



Prediction of Psychological Well-being based on Empathy among Vietnamese School Counselors

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ABSTRACT

Empathy enhances an individual's self-image and also helps to maintain relationships which add up to the well-being of an individual. Empathy and psychological well-being have an influence on school counselors' job performance in their schools. The aim was to examine the relationships between empathy and psychological well-being in 53 Vietnamese school counselors (19 males and 34 females) in Ho Chi Minh City in 2018. To achieve this goal, multiple linear regression analyses were done to see the independent effects of explanatory variables and t-test for independent samples were used for gender comparisons. Participants completed 2 measures, the Interpersonal Reactivity Index (IRI) and Mental Health Continuum-Short Form (MHC-SF). Results showed that personal distress negatively predicted psychological well-being. Neither perspective taking fantasy nor empathic concern predicted psychological well-being. This result supports those found in previous studies and suggests that personal distress, an effective component of empathy, plays an important role in the improvement of psychological well-being. We also found females reported lower psychological well-being than males. Our findings may explain the previous research finding that gender discrimination has an impact on the psychological well-being of females at work. The results of this research are necessary for Vietnamese school counselors to have a better understanding of their mental health.

Keywords: Empathy, School counselor, Psychological well-being

INTRODUCTION

School counselors generally are employed in positions that entail working in a variety of professional roles with students and within school systems [1,2]. Counselor well-being is an important contributor to the effectiveness of the therapeutic relationship [3,4]. When counselors neglect the importance of their well-being, they may become vulnerable to disturbing issues in their personal lives (e.g., marital issues, family crises) and at work (e.g., relationship problems with coworkers, clients in crisis) [5].

A link between empathy and psychological well-being has already been reported in adolescents [6], and students [7-11]. Only one study reported on psychology students [11]. A study of 30 third-year psychology students was conducted at the Ukrainian Engineering Pedagogics Academy, a direct correlation connection between empathic abilities and psychological wellbeing of future psychologists was found. It is showed that with the increase of a level of empathy, indicators of psychological well-being also have to increase. Empathy is a central component of normal social functioning, providing a foundation for enhancing psychological well-being, and vice versa [10-12].

Over the years, various self-report measures of empathy have been developed. The Interpersonal Reactivity Index (IRI) is one of the most widely used questionnaires for measuring individual differences in empathic tendencies [13,14]. Its popularity is attributable to several desirable qualities. First, this scale is the only one that is based on a multi-dimensional conceptualization of empathy. Second, the IRI is regarded as the most comprehensive measure of self-reported empathic dispositions. Finally, this scale is relatively short and thus simple to administer [15]. This questionnaire consists of the following four subscales: Perspective taking (PT); Fantasy scale (FS); Empathic concern (ES); and Personal distress (PD) [13]. Psychological well-being is an individual's overall assessment of life quality, which can be affected by work-to-leisure conflict [16]. Carol Ryff has conceptualized psychological well-being as

consisting of 6 dimensions: autonomy, environmental mastery, personal growth, positive relations with others, purpose in life, self-acceptance [17]. Drawing on the work of Ryff and others, Keyes developed the Mental Health Continuum-Short Form (MHC-SF) questionnaire, which consists of 14 items that were chosen as the most prototypical items representing the construct definition for each facet of well-being. Total 3 items were chosen (happy, interested in life, and satisfied) to represent emotional well-being, 6 items (one item from each of the 6 dimensions) were chosen to represent psychological well-being, and 5 items (one item from each of the 5 dimensions) were chosen to represent social well-being [18]. However, the application of such scales in measuring the relationship between empathy and psychological well-being in Vietnamese school counselors is still limited.

This research aims to fill this gap. Our research is conducted to empirically explore this relationship in Vietnamese school counselors. In view of the basic aim of the research, the following problems have been set:

- Is there a statistically significant relationship between psychological well-being levels and empathy levels of Vietnamese school counselors?
- Do empathy levels significantly predict psychological well-being levels of Vietnamese school counselors?

In accordance with the aim and the problems of the research, the following null hypotheses were tested:

- H_01 : There is no significant relationship between psychological well-being and empathy levels of Vietnamese school counselors
- H_02 : There is no significant difference between the psychological well-being of male and female school counselors

MATERIALS AND METHODS

Participants

The convenience sampling method was used to recruit school counselors who volunteered to help with the study and administer the questionnaire. This questionnaire study refers to a sample of school counselors from Ho Chi Minh City (HCMC), Vietnam. The city has only 120 “specialized”, or qualified, school counselors [19]. The questionnaire instrument was distributed to 120 school counselors in HCMC, of which 53 questionnaires were returned completely, with a 44.16% return rate, which exceeds the 30% response rate which most researchers require for analysis [20]. The sample of this research was drawn from 53 respondents who completed the survey instrument.

All participants were provided informed consent after receiving an explanation of the purpose of the research. The research was approved by the ethics committee of the Ho Chi Minh City University of Education. There were more males (64.2%) than females (35.8%) among the 53 Vietnamese school counselors who were surveyed. Of these, the majority of the school counselors have had 1-3 years of experience (37.7%), 32.1% had less than one year of experience, 20.8% have had over 5 years of experience, and 9.4% had 3-5 years of experience.

Measures

The Mental Health Continuum-Short Form was used to assess the level of positive mental health [21]. Items in the MHC-SF are rated using a 6-point scale from 0 (never) to 5 (every day). The questionnaire consists of 14 items representing the 3 dimensions of well-being (items 1~3: Emotional Well-being (EWB), item 4~8: Social Well-being (SWB) and item 9~14: Psychological Well-being (PWB)). Each item of PWB reflects 6 areas of psychological well-being: autonomy, environmental mastery, personal growth, positive relationships with others, purpose in life and self-acceptance. Each item of SWB reflects 5 areas of social well-being [22]: social integration, social contribution, social coherence, social actualization, and social acceptance. The McDonald's ω coefficient of the Vietnamese version of the MHC-SF score has been reported to be 0.73 [23].

The Interpersonal Reactivity Index was used to measure multiple dimensions of empathy [13]. The IRI consists of 28 items. It has 4 subscales, with 7 items measured on a 5-point Likert scale ranging from 0 (does not describe me well) to 4 (describe me very well). The total scores for each subscale range from 0 to 28. PT assesses the tendency to take the psychological point of view of others. The FS measures the tendency to get caught up in fictional stories and imagine the feelings and actions of fictitious characters in books, movies, and plays. EC assesses sympathy and concern for others. PD measures feelings of personal anxiety and unease intense interpersonal settings [13].

Statistical Analysis

Analyses were conducted using SPSS software (Version 22, SPSS Inc., Chicago, IL, USA). Only PWB subscale of the MHC-SF was used in this research. Relations between variables were analyzed by linear regression. First, the correlation between IRI subscales and PWB scores were calculated as a preliminary analysis. Second, analyzed by linear regression analyses were conducted using the individual scores of each IRI subscale as a predictor variable and PWB scores as a predicted variable. Third, an independent samples t-test was conducted to compare the PWB scores for males and females. A statistical threshold of $p < 0.05$.

RESULTS

Descriptive

Evaluated variables in the study were total scores from school counselor MHC-SF and IRI scale. Mean, standard deviation and Cronbach’s alpha values about these variables are shown in Table 1.

Table 1 Descriptive statistics for the samples

Variables	M	SD	α
Interpersonal Reactivity Index			
PT	16.83	3.08	0.52
FS	13.28	4.80	0.45
EC	17.39	4.11	0.42
PD	13.20	3.51	0.46
Mental Health Continuum-Short Form			
EWB	10.26	2.71	0.79
SWB	13.20	4.68	0.74
PWB	20.79	5.65	0.73

M: Mean; SD: Standard deviation; α : Cronbach’s alpha

The mean and standard deviation IRI subscale scores are as follows: PT (M=16.83, SD=3.08), FS (M=13.28, SD=4.80), EC (M=17.39, SD=4.11), and PD (M=13.20, SD=3.51). While the mean of PWB was found (M=20.79) with standard deviation (SD=5.65). Only PWB subscale of the MHC-SF was used in this research. The Cronbach’s alpha level of reliability for the subscales ranged from 0.42 to 0.79. According to Hair, et al., the acceptable Cronbach’s alpha level of reliability of an instrument must be 0.40 or higher.

Analytical

Table 2 shows the correlations between PWB and each subscale of empathy. There is only one significant correlation, which is a very large one, while the other three are not significant. Pearson correlation coefficients demonstrated non-significantly positive correlations ($p > 0.05$) between the PWB and each subscale of the IRI, with the exception of the PD subscale ($r = -0.60, p = 0.01$). This suggests no convergent validity evidence for the subscales of PT ($r = 0.25, p = 0.07$), FS ($r = -0.10, p = 0.46$), and EC ($r = 0.00, p = 0.97$).

Table 2 Correlations among the study variables (N=53)

Variables	PWB	PT	FS	EC	PD
PWB	1.00	-	-	-	-
PT	0.25	1.00	-	-	-
FS	-0.10	0.18	1.00	-	-
EC	0.00	0.38**	0.18	1.00	-
PD	-0.60**	-0.03	0.37**	0.28*	1.00

**Correlation is significant at the 0.01 level (2-tailed); *Correlation is significant at the 0.05 level (2-tailed)

A multiple linear regression analysis was performed with PWB as the dependent variable. Variables that were significantly correlated with PWB were entered as predictors in the respective regression analyses. Variables were tested for multicollinearity, and the regression models’ residuals were tested for normality, linearity, and homoscedasticity. No violations of the assumptions of multiple linear regression were found; VIF value was < 2.5 , and tolerance value > 0.40 [24]. Coefficients for the regression model are shown in Table 3.

Table 3 Multiple linear regression predicting psychological well-being (N=53)

Variables	B	SE	β	t	p-value
Constant	4.757	0.915	-	5.198	0.000
PT	0.326	0.265	0.151	1.231	0.224
FS	0.150	0.165	0.110	0.912	0.366
EC	0.145	0.187	0.097	0.773	0.443
PD	-1.267	0.244	-0.618	-5.188	0.000

B: Regression coefficient; SE: Standard error; β : Standardized regression coefficient; t: t-test statistic; p: Probability value

The regression model for PWB was significant, $F(4,48)=7.551$, $p<0.001$, and accounted for a moderate amount of variance, $R^2=0.386$. PD predictor was significant. PWB was negatively predicted by PD ($\beta=-0.618$).

In order to examine differences in PWB scores between males and females groups, an independent samples t-test was conducted (Table 4). Given a violation of Levene's test for homogeneity of variances, $F(1,51)=0.023$, $p=0.88$, a t-test assuming homogeneous variances was calculated.

Table 4 T-test result comparing females and males on psychological well-being

Variables	Female			Male			t-test
	M	SD	n	M	SD	n	
Psychological Well-Being	3.19	0.88	34	3.95	0.85	19	3.05**

** $p<0.01$; Note: M: Mean; SD: Standard deviation; n: Sample size

The results of this test indicated that there was a significant difference in the PWB scores between the 2 groups, $t(51)=3.05$, $p=0.004$. These results suggest that school counselors in the male group ($M=3.95$; $SD=0.85$) higher PWB score than school counselors in the female group ($M=3.19$; $SD=0.88$).

DISCUSSION

This research has provided evidence on the associations between empathy and psychological well-being among school counselors in Vietnam. As hypothesized in H_01 , there is no significant relationship between psychological well-being and empathy levels of Vietnamese school counselors. Based on the results of the regression analysis as in Table 3. H_01 was not fully supported, however, as PT, FS, and EC were not a significant predictor of PWB, and PWB score was negatively predicted by PD.

The findings suggested that PT, FS, and EC might not be the best ways to predict PWB, but scores on PD seem strong negatively related to PWB. This finding is congruent with previous studies in students and psychologists [8,25]. It means that school counselors who had higher personal distress scores perceived themselves as having less psychological well-being. This reconfirms the importance of the effective aspect of empathy for the improvement of psychological well-being as mentioned in the introduction. The effective component of empathy is associated with sharing emotions with others [26-28]. With regard to effective empathy, PD is generally considered as the one main possible vicarious emotional responses to others' misfortune [29,30]. PD is an aversive, self-focused emotional reaction (e.g., anxiety, worry, discomfort) to the apprehension or comprehension of another's emotional [31]. This suggests that high levels of school counselors' empathy have been associated with decreased personal distress along with increased psychological well-being.

As school-based mental health professionals, counselors work in schools to improve the lives of the students they serve. According to previous research by Gómez-Baya, et al., females reported lower psychological well-being than males [32]. Similarly, our study carried out in Ho Chi Minh City, it shows that there was a significant difference between males and females in the average of psychological well-being. This interpretation of our findings may explain the previous research finding that gender difference has an impact on the psychological well-being of females at work [32,33].

The present study is limited for a number of reasons. First, the sample size was quite small. Second, internal reliability for each scale of the IRI was not excellent. Future studies are therefore needed to reexamine the present findings. In addition, should search for the potential mediators that may contribute to the relationship between empathy and psychological well-being in the school contexts.

CONCLUSION

Results from the current research found that psychological well-being is negatively predicted by personal distress. These results support the importance of the effective aspect of empathy for the improvement of psychological well-being. To gain a better understanding of the relationship between empathy and psychological well-being, additional studies with larger samples are needed.

To the best of the authors' knowledge, this is the first research to examine the relationships between empathy and psychological well-being in Vietnamese school counselors. In addition to the very limited research in this aspect in Vietnam, the results of this research are necessary for Vietnamese school counselors to have a better understanding of their mental health

DECLARATIONS

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Conflict of Interest

The authors declared no potential conflicts of interest with respect to the research, authorship, and/or publication of this article.

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