

Exploring the role of empathy in psychotherapy



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In psychotherapy three aspects are identified as imperative to ensure a therapeutic climate that facilitates growth and change. These aspects include genuineness or congruence, an attitude of unconditional positive regard and empathy or empathic understanding. Each aspect plays a complementary role to one another and once integrated provides a mechanism through which self-actualisation can be reached. Empathy is a key indicator of a therapists ability as a facilitator in a therapeutic relationship and if genuinely and accurately displayed can result in a powerful means of assisting the client (Meyer, Moore, & Viljoen, 2003; Tolan, 2007).

This discussion explores the role of empathy in psychotherapy through identifying the components intrinsic to empathy, their role in creating a truly empathic environment, the use of empathy in psychotherapy and the possible effects empathy can have when displayed in an effective manner. The basis from which empathy will be explored is a Rogerian person-centred psychotherapeutic context as empathy is regarded as necessary for the process of psychotherapy in this context. Although empathy is recognised in majority of psychotherapeutic theories, client-centred therapy or Rogerian psychotherapy provides the most holistic and thorough view of the role of empathy in psychotherapy.

Definition of concepts

In understanding the role of empathy in psychotherapy it is of utmost importance to identify the concepts that manifest in the discussion.

Identifying and defining these concepts allows for an exploration of each

within the context of psychotherapy. In so doing, the role that empathy plays in this context can be explored and comprehensively analysed.

Psychotherapy

Psychotherapy is a complex subject with no definitive description. The lack of precise definition could be due to this concept being regarded as adaptive and dynamic in that each definition would illustrate the underlying perspective utilised by the author of that definition. A generic definition of psychotherapy would entail a therapeutic relationship where two or more persons are involved in a formal relationship with a therapist. The relationship is defined on the basis of one or more parties seeking psychological assistance from the therapist in an attempt to overcome emotional discomfort (Corsini, 1984).

Psychotherapy, from a Rogerian perspective, views the client as the central proponent of the therapeutic process. The client is regarded as their own change agent and the therapist, the facilitator of the change process. The process of change in Rogerian psychotherapy is deemed necessary in an attempt to resolve emotional discomfort – the goal of psychotherapy. The therapist achieves and maintains their facilitative role through being a participant observer whom adopts a non-directive and empathic stance whilst providing unconditional positive regard to the client and mediating a process of self-actualisation within the client (Meyer et al., 2003; Vorster, 2003).

An operational definition of psychotherapy, for this discussion, entails a therapeutic process which is focused on the interactions between persons

involved in the therapy situation. The non-directive manner in which the therapy is conducted enables the client to reach a level of self-actualisation and empowers the client in managing their own life stressors.

Empathy

According to Tolan (2007) empathy is a means of demonstrating, through communication, that someone is heard and understood. It is the “ capacity to think and feel oneself into the inner life of another person” (Kahn, 1991, p. 93). In the context of psychotherapy, empathy involves perception of a clients experience from their internal frame of reference and the communication of this perception to the client in order for the client to feel as though the therapist understands them from their perspective (Kahn, 1991; Rogers, 1980; Tolan, 2007). Empathy does not involve a sympathetic stance on which to understand the client but rather delves into the clients inner experiences in an attempt to create a vicarious experience of the clients world through the clients eyes. In addition, empathy does not entail experiencing the identical emotions and feelings as the client, but rather experiencing the emotions and feelings with the client. In colloquial language, empathy is often regarded as stepping into someone else’s shoes (Parrott, 1997).

Operationally defined, empathy or empathic understanding, in a psychotherapeutic context, refers to a therapist perceiving a client’s experience, understanding the corresponding emotions of that experience and conveying this understanding to the client in a manner that will enable the client to feel entirely understood and heard. It can therefore be said that

empathy entails experiencing “ with, rather than for or about the client” (Brammer, Abrego & Shostrom, 1993, p. 98).

Empathy versus sympathy

The concepts empathy and sympathy are often used interchangeably and synonymously, however this is an incorrect evaluation of these concepts. Sympathy is a superficial attempt at grasping what a person is feeling whilst empathy is a deep understanding of a person’s experiences, cognitions and feelings in certain situations. A good analogy as illustrated by Parrot (1997) is that “ sympathy is standing on the shore, seeing a person struggling in the water and throwing out a life-ring, [whilst] [e]mpathy ... is jumping into the water and risking one’s own safety to help the struggling person” (p. 29). Sympathy is not sufficient in assisting a client through facilitative change and should be avoided in a psychotherapeutic context. Empathy, on the other hand, is highly beneficial in psychotherapy and should be developed and maintained in this context (Parrott, 1997).

Empathy and psychotherapeutic approaches

Research findings from a study conducted by Ranskin (in Rogers, 1980) suggests that majority of therapists, from a wide range of psychotherapeutic perspectives, acknowledge empathy as one of the most important facets of psychotherapy. However, in practice these therapists opt rather for cognitive or behavioural approaches in their therapy sessions and do not develop their empathic abilities optimally (Rogers, 1980). This is reiterated in an article by Feller and Cottone (2003) who state that empathy, as a construct, has received a great deal of support across a wide range of theoretical approaches, including but not limited to the psychoanalytic, self-psychology, <https://assignbuster.com/exploring-the-role-of-empathy-in-psychotherapy/>

client-centred, existential, cognitive and behaviour approaches. The differences emerge in the view of prominence or sufficiency of empathy in psychotherapy. Some approaches view empathy as a mere aspect which is used as a tool in psychotherapy, whilst others view empathy as a powerful means of facilitating change in a person or system (Feller & Cottone, 2003). Thus, although empathy is acknowledged in the majority of psychotherapeutic approaches it does not occupy the same role in each approach.

The role of empathy in psychotherapy

Carl Rogers identifies the importance of psychotherapy in the acknowledgement of the persons involved and the relationship between those participating in the therapeutic relationship rather than the method or technique used to conduct the therapy. In order to acknowledge the dynamics of the therapeutic relationship empathy must be conveyed to the client(s) (Meyer et al., 2003).

Empathy is based on the phenomenological approach to reality, where human beings, as a species, perceive and make sense of the world around them through their own lenses. Reality is not regarded as fixed and clear cut for all to experience identically, but rather as an individual subjective experience. This subjective experience is understood and shared through communication and interaction (Tudor, Keemar, Tudor, Valentine & Worrall, 2004; Vorster, 2003). Empathy provides a mechanism from which to tap into another person's subjective experience or perception, which for that person is reality. It is due to this belief that empathy is regarded vital in understanding a client from their worldview (Clark, 2004; Tudor et al., 2004).

Empathy is a cognitive, emotional and experiential skill, where the therapist uses a variety of means in an attempt to constantly remain with the client and vicariously experience the client's world in order to genuinely understand reality as the client perceives it. In dissecting this statement to create a better understanding of empathy one could acknowledge that empathy can be enhanced through training, especially if the trainers are genuinely empathic or provide a sensitive understanding during the training sessions. In addition, training sessions often encourage student therapists to practice the skill of empathy. The underlying notion is that the more practice one gets at developing their proficiency in empathy, the more capable the person becomes at providing empathy and integrating this skill into their way of being. Training implies that empathy is a skill that can be cognitively developed and experientially enhanced. The emotional component of empathy, on the other hand, relates to the aptitude of the therapist to identify, with relative accuracy, the inner feelings of a client (Rogers, 1980; Tolan, 2007).

A critical analysis of empathy and its role in psychotherapy reveals the multidimensional nature of empathy, the various facets that form part of empathy and the diverse roles that empathy can play in a psychotherapeutic relationship. The following discussion demonstrates the various facets of empathy and the role that empathy plays in the context of psychotherapy.

The role of listening and communication in empathy

Empathy is a vital element which forms an integral part of psychotherapy as it provides a mechanism in which to grasp an understanding of the client's frame of reference in a meaningful way. Empathic understanding allows the

therapist to “sense the client’s private world as if it were [their] own, but without ever losing the “as if” quality” (Kirschenbaum & Henderson, 1989, p. 226). Sensing the client’s world in an empathic way is achieved through active and highly attentive listening in which the therapist enters the client’s internal frame of reference by acknowledging the client’s experience and sharing the emotions of the client vicariously. In so doing, the therapist is able to fully comprehend their client’s experience, perceptions, values and feelings (Kirschenbaum & Henderson, 1989; Rogers, 1980).

However, merely listening actively and attentively to the client is not sufficient in displaying empathy. The understanding must be conveyed to the client in a meaningful way. This suggests that the manner in which an understanding is communicated is an essential feature of empathy. The empathic communication should be conveyed in line with the client’s abilities to comprehend the message precisely and internalise the empathic response as accurate. Similarly, communication without attentive listening or perception does not demonstrate an understanding of the client. Mere communication with a client may indicate to the client that the therapist is not hearing them accurately and may create distance between the client and the therapist (Kirschenbaum & Henderson, 1989; Rautalinko, Lisper, & Ekehammar, 2007; Rogers, 1980; Tolan, 2007).

The role of listening and communication in empathy contributes to the role of empathy in psychotherapy in that once a client perceives and accepts empathic reflections from a therapist, the client feels understood. This understanding enables the client to grasp the meanings of their own

experiences more concretely, tune into their own feelings more acutely and provide themselves with a greater degree of empathy (Rogers, 1980).

The role of non-verbal information in empathy

It is imperative that empathic reflections are not merely restatements of what the client has said, as this form of reflection will not enable the therapist to move forward and deeper into the client's frame of reference. Parroting the client's expressions will keep the therapist at a surface level of understanding. It can therefore be said that although parroting the client's content may assist in some instances (Brodley, 1998), restatements are not entirely effective in displaying empathy and may demonstrate that the therapist does not truly understand the client's worldview (Mackay, Hughes & Carver, 1990; Parrott, 1997; Tolan, 2007). Empathy involves more than listening to the content the client is expressing and regurgitating this information back to the client, it reaches beyond the meaning and recognises the nuances in the person's speech and encourages the therapist to appreciate the amount of significance the client attaches to the subject being discussed (Tudor et al., 2004).

Empathy involves a comprehensive and holistic analysis of a variety of sources of information available to the therapist. The information can include, but is not limited to the client's tone of voice, tempo of speech, degree of hesitation, words used, facial expressions, posture, eye contact, attitude towards you as the therapist, emotions, previous information given by the client and sensed meanings beneath the expressed content. Considering all the information available to the therapist during a psychotherapeutic session may enable the therapist to delve deeper into the

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client's world and create a more meaningful picture of what the client is genuinely experiencing. When a therapist uses the additional information to create understanding and combines this awareness with the content description given by the client a much more meaningful level of understanding is reached (Mackay et al., 1990; Parrott, 1997; Tolan, 2007).

The manner in which the empathy is reflected is of great importance. The content of the reflection is an important factor however the additional information mentioned above can also be actively demonstrated by the therapist toward the client. Therefore, it is of vital importance that the therapist conveys their empathic reflection congruently and meaningfully. The therapist should be aware of their pace of voice, rhythm of speech and consistency in language deliverance as well as their non-verbal indicators (Tolan, 2007). Should the therapist be aware and in control of all of these facets within themselves, the client is more likely to register the empathy displayed as a genuine understanding of the client. This implies that even if the empathic reflection is completely accurate, if it is delivered in an incorrect manner it will lose its meaningfulness and may even be interpreted, by the client, as inaccurate.

Furthermore, the manner in which the therapist manoeuvres throughout the therapy session is of utmost importance as the continual signalling of non-verbal information in the relationship between the client and the therapist determines the dynamics of the session. As the therapist is continually attempting to remain in the client's frame of reference and sought through the information available in the interaction, the client is experiencing the therapist and responding to the therapist at all times. Vorster (2003) refers <https://assignbuster.com/exploring-the-role-of-empathy-in-psychotherapy/>

to this constant interaction or responding between the client and therapist as an input-output relationship, which demonstrates the constant attempt of the therapist to understand the client. Should the therapist display any level of incongruence in the relationship, this may jolt the client and the client may respond in a specific way, usually by withdrawing from the therapist. The therapist should be constantly and consistently aware of the nature of responses or effects that they have on the client and that the client has on them. If the client is continually being jolted and distance is being created it is an indication that the therapist is not staying in the client's frame of reference and is thus not displaying empathy effectively (Tolan, 2007).

The components of empathy demonstrate that empathy comprises more than a skill in listening and communicating, but is an attitude or way of being that should be developed and internalised by the therapist. In order to be truly empathic, the therapist “ must have developed beyond thinking of themselves, so they are capable of understanding another's point of view” (Mackay et al., 1990, p. 66). In addition to an attitude, empathy stems from the ability to acknowledge an assortment of observable behaviour (as previously mentioned) and integrate the information in a meaningful way to ensure the person is truly heard and accepted (Brodley, 1998). This hearing is often deeper than the words the person is expressing and can display a personal meaning that may even be beyond the conscious intent of the client. This integrative understanding deepens the meaning of the empathy and encourages the client to fine-tune their empathic understanding of themselves. If all the facets of empathy are combined, the psychotherapeutic goal of facilitative change is highly probable (Mackay et

al., 1990; Rogers, 1980). The role of empathy, when viewed as an integrated whole, extends beyond psychotherapy and denotes a means for the client to attend to themselves in their everyday lives (Rogers, 1980).

The role of congruence and unconditional positive regard in empathy

In order for empathy to be of optimal effectiveness in psychotherapy it is of vital importance that the therapist demonstrates the empathy with a high level of congruence or genuineness. Congruence can only be achieved if the therapist accepts the client completely and punctuates from a non-judgemental stance. To accept entirely, the therapist should ensure that they provide the client with unconditional positive regard which is often displayed through continual displays of empathy (Meador & Rogers, 1984; Parrott, 1997). The concepts congruence, unconditional positive regard and empathy should be considered along a continuum and not as right or wrong. In addition, these concepts are to be viewed as mutually exclusive and are not regarded as sufficient components for successful psychotherapy if viewed individually. Each of these concepts should be developed in a manner which allows for integration of the concepts as each is ineffective on its own but highly complementary and effective as a holistic approach (Kahn, 1991; Tudor et al., 2004).

In order for a therapist to reach a skill level that provides optimal empathic understanding and inscribes affectivity, it is of vital importance that the therapist explores his or her “ own inner experiencing and [allows] the quality of his [or her] inner experiencing to be apparent in the therapeutic relationship” (Meador & Rogers, 1984, p. 143). Once this inner experiencing

is reached, the therapist provides a high level of congruence in the therapeutic situation. Once the therapist has achieved and developed the skills of unconditional positive regard and congruence at an optimal level, the therapist is able to immerse themselves in the client's frame of reference more effectively and truly experience the client's world through the client's worldview (Meador & Rogers, 1984). The therapist makes a conscious decision to dissociate from their own frame of reference and to punctuate from that of their clients. It is at this point that empathy may be regarded as a powerful therapeutic tool in psychotherapy (Rogers, 1980). Congruent empathy will enable the client to move forward with the therapy and explore their situation, enabling the client to resolve emotional discomfort through the acknowledgement of feelings. Furthermore, congruent empathy will prevent a repetitive cycle where the therapy remains at a superficial level (Brodley, 1998). Regarding unconditional positive regard in relation to empathy, the rationale for effectiveness, as demonstrated by Traux and Carcuff (1964, cited in Brammer et al., 1993) "the greater the degree of the therapist's accurate empathic understanding of the client, the greater the degree to which the therapist shows unconditional or nonpossessive warmth ..." (p. 97).

Congruence and non-possessive warmth, as characteristics of an environment which displays empathy, enables client's to view themselves as accepted. Acceptance of oneself promotes caring for oneself and enables the client to bring about a positive change in their attitudes towards themselves. The combination of the three elements ensures solidarity in the client-therapist

relationship allowing a client to actualise their potential constructively (Rogers, 1980).

The role of client acceptance of empathic reflections

Acceptance of the empathic reflection is a key indicator of the therapist's ability to grasp the client's internal frame of reference. Once empathy is perceived by the client as being genuinely accurate, the client accepts the therapist more freely and acknowledges the facets of their experience more concretely (Kahn, 1991). Accuracy, in this context, refers to the therapist's ability to view the client's experiences as the client views them (Tudor et al., 2004). Acknowledgement of the empathic understanding allows the client to move forward with the therapy as a sense of being understood is perceived and the client is able to deal with their experiences more effectively (Kahn, 1991).

Acceptance of empathic reflection may elicit a range of responses from the client. The responses include verbal acknowledgement of the empathy as well as an assortment of non-verbal behaviour. Should the therapist be perceptive to these responses, they may be aware of empathy being genuinely present and that the client is being completely understood. Empathic reflections, however, do not imply empathy, rather the empathic reflection is the communication variable of the empathic understanding and should be seen as an aspect of empathy (Feller & Cottone, 2003).

It is important to note that if a reflection is not entirely accurate, the client is able to clarify the reflection or to contemplate and disregard the reflected feeling. This does not ascribe ineffectiveness as it may enable the client to

discover their true feelings and explore their emotions. In addition, clarity allows the therapist to demonstrate their attempts at understanding and allows the therapist an opportunity to alter their responses (Kahn, 1991; Rogers, 1980; Tolan, 2007). It can therefore be said that compassionate and congruent empathy is open to correction and should not be regarded as a definitive but rather as a tentative exploration of a client's world (Tolan, 2007).

Empathy as a mechanism for catharsis

According to Rogers (1980) “ a high degree of empathy in a relationship is possibly the most potent factor in bringing about change and learning” (p. 139). Demonstrating a comprehensive understanding and sincerely conveying this understanding to the client is the process through which to reinforce behaviour that may bring about change. Empathy is often acknowledged for its cathartic effect in a helping relationship in which relief or expression of distressing emotions is regarded as a method of healing and not that of breakdown. Catharsis is recognised as an overt expression of emotion by the client, for instance crying, which allows a release on built up tension within the client. This release is considered cathartic since the client tends to overcome the tension and in its turn reduce the distressing emotion. Once the client has released the tension, a degree of healing is experienced by the client (Heron, 2001; Parrott, 1997).

Catharsis can be considered an important role of empathy in psychotherapy as it demonstrates healing and release within the client. In addition, catharsis may indicate a relationship between the client and therapist that displays unconditional positive regard and congruence. If the relationship

encourages free expression, the client is often more willing to share experiences and the therapist is able to enter the client's deeper emotional realm more effectively (Kirschenbaum & Henderson, 1989; Parrott, 1997). In addition, empathy gives the client the impression that they are "worth understanding [and] that their inner hopes and private fears have value" (Parrott, 1997; p. 196). Demonstrating worth to the client makes the client feel comfortable and increases the likelihood of them reflecting on and taking responsibility for their emotional distress (Kirschenbaum & Henderson, 1989; Parrott, 1997).

Another important facet of empathy relates to the clients ability to explore their experiences beyond the context. Accurate displays of empathy in the therapy session can lead to continual reflection on the emotional experience as well as providing additional insight into the client's experiences by the client between therapy sessions. Thus, empathy has the ability to extend the process of healing beyond the therapeutic context (Tolan, 2007).

Empathy as a means of challenging a client

An empathic environment can challenge a client in various ways. These challenges come as subtle manoeuvres by the therapist who uses empathy as a means of enabling the client to explore their experiences, confront their struggles and acknowledge distorted perceptions freely (Rogers, 1980; Tolan, 2007).

The following example illustrates the way in which challenging a client, through empathy, could occur: if a client who has experienced an immense trauma (the death of a partner) indicates that the negative emotion (crying)

that is often associated with the trauma is a flaw, defect or sign of weakness, an empathic understanding and acknowledgement of this struggle and a demonstration of the person's sadness can be communicated.

Acknowledgement of the struggle may indicate, to the client, that they are genuinely accepted and understood in this environment. The empathy displayed in this context would challenge the client's view of the negative emotion, in turn the client may become more aware of the distorted view and may begin to alter their perception (Tolan, 2007).

It is of utmost importance to note that the challenges should be minor in nature, if they are too great or obviously communicated, the client may reject the challenge and view the reflection as a misunderstanding or even as threatening. The therapist should always remember that the client is the central proponent and is the final judge in their inner world (Brodley, 1998; Tolan, 2007).

The role of empathy as a means of challenging a client is regarded, by the author, as being of significant value in psychotherapy. The challenge is a means to demonstrate to the client that they can accept certain views and adapt certain ideals that they hold intrinsic to them. This is not to say that challenging a client through the use of empathy forces change, but rather provides an alternative way of viewing attitudes or perceptions. The main aspects related to challenging a client are regarding negative perceptions of certain emotional responses and facilitating a change in these perceptions. This may be very powerful in progressing through the process of psychotherapy.

Empathy as a component of reaching optimal functioning

A high level of empathy creates an environment where the client feels freedom to articulate themselves completely without having inhibitions or restraints on their expressions. An environment that is comfortable for the client to explore areas of their inner selves openly, creating an atmosphere of trust and openness within the relationship. Once the client explores aspects of themselves in this manner, discoveries are made to which the client may respond, usually through cathartic behaviour, in a constructive fashion that promotes positive change within him- or herself. Through the psychotherapeutic process, the client may realise his or her potential and strive towards it (Kahn, 1991).

Rogers regarded empathy as having a curative effect on the client in a therapeutic process. The underlying assumption regarding the cathartic effect of empathy is that is that once a client truly feels heard and understood they are better able to reach a potential of self-actualisation where the client's view of the ideal self is brought closer to the client's view of the real self. The actualising potential is reached when the client's self concept is at a level of optimal functioning (Brammer et al., 1993).

When a client feels entirely understood and heard they may begin to accept a change in themselves and the way they view their world, thereby encouraging self-direction. Recognising a feeling or experience and bringing this to conscious awareness through empathic understanding allows the client to deal more efficiently with the emotions and the dilemma they are faced with and in so doing become more competent and adept in understanding themselves (Tolan, 2007; Tudor et al., 2004).

Critical discussion of empathy in psychotherapy

Empathy is related to the positive outcome of psychotherapy for a client, this can range from a person with severe psychosis to one with no clinical manifestations (Rogers, 1980). However, in the author's opinion it should be reiterated that the therapist must be constantly aware of the meaning the client is attaching to the empathic understanding and should adapt the process of psychotherapy accordingly. The positive outcome of empathy in psychotherapy is due to a number of factors including empathy as a mechanism for reducing feelings of alienation, encouraging feelings of value and acceptance within the client, eliciting feelings of being heard and understood and facilitating change whereby a client can direct the flow of their own experiences. These consequences demonstrate that empathy is of great value and use in all helping relationships and should not be confined to the boundaries of psychotherapy (Rogers, 1980).

Conclusion

The role of empathy in psychotherapy is multidimensional and highly complex in nature. A comprehensive understanding based on the exploration of empathy includes a process of the inner experiencing of another individual's world from that person's perspective with a feeling of comfort in this world, which enables the therapist to move discretely through this world, vicariously experiencing what the client is experiencing with no elements of judgement. It is an attempt to comprehend the inner workings of the person in order to sense the facets of that person's world that may be below conscious interpretation, without attempting to uncover unconscious feelings. It includes a way of being that seeps into aspects of the therapist's

everyday life, which cannot simply be shut off. However, in order to be truly effective, especially in a psychotherapeutic environment, this way of being and sensing must be communicated in order to create surety for the client that you are a companion in their journey of self-discovery and that you, as a therapist, is constantly attempting to grasp an understanding of their world in its entirety (Rogers, 1980).