Abstract

In an online anonymous survey, we compared 46 Chinese from Mainland China to 82 Asian Americans and 258 European Americans on measures of empathy, empathy-based guilt, compassionality, altruism, depression, and the Big Five personality factors. When compared to Asian Americans and European Americans, the Chinese were significantly lower in Survivor Guilt, Empathic Concern and Perspective-Taking, Depression and Compassionality Altruism Towards Family was significantly higher in Depression than the other groups. Implications of the findings are discussed.

Introduction

This cross-cultural study investigates empathy-based guilt, empathy, altruism, and depression in a diverse adult population. Empathy-based guilt is defined as an often difficult emotion that arises from the belief that one has harmed another. Prior research has suggested that empathy-based guilt is significantly correlated both with depression and, in some cases, altruistic behaviors. In our previous cross-cultural studies, we found that Separation Guilt predicted altruistic behavior toward family members among Asian Americans. In contrast, Survivor Guilt, Omnipotent Guilt, and Separation Guilt all predicted altruistic behaviors among European Americans.

In this study, Chinese participants from Mainland China were compared to a sample of Asian Americans and European Americans to investigate whether ethnic identification, cultural values, and immigration affect empathy, empathy-based guilt, depression and altruistic behaviors. Similar to other Asian cultures, the Chinese place cultural emphasis on interdependence and collectivist principles such as filial piety, possibly derived from Confucianism. Yet, as China continues to implement social, political, educational, and economic reforms, the role of empathy-based guilt in depression and altruistic behaviors may also shift within the Chinese population.

Methods (continued)

Participants were obtained by way of announcements on listservs, websites, and bulletin boards in cultural centers at Canton, China and the United States. They were directed to the ongoing anonymous study on culture and emotions underway on the website of The Emotions, Personality, and Altruism Research Group (EPARG) at the Wright Institute. Standard measures listed below along with UC-Davis-Penso questionnaires were included. There were 348 adult participants included in the study as described in Table 1.

Instruments

Interpersonal Guilt Questionnaire-67 (IGQ-67; O’Connor, Berry, Weiss, Bush & Rangan, 1989). The IGQ is a 67-item measure, using Likert scales to assess empathy-based guilt. Three subscales of the IGQ-67 were used: Survivor Guilt is characterized by the belief that the successful act or happy event makes others feel inadequate simply by comparison (e.g., “It makes me very uncomfortable to receive better treatment than the people I am with.”); Separation Guilt is characterized by the belief that if a person separates, leads his or her own life or differs from loved ones in some way, he or she will cause loved ones to suffer (e.g., “I am reluctant to express an opinion that is different from the opinion held by my family or friends.”); Empathic Concern Guilt is characterized by the belief that one’s responsibility for the Regrets and well-being of others (e.g., “If I often think about what someone else wants me to do, rather than doing what I would most enjoy.”).

Compassionality Altruism Scale (CAS; Berry, O’Connor, 2002). The CAS is a 45-item instrument, derived from a measure of social support (Olson, Flood, & Stewart, 1987). Instead of measuring how much social support a person receives, the CAS measures how much support someone tends to extend to others. Respondents indicate how frequently they perform acts of altruism for family, friends, and strangers in a variety of social situations. Items from this questionnaire include how often the participant “gave money for an indigent amount of time” and “helped them think about a problem.”

Interpersonal Reactivity Index (IRI; Davis, 1980). The IRI is a 28-item self-report instrument measuring (distal) categories of empathy. Perspective taking is the ability to identify with, or understand cognitively, the situation experienced by another person. Empathic Concern: the degree of concern a person tends to feel on witnessing another person’s distress. Personal Distress: the degree of distress a person is likely to feel, upon witnessing difficulties experienced by another person.

Center for Epidemiologic Studies Depression Scale (CESD; Radloff, 1977) is a widely-used 20-item self-report instrument, with responses on a Likert scale ranging from 0 (never) to 6 (most or all of the time). The cut-off score for depression is equal to or greater than 16, which indicates at least a mild depression, though many clinicians mark a mild depression staring well below 16.

Methods

We began by translating the measures used into simplified Chinese (Mandarin), officially used in Mainland China. The translation involved several stages, including an initial translation by two bilingual researchers, followed by a back translation by a professional translator. Researchers who developed several of the measures reviewed the back-translation for meaning, to assure that there was accuracy. Revisions were made when items did not accurately reflect the meaning of the original English items. After the team was satisfied with the translation, data collection began.

Results

One-factor analysis of variance (ANOVA) was used to compare the three samples. The Mainland Chinese sample scored significantly lower (all p < .05) than both the European-American and Asian-American samples (which did not differ from each other) on survivor guilt, empathic concern, perspective taking, altruism to friends, and agreeableness.

As expected, both the Mainland Chinese sample and the Asian-American sample (which did not differ from each other) scored significantly higher on separation guilt than the European-American sample (p ≤ .05). The European-American sample also scored significantly higher on omnipotent guilt in comparison to European-American sample (p < .025).

Furthermore, the Mainland Chinese sample endorsed significantly fewer items on the CESD measures than the Asian-American sample (p < .002) and marginally less than the European-American sample (p < .067). The European-American sample also reported significantly less depressive symptoms than the Asian-American sample (p < .05).

There were no statistical significances on overall F-tests for group differences in altruism to family, omnipotent responsibility, or the Big Five traits of extraversion, conscientiousness, or neuroticism.

Since the three samples differed in gender composition (with a higher percentage of males in the Mainland Chinese sample), we used an analysis of covariance (ANCOVA) to compare the groups on the measures while adjusting for gender. The covariate-adjusted comparisons did not change any of the substantive findings.

Discussion

Future studies of the Mainland Chinese populations are needed to better understand our results. Our preliminary findings indicate that future studies of the main land Chinese population may also benefit from the inclusion of a wide range of additional variables, including the Big Five personality factors, empathy, and guilt.

As expected, the Mainland Chinese scored significantly lower on Depression in comparison to Asian Americans. We post that the experience of immigration itself may explain the difference between their scores on Depression.

Sampling error may also affect our findings. The Mainland Chinese were primarily recruited from the Southern provinces of China. There may be regional differences in the role of empathy-based guilt on prosocial behaviors. Also, religions may have also mediated the differences between groups. There was a higher representation of agnostic individuals among the Mainland Chinese sample than the Asian-American and European-American samples. Further cross-cultural studies are necessary to expand our understanding of the function of guilt in prosocial behaviors.

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Table 1. Demographics

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Table 2. ANOVA on Dependent Variables

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<th>Variable</th>
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Figure 1. Mean Scores by Groups

Figure 2. Comparison of Means for Dependent Variables