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EMPATHY AS A MAIN CHARACTERISTIC OF CHILD'S AND ADOLESCENT'S SOCIALITY

Abstract

The social life of man is complex and deeply rooted in his personality. The ability to cooperate, to lead, to follow, to negotiate and to care for the other makes the human being what it is. Yet, how exactly we manage to coordinate, understand others' states and intentions and signal our own, still needs clarification. Taking into account the nature of empathy as a potential psychological motivator for helping others in distress, it is logical to consider it a key factor in people's social life.

This study talks about empathy in children and youth as an ability that develops and is learned, but it also has genetic origin. However, the main goal is to examine empathy and its connection with the sociality of children and adolescents. In this direction firstly it will be described the nature of empathy and all factors that influence its creation and development, and then we will associate it with the behaveour of child and adolescent with their peers, that is, with sociality. All findings are based on scientific research and theories in this field.

Keywords: EMPATHY, SOCIALITY, CHILD, ADOLESCENT

Introduction

Empathy can be defined as the ability to feel or imagine another person's emotional experience (McDonald, Messinger, 2011). The ability to empathize is an important part of social and emotional development, affecting an individual's behaviour toward others and the quality of social relationships. Researchers distinguish between two types of empathy, especially in social psychology, empathy can be categorized as an emotional or cognitive response. According to Hodges and Myers (Hodges, Myers, 2007) *emotional empathy* consists of three separate components: the first is feeling the same emotion as another person, the second component, personal distress, refers to one's own feelings of distress in response to perceiving another's plight, and the third emotional component is feeling compassion for another person. The third component is the one most frequently associated with the study of empathy in psychology. It is important to note that feelings of distress associated with emotional empathy do not necessarily mirror the emotions of the other person. For example, while empathetic people feel distress when someone falls, they are not in the same physical pain. This type of empathy

is especially relevant when it comes to discussions of compassionate human behaviour, on the other hand, the feeling of empathic concern is related to the willingness to help others. According to Hodges and Myers many of the noble examples of human behaviour, including aiding strangers and stigmatized people, are thought to have empathic roots.

The second type of empathy is *cognitive empathy*. This refers to how well an individual can perceive and understand the emotions of another. Cognitive empathy, also known as empathic accuracy, involves having more complete and accurate knowledge about the contents of another person's mind, including how the person feels (Hodges, Myers, 2007). Cognitive empathy is more like a skill: humans learn to recognize and understand others' emotional state as a way to process emotions and behaviour.

Most authors (Kim, Rohner, 2003; Eisenberg, 2000) defined empathy as an essential factor for making social life possible in that it provides the motivational base for specific prosocial acts, such as helping and comforting others, sharing, turn taking, and cooperating. In general, empathy is a special ability to understand the emotions of others and to sympathize with them, but this ability is largely learned and developed from birth throughout life. It should be emphasized that the very nature of empathy makes people sociable and desirable as mates.

Development of empathy in children and adolescents

Early theorists suggested that young children were too egocentric or otherwise not cognitively able to experience empathy (McDonald, Messinger, 2011). However, a multitude of studies have provided evidence that very young children are, in fact, capable of displaying a variety of rather sophisticated empathy related behaviours (Zahn-Waxler, Radke - Yarrow, Wagner, Chapman, 1992). The study of Grossman (Grossman, 2018) shows that such other-oriented emotional processes play an important role in guiding prosocial behaviour from early in development. For example, even after birth, new-borns who are exposed to the sound of another baby often showed tearful reactions of anxiety, a phenomenon called *reactive or reflexive crying or emotional contagion* (Simner, 1971). This suggests that the reactions of the new-born to the crying of another new-born are not just reactions to the sound of crying, but they can be very early precursors to the emotional reaction. The specificity of reflexive crying to the sounds of other infants' cries supports the idea that there is a biological predisposition for interest in and responsiveness to the negative emotions of others. However, during the second year of life, with the development of the differentiation of oneself and the other, the taking of a view and emotional regulation, it seems that there is a transformation of concern for oneself in an ability to worry about others (Knafo, Zahn-Waxler, Van Hulle, Robinson, Rhee, 2008). By the third

year of life, young children were capable of a variety of empathy related behaviours, including expressing verbal and facial concern and interest in another's distress, and continued to engage in a variety of helping behaviours.

Empathy typically has both *emotional and cognitive components*, although these components can be experienced separately (McDonald, Messinger, 2011). *Emotional empathy* is the vicarious experiencing of another's emotional state, which, as stated above, children may experience in some form as early as infancy and toddlerhood. In contrast, cognitive empathy, which is also sometimes referred to as theory of mind or perspective taking, is the ability to accurately imagine another's experience. As children enter the preschool and elementary school years, there are significant gains particularly in the area of cognitive empathy. This is partially because the children's increased language capacities facilitate empathic reflection, as well as the measurement of such empathic abilities. Eisenberg and colleagues (Eisenberg, Guthrie, Murphy, Shepard, Cumberland, Carlo, 1999) conducted a longitudinal study on the stability and consistency of prosocial responding. In this study, multiple measures of prosocial behaviour, empathic concern, and perspective taking were measured at various time points from approximately 4 to 20 years of age. Prosocial behaviour was measured through observation at the children's preschool and at the laboratory, as well as self, parent, and/or friend report, depending on the time point (Knafo, Zahn-Waxler, Van Hulle, Robinson, Rhee, 2008). Empathy related responding (e.g., empathic concern and perspective taking) was measured through self, and friend report, at intermediate time points. Early prosocial behaviour, specifically, observed spontaneous sharing, predicted later prosocial dispositions, with empathy related responding appearing to partially mediate this relation. This suggests that empathy may be conceptualized as part of a larger prosocial personality trait that develops in children and motivates helping behaviours into young adulthood. In addition, in Knafo and colleagues' study (Knafo, Zahn-Waxler, Van Hulle, Robinson, Rhee, 2008) that investigated early empathy development (previously discussed), positive longitudinal correlations were found for both cognitive and affective components of empathy in young children's responses to simulated distress in their parent and a stranger.

These studies investigating the stability of empathy show stable individual differences from early childhood into adolescence and adulthood, and it precedes the formation of a "prosocial disposition". In a longitudinal study of twins, both genetic and environmental components were implicated in the development of empathy (Zahn-Waxler, Robinson, Emde, 1992).

Genetic factors

There are many studies where empathic ability is explained with biological or genetic factors like temperament of the child. As temperament is

thought to be present from birth and thus have biological foundations, individual differences in empathy based on temperament may, in part, reflect genetic influences on empathy development (Young, Fox, Zahn-Waxler, 1999). Rothbart and colleagues (Rothbart, Ahadi, Hershey, 1994) found that fearfulness in infants predicted parent reported empathic concern when the children reached school age. Similarly, children nominated by their pre-school teachers as being behaviourally inhibited (shamefully withdrawn) showed higher levels of parent-rated guilt and empathy than uninhibited children, irrespective of the type and quality of parenting they experienced. These divergent findings suggest that behaviourally inhibited children may display higher levels of empathic behaviour in familiar contexts, which is captured in the parent reports; they may, however, be less likely to respond to another's distress in an anxiety inducing unfamiliar situation. Reactivity as a factor of temperament (or introvert-extrovert dimension), or the degree to which one physiologically responds to stimuli in their environment, has also been associated with empathy (Young, Fox, Zahn-Waxler, 1999).

Environmental factors

The environmental factors in childhood are parents and school friends. Children enter the stage of intimate mutual sharing. Society is seen as a collaboration that benefits everybody and is considered an exclusive and possessive relationship. For example, the child who invited a friend to play in his home, and that already plays with another child, is likely to hurt him (Miller, Perlman, Brehm, 2007). But at this stage, the turbulence in commerce is overcome and loyalty and responsibility for comradeship is expected. Confidence, empathy and verbal resolution of conflicts are very significant.

The developmental trends of interpersonal relationships that have begun in middle childhood which include development of empathy continue in adolescence. The most characteristic change that occurs in teenage years is the less time spent with the parents, and time spent with peers is increasing, almost twice as long (Miller, Perlman, Brehm, 2007). The second change is that adolescents are more and more focused on comrades to meet the needs and to empathize with them, which is very important in that period of life. On the other hand, parental control is reduced compared to the previous period when parents can still monitor and do monitor the social interaction of the child. During this period of life, the differences between the need for dependence and the need for individuality are being understood and harmonized. Also, the need for intimacy and support of friends is highly expressed (Youniss, Smollar, 1985; Sharabanu, 1994). Adolescence is a period of emotional and cognitive maturation, a period when a child begins to understand both his/her and other people's emotions. Thus, the basis of adolescence is

reciprocity, discussion and mutual understanding (Youniss, Smollar, 1985; Sharabanu, 1994). That is why adolescents often discuss problems, experience problems, analyse emotions, and so on. That is why empathic adolescents are chosen more as best friends.

Parenting and empathy

As is already known, parents and caregivers have a significant socializing influence on infants and toddlers, from where it follows that parenting would influence the early development of empathy. Research in this area shows that parents' sensitive responding to child distress can facilitate children's empathic capacity (Cornell, Frick, 2007). One aspect of parent-child interactions that is particularly relevant to the study of empathy development is the level of synchrony between parent and child. Synchrony is a time-overlapping behaviour between partners in the relationship, as confirmed in the conclusions of the longitudinal study of the relationship between early synchrony mother-new-born and later empathy in children and adolescents (Zhou, Eisenberg, Losoya, Fabes, Reiser, Guthrie, Murphy, Cumberland, Shepard, 2002). Children may, to some degree, internalize others' feelings and experiences through the simulation of others' emotional expressions and actions during imitation (Hess, Bourgeois, 2010). In addition, parents match their infants' affect i.e., *affective synchrony* during interaction. This may provide children with two important experiences: on the one hand, it may lead children to feel that another, the parent, can feel what they feel, on the other hand, it may provide children with an understanding that their own emotionally motivated actions can influence another. All that may promote the feelings of efficacy necessary for acting on a desire to help others (Garner, 2003).

In general, maternal warmth has been found to be an important factor in promoting empathy development. Toddlers and children who had parents who were observed to display more warmth toward them during a variety of interactions in their home and in a laboratory setting tended to be more empathic (Davidov, Grusec, 2006). The way that parents talk to their children about emotions also appears to affect empathy development, the degree to which parents direct their children to label emotions is associated with children's emotional concern for others; the degree to which parents provide explanations concerning the causes and consequences of emotions is associated with more attempts by the child to understand others' emotions (Grusec, Hastings, 2007).

Finally, as was previously noted, we know that when children learn to be empathetic early in their development, it can lead to much stronger empathic abilities later in life, as they become adults, and treat others with kindness, respect, and respect understanding. In that sense, the more moth-

ers and children are aligned and affecting each other's behaviour during face-to-face in early childhood, the more the child expresses empathy in childhood and adolescence (Eisenberg, McNally, 1993). As a result, empathetic children can become empathetic parents, spouses, associates and friends.

On the other side, deficits in empathic capacity may not only reduce prosocial responding but may also make antisocial behaviour more likely. Individuals who cannot reflect on and identify with other persons' feelings and mental states will not experience guilt or discomfort as a consequence of hurting others (Fonagy, Target, Steele, Steele, 1997). Indeed, Bowlby's first empirical paper, which focused on the etymology of juvenile delinquency, drew linkages between early experiences of lack of a consistent, supportive caregiver and the development of an "affectionless" personality and delinquent behaviour (Boulby, 1944, according to Eisenberg, Fabes, 1993).

Although the connection between parental acceptance and emotional empathy often appears fairly apparent, the mechanisms that produce this connection have not been clearly identified. Here, parental acceptance-rejection theory (PAR Theory) might help explain the connection. PAR Theory is a theory of socialization that attempts to predict and explain major antecedents, consequences, and other correlates of parental acceptance and rejection (Rohner, 2008). PAR Theory's personality subtheory postulates that children and adults everywhere—regardless of differences in culture, race, gender, socio-economic status, and other such defining conditions are predisposed to develop a specific constellation of personality dispositions as a result of experiencing varying degrees of parental acceptance or rejection. More specifically, PAR Theory postulates that humans everywhere have a fundamental, phylogenetically acquired need for positive response from people most important to them. This positive response includes the need for warmth, affection, care, nurturance, support—that is, for love—from parents and other attachment figures. Depending on the extent to which the need is satisfied, that is the extent to which individuals perceive themselves to be accepted or rejected by parents and other attachment figures, humans are expected to develop a specific cluster of positions, including positive or negative self-esteem, positive or negative self-adequacy, emotional responsiveness or unresponsiveness, emotional stability or instability, friendship or hostility, realistic view of the problem or aggression, passive aggression or problems with the management of hostility and aggression, dependence or healthy independence, defensive independence, and positive or negative worldviews. In addition, rejected children are expected to feel anxious and insecure in their relationship with their major caregivers (Rohner, 2008). Of course, all positive behaviours and feelings have an empathetic background, while negative ones have a deficiency thereof.

Parent-child relationship quality

Other factors that appear to influence empathy development are indices of quality of the parent-child relationship. In the first place is the child's attachment to their parent or the relationship quality. Securely attached children display behaviours consistent with a trusting, loving relationship with their parent. Kochanska (Kochanska, 2002) has explored a specific quality of parent-child relationship, termed *mutually responsive orientation* (MRO), which is associated with the development of child conscience, including empathy. MRO is defined by maternal responsiveness and shared positive affect between parent and child. In other words, young children with more responsive parents were more likely to respond empathically to a person in distress. It is theorized that children whose early development is embedded within these warm and responsive dyads will more eagerly embrace their parents' values and be more likely to develop a strong conscience, which is thought to be due to a shared working model of a cooperative relationship (Kochanska, 2002).

In studies where adolescents examined in terms of positive emotional communication with the mother, as a quality parental interaction, adolescents were more willing to take a foreign viewpoint, and the viewpoint of the mother. In addition, maternal positive emotional communication was associated with high empathy in girls and low personal distress in boy's adolescents (Eisenberg, McNally, 1993).

Internalization of rules

The ability to empathize with others' distress may be an important factor in learning right from wrong. Kochanska and colleagues undertook a set of seminal studies of the development of conscience and moral behaviour (Kochanska, Forman, Aksan, Dunbar, 2005). Moral emotions (i.e., empathic distress and guilt) and rule compatible conduct were both conceptualized to be indices of developing conscience. Empathic distress was measured by children's responses to a stranger's simulated distress, while guilt was measured by children's responses to a stranger's distress due to a personally caused mishap (i.e., the child was led to believe he or she damaged a his/her possession). Children who displayed more guilt in response to wrong behaviour and empathic distress in response to another's distress were also more likely to follow given rules (e.g., clean up toys) in the absence of supervision (Aksan, Kochanska, 2005). So, from a very early age, there appears to be an association between empathy, as experiences of other focused emotions, and the internalization of rules. This suggests that empathy, in concert with guilt, may play a part in children's learning of right and wrong (Oxley, 2011; Parker, Rubin, Price, 1995).

Empathy and socialization

If empathy is seen in the context of socialization and behaviour modification, in the education process, one in which children value things like care, compassion, and community, it can be valued as essential feature for socialization. Empathy is not always connected with altruism, but rather seen as a skill needed for making friends, for resolving conflicts, for good parenting, and for becoming a kind and compassionate person (Cooper, 2011). Insofar as empathy is taught as an ability to detect others' emotions, to learn how another person thinks or feels, or to understand others in a deeper way, it is taught as an epistemic skill or ability necessary to acquire sensitive knowledge about others. To emphasize others is the epistemic functions of information-gathering and understanding others, and it is integral to empathy. Even if empathy is often biased in favour of those who are most similar to oneself, than people can learn to expand the range of people and emotions they empathize and with which they are not similar, and doing so will enable them to develop other kinds of desirable responses to them (Berndt, Savin-Williams, 1989).

In addition to being associated with helping and moral behaviour toward others, the ability to empathize is also associated with social skills. In their review, Eisenberg and Miller (Eisenberg, Miller, 1987) found that higher levels of empathy in children were associated with more cooperative and socially competent behaviour. Other researchers have also found that children with higher empathy for positive and negative emotions are more social competent (Saliquist, Eisenberg, Spinrad, Eggum, Gaertner, 2009). In these studies, social competence was measured by parent and teacher ratings of socially appropriate behaviours and popularity. Developing empathy in school is very important especially having in mind inclusive education today. The educational literature on child with special needs and on pastoral care for others has made evident the importance of emotional support and growth fostered by empathy (Best, 2000).

Relationship quality with others

The ability to empathize also seems to be important for relationship quality, in part, by facilitating the maintenance of meaningful relationships. More specifically, empathic concern and perspective taking were associated with the attachment dimensions of trust and of comfort with interpersonal closeness, in regard to adult romantic relationships (Cramer, 2003). In a relevant study, when children reported greater empathy in response to a story, they placed characters from the story physically closer to themselves; this suggests that empathy may motivate a desire for increased interpersonal closeness (Strayer, Roberts, 1997). As well, empathy for one's partner, perspective taking, and dispositional empathy have been associated with romantic

relationship satisfaction in adults, which is important for relationship maintenance (Davis, Oathout, 1987).

In summary, the ability to empathize is important for promoting positive behaviours toward others and facilitating social interactions and relationships. Empathy is involved in the internalization of rules that can play a part in protecting others, and, significantly, it may be the mechanism that motivates the desire to help others, even at a cost to oneself. In addition, empathy plays an important role in becoming a socially competent person with meaningful social relationships.

Conclusion

Empathy is broadly marked or corresponded to plausible sociality especially in children and adolescents, and also it has been said that empathy is crucial to development of social competence and enhances the quality of meaningful relationships. Empathic children and adolescents have abilities for qualitative relationships. Empathy can be both an emotional and a cognitive experience. The ability to empathize begins at an early age, with infants as young as eighteen hours showing some responsiveness to other infants' distress. During the second year of life, toddler's responses to others' distress typically transform from an overwhelming personal distress reaction to a more other oriented empathic reaction. Over time, toddlers become capable of rather sophisticated helping behaviours. As children reach the preschool years, significant developments occur in cognitive empathy. There is evidence to suggest that early dispositions toward empathy and prosocial behaviour may be consistent and stable over time. The ability to empathize develops with contributions from various biologically and environmentally based factors. These factors include: genetics (temperament), environmental factors, social learning – imitation, child parenting factors such as warmth, parent-child synchrony, and other qualities of the parent-child relationship (Rothbart, Ahadi, Hershey, 1994).

If it is considered that socialization of emotion is crucial factor for child's sociality, empathy is the most important emotion for connection with others in a positive way that many of the behaviours associated with are the most adaptive of. Its forms are also closely related to parental responsiveness, warmth, and control (Eisenberg, Zhou, Spinrad, Richard, Fabes, Liew, 2005). The students with high empathy are most popular in the class and they are possible to be best friends, or to have many friends in the school and outside of it (Шурбановска, 2018).

And finally, what is the connection of empathy with sociality in children and adolescents? If it is considered that the socialization of emotions is a key factor for child's sociality, empathy is the most important ability to connect with the emotions of others in a positive way. In fact, there is one saying

among the people "grief is smaller when it is shared and understood by friends, and happiness is greater when it is shared and understood by friends".

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