유아의 감정이입과 친사회적 행동과의 관계: 연구의 개념적, 방법론적 문제 분석*

Preschoolers' Empathy and Prosocial Behavior: Conceptual and Methodological Issues

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감정이입은 친사회적 행동의 잠재적 동기요인으로서 발달심리학자들 (e.g., Feshbach, 1978; Hoffman, 1975)로부터 지대한 관심을 받아왔다. 어려움에 처한 다른 사람에 대해 감정이입적으로 자극된 사람은 상호 체험하는 심적 고통(distress)으로부터 벗어난다는 기대에 의해서, 또는 지원적 행위 후에 대리체험할 수 있는 긍정적인 감정에 대한 기대에 의해서, 그 사람을 지원하도록 동기유발 되어질 수 있다(Barnett & Thompson, 1985; Hoffman, 1975). 감정이입과 친사회적 행동 사이의 긍정적 관계에 대한 충분한 이론적 근거에도 불구하고, 그 관련성을 실증하는데 실패한 많은 연구들에서 나타난 개념적, 방법론적 문제들이 본 논문에서 분석되었다.

성인의 감정이입과 친사회적 행동과의 관계에 대한 연구들은 상당히 일관된 긍정적 결과를 제시해온 반면, 아동들, 특히 어린 유아들을 대상으로 한 경우, 명백하거나 쉽게 해석할 수 있는 패턴의 관련성이 확립되지 못했다. 이러한 종전 연구에서의 문제점은 감정이입에 대한 개념적 논쟁 및 측정방법의 어려움에 기인할 수 있다. 감정이입과 친사회적 행동 사이의 실험적인 관련성의 강도는 이 변인들을 측정하기 위해 사용된 방법들의 특성과 제한성에 다분히 의존하는 것으로 보인다. 친사회적 반응에 영향을 미치는 것으로 가정되어지는 다양한 상황적, 동기적 요소들을 감안하여, 유아의 감정이입 능력이 구체적인 사회적 상황에서 작용되는 과정이 보다 면밀하게 연구되어져야 한다.

Introduction

Philosophers (Blum, 1980; Hume, 1966) and psychologists (Aronfreed, 1970; Batson & Coke, 1981; Feshbach, 1978; Hoffman, 1982a; Staub, 1978) have often cited empa- thy as an important mediator of prosocial be- havior. The assumption is that people who vi- cariously experience another's distress, sad- ness, or other such reactions are motivated to alleviate the other's need (Eisenberg, 1988).

A number of empirical studies support the assumption that empathy tends to be positively related to prosocial behavior. Especially among older children and adults, experiencing another's affect predicts subsequent assisting of that person, and empatic persons seem to assist others more than do less-empathic persons. This relation has been noted even among young children, at least when examined through observations in familiar surroundings involving familiar others.

Studies by Radke-Yarrow and Zahn-Waxler (1984; Zahn-Waxler & Radke-Yarrow, 1982) provide evidence that very young children have some capacity for responding empathically to another's need. Babies who are 12 to 18 months old often react in an agitated manner to another's distress (e. g., crying or whimpering). Children 18 months old not only respond emotionally to another's distress, but begin to comfort others who are suffering. In the second year of life, children also begin to share objects and help other people with tasks and chores. By 24 months of age, they are much more likely to attempt to intervene on behalf of the victim of distress by bringing objects, sympathizing verbally, and making suggestions.

However, studies of the influence of empathy on prosocial behavior have yielded inconsistent results, particularly for young children. Reviewing the mixed findings leads to the notion that a complex relationship between empathy and prosocial behavior depends on a variety of factors, including contextual elements. Particularly, empathy is viewed a provocative construct, evoking argument over its Definition and measurement. It appears that methodological as well as conceptual factors account for the variation in results across studies.

Definition of Empathy

Historically, researchers have debated whether empathy is an affective or cognitive construct, or both. Much of the early work on empathy was conducted within the school of social cognition, and was an attempt to contravene Piaget's (1932) views concerning the young child's cognitive egocentrism and inability to consider multiple perspectives. In these early studies, empathy was defined in terms of cognitive social insight, or the cognitive ability to comprehend others' emotions(e. g., Borke, 1971; Dymond, 1949; Buckley, Siegel, & Ness, 1979). The concept of empathy was confused with constructs, variously defined as perspective taking. role taking, social sensitivity, and person perception. Although what empathy is (content) and how it occurs (process) are distinguishable components, they have rarely emerged as distinct issues in empirical research on empathy (Strayer, 1987). Consequently, the early empathy measures were affective in content only, and not in response or process measures. In other words, such tasks examined

the child's awareness of another person's affective state, but did not consider the processes involved, such as vicarious or reciprocal affective arousal, with or without explicit cognitive inference (e. g., perspective taking) (Strayer & Eisenberg, 1987).

In contrast, Mehrabian and Epstein (1972) define empathy as a vicarious emotional response to the perceived emotional experiences of others. This view of empathy as vicarious or shared affect has been supported more recently by several writers and researchers (e. g., Batson & Coke, 1981; Feshbach, 1978; Hoffman, 1975, 1982a; Staub, 1978). In some operationalizations of empathy, elements of both the vicarious matching of emotional responses and concern /compassion for another's welfare (i. e., sympathy) are included (e. g., Bryant, 1982; Davis, 1983; Mehrabian & Epstein, 1972). That is, empathy is considered a vicarious response that often involves sympathetic concern.

Theoretical Models

Social learning theorists such as Aronfreed (1970) propose developmental accounts of the relation between empathy and altruism. In their view, empathy is acquired by a conditioning process, that is, by the repeated pairing of the child's own feelings of pleasure or distress (elicited by external stimuli) with corresponding emotions in others. Likewise,

children behave altruistically because they are rewarded for it. In Aronfreed's (1970) account, although reinforcement is necessary during acquisition, once internalization has occurred, the need for extrinsic rewards may be replaced by intrinsic rewards.

While an affective focus on empathic content and process is clearly conveyed by such developmental psychologists as Feshbach (1978) and Hoffman (1982a, 1984), they insist that an empathic response also involves cognitive skills such as the ability to label another's emotional state or perspective taking. Barnett (1987) highlights the integration of cognitive and affective components in models of empathy development in children. In Feshbach's (1978) three-component model, an empathic response requires (1) the ability to discriminate and identify the emotional states of another, (2) the capacity to take the perspective or role of the other, and (3) the evocation of shared affective response. According to Feshbach, the cognitive and affective components of empathy are complexly intertwined and critical ingredients in a child's enactment of positive social behaviors.

Hoffman's (1975, 1982a) model focuses on the contribution of empathy to the motive to help as a function of various facets of cognitive development. According to his theoretical argument, different developmental levels of empathy result from the interaction of different modes of affective arousal with different levels of social cognition.

As children cognitively differentiate self and other at about 1 year of age or a little later, and are increasingly able to differentiate between their own and others' emotional states, children's assistance may be motivated by concern for another as well as by the desire to relieve their own empathic distress (Hoffman, 1984). That the affect experienced is "more appropriate to someone else's situation than to one's own situation" (Hoffman, 1982b, p. 282) is a major distinction between empathy and direct emotional arousal. With age, children become better able to assist appropriately, and their emotional reactions are more likely to involve sympathetic concern.

Social psychologists (e. g., Piliavin, Dovidio, Gaertner, & Clark, 1981; Batson & Coke, 1981) provide elaborate accounts of the relation between empathy and altruistic prosocial behavior. They attempted to differentiate between two qualitatively distinct motives for helping: personal distress (self-oriented emotions such as anxiety, alarm, or worry) and sympathy (an other-oriented concerned response). In their models, feelings of personal distress, unlike sympathetic arousal, mediate helping only when helping is either necessary or the easiest way, according to cost/reward analysis, to relieve one's own uncomfortable affective state. It is assumed in such models that potential helpers are capable of decision-making based on the cost-benefit analyses and have some intuitive

understanding of the basis of their arousal. In exploring the relation between empathy and prosocial behavior in young children, Eisenberg (1986) indicates that social psychological models may be of somewhat limited usefulness. Very young children might have difficulty even pinpointing the source of their distress. Moreover, young children's helping behaviors may tend to be less controlled by the cognitive calculation of costs and rewards than those of adults.

Conceptual Issues

As shown in the theoretical models, the differentiation between self-oriented and other-oriented emotional responses seems particularly necessary to explain empathy as a motivator of prosocial actions. However, the behaviors that have been considered to be altruistic in most studies are not necessarily truly altruistic in motivation. In most cases of either experimental tests or naturalistic observations, researchers have no way to ascertain whether the individual's prosocial behavior is sympathetically motivated or is a consequence of any number of nonaltruistic considerations (e. g., fear of punishment, hedonistic concerns, need for approval; Eisenberg, 1986). Some of the inconsistent findings in prior research concerning the relation between empathy and prosocial actions may be due, in part, to the difficulty in differentiating between children's empathic

(or sympathetic) responses and other emotional responses such as personal distress (Eisenberg & Miller, 1987).

As stated above, developmental psychologists such as Feshbach (1978) and Hoffman (1982a, 1984) emphasized both affect and cognition, which interact in most phases of the empathy process. However, others (e. g., Rushton, 1980; Strayer, 1987) regard affect as the central defining feature in the discussion of development of empathy. From this view, empathic affect can occur with only minimal cognitive mediation. In other words, extensive cognition would not be necessary to arouse our feelings. Strayer (1987) contends that perspective–taking skills may be necessary when cues are puzzling, or when the other person's reactions do not mirror our own experience. A main point in her view is that cognitive deliberations are part of the empathic process only when affective involvement with the other has occurred.

Empathy has been theoretically linked with perspective taking. Empathy is often considered as a mediator of the effect of perspective taking and as an interface between the cognitive and social domains (Hoffman, 1975; Iannotti, 1978). Interestingly, a study by Coke, Baston, and McDavis (1978) indicates that perspective taking affects helping only as a result of its effect on empathic emotional response. This finding supports the view that taking the perspective of a person in need tends to increase one's empathic emotional response, which, in turn, increases the potential helper's desire to see the other's need reduced (Coke et al., 1978). As Strayer (1987) noted, it remains an empirical question whether perspective taking, itself, is sufficient to prime empathic affect, or whether it acts in the service of empathy only when affect is aroused to direct the perspective-taking deliberations.

Strayer (1987) further states that research may artificially comaprtmentalize cognitive and affective aspects of empathy, which are interacting processes. However, even if agreement has been achieved on affect and cognition as separate but interacting variables in empathy, empirical difficulties still exist, stemming from the view that affect and cognition each in itself is a construct with different measurement indices.

Metheodological Issues

In research studies, a conceptual issue that might influence the degree of empirical association between empathy and prosocial behavior is the index of the emotional response selected (Eisenberg & Miller, 1987). It has been believed by theorists that altruistic prosocial behavior is related to both state empathy (empathy in the given situation) and trait empathy (the consistent disposition to be empathic across situations). However, what is evident from the relevant literature is that state empathy is more closely related

to prosocial behavior than is trait empathy. Peraino and Sawin (1981) found that empathic responsiveness in a given situation was more strongly related to prosocial behavior directed toward the needy other in the same situation (state empathy: for 8 of 18 possible correlations) than to empathic responsiveness in a different, unrelated situation (trait empathy: 6 of 32 correlations). However, in contrast to many studies with adults including both trait and state indices, empathy has been operationalized as a trait in most of the work with children. The difference in method may be responsible in part for age differences in studies exploring the empathy/prosocial link (an inconsistent relation in childhood, a positive association in adulthood).

As previously discussed, a prosocial act expected . to associate with empathy is sometimes one that seems to be motivated by factors other than empathy. Therefore, more serious consideration should be given to the question of when empathy can be expected to relate to altruistic and other modes of prosocial behavior. For example, donating to an organized charity at the office on a yearly basis or in front of one's superiors is less likely to be motivated by empathy than is assisting an individual whose need or distress is clearly visible at a time when no one else is near (Eisenberg & Miller, 1987).

There is another apparent methodological problem found in the literature of the empathy/prosocial behavior association. In several studies, empathy was operationalized as the labeling of a story character's facially expressed and situationally incongruent emotions (e. g., sad expressions at a birthday party; see Iannotti, 1978). Such mixed messages among emotion cues, however, appear to promote confusion rather than empathy in young children. Even when children are old enough to clearly differentiate between their own and another's distress, they may have difficulty interpreting subtle cues that are indicative of another's distress (Barnett & Thompson, 1985). In a study by Iannotti and Pierrehumbert (1985), even though preschoolers are able to identify others' emotions when expression and emotion cues are incongruent, their reported empathy on incongruent trials is low. A study of Pearl (1985) also suggests that explicitness had little effect on the third-graders' recognition of the problem; however, when the cues were explicit, preschoolers' awareness of the problem was greater, as was the likelihood that they would suggest a helpful response. The use of conflicting affective cues may be a help to operationalizing perspective taking, but can be a hindrance to measures of empathy, in which clarity and consistency of cues may be most important (Strayer, 1987). It is therefore implied that particularly for preschoolers, redundant or congruent cues are required so that affective evocation is sufficient to elicit empathic responses.

In most studies concerning the link between empathy and prosocial behavior, empathy has been assessed with one of the following types of measures (Eisenberg, 1986; Eisenberg & Miller, 1987): (1) picture-story indices (individuals' verbal reports or nonverbal pointing responses); (2) self-report scales (questionnaires) specially designed to measure empathy and/or sympathy including items such as "I tend to get emotionally involved with a friend's problems" and "Seeing people cry upsets me"; (3) self-report (usually via pencil and paper measures) of emotional responsiveness in simulated distress situations, after viewing someone in need or distress; (4) other-report (e. g., peers' or teachers') of individuals' empathy/sympathy; (5) observers' ratings of individuals' facial, gestural, and/or vocal (tone of voice) reactions to another's (usually a hypothetical other's) emotional state or predicament; (6) physiological responsiveness (e. g., heart rate, galvanic skin responses) to another's distress; or (7) experimental inductions of empathy.

Researchers have tended to assess children's and adults' empathy with different measures. Picture-story techniques, in which empathy procedures depend upon matching own affect to the affect experimenters ascribe to story characters, have been used mostly with children. The results of studies involving such techniques present an inconsistent, if not somewhat negative, findings of empathy/prosocial behavior relations. Even though picture-story measures are particularly useful when validated for affective content, the weaknesses of these measures have been noted for both the stimulus and response dimensions (Strayer, 1987). In very little research on self-report of children, a weak association between self-report of empathy and prosocial behavior has been found. An interpretation of this finding is that children may have difficulty in veridically asserting and/or reporting their emotional states (Eisenberg & Miller, 1987). Whereas physiological mesures have been used primarily with adults, facial/gestural indices have been used solely with children. The results in studies involving preschoolers' somatic reactions to picture-story indices are inconsistent and vary considerably with sex of child and type of empathic affect (e. g., Howard, 1983; Marcus, Roke, & Bruner, 1985). Although nonverbal measures of empathy such as indices of physiological and facial/gestural responses are less likely to be contaminated by social desirability effects (because they are less obtrusive) than are self-report measures, they also have several potential problems. For example, young children's facial expressions may be difficult to read, whereas older persons' nonverbal responses may not be indicative of their actual feelings (because they are able to purposefully monitor facial expressions) (see Eisenberg, 1986 for a review).

Not surprisingly, many empathy measures do not correlate, and differences in methods yield somewhat different results. Physiological, somatic, or verbal measures of empathy are not equally good measures of empathy across different samples. They also measure separate aspects of and separate kind of empathy. Although the phenomenon of empathy is shared feeling, there may be several phases of the empathic process calling upon several different kinds of abilities (Strayer, 1987). Therefore, what the researchers can conclude is based very much on the limits and properties of their measures. This implies that multimodel measures and methods may be the best route to examining empathy.

Summary and Discussion

The capacity for empathy (defined as vicarious or shared affect) is generally considered a major mediator of prosocial behavior by developmental psychologists. However, the studies involving children have yielded somewhat less consistent findings than those involving adults. Discrepancies in findings are owing either to conceptual and empirical difficulties, or to a weaker link between affect and behavior among the young.

Most writers who have discussed the relation of empathy to prosocial behavior, especially social psychologists (e.g., Batson & Coke, 1981; Piliavin et al., 1981), have focused on the capacities of adults or older children, and thereby have neglected to account for the influence of the dramatic changes in cognitive development in childhood (Eisenberg, 1986). Hoffman's (1975, 1982a) theory is appealing because it views empathy in a broad developmental perspective, changing with increasing age, with advancing cognitive capacities, and with maturation of affective processes (personal distress/empathy/sympathy) (Eisenberg & Mussen, 1989).

Empathy appears to be affected by other skills or intervening variables (e. g., perspective taking, social experience). Even when young children demonstrate high performance on empathy measures, their emotional responsiveness may not be related to prosocial actions in real life situations. In consideration of a variety of factors posited to have an impact on Prosocial behavior (including various contextual and motivational factors), the process by which children's empathic abilities operate in specific social situations needs to be more closely examined. Further, it must be considered that since the acts that have been described as prosocial include a wide range of behavior, they are assumed to be regulated by different mechanisms (Underwood & Moore, 1982).

In brief, although empathy would not be expected to mediate all types of Prosocial behaviors, it is likely that the degree to which empathy is a mediator of prosocial behavior has been underestimated in the empirical

research with young children. If age- and content-appropriate multiple measurements are used, the empirical relations are likely to be stronger in expected directions. By using test batteries rather than single task assessments, the error associated with particular instruments may average out, and the generality of the measure could be enhanced (Eisenberg, 1986; Rushton, Brainerd, & Pressley, 1983).

References

Aronfreed, J. (1970). The socialization of altruistic and sympathetic behavior: some theoretical and experimental analyses. In J. Macaulay & L. Berkowitz (Eds.), Altruism and helping behavior. New York: Academic Press.

Barnett, M. (1987). Empathy and related responses in children. In N. Eisenberg & J. Strayer (Eds.), Empathy and its development. Cambridge University Press.

Barnett, M. & Thompson, S. (1985). The role of perspective taking and empathy in children's machiavellianism, prosocial behavior, and motive for helping. The Journal of Genetic Psychology, 146, 295-305.

Batson, C., & Coke, J. (1981). Empathy: A source of altruistic motivation for helping? In J. Rushton & R. Sorrentino (Eds.), Altruism and helping behavior: Social, personality, and developmental perspectives. Hillsdale, N. J.: Erlbaum.

Blum, L. (1980). Friendship, altruism and morality. London, England: Routledge & Kegan Paul.

Borke, H. (1971). Interpersonal perception of young children: Egocentrism or empathy? Developmental Psychology, 5, 263 -269.

Bryant, B. (1982). An index of empathy for children and adolescents. Child Development, 53, 413-425.

Buckley, N., Siegel, L., & Ness, S. (1979). Egocentrism, empathy, and altruistic behavior in young children. Developmental Psychology, 15, 329-330.

Coke, J., Baston, C., & McDavis, K. (1978). Empathic mediation of helping: A two stage mode. Journal of Personality and Social Psychology, 36, 752-766.

Davis, M. (1983). Empathic concern and the muscular dystrophy telephone: Empathy as a multidimensional construct. Personality and Social Psychology Bulletin, 9, 223-229.

Dymond, R. (1949). A scale for the measurement of empathic ability. Journal of Consulting Psychology, 13, 127-137.

Eisenberg, N. (1986). Altruistic emotion, cognition, and behavior. Hillsdale, N. J.: Lawrence Earlbaum Associates.

Eisenberg, N. (1988). The development of prosocial and aggressive behavior. In

M. Bornstein & M. Lamb (Eds.), Developmental psychology: An advanced textbook.

Eisenberg, N., & Miller, P. (1987). Empathy, sympathy, and altruism: Empirical and conceptual links. In N. Eisenberg & J. Strayer (Eds.), Empathy and its development. Cambridge University Press.

Eisenberg, N., & Mussen, P. (1989). The roots of prosocial behavior in children. Cambridge University Press.

Feshbach, N. (1978). Studies of empathic behavior in children. In B. Maher (Ed.), Progress in experimental personality research (Vol. 8, pp. 1-47). New York: Academic Press.

Hoffman, M. (1975). Developmental synthesis of affect and cognition and its implications for altruistic motivation. Developmental Psychology, 11, 607-622.

Hoffman, M. (1982a). Development of prosocial motivation: Empathy and guilt. In N. Eisenberg (Ed.), The development of prosocial behavior. New York: Academic Press.

Hoffman, M. (1982b). The measurement of empathy. In C. Izard (Ed.), Measuring emotions in infants and children (pp. 279-296). New York: Cambridge University Press.

Hoffman, M. (1984). Interaction of affect and cognition in empathy. In C. Izard, J. Kagan, & R. Zajonc (Eds.), Emotions, cognitions, and behavior. Cambridge, MA: Cambridge University Press.

Howard, J. (1983). Preschoolers' empathy for specific affects and their social interaction. Dissertation Abstracts International, 44, 3954B. (University Microfilms No. DA 8407675).

Hume, D. (1966). Enquiries concerning the human understanding and concerning the principles of morals. Oxford, England: Clarendon Press.

Iannotti, R. (1978). The effect of role-taking experiences on role taking, empathy, altruism, and aggression. Developmental Psychology, 14, 119-124.

Iannotti, R., & Pierrehumbert, B. (1985, April). The development of empathy in early childhood. Paper presented at the meeting of the Society for Research in Child Development, Toronto.

Marcus, R., Roke, E., & Bruner, C. (1985). Verbal and nonverbal empathy and prediction of social behavior of young children. Perceptual and Motor Skills, 60, 299-309.

Mehrabian, A., & Epstein, N. (1972). A measure of emotional empathy. Journal of Personality, 40, 525-543.

Pearl, R. (1985). Children's understanding of others' need for help: Effects of problem explicitness and type. Child Development, 56, 735-745.

Peraino, J., & Sawin, D. (1981, April). Em-

pathic distress: Measurement and relation to prosocial behavior. Paper presented at the biennial meeting of the Society for Research in Child Development, Boston, MA.

Piaget, J. (1932). The moral judgment of the child. London: Kegan Paul.

Piliavin, J., Dovidio, J., Gaertner, S., & Clark, R. (1981). Emergency intervention. New York: Academic Press.

Radke-Yarrow, M., & Zahn-Waxler, C. (1984). Roots, motives, and patterns in children's prosocial behavior. In E. Staub, D. Bar-Tal, J. Karylowski, & J. Reykowski (Eds.), Development and maintenance of prosocial behavior (pp. 81-99). New York: Plenum.

Rushton, J. (1980). Altruism, socialization, and society. Englewood Cliffs, NJ: Prentice-Hall.

Rushton, J., Brainerd, C., & Pressley, M. (1983). Behavioral development and construct validity: The principle of aggregation. Psychological Bulletin, 94, 18-38.

Staub, E. (1978). Socialization by parents and peers and experimental learning of prosocial behavior. In J. Stevens, Jr., & M. Matthews (Eds.), Mother/child, father/child relationships. Washington, DC: NAEYC.

Strayer, J. (1987). Affective and cognitive perspectives on empathy. In N. Eisenberg & J. Strayer (Eds.), Empathy and its development. Cambridge university Press.

Strayer, J., & Eisenberg, N. (1987). Empathy viewed in context. In N. Eisenberg & J. Strayer (Eds.), Empathy and its development. Cambridge University Press.

Underwood, B., & Moore, B. (1982). Perspective-taking and altruism. Psychological Bulletin, 91, 143-173.

Zahn-Waxler, C., & Radke-Yarrow, M. (1982). The development of altruism: Alternative research strategies. In N. Eisenberg (Ed.), The development of prosocial behavior. New York: Academic Press.