

THE RELATION OF GENDER, RELIGIOSITY,
AND
SPIRITUALITY WITH EMPATHY

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For my parents

Abstract

Empathy is considered an important aspect of social interactions thus allowing social harmony and understanding however, little is known about what factors influence its development. This study examined how children's gender, religiosity, and spirituality affects their level of empathy. A total of 79, nine- to 12-year-old students, from two rural school districts, completed questionnaires with parents providing additional information. Results indicate that the children's reported level of spirituality is not related to their reported level of empathy. Their particular religion was also not related to empathy. Additionally, Catholics and other religions were not significantly different from Protestants in terms of reported levels of spirituality. Gender was found to be significantly related to empathy, with females earning higher empathy scores than males. However, gender was not significantly related to spirituality. Although this study did not find factors related to the development of empathy, it is still important to continue research in order to determine what factors are involved. If we can learn what factors positively contribute to the development of empathy, we can support those factors in order to assist all children in becoming more empathic contributors to our society.

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Chapter 1

Introduction and Literature Review

In a world in which we are repeatedly made aware of violence, inhumanity, and injustice, we are reminded that our children are the future, and in order to stop these disturbing events from occurring we must raise our children to be healthy contributors to their society. In order to be such contributors, children must demonstrate their skills in the areas of community, work, and interpersonal relationships. One important aspect of interpersonal skills is empathy. Empathy is considered a basic requirement in order to adequately respond to social cues thus allowing social harmony and understanding. This chapter will discuss the definitions and characteristics of empathy, the developmental progression of empathy, and several theories related to this development.

Researchers view empathy as an important aspect of children's growth and development. It has been recognized that children need to have experience with and exhibit empathy to understand and harmonize with society (Feshbach, 1988). Well-known researchers such as Kohlberg (1963), Gilligan (1982), Goleman (1998, as cited in Berger, 2002), and Coles (1997) have developed theories to explain the development of empathy. Furthermore, multiple factors have been pinpointed that directly relate to greater levels of empathy. For example, females have been found to demonstrate more empathy than males (Eisenberg, Fabes, & Murphy, 1996; Hoffman & Saltzstein, 1967; Smith, 2006). One aspect of psychological functioning that has not been examined in relation to children's levels of empathy, however, is spirituality. Spirituality and religion are not often addressed within psychological research (Holden, 2001), although they have been regularly studied by other social scientists since the early 1900s (Zinnbauer,

Pargament, & Scott, 1999). Yet, empathic viewpoints and the development of morals play a large role in religious and spiritual activities (The Holy Bible, New International Version, 1984). The current study was completed to try to fill this research gap by examining how gender, religious affiliation, and spirituality impact children's levels of empathy.

Empathy

Empathy may be defined as the ability to recognize another's emotional state and respond to it with the same or a very similar response (Landy, 2002). For example, if I were to feel empathy for a friend who is sad, I too would feel sad; I would put myself in that person's shoes and attempt to make them feel better. Furthermore, upon receiving empathy from another, a person often feels better simply because someone *feels their pain*. Thus, "empathy is a shared emotional response between the viewer and the viewed – between the subject and the object in an interaction" (Feshbach, 1988, p. 262).

Empathy allows us to make discriminations regarding other people's affect and gives us the capacity to understand their feelings by taking in and appreciating their perspective, or point of view. Further, if empathy development has progressed in a positive manner and we were to physically or emotionally harm another person, we would most likely respond with sensitivity due to guilt, an emotion highly associated with empathy. More specifically, we avoid harming others due to the experience of feeling guilty, which gives us the opportunity to recognize the pain we have caused in another and therefore restrain ourselves from further aggressive acts (Feshbach, 1988).

Theories of Empathy

Empathy is often looked at through developmental theories of morality or emotions. Specifically, empathy is described by Landy (2002) as involving a developmental progression which begins at an emotional state of being overwhelmed and relying completely on caregivers or external support. This developmental progression leads the individual through several stages until the individual is capable of recognizing and controlling his/her emotions and also recognizing emotions in another. The ability to recognize emotions in another is important so we can help that person, through our own demonstration of caring and supportive behavior.

The developmental progression of empathy, as explained by Landy (2002), begins at birth, as infants demonstrate the ability to regulate their own emotions through the use of calming behaviors, such as sucking their thumb. At approximately one and a half to two years of age, children become aware that others have thoughts, look for and use caregiver expressions for increased understanding of one's surroundings, begin socializing with others, and use a variety of activities and objects for self-calming purposes. From around two to three years of age, children are able to control their emotions approximately 45% of the time, with increasing ability to state their feelings, rather than demonstrating them through behaviors. At this age, self-consciousness and self-awareness are beginning their development as children begin to understand what is expected of them. In order to assist in this understanding, children use pretend play to practice behaving in different ways, playing out the possible results. During the ages of three to six years, children's cognitive abilities increase, resulting in the development and expression of a larger range of emotions. Children use play, experimentation, tools, peer

interactions, and social expectations to continue their development of emotional and behavioral regulation. The child now has the capability of controlling his/her actions and begins to feel guilty if he/she does not. By five and six years of age, children become capable of displaying appropriate, socially accepted emotions, even if that emotion is not felt. For example, the child will pretend to have an emotion, such as liking a present given by another, even if they feel a different emotion, such as dislike. Additionally, children can now recognize that the same situation can invoke more than one feeling (Landy, 2002).

Throughout the developmental progression of empathy, children must have the opportunities to play and socialize with others in order to practice prosocial behavior and recognize that this prosocial behavior is valued by others. Prosocial behaviors are often characterized as behaviors that demonstrate positivity toward peers, including helping, sharing, and comforting others. Interactions with peers and demonstration of prosocial behaviors assist the child in developing the emotional and social milestone called the conscience. Characteristics of this development are an increased sense of right and wrong, curiosity and interest in learning about the world, feeling guilt, obeying rules, insisting others obey rules, and some understanding of more complex emotions such as pride, gratitude, shame, worry, and jealousy (Landy, 2002).

With this in mind, it is important to examine other theories related to the development of empathy, including and spanning beyond the ages of five and six, to determine when one fully achieves this empathic understanding. Specifically, there are several theorists whose work in describing emotional development within early childhood may contribute to an understanding of when the development of empathy is complete.

First, Erik Erikson described eight stages of psychosocial development, each of which reflects an unresolved conflict from childhood. Although Erikson proposed eight stages to explain these unresolved conflicts, stage three is the most important to the current discussion. The third stage is labeled *initiative versus guilt*, a stage where the young child is very excited about starting projects or other activities and feels guilty when this excitement or effort results in failure. Erikson theorized that the child feels these emotions due to their newly developed sense of themselves and others. Based on this sense of others, Erikson explained that children are more apt to feel and display empathy towards others (Berger, 2002).

In addition to typical theories about the development of empathy, theories related to *intelligences* also attempt to explain how individuals become capable of empathy. Specifically, while presenting at the 1998 APA convention, Daniel Goleman (1998, as cited in Berger, 2002) stressed the importance of emotion within his theory. His views revolve around a term called *emotional intelligence*, which involves an understanding of how to manage, interpret, and express emotions (Berger, 2002). Goleman believes that emotional intelligence is so important to the adequate functioning of individuals, that it is more important than the traditional notion of intelligence. In particular, Goleman believes that the development of emotional intelligence is an ongoing process, occurring throughout one's entire life, but most of its development occurs within early childhood when emotions begin to form within the child. "According to Goleman, when caregivers use children's natural attachment to teach them how and when to express feelings, the children will become balanced and empathic human beings, neither overwhelmed by nor unresponsive to their own emotions" (Berger, 2002, p. 301). Having this emotional

intelligence provides individuals with the ability to reprioritize where to focus their attention, cognitions, and subsequent actions in order to solve problems adaptively and empathically (Salovey & Mayer, 1990).

In addition to Goleman's theory of emotional intelligence, moral intelligence is another similar, yet distinct, viewpoint regarding how we appropriately interact with others in our social world. Specifically, Robert Coles (1997) defines moral intelligence as how to behave in this world by taking to heart what we have seen and heard. He believes that it develops as a consequence of learning how to be with others. This form of intelligence can vary, depending upon what children see and hear as they grow into adults and how they use this information to later treat others around them. Coles also indicated that moral intelligence is "enabled" (p. 3) by the moral imagination of children. Moral imagination is defined as "our gradually developed capacity to reflect upon what is right and wrong with all the emotional and intellectual resources of the human mind" (Coles, 1997, p. 3). Thus, Goleman and Coles are similar in their thinking that the ideals inherent in emotional and moral intelligence would be important factors in how individuals relate to others empathically within the world. Both of the theorists focus on the way individuals behave, talk to others, and take their feelings into consideration, rather than on more cognitive factors that are generally associated with intelligence.

Another empathy theorist was Lawrence Kohlberg (1963, 1981) who used a series of ethical dilemmas to study the moral judgments individuals would make in response to them and then applied these judgments to create his three-level model of moral reasoning. It was important to Kohlberg to demonstrate that it is how people reason, rather than end results, which determine their level of moral development. The three levels of his model

of moral reasoning are preconventional, conventional, and post conventional; each of these has two stages. The importance of Kohlberg's model of moral reasoning in relation to achieving empathy lies in the model's second level, conventional moral reasoning, the stage which some middle school children reach. At this level, the individual focuses on social cues to direct their reasoning. More specifically, the child is now aware that everyone has individual interests to pursue, which often conflict, thus an integration of fairness is introduced and utilized. Fairness can be defined as being just and honorable, which can be viewed as a variation of empathy.

Gender Differences

A prominent criticism of Kohlberg's theory lies in the differences between genders or between masculine and feminine viewpoints. Although Kohlberg has studied males and females, his theory is primarily based on a small sample of male adults and children (Munsey, 1980). The lack of female inclusion is specifically due to Kohlberg's belief that women appear deficient in moral development when measured by his theory, reaching only about half of the necessary levels of moral reasoning. The deficit in the higher stages of moral reasoning is considered functional by Kohlberg, as long as women remain in the home. Although never measured, Kohlberg suggested that if women did enter the arena of male activities, they would recognize their inadequate moral perspectives and continue their development to higher stages of reasoning to achieve appropriate moral judgment (Gilligan, 1982).

Carol Gilligan's theory of morality (1982) was created upon recognition that several theories, like Kohlberg's, which were previously considered gender non-specific, were actually based upon only male's empathic responses. Gilligan recognized that

males and females have different thought processes and thus, are likely to have a different developmental progression of empathy as well as a different expression of such empathy once achieved. As such, one singular theory would not be proficient in explaining the experiences, development, and expression of empathy within both genders. Thus, Gilligan's theory makes a distinction between what she calls the male and female voices. Specifically, Gilligan theorized that the theme of women's voices is the aspiration to make moral judgments based on caring. Morality of care is based on the tendency to be reluctant to judge right and wrong in absolute terms, but rather to define oneself in the context of responsibility in human relationships, as well as to judge oneself in terms of the ability to care. On the other hand, the theme of male voices is the desire to make moral judgments based on justice. This is based on the tendency to emphasize justice over relationships and compassion, judging right and wrong in absolute terms. Based on these themes, Gilligan's theory specifically examined the distinction between morality of care and morality of justice in order to best explain all individuals' levels of morality. Gilligan's theory additionally explains that as individuals mature and develop, they naturally develop a higher level of moral understanding, which leads to the ability to recognize and respect the other voice or view of morality.

In order to clarify when these gender differences may emerge, Garrod, Beal, and Shin (1990) completed two research studies with children ranging from five to twelve years of age. Their findings demonstrated that children within this age bracket were more likely to respond to the dilemmas with a voice of care, despite their gender. Furthermore, despite their particular response, children were found to struggle to recognize, understand, and explain the logic of the opposing moral orientation until the

formal operations stage of Piaget's developmental theory, when they can mentally and abstractly think through the problems presented. Garrod and Beal (1993) did find that older children, beginning with age 13, were more capable of explaining the different orientations, as Piaget's developmental theory would suggest. However, despite their capability to explain the opposing orientation, each individual displayed a strong preference towards their initial solution. Not surprisingly, these preferences are reflective of Gilligan's theory as the female participants preferred a voice of care, seeking to accommodate all those involved, whereas the male participants sought to identify the rights of those involved, seeking what was thought to be fair and just.

The development of a preferred morality occurs based on the children's social experiences, social understandings, and interactions with peers. Langdale (1993) suggests that the process of identifying one's gender, and following the stereotypes of that gender in order to gain knowledge about oneself, begins in early childhood. As children begin to identify who they are, they are unconsciously being socialized toward a masculine or feminine value orientation. Thus, it appears that male children are socially educated by their peer groups to identify with the morality of justice while female children are socially educated to identify with the morality of care. As adolescents continue to develop and partake in social interactions, stronger connections are made with their particular gender-specific viewpoint.

Engaging in social relationships also assists in the development of empathy as children are often empathically supported by their peers, particularly during times of stress. This support assists the individual in learning how to solve and cope with difficult situations (Landy, 2002). Furthermore, simply engaging in peer interactions can assist a

child in developing empathy. Specifically, through review of peer discussions about a distributive justice problem, Damon and Killen (1982) found that debating with, and exposure to, other's ideas increased children's use of higher moral reasoning, which in turn promoted an increase in empathic development.

Empathy and Gender

Hoffman (1977) also examined empathy based on social expectations in which females and males learn different skills on which they base their actions. More specifically, Hoffman believed that "females have traditionally been socialized to acquire expressive traits such as empathy, compassion, and giving and receiving affect" whereas males are "increasingly encouraged to acquire instrumental traits, such as mastery and problem-solving" (p. 712). Hoffman included a variety of age groups to specifically examine the ability to empathically respond to others. Hoffman examined the capacity for empathy to be aroused in the participant, as well as the corresponding expression of this empathy to the other. Through his studies, Hoffman reviewed a variety of measures and found that females received higher empathy level scores in every case and at every age bracket, although only a few cases demonstrated significant statistical differences. Other researchers (Bryant, 1982; Mehrabian & Epstein, 1972) have also theorized that females are more empathically expressive than males due to socialization differences between the genders rather than as a genetic difference. For example, socializing boys not to cry is expected to play a role in decreasing their empathic expressiveness to others (Hoffman, 1977). Thus, based on research completed by Hoffman (1997) and Garrod et al. (1990), females appear to be more empathic due to their socially accepted and learned ability to express their empathic capacity to others.

Although researchers continue to disagree as to whether there are (Fischer, 1993; Simon & Nath, 2004), or are not (Bryant, 1982; Eisenberg, Fabes, & Murphy, 1996; Garrod, 1993; Gilligan, 1982; Hoffman, 1977; Lopez, Bonenberger, & Schneider, 2001), similarities between men and women's reported underlying emotional experiences, cultural conditioning is expected to continue to cause men to repress these emotions, resulting in underdeveloped emotional expressiveness (Kring & Gordon, 1998; Lanzetta, Cartwright-Smith, & Kleck, 1976; Levant, 1997; Strayer & Roberts, 2004). In addition, Eisenberg et al. (1996) found that boys seem to need their mother's support and encouragement to develop their emotions and recognize emotions in others in order to develop positive social functioning and interpersonal relations. Overall, research has consistently found that females express higher levels of empathy than males, which is assumed to be related to the cultural expectations regarding acceptable responses of males and females.

Spirituality

Through the examination of the factors that play a role in the development and expression of empathy, it appears that empathic behaviors are unconsciously practiced on a daily basis, as children interact with other people, sometimes during times of need. In order to encourage this expression of empathy, children are often reminded to follow the *Golden Rule*, which is a biblical ideal (Coles, 1997). The Golden Rule to "Do unto others, as you would have others do unto you" (p. 10), or variations of these words, have been used by several religious figures within diverse cultures, from the philosophies of Plato and Socrates, to the divinity of Jesus Christ, in order to summarize their ethical teachings (Terry, 2006). Although this *rule* of ethics and ethical conduct "appears to

have originated in England, around the 17th century” (p. 10), the ethic of reciprocity has been found to appear in written format over 5,000 years ago (Terry, 2006). Despite its ancient origination, it appears that psychologists have been slow in recognizing that spirituality may be related to human development (Holden, 2001). For example, Benson, Roehlkepartain, and Rude (2003) searched two databases, seeking articles that addressed spirituality in childhood or adolescence, and found less than 1% of articles discussed such spirituality. When the researchers narrowed their search to six leading developmental journals, they found only one such article.

Although spirituality is beginning to be more often addressed in research on children and adolescents, Mills (2002) notes that until the 1980s, the term spirituality had not even been used in the MedLine database. Despite the relatively small sample of previous research, there is a growing awareness and interest in spiritual and moral influences in general (Benson et al., 2003; Smith, Faris, Lundquist-Denton, & Regnerus, 2003). In addition, these researchers explain that historical evidence from several cultures has shown that humans demonstrate a tendency toward spirituality in order to establish their existence. Thus, another variable that may be related to children’s levels of empathy is their level of spirituality.

Definitions

As researchers’ interest in both spirituality and religiosity has increased over the past few decades, they have attempted to define, study, and theorize about these two constructs (Zinnbauer et al., 1997). As several definitions and meanings are attributed to the constructs, researchers continue to struggle to come to a consensus regarding a comprehensive and accepted definition for *spirituality* and *religiosity* (Compton, 2001;

Hackney, 2003; Smith et al., 2003; Zinnbauer et al., 1999). By reviewing previous research regarding these constructs, this researcher views a notable difference between the two constructs. Specifically, this researcher views religiosity as the expression, practice of, or search for the significance of the connection between oneself and some larger, usually supernatural reality, or “ritual from the head” (Marler & Hadaway, 2002, p. 296). This connection is usually accomplished through using a combination of both personal and institutional belief systems. On the other hand, spirituality is viewed by this researcher as addressing the actual connection, the path, the search for, or an overall awareness of the sacred through a more personal, internal, non-traditional, independent, or experiential manner. More specifically, this could be explained as “what you feel from the heart” (Marler & Hadaway, 2002, p. 296). Since the focus of the current study is about one’s personal connection or relationship with a Higher Power, the term spirituality will be utilized.

Spirituality and Empathy

Despite the difficulty in coming to a consensus regarding the definition of spirituality, and although there are relatively few research studies examining the actual levels of spirituality within individuals, there have been some important findings. Specifically, spirituality has been found to be related to positive mental health of adults and children (Doolittle & Farrell, 2004; Hackney, 2003; Houskamp, Fisher, & Stuber, 2004), along with positive social functioning and higher reported levels of empathy (Berger, 2002; Lickona, 1983; Maton & Wells, 1995; Smith, 2006). Smith (2006) also found that praying was highly related to empathy within Americans.

Church Attendance

Often connected to the development of empathy is the demonstration of helping, or prosocial behaviors. Religious, or church, activities have been found to provide such social and value-oriented opportunities. Specifically, through providing and supporting intergenerational relationships, community service, and open and accepting discussions regarding values and moral issues, church activities provide an important role in the development of healthy life choices, internal standards, personal identity, and prosocial behaviors (Berger, 2002; Wagener, Furrow, King, Leffert, & Benson, 2003).

Religious involvement, or more specifically, church attendance, has also been found to have beneficial effects on mental health. Although few studies have been completed about this particular relationship within children, Abbotts, Williams, Sweeting, and West (2004) found that aggression was a less likely behavior among 11-year-old children who attended church weekly than among 11-year-old children who attended church never/less than weekly. In addition, self-esteem was higher, and anxiety and depression were lower for Catholic children, who attended church weekly. It should be noted, however, that if church attendance is not the norm for a child's peer group, there were not as many positive mental health effects related to such attendance.

In summary, although research regarding child and adolescent spirituality has been increasing, the progress has been slow. Thus, there remains a lack of research on the relation between spirituality and empathy. In addition, within the existing articles, little attention has been given to determine levels of spirituality of children and adolescents with religious traditions other than Christianity or Judaism (Benson et al., 2003).

Current Study

As one can see, there have been several theories and studies examining the importance of empathy and the factors involved in its development. Due to lack of, and conflicting results, research has still not been able to clearly identify if religiosity and spirituality are related to children's levels of empathy. This current study attempted to fill this research gap by examining how gender, religiosity, and children's spirituality related to their level of empathy.

The age range examined in the current study, ages nine through 12, was selected due to the determination that the children would be at the age prior to teenage defiance and independence from parental units, yet able to think for themselves and take other's perspectives. Specifically, children at an age prior to adolescence are not yet at the stage that Erikson would label identity versus role confusion (Berger, 2002). Within the identity versus role confusion stage, adolescents strive for uniqueness, therefore often attempting to disengage from and disagree with their parents, even if their values and morals are similar. Furthermore, Piaget explained that within the concrete operational stage of development, children in the age range of approximately seven to 12 are more able to think concretely and systematically, yet understand that different events have different social rules (Berger, 2002). In addition, children are now able to realize the differences between tone and content of speech, distinctions they began to understand during the concrete pre-operational stage (Morton & Trehub, 2001). Specifically, children at this stage of development are beginning to understand that tone is how a person says something, whereas content, is what a person is actually saying. For example, rather than only identifying that a person is talking about a happy event, children are now

learning to identify if the speaker is using a sad or happy tone when describing that event, in order to gain more understanding of the event as a whole. This understanding of tone and content begins to emerge during the concrete pre-operational stage of development and increases greatly within the next few years. Thus, by age nine or 10, most children are able to recognize that how something is said is just as important as what is said. This ability to recognize tone of speech assists children in identifying others' emotions in relation to particular events. Thus, due to these developmental factors, children within the age range of nine to 12 years were used as participants within the current study.

A model of the relationships among the variables was proposed with the following hypotheses:

- Spirituality is an important variable that is related to children's levels of empathy.
- Specific religious denominations, as reported by the child or parent, will not be related to one's reported level of spirituality. More specifically, Catholics and individuals of other religions will not differ significantly from Protestants in their reported level of spirituality.
- As previous research has found, females will be a more empathic gender.

Chapter 2

Method

Participants

Participants were 79 students, ages nine to 12 years, in rural public schools within New York State. Their parents gave consent for their participation and provided demographic information.

Measures

The information form – parent. The Information Form – Parent version (see Appendix A) was created in order to obtain background information regarding the participant's home life. The background information included ages (coded as age in months) and genders of family members (coded as 0 for female and 1 as male), approximate family income (as indicated on a scale ranging from 1, less than \$24,000, to 4, \$90,000 or higher), mother and father level of education, the religious denomination of the family (coded as 0 for none/don't know, 1 for Protestant, Wesleyan, Christian, and non-denominational, 2 for Catholic, and 3 for other religions such as Jewish, Orthodox, Mormon, and Jehovah's witness), frequency of church/religious services attendance (as indicated on a scale ranging from 1, never, to 7, daily), and who completed the form.

Of the responses returned, the average age of the participant was 138.6 months. 93% of the participants had at least one sibling, 53% had 2 siblings, 22% had 3 siblings, 9% had 4 siblings, and 3% had 5 siblings. The mean income was 2.47, a value which falls between 2, \$24,000 - \$59,000 and 3, \$60,000 - \$89,000. The mean fathers education was 2.57 and the mean mothers education was 2.96, both values which fall between 2, high school education/equivalency and 3, a 2 year college. The percentage of

respondents that were Protestant was 59%, with 10% of the respondents Catholic, and 8% of the respondents being of other religions. The mean frequency of church attendance was 2.70 a value which falls between 2, holidays/occasionally and 3, at least once a month. 88% of the questionnaires were completed by the mother, 8% were completed by the father, and 4% were completed by the grandmother. A summary of the demographic information can be viewed in Table 1.

The information form – child. The Information Form – Child version (see Appendix B) was completed by the child when completing the ratings scales. Children were asked their religious denomination and how often they attend church (with coding the same as the parent information form). The percentage of respondents that were male was 44%, whereas the percentage of respondents that were female was 56%. As many of the children's responses varied from the parent form, with several children answering "I don't know", the parent information was used, as it was more accurate.

The Index of Empathy for Children and Adolescents. The search for a measure of one's level of empathy began with Mehrabian and Epstein's (1972) measure of emotional empathy. These researchers developed an adequate measure of emotional empathy by measuring related aspects of empathy such as appreciating the feelings of, and being emotionally responsive to, other individuals. With some revisions of this measure, Bryant (1982) created the Index of Empathy for Children and Adolescents. Specifically, Bryant took the adult questions and revised them to create questions to which children and adolescents would be able to understand and respond. For example, the adult question, "I often find public displays of affection annoying" was changed into more child-friendly wording to state, "People who kiss and hug in public are silly"

(Bryant, 1982, p. 415). As there are relatively few measures of child and adolescent levels of empathy, and this measure has been found to have good validity and reliability across several age groups of children, the Index of Empathy for Children and Adolescents was used for the current study.

The Index of Empathy for Children and Adolescents (Bryant, 1982; see Appendix C) is a measure of empathy based on responses to a group of questions. This index was created based on the adult questionnaire created by Mehrabian and Epstein (1972), with revisions made to more adequately understand children and adolescents' level of empathy. The scale consists of 22 items which are endorsed in a "yes" – "no" format (coded as 0 for no and 1 for yes). Thus, scores range from zero to 22, with higher scores indicating more empathic tendency. Some items were worded negatively to minimize a particular response set (these items were then reverse coded). Convergent and discriminant validity tests on the index indicated that the scale is appropriately measuring empathy for children and adolescents. Researchers assessed test-retest data across grade levels and gender; the reliability of test-retest data ranged from .74 to .85 across a two week interval. Internal consistency was assessed by computing Chronbach's alpha coefficients which ranged from .54 (1st grade participants) to .79 (7th grade participants), with internal consistency increasing as children's ages increased (Bryant, 1982).

Internal consistency reliability (Chronbach's alpha) was also calculated by this examiner in order to assess the quality of each question on the scale and to be sure that the questions formed a linear scale. More specifically, in order to be sure that the yes/no version of the Index of Empathy for Children and Adolescents was a reliable measure of children ages nine through 12, several Chronbach's alphas were performed.

Internal consistency reliability analyses of the entire scale resulted in a Chronbach's alpha of .67. In order to yield a measure with higher reliability, further reliability analyses were completed. After each analysis was completed, the question which had the lowest correlation when compared to the other items was removed. When the Chronbach's Alpha no longer increased after removing an item with the lowest correlation, removal of items was terminated. Overall, 10 items were removed. Of those items removed, seven were items which were coded negatively. A negatively coded question required the participant to answer negatively in order to earn a higher empathy score. The items that were removed are noted in Appendix C. After the questions were removed, the remaining 12 items had a Chronbach's alpha of .77.

The Daily Spiritual Experiences Scale (DSES). In order to measure one's level of spirituality, the scale used must seek to measure one's personal connection or relationship with a Higher Power. In addition, the questions asked must be understood by children ages nine through 12. Unfortunately, no adolescent spirituality scale was located, and thus, an adult scale was sought that met the previously stated criteria. Through review of several measures, Seidlitz et al. (2002) completed several studies to determine how individuals identify themselves as spiritual or religious. They found that by using questions which excluded the word religion, or any other wording suggesting organized religion, one was more able to measure true spirituality, rather than organized or spiritual behaviors. With this in mind, a scale excluding such wording was found--the Daily Spiritual Experiences Scale (DSES; Underwood & Teresi, 2002). The purpose of this scale is to measure a person's perception of, and connection with, a Higher Power through everyday ordinary experiences rather than measuring particular beliefs or

behaviors. This researcher informally asked the questions from the DSES to three children, ages 10, 11 and 13, and found that overall, the questions were understood by them. Thus, due to the lack of a spirituality scale designed specifically for children, the DSES was used in the current study as it measures spirituality, or one's connection to a Higher Power, and the questions can be understood by children and adolescents.

The Daily Spiritual Experiences Scale (DSES) (Underwood & Teresi, 2002; see Appendix D) was also completed by participants. "The scale is intended to measure a person's perception of the transcendent (God, the divine) in daily life and his or her perception of his or her interaction with or involvement of the transcendent in life" (Underwood & Teresi, 2002, p. 23). The scale is comprised of 15 questions, of which the first 14 are scored on a modified Likert scale from one (never or almost never) to six (many times a day). The 15th question, "In general, how close do you feel to God?" allows an individual to answer with one of four response categories from "not at all" (coded as 1.5) to "as close as possible" (coded as 6.0). Each response is then scored, with the sum of the scores indicating each individuals' level of spirituality, higher scores reflected a higher level of spirituality. The construct validity of the DSES suggests that the scale measures what was intended. The internal consistency reliability estimates of the DSES using the Chronbach's alpha co-efficients were high, with a .94 and a .95, and the inter-rater reliability (when the questions were presented in an interview format) ranged from .64 to .78, which is considered adequate.

Internal consistency reliability (Chronbach's alpha) was also calculated by this examiner for the Daily Spiritual Experiences Scale in order to assess the quality of each question on the scale and to be sure that the questions formed a linear scale. More

specifically, in order to be sure that the DSES was a reliable measure of children ages nine through 12, several Chronbach's alphas were performed.

Internal consistency reliability analyses of the entire questionnaire resulted in a Chronbach's alpha of .92. In order to create a variable with a higher internal consistency, several reliability analyses were completed. After each reliability analysis the question which had the lowest correlation when compared to the other items was removed. Overall, 2 items were removed. The questions that were removed are noted in Appendix D. After the questions were removed, the remaining 13 questions had a final Chronbach's alpha of .93.

Procedure

Approximately 775 parents with nine- to 12-year-old children in two rural school districts were sent an informational letter and consent form. Parents returned their consent forms and responses to the Information Form. Children whose parents provided consent completed the above measures during a time determined with school staff.

Analyses

Results were analyzed using Structural Equation Modeling (SEM). This non-experimental analysis is an appropriate method for the present study, as correlations among the independent variables are expected (Keith, 1999). In order to deduce the possible correlations among the variables, SEM allows the researcher to use theory, time precedence, relevant research, and logic to create models.

Initially, the data was entered into the Analysis of Moment Structures program, version five (AMOS) for further statistical analysis. AMOS uses a graphic approach to produce and analyze path diagrams (Arbuckle, 2003; Arbuckle & Wothke, 1999).

Within the path diagrams, rectangles represent measured or manifest variables. A straight line, with an arrow at one end represents presumed influences, whereas a curved line, with arrows at both ends represents correlations between the variables. Exogenous variables are presumed causes whereas endogenous variables are variables that are affected by other variables within the model. In addition, a small circle, with the letter “d” represents a disturbance, or an unmeasured variable representing all other influences on an endogenous variable, besides those that are included within the model. Disturbances are also called residuals, particularly when used in multiple regression analysis.

Variables within the Model

Within the current model (see Figure 1), the variables of Gender, Income, Catholic, and Other Religion are all considered manifest, as they will be specifically measured, and exogenous, as they do not have causes that are considered within the model. The Catholic variable includes all of the individuals who responded that catholic was the religious denomination of the family, whereas Other Religion includes religious denomination responses of other religions such as Jewish, Orthodox, Mormon, and Jehovah’s Witness. These variables were then compared to the individuals who identified their religious denomination as Protestant. Finally, the variables of child’s reported level of empathy and child’s reported level of spirituality are both considered manifest, as they were specifically measured, with one total score being used. They were also considered endogenous, as they are expected to be affected by other variables within the model.

Current Model

As time precedence and logic demonstrate, a child is born with a particular gender, and into a family with a pre-established SES and particular preference for a religious denomination into which the child is immersed without choice. It was proposed that these pre-established, and typically stable variables, all occur upon the child's birth and are all correlated with each other, as demonstrated by the curved lines. In addition to being correlated with each other, time precedence, logic, and previous research indicate that those initial variables also have an influence on the variables of empathy and spirituality, as reflected by the straight lines extending toward them. Although there is a path from the religious denomination variable to spirituality, it was expected that the path value would not be significant, i.e., a child's particular religious denomination would not be related to their level of reported spirituality. Also based on previous research, which has indicated that those who are spiritual have higher reported levels of empathy and that in order to follow biblical or spiritual ideals, one must follow the "Golden Rule", a straight line extending from spirituality to empathy was used, as spirituality was expected to have an influence on one's level of empathy. In addition, based on previous research, it was proposed that female children would show significantly more empathy and spirituality than males.

Overall, using SEM allowed for the examination into the effect that the main variable, child's reported level of spirituality, has on the other main variable, child's reported level of empathy. In addition, SEM allowed for the examination into how these main variables interact while controlling for the background variables of gender, income, and religious denomination of the family.

Chapter 3

Results

A total of 79 students completed the questionnaires with their parents providing additional information. The model was drawn to be a saturated model, with all possible paths between variables included in the model (see Figure 1). As it is a saturated model, examining fit statistics would not be appropriate. The mean score for each empathy question was .69. When this mean was multiplied by 12, the number of questions each student completed, the average empathy score became 8.28 (see Table 2). The mean score for the spirituality questions one through 11, and 14 was 3.35, a value that falls between daily spiritual experiences of 3 (some days) to 4 (most days). The mean score for the Spirituality question 15 was 2.91, a value which falls between 1.5 (not at all) and 3 (somewhat close). The average spirituality score was 34.92 (see Table 2).

Relation between Spirituality and Empathy

The first principal hypothesis of the current research, that spirituality is an important variable that is related to children's levels of empathy, was not significant ($\beta = .10$). Thus, contrary to the hypothesis, the two variables were not found to be related.

Religion and Spirituality

As the second principal hypothesized, it was found that specific religious denominations are not significantly related to one's reported level of spirituality. More specifically, Catholics were not significantly different from Protestants in terms of reported levels of spirituality ($\beta = -.10$) and other religions were not significantly different from Protestants in terms of reported levels of spirituality ($\beta = -.02$).

Relation between Gender and Empathy

Also as hypothesized, one's gender was significantly related to empathy ($\beta = -.29$). More specifically, for each standard deviation increase in gender, there is a .29 standard deviation decrease in empathy. As females were coded as 0 and males were coded as 1, females had a higher empathy score than males.

Additional Findings

Additional results, unrelated to the principal hypotheses, indicated that one's particular religion was also not related to empathy. More specifically, Catholics were not significantly different from Protestants in terms of their reported level of empathy ($\beta = -.12$). In addition, other religious denominations were not significantly different from Protestants in terms of their reported level of empathy ($\beta = -.05$).

Furthermore, one's gender was not significantly related to spirituality ($\beta = -.14$). Lastly, one's income was also not significantly related to spirituality ($\beta = .08$) or empathy ($\beta = .08$).

Chapter 4

Discussion

In order to assist children in developing empathy, the factors involved in its development need to be clearly identified. Although theories and studies have been completed to examine this important issue, clear factors in the development of one's development of empathy have yet to be found. The current study examined how gender and children's reported level of spirituality are related to their reported level of empathy. Overall, the principal hypotheses that spirituality is an important variable that is related to children's levels of reported empathy was not supported. On the other hand, the other hypotheses, that Catholics and individuals of other religions would not differ significantly from Protestants in terms of reported levels of spirituality, and that females will be a more empathic gender, were supported.

Spirituality's relation to empathy

Of particular interest in this study, it was found that spirituality was not significantly related to one's reported level of empathy. This result was surprising, given previous research findings. It was expected that there would be a relationship between the two as previous research has found that spirituality is related to the positive mental health of adults and children (Doolittle & Farrell, 2004; Hackney, 2003; Houskamp, Fisher & Stuber, 2004). More specifically, research has found that overall higher spirituality scores are related to lower depression scores (Doolittle & Farrell, 2004), and higher everyday psychological adjustment such as greater self-esteem and happiness (Hackney, 2003). In addition, it was expected that there would be a relationship between spirituality and empathy as previous research has found that spirituality is related to

positive social functioning and higher reported levels of empathy (Berger, 2002; Lickona, 1983; Maton & Wells, 1995; Smith, 2006).

It is suspected that one's reported level of spirituality was not related to reported levels of empathy due to the possibility that adolescents are not sure how to express their feelings about their relationship with a higher power, and thus, a questionnaire may not accurately determine their level of spirituality. This may be the reason why this researcher was unable to find a previously created questionnaire designed to measure children and adolescent levels of spirituality. Due to children and adolescents varying degrees of development and understanding, a questionnaire may not be an appropriate measure of such an abstract idea. It may also be possible that spirituality is not related to children's reported levels of empathy.

Religious denomination and its relation to Spirituality

Also as hypothesized, identification with a specific religious denomination was not found to be significantly related to one's reported level of spirituality. More specifically, Catholics were not significantly different from Protestants in terms of reported levels of spirituality, and other religions were not significantly different from Protestants in terms of reported levels of spirituality. Based on the generally accepted definitions of Spirituality and Religiosity within previous research, it was not expected that one's affiliation with a specific religious denomination would be related to their level of spirituality. More specifically, this research was focusing on one's personal connection with a higher power, the typical definition of spirituality, rather than the practice of one's religions, the typical definition of religiosity. Thus, it was expected, based on the definitions of spirituality and religiosity used within research, that there

would not be a relationship between one's religious denomination and one's reported level of spirituality.

In addition, the lack of a relationship between one's religious denomination and one's reported level of spirituality may be due to parental expectations and/or requirements to participate in the religious denomination of the family, similar to the expectations surrounding other family traditions. Children and adolescents may participate in this family tradition, however they may not have high levels of spirituality.

Gender's relation to Empathy

As hypothesized, one's gender was significantly related to empathy. More specifically, females earned higher empathy scores than males, findings that are consistent with previous empathy research (Bryant, 1982; Garrod et al, 1990; Hoffman, 1997; Mehrebian & Epstein, 1972). Multiple theories indicate that males are often socialized to express themselves in ways that are more characteristic of problem solving or fairness rather than in the more traditional empathic expression that females are socialized to express, which is that of caring or empathy (Gilligan, 1982; Hoffman, 1977; Langdale, 1993).

Additional findings

Unrelated to the principal hypotheses, but still of importance, results additionally indicated that income was not significantly related to empathy. Thus, regardless of the family's income, it does not relate to how you responded to the empathy questions. In addition, the adolescent family's income was also not related to one's reported level of spirituality. Finally, being male or female was also not significantly related to one's reported level of spirituality.

Limitations

Although this study provides many important findings to further the understanding of empathy development, it does have some limitations. One limitation of the study was the measure that was used to determine adolescents' levels of spirituality. Specifically, an adult scale of spirituality was used as the measurement to determine children's levels of spirituality, since no measures geared toward children were available. Although the questions were asked informally to a few children prior to using the measure to verify their understanding of the questions, approximately one third of the students in the actual sample asked for clarification of the questions while they were completing the questionnaire. It is suspected that additional students struggled with the way in which the questions were worded but simply did not ask for clarification. Thus, the measure may not have accurately assessed participants' levels of spirituality. Hopefully, future research will develop measures of spirituality that are more understandable and applicable to children.

Another limitation of the current study was the number of participants used. Out of 775 requests, only 79 consents were returned. Although there were enough participants to have sufficient statistical power, the addition of more cases would have been beneficial in determining if there were additional statistical differences between variables, or greater effects. In addition, it is unclear why only 10% of the consents were returned. It is suspected that the informational form was too lengthy for some parents to complete without any incentive. It may also be possible that those individuals who did not complete the consent had difficulties with reading or writing thus making completion of the forms difficult.

Finally, although participants reported several varying religious affiliations, the majority identified themselves as Protestant. Thus, it may be beneficial to locate students with more diverse religious backgrounds (Muslim, Hindu, Amish, Jewish) for a more in depth look into this topic. As this study was conducted within rural school districts within a small area of New York State, it would be recommended to broaden the sample by using urban/suburban populations across the nation. Broadening the geographical location of the study would assist in the identification of more diverse religious affiliations and allow for greater sample size.

Future Research

Although this study provided us with much information about what is and is not related to one's development of empathy, there is still much that is unknown about what factors assist in the development of the base level of empathy. Future studies could be completed to continue to determine such factors. Particularly, it would be beneficial to continue research into the identification of specific behaviors related to how one identifies oneself as spiritual or religious, such as rate of volunteerism, church attendance, or amount of praying, and determine if these specific behaviors are correlated to higher levels of reported empathy. In addition, it would also be beneficial to further examine if other specific aspects of one's life, such as intelligence, education, or birth order are related to higher levels of reported empathy.

In addition to the self-report questionnaire measures that were used, alternative means of data collection would be recommended for additional research on identifying one's levels of empathy or spirituality. Specifically, due to varying levels of cognitive ability and academic achievement of the students within the school setting, it would be

beneficial for students to be individually interviewed to determine their levels of empathy and spirituality. This would allow the researcher to determine the students' level of understanding of each question and be able to provide additional examples to support the student in answering the questions to the best of their ability. In addition, this would provide the researcher an opportunity to ask additional meaningful questions such as specific activities they participate in, or to observe parental/sibling interactions, both of which may further demonstrate empathic or spirituality expressiveness.

Additional research could also focus on whether children model empathic behaviors in which they observe their parents participating. This could be completed through an observational study, with the parents participating in a specific empathic task. Their child could then be placed in a similar situation to determine if they demonstrate the empathic behavior they had previously observed from their parent. Finally, it may be beneficial to complete a basic study with children and adolescents to determine what types of behaviors they view as empathic and how often they feel they participate in these types of behaviors.

Implications

Based on the results of this study, and the research found in developing this study, it is important to think about how, as a society, we are raising our children. If we as a society would like to see more empathic responding, we need to first model more empathic responding ourselves, as research clearly indicates that children model those around them. In addition, if we would like to see more empathic responding from males, it is important to think about how we respond to their actions and behaviors as well as explain and support various male and female roles and the integration of these roles.

Although higher levels of reported spirituality were not found to be related to higher levels of reported empathy in this study, previous research has found that higher levels of spirituality are related to greater everyday psychological adjustment, including higher self-esteem, greater reports of happiness, and lower reports of depression (Doolittle & Farrell, 2004; Hackney, 2003).

If we can learn what factors positively contribute to the development of empathy, we can support those factors in order to assist all children in becoming more empathic contributors to our society.

Summary

Empathy is considered a basic requirement in order to adequately respond to social cues thus allowing social harmony and understanding. This study intended to assist in the clarification of what factors contribute to the development of one's base level of empathy. Results continue to indicate that females are a more empathic gender, similar to previous research. Unfortunately, no relationship was found between spirituality and empathy resulting in an inability to clearly identify spirituality as an important variable in the development of empathy. It was additionally found that specific religious denominations were not related to one's reported levels of spirituality, indicating that one's spirituality is not related to one's religious denomination.

Although limitations were found for this particular study, research in this area is still needed to determine what factors contribute to one's base level of empathy. In a world in which social interaction has become more and more technologically based, determining what factors contribute to empathy is more important than ever. We need to continue to identify and reinforce the importance of empathic understanding to our

children in order to continue to raise our children to be healthy contributors to their society.

References

- Abbots, J. E., Williams, R. G. A., Sweeting, H. N., & West, P. B. (2004). Is going to church good or bad for you? Denomination, attendance and mental health of children in West Scotland. *Social Science & Medicine*, 58, 645 – 656. doi: 10.1016/S0277-9536(03)00283-1
- Arbuckle, J.L. (2003). *Amos 5.0 update to the Amos user's guide*. Chicago: Smallwaters.
- Arbuckle, J.L., & Wothke, W. (1999). *Amos 4.0 user's guide*. Chicago: Smallwaters.
- Benson, P. L., Roehlkepartain, E. C., & Rude, S. P. (2003). Spiritual development in childhood and adolescence: Toward a field of inquiry. *Applied Developmental Psychology*, 7(3), 205 – 213. doi: 10.1207/S1532480XADS0703-12
- Berger, K. S. (2002). *The Developing Person: Through Childhood and Adolescence* (6th Ed.). New York: Worth Publishers.
- Bryant, B. K. (1982). An index of empathy for children and adolescents. *Child Development*, 53, 413 – 425. doi: 10.2307/1128984
- Coles, R. (1997). *How to raise a moral child: The moral intelligence of children*. New York: Random House.
- Compton, W. C. (2001). Toward a tripartite factor structure of mental health: Subjective well-being, personal growth, and religiosity. *The Journal of Psychology*, 135(5), 486 – 500. doi: 10.1080/00223980109603714
- Damon, W., & Killen, M. (1982). Peer interaction and the process of change in children's moral reasoning. *Merrill – Palmer Quarterly*, 28 (3), 347 – 367.

- Doolittle, B. R., & Farrell, M. (2004). The association between spirituality and depression in an urban clinic. *Primary Care Companion to the Journal of Clinical Psychiatry*, 6 (3), 114 – 118. doi: 10.4088/PCC.v06n0302
- Eisenberg, N., Fabes, R. A., & Murphy, B. C. (1996). Parents' reactions to children's negative emotions: Relations to children's social competence and comforting behavior. *Child Development*, 67, 2227 – 2247. doi: 10.2307/1131620
- Feshbach, N. D. (1988). Television and the development of empathy. *Applied-Social-Psychology-Annual*, 8, 261-269.
- Fischer, A. H. (1993). Sex differences in emotionality: Fact or stereotype? *Feminism & Psychology*, 3(3), 303 – 318. Doi: 10.1177/0959353593033002
- Garrod, A., & Beal, C. R. (1993). Voices of care and justice in children's responses to fable dilemmas. In A. Garrod (Ed.), *Approaches to moral development: New research and emerging themes*: Chapter 3. New York: Teachers College Press.
- Garrod, A., Beal, C., & Shin, P. (1990). The development of moral orientation in elementary school children. *Sex Roles*, 22(1/2), 13 – 27. doi: 10.1007/BF00288151
- Gilligan, Carol. (1982). *In a different voice: Psychological theory and women's development*. Cambridge, Massachusetts: Harvard University Press.
- Hackney, C. H. (2003). Religiosity and mental health: A meta-analysis of recent studies. *Journal for the Scientific Study of Religion*, 42(1), 43 – 55. doi: 10.1111/1468-5906.t01-1-00160
- Hoffman, M. L. (1977). Sex differences in empathy and related behaviors. *Psychological Bulletin*, 84(4), 712 – 722. doi: 10.1037//033-2909.84.4.712

- Hoffman, M. L., & Saltzstein, H. D. (1967). Parent discipline and the child's moral development. *Journal of Personality and Social Psychology*, 5(1), 45 – 57. doi: 10.1037/h0024189
- Holden, G. W. (2001). Psychology, religion, and the family: It's time for a revival. *Journal of Family Psychology*, 15(4), 657 – 662. doi: 10.1037//0893-3200.15.4.657
- The Holy Bible: New international version containing the Old Testament and the New Testament.* (1984). Grand Rapids, Michigan: International Bible Society/Zondervan Publishing House.
- Houskamp, B. M., Fisher, L. A., & Stuber, M. L. (2004). Spirituality in children and adolescents: Research findings and implications for clinicians and researchers. *Child and Adolescent Psychiatric Clinics of North America*, 13, 221 – 230. doi: 10.1016/S1056-4993(03)00072-5
- Keith, T. Z. (1999). Structural equation modeling in school psychology. In C. R. Reynolds & T. B. Gutkin (Eds.), *The handbook of school psychology* (3rd ed., 78-107). New York: Wiley.
- Kohlberg, L. (1963). The Development of children's orientations toward a moral order: I. Sequence in the development of moral thought. *Vita Humana*, 6, 11 – 33. doi: 10.1159/000269667
- Kohlberg, L. (1981). *Essays on moral development: The philosophy of moral development: Moral stages and the idea of justice.* (Vol. 1). Harper and Row: New York.

- Kring, A. M. & Gordon, A. H. (1998). Sex differences in emotion: Expression, experience, and physiology. *Journal of Personality and Social Psychology*, 74(3), 686 – 703. doi: 10.1037//0022-3514.74.3.686
- Landy, S. (2002). *Pathways to competence: Encouraging Healthy social and emotional development in young children*. Baltimore, Maryland: Paul H. Brookes Publishing.
- Langdale, S. (1993). Moral development, gender identity, and peer relationships in early and middle childhood. In A. Garrod (Ed.), *Approaches to moral development: New research and emerging themes*: Chapter 2. New York: Teachers College Press.
- Lanzetta, J. T., Cartwright-Smith, J., & Kleck, R. E. (1976). Effects of nonverbal dissimulation on emotional experience and autonomic arousal. *Journal of Personality and Social Psychology*, 33(3), 354 – 370. doi: 10.1037//0022-3514.33.3.354
- Levant, R. F. (1997). The masculinity crisis. *The Journal of Men's Studies*, 5(3), 221 – 231
- Lickona, T. (1983). *Raising good children from birth through the teenage years: How to help your child develop a lifelong sense of honesty, decency, and respect for others*. New York: Bantam Books.
- Lopez, N.L., Bonenberger, J.L., & Schneider, H.G. (2001). Parental disciplinary history, current levels of empathy, and moral reasoning in young adults. *North American Journal of Psychology*, 3 (2), 193 – 205.

- Marler, P. L., & Hadaway, C.K. (2002). “Being religious” or “Being spiritual” in America: A zero-sum proposition? *Journal for the Scientific Study of Religion*, 41(2), 289 – 300. doi: 10.1111/1468-5906.00117
- Maton, K. I., & Wells, E. A. (1995). Religion as a community resource for well-being: Prevention, healing, and empowerment pathways. *Journal of Social Issues*, 51(2). 177 – 193. doi: 10.1111/j.1540=4560.1995.tb01330.X
- Mehrabian, A., & Epstein, N. (1972). A measure of emotional empathy. *Journal of Personality*, 40(4), 525 – 543.
- Mills, P. J. (2002). Spirituality, religiousness, and health: From research to clinical practice. *Annals of Behavioral Medicine: A Publication of The Society of Behavioral medicine*, 24(1), 1 – 2. doi: 10.1207/S15324796ABM2401_01
- Morton, J. B., & Trehub, S. E. (2001). Children’s understanding of emotion in speech. *Child Development*, 72, 834 – 843. doi: 10.1111/1467-8624.00318
- Munsey, B. (Ed.). (1980). *Moral development, moral education, and Kohlberg: Basic issues in philosophy, psychology, religion, and education*. Birmingham, Alabama: Religious Education Press.
- Salovey, P., & Mayer, J.D. (1990). Emotional Intelligence. *Imagination, Cognition, and Personality*, 9, 185 – 211. doi: 10.2190/DUGG-P24E-52WK-6CDG
- Seidlitz, L., Abernethy, A. D., Duberstein, P. R., Evinger, J. S., Chang, T. H., & Lewis, B. L. (2002). Development of the spiritual transcendence index. *Journal for the Scientific Study of Religion*, 41(3), 439 – 453. doi: 10.1111/1468-5906.00129

- Simon, R. W., & Nath, L.E. (2004). Gender and emotion in the United States: Do men and women differ in self-reports of feelings and expressive behavior? *American Journal of Sociology*, 109(5), 1137 – 1176. doi: 10.1086/382111
- Smith, T. W. (2006). *Altruism and empathy in America: Trends and correlates*. Retrieved from the National Opinion Research Center/University of Chicago: www.NORC.org
- Smith, C., Faris, R., Lundquist – Denton, M., & Regnerus, M. (2003). Mapping American adolescent subjective religiosity and attitudes of alienation toward religion: A research report. *Sociology of Religion*, 64(1), 111 – 133. doi: 10.2307/3712271
- Strayer, J., & Roberts, W. (2004). Children's anger, emotional expressiveness, and empathy: Relations with parents' empathy, emotional expressiveness, and parenting practices. *Social Development*, 13 (2), 229 – 254. doi: 10.1111/j.1467-9507.2004.000265.X
- Terry, H. (2006). *Golden rules and silver rules of humanity: Universal wisdom of civilization from before Confucius and Buddha to after Socrates and Jesus*. Bloomington, Indiana: Authorhouse.
- Underwood, L. G., & Teresi, J. (2002). The daily spiritual experience scale: Development, theoretical description, reliability, exploratory factor analysis, and preliminary construct validity using health related data. *Annals of Behavioral Medicine*, 24:1, 22 – 23. doi: 10.1207/S15324796ABM2401_04

- Wagener, L. M., Furrow, J. L., King, P. E., Leffert, N., & Benson, P. (2003). Religious involvement and developmental resources in youth. *Review of Religious Research, 44*(3), 271 – 284. doi: 10.2307/3512387
- Webster's Universal College Dictionary. (1997). New York: Gramercy Books.
- Zinnbauer, B. J., Pargament, K. I., & Scott, A. B. (1999). The emerging meanings of religiousness and spirituality: Problems and prospects. *Journal of Personality, 67*(6), 889 – 919. doi: 10.1111/1467-6494.00077
- Zinnbauer, B. J., Pargament, K. I., Cole, B., Rye, M. S., Butter, E. M., Belavich, T. G., Hipp, K. M., Scott, A. B., & Kadar, J. L. (1997). Religion and spirituality: Unfuzzifying the fuzzy. *Journal for the Scientific Study of Religion, 36*(4), 549 – 564. doi: 10.2307/1387689

Table 1.

Demographic Information Provided by Parents

Variable	n	Mean±SD
<i>Age of child^a</i>	79	138.66±12.48
<i>Income^b</i>	79	2.47±1.02
<i>Level of Education^c</i>		
Father	79	2.57±1.12
Mother	79	2.96±1.2
<i>Church Attendance^d</i>	79	2.7±1.66
Variable	n	Percentage
<i>Gender of child</i>		
Male	35	44
Female	44	56
<i>Siblings</i>		
Sibling 1	73	
Male	35	48
Female	38	52
Sibling 2	42	
Male	16	38
Female	26	62
Sibling 3	17	
Male	8	47
Female	9	53

Demographic Information Provided by Parents (continued)

Variable	n	Percentage
Sibling 4	7	
Male	3	43
Female	4	57
Sibling 5	2	
Male	1	50
Female	1	50
Form Completed by	79	
Mother	70	88
Father	6	8
Grandmother	3	4
Religion		
Protestant	44	56
Catholic	10	13
Other Religion	4	5

^aNote. Age of child is reported in months.

^bNote. Income ranges from 1, less than \$24,000, to 4, \$90,000 or higher.

^cNote. Level of parental education ranges from 1, less than a high school diploma, to 5, more than a 4 year college.

^dNote. Frequency of church attendance ranges from 1, never, to 6, daily.

Table 2.

Rating scale results

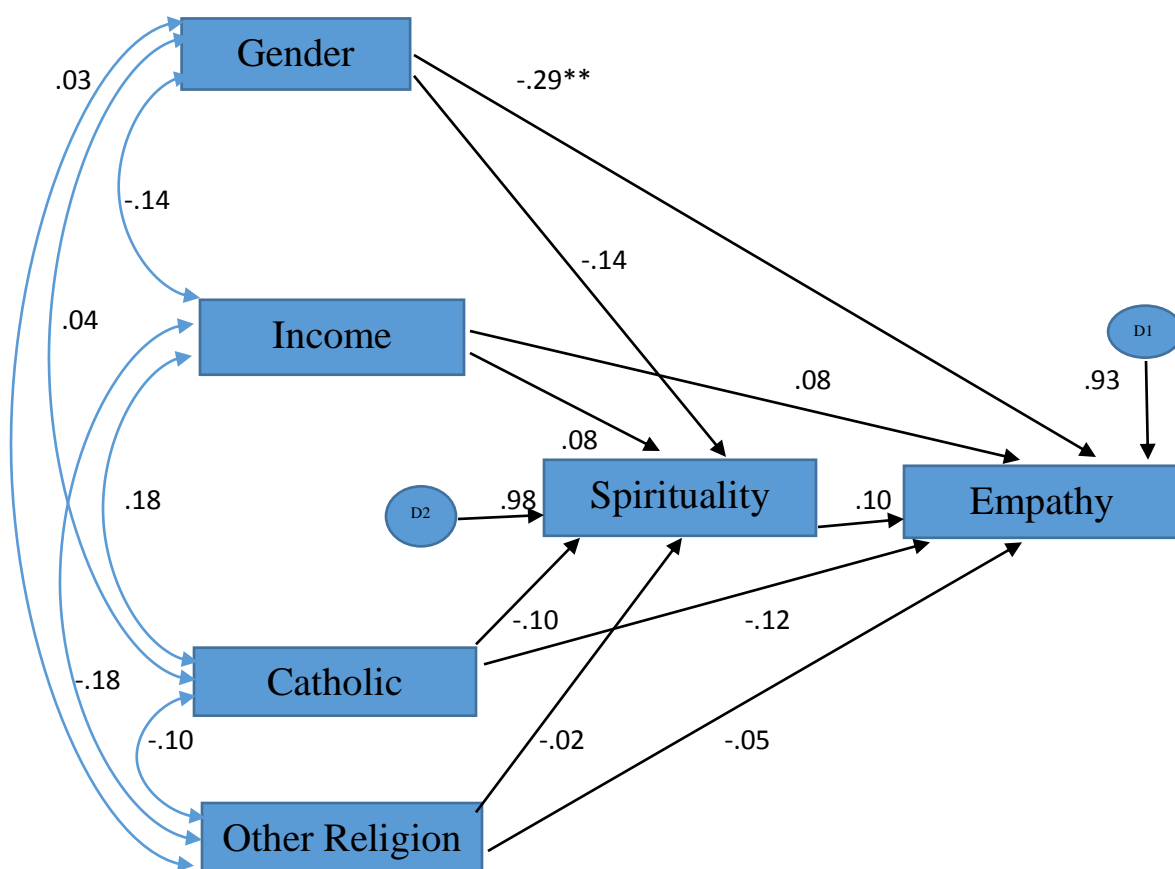
Variable	n	Mean \pm SD
Empathy (questions 1, 3, 5-6, 8-9, 12-15, 19-21)	79	.69 \pm .22
Average score = 8.28 ^a		
Spirituality (questions 1-11, 14)	79	3.35 \pm 1.28
Spirituality (question 15)	79	2.91 \pm 1.75
Average score = 34.92 ^b		

^aNote. The Empathy scale scores range from zero to 12, with higher scores indicating more empathic tendency.

^bNote. The spirituality scale scores range from 13.5 to 78, with higher scores indicating higher spirituality.

Figure 1.

Path-analytic model: Relation of gender, SES, and religious denomination to empathy and spirituality.



$^{**} = p < .01$

Appendix A

Family Information

Child's Date of Birth: _____ Grade/Placement: _____ Gender: M F

SIBLINGS Gender? Date of Birth (DOB)

M ____ F ____ DOB: _____

M ____ F ____ DOB: _____

M ____ F ____ DOB: _____

M ____ F ____ DOB: _____

M ____ F ____ DOB: _____

PARENTS AND OTHERS WITHIN THE HOME

Gender? Date of Birth (DOB) Relationship to child?

M ____ F ____ DOB: _____

M ____ F ____ DOB: _____

M ____ F ____ DOB: _____

M ____ F ____ DOB: _____

SOCIO-ECONOMIC STATUS

Approximate family income per year:

____ Less than \$24,000 ____ \$24,000-\$59,000 ____ \$60,000-\$89,000 ____ \$90,000 or higher

Father's level of education?

____ Less than high school education

____ High school education/equivalency

____ 2 year college

____ 4 year college

____ More than a 4 year college

Mother's level of education?

____ Less than high school education

____ High school education/equivalency

____ 2 year college

____ 4 year college

____ More than a 4 year college

RELIGION

Religion of child?

☐ Protestant☐ Southern Baptist☐ Other Baptist☐ Methodist☐ Presbyterian☐ Episcopal☐ Lutheran☐ Pentecostal☐ Church of Christ☐ Other (please provide) _____☐ Catholic☐ Jewish☐ Orthodox☐ Mormon☐ Jehovah's Witness☐ **Other:** Please provide _____☐ **None**☐ **I don't know**

How often does the child attend church?

☐ Never☐ Holidays☐ At least once a month☐ Weekly☐ Daily☐ Other (please explain) _____**Completed by?**☐ Mother ☐ Step Mother☐ Father ☐ Step Father☐ Other? (please explain) _____

Appendix B
Child Information

Please answer the following questions to the best of your ability.

1. What is your religion?

☐ Protestant

☐ Southern Baptist

☐ Other Baptist

☐ Methodist

☐ Presbyterian

☐ Episcopal

☐ Lutheran

☐ Pentecostal

☐ Church of Christ

☐ Catholic

☐ Jewish

☐ Orthodox

☐ Mormon

☐ Jehovah's Witness

☐ **Other:** Please provide _____

☐ **None**

☐ **I don't know**

2. How often do you attend church?

☐ Never

☐ Holidays

☐ At least once a month

☐ Weekly

☐ Daily

☐ Other (please explain) _____

Appendix C

INDEX OF EMPATHY FOR CHILDREN AND ADOLESCENTS

(Bryant, 1982, p. 416)

Please circle your answer.

- | | | |
|--------------------------------------------------------------------------------------------|-----|-----|
| 1. It makes me sad to see a girl who can't find anyone to play with. | Yes | No |
| 2. People who kiss and hug in public are silly. | Yes | No* |
| 3. Boys who cry because they are happy are silly. | Yes | No |
| 4. I really like to watch people open presents,
even when I don't get a present myself. | Yes | No* |
| 5. Seeing a boy who is crying makes me feel like crying. | Yes | No |
| 6. I get upset when I see a girl being hurt. | Yes | No |
| 7. Even when I don't know why someone is laughing, I laugh too. | Yes | No* |
| 8. Sometimes I cry when I watch TV. | Yes | No |
| 9. Girls who cry because they are happy are silly. | Yes | No |
| 10. It's hard for me to see why someone else gets upset. | Yes | No* |
| 11. I get upset when I see an animal being hurt. | Yes | No* |
| 12. It makes me sad to see a boy who can't find anyone to play with. | Yes | No |
| 13. Some songs make me so sad I feel like crying. | Yes | No |
| 14. I get upset when I see a boy being hurt. | Yes | No |
| 15. Grown-ups sometimes cry even when
they have nothing to be sad about. | Yes | No* |
| 16. It's silly to treat dogs and cats as though they have
feelings like people. | Yes | No* |

(> continued on following page >)

- | | | |
|---------------------------------------------------------------------------------------------------------|-----|-----|
| 17. I get mad when I see a classmate pretending to need help from the teacher all the time. | Yes | No* |
| 18. Kids who have no friends probably don't want any. | Yes | No* |
| 19. Seeing a girl who is crying makes me feel like crying. | Yes | No |
| 20. I think it is funny that some people cry during a sad movie or while reading a sad book. | Yes | No |
| 21. I am able to eat all my cookies even when I see someone looking at me wanting one. | Yes | No |
| 22. I don't feel upset when I see a classmate being punished by a teacher for not obeying school rules. | Yes | No* |

*Item removed as a result of low reliability

Appendix D

DAILY SPIRITUAL EXPERIENCES SCALE (Underwood & Teresi, 2002)

“The list that follows includes items you may or may not experience. Please consider how often you directly have this experience, and try to disregard whether you feel you should or should not have these experiences. A number of items use the word ‘God.’ If this word is not a comfortable one for you, please substitute another word which calls to mind the divine or holy for you.”

	Many times a day	Every day	Most days	Some days	Once in a while	Never or almost never
I feel God’s presence.						
I experience a connection to all life.						
During worship, or at other times when connecting with God, I feel joy which lifts me out of my daily concerns.						
I find strength in my religion or spirituality.						
I feel deep inner peace or harmony.						
I ask for God’s help in the midst of daily activities.						
I feel guided by God in the midst of daily activities.						
I feel God’s love for me, directly						
I feel God’s love for me, through others.						
I am spiritually touched by the beauty of creation.						
I feel thankful for my blessings.						
*I feel a selfless caring for others.						
*I accept others even they do things I think are wrong.						
I desire to be closer to God or in union with the divine.						
	Not at all	Somewhat close	Very Close	As close as possible		
In general, how close do you feel to God?						

*Item removed as a result of low reliability

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