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Empathy in Helping Professions: A Scoping Literature Review

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Empathy in Helping Professions: A Scoping Literature Review



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Abstract: Weak empathy results in a lack of destructive behaviour in social life, intolerance, and discrimination. Empathy is a more comprehensive and profound concept than conventional empathy. This study is a *scoping literature review* that aims to identify what is known about empathy in *helping professions*. A systematic search was conducted on electronic databases, namely ScienceDirect, PubMed, Scopus, Journal Nasional, and Taylor and Francis, studies from 2010-2025. Data analysis used PRISMA-ScR (*Preferred Reporting Items for Systematic Reviews and Meta-Analyses*). The results of the study were mapped based on the following criteria: conceptualisation of empathy, factors in the development of empathy, and research on the development of empathy, and data analysed based on content analysis. The research findings show that applicable to various fields of helping professions. Factors that can influence empathy are divided into constructive empathy development, including altruism, cooperation, compassion, morality, justice, and happiness. However, destructive empathy development is related to ability, feelings, people, individuals, capacity, pain, social behaviour, and deficits. Research on empathy has developed significantly, especially in the fields of health and psychology, using quantitative research. However, further analysis is needed to develop a conceptual analysis of empathy that focuses on other fields of expertise in a more specific and comprehensive manner, taking into account the aspects, factors, and validity of empathy.

Key Words: Empathy; Helping professions; Empathy development; Scoping literature review; Conceptual models

INTRODUCTION

Empathy is a person's ability to accurately understand another person's internal frame of reference and the emotional components and meanings associated with it. This explanation illustrates that empathy is a social component in society that includes interpersonal skills (Keskin, 2014). Thus, it can be said that humans need other people to help them survive, and their ability to "read" people will increase their chances of survival. Human survival requires at least two important skills related to empathy. Position empathy as both a psychological construct and a crucial competence for helping professions, *First*, humans must be able to pick up on signs of fear from others (Falsafinejad & Moatamedi, 2019). *Second*, humans must be aware that their off spring have needs that must be taken care of, so it is necessary to follow up on them with attention (Bayne & Jangha, 2016).

Empathy is essential for human survival and cooperation, a number of studies show that students with high empathy development exhibit various behaviours that are considered positive and prosocial: *altruism, cooperation* (Cuff et al., 2016), *compassion* (Welp & Brown, 2014), *morality*, and *justice*

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(Potter, 2020) There is even research showing that empathy is related to happiness (Moatamedi & Falsafinejad, 2020).

Based on the studies and research results described above, it can be understood that empathy is a determinant of individual success, but the impact of weak empathy can lead a person to engage in destructive behaviour, such as violence against partners (Teo, 2011), bullying (Gini et al., 2007), sexual violence (Solomon, 2013), and psychopathology in general (Kokkinos & Kipritsi, 2012). At the social level, a lack of empathy has been linked to genocide and ethnic cleansing (Jolliffe & Farrington, 2006). Therefore, empathy is a crucial issue to be studied and examined in greater depth because it has a major impact on the social dimensions that support a person's life. However, the conceptual development of empathy is rarely discussed, especially for the personal development of students/counselees. Emphasise why strengthening empathy is a critical educational and social priority because research results from 2014 to 2024 show that empathy research has shifted towards studies or dimensions of learning, abilities, attitudes, and social skills that are important aspects of communicating with others. Empathy has become the subject of research in various articles discussing ideas, concepts, literature reviews, and practical applications.

In the dynamics of its theoretical development, the development of empathy has focused more on the context of professionalism in the field of medicine (Holt, 2020; Raab, 2014). Professionalism in the medical field refers to the relationship between doctors and their patients, whereas in the context of guidance and counselling, it refers to the therapeutic relationship between counsellors and clients, as conceptualised by Carl Rogers (Duarte et al., 2016). Theories and models of empathy in the fields of medicine and health sciences focus more on counsellors in hospitals who deal with patients, but empathy can also be shifted to the counselling process in educational practice between counsellors and counselees, so that guidance and counselling become an integral part of the development of empathy.

Thus, an in-depth contextual study of empathy is still difficult to crystallise. Based on the explanation of the research findings above, empathy is an important basic concept, but it is still difficult to find its development in students as a crucial aspect of social life. Thus, the findings of the dynamics of the development of this theory raise several issues: 1) weak conceptual empathy among students, 2) lack of exploration of models for developing empathy in students, 3) lack of identification of deficiencies in the concept and models of empathy among students, 4) discussions thus far have presented empathy as professionalism, particularly in the field of medicine, so that empathy is rarely presented as a basic element of optimal social life.

Research trends on empathy using literature review, comparative study, experimental study, and correlation study methods have not yet comprehensively reviewed the concept of empathy in other *helping professions* such as doctors, psychotherapists, psychologists, counsellors, and teachers. Indicate that existing reviews have not comprehensively mapped empathy research across helping professions education. Demonstrate that the existing reviews have comprehensively mapped empathy research in the field of professional assistance education, which can be examined in the results and discussion section. The decision to use a scoping literature review method in this study was based on the observation that many articles considered relevant to cultural empathy reviews only focus on professions in the clinical field. To fill this gap and provide a basis for more systematic research on empathy, this study aims to identify what is known about empathy in helping professions, particularly in the field of education, namely guidance and counselling including the conceptualisation of empathy. This article uses a scoping literature review (PRISMA-ScR framework) to identify what is known about empathy in helping professions education, focusing on three areas: (1) conceptualizations of empathy, (2) factors influencing empathy development, and (3) research trends and methodological approaches. And to inform future research and curriculum development.

This study aims to identify what is known about cultural empathy in *the helping professions*. To achieve this research objective, the following research questions were formulated: (1) "What are the basic concepts of empathy in *the helping professions*?"; (2) "What are the factors that develop empathy?"; and (3) What strategies or interventions are reported to foster empathy in helping professions education?

METHOD

This study employed a scoping review methodology to systematically map existing literature on empathy in helping professions.. *Literature Review* is a systematic, explicit method that can be used to identify, evaluate, and synthesise a collection of works on a topic produced by researchers, academics, and practitioners (Noor et al., n.d. . The steps in conducting a *scoping review* follow the guidelines developed by the, which consist of five stages, including: 1. Identifying research questions 2. Identifying relevant studies 3. Selecting relevant studies 4. Mapping data 5. Compiling, summarising, and reporting the results.

Study Design

The study employed a scoping literature review. this method was chosen (1) to systematically map the existing body of literature.(2) to identify research gaps and build a foundation for future studies. the review followed PRISMA-ScR guidelines.

Search Strategy, Inclusion, and Exclusion Criteria

In this study, a systematic literature search was conducted through electronic *databases*, namely ScienceDirect, PubMed, Scopus, Journal Nasional, and Taylor and Francis. State the eligibility criteria clearly: (a) Inclusion: Peer-reviewed articles, full text available, relevant to empathy in health, psychology, education, and social work; discussions of concepts, models, theories, or interventions. (b) Exclusion: Duplicates, grey literature (reports, theses, dissertations), non-English publications, irrelevant settings, editorials without empirical data.

Study Selection Process

In selecting relevant literature, this study used the PRISMA-ScR (*Preferred Reporting Items for Systematic Reviews and Meta-Analyses*) 2020 *flow diagram*, which has four phases. After removing duplicate literature, the titles and abstracts of all articles were screened by researchers to identify exclusion criteria. This was followed by *full-text* and *non-full-text* screening. At the end of the selection stage, the final number of articles that met the inclusion and eligibility criteria was obtained.

Data Extraction

Data extraction from the selected literature was performed using tables. All references were managed using Mendeley Desktop. Typical data items include: (1) Author(s) and year of publication (2) Country or study setting (3) Profession or field (medicine, counseling, psychology, education) (4) Study design (quantitative, qualitative, mixed-method) (5) Definition or model of empathy used (6) Key findings related to empathy factors or interventions

Data Synthesis

The data synthesis stage in this study used a *narrative review* approach, which focused on collecting relevant information that provided context and substance to the author's overall argument. The *review* process began with 800 references taken from electronic *databases*. After removing duplicate references (n = 35), non-English language references (n = 8), concept-related documents (n = 88), studies in other *settings* (n = 114), irrelevant topics (n = 553), and *grey literature* (dissertations, reports, letters, etc.) (n = 2), 125 relevant articles remained after the first selection stage. After the first selection stage, a second selection stage was conducted, taking into account the availability of *the full text* and accessibility. A total of 125 *full-text* articles entered the selection stage based on *eligibility criteria*. The final results showed that 44 articles were excluded and 25 articles met the eligibility criteria for inclusion in this *Scoping Literature Review*.

RESULTS

Conceptualisation of Empathy Development

The development of empathy from one period to another continues to progress. As is well known, empathy is an important dimension of socialising in society. Based on research findings, the development of empathy began in 1900 with Theodor Lipps from Germany and Edward Titchener from the United States, who explained that empathy is a complex concept found in counselling literature that explores how to become more empathetic in therapeutic practice (Frank & Hoffman, 1986). Hoffman's theory explains empathy as an affective response that is more appropriate to another person's situation than to one's own situation. In 1992, Morse's study described empathy as an event consisting of four components: 1) emotive empathy is the capacity to experiment subjectively and share psychological states or intrinsic feelings; 2) moral empathy is an internal altruistic force that motivates its practice; 3) cognitive empathy is the intellectual ability to identify and understand the feelings and perspectives of others in an objective manner; and 4) communicative behavioural response for the transmission of the perspectives of others.

Furthermore, in recent decades, from 2005 to 2015, the development of empathy has been examined by researchers and observers of empathy, leading to a reconstruction of the conventional view of empathy as *"We define empathy as an affective response that stems from the apprehension or comprehension of another's emotional state or condition and is similar to what the other person is feeling or would be expected to feel in a given situation."* The chronological development of empathy is known to have been developed *first* by Eisenberg (2005), who described empathy as an affective response that stems from an understanding of another person's emotional state or condition and is similar to what the other person feels or would be expected to feel in a given situation. *Second*, Preston & de Waal's theory explains a perception-action model of empathy, specifically.

Stating that the present perception of the object's state automatically activates the subject's representation of the state, situation, and object, so that the activation of this representation automatically produces an independent response. *Third*, Batson's theory explains that empathy refers to other-oriented emotions that are evoked by and congruent with the perceived well-being of those in need. Based on the literature review in the previous section, it can be understood that the definition of empathy is divided into two main categories, namely empathy as a skill or cognitive ability and empathy as an emotion or personality dimension. When empathy is defined as behaviour or activity, the focus tends to be on the communication process in relationships.

Factors in the Development of Empathy

Constructive empathy development factors can build meaningful experiences and regulate more appropriate and correct decision-making to face challenges, have the important competence to connect with others in a meaningful way have the confidence and intention to obtain the desired results from an action (Ramsey & Deem, 2015), being able to manage one's abilities to survive (Maibom, 2020), and having the ability to make decisions responsibly. In addition, they are able to explore meaningful social experiences, have a more sensitive and positive way of thinking and acting, and have a conscious and meaningful behavioral orientation that lasts throughout their lives (Turner et al., 2019). Holistically, empathy encourages students to have the ability to communicate flexibly, collaborate to produce good and correct decisions, and take constructive actions with confidence, awareness, communication, and comfort. The development of empathy shapes altruistic behavior, cooperation, compassion, morality, justice, and happiness.

However, the development of empathy is destructively related to abilities, feelings, people, individuals, capacities, pain, social behavior, deficits. Furthermore, having relationships with others in the weak category impacts one's social life both in the school environment and in the community (Sağkal et al., 2012). The results of a 2020 study by the United Nations Children's Fund (UNICEF) show that bullying behavior at least several times a month, even if left unchecked, increases the risk of psychological disorders throughout life and poor social functioning. This is reinforced by research findings indicating that students with the weakest social interactions are predicted to experience

violence, bullying, and a decline in academic performance at university. If left unaddressed, the weak development of empathy in students may lead to risks of frustration, violent acts, mob violence, sexual harassment, and murder (Cardenas, 2019; Maibom, 2017).

Empathy Development Research

Findings on empathy development research can be examined based on a methodological perspective. A review of the literature shows that empathy development research still focuses on quantitative approaches with experimental, cross-sectional survey, and correlational research designs. However, there are still few qualitative approaches. One research finding was a study on *a genre approach move analysis of empathy*.

In the 1990s, empathy tended to be discussed in terms of measurement, feelings, individuals, attitudes, scales, reliability, and children. In 2005, the focus shifted to *studies* or dimensions of learning, abilities, attitudes, and social skills, which are important aspects of communicating with others. Empathy became the subject of research in various articles discussing ideas, concepts, literature reviews, practical applications, and was determined to be the subject of research on medical students. This is because empathy is a professional skill that must be applied when dealing with clients/patients. Then, in 2010, empathy research shifted towards *neuroscience, nursing, empathy background, and philosophy*. Research findings indicate that empathy is related to size, factors, scale, questionnaire, adolescents, sample, and affective empathy. The development of empathy research samples has focused more on studies of teachers, skills, patients, medical students, and effectiveness (Atkins, 2014a; Stojiljković et al., 2014). In addition, empathy research development is related to concepts, practices, literature, psychology, philosophy, disciplines, and diversity (Lewicka-Zelent & Korona, 2013).

DISCUSSION

Based on research findings conceptualising the construct of empathy, there is a growing awareness that a more comprehensive approach to empathy, one that recognises its diverse nature, will be of considerable value (Anthony & Dan, 2020). Perhaps the most ambitious modern empathy theorist to adopt this perspective is developmental psychologist Martin Hoffman (Cuff et al., 2016).

However, within his larger theoretical framework, Hoffman also discusses a number of other important constructs related to empathy. Hoffman's theoretical framework includes cognitive role-taking and various types of affective responses to the distress of others. When linked to Eisenberg's study (Atkins, 2014b), the conceptualisation of empathy can be analysed in a clear multidimensional manner based on the form of affective response; the most important assumption they make is that observing a distressed target usually first leads to a parallel reaction, which is then followed by an empathetic attention response or personal distress. As a rule, parallel responses are directly transformed through several forms of cognitive activity; cognition focused on the feelings and needs of others produces empathic attention, while cognition focused on one's own arousal produces personal distress.

Eisenberg's approach also strongly emphasises the type of cognitive process that is the ability to deliberately regulate one's emotional state. Excessive empathy arousal is hostility and leads to self-focus and self-attention. Thus, those who can effectively regulate their emotions tend to experience sympathy (a response oriented towards others' emotions or conditions) rather than personal pressure (a response focused on oneself and hostility towards others' emotional states or conditions).

Based on the development of empathy dynamics by Hoffman and Eisenberg (as well as other theorists and researchers), Davis (Demetriou, 2018) proposed a model of empathy based on a very inclusive definition; empathy is broadly defined as a set of constructs related to one individual's response to another person's experience. These constructs specifically include the processes that occur within the observer and the affective and non-affective outcomes resulting from those processes. Four related constructs can be identified in this prototypical episode: antecedents, which refer to the characteristics of the observer, target, or situation; processes, which refer to the specific mechanisms that generate empathetic outcomes; intrapersonal outcomes, which refer to the cognitive and affective responses

generated by the observer that are not manifested in overt behaviour towards the target; and interpersonal outcomes, which refer to behavioural responses directed towards the target (Segal, 2018).

Several studies have shown that empathy correlates with various positively rated behaviours, such as *prosociality, altruism, cooperation, compassion, morality, and justice*. Some studies even show that empathy is related to happiness and ethical and moral development. The development of empathy as *a character virtue* is a social dimension that deserves special attention and is a determinant of individual success. Based on previous research findings, students tend to act based on negative emotional reactions towards themselves without considering others' perspectives. Students feel pressured to do something destructive based on their control, and have not responded communicatively, so that the process that occurs shifts from what should be dialogue/negotiation to conflict.

The phenomenon of the process of directing behaviour to achieve *understanding* empathy and previous research findings suggest that the development of empathy in personality structure is not yet a priority in students' lives. This condition provides clues about several things. *First*, students do not yet understand the emotional state or condition of others, which affects their way of thinking and acting, demonstrating dysfunction. *second*, students do not yet think and act by projecting themselves into other people's situations; *third*, students do not yet think and feel other people's situations properly and correctly; and *fourth*, students do not yet have the confidence to think, act and feel meaningfully.

The achievement of these three aspects can change *the empathy learning process*, which includes *acting, imagination, imitation, perspective-taking, meaning, understanding, identification, feeling, sympathy, and pity*. However, the lack of empathy among students can lead to the categories of *acting and imagination*. Low empathy is a very fundamental and worrying problem, as it is associated with the developmental task of students, who should be able to promote positive behaviour towards others and facilitate social interaction and pleasant relationships. Students should interact with others in ways that encourage cooperative, pro-social, and meaningful relationships rather than conflicting, anti-social, and unpleasant interactions with others.

Regarding its correlation dynamics with other dimensions, a number of studies show that: 1) female students are found to be more empathetic than male students, 2) the ability to regulate one's own emotions during empathic engagement can reduce the risk of fatigue (Cochrane et al., 2019), 3) Self-compassion and aspects of empathy reveal a strong relationship with psychological functioning (Barr & Higgins-D'Alessandro, 2009), 4) empathy has multiple input pathways, resulting in activation consistent with influence, and generates septically mediated prosocial motivation (Depue & Lambie, 2014), 5) Empathetic ability is identified as an important innate attribute that can, however, be enhanced through educational intervention (Zhang et al., 2020), 7) Self-efficacy contributes to empathy in teachers (Tariq et al., 2018), 8) empathy has a positive impact on students' professional development (Birkett, 2014), and 9) educational interventions can be effective in maintaining and increasing empathy (Maynard & Weinstein, 2019). The Jefferson Scale of Empathy is preferred over other measurement scales for use in the medical field.

Several studies in the field of education have confirmed that the process of group counselling services, the role of counsellors, the role of groups, and the process of reflection/debriefing in interacting with students can control the process of meaningful connection with individuals. Individuals can demonstrate positive attitudes in interacting and positively understanding others. Previous research has even recommended the process of developing empathy through guidance, meaningful reflection in outdoor or indoor settings oriented towards the development process, one of which is through guidance and counselling.

Efforts that have been made to develop empathy include cognitive behavioural therapy techniques, Adlerian techniques, contemporary techniques, *milling around techniques, resistance, revealing past feelings, and expression of negative feelings*. Several studies from 2012-2020 show that adventure-based counselling intersects with the techniques described in the previous sub-section, but in general, it does not lead to a comprehensive process of empathy development. The problem that arises is that the most important elements of empathy development tend to be overlooked, namely the influence of three components: game recognition, game experience implementation, and game experience reflection.

Empathy development, as described in the previous section, has not been comprehensively researched. Research over the past five years has focused more on the counselling technique process,

tending to involve cognitive processes while neglecting affective processes. The intervention process has not been carried out naturally under actual conditions, so the existence of empathy development in the interaction process tends to be overlooked comprehensively. In terms of research methods, correlational studies and quasi-experiments are more commonly used, quasi-experiments, resulting in inconsistencies in empathy development efforts that should take into account *social desirability* aspects and the high sensitivity of statistical analysis methods. Therefore, a mixed method with a quantitative and qualitative approach is needed to obtain answers and scientific evidence to examine the construct of empathy development that has been found so far. Therefore, this study will focus on constructing and elaborating adventure-based counselling with three components in terms of content, process, evaluation, and methods for developing empathy through *adventure-based counselling*.

CONCLUSION

The concept of empathy developed by experts is still unclear in relation to the process or aetiology of empathy. Various models that have been developed cannot be generalised and applied in a relevant manner to various fields. The models that have been developed are dominated by the health sector. Further analysis is needed to develop a more specific and comprehensive conceptual analysis of empathy in other fields of work. Research on empathy has grown rapidly, especially in the health sector, particularly nursing, using experimental research methods and literature reviews. Further research development is needed in the fields of education and psychology.

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