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What Could Those Empathy Researchers Be Thinking? Complications, Controversies, Research, and Practice

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The above title is a weak attempt at humor. Many of the best and brightest in our field have touted the importance of empathy in the treatment of sexual offenders. It's as though we've always known it in our hearts: If you truly understand someone's internal experience, you're less likely to hurt them. Yet the available research begs to differ, and this is frustrating to many of us. What could the researchers have been thinking? And, what are we all feeling?

The June 2013 issue of *Sexual Abuse: A Journal of Research and Treatment* contains an article by Ruth Mann and Georgia Barnett titled, "Victim empathy intervention with sexual offenders: Rehabilitation, punishment, or correctional quackery?" It has already garnered considerable discussion in professional circles; although opinions remain divided. Perhaps, that is a good thing. It is time to consider the role of empathy in the lives of each individual who has sexually abused, rather than among large groups of sexual offenders.

Some history might be in order:

- From antiquity, most religious orders and spiritual groups valued empathy and compassion (e.g., "walking a mile in someone's moccasins" is a common descriptor in parts of the USA, just as "seek first to understand" is among Steven Covey's seven habits of highly effective people, and "Namaste" translates as "the light in me honors the light in you").
- While much of our field emerged from behavioral-therapy attempts to reduce deviant sexual arousal, many of our field's pioneers spoke of the importance of understanding victim experience (e.g., Jan Hindman).
- Concerns about treatment have sometimes focused on developing empathy among treatment participants who have high levels of psychopathic traits. Central to these concerns was that a focus on empathy might actually teach clients how to become more effective at exploitation.
- In 1996, a meta-analysis by Karl Hanson and Monique Bussière found that victim empathy was not predictive of sexual re-offense.
- In 2002, an influential book by Yolanda Fernandez and her colleagues emphasized, among other things, that empathy is difficult to measure and, therefore, difficult to research.
- Other research findings have suggested that while victim empathy (e.g., learning and understanding the harm one has done to specific individuals) is not predictive of sexual re-offense, empathy for others in general can be.

- In 2009 and 2013, Jill Levenson and I, along with our colleagues Shan Jumper and David D'Amora, published three studies of consumer satisfaction surveys. In each of these surveys, clients in two civil commitment programs and one outpatient practice stated that victim empathy and accountability are among the most important elements of treatment. Questions remain, however. Were these clients simply repeating back what they'd heard in treatment?

Into this breach step Mann and Barnett, who observe that as many as 95% of North American treatment programs for people who have sexually abused target victim empathy, which is rated among the top two treatment targets by those programs. Mann and Barnett further remind us of the work of Paul Gendreau and his colleagues, who coined the term"correctional quackery" in response to programs that give priority to anecdotal evidence and the pet theories of administrators.

Mann and Barnett further describe the fuzzy definitions of empathy that have been included in studies, ranging from remorse to a variation of awareness, each of which can be very different experiences. They further observe an important but rarely discussed point: that a lack of empathy for past victims does not explain the willingness to abuse again in the future. They also note that after-the-fact minimization of harm is a common human experience.

In the end, the authors conclude, "None of the various meta-analyses of sex offender treatment program effectiveness have examined the impact of different treatment components at the level required to draw conclusions about victim empathy intervention" (p. 289). The authors also state, "We conclude from our review that the theoretical basis for victim empathy work with sexual offenders is inconsistently articulated, poorly understood, and largely untested empirically" (p. 295).

Under these conditions, it is difficult to know whether professionals should go off in search of more research or go home and take a long, hard look in the mirror. Maybe we are not as empathic and understanding as we would like to believe. Perhaps, if our methods and measures are as disparate as the research studies seem to indicate, we do not understand empathy as well as we think.