Relationships Between Nurses’ Empathy and Adult Attachment, Self-Esteem, and Communication Self-Efficacy

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Abstract. Purpose: This study was conducted to investigate adult attachment, self-esteem, communication self-efficacy, and empathy in nurses and identify factors affecting empathy. Methods: The data were collected from 100 nurses at K,D University Hospital in D city, K Province. Data were analyzed using SPSS version 20.0 to obtain means and standard deviations and perform frequency analysis, t tests, and a one-way ANOVA. Pearson's correlation coefficient and Stepwise regression analysis were performed to identify factors affecting empathy. Result: The average scores for adult attachment, self-esteem, and communication self-efficacy were 118.05, 28.60, and 142.28, respectively. As subareas of adult attachment, average scores for anxious and avoidance attachment were 52.31 and 65.74, respectively. The average empathy score was 103.76. Empathy was negatively correlated with avoidance attachment (r = -.26, p = .008) and positively correlated with communication self-efficacy (r = .28, p = .004). Anxiety attachment, avoidance attachment, and communication self-efficacy explained 13.1% of the variance in empathy. Conclusion: The results of this study suggest that interventions focusing on anxious attachment, avoidance attachment, and communication efficacy could increase empathy in nurses.

Key words: Empathy, Adult attachment, Self-esteem, Communication self-efficacy

1 Introduction

1.1 Background

In today’s society, there is much-needed demand for understanding, for patients who experience pain and fear due to sudden disability, or chronic or terminal illness, and empathy, with respect to conflict between patients and the family members who care for them [1]. In particular, nurses are required to demonstrate empathy to assist

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patients efficiently within the therapeutic relationship, and empathy is a priority and one of the most important requirements in their relationships with patients [2]. However, patients feel that they do not receive sufficient empathy from nurses [1,3], and of the many domains of nursing services, empathy, including listening to patients’ stories and understanding their needs accurately, is perceived to be low [4].

Empathy is an element of communication and refers to the ability to understand others, extending to the irrationalities that they are unable to express[5]. Empathy in nurses helps patients to control their emotions and maintain hope and exerts a positive effect on anxiety and pain control[1]. Therefore, nurses working in clinics are required to assume an empathetic role in order to understand and acknowledge patients with a supportive attitude and ease their loneliness and anxiety [5].

Previous studies have identified other important factors, including adult attachment, self-esteem, and communication self-efficacy, in interpersonal relationships. However, little research has been conducted to examine the relationships between these factors and empathy in nurses or determine the extent of their effects on empathy.

Therefore, this research examined the relationships between nurses’ empathy and adult attachment, self-esteem, and communication self-efficacy and sought to determine the factors affecting empathy, to provide a foundation for future studies examining interventions designed to improve empathy in nurses.

1.2 Purpose

To investigate the relationships between empathy and adult attachment, self-esteem, and communication self-efficacy and identify the factors that affect empathy

2 Methods

2.1 Study Design

This narrative correlation research was conducted to investigate the relationships between nurses’ empathy and adult attachment, self-esteem, and communication self-efficacy and identify the factors affecting empathy.

2.2 Participants and Data Collection

Research participants included 100 nurses working in K and D university hospitals in D city, K Province. The researcher visited the nursing departments at these hospitals to explain the purpose of the study and request nurses’ cooperation.

With the help of the educational team leaders and chief nurses in each nursing unit, questionnaires were distributed to hospital wards and completed by nurses who had provided informed consent to participate in the study.
In total, 120 questionnaires were issued, and 110 were collected. Of the 110 questionnaires collected, 10 were excluded due to incomplete responses, and the data from the remaining 100 were analyzed.

2.3 Measurement

2.3.1 Empathy

Empathy was measured using Jeon’s tool[9], which included elements of the Questionnaire Measure of Emotional Empathy[7], Interpersonal Reactivity Index[6], and Empathy Index[8]. This index includes 30 questions, with responses provided using a 5-point scale ranging from 1 (strongly disagree) to 5 (strongly agree), with higher scores indicating higher levels of empathy. The reliability of the scale was verified, with Cronbach's $\alpha$ of .87.

2.3.2 Adult Attachment

Kim[10] translated and validated version of the Experiences in Close Relationships-Revised Questionnaire originally developed by Fraley, Waller, and Brennan[11]. The questionnaire contains 36 items including 18 concerning attachment-related anxiety and 18 concerning attachment-related avoidance. Responses for each item were provided using a 7-point scale ranging from 1 (strongly disagree) to 7 (strongly agree). Higher total scores indicate a higher number of characteristics from the domain in question, suggesting the formation of unstable attachment. Cronbach's $\alpha$s were .91, .92, and .81 for adult attachment, attachment-related anxiety, and attachment-related avoidance, respectively, demonstrating the reliability of the scale.

2.3.3 Self-Esteem

Jeon[13] revised version of Rogenberg’s Self-Esteem Evaluation Scale[12] was used to measure self-esteem. The questionnaire contains 10 items, with responses provided using a 4-point scale ranging from 1 (strongly disagree) to 4 (strongly agree). Negative questions are reverse scored, and higher scores indicate higher self-esteem. The reliability of the scale was verified, with Cronbach's $\alpha$ of .83.
### 2.3.4 Communication Self-Efficacy

Larson et al’s Counselor Self-Evaluation Questionnaire[14], translated by Hong[15] and revised by Park[5], was used to determine nurses’ communication self-efficacy. The questionnaire contains 37 items, with responses provided using a 6-point scale ranging from 1 (never) to 6 (always), and higher scores indicate higher communication self-efficacy. The reliability of the scale was verified, with Cronbach’s $\alpha$ of .92.

### 2.4 Data Analysis

Participants’ demographic characteristics, empathy, adult attachment, self-esteem, and communication self-efficacy were analyzed using frequencies, percentages, means, and standard deviations. Empathy levels were compared according to participants’ general demographics using t tests and a one-way ANOVA. The relationships between empathy and adult attachment, self-esteem, and communication self-efficacy were examined using Pearson’s correlation coefficient, and stepwise multiple regression analysis was performed to identify the factors affecting empathy.

### 3 Results

Empathy was significantly negatively correlated with attachment avoidance ($r = -.26, p = .008$) and significantly positively correlated with communication self-efficacy ($r = -.28, p = .004$). The regression model for nurses’ empathy demonstrated explanatory power of 13.1% ($F = 5.98, p = .001$).

**Table 1.** Correlations between Empathy and Adult Attachment, Self-Esteem, and Communication Self-efficacy ($N = 100$)

<table>
<thead>
<tr>
<th>Variable</th>
<th>Attachment anxiety</th>
<th>Attachment avoidance</th>
<th>Self-esteem</th>
<th>Communication self-efficacy</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>$r$ ($p$)</td>
<td>$r$ ($p$)</td>
<td>$r$ ($p$)</td>
<td>$r$ ($p$)</td>
</tr>
<tr>
<td>Empathy</td>
<td>.00 (.972)</td>
<td>-.26 (.008)</td>
<td>.13 (.126)</td>
<td>.28 (.004)</td>
</tr>
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</table>

**Table 2.** Variables Influencing Empathy ($N = 100$)

<table>
<thead>
<tr>
<th>Variable</th>
<th>B</th>
<th>$B$</th>
<th>t</th>
<th>$p$</th>
<th>$R^2$</th>
<th>Adj. $R^2$</th>
<th>F ($p$)</th>
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</thead>
<tbody>
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<td>Constants</td>
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<td>4.35</td>
<td>.000</td>
<td>.157</td>
<td>.131</td>
<td>5.98 (.001)</td>
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</table>
Attachment

<table>
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<tr>
<th>Anxiety</th>
<th>.25</th>
<th>.28</th>
<th>2.43</th>
<th>.017</th>
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</thead>
<tbody>
<tr>
<td>Avoidance</td>
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<td>-.22</td>
<td>-2.12</td>
<td>.036</td>
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<tr>
<td>Communication self-efficacy</td>
<td>.23</td>
<td>.34</td>
<td>2.93</td>
<td>.004</td>
</tr>
</tbody>
</table>

4 Conclusion

The results of this study indicated that nurses with high levels of attachment avoidance showed lower levels of empathy relative to those with low levels of attachment avoidance, and those with high levels of communication self-efficacy showed higher levels of empathy relative to those with low levels of communication self-efficacy. This showed that avoidant and anxious attachment and communication self-efficacy exerted an effect on empathy, suggesting a need to develop intervention studies considering avoidant and anxious attachment and communication self-efficacy to increase nurses’ empathy.

References

