

# Sympathy, empathy, and compassion: A grounded theory study of palliative care patients' understandings, experiences, and preferences

**Reference:** Shane Sinclair, Kate Beamer, Thomas F Hack, Susan McClement, Shelley Raffin Bouchal, Harvey M Chochinov and Neil A. Hagen  
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## Abstract

### Background:

Compassion is considered an essential element in quality patient care. One of the conceptual challenges in healthcare literature is that compassion is often confused with sympathy and empathy. Studies comparing and contrasting patients' perspectives of sympathy, empathy, and compassion are largely absent.

**Aim:** The aim of this study was to investigate advanced cancer patients' understandings, experiences, and preferences of "sympathy," "empathy," and "compassion" in order to develop conceptual clarity for future research and to inform clinical practice.

**Design:** Data were collected via semi-structured interviews and then independently analyzed by the research team using the three stages and principles of Straussian grounded theory.

**Setting/participants:** Data were collected from 53 advanced cancer inpatients in a large urban hospital.

**Results:** Constructs of sympathy, empathy, and compassion contain distinct themes and sub-themes. Sympathy was described as an unwanted, pity-based response to a distressing situation, characterized by a lack of understanding and self-preservation of the observer. Empathy was experienced as an affective response that acknowledges and attempts to understand individual's suffering through emotional resonance. Compassion enhanced the key facets of empathy while adding distinct features of being motivated by love, the altruistic role of the responder, action, and small, supererogatory acts of kindness. Patients reported that unlike sympathy, empathy and compassion were beneficial, with compassion being the most preferred and impactful.

**Conclusion:** Although sympathy, empathy, and compassion are used interchangeably and frequently conflated in healthcare literature, patients distinguish and experience them uniquely. Understanding patients' perspectives is important and can guide practice, policy reform, and future research.

### Strengths:

- First study to analyze all three constructs from the patients' perspectives
- Clear description of study design
- Relatively large sample size for qualitative research (n=53)
- Reported results using consolidated criteria for reporting qualitative research (COREQ)

### Weaknesses:

- Did not describe any trustworthiness issues
- Limited description of data analysis process
- Inclusion of multiple quotes from one participant (Patient 5)
- Restricted sample (65% women; 70% married; 72% college; technical or university education) which may limit representativeness of the sample and experiences
- Setting for participant recruitment not explicit

### Relevance to Palliative Care

The concepts of sympathy, empathy and compassion are integral components of the provision of quality care to palliative patients. The patients' preferences for empathy and compassion, in contrast to sympathy, and the detailed framework for differentiating among these three constructs, provide a solid foundation for health care provider communication in palliative care.