



FEELING WITH AND FEELING FOR: REFLECTING ON EMPATHY, SYMPATHY AND COMPASSION

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GETTING STARTED

- Consider the following cartoons and quotes (see handout)...
 - What are your reactions?
 - Do any of the cartoons or quotes “speak” to you? Why?
 - What do you agree or disagree with?
 - Is what you consider empathy, sympathy and/or compassion captured?

WHY THESE CONCEPTS?

- Connection to patient-centred care
 - Implications for patients
- Connection to practice
 - Implications for health providers

CONSIDERING THESE CONCEPTS

- Ongoing discussions and debates about all three concepts in the literature and, to some extent, in practice
 - Including...
 - How similar or different these concepts are
 - Whether these similarities or differences matter
 - How they relate to considerations of objectivity, vulnerability and burnout

CONSIDERING THESE CONCEPTS

- Empathy
 - Adequate understanding of the inner processes of a patient, i.e., their feelings, sensations, hopes, fears, etc.
 - “See the world” from another person’s standpoint (without judging)
 - Emotional connection without feeling the same, exact feelings
 - “Suffering inside”

Gelhaus 2012; Kerasidou and Horn 2016; Post et al. 2014

CONSIDERING THESE CONCEPTS

- Sympathy
 - Sharing another's feelings
 - Feeling the same thing as another person, as much as one can (and agreeing with that feeling)
 - “Suffering with”

Gelhaus 2012; Kerasidou and Horn 2016; Post et al. 2014

CONSIDERING THESE CONCEPTS

- Compassion
 - Combines the recognition of suffering with benevolence and the motivation to help
 - Recognize a need and are moved to respond to it, to do something to address it
 - May be motivated by empathy

Gelhaus 2012; Kerasidou and Horn 2016

CONSIDERING THESE CONCEPTS

- Compassion fatigue
 - A combination of physical, emotional, and spiritual depletion associated with caring for patients in significant emotional pain and physical distress

Lombardo and Eyre 2011

CONSIDERING THESE CONCEPTS

- TED talk
 - <https://www.youtube.com/watch?v=IEvwgu369Jw>

