

Empathy and Barriers to Altruism

Doug Contri

Abstract

Concerned people respond generously to local human needs, while the needs of the extreme poor are neglected. The affluent do not contribute more due to poorly managed empathy rather than indifference. Specifically, the plight of the poor arouses anxiety and guilt among the affluent, who deploy cognitive distortions that protect them from these uncomfortable emotions. These defensive distortions masquerade as rational arguments against donating generously to the extreme poor. The guilt and anxiety of the affluent can be diminished by connecting them with their empathy rather than defending against it. This will relieve the affluent of these psychological burdens and likely increase aid to the extreme poor.

I. The Puzzle of Affluence, Poverty and Indifference

The United Nations estimates that each year 10 million children die of preventable diseases, 800 million people are under-fed, and 1 billion are without safe water (Human Development Report 2000; Human Development Report 2002). In 2002 98% of all childhood deaths before the age of 5 occurred in the developing world (World Health Report 2003).

For the last several decades the suffering of the extreme poor has been regularly publicized in Western media. The steady stream of television and internet information has been punctuated by songs such as “Do They Know Its Christmas Time” (1984) and “We are the World” (1985); Live Aid (1985) viewed by over a billion people in 150 countries (CNN 2005, BBC 2006); charitable efforts of celebrities such as Angelina Jolie, Brad Pitt, Madonna, Sean Penn and Bono; advertising by NGO’s seeking to increase awareness and raise money; and news of disasters like the 2005 Tsunami and the 2010 earthquake in Haiti.

However, as awareness of the world’s destitute has increased, donations among Western nations has remained low. Governmental aid for the extreme poor is substantially less than 1% of Gross National Income among European nations and the US, and private aid is provided at a similarly low level (Hudson Institute 2006). Rather than being understood as an emergency requiring action, the plight of the extreme poor appears to have become simply another gruesome fact of modern life to which we have become inured, similar to nuclear weapons, AIDS and terrorism.

Nevertheless, the inaction of affluent peoples is puzzling because were these problems local the response would be immediate and generous. Moreover, the extreme poverty that kills so many can often be remedied with negligible sacrifices by the rich. Research indicates that many life-saving interventions can be implemented for exceedingly nominal sums.

For example, Peabody et. al. (2006) note that saving the life of someone with pneumonia, the leading cause of death in children (2 million in 2004) in the developing world (Wardlaw et. al. 2006), can cost as little as \$132, and treatment for diarrhea, which kills 1.5 million young children annually (UNICEF/WHO 2009), can cost as little as \$25. Nets preventing malaria, a disease that claimed 781,000 lives in 2009 (World Health Organization 2010), can be purchased and delivered for as little as \$10 (Nothing But Nets), and have been found highly effective in saving lives (Abdullah et. al. 2001), particularly when combined with anti-malaria drugs (Schuftan 2000). Easterly (2006) notes that curative TB medications cost about \$10, and preventative medications about \$3 annually per person.

Of course, not all the problems of extreme poverty are so easily remedied, and many find their roots in political, cultural and structural arrangements that are more difficult to correct (Easterly 2006; Moyo 2009). Nevertheless, millions are dying yearly from easily treated illnesses that cost very little to prevent and cure.

That lives could be saved for sums of money that the rich use for dinners out, soft drinks, and other incidental amenities highlights the negligible sacrifice needed to save lives among the extreme poor. Indeed, the magnitude of the tragedy, juxtaposed with the ease with which much of it could be alleviated, and the prompt action that would be taken if it were local, raises an important question: Why do otherwise generous and concerned people among the affluent offer so little to those lacking life-saving necessities?

II. The Origin of Attitudes Towards Third World Charity

Attempting to understand attitudes towards charity inevitably raises philosophical questions about peoples’ obligations to one another. On the one hand, virtually every spiritual tradition exhorts its followers to give charitably to the poor and be of service to others. Indeed, the desire to give to others is often understood to be both a means and end of salvation.

On the other hand, libertarian philosophers assertively deny that charitable obligations exist among individuals. For example, Ayn Rand’s John Galt asserts, “Do you ask what moral obligation I owe to my fellow men? None-except the obligation I owe to myself, to material objects and to all of existence: rationality” (Rand, 1957, p. 936).

Settling the philosophical question of people’s obligations to one another requires an investigation into ontology, such that one affirms or denies that embedded in the universe is some type of moral prescription relevant to how humans interact with one another. Compelling as such arguments may be for intellectuals, most people’s attitudes are determined by more prosaic considerations; they are usually influenced more by psychology than ontology.

Given that the plight of the extreme poor is well known, reasons for inaction regularly find their way into casual social conversation. Based upon informal observation among affluent peoples, there appear to be several attitudes, so-called barrier attitudes, which prevent them from taking action.

III. Common Barrier Attitudes Towards Third World Charity

One barrier attitude can be called the “Magnitude View” (MV), which asserts the problems of the developing world are hopeless. This view claims the scale of the problems in impoverished societies are so enormous and complex that no solution is possible, thereby rendering assistance futile.

A variant of MV that takes a more individual perspective might be called “You can’t help them all” (YCHA). Similar to MV, this attitude holds that even were one to successfully help someone, there still remain a seemingly endless number of others needing help, which again leads to despair of solving the problem of poverty.

A third barrier attitude might be called “Help at Home First” (HHF), which asserts we should help others in our own communities before looking beyond our borders. Unlike MV and YCHA that believe third world charity is futile, HAHF asserts that charity should be directed toward our country where we have our own needs, and greater obligations. Thus HAHF does not necessarily despair of the feasibility of third world charity, so much as it places it at a lower priority than local needs.

Yet another barrier attitude could be called the “Responsibility Position” (RP), which asserts it is the responsibility of the people in developing societies to solve their own problems, and as such, affluent persons have no obligation to offer them charitable assistance, though we might acknowledge such responsibility to our own society. Basically RP rests on an assertion of who owns the problems of a society. Is it entirely the members of that society, usually according to national or ethnic boundaries, or does it extend beyond them? RP asserts that responsibility does not extend beyond national borders, and in this manner is similar to HHF.

A fifth barrier attitude closely related to RP might be called the “Logical Consequences” (LC) perspective. LC asserts that the problems of a given society are the consequences of their collective actions or those of their leaders. To intervene in a manner that prevents these consequences merely perpetuates the problem, and may even compound it. RP asserts that malnutrition, starvation and disease become adaptive or even necessary to those societies by teaching people to live and reproduce within the boundaries of available resources. Eliminating these consequences risks exacerbating them by creating future generations of even more sick and malnourished people.

Collectively, these barrier attitudes contain a mixture of rational argument and psychological dynamics. While intellectuals may be persuaded by purely rational grounds, most people adopt attitudes based upon a mix of reasoning, experience, and emotional needs. Before evaluating the rational merits of these positions, a brief detour through the psychology of empathy will be useful.

IV. Empathy and Human Identity

One of the hallmarks of human psychology is the capacity for empathy, usually understood as the ability to understand emotionally the experience of others. It is feeling sad in response to another’s sadness; joy in response to another’s joy; fear in response to another’s fear, and so on. So conceived, empathy transfers others from external objects into parts of ourselves; “different” consciousnesses not only interact, they interpenetrate. In this way empathy expands our identity to include others; what happens to them, in some measure, happens to us.

So conceived, humans are not entirely separate beings; nor would it be sufficient to say they are simply “connected”, like links of a chain. Instead they interpenetrate, like partially overlapping photographic slides. As such, there is ultimately no such thing as an individual person, or individual human consciousness to be more precise; there are only greater or lesser degrees of interpenetration with other human consciousnesses.

This phenomenology of empathy and human consciousness has recently found empirical support with the discovery of mirror neurons, neurons that are activated in response to observing the actions or emotions of others (Gallese 2001). While systems of mirror neurons are firmly established in monkeys, there is reason to believe they also exist in humans (Rizzolatti & Craighero 2004; Iacoboni & Dapretto 2006). For example, Botvinick et. al. (2005) found that subjects viewing facial expressions of pain in others had increased activation in their own pain centers, as measured by fMRI. Similarly, Wicker et. al. (2003), also using fMRI, found activation in the same neural structures for subjects who either directly experienced disgust or observed facial expressions of others that expressed disgust.

V. Consequences of Empathy: Community and Love

Empathy, the interpenetration of different human consciousnesses, is what binds humans to one another. Each person’s experience, rather than being solely private, includes, in some measure, the experience of others to whom they are exposed. Empathy is what makes human communities genuinely communal rather than mere associations of individuals.

Empathy is also what makes love, in the broadest sense, possible. Without empathy, love does not extend to concern for others, except for how our needs may continue to be gratified. Without empathy, love for others is reduced to the pleasurable feelings they create within us; loved ones become nothing more than tools serving our own desires, hardly love as ordinarily conceived. Thus, empathy makes possible our greatest joys, our love for family and friends, and general connectedness to others.

VI. Consequences of Empathy: Anxiety and Guilt

While empathy forms the basis for communities and love, it has other, less desirable consequences. The capacity to experience others’ experience creates opportunities for anxiety. Not only do we fear for ourselves, we fear for others whose suffering we also experience (Botvinick et. al. 2005). In this manner, the possible avenues of our suffering, like our joy, are multiplied by the number of people with whom our consciousness interpenetrates. Just as we have an interest in taking measures to reduce our own suffering, we have a similar interest in reducing that of others, which we share, and as our possibilities for suffering expand so does our anxiety.

The interpenetration of selves, empathy, also forms the foundation of guilt. Because we know experientially the suffering of others, our failure to ameliorate it induces guilt. Thus, we experience guilt when we injure others or treat their suffering with indifference. The role of empathy in guilt can be seen when reading accounts of vivisections performed hundreds of years ago. Vivisection involved scientists dissecting live animals without anesthesia (Descartes 1996), and often entailed nailing their paws to a board to render them immobile. Accounts of these procedures induce horror in modern minds. However, at the time investigators believed that animals were incapable of feeling pain; instead they understood their cries, howls and protests to be mere “reflexes” without the concomitant experience of suffering.

Today most people believe deeply that the external manifestations of suffering exhibited by animals are accompanied by commensurate mental states, mental states not much different than our own. Laws against animal cruelty are based upon this belief. Therefore, to require someone to perform a modern vivisection would create significant anxiety and guilt, both based on an empathic understanding of the animal’s experience.

Empathy then places humans in a conundrum. It gives rise to our deepest longings and most dreaded fears. How can it serve our desires without inducing anxiety and guilt? How can we enjoy its advantages without its liabilities?

VII. Cognitive Theory and Psychotherapy

Many psychological phenomena are clearest when manifest in their most extreme form; the abnormal makes plain the normal by magnifying it. When considering the effects of empathy, one would expect criminals to suffer from tremendous anxiety and guilt by virtue of their victimizing actions. Indeed, criminal behavior results in intense anxiety and guilt in most people, which is why the majority refrain from such acts despite their ability to do so without detection.

Commonly we attempt to understand the motives and experiences of others by seeing them through the lens of our own. Accordingly, people unfamiliar with criminals commonly ask questions about them: Do they feel remorse (guilt)? Do they worry about being caught (anxiety)? Curiously, the answer to these questions is almost always “No”. What does this say about normal empathy, anxiety and guilt? Understanding criminal psychology as an extreme form of normal psychology sheds light on these psychodynamics in more normal minds. To fully understand why criminals are usually bereft of guilt requires a brief explanation of the theory of cognitive psychotherapy.

Cognitive psychotherapists (Ellis & Dryden 1997, Burns 1980) usually identify 4 components in any behavioral sequence. First, some event, an activating event, occurs (1), which then initiates a thought, or interpretation of the event (2). Based upon the thought, or interpretation of the meaning of the event, a person experiences a feeling (3), which then initiates a behavioral response (4). According to cognitive theory this linear sequence moves through time, with each step occurring after the other. The model is pictured below:

Activating Event >> Thought >> Feeling >> Behavior

What is most significant for understanding the empathy of altruism is the model’s distinction among the different components, and particularly between “thoughts or thinking” on the one hand, and “feelings” (affects) on the other. “Thoughts” are descriptions or interpretations of the observable world; they are empirical assertions. Whereas “feelings” are some type of affective response engendered by the “thought”; feelings are subjective.

Yochelson & Samenow (1976) and Walters (2002) have identified thinking patterns characteristic of criminal offenders. Indeed, their extensive research reveals consistently distorted patterns of thinking, patterns that are empirically false or logically fallacious. Accordingly, they are called “criminal thinking errors”.

VIII. Cognitive Distortions as Defenses

Cognitive psychotherapy is principally concerned with correcting erroneous cognitions via empirical tests, and fallacious logic via Socratic dialogue. In this manner, thinking errors are usually conceived as mistakes in learning or reasoning that simply need correction (Clark, Beck & Alford 1999).

On the other hand, an entirely different model of mental functioning was proposed by Freud (1923) and the subsequent tradition of psychoanalytic theorists who conceive psychopathology to be a failed attempt by a dynamic system to maintain an acceptable equilibrium among internal drives, external prohibitions and interpersonal needs. This equilibrium is principally maintained via a system of defenses (A. Freud 1936) that function by altering or denying some feature of reality; they do this so that we can avoid, or at the least diminish, anxiety and other negative emotions. However, unlike cognitive theory that also posits distorted thinking, psychoanalytic theorists assert that distortions are not accidental or random mistakes in learning; instead cognitive distortions are strongly motivated so that the person can attenuate anxiety and other uncomfortable feelings.

The crucial point for the analysis that follows, which marries cognitive theory’s emphasis on distorted thinking with psychoanalytic theory’s focus on motivated defenses, is that the cognitive distortions of criminals are integrally connected to their criminal behavior. Criminals are motivated to deploy and persist in their distorted thinking because of its supreme utility in meeting their needs. Specifically, criminals deploy cognitive distortions that diminish empathy so that their anxiety and guilt are attenuated. Otherwise they would be inhibited from their victimizing criminal acts, an impediment they resist because of the gratification crime provides.

Note that criminals do not entirely lack empathy. Instead, their deployment of cognitive distortions to attenuate anxiety and guilt confirms the existence of empathy, without which there would not be the need for defensive distortions. This is one solution to the conundrum created by empathy; view the world in a distorted manner that diminishes the anxiety and guilt associated with empathy. There are numerous criminal thinking errors with different names (Yochelson & Samenow 1976; Walters 2002). However, two are particularly relevant for understanding barriers attitudes towards altruism among regular people.

IX. Defensive Cognitive Distortions Characteristic of Criminals: Mollification

Perhaps the most common distortion among criminals is termed “mollification”, which Walters (2002) defines as “Justifying, rationalizing, making excuses or externalizing responsibility for criminal actions” (p. 57). Mollification might be considered the father of all criminal distortions because it encompasses virtually every other criminal thinking error. In this manner, it is analogous to repression among defensive operations identified by psychoanalysts (A. Freud 1936).

A common example of mollification is found among bank robbers who assert that robbing banks is not really stealing because the bank’s assets are insured. Insurance companies, by their nature, assume risks, and therefore paying claims is simply part of their business. The bank robber dismisses the fact that he is leaving the bank with someone else’s money that he has taken by intimidation or force, instead claiming that he is operating within an insurance system designed for such occurrences; he mollifies. This explanation permits him to rob without guilt.

Another example of mollification was articulated in response to New York’s “Central Park Jogger” who was brutally beaten and raped (Wolf 1989) while jogging through the park. He asserted that she was jogging in a dangerous area and should not have gone there. He stated, “It was like she committed suicide”. Common sense would dictate that one avoid dangerous areas, but to place culpability upon her, rather than the assailants, is an example of Mollification. In essence, he is arguing that traveling in a dangerous area eliminates the culpability of perpetrators of violence, and instead places it upon the victim. The criminal “reasons”, “She knew it was a dangerous area, so I can do what I want”.

To understand the central park jogger’s fate in this manner allowed the speaker to avoid guilt and anxiety. There is no guilt but her own, and she paid for it dearly; thus justice was realized. Moreover, his anxiety was attenuated given that her actions led to her fate; therefore, to avoid a similar fate himself, he simply has to avoid her actions. To suggest that her fate was random or could not have been avoided renders everyone vulnerable, and would engender anxiety too uncomfortable to tolerate.

X. Defensive Cognitive Distortions Characteristic of Criminals: Absolutes and Cut-Off

Another common defensive cognitive distortion is “Absolutes” or more accurately “All or Nothing Thinking” (ANT) (Samenow 2008). As its name

suggests, rather than permitting shades of gray when understanding a complex world, ANT bifurcates reality into discrete categories, a model rarely describing reality with much accuracy. Absolutist language such as “all”, “always”, or “never” often signifies ANT.

Like other cognitive defenses, criminals commonly employ this mode of thinking to reduce their guilt or anxiety. Commonly criminals will vehemently assert that all police officers and politicians are corrupt. This assertion permits justification of criminal behavior because, the criminal “reasons”, “If even the police and elected representatives are corrupt, how could my actions be reprehensible given that those who should be models of society act similarly (guilt reduction)?” ANT also permits the criminal to feel more comfortable with his own failures (anxiety reduction). It permits him to blame society for his failings rather than himself, thereby relieving him of the anxiety his failures would engender were they owned rather than projected. It also permits him to maintain his anger, which he may find empowering, rather than confront his own inadequacies and powerlessness.

ANT gives rise to a cognitive and behavioral interplay called the “criminal cut-off”, which Walters (2002) defines as “Rapid elimination of common deterrents (fear, sanctions) to crime.” (p. 56). Using ANT as a cognitive foundation, when angry, discouraged or fearful, criminally minded people will sometimes utter “fuck-it” as the prelude to dismissing all rational considerations impeding a desired course of action. This propensity rests on ANT in that the criminal “reasons” that because he already feels bad, or has encountered obstacles, he might as well act as he wishes, dismissing the fact that his actions will multiply his problems. In essence, the game has been lost; therefore, further mistakes, or criminal behavior, of any type cannot affect the outcome and I may as well do as I please. This is ANT.

To summarize, empathy connects humans such that their identities interpenetrate. Strictly speaking, to characterize an individual as an independent entity is a phenomenological and empirical mistake that misunderstands human consciousness. The interpenetration of selves gives rise to love, friendship and community, as well as anxiety and guilt. Empathy thereby creates the conundrum of how to maintain its desired consequences while eliminating, or at least diminishing, its negative ones. To understand one solution to this conundrum criminal psychology and defensive cognitive distortions were examined. Using this background, barriers attitudes among regular citizens become more comprehensible.

XI. Defensive Distortions Examined: Magnitude View and You Can’t Help Them All

Recall that the “Magnitude View” (MV) and “You Can’t Help Them All” (YCHA) assert that third world poverty is so vast and complex that useful intervention is impossible. Indeed, the scale of the suffering defies comprehension. Data from the World Bank, which defines extreme poverty as income insufficient to meet needs for health-care, food, clean water, medical care and education, indicate that 1.4 billion people subsist without these necessities (Chen and Martin 2008); 1.4 billions people “live” on less than \$1.25 per day.

Commonly, affluent people wonder about the purchasing power of this sum in impoverished countries. We know how little it could buy in the first world, but perhaps it buys more in other countries? This is a fair question. The World Bank computes \$1.25 per day based upon a daily consumption of goods and services comparable to those that could be purchased in the United States for this sum (Chen and Martin 2008). Certainly, any effort to substantially improve the lot of 1.4 billion impoverished, and often sick, malnourished, and illiterate people leads to despair. This is the empirical basis for MV.

However, MV can be examined from another perspective. Consider that in 2008 alone 3.4 million people in the most affluent nations died of cancer or cardio/cerebrovascular disease (World Health Statistics 2011). Now imagine that the United Nations began discouraging aspiring doctors in the developed world from pursuing residencies in cardiology, oncology and neurology because these diseases are so prevalent and complex that they probably cannot be cured. Would anyone consider this a rational course of action? Would those asserting MV transfer their logic to the epidemic of vascular disease and cancer that kills the majority of the first world’s citizens?

Perhaps a personal example might reveal the distorted framing of the problem of extreme poverty entailed by MV, and in particular YCHA. Imagine you go to a physician for a suspicious lump in your neck. The physician performs a biopsy, and confirms you have cancer, but refuses to treat you. He asserts that in the richest nations alone over 1 million people die annually of cancer (World Health Statistics 2011), indicating the disease is epidemic, and therefore cannot be adequately addressed. He cannot cure everyone, so good luck and good-bye. Would this be considered rational?

The dubious framing of the problem by MV and YCHA entails failing to acknowledge that each person is an end in himself, rather than simply a means. Specifically, each person is NOT a means towards eradicating all poverty, or curing cancer or vascular disease in its entirety, such that each person’s cure is only valuable as it pertains to a total population cure; instead each life improved or saved is valuable in itself.

To return to our hypothetical cancer patient above, if every person who consulted that particular physician died rather than achieve a cure, would the cure achieved by our patient would be any less meaningful to her or her family? Can anyone really imagine seeing a physician for a serious illness and refusing a cure for oneself until the doctor can also cure all of his other patients? This is the type of reasoning asserted by MV and YCHA. How do thoughtful people assert such a logically unsound position with respect to third world poverty as if it is self-evident? To answer this question we must examine psychology.

The problem with MV and YCHA is that it employs a thinking error described above; it is all or nothing thinking (ANT). It asserts that if you cannot help all the people there is no value in helping any of the people. Curiously, this line of reasoning is never asserted among professional and lay helpers in affluent nations. Requests for dental, medical and psychological care, financial guidance, education and so on are never rejected on grounds that everyone cannot be helped so no one will be helped, which is the ANT that is asserted as the reason for inaction in the face of extreme poverty. But now the question shifts away from why intelligent affluent people assume obviously unsound arguments regarding charity for the extreme poor, to why to ordinary citizens assume thinking patterns commonly used by criminals?

That the MV contains ANT is almost certainly not accidental; to the contrary, when expressed, there is usually a subtle, yet discernible, investment in its correctness. Rather than being blandly stated and rued, a certain energy usually animates the speaker. This investment signifies the defensive purpose the view serves; it must be asserted because of its psychological utility. It reduces anxiety and guilt, which is why it resembles criminal thinking patterns.

Remember that by way of empathy our consciousnesses interpenetrate one another. Thus, to the extent that we are exposed to the suffering of others we will feel anxiety and/or guilt. The ANT contained in MV and YCHA reduces guilt by framing the problem in a manner that renders one powerless; once one is powerless, there can be no responsibility, and therefore no guilt for failing to act. Significantly, those asserting MV are not genuinely indifferent; instead the assertion of MV reveals the empathy and guilt they are defending against by means of a defensive cognitive distortion.

XII. Defensive Distortions Examined: Help At Home First

A close cousin of the Magnitude View (MV), Help At Home First (HAHF) objects to sending money to the extreme poor because our first obligation is to those in our own country. Why send money abroad when local needs are so great? It is important to note that responsible charity of any kind should never be discouraged. Accordingly, those whose needs for charitable giving are most deeply met by giving locally should be encouraged and supported.

However, the assertion by citizens in the developed world that charity should be directed at home usually contains an implicit assertion of parity of need. It claims that local needs are equally urgent, and sending money abroad somehow fails to acknowledge, indeed neglects, these needs. Certainly, peoples in the developed world, like all peoples, have tremendous needs. In the United States for example, family discord and divorce, substance abuse, chronic disease, and violence are epidemic, and rightly deserve attention. However, none of these problems are economic; none are problems of extreme poverty; none admit of easy solutions based upon increased funding.

Indeed, there is barely an American alive who has no access to education, health care, clean water, housing or sufficient food. To the contrary, not only is education free, it is compulsory; not only is there enough food, there is an obesity epidemic; even prisoners have basic health care; no one voluntarily lives without shelter; and one is hard pressed to find an American anywhere who has been sickened from drinking the water. Moreover, research indicates that of 37 million Americans classified as “poor” by the US government, 80% have air-conditioning; nearly 75% of such households own a car; 97% of households have a color TV; 62 % have cable TV or satellite reception; and 89% have a microwave oven. In fact 43 % of “poor” households own their own home (Rector 2007). On what grounds does an educated person in the information age assert that domestic American problems are comparable to those of the 1.4 billion who live in extreme poverty?

Remember that the objection embedded in HAHF is some type of protest that sending money abroad is insensitive, or even offensive, because it ignores local problems. In essence, people object that sending money abroad ignores how hard life is in the first world. This objection has truth to it; life in the developed nations is hard. But life everywhere is hard; life is just plain difficult. But if we acknowledge how hard it is in the first world, how much harder must it be without education, food, clean water, medical care or adequate housing? How much harder must it be living on \$1.25 per day?

This erroneous assertion of parity is an example of mollification. Again, we must ask: Why would ordinary citizens adopt a thinking pattern characteristic of criminals? The answer again lies in the psychology of empathy. Affluent people purposely distort reality via mollification with respect to world poverty for the same reason that criminal use mollification: it reduces guilt born of empathy. Specifically, mollifying using HAHF permits the affluent to focus on their own personal concerns more heavily than upon the troubles of others, because they are of a relatively equivalent magnitude, and of course our first obligation is to ourselves. Like all mollifications, it diminishes responsibility and thereby attenuates guilt, which is engendered by empathy.

Because of our own difficulties, we are capable of experiencing, via empathy, the difficulties of others. If our own obstacles challenge us, imagine how much greater would be our distress were we to acknowledge the magnitude of oppression experienced by the extreme poor. To avoid being overwhelmed we assert parity between the needs at home and those abroad. We mollify.

XIII. Defensive Distortions Examined: Responsibility Position

Another barrier belief to third world charity is the Responsibility Position (RP). Remember that RP holds that affluent persons in the developed world have no obligation to assist the extreme poor. Instead it is the obligation of those who live in those societies to solve their own problems. Embedded within this position seems to be a premium on holding people accountable for their actions. It contains within it the oft noted Western assertion that we make our own bed and then we lie in it. In this context the extreme poor as individuals, their governments and/or their leaders, have created the circumstances of their lives and reap the benefits; it is no one’s responsibility but their own.

Insisting that we are each responsible for our own actions is a powerful philosophy with impressive results. But it rests upon the assumption that people have the skills and resources to make something of their lives. In a context of sufficient skills and resources, failure to do so reveals the weakness of character that RP protests against, and explicitly rejects as an obligation. In this context, RP is clearly the soundest philosophy on which to build a society.

However, it is precisely this context (skills and resources) that is absent in societies of extreme poverty. The extreme poor have been without this context for generations, perhaps forever. Return for a moment to living on \$1.25 per day without clean water, medical care, schooling or adequate food. How many people anywhere can cobble together a successful life in such circumstances? And while some very few adults may be able to do so, how does one insist that children are responsible for themselves in such a context? A hypothetical example can clarify the distorted moral calculus asserted by RP.

In the first world, the nuclear family is usually viewed as the fundamental micro-social unit, just as the nation state is viewed as the fundamental macro-social unit. Imagine that the single father living next door is mentally ill and regularly beats and terrorizes his children. According to the logic asserted by RP, no one would have any responsibility to intervene to help the children because it is the responsibility of the family to solve its own problems. Of course, many would object to such a denial of responsibility by asserting that the children cannot solve their problems because they lack the skills and resources; they are victims powerless to change their situation. Though the impetus to act in this example is more compelling because of its geographical proximity, the moral logic is no different than that pertaining to the extreme poor. Can this position be deemed “moral” in any conventional sense of the term?

Though RP is weak from a rational perspective, it is very powerful as a psychological defense. Indeed, its power is noted by Lerner (1980) whose “just world” theory asserts that people are motivated to believe others have either earned their deserts or incurred their own punishments; the world is “just”. This is mollification. Why do regular citizens adopt this criminal thinking error vis-à-vis the extreme poor?

As noted previously, the guilt created by empathy for the extreme poor who live far away, and represent an abstraction, can be overcome by mollifying, by asserting RP. However, no amount of mollifying can surmount the cries of terrorized children next door. Logically speaking the cries of the extreme poor are no different; emotionally, empathically if you will, they are made different by geography that permits mollification to succeed.

Like other philosophical positions that are most usefully understood as psychological defenses, RP often contains a note of psychological investment on the part of the purveyor. An example, is Jan Narveson’s article entitled, “ ‘We Don’t Owe Them a Thing!’ A Tough-minded but Soft-hearted View of Aid to the Faraway Needy” (Narveson 2003). How often does one find an academic paper whose title contains a protest against an obligation the author claims does not exist? This is not dispassionate philosophy, but motivated psychology.

Moreover, RP contains within it ANT. By holding all people in poor societies equally responsible, including children, it conceives of society as a monolithic unified entity. However societies are comprised of individuals. To assign blame collectively is ANT that renders all guilty of irresponsibility, which serves to reduce guilt and anxiety among those who fail to act; without doing so one would be tacitly permitting others to be victimized. After all, if the entire society is irresponsible, the consequences of their choices justly fall upon them. However, to speak of an entire society as being responsible, as if it is a single entity, undercuts the very notion of personal responsibility that RP champions.

Even if one claims that adults are capable of living a decent life under the extreme poverty conditions described, how does one dismiss the suffering of children? One could argue that the children are the responsibility of the adults. Though unfortunate that they are cared for by irresponsible adults, it is ultimately their parents who are to blame. Does this argument seem plausible for the terrorized children living next door?

XIV. Defensive Distortions Examined: Logical Consequences

The Logical Consequences position (LC) might be best understood as an elaboration of RP. In its strong form LC asserts that extreme poverty and its consequences are part of a feedback loop operating between humans and their environment such that poverty is engendered by the environment's inability to sustain human life at a certain population. For example, insufficient food and clean water are a natural consequence of too many people relative to available resources. The solution would then be to limit the number of people living within any specific geographic region. Nature does this through famine. Moreover, if the natural environment cannot sustain the population currently, injecting resources so that people continue to live, and then reproduce, risks an even larger catastrophe once assistance can no longer be sustained. In essence the ratio of resources to people will become even more precarious and ultimately result in greater tragedy.

LC rests upon the well known Malthusian argument that populations grow faster than available resources, eventually leading to catastrophic shortages. Certainly, the earth's resources are finite, and as such its capacity to sustain human life has limits; this is undeniable. However, to suggest that famine during the past 50 years has been due to human populations exceeding the earth's limits is at variance with the facts, which indicate that food shortages in the twentieth century, when human populations have been at their historic highest, have been due to episodic disasters such as political crises, wars, corrupt and dictatorial governments, genocides and droughts (Sen 1983; Devereux 2000). Indeed, were famines due to unchangeable limits in the earth's capacity, they would be chronic and increasing as the world's population increases, which is exactly what we do not observe (Devereux 2000). On the contrary, India and China have reduced the size of their hungry populations significantly in the last 30 years despite enormous population growth (Devereux 2000). Given these facts, it is hard to argue that food scarcity and malnutrition are due to a natural law operating through a feedback loop.

While it is true that almost any problem of scarcity can be relieved by reducing a population, it does not follow that all problems of scarcity are created by overpopulation. It has been readily established that there is more than enough food to feed the world's population (Food and Agriculture Organization 2002). Indeed, even if famines emerged because populations exceeded our current food production, they could be remedied by consuming as food the grains fed to livestock to produce meat. For example, in 2007 756 million tons of grain were fed to livestock rather than humans (Food and Agriculture Organization 2008), and in 2009 in the United States alone, over 100 million tons of corn were converted into bio-fuel, enough to feed 330 million people (Larsen 2010).

But even if we were approaching the earth's limits (however that would be determined), since when does a fact of nature become a moral prescription? How did this (rather dubious) "fact" transform itself into a "value"? Has anyone used the logic of natural feedback loops to seriously propose that we discontinue inoculations against infectious diseases or permit those unable to care for themselves due to disability to perish? Isn't saving the sick and disabled subverting the natural feedback of biological systems? Doesn't saving them risk they will reproduce and create more sick and disabled people by passing along genes that are less likely to be healthy? These would hardly appear as humane policy prescriptions.

Curiously, during the worldwide financial meltdown and high unemployment of the past several years, no one has suggested that unemployed workers in the first world should simply perish because the economic feedback loop is in play, and apparently, the balance of workers relative to jobs must be restored. No one seriously claims that the reason for unemployment is simple over-population, though significant population reduction would certainly ameliorate the crisis. On the contrary, a host of variables associated with insufficient regulation and risky financial practices are widely believed to have caused the crisis, a confluence of events arguably not much different than episodes of hunger and famine overseas caused by political corruption and wars. Why do thoughtful, compassionate and intelligent people in affluent nations consider first world unemployment, which amounts to little more than an inconvenience for the affected, to be a crisis, and then blandly accept the deaths of 27,000 young children daily due to extreme poverty as a fact of nature to be accepted?

Asserting that there is in operation some natural law regarding the relationship between humans and their environments virtually compels inaction, because intervening would contravene a process larger than all of us, and whose violation would lead to greater future suffering. This is mollification. Why do ordinary citizens begin thinking like criminals?

LC eliminates responsibility and reduces guilt and anxiety born of empathy. It permits us to assert that the plight of the extreme poor can be avoided by acting in accordance with natural laws, and virtually prohibits intervention by labeling it as short-sighted or even injurious. However, LC fails to acknowledge that there is no action any individual has taken, or could take, to avoid being born into extreme poverty. Each of us has no control over where we are born, an act of fate that is perhaps the most critical determinant in the outcome of anyone's life. Acknowledging the capricious nature of life induces anxiety. Though one's birth was long ago a fait accompli, other vicissitudes of life are no less random; this renders us all vulnerable. To avoid this anxiety we devise a tortured conception of responsibility that keeps us safe from a similar fate.

XV. The Puzzle Solved

This discussion sought to understand the insufficient action of the affluent on behalf of the extreme poor. How can the relative indifference among the rich towards the emergencies of the poor be explained, particularly when saving lives costs less than an American typically spends each year on soft-drinks? While self-absorption and indifference probably explain a portion of the inaction, several commonly proffered attitudes, so-called barrier attitudes, were also examined.

These attitudes were found to be so weak from a logical perspective that explanations for their force were sought in the psychology of empathy. Analysis of empathy revealed its many effects, to include love, community, anxiety and guilt. Armed with this understanding, barrier attitudes were examined and found to contain thinking errors commonly found among criminals, errors whose chief purpose is to reduce anxiety and guilt, and which appear to be the explanation for these logically implausible postures. Barrier attitudes are one method for resolving the tension created by empathy. They allow for empathy's positive effects of love and community while reducing its liabilities of anxiety and guilt.

Thus, the lack of ameliorative action towards the extreme poor, when expressed by the attitudes noted above, appears to be due NOT to indifference.

On the contrary, it appears to be a reaction to empathy, caring if you will, a way to protect against the suffering compassion inevitably produces. So conceived, the barrier attitudes examined (MV, YCHA, HAHF, RP, LC) are a solution to an internal conflict for those who hold them; they are suffering in response to their empathy for others. While barrier attitudes are one method for resolving the tension created by empathy, these defensive cognitive distortions are not precise surgical instruments; rather they are blunt in their effects, such that their attenuation of anxiety and guilt also risks reducing connection to others generally rather than specifically. Stated plainly, though defensive cognitive processes reduce our dysphoria, they also reduce our connectedness, which is a principle foundation for happiness. They have side-effects; they are not free. For most of us there is a better solution to empathy's conundrum.

Rather than deploying defensive cognitive distortions, most of us would be better off embracing our empathy in all of its ramifications. Of course, fully embracing empathy carries risks. However, it also carries enormous benefits. Recall that empathy is the basis for love and community, and that its expansion carries the possibility of deepening these experiences. Often, exposure to the extreme poor, and others in need, gives rise to greater connection and satisfaction than would have otherwise been attained.

This is exactly the experience reported by Edmund Hillary, Paul Farmer, and other philanthropists who did not plan on assuming such a role, but once exposed to the poor made it their life's work to assist them. They did so not in response to an abstruse ontological argument or some grim fidelity to duty. They did it because of the love and joy it brought to their lives. Rather than fearing their empathy and defending against its consequences, they enlisted it, and found it to be the vehicle for their happiness. In the process, they improved and saved countless lives. Could anyone ask for a better solution?

References

- Abdullah, S., Schellenbert, J., Nathan, R., Mukasa, O., Marchant, T., Smith, T., and Lengeler, C. (2001). Impact on malaria morbidity of a programme supplying insecticide-treated nets in children aged under two years in Tanzania: community cross-sectional study. *British Medical Journal*, 322, 270-273. http://www.muhef.or.tz/news/index.php?eID=tx_mm_bccmsbase_zip&id=6334172274e445845eaa43
- BBC.com. (2006, July). "Live Aid 1985: How it all happened". <http://www.bbc.co.uk/music/thelive8event/liveaid/history.shtml>
- Botvinick, M., Jha, A., Bylsma, L., Fabian, S., Solomon, P. & Prkachin, K. (2005). Viewing facial expressions of pain engages cortical areas involved in the direct experience of pain. *NeuroImage* 25, 312-319. <http://www.princeton.edu/~matthewb/Publications/neuroimage2005.pdf>
- Burns, D. (1980). *Feeling good: the new mood therapy*. New York: Morrow.
- Chen, S. & Martin R. (2008). The developing world is poorer than we thought, but no less successful in the fight against poverty. Development Research Group, World Bank. Washington DC. http://siteresources.worldbank.org/JAPANINJAPANESEEXT/Resources/515497-1201490097949/080827_The_Developing_World_is_Poorer_than_we_Thought.pdf
- Clark, D., Beck, A. & Alford, B. (1999). *Cognitive theory and therapy of depression*. USA: John Wiley and Sons, Inc. CNN.com. (2005, July 6) "Live Aid 1985: A Day of Magic". http://articles.cnn.com/2005-07-01/entertainment/liveaid.memories_1_tv-live-aid-geldof?_s=PM:SHOWBIZ
- Descartes, R. (1996). *Discourse on the method and meditations on the first philosophy*. In Weissman, D. (Ed.) New Haven. Yale University Press.
- Devereux, S. (2000) Famine in the twentieth century. Institute of Development Studies Working Paper 105. Brighton, UK. <http://www.ids.ac.uk/files/wp105.pdf>
- Easterly, W. (2006). *The white man's burden*. New York: Penguin Press.
- Ellis A. & Dryden, W. (1997). *The practice of rational emotive behavior therapy*. New York: Springer Publishing Company Inc.
- Food and Agriculture Organization of the United Nations. (2002). *World agriculture: towards 2015/2030 summary report*. Rome. <ftp://ftp.fao.org/docrep/fao/004/y3557e/y3557e.pdf>
- Food and Agriculture Organization of the United Nations (2008). *Crop prospects and food situation*. No. 2, April. <http://www.fao.org/docrep/010/ai465e/ai465e04.htm>
- Freud, A. (1936). *The ego and the mechanisms of defense*. New York: International Universities Press, 1966.
- Freud, S. (1923). *The ego and the id*. Standard Edition, 19, 13-59.
- Gallese, V. (2001). The shared manifold hypothesis: from mirror neurons to empathy. *Journal of Consciousness Studies*, 8, 33-50.
- Hudson Institute. (2006). Index of global philanthropy. Rollins, K. (Ed.). Washington DC. <http://gpr.hudson.org/files/publications/GlobalPhilanthropy.pdf>
- Iacoboni, M. & Dapretto, M. (2006). The mirror neuron system and the consequences of its dysfunction. *Nature Reviews Neuroscience*, 7, 942-951. <http://perso.ens-lyon.fr/annececile.boulav/UE%20biblio/pdf/7.5.Iacobini.NatureRev06.pdf>
- Larson, J. (2010, January 21). U.S. feeds one quarter of its grain to cars while hunger is on the rise. Earth Policy Institute: Washington DC. http://www.earthpolicy.org/data_highlights/2010/highlights6#
- Lerner, M. (1980). *The Belief in a just world: a fundamental delusion*, New York: Plenum Press.
- Moyo, D. (2009). *Dead aid: why aid is not working and how there is a better way for Africa*. New York: Farrar, Staus and Giroux.
- Narveson, J. (2003). We don't owe them a thing! A tough-minded but soft-hearted view of aid to the faraway needy", *The Monist*, July. http://findarticles.com/p/articles/mi_hb1364/is_3_86/ai_n29035250/
- Nothing But Nets. <http://www.nothingbutnets.net>
- Peabody, J., Taguiwalo, M., Robalino, D. & Frenk, J. (2006). Improving the quality of care in developing countries. In Jamison, D., Breman, J. & Measham, A. (Eds.) *Disease control priorities in developing countries*. World Bank: Washington DC. <http://www.ncbi.nlm.nih.gov/books/NBK11790/>
- Rand, Ayn. *Atlas shrugged*, New York: Signet, 1957.
- Rector (2007). How poor are America's poor? Examining the "plague" of poverty in America. The Heritage Foundation. August 27, Report No.

2064. <http://www.heritage.org/research/reports/2007/08/how-poor-are-americas-poor-examining-the-plague-of-poverty-in-america>
- Rizzolatti, G. & Craighero, L. (2004). The Mirror Neuron System. *Annual Review of Neuroscience*, 27, 169-192.
- Samenow, S. (2008, November). The all or nothing thinking of the criminal. *Concept of the Month*. http://members.cox.net/samenow/conceptnovember_08.html
- Sen, A. (1983) *Poverty and famines*. USA: Oxford University Press.
- Shuftan, C. (2000, November 6). *A story to be shared: The successful fight against malaria in Vietnam*. Hanoi, Vietnam: World Health Organization. <http://www.afonets.org/files/malaria.pdf>
- UNICEF/WHO. (2009). *Diarrhoea: Why children are still dying and what can be done*. New York. http://whqlibdoc.who.int/publications/2009/9789241598415_eng.pdf
- Human Development Report 2000: Human Rights and Human Development*, United Nations Development Programme. New York: Oxford University Press. <http://hdr.undp.org/en/reports/global/hdr2000/chapters/>
- Human Development Report 2002: Deepening Democracy in a Fragmented World* United Nations Development Programme. New York: Oxford University Press. <http://hdr.undp.org/en/reports/global/hdr2002/chapters/>
- Walters, G. (2002). *Criminal belief systems*. USA: Praeger Publishers.
- Wardlaw, T., Johansson, E. & Hodge, M. (2006). *Pneumonia: The forgotten killer of children*. The United Nations Children's Fund/World Health Organization. http://whqlibdoc.who.int/publications/2006/9280640489_eng.pdf
- Wicker, B., Keysers, C., Plailly, J., Royet, J., Gallese, V. Rizzolatti, G. (2003). Both of us disgusted by *my* insula: The common neural basis of seeing and feeling disgust". *Neuron*, 40, 655-664. <http://www2.unipr.it/~gallese/Wickeretal2003.pdf>
- Wolf, C. (1989, April 21). Youths rape and beat central park jogger. *The New York Times*. <http://www.nytimes.com/1989/04/21/nvregion/youths-rape-and-beat-central-park-jogger.html>
- World Health Organization (2010). *World malaria report 2010*. Geneva, Switzerland: World Health Organization. http://www.who.int/malaria/world_malaria_report_2010/worldmaliareport2010.pdf
- World Health Organization (2003). *World Health Report 2003: Shaping the Future*. Geneva, Switzerland: World Health Organization. http://www.who.int/whr/2003/en/whr03_en.pdf
- World Health Statistics 2011. Geneva, Switzerland: World Health Organization. http://www.who.int/whosis/whostat/EN_WHS2011_Full.pdf
- Yochelson S. & Samenow, S. (1976). *The criminal personality: Volume 1: A profile for change*. New York: Jason Aronson.

About the Author

Doug Contri earned his doctorate in clinical psychology from Widener University's Institute for Graduate Clinical Psychology. Since 1996 he has worked for the Federal Bureau of Prisons in the United States, providing psychological services to inmates, and has coordinated comprehensive drug, alcohol and criminal rehabilitation programs.

A Publication of:



