EMPATHY, PERSPECTIVE TAKING AND CLINICAL COMMUNICATION

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Introduction

- The ability to empathise is one of the most important physician competencies and is widely considered an important focus of medical education.
- While emotional empathy is certainly measured using existing self-report measures of clinical empathy, metacognitive empathy, which includes the ability to place oneself in the perspective of another person, is likely to be an important aspect of clinical empathy.
- However, this issue has not been addressed in the literature.

Aims/Objectives

Examine the extent to which scores on a self-report measure of empathy correlate with (a) a performance-based measure of perspective taking among medical students (b) classroom measures of clinical communication.

Methods

Students enrolled on both the 4- and 5-year undergraduate medicine degree programmes completed the following:
(a) Jefferson Scale of Physician Empathy (JSPE; Hojat et al., 2001);
(b) Empathy Quotient (EQ; Lawrence et al., 2004).
(c) The Samson Perspective Taking Task (Samson et al., 2010; see below)

Clinical communication skills were assessed using the 'Breaking Bad News' task (scoring based on the SPIKES protocol for breaking bad news).
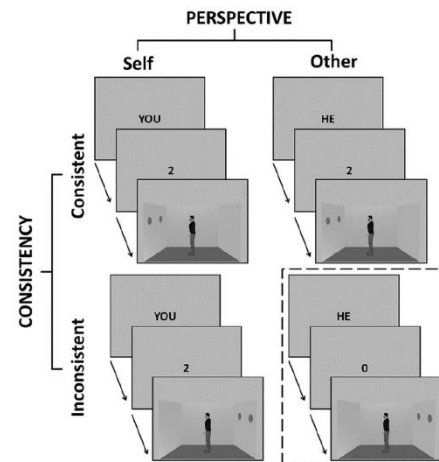
Results

140 Year 4/5 students (55% Female, Mean Age= 24.1 ± 2.9 [SD]) completed the surveys/tasks. The nationality breakdown was as follows: Irish (48%), Malaysia/Singapore (36%), North America (10%), Other (6%).

Association between JSPE total and sub-scale scores and perspective taking
Neither JSPE total score, nor JSPE sub-scales "Perspective Taking", "Compassionate Care", and "Standing in Patients' Shoes" associated with perspective taking performance ($r < 0.1$, $P > 0.05$).

Association between EQ total and sub-scale scores and perspective taking
Neither EQ total score, nor cognitive empathy associated with perspective taking performance ($r < 0.1$, $P > 0.05$). EQ scores for the sub-scales "emotional empathy" and "social skills" negatively correlated with *egocentric* bias in the perspective taking task ($r = -.24$ & $r = -.35$ respectively, both $P < 0.05$).

Results & Conclusions

Association between JSPE & EQ total and sub-scale scores and BBB scores
BBB performance was positively correlated with the "social skills" subscale of the EQ scale ($r= 0.22$, $P < 0.05$). Neither EQ nor JSPE total score, nor JSPE sub-scale scores associated with BBB performance ($r < 0.1$, $P > 0.05$).

Association between perspective taking and BBB scores
"Allocentric" bias scores in the perspective taking task were positively correlated with BBB task scores ($r = 0.25$, $P < 0.05$).

Clinical empathy comprises a mixture of affective empathy and meta-cognitive ability. While affective empathy can be assessed by self-report measures like JSPE, perspective taking is more appropriately measured by task such as The Samson Task. This study showed that allocentric orientation bias was associated (albeit weakly) with stronger clinical communication skills performance.