

Empathy and Intersubjectivity in Culture: From Studies of Young Children with Attention Deficit/Hyperactivity Disorder (ADHD)¹⁾

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Abstract

Drawing on studies of young children with Attention Deficit/Hyperactivity Disorder (ADHD) that I have conducted, I discuss in this article my developing ideas about empathy and intersubjectivity in culture. I begin by briefly explaining why I have studied young children with ADHD. I share some findings from a cross-cultural study of early childhood teachers' perspectives on ADHD that I conducted a few years ago. I then describe peer relations of children with ADHD based on both a review of relevant literature and an initial analysis of my current study on young children considered at-risk of being diagnosed with ADHD. I conclude with implications of these studies for reexamining the construct of empathy, building intersubjective pedagogy, and considering empathy and intersubjectivity in culture.

Keywords: empathy, intersubjectivity, ADHD, culture

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In this article I draw on my studies of young children with Attention Deficit/Hyperactivity Disorder (ADHD) to discuss my developing ideas about empathy and intersubjectivity in culture. The article is structured in four sections: First, I briefly explain why I have studied young children with ADHD. Second, I share some findings from a cross-cultural study of early childhood teachers' perspectives on ADHD that I conducted a few years ago. Third, I describe peer relations of children with ADHD based on both a review of relevant literature and an initial analysis of my current study on young children considered at-risk of being diagnosed with ADHD. Finally, I conclude with implications of these studies for reexamining the construct of empathy, building intersubjective pedagogy, and considering empathy and intersubjectivity in culture.

Why Study ADHD?

A little over 10 years ago, I conducted an ethnographic study of four U.S. early childhood teachers' cultural beliefs about teaching and learning (Lee, 2001). All four teachers were European-American women, lived in the Midwestern United States, and had 15-34 years of teaching experience. They were considered master teachers by parents and their colleagues. However, when asked to talk about their classroom children, all four teachers shared their concern about some children considered "unteachable." According to the teachers, these children were suffering from ADHD.

I asked the four teachers what would happen to those children with ADHD, if they were not treated properly. The following response by Anne, a kindergarten teacher, expresses a sentiment shared among all participating teachers:

I'm most concerned we would be turning out an adult person who's going to be *a load* somehow for our society. And because he was *terribly violent*, he will *hurt people* all the time, . . . he will grow up just laying people out. He could *end up in jail*, which costs us money. If he's *not earning money and being a productive member* of society, he's *costing*. . . . I would think that he will develop a way of thinking about himself as *a loser* rather than an achiever, that he . . . will always be *a troublemaker*, . . . I would be afraid that . . . he'll be *bad news*. That's what I see for him as an adult if he was not able to manage himself. (Lee, 2001, p. 300)

In the above interview transcript, I *italicized* alarming words that I heard from this teacher. Anne thought that a child with ADHD, if not getting proper treatment and intervention, would be a load for society and terribly violent. He would hurt other people and end up being in jail, costing tax money and not being a productive member. He would be a loser, a troublemaker, and bad news. This projection of the future life of an ADHD child growing up without proper intervention is antithetical to the stable, confident, positive, and success-oriented “independent self,” valued in middle-class European-American cultural contexts (Markus & Kitayama, 1991; Shweder et al., 2006).

I soon learned that diagnosis and pharmaceutical treatment for ADHD was of nationwide interest in the United States and that the topic frequently appeared in the popular press, the media, academic publications, and government reports. For instance, ADHD is considered the most commonly diagnosed behavioral disorder of childhood (Boyle et al., 2011; NIH Consensus Statement, 1998). The United Nations International Narcotics Control Board (2005) reported that 80% of the world’s production of methylphenidate, medication for ADHD, is consumed in the United States. The U.S. Center for Disease Control and Prevention (2010) also revealed that approximately 10% of children aged 4-17 were diagnosed with ADHD in 2007.

However, unlike other illness, ADHD does not have consistent clinical diagnosis, such as laboratory tests and neurological examinations. To date, the ADHD diagnosis heavily relies on subjective observation data provided by families, teachers, and health professionals. Singh (2002) explained that this lack of reliable diagnosis and “the inherent ambiguity of ADHD symptoms” (p. 360) challenge the accurate identification of children with ADHD.

As a former kindergarten teacher from Korea, I found the U.S. early childhood teachers’ concern about ADHD fascinating and yet foreign. I wondered: Would teachers in different cultures perceive the problem behavior differently? What would teachers in different cultures think about young children with ADHD and medication treatment? To investigate these questions, I conducted a cross-cultural study described in the next section.

A Cross-Cultural Study

For the cross-cultural study, I invited researchers in Denmark, Iceland, and Korea to examine early childhood and primary grade teachers' perceptions of children with ADHD in each nation (Lee & Neuharth-Pritchett, 2008). Although the Korean collaborator used both a survey and an interview (Hong, 2008), all researchers primarily used interviews with teachers for data collection.¹ For the U.S. portion of data collection, I invited 10 Southeastern teachers to the study (Lee, 2008). In this section, I briefly discuss differences between U.S. and Korean teachers' perspectives particularly relevant to the topic of this article.

When asked to describe behavioral characteristics of children with ADHD, the U.S. participants tended to emphasize those children's excessive movements and lack of attention, as shown in the interview with Michelle, a second-grade teacher, in the following interview transcript:

What I have seen from my [students] that have been diagnosed—they're generally constantly moving and have a great difficulty in focusing on the lesson that's at hand. . . . They can't do it, unless you sit right beside them. (Lee, 2008, p. 422)

Unlike the U.S. teachers, however, the Korean participating teachers discussed these children's lack of friendship as the most serious concern, as Jihyun, a kindergarten teacher, expressed:

The hardest part for children diagnosed as having ADHD is to form a friendship. I feel most . . . sad when sending them to the next grade. Their friendship with other children doesn't last. (Hong, 2008, p. 404)

Table 1 summarizes differences between the U.S. teachers and their Korean counterparts in their perspectives of children with ADHD. Overall, the U.S. teachers tended to be concerned about ADHD by focusing on its impacts on children's behavior and academic performance, while their Korean counterparts worried about ADHD in relation to children's friendships and

¹ Detailed discussions about research methods in each country are available in Lee and Neuharth-Pritchett (2008).

socio-emotional development. Although the U.S. participants regarded medication as effective treatment, the Korean teachers were unsure about the effect of medication. Instead, some Korean participating teachers utilized peer relationships as positive intervention and encouraged other typically developing children to see their assistance and support for a peer with ADHD as their responsibility (Hong, 2008).

Table 1. *Differences Between U.S. Teachers and Korean Teachers*

U.S. Teachers (Lee, 2008)	Korean Teachers (Hong, 2008)
Behavior > Socio-Emotion	Socio-Emotion > Behavior
Concerned about children's inability to control behavior and its negative impact on academic performance	Concerned about children's lack of friendships and its negative impact on the later adult life
Perceiving medication as effective treatment	Uncertainty about the effect of medication
	Helping other children see their assistance and support for a peer with ADHD as their responsibility

These differences between the U.S. participating teachers and their Korean counterparts in the cross-cultural study have led me to ponder whether the Korean teachers' concern about ADHD children's friendships is legitimate. In what follows I briefly share what I have learned about the relation between ADHD and children's peer relationships from both a review of relevant literature and an initial analysis of my current study on young children considered at-risk of being diagnosed with ADHD.

ADHD and Peer Relationships

From a Review of Literature

To understand ADHD and its impact on children's peer relationships, researchers have examined the correlation between ADHD and bullying and found that children with ADHD tend to be both bullies and victims more frequently than their peers without ADHD (Bacchini, Affuso, & Trotta, 2008; Wiener & Mak, 2009). Some researchers (e.g., Holmberg & Hjern,

2008; Unnever & Cornell, 2003), however, argued that children with ADHD are more likely to be victimized by bullies than bullying others.

In their attempt to identify characteristics that lead to children with ADHD becoming either bullies or victims, Bacchini et al. (2008) linked aggression, impulsivity, defiance, lack of control, and lack of empathy to bullying while connecting difficulties in attention, inappropriate behaviors, a sense of inadequacy, and low self-esteem with victimization. These researchers also claimed that poor emotional regulation and lack of problem-solving ability are common characteristics shared among bullies, victims, and children with ADHD.

Thus, this body of literature supports the concern about negative impacts of ADHD on children's peer relationships expressed by the Korean teachers discussed in the previous section. However, among the findings revealed by this line of research, I would like to draw our attention to one particular result. According to a study conducted by Unnever and Cornell (2003), some parents reported that teachers' disrespectful attitude towards their children with ADHD might lead to peer aggression, peer rejection, and bullying, which result in the victimization of these children. This finding seems relevant to an emerging pattern that I have noticed from my current study described in the next section.

From an Ongoing Ethnographic Study

Since the spring of 2012, I have conducted a longitudinal ethnographic study of four African-American boys from low-income families, who were considered by their preschool teachers at great risk for being diagnosed with ADHD later in their schooling. I began observing these children by video-recording them in their public preschool classrooms in a southeastern state during that spring semester. In Fall 2012, all four children moved to four different public kindergartens in the same school district. I followed these children and, throughout the kindergarten year, continued to observe all but one child to whom my access was denied by his principal. In addition, from Spring 2012 till Summer 2013, I interviewed these children's classroom teachers and special education teachers in both preschools and kindergartens. As a result, I collected approximately 205 hours of video-recordings and 15 hours of audio-recorded teacher interviews. My research team, which is composed of several graduate students, and I are currently analyzing the data.

Through the initial analysis of data, my research team and I identified several incidents revealing teachers' influences on the participating children's peer relations. For example, the following three vignettes involve one of the participating children named, Shantie², and show how his preschool teachers' suggestions for ignoring his inappropriate words are taken up by his peers:

Incident 1: During Table Play

Shantie, Cody, and two other boys in Ms. Heather's preschool classroom are playing with blocks at a table. Shantie goes to a container of blocks, which is placed in front of Cody, and takes some blocks out of the container. Cody looks up Ms. Heather, who stands behind him, and complains in inaudible voices.

Ms. H: (Looking down at Cody) No, he can. No, he can get stuff out of there.

Shantie: (Coming back to his seat and putting his blocks together) I really hate Cody.

Cody: (Turning his body to Ms. H) He said he hated me.

Ms. H: What should you do?

Cody: Ignore.

Ms. H: Ignore it.

(Cody says some inaudible words to Shantie.)

Shantie: Shut up!

Cody: (Turning his body to Ms. H and raising his voice) He said a bad word to me, too!

Ms. H: (Putting her hand over one ear) Remember, we don't listen to that stuff.

Incident 2: At Lunchtime

It's lunchtime in Ms. Heather's classroom. Shantie and five other children, including Devon, are sitting at a table, eating pizza and drinking juice.

Shantie: (Turning around and shouting at someone across the room) Hey look, buddy! Aren't you gonna bad ass?

Other children: Ohh!

Shantie: (Turning back to eat his pizza) Yes!

Devon: (Pointing his finger to Shantie and in a surprising tone) Hey fellow, what?

(Shantie does not respond to Devon. Instead, he gets up and falls out of his chair.)

Devon: (To Ms. Jada, an assistant teacher, who is busy putting mats on the floor nearby Shantie's table to get ready for naptime) Ms. Jada. Shantie is saying in your face. Shantie is

² All names of teachers and children in this article are pseudonyms.

saying it in your face.

Shantie: (Getting up and then sitting down) I'm not saying a word.

Ms. J: (Continuing to take mats out of the closet nearby Shantie's table) What are we supposed to do when our friends say stuff like that?

Devon: Ignore!

Ms. J: Okay, then.

A child across the room: Ignore him!

Incident 3: During Dramatic Play

In the dramatic play area of Ms. Heather's classroom, Shantie is playing with a toy cell phone. He sits at the corner of the dramatic play area, touching a board separating the dramatic play area from the block play area. Isabella and Lucas stand by the toy stove in the dramatic play area.

Isabella: (Looking at Lucas and raising her voice) Where is my food?

Shantie: (Turning back and looking at Isabella) Mommy! Mommy!

(Not responding to Shantie, Isabella and Lucas continue to play by the stove.)

Shantie: (Raising his voice and continuing to touch the board without looking at Isabella) Mommy! Mommy! Take me out to work! Mommy! Mommy!

(Not looking at Shantie, Isabella and Lucas continue their play by the stove.)

Shantie: (Turning around to see Isabella and waving at her) Mommy! Mommy!

(Although Isabella continues to avoid eye contact with Shantie, Lucas looks at Shantie.)

Shantie: (Getting up and walking toward Isabella) Mommy! Mommy! Mommy! (He goes to Isabella and touches some stuff that Isabella has played.)

(Isabella neither looks at nor responds to Shantie. Instead, she continues to put some toys in a cabinet with which she has been playing. Lucas does not say a word to Shantie, either, and goes to pick up a tool box.)

Shantie: (Going to Lucas) Daddy, I need some of that.

(Lucas does not respond to Shantie. Instead, he carries the tool box and walks around the dramatic play area, avoiding eye contact with Shantie.)

Shantie: (Following Lucas) Daddy! I need some, I need some of that.

(Lucas does not respond to Shantie and quickly goes back to where Isabella is.)

I think it is quite reasonable for teachers to encourage children to ignore unacceptable words spoken by their peer. Reviewing these video clips, however, I wonder whether the teachers' suggestion for ignoring Shantie's inappropriate words led his peers to ignore and

altogether reject him during their playtime. It seems difficult for young children to be able to distinguish ignoring a person's words from ignoring the person speaking the words. In fact, this is challenging even for adults; hence the wisdom, "Hate the sin but love the sinner."

In the next three vignettes, I describe a series of incidents involving another participating child named, Cody, in his kindergarten classroom.

Incident 1: With Ms. Jones

Ms. Jones, an assistant teacher of Cody's kindergarten classroom, sits in a chair placed on a corner of the rug nearby the whiteboard. A group of seven boys are sitting on the rug, facing Ms. Jones. However, Cody sits next to Ms. Jones's chair, looking at other classmates sitting at tables across the room.

Ms. J: (Picking up a bag of cards and asking the children sitting in front of her) Sight words yesterday. Did everybody remember their sight words and numbers?

(Except for Alex, who faces Ms. Jones but doesn't move, the remaining six children in the group move forward to sit closer to Ms. Jones.)

Ms. J: (Organizing the cards in her hands) I hope you've been studying your sight words. And I hope everybody's been studying their numbers.

(While the six children respond to Ms. Jones's questions, Cody almost lies on his back and raises his legs in the air. Then he loses his balance and lies flat on his back.)

Ms. J: (Looking down at Cody on her right side and then pointing to a spot on the rug where he is supposed to sit) If I speak to you one more time, you're gonna go to time-out. You are not a baby. [Do] you understand Ms. Jones?

(Cody nods yes, but doesn't say it.)

Ms. J: (Looking down at Cody) Yes, Ma'am.

Cody: Yes, Ma'am.

Ms. J: (Looking down at Cody again) Criss-cross applesauce.

(Cody sits up with his legs crossed.)

Incident 2: With Ms. Evans

The children in Cody's kindergarten classroom sit at four tables. Each child has a yellow piece of paper and draws on the paper objects (e.g., dots, stars, trees) of his/her choice in the way that corresponds to numbers 1 to 10. Cody is at a table with three other children, who are busy selecting different colors of markers from a container, drawing their objects, and counting them. Ms. Evans, the lead teacher, and Ms. Jones, the assistant teacher, help children at other tables.

Cody: (Standing and pointing to a marker in front of a child sitting at a corner of his table) Ah, can I get that red?

(Jakayla, a girl, sitting on Cody's right side, picks up the red marker and puts it in the container for Cody.)

Cody: (Putting both hands in the container and rhythmically chanting) Oh, get that baby, get get that baby. (Beating the red marker rhythmically on his right hand) Oh, get that baby, get get that baby.

Ms. E: (Raising her voice from another table) Stop that baby voice! I do not want to hear that baby voice, that mumbling voice.

(Marquez at Cody's table and other children at Ms. Evans's table stop their work and look at Ms. Evans with big eyes. Cody opens the lid of the red marker, avoiding eye contact with Ms. Evans.)

Ms. E: (Pointing to a long stick with clothespins of children's names used for rewards and punishments for classroom management) Go and put your name down.

(Cody walks slowly to go to move his name clothespin down.)

Incident 3: With Camila

It is an individual reading time in Ms. Evans's classroom. Following the teacher's suggestion, Camila, who is considered an advanced reader, and Cody bring a book to read together on the rug. Camila holds the book and sits in front of Cody. While she opens each page, Cody points to words on the page with his finger and reads them.

Cody: (Pointing to the first word on the first page) The books go here.

Camila: (Holding Cody's hand and helping him point to each word in the sentence) The books go here.

(Cody reads along with Camila in a very soft voice and then looks down while waiting for Camila to open the next page.)

Camila: (Turning a page and in a high-pitched voice) Make a loud voice!

Cody: (Pointing to each word with his left hand and in a bit louder and yet sad voice) The books go here.

Camila: (Holding Cody's left hand and speaking slowly in a firm adult-like tone) Not a baby book [voice].

Cody: (Pointing to words with his right hand and in a voice with a little bit more energy) The books go here.

Camila: (Still holding Cody's left hand and making big eyes) Your BIG boy book [voice].

Cody was considered an immature child in his kindergarten. In the first two vignettes, both Ms. Jones and Ms. Evans scolded Cody for acting like “a baby” while his classmates watched the interactions between the teachers and Cody. Based on these and other similar incidents in which Cody was accused of being a baby, my research team and I believe that Camila meant to say, “[You should not use] a baby *voice*” and “[You should use your] BIG boy *voice*” when she said, “Not a baby book” and “Your big boy book” in the last vignette. We believe that Camila copied what she has heard and observed from the teachers’ interactions with Cody.

In summary, a body of research literature discusses how children with ADHD have difficulties in peer relations by being either bullies or victims more frequently than their peers without ADHD. Although much of the literature attributes such difficulties to these children’s individual traits, some researchers have noted how the teacher’s attitude towards these children influences their peer relationships. The initial analysis of my current study of young children considered at-risk of being diagnosed with ADHD also showed how teachers’ interactions with these children affect the relationships between these children and their peers.

Discussion and Implications

So what do these studies of ADHD have to do with our interest in “*empowering children’s empathy via early childhood education*”? In this section I discuss implications of these studies for three aspects, including reexamining the construct of empathy, building intersubjective pedagogy, and considering empathy and intersubjectivity in culture.

The Construct of Empathy Revisited

From the study results showing the link between the teacher’s attitude towards children with ADHD and their peer relationship discussed in the previous section, sensible educators will be able to see how the teacher’s modeling of empathic interactions is crucial to building positive peer relations among children. However, I would like us to take a moment to critically examine the notion of empathy conceptualized by a psychological discourse.

Oxford Dictionaries (n.d.) defines empathy as “the ability to understand and share the

feelings of another.” Eisenberg and Strayer (1987) also described empathy as “an emotional response that stems from another’s emotional state or condition and that is congruent with the other’s emotional state or situation” (p. 5). Hoffman (1987) agreed that empathy is “an affective response more appropriate to someone else’s situation than to one’s own” (p. 48). According to Johansson (2008), the key element in the construct of empathy is “shared emotions” (p. 36).

How then does the ability for “shared emotions” develop? Hoffman (1987, 2000) proposed four developmental levels of empathy experienced by children from infancy through late childhood. Integrating the modes by which empathic affects are aroused with the development of social cognition, Hoffman argued that empathy is biologically rooted and is, initially, automatic reactions aroused by external stimuli (i.e., A baby cries when she hears another baby’s cry). He claimed that a genuine and more advanced empathic affect develops when a child can separate the self from others and take other peoples’ perspectives. Important in Hoffman’s theory is the link he made between empathy and morality. According to him, empathy is “a universal prosocial moral motive” (2000, p. 274) connected to ethical concepts, such as justice and caring.

However, when applying Hoffman’s theory (1987, 2000) to my studies of young children either officially diagnosed or considered at-risk of being diagnosed with ADHD, I notice some problems. For example, if we follow Hoffman’s conceptualization of empathy as biologically rooted affective reactions aroused by external stimuli and as a universal prosocial motive, encouraging children to develop empathy with their peer demonstrating challenging emotion and behavior does not appear to require much of the teacher’s effort. In addition, as Hoffman’s developmental levels of empathy suggest, if we can get better at developing empathy as we mature, this should not be an issue at least for teachers, who are adults. Yet, as many of us as teachers and parents have experienced, understanding and sharing emotions expressed by a child is not as easy as it has been proposed by Hoffman.

Regarding the limitations of Hoffman’s theory, Johansson (2008) pointed out three key areas: First, Hoffman focused on universal and biological maturity for empathy and morality while disregarding culture and context. Second, Hoffman’s theory is based on dualism. More specifically, Hoffman conceptualized empathy as the “inner, . . . emotional and cognitive ability” (Johansson, 2008, p. 41) and thus separated the individual from context. In addition,

his theory assumes that the self-other distinction is “a prerequisite of genuine empathy” (p. 46). Finally, Hoffman’s theory takes the understanding of others’ emotions for granted. Besides, in this theory the link between empathy and morality is considered self-evident. Johansson argued, “Instead of regarding empathy as the basis of morality, we could view empathy as one of many ways of understanding others” (p. 45).

These critiques of Hoffman’s notion of empathy encourage us to cease taking the understanding of others’ emotions for granted. The critiques also help us understand the constraints of empathy conceptualized as an individual ability unfolded by biological maturity and as a natural desire to take care of others.

Intersubjective Pedagogy

When attempting to move beyond the limitations of the psychological discourse on empathy, I have found the notion of intersubjectivity conceptualized by phenomenologists useful. Drawing on Merleau-Ponty’s (1962) discussion about others and the world, Johansson (2008) explained: “All human life is intersubjective, we live in a world together with others . . . There exists a mutual dependence between subject and world and between subjects and other subjects in the world” (p. 35). This notion of intersubjectivity challenges the person-context and self-other binaries assumed in Hoffman’s theory.

However, the emphasis on the intersubjective nature of our relationship with others does not negate the difficulty in understanding others. For example, Husserl argued, “had one had the same access to the other’s consciousness as to one’s own, the other would have ceased being an other, and would instead have become a part of oneself” (1973, p. 139 as cited in Zahavi, 2001, p. 153). Johansson (2008) also claimed, “there are always parts of the other that we cannot reach or understand” (p. 36). Unlike the psychological discourse on empathy, which assumes children’s and adults’ ability to fully understand other people’s emotions, the phenomenological conception of intersubjectivity emphasizes “a mutual dependence between familiarity and strangeness” (Johansson, 2008, p. 43) that we experience in our daily interactions with others. Elaborating on this idea, Johansson wrote: “The knowledge [about the other] that can be acquired is complex and hardly complete. It is a matter of trying to understand the ambiguity, complexity and different dimensions that are characteristics of the

life-world” (p. 43).

Then, from a phenomenological perspective, how do we understand others (albeit incompletely)? Again, drawing on Merleau-Ponty’s (1962) idea, Johansson (2008) opposed the mind-body dualism assumed in Hoffman’s conception of empathy. Instead, Johansson argued: “[It] is the *totality* of the other’s way of being that is important for our understanding of others. The other’s body, facial expressions, gestures and words together form his or her ‘being-in-the world’, which we are able to understand” (p. 38; emphasis in the original). Johansson further explained that children understand others’ emotional state not through “a distanced or reflected understanding” (p. 39) about the others’ emotional expressions as stimuli, but through “an immediate and concrete experience of the others’ being in the world” (ibid). For example, children spend time together in preschool each day and share many experiences, such as playing, eating, and learning, with their peers. Through this participation in “their shared life-world” (p. 39), children develop their understandings about how their peers act and react across contexts. Thus, from a phenomenological perspective, it is this shared life-world that leads children to understand others’ condition and develop “dependence and responsibility for the other” (p. 35).

I think this phenomenological conception of intersubjectivity is particularly useful for our work with children, who are considered to have special needs. Most of all, the notion of intersubjectivity allows us to move beyond binaries, such as being normal/able versus being abnormal/disable; subjects (e.g., teachers and typically developing children) holding knowledge, norms, authority, and power versus objects (e.g., children with special needs) of interventions, treatments, and corrections; and pitiers (i.e., teachers and typically developing children giving empathy) versus sufferers (i.e., children with special needs receiving empathy).

Constructing the teacher-student relationship as “subject-to subject”, Zhao (2009) proposed “a pedagogy of intersubjectivity that intends to construct intersubjects through mutual recognition and mutual agency” (p. 86). In this pedagogy, “both teachers and students work to create a shared space that allows both intersubjects to co-arise through interactions and exchange, recognising and transforming each other’s emotions without assimilating, consuming, or dominating each other” (pp. 86-87). I argue that this idea of intersubjective pedagogy is worth exploring not only for the relationship between the teacher and children, but also for the relationship between children as it allows us to move beyond the limitations,

including binaries, in the dominant psychological discourse on empathy.

Empathy and Intersubjectivity in Culture

Lastly, I would like us to think about both empathy and intersubjectivity in relation to culture. Going back to my earlier discussion about the findings of the cross-cultural study, why did the Korean participating teachers in Hong's (2008) study worry about ADHD children's friendships while their U.S. counterparts did not share this concern? How might this difference between the Korean teachers and the U.S. participating teachers reflect different cultural beliefs and values?

Some cultural psychologists argued that different cultures have different beliefs about the ideal self. Table 2 summarizes differences between European-American contexts and East-Asian communities in terms of their beliefs about the self, discussed by Markus and Kitayama (1991) and Shweder et al. (2006).

Table 2. *Different Cultural Beliefs about the Self*

European-American: Independent Self	East-Asian: Interdependent Self
separate	connected
attribute-based (e.g., traits)	context-based
confident, articulated	relational, flexible
in control	responsive to others' expectations, preferences, and feelings
different from others, uniqueness-oriented	similar to others and concerned with fitting in
self-enhancing	self-critical

As shown in the above table, "[speaking] probabilistically and in central tendencies" (Shweder et al., 2006, p. 755), these researchers claimed that European-Americans tend to value the independent self while their East-Asian counterparts appreciate the interdependent self. For example, European-Americans are likely to believe that the good self is in control whereas East-Asians think that the good self is responsive to other's expectations, preferences, and feelings. In addition, European-Americans tend to promote the uniqueness of the self while East-Asians appreciate the effort made to be similar to others and to fit in.

Based on this discussion about cultural “selfways” (Shweder et al., 2006, p. 755), I argue that the Korean participating teachers’ concern about ADHD children’s lack of friendships in Hong’s study (2008) reflects their cultural beliefs about the interdependent self. And this claim leads me to pose a question: Given the cultural value placed on the interdependent self, would it be possible that teachers in Asia-Pacific communities care more about promoting empathy between the teacher and children and between children and better contemplate intersubjective pedagogy than their counterparts in European-American and other Western cultural contexts?

In fact, from their cross-cultural study of preschool in Japan, China, and the United States, Tobin and his colleagues (Tobin, Wu, & Davidson, 1989) found that Japanese preschool teachers considered “sympathy, empathy, concern for others” (p. 190) the most important things for young children to learn. Bruner (1996) also argued, “Our Western pedagogical tradition hardly does justice to the importance of intersubjectivity . . .” (p. 20).

These discussions, however, do not mean that empathy and intersubjectivity are not valued in the West. Although the exact terms, empathy and intersubjectivity, were not used, recommendations for the prevention of bullying in schools published by the American Educational Research Association (2013) include the following:

Schools and communities should consider a well-coordinated approach . . . , coupled with wider community-level efforts to teach young people appropriate social-emotional skills, concern for others, and an appreciation for civility, which are essential to the well-being of our society. (p. 43)

Instead of regarding the East and the West as a binary, I think, we can identify cultural differences from the way empathy and intersubjectivity are defined, prioritized, and practiced in each culture and examine how those differences reflect different cultural beliefs.

Emphasizing the importance of understanding teachers’ cultural beliefs, Bruner (1996) introduced notions of “folk psychology” and “folk pedagogy. ” According to him, folk psychology is “everyday intuitive theories about how other minds work” (p. 45), and folk pedagogy is “the activity of helping children learn about the world . . . steered by notions of ‘what children’s minds are like and how to help them learn’” (p. 46). These folk theories reflect “deeply ingrained cultural beliefs . . . [that the teacher] may not be able to verbalize” (p. 46) because she tends to take her cultural beliefs for granted and does not necessarily bring

them to her consciousness. Nonetheless, Bruner argued for the power of folk theories as follows:

From this work on folk psychology and folk pedagogy has grown a new, perhaps even a revolutionary insight. It is this: in theorizing about the practice of education in the classroom . . . , you had better take into account the folk theories that those engaged in teaching and learning already have. For any innovations that you, as a proper pedagogical theorist, may wish to introduce will have to compete with, replace, or otherwise modify the folk theories that already guide both teachers and pupils. (p. 46)

When bringing folk theories about the self to their awareness, I believe that educators and researchers in the Asia-Pacific region have much to contribute to developing pedagogies of empathy and intersubjectivity. I look forward to learning more about such pedagogies explored by Asian-Pacific early childhood educators and researchers in their cultural communities.

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