



EMPATHY, OPTIMISM AND PESSIMISM AMONG TEENAGERS AT DESTITUTE HOMES

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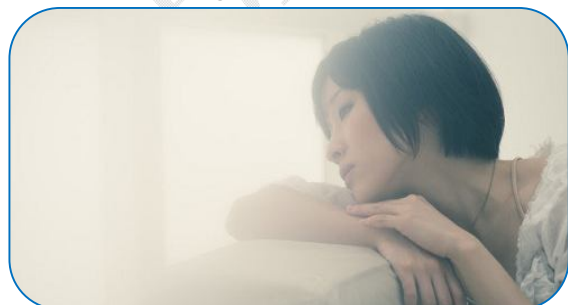
ABSTRACT :

To be empathetic and understanding is an art that everyone must learn. When we learn to look at things from their situation and analyse, there is clear picture of the situation. Behaving with empathy gives more social acceptance and wellness for oneself. It also avoids many misunderstandings between individuals and groups. The current study explores the association between empathy, optimism, and pessimism among teenagers. The study is based on exploratory research design and sample was collected using purposive sampling technique using survey method. The sample consisted of both boys and girls between the ages of 13 - 16 years. The assessment tools employed were the Toronto Empathy Questionnaire and the Life Orientation Test. The correlation, t test, and regression analysis were used for analyses of data. The results indicated a positive association between empathy and optimism. There also exists no significant gender difference among the sample in the variables of the study. Empathy was found to be a predictor for optimism.

KEYWORDS : Empathy, Optimism, Pessimism, Teenagers .

INTRODUCTION

In today's world a lot of children are under circumstances that force them to stay away from home due to education or several other reasons. Those on their own possess enough time and space to build their personalities with their life experience. Being a pessimist or an optimist plays an important role in determining who you are as a person in both general and personal aspects. They also develop empathy towards their fellow companions who undergo through the same situation of staying away from home. Being empathetic not only helps their companions but also themselves in situations where they sometimes need their companion's empathy towards them. It's safe to say that they develop a sense of being a family within themselves given their situation. Apart from being empathetic to fellow companions and other human beings, one must also feel the same towards other beings and nature. The day when one of us is alright with seeing another suffer or nature being destroyed is the day we partially lose bits of humanity in us, which majorly contributes to being empathetic. Being empathetic generally starts from an early age, as a child, even the slightest of abnormalities to another person or another being that has a role in their life



brings about an impact in the child in general cases. Being optimistic or pessimistic is a major game changer in a child's life. A child's basic understanding of being optimistic or pessimistic solely relies on what they have been taught in their younger age. The dictionary meaning of empathy is 'the ability to understand another person's feelings, experience, etc.' (Oxford Advanced Learner's Dictionary, 2018). According to the Cambridge dictionary empathy refers to 'the ability to

share someone else's feelings or experiences by imagining what it would be like to be in that person's situation' (Cambridge Dictionary, 2018). The empathy can be defined as the ability to sense other people's emotions, coupled with the ability to imagine what someone else might be thinking or feeling (University of California, 2018). There are three types of empathy one is affective (emotional) empathy which refers to the sensations and feelings we get in response to others' emotions; this can include mirroring what that person is feeling, or just feeling stressed when we detect another's fear or anxiety. The second one is cognitive empathy sometimes called "perspective taking," refers to our ability to identify and understand other people's emotions (University of California, 2018). The third one is compassionate empathy which refers to understanding someone's feelings and taking appropriate action to help (SkillsYouNeed.com, 2011). This research will paint a picture of how things work with children away from home. And will give us the base to what we can work with when there is an issue with children away from home. The above topic will be focused mainly on optimism and pessimism, the level of empathy that an individual has, and to what extent they are being helpful to themselves and the study.

REVIEW OF LITERATURE

Various studies have been conducted on empathy. Sallquist et al. (2009), through study wanted to examine a new measure of children's dispositional positive empathy (i.e., reactions to others' positive emotions) and its concurrent and longitudinal relations with positive emotion, social competence, and empathy/sympathy with negative emotions. At Time 1, 192 3.5-year-olds (88 girls) participated; at Time 2, 1 year later, 168 4.5-year-olds (79 girls) participated. Children's positive emotion was observed at both assessments. There was evidence of reliability of the new reported measure of positive empathy. Additionally, there were numerous positive relations between positive empathy and social competence and between positive empathy and empathy/sympathy with negative emotions. This study provided unique insight into children's positive empathy and relations to socio-emotional functioning. Williams et al. (2009), examined the measurement equivalence of the Youth Life Orientation Test (YLOT) in children with cancer (N = 199) and healthy controls (N = 108), and to examine optimism and pessimism as predictors of children's health-related quality of life (HRQL). Results indicated that there were no differences in mean levels of optimism and pessimism between cancer patients and controls after controlling for race/ethnicity. Higher optimism was associated with lower self-reports of pain and better emotional/behavioural functioning, whereas pessimism was related to poorer mental health and general behaviour, and greater impact on the family. Boman et al. (2003) undertook a study with 102 students in their first year of high school who responded to questionnaires assessing their levels of dispositional optimism and pessimism, explanatory style and anger in relation to the school setting. It was found that male students with helpless explanatory styles were more likely to experience higher levels of anger intensity and were more likely to resort to destructive school behaviour. Male students with a pessimistic disposition were also more likely to report higher levels of school hostility and destructive school behaviour. For females, helpless explanatory style and dispositional pessimism were related but the overall level of anger intensity did not appear to relate to destructive and aggressive behaviour. Albery and Messer (2005) studied comparative optimism. Little is known about comparative optimism in children or about the wider social- cognitive processes that underpin their health-related behaviour. The study investigated comparative optimism for health- and non-health-related topics in 101 children 8 or 9 years of age, the youngest ages investigated so far. Children were shown to be unrealistically optimistic for health and non-health events. Lemola et al. (2011), carried out a study to test the relationship of objectively measured sleep quantity and quality with positive characteristics of the child. Sleep duration, sleep latency and sleep efficiency were measured by actigraphy children's optimism, self-esteem and social competence were rated by parents and/or teachers. Children with sleep duration in the middle of the distribution scored higher in optimism compared with children who slept relatively little. Shorter sleep latency was related to higher optimism. The associations remained when adjusting for child's age, sex, body mass index, and parental level of education and optimism. In conclusion, sufficient sleep quantity and good sleep quality are related to children's positive characteristics. Luger et al. (2009)

investigated psychosocial factors, such as dispositional personality and social relationships, and investigated their influence on the well-being of 160 older adults with OA (80 per cent women). Results showed that, both cross-sectionally and longitudinally, pessimism was related to lower social support and higher social strain. In addition, pessimism was mediated by social support in its relationship to life satisfaction. Dadds et al. (2008) carried out a study focused on the development and validation of a brief parent-report measure of child empathy targeted at the formative years for the development of empathic skills, through to adolescence. The Griffith Empathy Measure, adapted from the Bryant Index of Empathy was used. Consistent with theoretical accounts of empathy, it was found to include affective and cognitive components that showed divergent associations with other aspects of child functioning. Dziobek et al. (2008) conducted a study focused on individuals with autism spectrum. generally, it believed that people with autism spectrum lack empathy. The study used a new, photo-based measure, the Multifaceted Empathy Test (MET), which assessed empathy multidimensional in a group of 17 individuals with Asperger syndrome (AS) and 18 well-matched controls. Results suggested that individuals with AS are impaired in cognitive empathy, they do not differ from controls in emotional empathy. Gilet et al., (2013) through a study aimed to validate a French version of the Interpersonal Reactivity Index (IRI), a self-report questionnaire comprised of four subscales assessing affective (empathic concern and personal distress) and cognitive (fantasy and perspective taking) components of empathy. To accomplish this, 322 adults (18 to 89 years) completed the French version of the IRI (F-IRI). The findings confirmed the reliability and validity of the F-IRI and suggest that the F-IRI is a useful instrument to measure self-reported empathy. In addition, we observed sex and age differences consistent with findings in the literature. Women reported higher scores in empathic concern and fantasy than men. Older adults reported less personal distress and less fantasy. Baron-Cohen and Wheelwright (2004) employed a new self-report questionnaire, the Empathy Quotient (EQ), with adults of normal intelligence. The Study 1 employed the EQ with $n = 90$ adults (65 males, 25 females) with Asperger Syndrome (AS) or high-functioning autism (HFA), who are reported clinically to have difficulties in empathy. The adults with AS/HFA scored significantly lower on the EQ than $n = 90$ (65 males, 25 females) age-matched controls. Of the adults with AS/HFA, 81% scored equal to or fewer than 30 points out of 80, compared with only 12% of controls. In Study 2 we carried out a study of $n = 197$ adults from a general population, to test for previously reported sex differences (female superiority) in empathy. This confirmed that women scored significantly higher than men. The EQ reveals both a sex difference in empathy in the general population and an empathy deficit in AS/HFA

METHODOLOGY

Objectives: The main objectives of the present study are to measure empathy, optimism and pessimism, to find the association between empathy with optimism and pessimism and to identify the gender differences in empathy, optimism and pessimism. **Hypotheses:** Based on the objectives the following hypotheses were formulated. There will be a significant association between empathy and optimism. There will be no significant association between empathy and pessimism. There will be no significant gender differences in empathy, optimism and pessimism. **Sampling Procedure:** Purposive sampling method was adopted to conduct this study. Later normality test was done for further analysis. The sample includes youth both male and female in the age range 13 – 16 years. They were all residents of three destitute homes in TamilNadu. The exploratory research design was used. **Tools of Data Collection:** The tools used were as follows: (i) Toronto Empathy Questionnaire by Spreng, (McKinnon, Mar, & Levine, 2009) - This questionnaire consists of 16 questions, each rated on a five-point scale from 'never' to 'often'. The questionnaire has indicated to have a high internal consistency, convergent validity, construct validity, and test-retest reliability (Cronbach's $\alpha = .85$). Scoring: Item responses are scored according to the following scale for positively worded Items 1, 3, 5, 6, 8, 9, 13, 16. Never = 0; Rarely = 1; Sometimes = 2; Often = 3; Always = 4. The following negatively worded items are reverse scored: 2, 4, 7, 10, 11, 12, 14, 15. Scores are summed to get the total score. (ii) The Life Orientation Test - Scheier, (Carver & Bridges, 1994) - The test is a 10-item measure of optimism versus pessimism. Of the 10 items, 3 items measure optimism, 3 items

measure pessimism, and 4 items serve as fillers. Respondents rate each item on a 4-point scale: 0 = strongly disagree, 1 = disagree, 2 = neutral, 3 = agree, and 4 = strongly agree. LOT-R is a revised version of the original LOT (Scheier & Carver, 1992). The original LOT had 12 items: 4 worded positively, 4 worded negatively, and 4 fillers. Items 3, 7, and 9 are reverse scored (or scored separately as a pessimism measure). Items 2, 5, 6, and 8 are fillers and should not be scored. Scoring is kept continuous – there is no benchmark for being an optimist/pessimist. Test-retest reliability was 0.72, varying across gender, race, ethnicity, education, employment and income. Criterion validity was strong; the LOT-R was significantly negatively correlated with hopelessness ($r = -.65, p < .001$) and depression ($r = -.60, p < .001$).

RESULTS

Collected data were analysed using computer. The findings of the study are as follows.

Gender differences among the variables

Table - 1: Mean scores and the level of significance of the variables on the basis of gender

Variables	Gender	N	Mean	SD	t value
Empathy	Male	53	35.25	6.847	0.169 p>0.05
	Female	59	35.05	5.325	
Optimism	Male	53	11.89	2.309	0.667 p>0.05
	Female	59	11.59	2.342	
Pessimism	Male	53	10.49	2.399	1.068 p>0.05
	Female	59	10.00	2.457	

Independent sample t test was used to analyse the gender differences among the variables of the study. From the t value it is very clear that there is no significant gender difference among the three variables namely, empathy, optimism and pessimism. Contrary to the results of this study, a study by Toussaint and Webb (2005), on 127 community residents stated that women are more empathetic than men, while both are not different in forgiveness. And also, empathy was associated with forgiveness with men but not in women. The reason for these results might be due to the change in the attitude of people in this century and the fore coming years are not gender biased. Both male and female are equally competent and efficient in their own ways. Even then there are a few studies which state that females have more empathy, emotional empathy than men. These may be due to the common traits that a women and men possess naturally. Thus, the hypothesis stating "There will be no significant gender differences in Empathy, Optimism and Pessimism" is accepted.

Relationship between the variables: In this analysis the relationship between the variables viz., empathy, optimism and pessimism were calculated.

Table - 2: Correlation between Empathy, Optimism and Pessimism

Variables	Empathy	Optimism	Pessimism
Empathy	1	.257**	-.099
Optimism		1	.000
Pessimism			1
** p < 0.01			

Pearson Product Moment Correlation method was computed to find the association between Empathy with Optimism and Pessimism. From the table it can be noted that empathy is significantly associated to optimism at 0.01 levels, whereas with Pessimism there is no significant association. It is found

that an individual who is highly empathetic is also high in optimism and one who is less empathetic is less in optimism. Thus, the two variables are interdependent. The two variables either increases or decreases for a person. At the same time, pessimism is not related to empathy significantly. Hojat et al. (2015) in a study on medical students for the underlying construct of optimism, empathy and burnout have indicated a positive relationship between empathy, optimism, and personal accomplishment. These findings support the results of the present study. There are also other investigations that emphasis on enhancing empathy and optimism to improve academic achievement. The act of kindness makes us to feel energetic and positive. When a person practices the habit of putting themselves in other's place and takes effort to understand their situation, they become more matured and positive. At the same time the person on the other side also feels happy and develops a good impression about the person being empathetic. An empathetic person naturally avoids many misunderstandings and conflicts. Thus, the hypothesis stating "There will be a significant association between Empathy and Optimism" is accepted. And the hypothesis "There will be no significant association between Empathy and Pessimism", is accepted.

Impact of empathy on optimism: In order to find out the impact of the optimism the researcher used regression analysis.

Table - 3: Impact of empathy on optimism

Variable	Unstandardized Beta	S.E of B	Standardized Beta	t value
Constant	8.279	1.257	-	6.584 p< 0.01
Empathy	.098	.035	.257	2.787 p< 0.01

Linear regression analysis was done to find the cause and effect of empathy and optimism. Since a high correlation was computed between empathy and optimism, further analysis was done to predict the effect. Keeping optimism as the dependent variable and empathy as the independent variable the analysis was carried out. From the results it is evident that optimism is predicted by 66% ($R^2 = 0.066$) of empathy. In other words, optimism is influenced by 66% of empathy and the remaining 34% are the various other factors like environment, friends, and age and so on.

CONCLUSION

The importance of being empathetic is very obvious from the study. As all the variables of positive psychology are interrelated to each other, the enhancement of any one of the traits like hope, resilience etc. would have a positive impact on the other traits. The development of all these traits would in turn contribute to the happiness and well-being of a person. Thus, the habit of being empathetic for an individual is very important.

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