Feeling your joy helps me to bear feeling your pain: Examining associations between empathy for others' positive versus negative emotions and burnout

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ABSTRACT

Working with others experiencing negative emotions is an emotionally draining experience that can lead to a variety of negative outcomes. Foremost among these is burnout, a serious problem among those who work in helping professions. Burnout negatively impacts the work quality, job commitment, and health of those who suffer from it, and can result in poorer outcomes for those with whom they work. Given these many deleterious effects of burnout, it is critical to understand the factors that contribute to burnout as well as those that can protect against it and help create more satisfying professional lives for caregivers. Drawing on recent scholarship highlighting the distinction between empathy for others' negative vs. positive emotions, the present work proposes that whereas strong and repeated connection with others' negative emotions can place individuals at greater risk for burnout, connecting with others' positive emotions may help protect against burnout and increase job satisfaction. These issues were examined in two different high-stress professions, front line mental health providers and teachers. Consistent with predictions, results showed that whereas individuals' dispositional levels of negative empathy were associated with greater burnout and lowered job satisfaction, dispositional positive empathy was associated with decreased burnout and greater satisfaction.

1. Introduction

Dealing with the negative emotions of others can be a challenging task. Although helping others to effectively manage their negative emotions and improve the quality of their lives can be highly rewarding, regularly engaging with others' negative emotions is also an emotionally draining experience that can lead to a variety of negative outcomes. The present work focuses in particular (though not exclusively) on the most pernicious and widely-studied of these negative outcomes, burnout, which can be defined as a response to chronic job-related stressors characterized by emotional exhaustion accompanied by feelings of detachment and ineffectiveness (Maslach & Leiter, 2016).

Individuals experiencing burnout are absent from work more frequently and are more likely both to report an intention to leave and to actually leave their jobs (e.g., Jackson, Schwab, & Schuler, 1986; Smoot & Gonzales, 1995). Among those who do remain on the job, burnout negatively affects work quality, leading to decreased productivity and effectiveness which can result in more negative outcomes for those with whom one works (Maslach & Pines, 1979; Poghosyan, Clarke, Finlayson, & Aiken, 2010; Salyers et al., 2015). Burnout has also been shown to predict stress-related physical health outcomes (e.g., Acker, 2010; Hakanen, Bakker, & Schaufeli, 2006) as well as a variety of negative mental health outcomes such as anxiety, depression, and

decreased self-esteem (Ahola et al., 2005; Peterson et al., 2008; Rohland, 2000). Worse still, burnout can pass from one worker to another, moving through an organization like a contagion (Burke & Greenglass, 2001). These negative effects of burnout are made all the more troubling by the fact that they are particularly likely to occur in high-stakes but high-stress professions—such as nursing, teaching, and mental health provision—that address some of society's most pressing needs.

Given its myriad deleterious effects, researchers have devoted a good deal of empirical attention to better understanding the origins of burnout. Although this work has documented links between burnout and a wide variety of factors (e.g., workload, lack of participation in organizational decision-making, gender; see Maslach, Schaufeli, & Leiter, 2001 for a review), most germane for the present analysis is work that has focused on the link between burnout and specific individual difference characteristics. For example, existing work has demonstrated links between low levels of hardiness and increased burnout in nurses (e.g., Holt, Fine, & Tollefson, 1987). Burnout has also been linked to individuals' characteristic coping styles, with passive and defensive coping strategies linked to greater burnout, and active and confronting coping linked to less burnout (e.g., Carmona, Buunk, Peiro, Rodriguez, & Bravo, 2006; de Rijk, Le Blanc, & Schaufeli, 1998). And, individuals higher in the Big Five personality dimension of neuroticism

are at greater risk for burnout (Langelaan, Bakker, van Doornen, & Schaufeli, 2006).

The present work continues in this individual differences approach by focusing on the manner in which individuals' characteristic tendency to empathize with others' emotions is related to burnout. Notably, this is not the first study to examine links between empathy and burnout. But, existing research on empathy in the burnout literature—as well as most research on empathy more broadly—has focused overwhelmingly on empathy specifically for the negative emotions of others (e.g., suffering, sadness, anxiety). A key contribution of the present work is that it represents one of the first studies to focus *both* on empathy for others' negative emotions *as well as* empathy for others' positive emotions, and on how each of these independently contribute to burnout. Given existing work demonstrating the separability of negative empathy and positive empathy (see Morelli, Lieberman, & Zaki, 2015 for a review), it is critical to understand how both of these empathic capacities are related to burnout, especially because, as will be argued below, there are reasons to expect that whereas high levels of negative empathy can increase one's risk for burnout, high levels of positive empathy might serve to protect against burnout and help to create more satisfying professional lives for caregivers.

As mentioned above, although the present work focuses most directly on burnout, it is important to recognize that while helping others can be an emotionally taxing experience with the potential to lead to negative outcomes, working with those in distress can also be a deeply rewarding experience. As such, the current project is best situated within conceptualizations that treat burnout as one negative aspect of the quality of one's broader professional life that exists alongside more positive aspects (e.g., the satisfaction one gets from one's job), rather than conceptualizations that focus specifically on the presence vs. absence of burnout alone (such as, e.g., the well-known Maslach Burnout Model; see Maslach, 1982). Rather than measuring burnout alone then, the present work will thus measure Professional Quality of Life (Stamm, 2010) more broadly, which allows for the assessment both of negative aspects of professional life stemming from fatigue associated with regular connection with others' negative emotions, as well as positive aspects such as the pleasure derived from doing one's work. It is predicted that whereas negative empathy is likely to be associated with increases in negative aspects of professional life and decreases in positive aspects, positive empathy will be associated with reductions in job-related negativity and increases in positivity.

2. Empathy and helping behavior

Though the social psychological literature has conceptualized empathy in a variety of different ways (see Cuff, Brown, Taylor, & Howat, 2016 for a review), the present work focuses on empathy as a process of emotional contagion whereby perceivers experience an affective state that is similar or identical to what a target is feeling or might be expected to feel (e.g., Eisenberg & Fabes, 1998). Given the motivating power of emotion, scholars have devoted a great deal of empirical attention to examining the ways in which such vicarious emotionality might relate to behavior, with particular emphasis on the manner in which empathy for the negative emotions of others (e.g., suffering, anxiety, sadness) relates to helping behaviors (see Batson, 2017 for a review).

This research has painted a very clear picture. Empathy for others' negative emotions, whether measured as a dispositional tendency to connect with others' negative emotions or situationally induced by instructing participants to empathize with others' negative emotions, motivates helping behavior. Although a thorough review of this literature is beyond the scope of the present work, suffice it to say that this same insight has emerged across a wide variety of studies in developmental psychology (e.g., Eisenberg et al., 1994; Eisenberg & Miller, 1987; Malti, Gummerum, Keller, & Buchmann, 2009), social psychology (e.g., Batson, Early, & Salvarani, 1997; Batson, Fultz, &

Schoenrade, 1987), and affective neuroscience (e.g., Lamm, Decety, & Singer, 2011; Singer et al., 2004).

Although this work has established that empathy for others' negative emotions is a powerful motivator of prosocial behavior, it also suggests some less positive consequences of empathizing with others' negative emotions, consequences that are quite relevant to the experience of burnout. In particular, because empathizing with others' negative emotions necessarily involves the vicarious experience of negative emotionality, such negative empathizing is likely to be an (at least somewhat) aversive experience. Consistent with this notion, experimental research has shown that encouraging individuals to connect with others' negative emotions increases self-reported vicarious negative emotionality (Andreychik & Migliaccio, 2015) and results in the activation of brain areas associated with the personal experience of negative emotions (Morelli, Rameson, & Lieberman, 2014).

Most germane to the present analysis is research showing that helping professionals who empathize more strongly with others' (negative) emotions are at greater risk for burnout. For example, Tei et al. (2014) found that higher levels of empathy were associated with greater emotional exhaustion in a sample of medical professionals, both when empathy was measured in terms of respondents' self-reports and in terms of empathic-related neural activity in response to witnessing others' pain (see also Williams, 1989). Likewise, Gleichgerrcht and Decety (2013) found that empathy was associated with greater burnout and secondary traumatic stress (i.e., the extent to which individuals report "re-living" the trauma of those with whom they work) in a sample of board-certified physicians. And, Omdahl and O'Connell (1999) found that a dispositional tendency to catch others' emotions was associated with greater emotional exhaustion in a sample of nurses.

Taken as a whole, this research seems to present quite a conundrum. Negative empathy can increase burnout. But, it is also the case that connection with others' negative emotions motivates helping behavior aimed at reducing those negative emotions. Given that the repeated experience of aversive vicarious emotions is likely an unavoidable aspect of working in caregiving contexts, it is imperative that we understand factors that might help to reduce the demands of regularly empathizing with others' negative emotions and help to increase the more positive aspects of caregivers' professional lives. The present work proposes that one such factor—one that has received very little attention in existing research—is the extent to which those who work in high-stress professions empathize with the positive emotions of those with whom they work.

3. Empathy for others' positive emotions

All of the research that has been discussed thus far, and the bulk of research on empathy more generally, focuses on empathy for others' negative emotions. This focus makes a great deal of sense when one considers that the vast majority of work on empathy, including, critically, the work just reviewed linking empathy to burnout, has focused on the relationship between empathy and helping behavior directed toward others in need, others who are often experiencing negative emotions. Recently, however, there has been a growth of interest in empathy for others' positive emotions (see Morelli et al., 2015 for a review). This emerging body of research suggests that while empathy for others' negative emotions and empathy for others' positive emotions are related to one another in that they both rely on, for example, an ability to take the perspective of others, they are also distinct, with negative empathy and positive empathy each having a number of unique consequences and correlates.

Central to the present analysis is research showing that empathizing with others' negative vs. positive emotions results in very different patterns of vicarious emotional experience. For example, whereas empathizing with others' negative emotions activates neural areas associated with the personal experience of negative affect, empathizing with others' positive emotions activates areas associated with the