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The role of empathy in case management: a pilot study

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Little research has been done on the benefit of empathy for social workers in the actual practice of their profession. This prompted an exploration of the interplay between empathic ability and the skills practitioners draw on for case management. Two cohorts of social work students, in their final semester, reflected on an authentic social work scenario and suggested a plan for intervention before completing a scale measuring empathy. The results revealed that different dimensions of empathy, to a varying degree, underpin the process through which students come to a decision on how to intervene. The findings provide empirical support for the assumption that empathy plays an essential role in the practice of social work. They also suggest the need for further investigation, particularly given the potential use of increased knowledge on what determines the skills needed to take on the oftentimes complex and demanding reality of social work.

Keywords: Empathy; competency; curriculum development

In recent studies, researchers have called for closer attention to be paid to empathy in the education of social workers and in the practice of social work (Gair, 2013; Gausel, 2011; Gerdes & Segal, 2011; Grant, 2014; Hen & Goroshit, 2011; Napoli & Bonifas, 2011). There is a good reason to claim that empathy is an advantage in the anti-oppressive practice of social work, which is intended to help people in various situations of distress, dysfunction or deadlock. There is already some empirical support for this assumption based on observations of communication (Forrester, McCambridge, Waissbein, & Rollnick, 2008; Nijnatten, Hoogsteder, & Suurmond, 2001) and care provision (Barlow & Hall, 2007; Buckley, 1986).

Nonetheless, a question remains on what role empathy might play in the execution of other social work tasks, such as case management. Interpersonal skills are after all but one vital part of a professional’s overall competence. Of equal importance are analytic ability, evaluation and strategic planning (Galuske, 2011;

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Maus, Nodes, & Röh, 2008; Morrison, 2007) and, more importantly, the ability to solve problems while dealing with complexity, ambiguity and uncertainty (Lymbery, 2003). It seems obvious that the social worker has to pit the requirement of being receptive to the feelings and motives of others against that of maintaining some degree of objectivity.

The present article briefly reviews the concept of empathy on the basis of psychological theory and research. It further reports the findings of a pilot study exploring the interplay between empathy and the skill that practitioners draw upon when prioritizing different steps of an intervention in a service user case.

**Empathy**

One of the early definitions of empathy focused on one person’s ‘feeling into’ the subjective state of another person (Lipps, 1913). By contrast, Kohler (1929) was one of the first to argue that empathy was actually a matter of understanding the experience of another person rather than sharing that person’s emotions. Since that time, various investigations of the phenomenon have been carried out in an attempt to come to a more comprehensive conclusion with regard to the nature of empathy. In the helping professions, it has been of particular interest to define the concept, the aim being to gain insight into how empathy could be meaningfully taught and applied in practice.

Such attempts have suggested the existence of both reflective and affective dimensions of empathy. The literature reveals how the emphasis has invariably been placed on the care provider’s ability to understand care recipients’ inner world and concerns (Gallagher, 2006) as well as the care provider’s ability to vicariously share care recipients’ emotional experience (Buie, 1981). However, the distinction between the more reflective as opposed to the affective kind of empathy is of further relevance to social work education in view of the significant implications for the relationship between caretakers and providers. With the former, intellectual stance, the practitioner can maintain emotional distance (Dyregrov & Mitchell, 1992), while with the latter, there is a risk for emotional exhaustion and impaired professional judgement (Fahy, 2007), although some argue that both dimensions are needed to ensure positive client outcomes (Wampold, 2010).

It is evident from the psychological literature that scholars typically agree on the conceptualization of empathy as being a two-dimensional phenomenon (Coke, Batson, & McDavis, 1978; Decety & Jackson, 2004). Mark Davis (1983a) further elaborated on the concept of empathy by outlining a set of constructs, each of which captures some essentially different facet of the phenomenon: **Perspective Taking** and **Fantasy** represent the reflective component of empathy, whereas **Empathic Concern** and **Personal Distress** represent tendencies to engage in emotional responses. These subcomponents will be briefly reviewed before explaining the pilot study in greater detail.
**Perspective taking**

A prerequisite for empathy should be an understanding of another person’s point of view or situation (Davis, 1983a). In this sense, perspective taking is the cognitive ability needed to initiate and control the mental processes whereby people can adequately grasp the details that define the situation of another person (Chambers & Davis, 2012; Davis, Conklin, Smith, & Luce, 1996). This view has evolved from the early conceptualization of this empathy dimension as the ability to subordinate the perspective of one’s own self to that of a larger group (Marvin, Greenberg, & Mossler, 1976). In support of this view, findings suggest that high levels of perspective taking tend to be linked to the propensity to be mindful of how a situation is experienced by other persons involved (Davis, 1983a; Galinsky, Ku, & Wang, 2005). In this regard, perspective taking should be an essential precondition for the ability to comprehend how conflicts within interpersonal interactions can arise and for recognizing suitable approaches to such information.

**Fantasy**

Another prerequisite for empathy should be a willingness to project oneself into the feelings and actions of another person (Lee, Guajardo, Short, & King, 2010). This propensity increases a sense of self-other overlap by merging mental representations of the self and of the other person in a way that creates a sense of similarity (Davis et al., 1996). Such partial identification with another person may entail the ability to vicariously experience the situation of that person, as suggested by the finding that people who score high on fantasy tend to be more sensitive to others and to be slightly more susceptible to emotional responses (Davis, 1983a). The concept of fantasy originally refers to people’s propensity to get involved in fictional situations and to identify with characters in books, movies or stage plays. Recent research has established, however, that the concept of fantasy is just as viable in relation to empathy for real persons as it is in relation to empathy for fictional characters (Nomura & Akai, 2012).

**Empathic concern**

Empathic concern corresponds to the tendency to sympathize with or feel protective towards others who are less fortunate or treated unfairly. Sympathy and empathy are often used synonymously; however, sympathy involves more specifically the sharing of emotions that are experienced by another person (Wispé, 1986). The literature reveals an impressive programme of research suggesting that empathy is linked to helping behaviour (Batson, Turk, Shaw, & Klein, 1995; Davis, 1983b), particularly when feelings of sympathy and compassion are evoked (Eisenberg, 2000). The level of such deep concern increases when one can imagine being in the place of another person, as opposed to when one adopts a detached point of view (Batson, Early, & Salvarani, 1997; Coke et al., 1978). Empathic concern then affects helping behaviour primarily through the perception of sharing the emotional state of the other person (Cialdini, Brown, Lewis, Luxe, & Neuberg, 1997).
**Personal distress**

By contrast, the observer of another person’s plight could be overcome with feelings of dismay and shock, which are qualitatively different from the affect of empathic concern. Whereas empathy is generally linked to altruistic motivation to help, distress is linked to egoistic motivation to reduce one’s own aversive arousal. Physical escape from exposure to the suffering of another person may enable mental relief (Toi & Batson, 1982). People who score high on personal distress have been found to be prone to feelings of vulnerability, uncertainty and fearfulness (Davis, 1983a). Presumably for these reasons, it has been found that the more intense the experience of personal distress, the less likely the inclination to engage in helping behaviour (Carrera et al., 2013; Davis, 1983c).

The four constructs capture related, yet distinct aspects of empathy, where each enables a more detailed analysis of the role of empathy in the practice of social work. To date, there is published work on the role of emotional competencies for stress management in social work (Kinman & Grant, 2011) as well as research on teaching empathy-related skills, such as mindfulness (Grant, 2014; Napoli & Bonifas, 2011) and emotion management (Hen & Goroshit, 2011), to social work students. There is, however, to our knowledge no research specifically examining the interplay that presumably exists between the various aspects of empathy and decision-making with regard to how to intervene in service user cases. In order to begin to explore this interplay, the present pilot study was conducted.

**Purpose of the study**

The present study investigated whether and how empathy underpins the ability to go about case management in a manner consistent with proficient practice. Here, the notion of ‘proficient practice’ refers to the decision-making process by which experienced practitioners handle service user cases and the resultant outcome.

Based on extant literature, we expected the abilities of perspective taking, fantasy and empathic concern, to be associated with the decision for an intervention that prioritizes proper assistance. Such a decision should not benefit from personal distress, given that this propensity reflects the inclination to distance oneself from another person’s predicament. In short, we hypothesized that the decision to provide proper assistance would draw upon the abilities to view a situation from the perspective of the people involved, to understand their feelings and actions and to feel concern for them without experiencing distress.

This hypothesis was tested while evaluating readiness to practise among social work students in their final semester. To this end, we used an instrument that requires students to consider an authentic social work scenario and to respond to it by appropriate decision-making (see MacIntyre et al., 2011).
Method

Respondents
The respondents consisted of two cohorts of students (Ns = 29 and 30) with 4–6 weeks left until they would graduate with a bachelor’s degree in social work (50 women, 9 men). They were asked to complete a questionnaire during one of their scheduled lectures. In order to ensure their anonymity, they were instructed to hand in the questionnaire without recording either name or student registration number on it. They were accurately informed that their effort would provide helpful input to the overall evaluation of the study programme (see Engelberg & Limbach-Reich, 2012, 2015). All students opted to participate and completed the questionnaire in full.

Questionnaire
The questionnaire was used to present a case description to the students who were subsequently asked to respond to three open-ended questions. These questions aimed at collecting data to assess the extent to which the students processed the information of the case and took proficient decisions upon an intervention strategy. The vignette and the open-ended questions were thus used to measure the same concept, i.e. decision-making strategy in relation to level of probing and performance. In addition, data were collected to measure the students’ ability for empathy.

The respondent was instructed to read through the description of an authentic social work case that had recently been handled by the social services in the same country and region where he/she went to university. Before presenting the vignette to the students, details that risked revealing the identity of the service users were either changed or omitted.

The case described a family situation bereft with problems linked to marital conflict, sporadic school attendance, ADHD, alcohol/drug abuse and violent behaviour. The vignette was tested prior to the study by presenting it separately to each of four social workers with 10–15 years of professional experience in the social service sector. Their input served as a guideline when assessing the data that were to be collected using this particular vignette. More specifically, the focus of the intervention was to provide immediate support to one of the siblings in the family, who will henceforth be referred to as P. The subsequent step of the intervention was to provide long-term assistance to the family as a whole, which consisted of P’s parents, siblings and grandmother.

Level of probing
The first and second of the open-ended questions read as follows: ‘What facts in the case description do you consider to be significant?’ and ‘What information do
you think is missing, that is, information that would allow you to explain what is going on in the situation? These two questions aimed at capturing the extent to which the respondent demonstrated an effort to probe the problem and to reflect on it. This ability was scored on a three-point scale, where 1 denoted a descriptive level of merely describing or reiterating the content of the case description, 2 denoted analytic skills in elaborating on what is happening and the likely reasons why and 3 denoted reflective skills associated with drawing on theory and questioning the information given in the case description. In short, a higher score on these open-ended questions signifies a greater capacity to process the information in a skilful and purposeful manner.

**Performance**

The third question read as follows: ‘As the social worker, what could you do in this situation?’ This question aimed at examining what interventions the respondents emphasized. This data were scored according to the following criteria: (1) helping the person P, (2) helping the family and (3) further assessment by involving other professionals. Each of these criteria was rated on a four-point scale where 1 denoted ‘not mentioned at all’; 2 ‘barely mentioned’; 3 ‘mentioned’ and 4 ‘strongly mentioned’. A higher score on any of these vignette performance measures, that is, Help P; Help Family and Assessment, signifies the decision to pursue this particular mode as intervention.

**Empathy**

Upon completion of the open-ended questions, students were instructed to fill out a short battery of questions, which corresponded to the Interpersonal Reactivity Index (IRI; Davis, 1980). This inventory is one of the most common questionnaires used to measure self-reported empathic tendencies in adults. In order to accommodate to the students’ mother tongue, the German version of the IRI (Paulus, 2009) was administrated.

The IRI captures the different facets of empathy with four items for each of the subscales, which are **Perspective Taking** ( = .69), **Fantasy** ( = .78), **Empathic Concern** ( = .77) and **Personal Distress** ( = .66). The total of 16 items are statements that the respondent rates on a five-point scale (1 = never; 5 = always). The higher the respondent’s score on any of the subscales, the higher is his or her propensity for that particular aspect of empathy.

For the hypothesis testing, the subscales of Perspective Taking, Fantasy, and Empathic Concern, were added into a Composite Empathy Score (M = 3.53, SD = 0.42, = .73). The remaining IRI subscale of Personal Distress was treated separately in the analyses, due to the discrepant conceptual content in relation to those of the other subscales, as evident through prior research reviewed above.
Results

Level of probing
The first analysis aimed at assessing the extent to which respondents processed the vignette information. The mean value was 1.56 (SD = 0.70), which suggests that the students were mainly analytical in their efforts to probe the information. Using Pearson’s correlation coefficient, the level of probing was examined in relation to the three vignette performance measures. As shown in Table 1, this analysis revealed that a more skilled probing of the vignette information was linked to the explicit decision to help P, that is, the person who was in the most immediate need of support in this service user group. The correlations to the four subscales of empathy further revealed that probing was strongly linked to perspective taking and fantasy, which suggests that a more qualified processing of case information is associated with higher propensity for cognitive or reflective abilities of empathy.

Performance
The second analysis aimed at examining the relations between the vignette performance measures and the four subscales of empathy. The mean values, along with the intercorrelations, are presented in Table 1. As expected, there was a tendency for perspective taking, fantasy and empathic concern, to be positively related to the respective decisions to help P and the family, and negatively related to assessment, or the decision to involve other professionals for further evaluation. Conversely, there was a tendency for personal distress to be negatively correlated to the three performance measures.

Table 1  Mean values and intercorrelations between the vignette measures and subscales of empathy

<table>
<thead>
<tr>
<th></th>
<th>M</th>
<th>SD</th>
<th>1</th>
<th>2</th>
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<th>4</th>
<th>5</th>
<th>6</th>
<th>7</th>
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</thead>
<tbody>
<tr>
<td>1. Probing</td>
<td>1.56</td>
<td>0.70</td>
<td>–</td>
<td></td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>2. Help P</td>
<td>2.46</td>
<td>1.24</td>
<td>.32*</td>
<td>–</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>3. Help Family</td>
<td>1.88</td>
<td>1.02</td>
<td>.16</td>
<td>.46**</td>
<td>–</td>
<td></td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>4. Assessment</td>
<td>2.13</td>
<td>1.32</td>
<td>.06</td>
<td>-.12</td>
<td>-.22</td>
<td>–</td>
<td></td>
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<tr>
<td>5. Perspective Taking</td>
<td>3.82</td>
<td>0.46</td>
<td>.32*</td>
<td>.19</td>
<td>.13</td>
<td>.03</td>
<td>–</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6. Fantasy</td>
<td>3.18</td>
<td>0.67</td>
<td>.31*</td>
<td>.28*</td>
<td>.21</td>
<td>-.44**</td>
<td>-.13</td>
<td>–</td>
<td></td>
</tr>
<tr>
<td>7. Emphatic Concern</td>
<td>3.61</td>
<td>0.55</td>
<td>.06</td>
<td>.17</td>
<td>.16</td>
<td>-.31*</td>
<td>.09</td>
<td>.17</td>
<td>–</td>
</tr>
<tr>
<td>8. Personal Distress</td>
<td>2.49</td>
<td>0.53</td>
<td>-.01</td>
<td>-.40**</td>
<td>-.04</td>
<td>-.16</td>
<td>-.26*</td>
<td>.20</td>
<td>.28*</td>
</tr>
</tbody>
</table>

*p < .05; **p < .01.
Hypothesis testing

Each of the performance measures was analysed to test the hypothesis that empathy underpins a proficient decision on an intervention plan. In view of the sample size (Green, 1991), bivariate regression was chosen as statistical method. The composite empathy score and the personal distress subscale, respectively, were entered into separate regression analyses as the predictor variable.

As seen in Table 2, the analysis on Help P as the criterion variable yielded a significant result, which suggests a strong association with the composite empathy score. This result suggests, more specifically, that higher levels of empathic ability are linked to the likelihood of identifying the person who is in the most immediate need of help in the particular service user group. The analysis on Help Family as the criterion variable similarly showed a positive association with the composite score. By contrast, the analysis on assessment, i.e. the decision for further evaluation, showed a strong, negative association to the composite score. The overall finding from these analyses is that the composite empathy score emerged as significant over the three performance measures.

Results for the analyses with personal distress as the criterion variable are shown in the second row of Table 2. There was a negative relation between Help P and this subscale, suggesting that proficient decision-making in the social work practice is associated with lower levels of emotional distress. However, the associations were non-significant between this subscale and the respective vignette measures of Help Family and Assessment.

Discussion

The present findings were basically in line with our expectations, as they clearly suggest that the students drew upon empathy in responding to the case vignette. In other words, empathic ability was shown to underlie the process by which a service user case was managed in accordance with proficient practice.

There are two features of the results that stand out in support of the assumption that empathy is essential to the social work practice. The first feature pertains to the results that Help P and Help Family drew positively on the composite
empathy score, while the reverse was found with regard to further Assessment by involving other professionals (see Table 2). It suggests that prioritizing proper assistance generally hinges on the ability to understand and relate to other people and their situation. The implication is ultimately that empathy plays an important role in what lies at the heart of the social workers’ mission; to enhance human well-being with particular attention to the needs and empowerment of the most vulnerable (National Association of Social Workers, 2008).

The second feature pertains to how personal distress was shown to emerge in a significant fashion only in relation to the performance measure of Help P (see Table 2). This result suggests that proficient decision-making is incompatible with the propensity to experience emotional distress in the face of another person’s predicament. The finding thus seems to accord with studies highlighting the value of emotion management; for example, the importance of reflective abilities for tempering empathic distress (Grant, 2014), and perhaps also of mindfulness for controlling impulsivity and reactivity in relations with service users (Napoli & Bonifas, 2011). It fundamentally seems to point to the benefit of a level-headed approach in balancing the vicarious experience of another person’s emotions and the reflective effort needed to understand his/her situation, as one way of preventing the professional hazards of compassion fatigue and burnout (Coyle, Edwards, Hannigan, Fothergill, & Burnard, 2005; Fahy, 2007).

It is possible, though, that personal distress emerged in a negative fashion simply because respondents learned the details of the case through reading, rather than through personal contact with the actual service users. It has been argued that vignettes do not fully capture how people’s assessments and reactions typically arise when they result from an ongoing dialogue with the environment (Parkinson & Manstead, 1993). By contrast, others argue that vignettes provide an unobtrusive means of eliciting information about people’s thought processes (Poulou, 2001), which was the basic aim of the present study, that is, to investigate the analysis and decision-making processes that social workers engage in when they manage service user cases. In any event, we may have been able to make a closer approximation of reality had we used virtual reality vignettes (see Paschall, Fishbein, Hubal, & Eldreth, 2005).

Although the methodology used here cannot fully reproduce the reality of practice, there is evidence that affective empathy can be evoked through the deliberate exercise of cognitive empathy. Experimental studies have shown that participants who were instructed to only take the point of view of a particular person reported greater empathic concern (Davis, 1983b; Toi & Batson, 1982), or other congruent emotional reactions to this person (Davis, Hull, Young, & Warren, 1987), than participants who did not receive these instructions. The vignette should therefore have been adequate for the present purposes, because the respondents, who were unaware that their empathic ability was being assessed, did not receive any such instructions, and therefore presumably made efforts at perspective taking on their own accord.
Given the premise of our rationale, the issue of nature versus nurture is raised. Do social workers tend to draw more on empathy than people in other professions? Scholars typically conceptualize empathy as a stable trait, thereby adhering to the view that some individuals are more empathic than others, either by nature (Mooradian, Davis, & Matzler, 2011) or as a result of their development (Georgi, Petermann, & Schipper, 2014). In this connection, it would have been interesting to compare the IRI scores of our respondents to those of a group of undergraduate students at the same university, but studying something other than social work. Yet, the question would still remain as to whether social work students would presumably tend to score higher on empathy due to their natural disposition for empathy or due to the bachelor’s programme they are attending, or perhaps both.

The discussion on empathy as a disposition or trained ability has interesting implications for both education and research. For instance, should students be asked upon enrolment to fill out an inventory measuring empathy-related skills? Such information would likely enable educators to monitor the overall progress of each student relative to his/her capacity to mentally and emotionally respond to other people. Moreover, by comparing how students score in their first versus final semester, we could assess any effect of the curriculum on their ability for empathy. In view of the previous finding that first-year students showed higher empathic concern, as compared to advanced-level students (Hen & Goroshit, 2011), it would seem pertinent to pay closer attention to the impact of curricular content on empathy. It should by all accounts be useful to address empathy (Gerdes & Segal, 2011), as well as knowledge and regulation of emotion (Morrison, 2007), to increase our understanding of how such skills can be explicitly recognized in students and further developed throughout their education and training in social work.

These conclusions were admittedly drawn on a small sample using a proxy measure for performance in actual practice. Yet the results give a very rough, first glimpse at the specific ways in which empathic ability comes into play in the management of service user cases. As such, the results are compelling enough to prompt further investigation, particularly given the potential usefulness of increased knowledge about what determines the skills needed to take on the oftentimes complex and demanding reality of social work.

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