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Exploring early childhood practitioners' perceptions of empathy with children and families: initial findings

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ABSTRACT

This paper explores initial results from phase one of a research project examining early childhood practitioners' (ECP) perceptions of empathy within their practice. Empathy is widely understood as the ability to understand others' feelings, to see things through other people's eyes, imagining what it would be like to be that person in that situation. It is widely accepted that anyone working with young children should have excellent empathy skills. However, although there is an abundance of published research on the role of empathy within nursing and social work, and limited research in the education profession, there is scarcely any research of empathy within ECP practice. This paper presents initial findings from Interpretive Phenomenological Analysis (IPA) research with a sample of nine ECPs working in the UK, research which is derived from ongoing PhD study. Participants were asked to keep reflective diaries of their empathic interactions, and these were followed up with semi-structured interviews to further investigate responses. The study has revealed a range of definitions of empathy and found evidence of high levels of empathy and emotion within the practice. A second phase of research aims to examine types of empathy and the effect of emotional labour on practitioners.

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Introduction to empathy

Much of the academic literature relating to empathy is located in the field of counselling and therapy, arising from the seminal work of Carl Rogers (1957), who was influential in exploring the concept. Along with *congruence* and *unconditional positive regard*, *empathy* is one of three "core conditions" that Rogers (1957, p. 135) deemed to be essential in a therapeutic relationship. The concept was developed for the counselling profession and still forms the basis of person-centred counselling/therapy today (Brown, 2007). Rogers did, however, have a strong conviction that although empathy is essential in a therapeutic connection, it is equally as important in any interpersonal relationship.

Despite continuing academic interest in empathy, defining the concept has always been problematic. Empathy is widely understood as being the ability to understand others' feelings, to see things through other people's eyes, imagining what it would be

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like to be that person in that situation. However, definitions have been inconsistent across disciplines. In fact, one of the most prolific writers on the subject of empathy development, Hoffman (2000, p. 30), declares, “the more I study empathy, the more complex it becomes”.

Empathy in caring professions

As there is little research into early childhood practitioners’ (ECPs) empathy skills, examining empathy research in other caring professions, such as nursing, social work and teaching, offers useful material for consideration on the basis of similarity between professional contexts. The requirement for those working in caring professions to *demonstrate empathy* in their profession is common across these disciplines (Boyer, 2010; Cunico et al., 2012; Grant, 2014; Konow Lund et al., 2018). In nursing, empathy is reported to increase nurses’ sensitivity and responsiveness to patients (Irving & Dickson, 2004, p. 212) and to improve communication (Morse et al., 1991; 2006). Morse et al.’s research is based on the belief that empathy is therapeutic and is crucial in nurse-patient interactions. The research focussed on nurses’ responses to patients who were suffering and was based on biographical and autobiographical accounts of interactions gathered from existing literature. Findings indicated examples of emotional and cognitive empathy, terms discussed later in this article. Cunico et al. (2012) also believe that empathy is a critical component of the nurse-patient relationship, and they believe it to be both an observable and a teachable skill. Their quantitative research with student nurses in an Italian university evaluated the effectiveness of teaching aiming to increase the empathy skills of student nurses through a range of training sessions designed specifically for this purpose. The suggestion that empathy is a skill that can be taught is disputed (e.g. by Bauer, 2015; Davis, 1990; Oxley, 2011).

There is plenty of research into care and compassion in social work, especially in working with children (see for example: Bride & Figley, 2007; McClure, 2010; Monterio et al., 2016); however, few of these studies focus on empathy in particular. A study by Gerdes and Segal (2009) argues that, although empathy is critical in social work practice, there is no definition or conceptual model of empathy within social work, which is what they aim to develop. In the article, Gerdes and Segal (2009) propose their “social work model of empathy”, based on the latest (at the time) interdisciplinary research into the subject. Interestingly, although the authors suggest that whilst social workers agree that empathy is important, there is no mention of “empathy” in the NASW (National Association of Social Work) Code of Ethics, nor in the Encyclopaedia of Social Work (Gerdes & Segal, 2009, p. 115). They add to the view that definitions of empathy are difficult, claiming that there is a misunderstanding about what it is and whether it is a trait, a skill, a feeling or an action. In the model resulting from Gerdes and Segal’s study of empathy, they identify affective response, cognitive processing and conscious decision-making as the three components of empathy. The study also identifies ways of teaching social work students to develop each component, using results from physiological research on mirror neurones, thus adding to the theory that empathy skills can be taught. Empathy, along with compassion and attentiveness, are the three components of care, according to Ruch et al. (2018), who writes about relationship-based practice in social work. Ruch et al. (2018, p. 113) maintain that good relationships are central to

good practice and claim that social workers are “drawn to” empathise with others. This points to the view that social workers are a particular kind of person with a natural tendency towards “soft skills” such as empathy. Related to this, Lynch et al. (2019) carried out qualitative research to try to answer the question “what does empathy sound like in social work communication?” The aim of their study was to understand empathy as a skill required for child protection social workers to be effective in their role. The mixed-method study analysed 110 audio recordings of child protection meetings between workers and parents and indicated that social workers who demonstrated high levels of empathy made efforts to understand the feelings of children and parents. Reflection and curiosity were identified as skills used by social workers to help them understand the emotions of others and consequently be more effective. However, the study also revealed a worrying lack of empathy in the vast majority of social workers studied. The authors suggest that this is not due to a lack of training but could be ascribed to workers protecting themselves against emotional overload, a synonym for “empathic distress”, which will be discussed later. Consequently, Lynch et al. (2019) call for reflective supervision for social workers, which promotes resilience. Winter et al.’s (2019) study focusses specifically on this emotional overload experienced by social workers and the management of emotional labour. Their research, like Lynch et al.’s (2019), concludes with a call for supervision that focuses on emotions.

The association between emotion and the teaching profession has been observed and studied by a number of researchers, including Isenbarger and Zembylas (2006), Keller et al. (2014) and Jennings (2015). However, as was found in the studies of empathy in social work, much of the relevant literature in teaching concerns emotion, but not specifically empathy. Isenbarger and Zembylas’s (2006) two-year action research study examined the role of emotional labour in one teacher’s experience. The study found that the caring aspect of the teacher’s role was an important factor in her commitment, satisfaction and self-esteem. However, findings also showed that the emotional labour required for “caring teaching” (p. 128) came at a personal emotional cost to the teacher. The recommendations of the study, like Lynch et al.’s (2019) social work study, call for opportunities for teachers to discuss emotions and support each other. Research by Keller et al. (2014) also examines emotional labour in teaching. Keller et al. (2014) use Morris and Feldman’s (1996, p. 987) definition of emotional labour as being “the effort, planning, and control needed to express organizationally desired emotion during interpersonal transactions”. Their work revealed instances of secondary school teachers in the study suppressing or faking their emotions in a third of lessons, resulting in emotional exhaustion. In Keller et al.’s (2014) study of emotional experiences and exhaustion in the classroom, the term empathy is not mentioned, although they do discuss affectivity; the negative emotions arising from others’ emotional experiences. This is a clear example of “emotional labour” (Hochschild, 2012).

Types of empathy

Two contrasting types of empathy often described are *cognitive empathy* and *affective empathy*. Cognitive empathy entails the rational understanding of the feelings of others, but without an emotional effect on the empathiser. In affective empathy,

however, there is a sharing of emotions, with the empathiser experiencing the emotion of the other person themselves (Molenburghs, 2017).

Cognitive empathy can be defined as the capacity to understand someone else's state of mind from their perspective (Coplan, 2011). Decety and Yoder (2016) suggest that cognitive empathy is more important than affective empathy, as emotions interrupt the reasoning required to remain rational and professional. Decety and Yoder's (2016) research suggests that only by remaining unemotional are we able to use cognitive empathy and concern in a pragmatic sense. However, Morse et al.'s (1991) research with nurses suggests that using cognitive empathy and remaining unemotional can lead to detachment and dissociation when nurses are encouraged to protect themselves from the emotional aspect of interactions in order to maintain objectivity and remain "professional".

Affective (or emotional) empathy involves an emotional response to another's emotion, rather than a cognitive one (Hoffman, 2000). In affective empathy, one's felt emotions are more akin to someone else's than one's own. Maibom (2017, p. 23) gives this example to illustrate affective empathy; "If I am empathically sad that your cat was run over, my sadness is more appropriate to your situation – having lost a loved pet – than to my own, being a mere bystander to tragedy". Feeling the emotions of another can result in empathic distress, which develops into personal distress, as empathising with someone's distress causes us to feel distressed ourselves. Maibom (2017) concludes that although affective empathy is important in building social relationships, the most important factor in affective empathy is how we manage the effects and potential distress. Morse et al. (1991, p. 82), in their research into nurse-patient relationships, describe emotional empathy as reading people's needs and "knowing implicitly" what to do when someone is in distress. This type of empathy is, they say, gained from experience and modelling, rather than learned by rote. Affective empathy is associated with risk, however, in the form of "empathic over-arousal" (Eisenberg, 2005; Hoffman, 2000), which occurs when the empathic distress is not managed effectively, and this is what can result in personal distress. Management of such distress is difficult and the study by Morse et al. (1991, p. 85), examining accounts of caregiver-patient interactions, concludes "the instantaneous recognition of another's plight causes reflexive feelings of helping that trigger expressions of first-level responses in the caregiver".

Cognitive and affective empathy are very different, and these distinctions are fundamental to this research of empathy within ECP practice. However, a view of empathy has developed, which contains aspects of both cognitive and affective interpretations (Jardine & Szanto, 2018). This multi-dimensional approach recognises the "multifaceted nature" (Davis, 2017, p. 112) of empathy. "Affective matching" (Eisenberg et al., 1991) is a key component of the approach; it describes a parallel reaction to another person's distress. However, Eisenberg et al. believe that this emotional effect is usually followed by a response resulting from some form of cognitive activity. This echoes Morse et al.'s (1991) view that emotional empathy itself is not sufficient in the nurse-patient relationship; it is the cognition and actions resulting from the emotional response that is of value to patients. Developmental psychologist Hoffman (2012) believes that empathy involves experiencing the emotions which are affecting others, but that the empathiser also needs to be able to understand the situation cognitively, so a combination of the two types of empathy may be ideal.

Empathy in ECP practice

The vast majority of practitioners working with children in the UK are female; this is even more pronounced in the early childhood sector, where 98% of workers are female (Hemmings, 2018). This may be significant when examining the expectations of these workers. Working with children, as with nursing and other care occupations, is often seen as “vocational” work, the expectation being that people will enter the profession because of the sort of person they are, the sort of person who cares and wants to make a difference (Atkinson & Claxton, 2000). The work is of relatively low status and is poorly paid, with many qualified ECPs earning minimum wage, hence the view that people do this work for personal satisfaction, rather than monetary reward (Erdiller & Doğan, 2015). The skills that are utilised by ECPs are often not visible to those outside the profession, and this predominantly female profession is a victim of gendered pay inequality (Findlay et al., 2009, p. 422). It is suggested that one such unnoticed skill is likely to be empathy, yet there is little published research with this particular professional group.

Feelings are integral to the profession. Noddings (2013) suggested that those who work with children do so as part of the natural mothering instinct of the worker, practising within an “ethic of care”. However, the paradox of the mothering, loving carer versus the qualified professional is one that has long been debated (Goldstein, 1998; Moyles, 2001; Osgood, 2010). EYPs are still expected to be “emotional and loving” (Moyles, 2001, p. 81) and have “endless patience” (Elfer, 2008, p. 365). Previous research by Hodgkins (2019, pp. 50–51) asked ECPs to react to Elfer’s claim and responses overwhelmingly agreed, making comments such as “if you don’t love children and have endless patience, you are in the wrong job” and “endless patience is a must ... you definitely need passion to work in the Early Childhood Education (ECE) sector, it’s not for the faint hearted”. Empathy is not just essential for working with young children; it is also an important skill used in working with parents and families. Jena-Crottet’s (2017, p. 25) research into emotional labour in early childhood teachers in New Zealand identified “stressful encounters with parents” and within the team as conducive to negative emotional labour.

Caring professionals are expected to display the emotion appropriate to the rules and expectations of employers (Barry et al., 2019). The “commercialisation of feelings” is examined by Hochschild (2012) who asserts that the emotional labour is the management or suppression of emotions that are seen as inappropriate and the introduction of positive emotion cues, or “feeling rules” (Hochschild, 2012, p. 50), which are seen as consistent with the image required for the job. There is evidence to suggest that this suppression of inappropriate feelings is stressful. Reay’s (2004) work on “emotional capital” between mothers and their children identified examples of “a very thin dividing line between empathy and over identification when children were experiencing difficulties in school” (p. 62). This “very thin line” echoes that of the empathic distress seen in ECPs.

In recent years, there has been growing interest in investigating the emotional demands of ECP practice. Elfer (2018), Taggart (2016), Findlay et al. (2009) and Page (2018) have all conducted research into this area and, in some cases, into compassion fatigue within the sector (Elfer et al., 2018; Taggart, 2016). There is evidence in these studies that emotional labour within the role results in stress and fatigue for the practitioner. Yarrow’s (2015) research with early childhood workers in Australia, for example, provides examples of the emotional impact of emotional labour on

practitioners, including reports of practitioners being in tears about difficult emotions they have handled and even dreaming about interactions they have experienced. Yarrow's research provides examples of practitioners imagining how the experiences of young children feel to them. Consequently, Yarrow concludes that such emotion work is a factor in burnout and low morale. Monrad's (2017) Danish study uncovered similar findings of emotional labour resulting in burnout for childcare workers. Monrad's study illustrates emotional labour, with examples of workers hiding their own stress from the children and striving to remain outwardly positive.

A research report published by Nelinger et al. (2021) identified a myriad of difficulties currently experienced by ECPs and evidence of negative effects on ECPs. Findings highlighted that 91% of practitioners had dealt with challenging situations involving children with mental health, social or emotional issues. Large numbers of practitioners had been dealing with children who are bereaved or affected by violence and abuse and 71% of them said they had been stressed or upset when dealing with difficult situations. The report calls for more training for early childhood practitioners, as 53% of the respondents had not had any training relating to early years mental health (Nelinger et al., 2021, p. 3).

Despite the difficulties of the role, there is a contrasting view that compassion and emotion work can result positively in compassion satisfaction (Figley, 2013, p. 18). It is possible, then, that the positive consequences of feeling empathy can compensate for its negative consequences. Studies have shown that exposure to needy others can cause a positive self-image and a stronger appreciation of different values in life (Jeon et al., 2018; Kim & Yang, 2016; Steed & Downing, 1998). Research by Inagaki and Orehek (2017) suggests that doing things for others, nurturing and supporting, and even gift giving result in positive feelings of self-esteem, self-worth and feelings of social connection. Harr and Moore (2011, p. 353), writing about social workers, suggest that compassion satisfaction can improve the mental, physical, and spiritual well-being of all helping professionals. They suggest that it may also be a motivator and may help to "mitigate the negative effects of burnout and compassion fatigue".

Whether the use of empathy results in fatigue or satisfaction, and the consequences of this, appear to be under-researched. The research described in this article aims to discover more about how ECPs perceive empathy within their role.

Methodology & methods

The objective of the research was to carry out a small-scale study of practitioners within early childhood settings to explore their understanding of empathy within their practice. A review of the literature highlighted potential difficulties with definitions of empathy (Hoffman, 2000), so keeping an open mind and a reflective approach to understanding the lived experience of practitioners was important throughout. Identification of one's own beliefs and assumptions about knowledge before embarking on any primary research, positioning oneself in the study, is essential. One's philosophical position will influence methodological decisions and will shape the relationship between researcher and participants (Mills & Birks, 2014). The researcher's background, roles and experiences become a layered foundation on which to understand the research meaningfully (Pelosi, 2018). As my own world view clearly impacts on my research, my perceptions of the social world determined the research methodology and methods I considered to be valid.

Interpretive Phenomenological Analysis (IPA) presents an effective way of offering insights into how people make sense of a given phenomenon (Alase, 2017). The aim of this study was to explore the phenomenon (empathy) by recording and interpreting the lived experience of research participants (Smith et al., 2009). Phenomenological studies thus focus on how people understand and talk about objects and events (Pietkiewicz & Smith, 2014) in order to make sense of them.

Diary-interview method

Although still relatively new as a qualitative research method, the use of reflective diaries in qualitative social research has increased in the last two decades (Filep et al., 2018). The reflective diary offers an opportunity for researchers to record the lived experiences of individuals who collectively make up a group; consequently, it has been used in a variety of disciplines including social care (Gawley, 2018; Herron et al., 2019), psychology (Ohly et al., 2010; Travers, 2011), nursing (Jasper, 2005; Välimäki et al., 2007), midwifery (Bedwell et al., 2012) and education (Hewitt, 2017), where, as a data collection method, it has proved advantageous. Although the literature on reflective diaries is increasing, particularly studies in the field of health, there is a far more limited number of empirical research articles relating to this method and its deployment compared to other qualitative methods (Alaszewski, 2006). There are few examples of published empirical research which include a diary element within the early childhood sector (Macagno & Molina, 2020; Page & Elfer, 2013; Wong et al., 2015); these were examined closely to ascertain insights into the usefulness of processes to this particular study. Diaries allow people to record their individual understanding of everyday activities (Morrison, 2012), giving researchers rich descriptions of participants' understanding and feelings about the concept (Bedwell et al., 2012). The act of writing itself can help participants fix their ideas and views in a tangible way (Bedwell et al., 2012) and diaries can illustrate how participants' understanding and viewpoints change and develop over time (Herron et al., 2019). Kenten (2010, p. 2) explains; "each diary entry ... is sedimented into a particular moment in time: they do not emerge 'all at once' as reflections on the past, but day by day strive to record an ever-changing present". This journey of understanding and the development of participants' personal positions are what provides the researcher with such rich data; a requirement of IPA (Smith et al., 2009). Diaries can capture emotions and rich descriptions, information about the participant and his/her culture and they can be a tool for encouraging reflection and creativity and for empowering participants (Meth, 2003). Within a naturalistic approach to the research, where the aim is to minimise the impact and intrusiveness of the research (Alaszewski, 2006), individual diaries are ideal. Burford (2021) recommends reflective diaries as the most effective method for collecting emotionally intense data in an unobtrusive way. Inviting participants to record their empathic interactions in reflective diaries aimed to "facilitate the elicitation of stories, thoughts and feelings" about empathy (Smith et al., 2009, p. 56).

There are many advantages to diary research, however, there is evidence to suggest that when diaries are used in combination with other research tools, the approach is even more effective in deepening exploration of a phenomenon (Crosbie, 2006; Kenten, 2010). Hewitt claims that diaries alone are insufficient (2017, p. 348) as they do not allow for sufficient depth of discussion. However, there are several studies using a

combination of diaries and interviews which claim to produce worthwhile results. Zimmerman and Wieder (1977), who devised the diary-interview method, suggest that diaries are useful as scaffolding, providing a structure that provides a basis for subsequent processes, such as interviews. The research is therefore enhanced, enabling the researcher to explore diary entries in more detail during the interview. Bartlett (2012) agrees that the two methods used together can lead to deeper understanding for both researcher and participants. In Bedwell et al.'s (2012) study of midwives' experiences, participants kept a diary, which was followed up by an interview to explore the content of the diaries further, to clarify points and to prevent misinterpretation by the researcher. The purpose of the diary was to collect data, and to focus a participant's mind on the issue being studied, prior to a subsequent interview (Bedwell et al. 2012). Because of the constraints on social proximity due to the worldwide Coronavirus pandemic (Gov.uk, 2021), interviews were carried out virtually using an online platform.

Recruitment

IPA participant numbers are usually small (Pietkiewicz & Smith, 2014) as the aim is to produce an in-depth exploration of a particular group, depth rather than breadth being the primary objective. Over the past few years, my informal discussions with ex-students and colleagues have focussed on my interest in empathy and my desire to research the subject in early childhood settings. This resulted in several practitioners and setting managers expressing a desire to be involved in any future empathy research because of its interest and currency. Consequently, on first proposing this research project, three nursery/pre-school managers were keen for their staff to be invited to take part and offered gatekeeper access to staff working in their settings. Their interest and enthusiasm impacted positively on the recruitment of their staff to the research project. Managers were contacted by email and asked to invite all of their staff to be involved in the project, so the range of practitioners ranged from newly qualified workers to experienced practitioners with a range of qualifications and managers themselves. A brief outline of the aims and expectations of participants was provided, including an indication of the amount of time that their participation was likely to take. No incentives were offered for participation in the study, other than the opportunity to be involved in something that may prove useful for the profession by highlighting their skills. It was anticipated, therefore, that the approach was altruistic as well as being compassionate. All potential participants were provided with details of the research project, including why their participation was invited, what they would be asked to do, what would happen to the information they provided, how that information would be used and how and to whom it will be reported. The research followed ethical standards demanded by the British Educational Research Association (BERA, 2018, p. 15).

Research phase 1

An initial interview outlined the research, and then diary packs were sent out to participants. They were asked to write about times they were aware of using empathy within their everyday practice and then, in the follow up interview, they were asked to define empathy and to examine what it meant to them. To reduce any anxiety for participants

with regard to the sharing of their responses, it was important to put people at ease and to develop a supportive relationship throughout. This was made slightly more complicated by the worldwide Covid-19 pandemic, which meant that interviews had to be conducted virtually. Participants were reassured that anonymity and confidentiality protocols were in place and that their identity and place of work could not be identified in any publication of data. Participants' names have been changed to protect their anonymity.

Data collection and analysis

At the data collection stage, whilst being immersed in the data, following Smith et al.'s (2009) six-stage process of reading and re-reading diaries, potential interview questions evolved. Bedwell et al.'s (2012, p. 155) research established that although diaries can provide rich data, "the lack of direct interaction with the writer can leave researchers with the feeling that they require further explanation". This was the case with the majority of reflective diaries analysed in the empathy research. One participant used the word "reflecting" many times in his diary, so as I read the entries, I noted that an interview question about the reflective practice would explore the relationship between empathy and reflection further. Another participant wrote in her diary, "the child was going to cry". I noted that in the subsequent interview, I would ask how she knew this? The comment may have been an example of an advanced empathy technique (Egan, 2013; Hodgkins, 2019), but more exploration would ascertain if this was the case. The personal reflective component of the proposed diary-interview research is enhanced by a trusting relationship between researcher and participant, trust being an integral characteristic of the IPA approach (Alase, 2017).

Following examination of data analysis strategies used in IPA, Smith et al.'s (2009) six-stage process was followed in this study. The first step of reading and re-reading the diaries allowed me to immerse myself in the responses, ensuring that the participant remained the focus of the analysis. Repeating the process of reading carefully promotes understanding of the person who is writing, the first experience of attempting to enter the participant's world. The second step involved close examination of the language used and exploration of meaning. Smith et al. (2009, p. 83) propose that researchers "produce a comprehensive and detailed set of notes and comments on the data" and they suggest highlighting and commenting on descriptive, linguistic and conceptual features. This step was followed using a table showing each line of the participant's writing, with colour coded comments relating to factual information, language used and conceptual comments. Step three of the process involved examination of emergent themes, looking at relationships and patterns across the data collected. This stage was conducted when a participant completed diary one, which comprised between five and 12 diary entries over one week. Smith et al. (2009, p. 92) clarify "themes are usually expressed as phrases which speak to the psychological essence of the piece and contain enough particularity to be grounded and enough abstraction to be conceptual". In IPA research, the researcher determines themes that capture and reflect the participant's understanding, so themes were noted alongside colour coded notes. It is important, in IPA research, that the researcher makes notes of any thoughts, observations and reflections that occur while reading transcripts. In a reflexive hermeneutic study, notes are likely to include the researcher's own emotions (Biggerstaff & Thompson, 2008), which need to be analysed as part of the data analysis process (Table 1).

Table 1. Participants.

Pseudonym	Job role/gender	Setting
Mel	Early Years Educator (F)	Large private day-care nursery for 0–5 year olds, suburban middle socio economic area
Jake	Manager (M)	Rural pre-school for 3–5 year olds in a higher socio economic locale
Joel	Manager (M)	Large private day-care nursery for 0–5 year olds, suburban middle socio economic area
Cheryl	Teaching Assistant (F)	Reception class (children age 4–5 years), small town primary school in a middle socio economic area
Debbie	Deputy Manager (F)	Inner city day-care nursery for 0–5 year olds in a lower socio economic area
Aadiya	Early Years Teacher (F)	Reception class (children age 4–5 years), suburban primary school in a higher socio economic locale
George	Deputy Manager (M)	Small rural private day-care nursery for 0–5 year olds in a higher socio economic locale
Harriet	Early Years Educator (F)	Private day-care nursery for 0–5 year olds, suburban middle socio economic area
Andrea	Early Years Educator (F)	Small rural private day-care nursery for 0–5 year olds in a lower socio economic area

Key: Early Years Educator - someone who is qualified to level 3 at a college level; Early Years Teacher - someone who has graduated with a University degree in early years; F, female; M, male.

As this research included a diary and a follow up interview, the process of steps one to three was repeated using a transcript of the interview. Step four of the process is to further reduce the data by searching for connections across emergent themes. Smith et al. (2009) suggest several ways of doing this, including abstraction and subsumption, connecting themes by context, frequency of use or function. Themes from each diary and interview were combined, which comprised a list of themes taken from all diaries and interviews during stage one of the research. Step five involves moving on to the next case and repeating the process, culminating in step six; looking for patterns across cases, each “case” being a single participant. As a second diary-interview phase is planned, based on the resulting themes of phase one, these six steps are to be repeated again with the hope of deeper levels of interpretation in phase two. An additional stage was enacted of using NVivo, a data handling software package designed to help researchers to uncover deeper insight into the data (QSR, 2021). This additional stage was completed after Smith et al.’s (2009) six-stage process, and it presented different ways of looking at the data in the form of charts and word clouds, which encouraged detailed analysis of words and patterns.

Braun and Clarke (2013) recognise that analysis is interpreted subjectively and that the researcher’s theoretical and political views influence this. However, with researcher awareness, open and honest conversations and a reflexive approach throughout, consideration of the researcher’s views enriched the research process and relationship between researcher and participants.

Research phase 2

A second reflective diary has recently been distributed to the participants; this will be followed by a second semi-structured interview in which ideas are clarified and concepts explored further. The initial diary was unstructured, as the aim was to find out about ECPs’ perceptions of empathy without making any prejudgements. In the second phase of the research, participants were asked to write about empathic interactions again. This time, for each entry, they have been asked to identify their own emotion at

the time of the interaction, in order to explore examples of cognitive and affective types of empathy. Follow up interviews will explore the diary content further and will include a question around emotional support within the workplace. Emotional support in the form of supervision is commonplace in counselling, social work and nursing professions, but seems to be inconsistent in Early Childhood settings. Questioning on this will be included in phase two of the research.

Results & discussion

Defining empathy

The aim of the research was to examine practitioners' perceptions of empathy. Therefore, a question was asked of all participants in the first interview; "how would you define empathy?" The definitions and comments on empathy in diaries and interviews were diverse and are outlined in [Table 2](#).

Some of the definitions clearly describe cognitive empathy, the rational understanding of others' feelings, for example "using my own experiences to understand theirs" (Cheryl, diary 1) and "trying to come at things the same way the child does" (Cheryl, diary 1). Both responses indicate a cognitive process, reasoning and thinking about the situation rationally (Coplan, 2011). Others are clearly affective and describe emotional responses, for example, "going through it with them" (George, interview 1) and "feeling the way they're feeling" (Cheryl, interview 1). These responses demonstrate the experiencing of the emotion by the empathiser, as described by Molenburghs (2017), practitioners clearly feeling the same emotion as the child themselves. The conclusion at this stage is that practitioners are demonstrating cognitive empathy, affective empathy, multidimensional empathy or a combination of types. This is something which will be explored in more detail in the second phase of the diary-interview research.

Highly emotional responses

The detail that was immediately apparent and significant at both diary and interview stages was the number of highly emotional responses. Some of these were akin to the examples found by Keller et al.'s (2014) research into the emotional labour experienced

Table 2. Definitions of empathy (from diary 1 and interview 1).

"part of everything we do"	"relating to others' emotions"	"relating to how others are feeling"	"part of human life"	"part of my personality"
"going on that emotional journey with them"	"a foundation that underpins everything"	"putting yourself in someone else's position"	"understanding how we can affect other people's feelings"	"acknowledging other people's feelings"
"a challenge"	"a conscious choice"	"an automatic thing"	"connecting"	"all about emotion"
"picking up on people's feelings"	"something I do all the time"	"picking up on people's feelings"	"feeling the way they're feeling"	"a bridge that connects us to others"
"going through it with them"	"putting yourself in somebody else's shoes"	"using my own experiences to understand theirs"	"trying to come at things the same way the child does"	"thinking about how the team feel"

by teachers. Their research found that the effort and control required to express appropriate emotion and suppress inappropriate emotion caused stress. My participants, on the whole, were very open about their feelings and willing to share these with me, which was gratifying and signified a relationship between participants and researcher that made them feel at ease. They described ways that their reactions to children and situations at work had a significant impact on their own emotions, as these comments demonstrate:

“I do really struggle at work a lot of the time” (Harriet, interview 1); “it’s been so draining emotionally, I’m constantly thinking about work, especially safeguarding issues” (Andrea, interview 1); “I feel a sense of responsibility and that causes me to overthink and be anxious and sometimes not be able to sleep” (Joel, interview 1); “it’s getting more emotionally taxing” (Debbie, interview 1); “I do think about a lot of the children when I’m not at work” (Cheryl, interview 1).

The responsibility of the role appears to be considerable, and the impact evidently continues into practitioners’ home lives. However, there was evidence that staff teams are invaluable in providing support at work. One participant in the research, Debbie, said in her interview “the staff all support each other; we cry together over something most days”. For practitioners to be upset to the point of tears “most days” is worrying. It is hoped that the results of this research may go some way towards identifying ways of supporting ECPs with this aspect of their role. As emotion was so significant in the research findings, a text search was carried out to identify emotion words within the data. Analysis of emotion words used in the phase 1 diaries and interviews identified the following data:

Some of the emotion words shown in [Table 3](#) related to children’s emotions and others to the emotions of the participants. Noticeably, the words *upset* and *crying* were the most used emotion words, ranking significantly higher than the others on the list. Looking at

Table 3. Emotion words contained within phase one diaries and interviews.

Word used	Occurrences
upset	58
crying/tears	54
happy	32
sad	32
worry	32
struggling	30
love	28
settled	19
difficult	17
anxiety/anxious	16
stress	13
angry	12
confused	10
frustrated	8
overwhelmed	7
unsettled	6
scared	4
distress	4
guilty	4
embarrassed	3
shy	1
unbearable	1
withdrawn	1

the diary entries and interview transcripts, it is evident that the majority of these entries, including the words *upset* and *crying* were discussions about transitions within the setting. Settling children into new settings and supporting their separation from parents is plainly the most emotional aspect of the role. The following responses demonstrate EYPs' empathic interactions in this situation.

Cheryl, a practitioner, working in a reception class, said "when they say oh I miss my mom, you just feel it, oh gosh, you know you do, you feel it even more I think when you're a parent and it pulls on your heartstrings".

Debbie, the deputy manager of a day nursery said,

their parents are constantly phoning and worrying and then you're like "I hope we're pleasing the parents" and the kids are really struggling and they're really upset and you think and you feel for them and you say "Oh I know you're sad but it's okay mummy's coming back", but it is really difficult.

Mel, an EYP in a private day nursery, describes having to cope with competing emotions when her own experience as a mother and her professional responsibility as an early years educator were conflicted. She explains;

When Mom collected her son, she had clearly been crying and talked to me about feeling guilty leaving the child upset to go to work, having a bad night then struggling at work, etc. I didn't want to add to her stress so "sugar coated" the hand over, telling her about the times her son was happy and content rather than when he was struggling. I know about Mom guilt, sleep deprivation, etc. so I really empathised with her. I chose to tell Mom about the positives to spare her feelings, so I had mixed emotions. Feeling glad at sparing Mom's feelings, seeing Mom's relief at not being told her son had struggled again but feeling guilty about omitting the truth. And not sure whether it was the right thing to do!

Such situations are loaded with emotion; Mel's example in particular paints a picture of conflicting emotions and of trying to keep everyone happy. These emotions stayed with Mel long after the event, which demonstrates the negative emotional labour resulting from difficult interactions with parents that Jena-Crottet (2017) describes in her research.

Impact on ECPs' lives

In their reflective diaries, participants in this study were asked to reflect on instances when they were aware of using empathy. There are clear links within the diaries and interviews between empathy and emotion. Emotional responses like the ones detailed in the examples above would often linger long after work. Initial findings from phase one of this research exposed examples of this impact, which could be examples of what Eisenberg (2005) and Hoffman (2000) called "empathic over-arousal" which, they warn, can lead to personal distress.

George described an incident when a child fell over at nursery and cut his face; the incident happened on a Friday and George reported being "worried sick all weekend". When this incident was revisited in the interview with George, he admitted "I can't remember the last time I had some time off where I didn't think about work all the time". Harriet agrees, saying, "it depends on the person, but I do know that you take it home and then you can't stop thinking about it". Mel describes a whole range of emotional effects of her empathic interactions when she describes settling a new baby into the

nursery. She identifies empathy for the child who is struggling with separation, frustration with the situation, and then guilt about feeling frustrated. She appears to put a huge amount of pressure on herself to handle the situation effectively, but when she feels frustrated about not being able to spend more time with the baby, as she has several other children to care for, she says “I get quite upset with myself for kind of feeling that way”. These responses paint a picture of a stressful and emotional work situation.

The majority of participants had similar experiences, but not all of them. Jake, in all of his diary entries and his interview had only positive comments about the impact that his job as a manager has on him. Jake calls his pre-school “my third baby, my second wife ... the difference you make in children’s lives is just unbelievable and how fortunate am I to have created this? I wouldn’t change it for the world.” Jake seems to have found a way of balancing his work life and home life harmoniously, as has Joel, who says “I always make a conscious choice to keep work at work and home life separate ... I like to make sure I’m really giving my all at work but my home life is protected”. Jake and, at times, Joel describe their empathic interactions at work in a caring but unemotional way. Their diary entries describe empathic interactions, which are followed up immediately with practical solutions. Their empathy appears to be more cognitive than emotional. Aadiya’s responses are similar; she describes situations in the classroom when she works and then constructs an appropriate response, using her knowledge of the child and a variety of strategies. She is clearly committed to demonstrating empathy and describes it as “part of human life ... it underpins everything we do”. Aadiya’s diaries are full of carefully thought out strategies and tried and tested responses to children and families. She describes an anxious child who struggles with transitions. After the National lockdown due to the Covid-19 pandemic, Aadiya spent time planning a welcome breakfast with this child in mind, as the food was the child’s main interest. She sent the child photographs of the room set up for breakfast and this careful, thoughtful activity made a huge difference to the child who came into the setting happily. The strategy focused on the child’s individual needs and was a cognitively reasoned response. One of the most pleasing findings of this research is the way that EYPs strive to get to know children’s individual needs and interests.

Conclusion

This paper has examined the interim findings of a research study aiming to explore ECPs’ perceptions of empathy within their practice. Empathy is difficult to define, and there is a multitude of definitions of empathy in different disciplines, but the consensus is that empathy involves awareness of others’ feelings. Two types of empathy have been discussed in this paper, cognitive and affective empathy, which are quite different and which have a potential personal impact on the empathiser. Research was undertaken using an IPA diary-interview method. A small sample of ECPs from a diverse range of settings was asked to keep a reflective diary of their empathic interactions with children and families, followed up with semi-structured interviews designed to probe further into responses. The resulting rich data offers an insight into the lived experiences of empathy for this group of practitioners and the prevalence of emotional labour within settings, particularly in relation to children’s transitions. Hochschild’s (2012) view that emotional labour and the suppression of feelings is stressful requires further investigation.

Consequently, a second phase of the research is planned which will examine further the types of empathy demonstrated and the effects of empathic interactions on practitioners.

It has long been accepted that working with young children is emotionally demanding and that the work is low-paid, often in poor conditions (Solvason et al., 2021). The current Covid-19 pandemic has exacerbated the situation and added more emotional pressure for practitioners. This research highlights the specific emotional load of empathy within the profession and outlines the impact on practitioners of such emotional work. Emotional responses such as empathy have continually been taken for granted within the profession (Yarrow, 2015), yet empathy skills are essential in enabling practitioners to understand the children they work with and in maintaining social relationships with children and families. This crucial skill should be acknowledged and celebrated.

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