Living with Uncertainty
Working Paper 5

Dyspathy: The dynamic complement of empathy

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Dyspathy: The dynamic complement of empathy

Empathy concerns understanding the Other and how it is to be them in their world. The Living with Uncertainty project is developing a multilevel, dynamic model of empathy that encompasses the various processes, capacities and phenomena connected with empathy. The model describes how one person (the Self) can understand another (the Other) through dialogue and interaction: not just the Other’s thoughts and feelings, but also why the Other thinks and feels as s/he does. In this paper, I enlarge the idea of empathy by considering its contrast or complement, which I call dyspathy.

Empathy includes both automatic and controlled mental processes (Cameron, 2010). Automatic empathy is an immediate response to perceiving another person; controlled empathy includes more conscious processes that can involve intention and deliberation. The capacity of our brains to share experiences and emotions with other people through automatic empathic responses, as revealed through recent functional magnetic resonance imaging (fMRI) studies, raises an interesting issue of management. If we were to be continually tuning into other people’s emotions, we would be perpetually anxious or exhilarated, and very quickly exhausted. We must therefore have very efficient inhibitory mechanisms that screen out most of the emotional empathy being carried out by our brains, without us even noticing. So efficient is empathy inhibition, that what is left – the empathy that we actually do experience – is not felt as remnants of a much larger process but as a phenomenon complete in itself. If empathy is what remains of our response to perceiving the Other after inhibition, dyspathy is to do with what is inhibited, screened, take away.

When the Self responds to the Other, dyspathy co-adapts with empathy to produce understandings of, attitudes towards, and feelings about the Other.

Dyspathy as a felt phenomenon in dialogue and interaction is described by participants through metaphor:

- dyspathy blocks connections between Self and Other;
- dyspathy constructs a barrier between Self and Other;
- dyspathy resists connections between Self and Other;
- dyspathy distances the Other so that connections cannot be made;
- dyspathy excludes the Other from the space of the Self;
- dyspathy hides or shields the Self from the Other.

Most of these metaphors come from the talk analysed in my book Metaphor and Reconciliation (Cameron, 2011) between Patrick Magee and Jo Berry. The metaphors are used when they describe contrasts to the empathy that they are trying to build as a response to the killing by Patrick Magee of Jo Berry’s father in IRA violence in 1984. The metaphors fall into two main groupings: those that speak about blocking empathy and those that speak about distancing Self from Other. Both blocking and distancing result in excluding the Other from the Self and from the social group of the Self.

The Living with Uncertainty project set out to understand more, not just about the construction and negotiation of empathy, but about resistance to it. In two of the studies, we have found people actively engaged in resisting empathy: in a police-community meeting in the USA (Cameron & Ritchie, under review); and in London focus groups discussing giving to beggars and to aid organisations (Cameron & Seu, in
press). Analysis of these situations shows how emotions, moral reasoning, and social
group forces are all involved in resisting empathy in dialogue (Cameron, in
preparation). As the project has uncovered more about these processes of resisting
empathy, so it became more useful to name them, rather than referring to them simply
as the opposite or contrast of empathy. Naming allows us to attend to the phenomenon
in its own right.

**Dyspathy and other labels**
The Oxford English Dictionary describes dyspathy as a rare word, meaning “the
opposite of sympathy; antipathy, aversion, dislike; disagreement of feeling or
sentiment” (OED, 1989/2011). In the 19th century it had, a now obsolete, meaning of
an indisposition to a disease.

Etymologically, both antipathy and apathy might appear to be candidates for the
contrast with empathy. However, antipathy expresses strong dislike or hatred towards
another person that seems to be an emotion that goes far beyond an absence of
empathy. Apathy, on the other hand, describes being without emotions, and has
metonymically developed a sense of being unable or unwilling to act physically.
Neither capture how it might feel to be prevented from or to be without an
understanding of how it is to be the Other.

The term “counterempathy” appears in an article by Yamada et al. (2011), but is used
to refer to an emotional response to another person that is discordant with the
emotional experience that person receives, as when someone expresses disappointment
while also smiling. While this may sometimes indicative of dyspathy at work, it
describes a distinctly different phenomenon.

A Google Scholar search for ‘dyspathy’ brings up one article referenced several times.
This is a recent article by Misselhorn (2010) in the online journal Konturen, entitled
“Empathy and Dyspathy with Androids: Philosophical, Fictional and (Neuro-)
Psychological Perspectives”. The term is used interchangeably in the article with
“repulsion” in order to discuss the interesting phenomenon whereby people do seem to
relate to robots and other non-human ‘beings’ unless they are too realistic, in which
case the empathy turns to ‘dyspathy’. It would seem that the phenomenon she
discusses might be better labelled antipathy.

Because of this, and because the term dyspathy is so rarely used elsewhere in the
academic literature, I decided it was open to adoption as the term to refer to processes,
capacities and phenomena of resisting or blocking empathy. From my data, dyspathy
has a reality for participants in reconciliation conversations and, in other contexts,
appears to influence dialogue.

**Dyspathy as the dynamic complement of empathy**

> Understanding of the world of the Other emerges from the interaction of
> empathy with dyspathy.

Ideas of complementarity in human life and thinking occur in various sources familiar
to me, beginning from mathematical set theory and including the figure/ground of
Gestalt Theory, the shadow in Jungian psychology, relational pairs forming themata in Social Representations Theory, the yin/yang of Buddhism, and the negative space in art. The reader, no doubt, can think of other connections.

In set theory, a set comprises a certain number of elements that share some feature. For example, the set of garden birds includes not all wild birds, but only those that frequent domestic gardens. The complement of a set comprises all those elements that are not in the set but are in what we might call the ‘universe of interest’. In the example, the universe of interest is wild birds, and the complement of the set of garden birds would thus be all wild birds that do not frequent domestic gardens. By putting together a set and its complement, we get the entirety of the universe that interests us. In the research project, the universe of interest is a person’s understanding of the world of the Other, particularly through dialogue and interaction. Dyspathy is not the ‘opposite’ of empathy but rather its ‘complement’, since together they constitute that understanding.

Gestalt psychology is interested in what people attend to and what they thereby neglect, and how that can be changed. Figure is the locus of attention and ground, as the rest of the image (or complement), remains relatively unnoticed; together they make up the whole or Gestalt. The well known black and white pictures, in which either an old woman or a young woman (or a duck or woman) can be seen, but not both at the same time, illustrate the interacting dynamics of figure and ground: how we perceive the figure against the ground, how the ground participates in formulating the figure but at the same time sinks out of range of our attention, and the effort required to reverse or adjust figure and ground.

Cultures and languages differentiate in a figure/ground way. A fascinating example is the Samoan word va, which means “a space between” (Pratt, 1893). The morpheme contributes to vasa meaning the ocean, from va - space; sa - forbidden/sacred (Wendt, 1996), and to va’a, meaning a canoe or boat. Va is also used, metaphorically, to refer to “relationships between people and things, unspoken expectations and obligations” (Wendt, 1996). Here, the figure/ground differentiation of land/sea made by European languages and cultures is reversed. It makes sound nautical and geographic sense for people living on small atolls in a huge ocean to attend to the sea between, since it dictates much of their lives; food comes from it and they travel across it for trade. In a scenario of desert, which offers a land-based parallel, those who live there would think it odd to attend just to oases rather than to the desert between oases. The example of va reminds us that what is figure and what is ground is embodied and partly socio-culturally constructed, and that reversal is not always easy across cultures. Likewise, a dyspathy/empathy distinction is likely to be socio-culturally entrenched, can come to feel quite natural, and requires work to reverse.

I learnt the benefits of doing the work of figure/ground reversal experientially when becoming an artist. In learning to draw, I was encouraged to notice the negative space around and inside an object. If drawing a table, for example, then the negative space would include the space, seen in two dimensions, as underneath and around the table. In drawing, figure/ground reversal through attending to negative space helpfully defamiliarises, allowing the brain to attend to shapes in space rather than to named objects with cultural meanings.
The idea of figure/ground reversal, and its potential for imaginative productivity, suggests that attention to dyspathy may be rewarding in our quest to understand and support empathy. Furthermore, the idea of reducing dyspathy to increase empathy resonates with Gestalt therapy; rather than doing more emotional ‘work’ by attending to what appears significant as emotional ground, a client can be encouraged to remove obstacles that prevent attention and let figure/ground reversal or adjustment happen (Perls, Hefferline & Goodman, 1951). Shifting dyspathy should be an effective strategy to increase empathy, and may even be more effective than direct work on empathy.

**Review of literature relevant to dyspathy**

The formulation of dyspathy, as processes, capacities and phenomena that prevent empathy, suggests several relevant fields of study that will be reviewed. Dyspathy, as the dynamic complement to empathy, includes both automatic and controlled responses. Recent neuroimaging studies are adding to explanations from psychological and social psychological studies.

**Zero degrees of empathy**

Recent work by psychologist Baron-Cohen clarifies what it means to be unable to feel empathy, where empathy is defined as “our ability to identify what someone else is thinking or feeling, and to respond to their thoughts and feelings with an appropriate emotion” (2011, p. 11). Baron-Cohen and colleagues devised a seven-point “Empathy Quotient” (EQ) scale, on which some people score zero. “Zero degrees of empathy” presents itself as psychopathy, borderline personality disorder and narcissism, or, more positively, as Asperger Syndrome. In our terms, this state would be extreme dyspathy. However, most people – and most participants in my discourse studies – do not lie at this extreme of the EQ scale, nor at the other extreme of total empathy, but rather towards the middle, in a normal distribution. In the Living with Uncertainty project, we are interested in how people who show empathy in some situations fail to show it in other situations, how people switch from empathy into dyspathy or from violence into empathy.

**Regulation of emotions**

Current work (in regulation of emotions) examines the processes that individuals use to influence which emotions they generate, when they do so, and how these emotions are experienced or expressed. (Ochsner and Gross, 2005: 243)

As Frith (pc) notes, because the stimuli used in regulation of emotion studies are often people showing fear or pain, such studies are often in fact concerned with empathy. For Decety (2011), emotion regulation is one component contributing to the experience of empathy, along with emotion arousal and emotion awareness and understanding.

According to Ochsner and Gross (2005), studies which now make use of brain imaging are building on three earlier strands: psychodynamic studies following Freud of defence against anxiety or other problematic emotions; studies into stress and coping that show how reappraisal of emotions and cognitive strategies can reduce negative emotions; and the study of emotion regulation in child development. Their review of imaging studies produces a continuum of types of emotion regulation. At one end, attention control reduces the intensity of an emotional response by limiting or distracting attention; at the other, the use of higher cognitive abilities can change the
interpretation of stimuli through deliberate focussing. Between these extremes, anticipation or expectation of a particular emotion (usually pain) seems to enhance emotional response.

Cognitive actions at the ‘high’ end of the continuum, that attend explicitly and reflexively to emotions in response to others, are of relevance in intervention to minimise dyspathy (also Decety, 2011; Gutsell and Insicht, 2010; Lamm et al., 2007). Decety’s ‘core affect’ model (Decety & Jackson, 2004; Decety, 2011) allows for “motivation, intentions and self-regulation to influence the extent of an empathic experience, and the likelihood of prosocial behaviour” (2011: 93), what he calls ‘mature empathic understanding’. He suggests an evolutionary order in which “ancient systems for intersubjectivity” are overlaid with more conscious, control behaviours, including language and metacognition (Decety, 2011; also Boston, 2007; Watt, 2005).

Empathy presents a particular challenge to self-regulation and motivation, noted by Halpern and Weinstein (2004). This challenge is dealing with the ‘moral dissonance’ that faces people who try to understand the world of others with whom they have been in conflict or who belong to a hostile social group. The Other in such cases may have held attitudes and values, and committed acts, that prompt anger, disgust or repugnance, and that are at odds with the moral commitment (a term from Pedersen, 2009) of the Self. An emotional ambivalence is produced that is difficult to manage; feelings that arise from understanding of the Other must be acknowledged but must also be managed so that they do not stop further understanding. (To see how this is dealt with in one particular case, see Cameron, 2011.)

We come back to morality below. Meanwhile, we take from the literature on emotion regulation the importance of attentional control and self-awareness; they may help in overcoming the biases that influence automatic empathy reviewed in the next section.

**Group biases to empathy**

Several recent studies using fMRI scanning (Avenati et al, 2010; Gutsell & Insicht, 2010; Xu et al., 2009) have demonstrated bias towards in-group members in automatic empathy, complementing the findings of experimental social identity studies (e.g. Billig, 1985; Tajfel, 1981).

Avenanti et al. studied black and white individuals who had shown themselves to have an implicit in-group preference, i.e. racial bias. They set up three conditions in their experiments. Participants observed other people’s hands undergoing painful stimuli; the hands were the same skin colour (i.e. in-group), contrasting in skin colour (i.e. outgroup), or violet in colour (i.e. completely unfamiliar to both groups). Observing in-group members’ hands produced automatic empathic responses, as did observing models with violet coloured hands. However, no empathic responses were observed in response to pain suffered by outgroup members. They conclude that racial bias and stereotypes produce changes in emotional resonance with outgroup members, i.e. work dyspathically, limiting automatic empathy.

Gutsell and Insicht (2010) also found restriction to in-group members when they observed neuron activation in perception-action coupling (the neural activity considered important for empathy) in white, female, student participants. Working within a simulation theory approach (Preston & de Waal, 2002), they looked for and
found the same neuron activation patterns when participants were themselves acting and when they observed in-groups acting, but not when they observed actions of outgroup members. They note that this distinction “was magnified by prejudice and for disliked groups” (2010: 841); for their participants, the most disliked groups were South Asians, followed by Blacks and then East Asians. Prejudice and bias work to impair perception-action coupling; in other words, they work dyspathically. They suggest that the component processes of the dyspathic constraint of prejudice and bias may be selective attention and motivation, citing studies that show these higher level cognitive processes negatively influence perception-action coupling (also Ochsner and Gross, 2005). It may be that outgroup members spark less interest, with in-group members receiving more, and more detailed, attention, or that in-group people are more familiar and thus prompt more differentiated automatic responses (Kahneman, 2003).

Xu et al. (2009) compared automatic empathy responses in participants observing the effects of pain on the faces of racial in-group members and of outgroup members; in their study these were Chinese and Caucasian respectively. Watching individuals of the same racial group subjected to simulated pain produced increased empathic neural responses, whereas watching outgroup members’ faces produced a smaller increase.

Singer et al. (2006) showed how empathy and dyspathy can be changed by attitudes towards the Other, and over a relatively short time period, in a study where preferences learned in the course of interaction worked to limit empathy. Before using fMRI scans to test empathic responses to observed pain, they engaged their male and female participants in an economic game that was played fairly or unfairly, thus setting up the preferences. In their empathy tests, both sexes displayed empathic responses towards people perceived in the game as fair, but responses were significantly reduced, for male participants only, for people perceived as unfair. In addition, these male participants showed “increased activation in reward-related areas” (2006: 466), suggesting a desire to punish people who had played unfairly. The game that participants played seems to have generated a moral stance towards others that then influenced empathy. Such results are important in connection with media stories that generate a moral stance on the part of readers, usually negative, towards the ‘othered’ group.

Social categorisation

Imaging studies, such as those reported above, examine individual responses to observing other individuals. The perceived social identity of the observed Other clearly influences empathy in many cases, and dyspathic responses to individuals may well be metonymic in the sense that an observed individual represents a larger social group. Social Identity Theory (Billig, 2002; Tajfel, 1981), and its extension to self-categorisation theory (Hogg, 2000; Turner, 1991), provide frameworks for social explanations of such phenomena.

Social categorisation refers to the processes by which people construct groups around themselves, creating their own in-group through contrast with other groups, or ‘outgroups’ (Billig, 1985, 2002; Tajfel, 1981). Stereotyping is a kind of cognitive simplification that occurs when people are understood in terms of their group membership rather than as individuals; it tends to exaggerate differences between social groups and downplay differences inside them. Prejudice comes from
exaggerated social stereotypes that include attitudes, values and judgement. People become emotionally invested in their in-group status -- it gives them a ‘social identity’ -- and, if inaccurate categorisation or stereotyping are not challenged, these can build up into ‘powerful social myths’ that are helped to exist and persist by the human desire for coherence and making sense of the world (Tajfel, 1981, p. 134). Children grow into the social myths of their in-group through assimilation unless exposed to information that can correct inaccuracies.

Tajfel saw social categorisation and social myths as stabilising influences that help maintain positive self-identity under threat. As one of those threats, Hogg (2000) focuses on uncertainty, and the discomfort that invokes:

People need to reduce uncertainty about who they are, what they should think, feel and do, and how they should interrelate with others. (Hogg, 2000, p. 248)

Reducing uncertainty for one’s own group operates as a factor that motivates self-categorization, i.e. alignment of the self with a group prototype, and the building of self-identity through negative attitudes to outgroups. Uncertainty reduction for the in-group can also be achieved by increasing uncertainty for other groups (Marris, 1966). In extreme -- or extremist -- cases, Hogg suggests, alignment with rigid or fundamentalist categorisations serves to minimise uncertainty, and thereby enhance self-esteem.

Billig (2002) offers a discursive critique of Tajfel’s theory of self-categorisation and prejudice, suggesting that emotional and motivational factors can be included to account for extreme prejudice or ‘bigotry’. He maintains Tajfel’s focus on the social rather than the individual, by arguing that bigotry, and the emotions involved in it, are discursively constituted and to be investigated in interaction. While this revised version of self-categorisation theory makes it more useful to the study of empathy in dialogue, the complex dynamic model used in LwU offers an alternative to the apparent denial of individuality required by Billig’s strong discursive standpoint (also, e.g. Edwards, 1997). In the complex dynamic model, phenomena and processes are seen as at the same time both social and individual; social interaction is the locus of understanding but, through feedback and feed-forward loops across levels, individual reflection and action also have an influence.

Experimental social psychological studies summarised in Dimaggio et al. (2008) also demonstrate how the use of stereotypes depends on perceived similarity of the Other to the Self. Responding to another who is perceived as dissimilar, and thus as belonging to a social outgroup, is more likely to be done on the basis of stereotyping than on nuanced understanding of the individual, and this is particularly likely when feeling fearful. Furthermore, the behaviour of outgroup others tends to be attributed to personality traits, rather than being explained through situational context.

Importantly for the kinds of violent situations LwU is concerned with, increasing tension can lead to in- and out-groups being attributed inherent characteristics that make potentially dangerous coherence out of messy situations. Negative behaviours of minority groups come to be overstated, partly because extreme events or individuals are more easily remembered and recalled.
Mass suffering
There is evidence that being faced with many suffering people at the same time leads to increased dyspathy. Slovic and colleagues (Fetherstonhaugh et al., 1997; Slovic, 2007) developed the construct of ‘psychic numbing’ to describe the effect of being unable to empathise with large numbers of people, even when they are victims of genocide or similar events. Cameron & Payne (2011), studying the phenomenon of the ‘collapse of compassion’ by using text-reading and questionnaire responses, offer an alternative account, finding that people actively down-regulate emotion towards groups that they expect to require help and so prevent themselves experiencing as much emotion as they would towards individuals. Rather than it not being possible to empathise, it seems that, when feeling expected to help, or in fear of being overwhelmed by negative feelings, emotion regulation works as a kind of motivated dyspathy that actively prevents empathy and thereby avoids the anticipated costs. They make a provocative suggestion for the study of dyspathy in dialogue:

People might prospectively down-regulate their moral emotions not only to avoid costly moral obligations but also to license immoral actions. It is well known that people often rationalize immoral behavior (e.g., Bandura, 1999; Bersoff, 1999; Tsang, 2002). Our research suggests the hypothesis that not only do people rationalize immoral behaviour after the fact but that they may prepare for it by numbing themselves to emotions beforehand. (p 13)

Across emotion regulation, social categorisation and psychic numbing studies reviewed above, in-group bias, prejudice and stereotyping are found to work dyspathically by constraining automatic empathy towards those who are perceived as dissimilar or who evoke fear. Dyspathy may be motivated by a need to reduce negative affect.

Dehumanisation
Reducing the Other to be less than human seems to be a necessary step in violent conflict (Kelman & Cohen, 1976). Dehumanisation makes violence more possible by reducing or removing moral accountability towards the Other. Bandura’s account of individual moral agency (2002) writes of dehumanisation occurring as people’s moral sanctions are ‘selectively disengaged’.

For Tajfel, depersonalisation of the Other, as individuality is lost in social categorisation and construction of outgroups, was first step towards this kind of dehumanisation (Billig, 2002).

Halpern and Weinstein (2004) make the important point that, whereas empathy individualizes and particularizes the Other, dehumanisation in violent/conflict situations works by stereotyping and generalising of entire social groups. This distinction helps to explain why dehumanisation is both easier and faster than reversing it can ever be; in their words, the Other as group can be dehumanised “in one fell swoop” (Halpern & Weinstein, 2004, p. 569). Particularising and individualising the Other, in contrast, require controlled attention and learning over longer periods of time. When the Other is dehumanised, social categorisation theory suggests that the social identity constructed for the Self will be strongly coherent and stable. Replacing strong categorisation of the Other with more nuanced and complex categorisation is not only cognitive work but also potentially threatening to the social identity of the Self (Tajfel, 1981).
Haslam’s (2006) integrative review of the construct of dehumanisation of social groups suggests two forms of dehumanisation: ‘animalistic dehumanization’ that denies people uniquely human characteristics, instead seeing them as somehow animal-like; and ‘mechanistic dehumanization’ that denies them human nature, seeing them instead as some kind of object or automata. Haslam does not mention metaphor explicitly, but his 2-way categorisation of dehumanisation has a clear link to metaphor. The use of ANIMAL metaphors for dehumanized groups has been studied by, among others, Santa Ana (1999) and Musolff (2007); comparisons with animals prompt emotions of revulsion and disgust, with shame for the target, and carry dangerous entailments such as the need to metaphorically cleanse an area or prevent spread and contagion. An UP/DOWN orientation places the dehumanised Other lower than the Self, making them sub-human and open to humiliation and control.

Mechanistic dehumanising metaphors represent “the other as cold, robotic, passive, and lacking in depth… implies indifference rather than disgust” (p. 153). Spatial metaphors here are about DISTANCE/CLOSENESS, with those dissimilar to the Self being seen as distant or alien. Haslam suggests that empathy is more connected with this form of dehumanisation than with animalistic dehumanisation, and that it has a greater role to play in undoing mechanistic dehumanisation through active engagement with the Other as complex human beings. It seems to me that empathy might also have a role to play in undoing animalistic dehumanisation but that the emotional shifts required to revalue and readjust conceptualisations will be much greater.

Stollznow (2008) finds a third sense of dehumanisation through her corpus study of the term in use, that she calls ‘brutalisation’. In this kind of dehumanisation, individuals are brainwashed or programmed (two different metaphors), often through an organisation or institution, making them numb to emotion and thus to empathy. Here, the Other is perceived differently, not through re-categorisation by the Self, but as a result of desensitisation of the Self, which opens the way for acts of violence to be committed. Her description of brutalisation echoes reports of the processes imposed on child soldiers in recent conflicts, as well as an explanation for terrorism repeatedly put forward by focus groups in our UK study (Cameron & Maslen, 2010). Brutalisation destroys moral agency and accountability towards the Other as a person.

**The Other as an abject**

The notion of the abject Other comes from Kristeva (1986) and was connected to the psychological study of conflict and uncertainty by Kinnvall (Kinnvall, 2004; Kinnvall & Lindén, 2010). For Kristeva, the construction of the Self is a psychological process, and the construction of the Other comes from the Self (as an act of imagination); the Other is, or has been, a part of the Self. “Those aspects that the self experiences as dangerous and unpleasant are projected onto the other.” (Kinnvall, 2004, p.753). By this process, strangers become enemies, and are increasingly dehumanised. Through ‘debasement’ and demonization, stronger differences with the Self are psychologically created, and the abject Other becomes more and more distanced from the Self.

**Moral dynamics**

“It is, quite simply, wrong”

(Norman Tebbit, *The Politics Show*, 11 October 2009, speaking about the possibility of forgiveness and reconciliation after the Brighton bombing)
Dyspathy can be totally blocked by an absolutist moral stance that rules out possibilities of empathy, as in the above example, spoken in a TV programme about the 1984 IRA bombing in which Tebbit’s wife was severely injured. Cameron and Payne’s work on the collapse of compassion (reported above), where people were found to, more or less consciously, diminish their affective sensitivity towards needy groups because of expected costs, also raises the issue of moral agency.

**Social Intuitionist Model**

Haidt’s Social Intuitionist Model of morality (2007) provides a useful framework for considering the moral dynamics at play in empathy and dyspathy; it synthesises recent work across disciplines and its underlying model of cognitive processing is compatible with the dynamics of empathy model.

Haidt first makes a distinction, which echoes that of automatic/controlled empathy, between ‘moral intuition’ and ‘moral reasoning’. Moral intuition is held to be evolutionarily older, cognitively faster and driven by affect. Moral reasoning is a post-hoc process that comes into action after intuition, and may support or modify it. Initial affective moral reactions may influence but do not ultimately control moral judgements which may be shifted by verbal reasoning, by re-framing or by encountering new arguments through social interaction. Haidt holds that the latter is by far the strongest cause of moral change. He goes further in setting out social functions of moral reasoning; these include making oneself look good and being prepared to be cheated or manipulated by others. Agreeing and sharing moral codes contribute, he argues, to the emergence of ‘moral communities’ in which morality contributes to group solidarity by regulating and rewarding behaviour. In Tajfel’s terms, morality plays a part in constructing social categorisations.

The aspects of morality of most concern to Western, educated people, or at least most frequently studied by psychologists, are harm (e.g. moral decisions about care of the vulnerable, responsibility not to harm others) and fairness (moral decisions about what is right and wrong). Haidt and colleagues suggest we need to add further aspects of moral intuitions: about belonging to a group and loyalty; about authority, respect and obedience; and about bodily and spiritual purity.

Moral dynamics are social and dialogic. Implications of the Social Intuitionist model for the study of dyspathy-empathy in dialogue include: noticing when people invoke moral intuitions to resist empathy; when they engage in moral reasoning to reinforce or override moral intuitions; and which aspects of morality are at stake in dialogue. In addition, as Singer et al (2006, above) showed, moral commitment in terms of fairness can change very quickly, and increase dyspathy. It seems likely that some aspects of morality are less open to change, particularly when they are tied into social identity and self-categorisation (Hogg, 2000). In examining dialogue, we need to be alert for both stabilised and changing moral dynamics and their effects on empathy/dyspathy.

**Denial and moral accountability**

Seu’s work on psychosocial denial (Seu, 2010), building on Cohen’s notion of moral accountability (Cohen, 2001), shows how people engaged in dialogue draw on “culturally available accounts of justifications and excuses” (Seu, 2010, p. 441) to justify moral reasoning and deny responsibility for the Other, thereby protecting
themselves from what may be required of them. Cohen suggested that people not only do this deliberately and consciously but sometimes below the level of awareness, at the same time knowing and not knowing. Seu’s discourse analysis of denial in action shifts us to other work on dyspathy in discourse.

**Malignant positioning**

Positioning theory offers a framework for analysing how people present and negotiate identities in discourse by examining the positions and ‘storylines’ that people create for themselves and others, and that they adjust, dispute or negotiate (van Langenhove & Harré, 1999; Harré et al., 2009). In dyspathic discourse:

- *conflicts are sustained by the adoption of the hostile parties of conflicting storylines, in the light of which incompatible and irresolvable contradictions in meanings have become entrenched* (Harré and Slocum, 2003: 102)

‘Malignant positioning’ denies the Other specific rights and grants the Self the moral high ground; it may contribute to the dehumanising of the Other (Harré and Moghaddam, 2003; Sabat, 2003). It assigns to the Other, often indirectly, attributions of mental (e.g. stupid), characteriological (e.g. unreliable) or moral (e.g. puritanical) traits to position someone, favourably or unfavourably, with respect to oneself and one’s interests (Harré and Moghaddam, 2003: 6)

Malignant positioning asserts power in dialogue by setting the storyline by which the speech and actions of the Other will be interpreted.
Summary: The dynamics of dyspathy

Dyspathy, as the complement of empathy, encompasses the processes, capacities and strategies that prevent understanding of the Other as a particular and complex individual. It is hypothesised that empathy may be supported or increased by dismantling dyspathy. We thus need to understand the nature and processes of dyspathy in dialogue. Like empathy, dyspathy is taken to be operative at multiple levels and timescales, and to be dynamic.

The model makes use of four levels to describe empathy/dyspathy dynamics in dialogue, centred around a discourse event, such as a conversation or meeting:

1. initial conditions of the discourse event
2. local discourse dynamics as the discourse event unfolds
3. emerging patterns across the discourse event
4. emergent stabilisations over the longer term, contributing to further discourse events.

At each level, the literature contributes social, emotional and moral factors that may influence the course of dialogue, and to which general discourse factors can be added, to be detailed through the empirical studies.

Level 1: Dyspathy and the initial conditions of a discourse event

At this level, we are interested in the state of the complex systems before anything happens in dialogue. The literature suggests that the following may affect initial conditions for a discourse event:

- individual capacity for empathy: degrees of empathy
- intentions, motivations for participating in dialogue
- social attitudes, values and beliefs about the Other
  - perceived social identity of Self and Other
  - in-group bias; stereotypes; prejudice; bigotry; social myths
  - dehumanisation
  - from experiences and histories; learned preferences
  - anticipation and expectations about the dialogue and the Other
- emotions
  - brutalisation
  - feelings of uncertainty
  - emotional state
  - willingness, motivation and skills to self-regulate emotions
- moral agency
  - moral code or commitment

To which can be added:

- individual language and cognitive resources, from previous experiences
  - knowledge and understanding of the world of the Other
  - skills and experiences in dialogue
Level 2: Dyspathy and local discourse dynamics

This is the level of talking-and-thinking in the moment, the second-by-second and minute-by-minute exchange between participants. The available evidence highlights the importance of affect/emotion, social group membership and moral intuition or dissonance in influencing immediate automatic responses to the Other and to what is said, and the potential of self-regulation of emotions (prompted by motivations and/or intention) to overcome these effects and support more empathy. Except in extreme cases such as zero degrees of empathy or brutalisation, deliberation and dialogic reasoning have the potential to adjust automatic responses primed by in-group bias, defensive self-identity, dehumanisation of the Other or stabilised judgements about moral values. Dyspathy will be increased by resistance to self-regulation of emotions, as by focussing attention to negative effect or refusing to acknowledge the Other as individual. Moral reasoning may work to dyspathic effect if the dialogue persuades participants to negative evaluations of the Other or if suspicious interpretations of information are supported.

The literature suggests that automatic dyspathic responses to or about the Other may be influenced by:

- social attitudes, values and beliefs
  - perceived dissimilarity prompting in-group bias; racial bias
  - seeing the Other as representing outgroup rather than particular individual; stereotyping
- emotions
  - fear: of person, of negative feelings, of being asked to help
  - shame
  - disgust etc
- moral agency
  - moral intuition relating to: fairness; harm; purity; loyalty; respect
  - moral dissonance between Self and Other and resulting emotional ambivalence

The literature suggests that controlled dyspathic responses may include:

- social responses
  - denial, drawing on culturally-available accounts, justifications and excuses
  - acts of malignant positioning
- emotional responses
  - refusal to self-regulate emotions:
    - focussing of attention to negative effect
    - ignoring individuality
- moral agency-related responses
  - negative moral reasoning (or refusal to engage in positive moral reasoning)
    - negative verbal reasoning
    - negative reframing of moral intuition (or refusal to reframe)
    - refusal to hear new arguments
  - interpreting what is heard as potentially manipulative or deceptive.
Actual dyspathic responses will be found from empirical investigation of dialogue and interaction.

**Level 3: Emerging discourse patterns of dyspathy**

At this level we are concerned with patterns that stabilise over the course of the discourse event. This may be a return to entrenched hostility, deepened divisions, or new differences that have emerged through the dialogue. Emerging dyspathy patterns are described metaphorically as **blocking** or **distancing**, both of which lead to **excluding** the Other from Self and Self’s group.

- connection between Self and Other is blocked
- the Other is distanced
- the Other is excluded from the space of the Self

Actual emerging dyspathic discourse patterns will be found from analysing dialogue and interaction.

**Level 4: Emergent stabilisations in dyspathy over the longer term**

Here we are concerned with how the discourse event has changed participants’ ideas, attitudes, values and beliefs. The list of possible considerations will be the same as at Level 1, although of course the nature of each will be different at this point in time. They operate both interpersonally (for the individuals involved) and socially (extended from individual to group).

- individual capacity for empathy: degrees of empathy
- individual language and cognitive resources, from previous experiences
  - knowledge and understanding of the world of the Other
  - skills and experiences in dialogue
- intentions, motivations for participating in future dialogue
- social attitudes, values and beliefs about the Other
  - perceived social identity of Self and Other
  - in-group bias; stereotypes; prejudice; bigotry; social myths
  - dehumanisation
  - from experiences and histories; learned preferences
  - anticipation and expectations about the dialogue and the Other
- emotions
  - brutalisation
  - feelings of uncertainty
  - emotional state
  - willingness, motivation and skills to self-regulate emotions
- moral agency
  - moral code or commitment

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**Notes**

i A similar view underlies the psychotherapy of Carl Rogers (e.g. 1957), that people are well intentioned unless somehow prevented

ii Thanks to Chris Frith (UCL) for pointers and some of these references.
Whether or not a definition of empathy should include appropriate response is an issue for debate. Since my work investigates empathy in dialogue and interaction, responses to what is understood/felt are sometimes evidenced. For the most part, responses remain inaccessible, although fMRI may reveal neurological responses. Other responses can occur on different timescales: altruistic action to alleviate suffering or poverty may materialise minutes, days or weeks later; empathy felt just once may change the direction of a life.

The term was later used with a quite different meaning in self-categorisation theory (Turner, 1991).

Since even a very small difference at this point can make a large difference in subsequent activity of the system, it helps to be as precise as possible in describing how things are just before activity begins.
References
Cameron L and Ritchie D. (under review) Learning from failure: Deliberative empathy in a police-community meeting.


