathizing person and therefore expand our conceptualization to include psychological processes of both the empathizer and the other person. We are also critical of describing empathy as involving only cognitions and emotions and neglecting concern. Therefore, we conceptualize ethnocultural empathy as an interpersonal phenomenon where the two persons care as well as think and feel.

Along with Håkansson and Montgomery (2003), we view empathy as taking place *between* the empathizer and the other person. Empathy occurs in a shared reality (cf. Hardin & Higgins, 1996) where the empathizer and the other person cooperate to the other person's advantage. The empathizer attends to the other person's needs, whereas the other person welcomes the empathizer's concern. The empathizer's actions *communicate* to the other person that the empathizer understands the other person's situation and that the understanding is genuine.

In agreement with Håkansson and Montgomery (2003), we are critical about viewing empathy as existing only within the empathizing person. Likewise, other researchers have criticized the stress on individuals' ways of functioning in modern psychology (for a review, see Gergen, 1994). As noted by Gergen (e.g. 1994; Gergen & Walker, 1998), an alternative is to use the interpersonal relationship as the basic unit. Other researchers have argued that attitudes and opinions do not exist within people but are constructed in conversations implying that these phenomena must be understood from their functions in social interchanges (Billig, 1991; Potter & Wetherell, 1987). Similarly, empathy can be understood in interpersonal terms such as communication, cooperation, and shared reality.

At a theoretical level there is a lack of a generally accepted framework for ethnocultural empathy. Based on previous research we will point out the need to more clearly identify the essence of ethnocultural empathy and create a platform to guide future research. Even if our contribution is only a first step on the way to such a platform, we want to say something about what might be the essence of ethnocultural empathy and try to pinpoint what distinguishes ethnocultural empathy from general empathy. According to the literature, "general empathy" is empathy between two people where it is unspecified as to whether or not they are from the same culture. Ethnocultural empathy specifically refers to empathy between people from different cultures. We suggest that ethnocultural empathy be defined as *feeling, understanding, and caring about what someone from another culture feels, understands, and cares about*.

To more precisely specify what ethnocultural empathy is we will illustrate by comparison. Ethnocultural empathy can be compared to empathy for the opposite sex in the sense that it is about empathy for another group. One can feel, understand and care about what a person from another ethnic culture cares about, in the same way as one can feel, understand, and care about what someone of the opposite sex cares about. Another parallel is to feel, understand or care about what someone from another generation feels, understands or cares about.

Ethnocultural empathy as well as the other two types of empathy implies the presence of certain differences between the two persons that do not exist in general

empathy. Since similarity of experience is a factor behind empathy (see Eklund, Andersson-Stråberg & Hansen, 2009 for a review) differences are expected to render ethnocultural empathy more difficult as with empathy for the opposite sex or another generation. If one wishes to understand the specific difficulties which exist with empathy between the sexes one needs to identify the similarities and differences between men and women. If one wishes to understand the difficulties which exist with empathy between generations one needs to identify the similarities and differences between generations. Therefore, to understand the barriers that exist for ethnocultural empathy one must understand the similarities and differences between one's own and other cultures.

Based on the above literature review and analysis we wish to identify a number of obstacles to feeling empathy for a person from another culture not present with people from the same culture:

- General lack of knowledge about cultures other than one's own.
- General lack of practical experience of being in cultures other than one's own.
- Lack of knowledge specific to the other's culture.
- Lack of practical experience specific to the other's culture.
- Lack of ability to perceive similarities and differences between the other's culture and one's own.

Perception of Similarity as a Tool for Increased Ethnocultural Empathy

Finally, we would like to point out some possibilities for overcoming obstacles to feeling empathy for a person from another culture. Obviously, knowledge of, and experience with, other cultures should facilitate ethnocultural empathy. Further, we believe that a powerful means of overcoming these obstacles is to be found in the results of a recent empirical study of general empathy (Eklund et al., 2009) to which we now turn.

Eklund et al. (2009) investigated the relationship between empathy and prior similar experience. Participants read four different stories and rated the degree of empathy they felt. Participants also reported the extent to which they had prior similar experience of the events in the stories. Prior similar experience increased empathy for the persons in the stories. Eklund et al. concluded that similar experience may be an important situational antecedent for feeling empathy for another person. Based on these findings, the authors suggested that pointing out similarities among experiences may be a fruitful means of training empathy.

Whereas Eklund et al. (2009) studied empathy in general, we wish to apply this idea to the domain of ethnocultural empathy. We reason that understanding similarities between other cultures and experiences in one's own culture makes empathic understanding possible. At a general, universal level experiences in two different cultures are similar to each other. For example, fear of an earthquake in Japan and fear of flooding in Bangladesh at a general universal level are both the experience of fear. If one has experience with fear in one culture, one can understand fear in another. If one has slept outside and froze one can understand a homeless person's situation; if one has children one can understand a parent's concern (Eklund, et al., 2009).

Hume (1751/1957) asserted that since people are similar to each other and have similar experiences it is possible to feel what another person feels if one imagines how it

would be to be in the other's situation. Recently Hoffman (2000) returned to this idea and argued that similarity of experience contributes to empathy:

Seeing that people in other cultures have similar worries and respond emotionally as we do to important life events, while sitting in the audience and feeling the same emotions, should contribute to a sense of oneness and empathy across cultures (p. 294-295).

In sum, we have tried to suggest a practical tool as well as making a theoretical contribution to the field of ethnocultural empathy. However, there are a number of important questions that must be addressed by future research. For example, is the distinction between general empathy and ethnocultural empathy one of kind or degree? Is intercultural empathy different from intracultural? Is ethnocultural empathy asymmetrical? In other words, are people from certain cultures better equipped or more interested in understanding people from other cultures? If so, will training health care professionals in the importance of ethnocultural aspects as proposed above (e.g., Lawrence et al., 2001) necessarily lead to better treatment or must clients also be taught to feel empathy for the professional? The answers to these questions will have important implications as the number of interactions between people and groups with different cultural and ethnic backgrounds in both informal and professional settings increases.

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