# Synthetic Empathy: Generating and Evaluating Artificial Psychotherapy Dialogues to Detect Empathy in Counseling Sessions

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#### Abstract

Natural language processing (NLP) holds potential for analyzing psychotherapy transcripts. Nonetheless, gathering the necessary data to train NLP models for clinical tasks is a challenging process due to patient confidentiality regulations that restrict data sharing. To overcome this obstacle, we propose leveraging large language models (LLMs) to create synthetic psychotherapy dialogues that can be used to train NLP models for downstream clinical tasks. To evaluate the quality of our synthetic data, we trained three multi-task RoBERTa-based bi-encoder models, originally developed by Sharma et al., to detect empathy in dialogues. These models, initially trained on Reddit data, were developed alongside EPITOME, a framework designed to characterize empathetic communication in conversations. We collected and annotated 579 therapeutic interactions between therapists and patients using the EPITOME framework. Additionally, we generated 10,464 synthetic therapeutic dialogues using various LLMs and prompting techniques, all of which were annotated following the EPITOME framework. We conducted two experiments: one where we augmented the original dataset with synthetic data and another where we replaced the Reddit dataset with synthetic data. Our first experiment showed that incorporating synthetic data can improve the F1 score of empathy detection by up to 10%. The second experiment revealed no substantial differences between organic and synthetic data, as their performance remained on par when substituted.

## 1 Introduction

Therapy transcripts offer rich insights into counseling sessions, capturing key details such as clients' concerns, emotional states, and therapeutic interventions (Lee et al., 2019; Imel et al., 2015). Natural language processing (NLP) models have shown great promise in analyzing these transcripts (Laricheva et al., 2024; Ewbank et al., 2020; Gaut et al., 2017). However, training such models demands substantial data, which is difficult to access due to the need to safeguard sensitive health information, and institutional barriers to obtaining clinical data (Lu et al., 2021; Aledavood et al., 2017).

Data Augmentation (DA) - a set of methods used for synthetic generation of training data - is a way to manage data scarcity when training machine learning models (Ansari and Saxena, 2024). The adoption and success of DA has mostly been in the computer vision field, whereas for NLP tasks it has exhibited a more limited impact when achieving performance gains (Maier Ferreira and Reali Costa, 2020). Traditionally, NLP-specific data augmentation approaches have relied on back-translation (Corbeil and Ghadivel, 2020) or performing simple operations to the original text, such as synonym replacements or random word insertion (Wei and Zou, 2019). However, performing simple transformations on existing text samples can lead to syntactic and semantic distortions of the text (Giridhara et al., 2019).

Generative language models have made a breakthrough in augmenting unstructured text data (Hagos et al., 2024). Models such as OpenAI's GPT series (OpenAI et al., 2024), have relied on sophisticated self-attention mechanisms to generate new data, rather than just performing local changes on the text. Related studies have started exploring the use of generative models for training few shot classifiers (Edwards et al., 2022), generating artificial text for enhancing intent classifiers (Sahu et al., 2022), and augmenting domain specific datasets to boost domain specific NLP tasks (Amin-Nejad et al., 2020). Although NLP models are an active area of research, the creation of synthetic datasets remains understudied in the mental health field.

In this research, we examined the viability of using LLMs for generating artificial counseling transcripts to enhance the performance of NLP models for clinical tasks. We trained the bi-encoder

157

model introduced in (Sharma et al., 2020), which is capable of recognizing empathetic dialogues and providing rationales that support its predictions. In therapy, empathy plays a crucial role and serves as a significant predictor of therapy outcomes (Elliott et al., 2018). It stands as one of the fundamental factors that contribute to establishing a strong working alliance between a psychotherapist and their client during a session, regardless of the specific therapeutic approach employed (Elliott et al., 2011). Research studies have shown that mental health professionals can enhance their empathetic responses through the provision of appropriate feedback (Benster and Swerdlow, 2020; Sharma et al., 2020). Hence, a model that can identify low empathetic dialogues could help therapists recognize areas where empathetic engagement could be improved. By leveraging the guidance and input provided by the model, therapists can refine their empathetic skills and give more supportive therapy sessions for their clients.

Our main contributions are as follows:

- 1. We present a methodology to generate and evaluate counselling transcripts for data augmentation purposes.
- 2. We demonstrate that our synthetic transcripts can effectively fine-tune state-of-the-art models, enabling them to surpass baseline models in text mining therapy transcripts.
- 3. We release the synthetic datasets used in this study to help future mental health research.

### 2 Related Work

The generation of realistic synthetic patient data has primarily concentrated on the production of electronic health records (EHRs). Before generative models were used for data augmentation purposes, many methods relied on rule-based methods (Ansari et al., 2021). Among the initial generative architectures used to augment EHR data, MedGan (Choi et al., 2017) introduced a generative adversarial network (GAN) designed to generate multilabel patient records. To improve the quality of the data generated by MedGan, medWgan and medB-Gan were developed (Baowaly et al., 2018). These models were based on the principles of Wasserstein GAN with gradient penalty (Gulrajani et al., 2017) and boundary-seeking GANs (Hjelm et al., 2018) respectively. It is worth noting that the previous models primarily concentrate on generating

the structured data components of an EHR. Synthetic records frequently lack the inclusion of the unstructured text section, and when it is included, it is usually quite concise. For instance, in (Lee, 2018) their approach generates unstructured text that is limited to 18 tokens or less.

In addition to GANs, transformer-based models have also been used for medical data augmentation. Liu (2018) trained a transformer with memorycompressed attention to create EHRs, yielding promising results (1.76 in the perplexity per token and a 44.6 in the Rogue-1 metric). However, an evaluation to measure the data's quality for downstream task was not conducted. While previous research has primarily focused on augmenting data, limited attention has been given to evaluating its utility for training machine learning models. Wang et al. addressed this gap, in their study they employed synthetic data as supplementary training data for two biomedical NLP tasks: text classification and temporal relation extraction. Similarly, Lu et al. used a transformer-based model to train classifiers for patients readmission prediction.

While the majority of research has mostly concentrated on synthetic EHRs, there is also relevant work within the field of synthetic mental health data. One such example is found in (Ive et al., 2020), where they artificially generated discharge summaries from mental health providers. These summaries were utilized in a downstream NLP text classification task. Yet, there is still a scarcity of research focusing on the creation of synthetic data that mimics dialogues from therapy transcripts.

# 3 Method

### 3.1 Empathy Framework

To measure empathy in text-based conversations we used the EPITOME framework (Sharma et al., 2020), which establishes the following empathy dimensions:

- 1. **Emotional reactions** entails the therapist expressing emotions such as warmth and compassion, in response to a patient's message.
- 2. **Interpretations** involves the therapist conveying their comprehension and understanding of the emotions inferred from the patient's message.
- 3. **Explorations** refers to the therapist's pursuit of a deeper understanding of the patient by

delving into unexpressed feelings and experiences that extend beyond the explicit content of their messages.

Each of these empathy dimensions can take a value of 0, indicating that the therapist is not expressing it at all; 1, indicating a weak degree of expression; or 2, indicating a strong expressing by the therapist.

# 3.2 Data sets

We gathered clinical therapy transcripts from the following data sources:

- 1. **MOST+ trial** Moderated Online Social Therapy (MOST) is a youth-focused mental health web platform. In the MOST+ trial (Alvarez-Jimenez, et al., 2020), MOST was embedded within the online service of Australian youth mental health provider headspace, and provided an on-demand webchat service manned by headspace counsellors. A total of 200 therapy transcripts were gathered from this study. From this dataset we extracted 365 dialogue pairs between client and counsellor.
- Alexander Street Press The Counseling and Psychotherapy Transcripts, Client Narratives, and Reference Works (Alexander Street, 2009) contains 2,000 therapy session transcripts. From this dataset we gathered 214 dialogue pairs between patient and therapist.
- 3. **Mental health subreddits** We utilized the labeled Reddit dataset compiled by Sharma et al. (2020), which encompasses content from 55 subreddits dedicated to mental health. This dataset contains a total of 3,081 dialogue pairs between Reddit users that have been annotated using the EPITOME framework.

In close collaboration with therapists, we designed prompts for the LLMs to generate synthetic therapy transcripts. These prompts were crafted based on the EPITOME definitions of empathy, which were designed to characterize communication of empathy in text-based conversations. We developed a unique prompt for each of the three dimensions of empathy in EPITOME: Emotional Reactions, Interpretations, and Explorations. For a comprehensive list of all the prompts used, please refer to Appendix A. The prompts were used as inputs to the following models:

- 1. **Standalone LLM** The prompts were fed to a GPT-3 model (Brown et al., 2020) and a Falcon 7b model (Penedo et al., 2023), an LLM that was trained to follow complex instructions.
- 2. LLM with verbal reinforcement learning We used the Reflexion framework (Shinn et al., 2023) to reinforce GPT-3 and Faclon 7b through linguistic feedback. The linguistic feedback was designed in collaboration with a clinical psychologist. For a comprehensive list of all the linguistic feedback used, please refer to Appendix B.

For each model, we generated synthetic datasets and labeled them according to the EPITOME framework. In total, we produced 10,464 synthetic therapy dialogues. To evaluate the quality of our synthetic data, we compared the performance of an empathy classifier trained under two conditions: augmenting the Reddit dataset with synthetic data, and replacing portions of the Reddit dataset with synthetic data. The MOST+ trial and Alexander Street Press datasets served as the testing datasets.

# 3.3 Annotation Task and Process

# 3.3.1 Annotator training

Three authors of the paper annotated the datasets according to the EPITOME guidelines outlined in (Sharma et al., 2020). Each annotator completed a comprehensive training program consisting of nine one-hour coding sessions and received detailed manual feedback on 360 dialogue data points from a clinical psychologist.

# **3.3.2** Empathy Annotation

The annotators were presented with a dialogue pair extracted from a therapy transcript, involving a therapist and a patient. The annotators were tasked to identify the presence of the three empathy dimensions. For each dimension, they assigned labels of 0 (no communication), 1 (weak communication), or 2 (strong communication) to indicate the level of empathy conveyed in the therapist's response. The inter-annotator agreements for each dataset were as follows: 0.6719 for the synthetic transcripts from GPT-3, 0.6280 for the Alexander Street database, 0.6147 for the MOST+ transcripts, and 0.7822 for the Reddit dataset. These scores were calculated by averaging the pairwise Cohen's  $\kappa$  of all pairs of annotators, with each pair annotating more than 120 dialogue pairs per dataset.

	Data Source	None	Weak	Strong	Total
	Reddit	2,034	899	148	3,081
<b>Emotional Reactions</b>	Alexander	147	26	41	214
	MOST+	211	59	95	365
	Reddit	1,645	178	1,321	3,081
Interpretations	Alexander	94	76	44	214
	MOST+	180	116	69	365
	Reddit	2,600	104	377	3,081
Explorations	Alexander	131	60	23	214
	MOST+	156	141	68	365

Table 1: Empathy level distribution in datasets consisting of clinical therapy transcripts and dialogues from mental health support platforms

### 3.4 Model

For our empathy classifier we used the multi-task bi encoder developed by Sharma et al. (2020). This model was designed to evaluate the degree of empathy conveyed in a psychologist's response to a patient's message. This evaluation results in a numerical output, where a score of 2 signifies a strong communication of empathy, a score of 1 indicates a weak expression of empathy, and a score of 0 suggests the absence of empathy.

#### 3.5 Experimental setup

To evaluate our synthetic data, we conducted two experiments: one where we augmented the Reddit dataset with synthetic data and another where we replaced portions of the Reddit dataset with synthetic data. In each experiment, we trained three bi-encoders, each designed to detect a type of empathy: emotional reaction, interpretation, or exploration.

The first experiment examined how adding synthetic data to the Reddit dataset affects model performance. We conducted 15 iterations, with the first iteration serving as a baseline containing no synthetic dialogues. In the following iterations, we incrementally added synthetic dialogues in batches of 30 data points, with the final iteration incorporating 420 synthetic dialogues. The dialogue pairs added to the Reddit dataset were evenly distributed across empathy levels.

The second experiment evaluated whether synthetic data could replace real data without compromising performance. In this experiment, we gradually substituted portions of the Reddit dataset with synthetic data while preserving the original empathy distribution. We conducted five iterations, each replacing 10% of the original data with synthetic data. The first iteration included 10% synthetic data, while the final iteration reached 50% replacement.

The testing dataset for all experiments consisted of 579 dialogue pairs from the Alexander Street Press and the MOST+ trial. For each experiment, we reported the accuracy and F1 score for the three components of empathy: exploration, interpretation, and emotional reaction.

To train the bi-encoders we used the default hyperparemeters proposed by Sharma et al. (2020). We trained the model for 4 epochs using a learning rate of  $2 \times 10^{-5}$ , and a batch size of 32. The computing infrastructure employed for training this model was an NVIDIA A100 GPU.

### 4 Results

In this section, we present the results of augmenting the Reddit dataset from (Sharma et al., 2020) with our synthetic data, as well as the results of partially substituting the Reddit dataset with synthetic data.

### 4.1 Reddit dataset augmentation

Figure 1 shows the accuracy and F1 score results of augmenting the Reddit dataset with synthetic data.

#### 4.1.1 F1 scores

Training the bi-encoder models on the Reddit dataset resulted in F1 scores of 0.48, 0.32, and 0.58 for exploration, interpretation, and emotional reaction, respectively. Augmenting the Reddit dataset with 420 synthetic dialogues improved performance, resulting in F1 scores of 0.53, 0.48, and 0.59 for the same categories. This corresponds to an improvement of 0.05, 0.16, and 0.01, respectively. Notably, the highest F1 score for exploration, 0.57, was achieved with 360 synthetic data points,

while for interpretation and emotional reaction, the model reached its peak F1 score of 0.60 with 390 synthetic data points.

# 4.1.2 Accuracy

Training the bi-encoder models on the Reddit dataset, resulted in accuracy scores of 0.64, 0.50, and 0.66 for exploration, interpretation, and emotional reaction, respectively. Augmenting the dataset with 420 synthetic dialogues improved performance, increasing accuracy to 0.66, 0.60, and 0.69 for the same categories. This corresponds to an improvement of 0.02, 0.10, and 0.03, respectively. Notably, the highest accuracy for exploration, 0.68, was achieved with 360 synthetic data points, while interpretation peaked at 0.61 with 360 additional synthetic data points, and emotional reaction reached its highest accuracy of 0.71 with 390 synthetic data points.

## 4.2 Reddit dataset substition

Figure 2 presents the accuracy and F1 score results of substituting the Reddit dataset with portions of synthetic data.

# 4.2.1 F1 score

The empathy dimension that showed the greatest improvement when replacing the Reddit dataset with synthetic data was interpretation. When 50% of the Reddit data was replaced with GPT-3-generated data using verbal reinforcement learning, the model achieved an F1-score of 0.43, compared to 0.32 when trained solely on the Reddit dataset.

For the emotional reaction metric, the quality of synthetic data generated by GPT-3 was comparable to that of the Reddit dataset. Their performance, rounded to two significant digits, remained consistent at 0.58 across all substitution percentages. Similarly, for the empathy exploration metric, performance remained similar across various substitution percentages, except in the 10% substitution test, where the Reddit dataset outperformed the synthetic data by 2%.

# 4.2.2 Accuracy

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For the emotional reaction metric, the synthetic data generated by GPT-3 generally outperformed the Reddit dataset. The largest performance difference occurred with a 20% substitution, where GPT-3's reflexion-based data achieved a score of 0.72, surpassing the Reddit dataset's 0.67. For the empathy exploration metric, performance remained consistent across various substitution percentages, with a maximum difference of only 0.01.

# 5 Discussion

The data augmentation results reveal a notable trend: while adding synthetic data continues to improve performance, the rate of improvement decreases beyond a certain threshold. Specifically, for exploration, the impact of additional data slows after 90 data points, and for interpretation, after 150. This suggests that while synthetic data remains beneficial, its effectiveness diminishes over time, likely due to redundancy or a reduced introduction of novel information.

This finding has practical implications for dataset construction. Rather than indiscriminately increasing the volume of synthetic data, researchers should prioritize curating high-quality, diverse examples that fill specific gaps in the existing dataset. This targeted approach not only maximizes the impact of synthetic data but also reduces computational costs, training time, and, in the case of proprietary models like GPT-3, expenses associated with API usage. Notably, the synthetic data generated by the Falcon model also enhanced the model's performance when used to augment the training dataset. This is valuable since Falcon is licensed under Apache 2.0, unlike proprietary models that require paid access. Falcon LLM can be run locally, fine-tuned, and used without cost, offering an advantage for researchers seeking to generate synthetic data without financial constraints.

The substitution experiments demonstrate that synthetic data can replace portions of organic data without compromising performance. This suggests that synthetic data can serve as an alternative to organic data containing protected health information. This is beneficial when fine-tuning external models that require data to be sent to a third party, such as fine-tuning an OpenAI GPT model. By leveraging synthetic data, researchers can mitigate privacy concerns while maintaining, or even enhancing, model performance.



Figure 1: Accuracy and F1 scores for the three dimensions of empathy using synthetic data to augment the orignal Reddit data.



Figure 2: Accuracy and F1 scores for the three dimensions of empathy when substituting different percentages of the original Reddit data with synthetic data.

## 6 Conclusion

We generated synthetic datasets using LLMs and prompt engineering techniques, labeling them according to the EPITOME framework. To evaluate the impact of synthetic data, we trained bi-encoder models for empathy detection and measured their performance gains when augmenting the original dataset. Our results show that incorporating synthetic data improved the F1 score of empathy exploration detection by up to 10%. Notably, when replacing 50% of the original data with synthetic data, the interpretation dimension of empathy saw an 11% increase in F1 score. Meanwhile, the emotional reaction and exploration dimensions maintained consistent performance when substituting the original dataset entirely.

### 7 Ethical Considerations

While our results illustrate the advantages of using synthetic data to enhance NLP model performance, it is essential to acknowledge that LLMs can exhibit various biases in their outputs (Acerbi and Stubbersfield, 2023; Navigli et al., 2023). Therefore, a thorough examination is necessary to prevent the inadvertent propagation of such biases (Ayoub et al., 2024; Tao et al., 2024).

In the context of synthetic mental health data, assessing the presence of stereotypes in the generated texts is particularly critical (Lozoya et al., 2023). Research has shown that stereotypes and biases can negatively impact mental health treatment outcomes (Wirth and Bodenhausen, 2009; Chatmon, 2020). Future work should evaluate the extent to which synthetic dialogues reinforce or mitigate existing biases, particularly in the portrayal of different demographic groups and mental health conditions. This could involve conducting qualitative and quantitative analyses of the generated texts, comparing them to real-world clinical dialogues, and implementing bias-detection frameworks to identify and mitigate harmful stereotypes.

### 8 Limitations

Due to resource constraints, we limited the number of synthetic dialogues generated and labeled. Future research could explore the upper limits of performance improvement achievable with synthetic data, particularly for certain dimensions of empathy, such as interpretation, where the trend suggests that additional data may further enhance the model's performance. Additionally, we only used 3 annotators to label the data, the annotators shared similar demographic features such as gender, age range, nationality, and educational background. This lack of diversity among annotators may have introduced biases into the dataset, as their perspectives and interpretations could be influenced by shared cultural and personal experiences. Future studies should consider employing a more diverse group of annotators to enhance the representativeness and generalizability of the labeled data.

Another limitation of our study, due to computational constraints, was that we only tested a 7B parameter model, rather than larger models that have demonstrated superior generative performance. Future work could explore the use of more advanced open-source LLMs, such as LLaMA 3 (Grattafiori et al., 2024) and Mistral (Jiang et al., 2023), to evaluate the quality of synthetic data. Additionally, testing newer techniques for prompt optimization could help improve the quality of the synthetic text we generate (Lozoya et al., 2024).

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### **A** Synthetic Empathy Prompts

Table 2 presents the prompts used to generate synthetic dialogues, categorized by both empathy level and type.

### **B** Reflexion prompts

As outlined by (Shinn et al., 2023), the reflection framework utilizes three LLMs working in tandem:

the actor, the evaluator, and the self-reflection component. In our experiments, the LLM-actor generates therapeutic dialogues using one of the prompts listed in Appendix A. The evaluator then assesses the generated dialogues based on the intended level of empathy, using the prompts from table 3. Following this evaluation, the self-reflection LLM provides feedback to the LLM-actor, enabling improvements in the therapeutic dialogue. The final, refined dialogue is then stored in the training dataset.

Category	Level	Description
Emotional Reactions	Strong	Write a dialogue between two individuals where one person (Person 1) seeks help while the other person (Person 2) provides emotional support. Person 2 should demonstrate strong communication skills by expressing empathy, warmth, compassion, and concern towards Person 1 after reading their mes- sage.
	Weak	Write a dialogue between two individuals in which one person (Person 1) seeks help, while the other (Person 2) responds with minimal empathy. How- ever, Person 2 demonstrates weak communication skills by offering little compassion or emotional support, providing only indifferent or dismissive responses to Person 1's concerns.
	None	Write a dialogue between two individuals where one person (Person 1) seeks help while the other person (Person 2) provides no empathy at all. Person 2 only provides factual information or offensive and abusive responses showing no communication of empathy towards Person 1 after reading their message.
Interpretations	Strong	Write a dialogue between two individuals where one person (Person 1) seeks help while the other person (Person 2) provides emotional support. Person 2 should communicate an understanding of feelings and experiences inferred from Person 1's post, specifying the inferred feeling or experience or commu- nicating understanding through descriptions of similar experiences.
	Weak	Write a dialogue between two individuals in which one person (Person 1) seeks help while the other (Person 2) provides emotional support. However, Person 2 demonstrates weak communication skills by offering only a minimal acknowledgment of Person 1's feelings and experiences, merely stating that they understand.
	None	Write a dialogue between two individuals where one person (Person 1) seeks help while the other person (Person 2) provides no empathy at all. Person 2 only provides factual information or offensive and abusive responses showing no communication of empathy towards Person 1 after reading their message.
Explorations	Strong	Write a dialogue between two individuals where one person (Person 1) seeks help while the other person (Person 2) provides emotional support. Person 2 should demonstrate strong communication skills by improving understanding of Person 1 by exploring the feelings and experiences not stated in the post, showing active interest in what the seeker is experiencing and feeling, and probing gently as an aspect of empathy.
	Weak	Write a dialogue between two individuals in which one person (Person 1) seeks help, while the other (Person 2) provides emotional support. However, Person 2 demonstrates weak communication skills by offering only a surface-level understanding of Person 1's feelings and experiences, merely restating or acknowledging what has already been expressed without deeper exploration.
	None	Write a dialogue between two individuals where one person (Person 1) seeks help while the other person (Person 2) provides no empathy at all. Person 2 only provides factual information or offensive and abusive responses showing no communication of empathy towards Person 1 after reading their message.

Table 2: Prompts for each type of empathy dimension

Category	Level	Description		
Emotional Reactions	Strong	Evaluate whether Person 2 demonstrates strong communication skills by expressing empathy, warmth, compassion, and concern towards Person 1. Check if Person 2's responses include validating statements, supportive language, and expressions of care.		
	Weak	Evaluate whether Person 2 provides a weak empathy while responding to Person 1. Check if Person 2 acknowledges the issue but provides little com- passion or emotional support, with responses that are indifferent or dismissive.		
	None	Evaluate whether Person 2 provides no empathy at all. Check if Person 2 responds with purely factual, indifferent, offensive, or abusive remarks, showing no concern for Person 1's emotions.		
Interpretations	Strong	Evaluate whether Person 2 accurately infers and communicates an understand- ing of Person 1's feelings and experiences. Check if Person 2 explicitly states the inferred emotions or relates to similar experiences.		
	Weak	Evaluate whether Person 2 provides only minimal acknowledgment of Person 1's feelings. Check if Person 2 states that they understand but does not elaborate on the emotions or experiences involved.		
	None	Evaluate whether Person 2 provides no acknowledgment or interpretation of Person 1's feelings. Check if Person 2 responds with factual information, offensive, or abusive remarks without recognizing or addressing emotions.		
Explorations	Strong	Evaluate whether Person 2 actively explores and probes Person 1's unstated feelings and experiences. Check if Person 2 asks questions, expresses curiosity, and deepens understanding by gently prompting further discussion.		
	Weak	Evaluate whether Person 2 provides only surface-level responses without deep exploration of Person 1's emotions or experiences. Check if Person 2 merely acknowledges or restates what was already expressed without probing further.		
	None	Evaluate whether Person 2 completely avoids exploring Person 1's emotions or experiences. Check if Person 2 provides only factual information, dismis- sive responses, or offensive and abusive remarks.		

Table 3: Evaluation prompts for each type of empathy dimension