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■ RESEARCH ARTICLE

Co-existence of elevated empathy and learned helplessness creates self- rule-out in individuals

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ABSTRACT: Elevated empathy (EE) has been observed in individuals following childhood trauma, stating that adversity leads to increase in sensitivity for fellow sufferers. Concomitantly, trauma is followed by another character trait called learned helplessness (LH). This paper analyzes how the co-existence of two contrasting characteristics in individuals gives way to self-neglect (SR). To substantiate this observation, data from an online survey of 173 respondents was used to conduct multiple correlational analyses. Findings suggested moderate to high correlation (R= 0.55, p=0.0) between dependent variable y (SR) and independent variables x_1 (EE) and x_2 (LH). From a clinical perspective, these results suggest the prevalence of self- rule-out or self- excluding behavior after exposure to a traumatic event.

KEYWORDS: Behavioral and Social Sciences; Clinical and Developmental Psychology; Elevated Empathy; Learned Helplessness; Self- rule-out.

■ Introduction

Trauma in childhood causes many various complications in an individual's life-course. As it occurs in the developing stages of a person's psychological and somatic growth, it can lead to profound negative health outcomes. The mechanisms adopted by the brain in early childhood, in general, act as the primary constituents for future behavior. For decades, post-traumatic traits were measured solely in terms of negative aftermaths. Nevertheless, in recent years, development has been made in the study of positive post-traumatic growth.[1] These models include increased sensitivity, elevated empathy and improved sense of one's own strength, to name a few.

A landmark in the professional understanding of trauma was the inclusion of PTSD in the DSM-III (Diagnostic and Statistical Manual- Third Edition). The individual symptoms have been well established, however, there continues to be a certain incognizance about the correlation of these symptoms and the resulting complex behaviors.

Empathy is the ability to acknowledge another's emotions and give out an appropriate emotion, as a response.[2] Behavioral empathy is identical to the concept of being able to understand, accommodate and alleviate someone's pain or suffering. It is an adopted or natural way of responding to someone's shared feelings and thinking process. It also involves a theory, rarely explored, called self-empathy or empathy towards self **(Figure 1)**. Self-empathy in simple terms, is when an aspect of yourself observes empathetically, the aspect of yourself that experiences. The main requirement self-empathy demands is paying attention to what one experiences, with an attitude of suspended judgment. All empathy starts with empathy towards self and it is self-empathy that maintains empathy towards others.[3]

Learned helplessness (LH) are the behavioral modifications developed in people when they are exposed to inescapable, but not easily avoidable, shock or trauma.[5] LH can occur in children who have experienced abuse and neglect during their childhood and adolescence. Repeated aberrant or disrupted attachment development may occur as a result of emotional abuse, and the victim may blame himself or herself for the abuse, resulting in LH, emotional discomfort, and excessively sedentary behavior.[6]

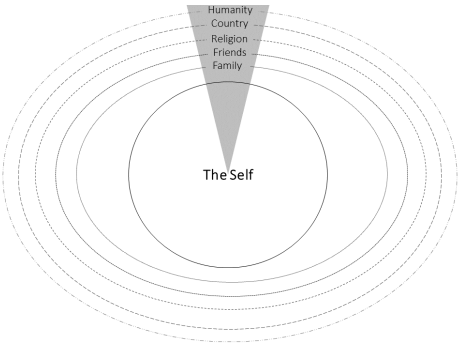

Figure 1: Model of empathy and its cores.[4]

Learned helplessness entails a negative outlook towards self, whereas empathy involves understanding and compassion towards self. Both these characteristics are caused by trauma, and this gives rise to the question of how two contrasting characteristics co-exist in a human, and what their resulting effect is.

The expression self- rule-out can be defined as a constant exclusion of self. A phenomenon where one excludes self from parameters in which they include the general public. Self-rule-out is witnessed in commonplace life when people hold different beliefs for others than they do for themselves. When we connect this to trauma, self- rule-out presents itself in the form of showing kindness to others when in trouble and showing resentment towards self in the same situation.

This paper aims to verify the existence of self- rule-out in individuals who demonstrate both- elevated empathy and learned helplessness. The contribution of this study is that if

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self- rule-out is present, clinicians may be able to identify these patterns in patients and treat them for the same.

Methods

The research design is a survey-based model, consisting of 5 questions for each parameter and each question consisted of 4 options based on a matrix scale. The survey was circulated online and filled under anonymity.

The Empathy Questionnaire **(Figure 2)** consisted of questions picked from the Empathy Quotient calculator. From the set of 60, 5 were picked to make the survey accessible and convenient. The same was done for the Learned Helplessness page **(Figure 3)**. Self- rule-out questions **(Figure 4)** were designed by taking observed behaviors of considering self as an exception to general beliefs.

There was an additional page added with an open ended question about childhood trauma. This was an optional question and participant discretion was advised beforehand.

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This questionnaire is meant for research purposes only. All information obtained will be anonymous and no person shall be named or specified in the data collected. There is no right or wrong answer here so please try answering with full honesty.

(This section will have statements and four options for each.)

1. When I talk to someone I try to put myself in their shoes.
    - Strongly agree
    - Agree
    - Disagree
    - Strongly disagree
2. While talking to someone, I adjust myself to their level (e.g. I sit if they are sitting).
3. I consider how others will be affected by my words or actions before doing something.
4. My facial expressions generally mirror that of the other person.
5. When someone explains something, I paraphrase to show that I understand.

Figure 2: Empathy questions.

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1. If caught in a distressing situation, I find it hard to ask for help.
2. It is hard for me to vocalise my thoughts when in stress.
3. If unable to get out of a distressing situation, I get agitated and frustrated with myself.
4. I do not put it full efforts if I think that I won't see desirable results.
5. If I do not achieve success, I automatically assume it happened because of my incapability.

Figure 3: Learned Helplessness questions.

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1. I find it hard to apply the same kindness I have for others to myself.
2. I accept people easily but find it hard to accept myself.
3. I feel that others can achieve their dreams but that will never be the case for me.
4. I am very quick to blame myself for my failures but I do not blame someone else if they have a similar failure.
5. I can easily forgive someone for a mistake they make, but I cannot forgive myself if I make the same mistake.

Figure 4: Self- rule-out questions.

In the span of 1 month, a total of 173 responses were recorded. After the collection of data, values were substituted: Strongly agree- 2, Agree- 1, Disagree- (-1), Strongly disagree- (-2). For each individual, the five questions in each page were totaled separately (Table 1), giving us values for each persons:

1. Empathy Quotient (x1)
2. Learned Helplessness Score (x2)
3. Self-rule out score (y)

Table 1: Self- rule-out questions.

SR TOTAL	EMPATHY	LH TOTAL
7	3	7
1	4	7
10	8	9
10	10	9
5	1	6
8	6	6
9	1	7
2	2	8
2	-1	2
3	1	1
7	0	4
5	3	5
0	3	3
4	6	8
4	9	4
1	1	5
4	2	5
-1	5	-2
-10	3	7
4	3	-1
8	5	2
-3	-1	1
-3	5	-4
-3	2	8
-2	2	2
6	4	7
5	3	1
5	5	5
1	0	9
5	5	5
7	1	4
-3	5	-1
-4	9	2
-4	0	5
1	1	6
-5	-1	3
-2	3	1
-5	5	3
5	4	8
10	7	4
6	3	5
5	8	4
4	7	-3
5	4	3
10	1	10
7	3	9
6	4	6
-1	4	2
-5	5	2
6	1	2
7	1	9
7	4	7
1	-1	3
6	5	7
9	6	9
3	5	5
-7	0	-6
-6	-1	-5
2	2	6
5	2	1
7	1	3
-3	1	1
3	1	9
7	6	6
-5	2	0
3	6	4
5	8	2
1	3	4
9	4	4
-2	6	8
1	2	3
-5	6	3
-3	-1	1
5	7	7
-8	-3	2
-10	-2	-1
4	5	5
-3	-3	5
5	2	8
-7	-4	-5
0	8	0
-1	2	7
4	3	6
8	7	9
5	3	3
7	3	5
8	9	7
-6	5	0
10	6	6
1	1	5
0	6	4
10	6	9
-5	5	-2
-4	1	4
2	6	9
3	5	8
-9	5	4
6	2	8
3	8	3
10	3	5
5	1	7
-4	5	-2
1	1	3
10	2	8
-7	3	6
-4	3	6
-2	7	6
5	0	5
3	6	3
-1	6	1
-3	3	3
-3	7	1
-6	5	-2
-6	3	-4
4	7	8
10	7	6
0	0	5
7	1	3
3	3	4
4	2	3
9	8	10
5	4	1
1	2	-4
-10	0	-6
-7	-1	1
1	9	10
5	-1	-1
10	4	0
5	1	9
-3	5	-2
-6	-1	1
4	8	4
5	4	4
9	6	6
1	3	3
-2	5	2
0	4	5
2	6	2
4	4	9
-6	2	2
2	7	7
5	3	7
6	7	8
-2	3	5
-7	1	5
6	4	4
5	1	5
-8	-2	3
5	5	9
9	7	6
1	3	3
3	2	4
6	1	6
-5	-1	3
-4	7	0
3	-1	5
6	9	5
7	4	7
-5	8	8
-7	-4	-8
-1	6	9
1	4	7
-3	7	8
6	2	8
7	4	6
3	7	-4
7	1	6
-10	4	-1
-1	-3	-1
-8	5	-4
3	1	1
10	4	6
-2	0	7

The raw data once managed and grouped was then tested for Pearson's Correlation Coefficient (R) followed by Multiple Regression, **(Table 2)** to test statistical significance.

Formula for Multiple Correlation Coefficient:

$$R = \sqrt{\frac{r_{yx_1}^2 + r_{yx_2}^2 - 2r_{yx_1} \times r_{yx_2} \times r_{x_1x_2}}{1 - r_{x_1x_2}^2}}$$

Using the formula, R= 0.55.

Table 2: Multiple Regression proving statistical significance.

Regression Statistics						
Multiple R	0.55					
R Square	0.300					
Adjusted R Square	0.291					
Standard Error	4.463					
Observations	173					
ANOVA						
	df	*SS*	*MS*	*F*	*Significance F*	
Regression	2	1448.598	724.299	36.357	0.000	
Residual	170	3386.696	19.922			alpha=0.5
Total	172	4835.295				
	Coefficients	*Standard Error*	*t Stat*	*P-value*		
Intercept	-2.015	0.586	-3.437	0.001		
X Variable 1	0.319	0.120	2.667	0.008		
X Variable 2	0.678	0.094	7.185	0.000		

Results and Discussion

As seen by the R value, a strong multiple correlation occurred between SR, EE and LH (R= 0.55, p=0.00). The p-value being lower than our alpha **(Table 2)** rejects the null hypothesis and proves statistical significance of the data.

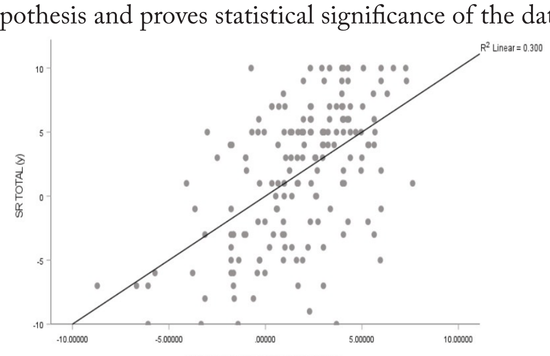

Figure 5: Scatterplot of Multiple Regression.

As shown in **Figure 5** there is a positive correlation between Predicted variables and Actual variables SR.

The findings demonstrate that there is a positive linear relationship of 0.55 between self- rule-out and (elevated empathy with learned helplessness).

Conclusion

The individual complications of trauma have been inspected repeatedly. However, the association and interrelationship between such symptoms remain unexplored. Trauma causes both negative depreciation and positive growth. The study picked elevated empathy as the positive side and learned helplessness as its negative counterpart, establishing the existence of a phenomenon called self- rule-out where in the individual excludes themselves from the factors that they apply on everybody else. There was indeed a strong correlation between these parameters, which further reiterates its significance.

Future research on trauma and its implications may now take into account, the linkage and relation between symptoms and base treatment not just on individual symptoms, but their resulting complex chains.

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Authors

Anoushka Budhia is an emotionally driven student with high regard towards psychology and behavioral sciences. She is interested in pursuing the same in college. Hailing from the belief that lived experience holds immense importance in psychology, she hopes to contribute to the field.

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