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Review

Empathy regulation, prosociality, and moral judgment

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Abstract

In this review, we examine relationships between empathy, prosocial behavior, and moral judgment. We focus on recent evidence for these relationships, with a focus on motivated empathy regulation as an important process that shapes empathic and moral outcomes. In particular, we highlight tradeoffs in contexts that involve competing victims with different needs, such as in large-scale suffering situations and sacrificial moral dilemmas, as well as on effects on punishment and recursive effects of morality on empathy. Our aim is to integrate motivation frameworks in empathy regulation and social cognition with prosocial and moral judgments.

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Empathy, Compassion, Prosocial, Morality, Emotion regulation.

Introduction

When we share in the feelings of others or experience concern for their welfare, how does this build prosociality and moral decisions? In the current review, we interrogate the relationships between empathy, prosociality, and morality. We discuss work conducted after recent reviews [1,2], focusing on when, for whom, and why empathy connects — or fails to connect — with prosocial behavior and morality. Empathy has been defined in many ways [3,4], as have morality and prosocial behavior, as the latter can be defined by relation to motivating intentions (i.e. does a person mean to help), consequences for others' well-being (i.e. is the target of action helped), or a combination of the two [5]. Here, we focus on empathy as *experience sharing* (vicariously taking on others' feelings) and *compassion* (warm-hearted concern for others) [1,6]. *Prosocial behavior* refers to actions that are meant to improve others' well-being (considering both intentions and outcomes) [5,7,8], and *morality* broadly refers to concerns about social relationships and virtuous conduct [9].

Empathy and prosocial behavior

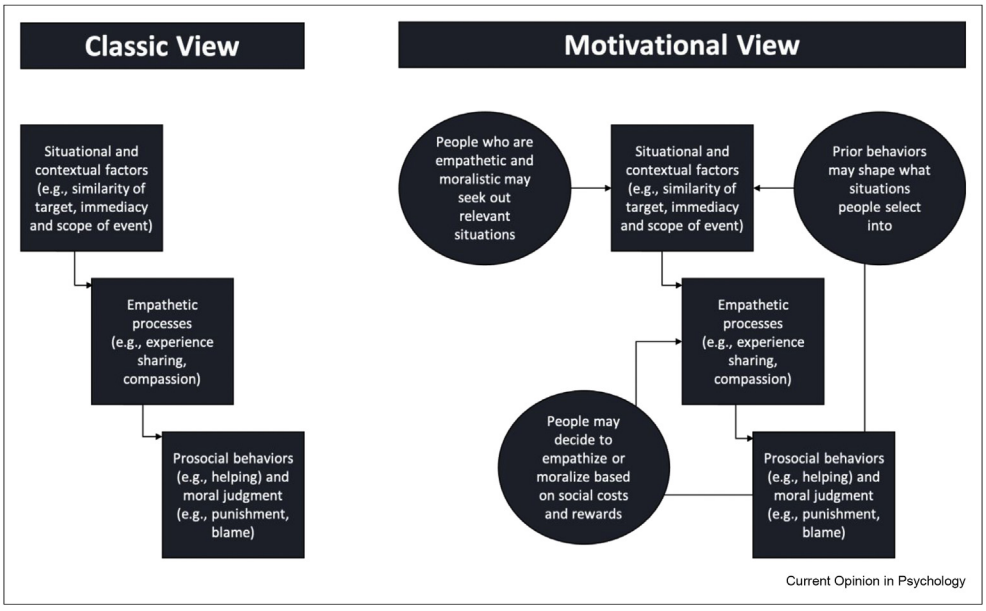
Experience sharing can contribute to prosociality and moral decision-making because emotional resonance can make us aware of when we harm others, magnify the consequences of our actions, update our values, and motivate us to act on those same values [7,8,10]. Similarly, compassion, which can depend on experience sharing [1,6], is linked to prosocial outcomes [6,10]. Yet, empathy and moral decision-making, often studied in their own disciplinary traditions, are not always clearly related [1,11].

Questions about empathy's moral impact hinge on whether empathy arises automatically in response to suffering victims, as what might be considered a classic view of empathy [11], or instead reflects motivated efforts to feel it (for a contrast of these approaches, see Figure 1). The answer is complicated: empathy can arise spontaneously [12], may be regulated ahead of time [13,14], and at the same time be experienced as exhausting and effortful when cultivated [13]. From a motivational framework, people balance the costs and rewards of empathy and prosociality [14,15] as they decide whether to cultivate empathic experiences. These empathic experiences may be influenced by perceptions of one's efficacy and self-regulation abilities [8,12] and depend on the scale and immediacy of others' suffering [11]. Considering how motivated regulation of empathy and moral decision-making work in tandem may afford novel questions to integrate these sometimes-disparate areas of research. Perhaps the question should be less about whether empathy promotes prosocial or moral conduct, but rather, under what motivational conditions and for whom [15,16].

When and for whom does empathy predict prosocial behavior?

Many studies testing the *empathy-altruism hypothesis* have revealed connections between empathy and prosociality (see review by Batson [7]). Yet, newer evidence building on this approach questions why such experimental effects occur, suggesting that empathy induction effects are due to the control conditions (to emotionally disengage) reducing compassion and prosociality [17,18]. Such

Figure 1



Contrasting perspectives on how empathetic processes relate to prosocial behaviors and moral judgments.

findings suggest people may be naturally empathetic and prosocial but can lessen these propensities through emotion regulation. Moreover, empathy may not always translate into prosociality depending on the motivations involved. Whether empathy connects with prosocial behavior may depend on emotions and urgency of need [19] and self-presentation [20] to those in need. People might be further optimized to feel empathy, and in turn, be prosocial, through immersive interventions and experiences — with recent examples including virtual reality [21], mindfulness [22] (though see [23] for how mindfulness can sometimes undercut prosociality), and attending live theater [24] — or by increasing perceived rewards of empathy through increasing its normativity [25].

As empathy is multifaceted, prosocial implications may depend on which facet is being studied [15,16]. Trait empathic concern (i.e. compassion) is associated with helping [26,27] and effortful prosociality [28], and has been linked with prosocial behaviors at the state and country level [29,30]. Yet, there is disagreement about experience sharing. Some work links self-reports of empathy with donations [31], and accurate empathizing with prosocial behavior [32]. Other work finds self-reported trait experience sharing does not show positive links with prosocial outcomes when controlling for trait compassion [27]. A critical question is whether different empathy facets create different rewards and costs; some work suggests compassion is easier to cultivate and maintain than experience sharing [27], but recent work finds that people choose to avoid compassion for strangers (in favor of experience sharing) and feel compassion is especially taxing, *more so* than experience sharing [33]. Importantly, such costs of compassion track with social relationships (compassion feels easier for close others than distant others [33]), suggesting that cognitive costs of compassion-based prosociality need to be contextualized within relationships. A motivational perspective is well-suited to answer these questions, as it allows comparisons of costs and benefits across empathetic states (e.g. experience sharing vs compassion) and across prosocial and relational contexts.

A motivational approach requires understanding whether people consider certain behaviors to be prosocial [5,34]. As noted above, the prosociality of a particular action might be defined by the intentions of the person committing it, the resulting outcomes, or both [5]. Importantly, people can vary in how they construe the prosociality of actions. Sometimes prosociality seems clear; for example, some work found that compared to a control group, people who had donated kidneys to strangers — a form of high-stakes altruism — showed similar neural responses when experiencing pain and observing others experience pain, though there were no group differences in self-report measures of empathy for pain or empathic concern [35]. Other times prosociality seems less clear. Empathy inductions that enhanced compassion promoted adherence to public health guidelines during the COVID-19 pandemic [36], which many construe as prosocial, but others may have differing and polarized opinions. To the extent that social distancing and mask-wearing are construed as

helping others, then such behaviors could be construed as prosocial. Thus, inducing empathy may encourage people with conflicting opinions about public health guidelines to feel motivated to adopt these behaviors.

Compassion has also been shown to motivate behaviors that may vary in being construed as prosocial. For instance, compassion has been linked to lies that avoid hurting another person's feelings (e.g. telling someone they performed better than they actually did) [37]. Even *refusal* to save someone who is consciously suffering (e.g. from a painful terminal illness) might be seen as prosocial in some contexts [38]. Hence, even if experience sharing or compassion motivate people toward prosocial ends, people may disagree over which ends seem best. One experience sampling study avoided this pitfall by letting participants report when experience sharing and compassion naturally arose and identify prosocial actions themselves [39], helping to capture subjective nuances of empathic experiences [40]. Furthermore, participants reporting more opportunities to empathize and those having higher state experience sharing and compassion reported increased prosocial behaviors [39]. Related idiographic work has examined how physicians and patients define clinical empathy, with patients being less likely than physicians to include emotional attunement as being part of clinical empathy [41]. Such results highlight the importance of empathy research that moves beyond the laboratory to study how empathy and prosocial behaviors are defined, motivated, and chosen in naturalistic contexts.

How does empathy regulation promote or inhibit prosocial behavior?

Beyond individual differences in empathic experiences, recent work focuses on how and why people regulate empathy [14–16]. One example has been *compassion collapse* — that is, when people show less experience sharing, compassion, and prosociality toward multiple individuals than a single individual [42,43]. Although compassion collapse was originally conceived as a simple function of increasing numbers of victims [11,44], we suggest people are *motivated* to down-regulate empathy to avoid its costs [42]. Not only can this account explain why increasing numbers of victims reduce empathy, but it also suggests that offering an opportunity to engage in prosocial behavior may ironically undercut empathy — because doing so increases considerations of its costs [42]. Building on initial support for this account [42], recent work supports the role of emotion regulation in compassion collapse [45] and that prior adversity can motivate people to counteract this effect [46].

A motivated approach to empathy suggests that to predict prosocial behavior, it is important to measure both consequences of empathy and how people relate to its experience [15]. When people are given the choice between empathy (as experience sharing) and detachment for strangers, — in a free-choice paradigm referred to as the *empathy selection task* — they typically opt to avoid empathy when perceiving its cognitive costs (e.g. felt effort, aversion, and inefficacy at cultivating empathy) [13]. But when people *do* choose to exert effort to cultivate empathy, they report greater willingness to donate [13], suggesting empathic *choices* can have prosocial implications (see also [47]). Rather than simplistically focusing on how empathy impacts prosociality, we suggest considering how people *anticipate* the effects of empathy (see Figure 1) and modulate such anticipation to increase or decrease prosociality (e.g. empathic emotion regulation) [48]. We also recommend considering how people structure their everyday environments to promote or bypass empathy [39].

In summary, whether empathy — as experience sharing or compassion — connects to prosocial behavior may depend on how people choose to regulate and relate to these experiences. Although correlational and causal relationships have been documented, understanding variability in the empathy–prosociality relationship could be enhanced by measuring emotion regulation [15] and the motivations that precede it (for discussion, see the reviews by Zaki [14] and Cameron [15]). When adding further nuance about idiographic perceptions of empathy and prosociality, and moving outside the lab to more immersive real-world contexts, researchers may be able to more finely tune predictions about when different empathy facetsfacetscets facets produce personally or socially desirable outcomes. Next, we turn to a related outcome, moral judgments in dilemma and punishment situations.

Empathy and moral judgment

How does empathy influence moral dilemma decisions?

The connection between empathy and sacrificial moral judgment is similarly complicated [1]. Sacrificial dilemmas typically entail directly harming a focal target to benefit many people, such as personally smothering an infant to prevent its cries from alerting murderous soldiers, saving a village [49]. Philosophically, harm rejection aligns with *deontological* and harm acceptance with *utilitarian* ethics — but psychologically, judgments reflect a complex array of processes, including empathy [49]. As in empathy research, prosociality here can be defined in terms of both intentions (i.e. are decisions intended to benefit targets) and outcomes (do decisions actually benefit targets) [5]. Both harm rejection and acceptance judgments arguably qualify as prosocial: each decision produces a mixture of prosocial and antisocial outcomes, as one target is saved at the expense of another. Both dilemma responses can (but do not always) reflect prosocial intentions [49]. Although harm acceptance produces the most optimal outcomes overall,

people, nonetheless rate harm rejection more positively, as good intentions seem clearer [50].

A classic dual-process model [51] suggests that affective processes increase focus on sacrificial victims and cognitive processes on overall outcomes — that is, smothering a baby in the crying baby dilemma feels terrible but logically will save the most lives. Conceptually, therefore, both experience sharing and compassion should increase the rejection of sacrificial harm. Consistent with this view, trait empathic concern (i.e. compassion) predicts reduced sacrificial acceptance in both extreme (e.g. smothering baby) [52] and mundane (e.g. firing) dilemmas [53]. Modeling work suggests empathic concern promotes particular concern for focal victims, independent of group outcomes [54].

Classic explanations of compassion collapse appeal to dual-process models in a similar way by suggesting that automatic empathetic responding is attuned to singular victims, with deliberative control seemingly having little ability to de-bias experience sharing [44]. Intriguingly, much as with moral dilemmas, some suggest that deliberative reasoning be used to foster utilitarian judgment because empathetic feelings are seemingly ill-suited to large-scale societal problems [11]. Yet, classic models for both dilemmas and compassion collapse are challenged by motivational explanations which emphasize emotion regulation and choice (e.g. the studies by Cameron and Payne [42]). For example, in more recent work using the empathy selection task, when people make tradeoffs about compassion for close and distant others, they appear to prioritize compassion for close others and this tracks with reductions in perceived cognitive costs [33], suggesting motivation matters for allocation of compassion. Likewise, accepting sacrificial harm is costly to one's reputation and identity [50], so harm rejection increases when such social motivational costs are salient (e.g. looking in the mirror) [55]. Reducing perceived costs — for example, greater social acceptance — allows for increased focus on group outcomes [56]. Classic models focused on basic processes do not fully consider higher-order factors like motivation.

Empathy may also play a more complex role in sacrificial judgments than previously appreciated. Identifying and empathizing with either focal targets or the group increases willingness to prioritize targets' well-being [57,58]. Sacrificial harm entails both performing harmful actions and witnessing resultant suffering, and empathy affects each facet differently. For instance, empathic aversion to *causing harmful actions* predicts concern for focal victims only. However, aversion to *witnessing suffering outcomes* predicts concern for both focal victims and the group [59]. In other words, those who are sensitive to seeing painful outcomes in others appear to care about both the sacrificed *and* the saved in moral dilemmas. On the other hand, people high in antisocial traits demonstrate a lack of concern for either the focal victim to be harmed or group to be saved, mediated via reduced empathy [49,60] (and future work should continue to examine empathetic motivation vs ability in such effects; see the review by Groat and Shane [61]). Such findings suggest that motivational processes may ratchet up experience sharing and compassion for both focal targets and overall groups in multifaceted ways.

How does empathy shape moralization and punishment?

As experience sharing makes people aware of harms, and compassion motivates prosocial investment, empathic attunement to harms should motivate moralization [62]. That is, empathy might increase judgments of wrongness and punishment because the experiential focus on others may make people aware of important moral principles about how others should be treated [7]. Supporting this inference, and the motivated empathy viewpoint, trait empathic concern associates with moral concerns about harm and fairness, as do goals to increase feeling empathy [63]). In other words, empathic and moral growth appear to work in tandem.

One area for debate is how empathy shapes punishment. Does being more empathetic create greater sensitivity to others' suffering and reduce punishment? Some lab findings support this claim for compassion [64,65], and outside the lab, empathic interventions lead teachers to be less punitive [66] and officers to assign less generalized criminal responsibility to adults on parole and probation [67]. On the other hand, does compassion for victims promote outrage at the people who harmed them? In other contexts where such integral connections between victims and perpetrators have been established, and when punishing is the primary behavioral option, compassion associates with increased punishment, mediated by increased moral outrage ([68]; see also [69]). Once people have motivated themselves to cultivate empathetic emotions, this might motivate desires to punish, providing social consequences to empathy engagement.

How does moralization shape empathy?

We have thus far been discussing psychological inhibitors to empathy, such as cognitive effort. However, there are various social costs of empathy as well, with one of the foremost being morality much as empathy may promote moral judgment, moral judgment about whether targets *deserve* empathy may recursively shape empathic choices. If targets of empathy are seen as moral antagonists or undeserving, people might down-regulate empathy. A growing body of work is examining the moralization of empathic choices For example, people may believe that some targets are inappropriate to empathize with [70] and judge people based on how they distribute their empathy across social relationships [71].

The moralization of empathy often occurs in political contexts — ideological viewpoints may dictate who is deserving of empathy. Empathy interventions can reduce support for anti-migrant policies, but primarily when misperceptions about migrant criminality are refuted, with over-riding statistics [72]. Yet, ideology can relate to whom people choose to extend concern [73] and motivations to empathize in the first place [74]. In some cases, trait empathic concern associates with *increased* polarization (reflecting increased concern for political in-groups, along with increased derogation and censorship of political out-groups) [75], and people might be motivated to down-regulate concern for out-group political targets because of partisan identity [76]. Such effects of ideology may be amplified by stereotypes, such as believing one's political in-group is more compassionate than one's political out-group [77], suggesting increased attention be paid to moral and ideological inhibitors of empathy.

Conclusions

Empathy and moral judgment have often been studied in separate disciplinary traditions, though there are notable points of overlap [9]. We suggest that integration of these areas is possible through focusing on social cognitive mechanisms that mediate relationships between situations and empathic and moral outcomes (i.e. 'social cognition as a level of analysis', p. 67) [78]. Here, we have focused on motivational tradeoffs and emotion regulation as mechanisms that shape whether people opt to empathize and engage in moral judgment. In both research literatures, extensive focus on self-reports could be complemented with behavioral measures that allow participants opportunities to select into situations to empathize or moralize rather than being forced to undergo experimental manipulations [15]. People may reveal their empathic and moral propensities through the situations they select themselves into. Instead of assuming that empathy or moral intuitions automatically impel people toward prosocial or right conduct, we might consider how people prepare the pathways for these reactions through anticipatory management of the situations that elicit their feelings (Figure 1, for discussion in the context of moral intuitions, see the review by Helion and Oschner [79]). In addition to increasing focus on such propensities, it will be important to track subjective perceptions of what counts as empathic, prosocial, and moral [34] and how people manage their goals to reconcile empathic and moral inclinations (for discussion of empathy and morality with respect to goals, see [80]). It will also be important to understand whether and when reasoning is needed to modulate the relationship between experience sharing, compassion, and moral and prosocial outcomes [81]. It is possible that regulation strategies and relevant costs and benefits may have domain-generality across the situations we typically think of as 'empathetic' and 'moral,' allowing for theoretical integration and generation of new insights. Considering how people strategically manage their own empathy may enhance predictions about downstream effects on prosocial and moral outcomes.

Conflict of interest statement

Nothing declared.

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