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# Evaluating the relationship between empathy and shame

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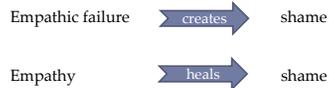
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# Evaluating the relationship between empathy and shame

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## Introduction

The relationship between empathy and shame is complex. Some research suggests that empathy might heal shame (Morrison, 1987; Nichols, 1991), while other findings imply that the lack of empathy or empathic failure can create shame (Morrison, 1987; Nichols, 1991).



The theory behind projective measures assumes that individuals project aspects of themselves onto relatively ambiguous stimuli. With that in mind, the use of a projective measure might allow for various aspects of an individual's personality to be projected onto the same stimulus. In the case of a projective storytelling task with the Thurston-Cradock Test of Shame (TCTS; Thurston & Cradock O'Leary, in press), an individual might express aspects of both empathy and shame. Given that empathy tends to heal shame (Morrison, 1987; Nichols, 1991), it might mediate the negative impact of shame in such stories.

A previous qualitative and theoretical study (Betts, 1999) evaluated the presence of empathy on card 10 of the TCTS among 92 protocols (49 incarcerated sexual offenders (SO) and 43 nonclinical adults). While Betts found that SO were three times as likely to have no empathy on the TCTS, and that 90% of the SO responded with spoiled empathy, his study had some methodological limitations. Betts' study was not double blind and he did not utilize rigorous statistical analyses.

The present study sought to further explore the connection between empathy and shame using a quantitative method with a larger set of protocols, and more complex hypotheses.

## Method

### Sample

TCTS protocols (N=164) from a previous study (Cradock, 1999) were rescored to with experimental categories including empathy on card 10. Participant protocols were divided into two groups, those whose stories contained empathy scores (N = 79) and those whose stories did not (N = 85).

### Measure

The TCTS is a card-based projective measure for which subjects provide stories including a beginning, middle, and end, and characters' thoughts and feelings. Stories are recorded verbatim, and behavioral observations are noted. Stories are usually rated for shame (direct, indirect), shame defenses utilized (deflation, aggression, inflation/contempt), resolution (highly adaptive, adaptive, unresolved/ambivalent, maladaptive, highly maladaptive), and response style to testing (personalization, laughter, word production).

Criteria for new experimental scores, such as empathy, were determined by TCTS test authors.

### Procedure

Scorers for experimental scores were blind to study hypotheses, consistent with the double-blind procedure utilized when the data were originally collected.

### Hypotheses

As compared with participants without empathy scores, participants with empathy scores were expected to have:

1. More adaptive resolutions
2. More unresolved resolutions
3. Less maladaptive resolutions
4. Less inflation/contempt defense scores

## Results

Analyses of variance evaluating group differences in story resolution (adaptive, unresolved, and maladaptive) were nonsignificant, as were differences in inflation/contempt defense scores. Thus, research hypotheses were not supported. Levene's statistic was significant for unresolved resolution (Levene = 7.62,  $p < .01$ ), but nonsignificant for other hypotheses

Variance on maladaptive resolution was significantly less among participants reporting empathy, and means approached significance ( $p = .09$ ). Levene's analysis was nonsignificant.

An exploratory analysis found that individuals without empathy scores had stories displaying more shame-based aggression towards vulnerable figures ( $F(1, 162) = 4.4$ ,  $p < .05$ ; Levene = 3.85,  $p = .05$ ).

## Conclusions

This quantitative review of empathy was limited to results for TCTS card 10. Thus, our nonsignificant results may be related to limited data. It would be useful to rescore all cards for the presence of empathy and retest study hypotheses. Additional intra-card and intra-subject analyses might provide clearer insight about the complex relationship between shame and empathy.

The use of standard SPSS analyses "can seriously lower the power of standard ANOVA and regressions methods", according to Erceg-Hurn and Mirosevich (2008; p. 593); they propose use of Winsorized variances or robust statistical procedures such as ZumaStat to minimize these problems. In the absence of more robust procedures for this study, we may have underestimated true differences. Future research may employ such procedures.

Greater variability for those not showing empathy may suggest a mixture of admission and denial among this group.

While not an original hypothesis, the finding that individuals without empathy scores displayed more shame-based aggression to vulnerable figures is not surprising. If one is feeling shame, suggested by the shame-based score, and cannot experience empathy for another, projecting anger outward might provide temporary relief from uncomfortable affect.

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During this study, the TCTS was in development. The final published version may contain revisions.

When the original protocols were collected, the first two authors were affiliated with the Graduate School of Psychology, Fuller Theological Seminary, Pasadena, CA.

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