

*Full Length Research Paper*

# **Examining the relationship between empathy for others and self-compassion in college students**

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**This study examined the correlation between self-compassion and empathy for others in college students in order to better inform clinical work and outreach programming in university counseling centers. Preliminary analyses indicated that gender identity was a confounding variable; therefore, the main analyses were run distinctly for male and female identified participants. There was no important association between self-compassion and empathy for female identified participants. There was an important connection between self-compassion and empathy for others for male identified participants, indicating that higher self-compassion was linked to lower empathy for others. Possible explanations along with recommendations are given.**

**Key words:** Empathy for others, self-compassion, college students.

## **INTRODUCTION**

The study of empathy continues to develop, in part due to the increasing field of social neuroscience and the technological advancement that enhance studying neural based empathy (Rueckert et al., 2011). Empathy is the capability to take in other people's perspective, and to be able to understand and be aware of their feelings, thoughts, and experiences. Perry et al. (2013) state that empathy is a multi-dimensional construct that has both cognitive and emotional reactions to events experienced by others. Emotional empathy is the inclination to feel what another person feels, while cognitive empathy is the understanding and knowledge of the thoughts and emotions of others without feeling same (Rueckert et al., 2011).

Given that empathy involves the awareness of other peoples' experiences, it is not surprising that it has been

connected to the social and reasoning abilities of emotional intelligence, perspective taking, and self-realization (Taylor et al., 2013). These skills are important for developing and maintaining relationships with others, especially for college students who are forging new social networks and connections. Carlo et al. (2012) found that empathy mediates the relationship between connection with peers and prosocial behavior in college students. Thus, it seems that empathy is important for college students and their interpersonal functioning. This connection is important since perceived social support in college students has been linked to experiencing less mental health difficulties and more resilience to cope with stressful situations (Taylor et al., 2014).

Compassion and empathy have been linked in the literature, where the constructs have been shown to be

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related to, but also different from, one another. Brill and Nahmani (2017) talk about an empathic attitude as being the ability to “be with,” while compassion is to “suffer with.” They focus on the mental element of empathy (that is, how it is an understanding of others’ emotions), while compassion encompasses the whole (emotion, awareness, and action) with the focus on associating with the suffering other (Brill and Nahmani, 2017). Birnie et al. (2010) further distinguish between empathy and compassion by stating while both involve understanding others’ intellectual and emotional suffering, compassion adds the desire to reduce the suffering noticed.

While compassion for others involves understanding and alleviating their suffering, self-compassion encompasses having concern for one’s own pain and viewing one’s difficulties with understanding, nonjudgment, and knowledge that struggle is common to life (Neff, 2003). Further, Neff (2003) describes self-compassion as an emotional guideline plan, where negative feelings are seen as common to all humans. In essence, self-compassion is recognizing that mistakes and challenges are part of human beings and that everyone, including oneself, merit compassion (Neff, 2003).

Self-compassion is connected to interpersonal operations in college students. For instance, self-compassion in college students is positively related to effective interpersonal problem-solving behavior and inversely related to a negative approach to solving problems (Arslan, 2016). Additionally, in a study in which college students were asked to reflect on a situation of relational conflict, higher self-compassion was linked to higher tendency to give in and lower tendency to subsume their needs, plus higher relational well-being (Yarnell and Neff, 2013). Although it seems logical for a positive connection to exist between self-compassion and empathy for others, the limited literature has been varied. For instance, while Birnie et al. (2010) observed that self-compassion was connected to empathy positively, Wei, Wei et al. (2011) did not find a significant relationship. Wei et al. (2011) postulated that their explanation of empathy, not including the elements of common humanity and mindfulness of self-compassion, may have contributed to this lack of relationship. It may also be suggested that those who have high self-compassion could be equally nice to others as they are themselves, while those with low self-compassion tend to be nicer to others than to themselves (Neff, 2003). Thus, those with low self-compassion can be empathetic like those with high self-compassion (Wei et al., 2011).

Low self-compassion is related to mental suffering in college students, including depression (Neff, 2011), sadness, anxiety, anger, and embarrassment (Leary et al., 2007). Self-compassion is a significant mediator between negative life experiences and suicidal tendency, as indicated by depressive sighs and suicidal actions

(Chang et al., 2016). As the distress levels of college students continue to rise and university counseling centers struggle to meet these demands, it is important to reexamine and develop resources that better meet the mental health needs of these college students. The aim of the current work is to further examine the association between self-compassion and empathy for others in college students in order to better inform not only clinical work in university counseling centers, but also to improve their outreach programming.

## METHODS

### Participants

323 students from a mid-size government university in the northeastern United States participated in this study, from whom data were obtained. Their age on average was 18.95 years ( $SD = 2.49$ ), ranging from 17 to 47 years. They were identified as female (221; 68.4%), male (96; 29.7%), transgender (1; 0.3%), gender neutral (3; 0.9%), and gender fluid (2; 0.6 %). They identified their ethnicity as: 3 (0.9%) African, 32 (9.9%) African American or Black, 14 (4.3%) Asian American or Pacific Islander, 238 (73.7%) Caucasian/Non-Hispanic, 19 (5.9%) Hispanic or Latino (a), 1 (0.3%) Native American, 2 (0.6%) biracial, 7 (2.2%) multiracial, and 7 (2.2%) “Other.” They identified their sexual orientation as heterosexual (298, 92.3%), gay/lesbian (6, 1.9%), bisexual (11, 3.4%), questioning (5, 1.5%), and “other” (3, 0.9%). Two-hundred and twenty-one (68.4%) classified themselves as 1st year, 62 (19.2%) as 2nd year, 25 (7.7%) as 3rd year, 12 (3.7%) as 4th year, and 3 (0.9%) as 5th year.

### Measures

#### *Demographic questionnaire*

All the participants were asked to fill in a demographic questionnaire, developed for this study. The questionnaire contains the participants’ age, gender identity, sexual orientation, year in school, and racial/ethnic background.

Self-Compassion Scale (SCS) Neff (2003) is a 26-item self-report consisting of six subscales used for the measurement of global self-compassion dimensions: Mindfulness, Self-Kindness, Over-Identification, Common Humanity, Isolation, and Self-Judgment. A 5-point Likert scale was used to rate the items: 1 (almost never) to 5 (almost always). A lot of the items are reverse-scored; scores of the item are totaled to get a global self-compassion score, in which higher scores indicate greater self-compassion. Neff (2003) showed that the SCS had good convergent and discriminant validity proven by the great negative relation with self-criticism (-0.65) measures and great positive relations with social connectedness measures (0.41) as well as with the Repair (0.55) and Clarity (0.43) subscales of the Trait Meta-Mood Scale, for assessing emotional intelligence. Test–retest reliability for the SCS was 0.93 for more than 3 weeks (Neff, 2003). The SCS internal consistency was 0.92 (Neff, 2003), but was 0.91 in this work.

The Basic Empathy Scale (BES); Jolliffe and Farrington (2006) is a 20-item self-report measure with two factors: Cognitive Empathy (9 items) and Affective Empathy (11 items). The Cognitive Empathy subscale is related to understanding the reason an individual has a kind of emotion (for instance, “I can explain my friend’s happiness

when she/he does something well"); the Affective Empathy subscale shows how other people's emotions are expressed (example, "When close to a friend who is not happy, I always feel unhappy"; Carre et al., 2013). A 5-point Likert type scale was used to rate the items: 1 (Strongly Disagree) to 5 (Strongly Agree). The sum of the ratings for cognitive empathy items and affective empathy items yielded cognitive and empathy scale scores, respectively. The sum of the two subscales yielded a total empathy score. The BES has convergent validity with measures of perspective taking, alexithymia, and openness (Jolliffe and Farrington, 2006). For reliability, internal consistency estimates range from 0.79 for BES Cognitive empathy to 0.85 for affective empathy (Jolliffe and Farrington, 2006). The BES's internal consistency was 0.82 in this work.

### Procedure

This work was accepted by the institutional review board of the university. Solicitation for respondent occurred via psychology courses that made participating in research compulsory. Students selected from different works that they can participate in order to fulfill their requirement. The data were collected and stored online through a secured survey website. Participants consented to get involved after going a consent form online and were then guided with the survey measures. After the survey, a debriefing page informed participants of the hypothesis, method, and logic of the study. They were not given any fund for participating in this study, though students did receive credit toward their research course requirement.

## RESULTS

### Preliminary analyses

Prior to analyses, one participant was removed due to an outlier score on the Basic Empathy Scale. The skewness and kurtosis values for the Self-Compassion Scale and the Basic Empathy Scale fell within the -2 to +2 acceptable range (Lomax, 2001). To test the demographic variables with likely confusing effect on the main variables, a sequence of multivariate regression analyses was done. The demographic factor was the independent factor, while the main variables were dependent in each analysis. The per comparison alpha level was set to .001 to reduce Type 1 error, while at the same time making an estimate of likely confusing impact. In these analyses, gender identity had an important association with self-compassion ( $p < 0.001$ ) and empathy ( $p < 0.001$ ); therefore gender identity was found to have a confounding influence on the primary variables.

### Main analyses

Given these results, we broadened our overall investigation to include variations in the correlations between self-compassion and empathy based on gender identity, which necessitated removal of the six participants that did not identify as male or female due to the low sample size. A one-way between subjects ANOVA was

calculated to make comparison of the mean scores on the Self-Compassion Scale for males and females. The mean score for male participants on the SCS was 3.07 (SD = 0.594), while the mean score for females was 2.81 (SD = 0.608). There was an important effect of sex on self-compassion ( $F(1, 315) = 11.804, p = 0.001$ ). On the Basic Empathy Scale, the mean score for male participants was 71.57 (SD = 8.78), and the mean score for females was 77.57 (SD = 7.76). With one-way between subjects ANOVA, the means on the BES were compared. Gender has significant impact on empathy ( $F(1, 315) = 32.818, p < 0.001$ ).

A Pearson  $r$  was calculated to find the correlation between self-compassion and empathy for both the male and female groups. Based on the sample, there was no great correlation between self-compassion and empathy among female participants. There was a great correlation between self-compassion and empathy among the sample of male participants ( $r = -0.225, p = 0.028$ ), indicating that as self-compassion increases, empathy decreases. A simple linear regression was then calculated to forecast empathy in relation to self-compassion scores, and there was a great regression equation ( $F(1, 94) = 5.006, p = 0.028$ ), with an  $R^2$  of 0.051.

## DISCUSSION

The current work aims to further examine the correlation between self-compassion and empathy for others in college students in order to better inform not only clinical work in university counseling centers, but also improve their outreach programming. The results showed a great correlation with gender identity and self-compassion and empathy for others, which prompted the analyses for this study to be run separately for male and female identified participants. Empathy is being sensitive to individual variation, specifically variation related to gender (Schulte-Ruther et al., 2008; Yang et al., 2009; Derntl et al., 2010; Pavlova et al., 2010). Research using self-report measures has consistently and reliably found that women report having more empathy than men (Baron-Cohen and Wheelwright, 2004; Eisenberg and Lennon, 1983; Lam et al., 2012; Rueckert and Naybar, 2008; Stuijzand et al., 2016). There have been several explanations for this, some highlighting neurological variations between men and women, and the influence of gender roles (Swickert et al., 2016). Swicker et al. (2016) also suggest that age may be an influencing factor; women had higher levels of empathy than men in young adulthood, but that this gender difference starts to converge in older adults.

### Female identified participants

For female identified participants there was no great

correlation relationship between self-compassion and empathy for others. One possible explanation for this result could be that regardless of one's level of self-compassion, one can still experience high levels of empathy for others. Female identified participants in this study had higher levels of empathy for others than the male identified participants, supporting past research (Baron-Cohen and Wheelwright, 2004; Eisenberg and Lennon, 1983; Lam et al., 2012) creating even less of a difference between their levels of empathy. Thus, those with high self-compassion could be equally kind to others as they are to themselves, while those with low self-compassion may be kinder to others than to themselves (Neff, 2003). It is also possible that the "traditional" gender role of women as care-giver, helper, and self-sacrificing (Swickert et al., 2016) may be strongly influencing these participants.

### Male identified participants

There was a great correlation between self-compassion and empathy for others among male identified participants, indicating that as self-compassion increases, empathy for others decreases. One possible explanation for this finding could be the influence of gender roles. Research suggests that men are expected to be individualistic and competitive (Willer et al., 2015), and to care more about social dominance (Stuijzand et al., 2016). These factors do not necessarily facilitate empathic behaviors and indicate more of a focus on self than on others. Another explanation could be related to a study that involved a hypothetical situation of a person who made a mistake and needed assistance (Welp and Brown, 2013). Participants in this study who scored higher in self-compassion endorsed higher readiness to help, yet had low empathy and viewed the person as the cause of his problem. The authors considered empathy as sympathy for the other person, troubled by his situation, and anticipated distress if they were in the same situation. They noted that individuals who are not distressed by their own mistakes are unlikely to be distressed by mistakes of others, and provided two possible explanations for the lack of empathy: (1) self-compassionate participants did not appraise distress in the situation and/or (2) self-compassionate participants have less negative emotional reactivity and the situation did not meet the threshold. Clearly, there are unique nuances in the correlation between self-compassion and empathy.

### Implications for counseling centers

For those that work on university campuses and in college counseling centers, this information can be quite

beneficial to both clinical practice and outreach programming. Counselors in counseling centers may want to pay particular attention to gender identity when addressing self-compassion and empathy with their students both clinically and in outreach programming and workshops. Counseling Centers may consider creating specific interpersonal therapy groups that address self-compassion and empathy based on gender identity, helping female identified students focus on building their self-compassion, while helping male identified students improve their empathy for others. These groups can pointedly acknowledge and discuss gender roles and how these roles impact our beliefs about ourselves and our relationships with others.

Outreach programming can target specific groups, like fraternities, sororities, and athletic teams, and educate them on self-compassion and empathy. Programming may also seek to educate students through their use of technology, as studies have shown that the presence of a mobile device negatively impacts empathic concern and connection with others (Misra et al., 2016). Finally, outreach programs, such as dog therapy visits, mental health awareness days, and de-stress events after a semester is completed, can help to foster connections, help students to see that they are not alone, and show students that they share a common human experience with their peers.

### Limitations

There are limitations to the generalizability of the findings in this work as the data were obtained from a single institution and solely from students taking a psychology course at that university. Another limitation of the study is that those participants who identified with a non-binary gender identity were removed from data analyses due to a low sample size. It will be important for future research to include a more diverse sample and further examine the relationship of empathy for others and self-compassion in those who identify with a non-binary gender identity. Also the use of self-report procedures, which could be controlled by social desirability bias, reference bias, and response bias is a limitation of the study.

### CONFLICT OF INTERESTS

The authors have not declared any conflict of interests.

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