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Christopher L. Woodman
Dissonance, Development,
and Doing the Right Thing:
A Theoretical Exploration of
Altruistic Action as an
Adaptive Intervention

ABSTRACT

This theoretical exploration was undertaken to give consideration to the phenomenon of altruistic action as a potential focus for therapeutic intervention strategies. The very nature of altruism carries with it a fundamentally paradoxical and discrepant conundrum because of the opposing forces that it activates within us; inclinations to put the welfare of others ahead of self-interest are not experienced by the inner self as sound survival planning, though this has historically been a point of contention. Internal and external discrepancies cause psychological dissonance and inner conflict between self-protective strategies and core value constructs, the reconciliation of which is a driving force in our development across cognitive, moral and personality domains.

By considering the mechanisms of altruism through the lenses of various dissonance and cognitive-developmental theories, we are provided with the vehicle and engine for altruistic growth and the transcendence of thought-action repertoires from defensive strategies that restrict conscious awareness to strategies that foster and employ it. Furthermore, it is suggested that altruistic action may be an effective catalyst in attaining more authentically altruistic perspectives, other-oriented attitudes, and higher-stage moral development.

DISSONANCE,
DEVELOPMENT,
AND DOING THE RIGHT THING:
A THEORETICAL EXPLORATION
OF ALTRUISTIC ACTION AS
AN ADAPTIVE INTERVENTION

A project based upon an independent investigation,
submitted in partial fulfillment of the requirements
for the degree of Master of Social Work.

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2008

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CHAPTER I

INTRODUCTION

He who wishes to secure the good of others

has already secured his own.

~Confucius, c. 550-478 BC

Aristotle's concept of Eudemonia serves well in elucidating the psychological relevance of where character and action meet. "According to this idea, well-being—happiness or fulfillment—is not an eventual consequence of virtuous action but rather inherent in such action." (Park, Peterson, & Seligman, 2004, p. 616). "It's good to be good," states altruism researcher Dr. Stephen Post, "and to grasp this is to know the dynamic of the human essence." (Post, 2008, p. 1). Post agrees with Aristotle's notion, stating,

Virtue is its own reward in the sense that doing good brings benefit to the actor by virtue of participating in the emotional energy of benevolence. Reciprocal gains may occur, but they cannot be counted on. Fortunately, the good life brings internal rewards to the agent that can be counted on, and these should be experienced without guilt. Generally, these rewards include greater happiness and better health. (Post, 2008, p. 1).

Good deeds bring us "internal rewards" and "emotional energy," but do these actions possess the potential for healing psychological wounds or readjusting behaviors that have become maladaptive? With this in mind, could clinically suggested altruistic actions lead to more authentic altruistic attitudes and the internal benefits that accompany them? If issues of self-regard and mood could be improved by other-directed acts of

kindness, does it not stand to reason that such strategies should become incorporated into regular psychodynamic practice?

In order to satisfactorily explore these questions, it is important to consider certain philosophies and disciplines that have thoroughly wrestled with the phenomena of altruistic behavior and human motivation, as well as the dialectical areas where they might intersect. Discussions surrounding the true nature of human altruism are represented within many fields of discourse, ranging from the belief that we are merely selfish and manipulative creatures that hide our true motives behind a cloak of “goodness,” to arguments stating that we are “the chosen species,” essentially generous, compassionate, and wired to overcome the cruder desires that betray our human potential. Scrutinizing altruism beyond the cursory glance, this phenomenon tends to both build and dismantle many connections and correlations along this spectrum, and by virtue of its complexity, might hold important clues to the role of such behavioral traits in healthy emotional development.

There exist many theories—from the harshly biological to the fantastically supernatural—regarding altruism as a conundrum that continually defies logic, confounds science, bolsters religious explanations and often provides some hope to the overwhelmed and uninspired. Yet, there exists a dearth of reflective information about its potential as an active strategy for psychological intervention. In other words, many of the pieces have been explored exhaustively, but the gaps have yet to be constructively bridged for the sake of clinical application.

This exploration aims to critically examine areas where altruistic action might serve to better the psychological health and emotional growth of those who practice it—

as well as where it might not. Within the attempt to sift the rich soil of this phenomenon, the hope exists that the seeds of useful intervention may be revealed. The hole that exists in this line of study lies in investigating the psychological benefits of how actions may lead to the attitudes, rather than the attitudes that drive the actions involved in altruistic behavior. Moral Psychology's William James referred to a similar progressive experience as being of "the educational variety" (Alcoholics Anonymous, 2001, p.183), meaning that the transcendence to a new outlook materializes as a result of the action taken along the journey. Altruistic actions may prove to be reliable stimuli in activating such an adaptive attitudinal progression, with the bonus functions of alleviating the burden of self-centered fears, establishing an enduring sense of purpose, improving social support and garnering positive regard through cooperative interactions.

This journey of thought may prove useful to clinicians and psychologists interested in offering holistic and active solutions to patients who may lack a sense of purpose, or that hold views of the world and themselves that are narrow and bleak. It may also be a positive line of thinking for therapists serving clients that express an interest in a broader path to seeking relief of symptoms, yet struggle with concepts resembling spirituality or notions requiring faith in an unknown power. Altruistic potential may be within us all—there is no need to wait or search. It is important for individuals seeking relief from stress and despair to identify and hone skills that help them to locate their own sense of meaning—and to better evaluate how their current perspective costs or benefits them in their lives. Altruistic behavior may be a catalyst for change in how we experience ourselves, with the added benefit of increasing the greater good.

For many individuals seeking personal therapy and mental health services, concepts of “feeling good” are muddied by years of maladaptive behaviors, internal and external conflict, and societal messages that may be discrepant with individual needs or personal experience. Many of these individuals seek concrete suggestions toward well-being rather than introspective adventures which can sometimes keep their worldview in a narrow window. As Freud most notably observed, the self is an often over-defended and resistant force when examined too closely, too directly, or for too long (Mitchell & Black, 1995). A former client who was working through issues of egocentrism in his therapy would often sing his own version of the Willie Nelson classic, “...and I was always on my mind.”

As noted by Sorenson (1994), it is not always comfortable or appropriate to speak with clients about matters of morality or spirituality, as such matters invite presumptions of judgment and prejudice and impede “empathic immersion” because our own belief systems taint our observations and perceptions (Sorenson, 1994). Thus, developing the ability to address such domains in an intermediate and universal discourse would be pragmatic and sensitive. Therapists are discussing matters of transcendence all the time when reframing for the “bigger picture” with clients seeking to surpass the banal minutiae of present day existence. One universal goal of therapy is to help boost the individual up to a higher affective plateau or vantage point for a more cohesive understanding—to help them feel right-sized in the world. This study aims to consider if by consciously incorporating good deeds into one’s lifestyle, an individual’s perspective and self-regard may be significantly transformed.

The two fields of discourse that have been selected as vehicles for exploring this phenomenon have been selected because of the complementary ideas that they offer to explain how altruism may work within us and the factors that influence the quality and quantity of these experiences. The first of the selected theoretical views for this exploration will be dissonance theories, specifically Festinger's Cognitive Dissonance Theory, Higgins' Self-discrepancy Theory, Steele's Self Affirmation Theory, Aronson's concept of Self-consistency and Cooper and Stone's Self-standards Model, with their collective focus on humanity's underlying motivational drive to find a strategy—one way or another—to reconcile what is with what ought to be according to one's own behavior and internal belief systems. Dissonance theories examine the link between action, attitude, self and affect, and offer over fifty years of research and theory, pulling from several tributaries within the social-psychological discourses.

By examining the motivational states and strategies inherent in arriving at our altruistic actions, we also begin to reveal the means by which we might move from one developmental stage to another. Reducing dissonance by way of regulating affect, weighing options or adjusting perspectives is a large part of the therapeutic work that is done in the mental health fields; reconciling what people actually do with what people would like to do is indeed part of that work. When a person's ability to effectively and reasonably reduce their own psychological discomfort is diminished, they may find outside help necessary in bridging the "is-ought" gap.

Although dissonance theories were not originally conceived as being altruism-specific theories, the concepts contained within their bounds lend themselves well to our query by virtue of their attention to the realm of affect in the action-attitude link (such as

empathy, arousal and psychological discomfort), their recognition of self-regard and internalized ideals as central features, and their conceptualization of most motivation as being in the service of psychological well-being to a large extent. “Dissonance” is generally regarded as psychological discomfort, anxiety, aversive distress or other negative states from which we run. A positive spin on this same notion is that we are motivated to run toward well-being and psychological comfort—that dissonance is an inevitable hurdle for humanity throughout life—and we are equipped with the capacity to seek and create ways to move toward happiness despite such obstacles. It is a drive toward better things and a better means of getting there.

The second theoretical lens will investigate the developmental lines of altruistic action and attitudes, with specific concentration on Krebs and Van Hesteren’s developmental-interactional model of cognitive-developmental theories, which cohesively cull and integrate both empirical data and compelling theoretical ideologies from deeply established wells of thought including ego and moral stage developmental theories posed by such theorists as Kohlberg, Maslow and Piaget. Sequential stage models of development have emerged in some form in nearly every psychological discourse and will surely continue to materialize as science and psychology merge.

In seeking the clinical relevance for altruism, plotting where a client may be along the course of altruistic development will be an extremely valuable tool for evaluating how an individual avoids or employs certain behaviors, as well as the external and internal factors that support or confound doing so. In other words, it is imperative to refer to a comprehensive standard range of adaptive human behaviors—those which promote growth, stability and well-being—when considering those we often characterize as

maladaptive behaviors, which generally outstay their welcome in our lives and cause us continued suffering. Developmental characterizations of behavioral traits offer us consistent maps of developmental tracks, and by proxy, likely points of derailment. Knowing where an individual's healthy development of altruism has been stunted is to have a better understanding of how altruistic action may help them to get back on track.

Models of development such as Krebs and Van Hesteren's provide structures in which altruistic action may be seen as a central tenet to—and reliable marker of—our growing and evolving human potential (Krebs & Smolenska, 1992), while self-evaluative theories of dissonance describes the negotiation between realities of the world and the ideals and perceptions of self (Cooper, 2007). Reducing dissonance may be the motivational engine that propels us back and forth within a developmental framework. Themes of self-regard, affect-regulation, conflict, discomfort, discrepancy, arousal, distress, tension, guilt and shame are all highly relevant to any exploration of psychological healing strategies. This exploration will highlight the mechanisms by which we transcend our inclinations to simply ameliorate our own suffering to further realizing our human potential through directing our energies beyond the self.

It may be revealed that the very mechanisms that drive us forward could be the very same systems that shut us down. Much like the peacock's tail, some of our own psychological adaptations surpass practical application and persevere to the point of counter-productivity, thus becoming maladaptive. What once got the peacock some much needed attention from the peahen, would continue to evolve to the point of becoming a (albeit handsome) detriment to his health and safety. (Cronin, 1992).

The following chapter on how the phenomenon has been conceptualized will introduce the definitional and contextual framework for altruistic action in this project, and demonstrate the complexity of this phenomenon by way of dissecting an often-cited example. Following that, will be the methodology chapter, which will outline the points of comparison between the two conceptual stances, clarify the selected theoretical standpoints, and flesh out any bias that the author brings to the exploration.

CHAPTER II

CONCEPTUALIZATION OF THE PHENOMENON

The study of altruism has historically led to some form of categorical reductionism; the human desire to simplify that which we cannot readily understand—that which can not be easily packaged or compartmentalized—brings about its own dissonance-reduction strategies. The term “altruism” has as many varied definitions as there are disciplines attempting to define it. French philosopher Auguste Comte coined the term in the mid 19th Century, defining it simply as the “opposite of egoism.” (Harper, 2007). Since that time, its malleable meaning has been packaged and repackaged from discourse to discourse, depending upon how it supported or disproved the underlying philosophy of the discipline attempting to employ it. The tempting trap of redefining the phenomenon to suit the needs of this current exploration must therefore be carefully sidestepped.

A Working Definition

Kristen Renwick Monroe, in her (1996) book *The Heart of Altruism: Perceptions of a Common Humanity*, defines altruism as “behavior intended to benefit another, even when this risks possible sacrifice to the welfare of the actor.” Monroe also lays out some fairly strict criteria that are inherent in her definition. She first declares that (1) it must entail action; well-meaning thoughts are not enough. (2) The action must be goal-directed, either on a conscious or reflexive level. (3) The primary goal of the act must be to promote the welfare of another. An act falls short of being purely altruistic if another’s

welfare was promoted as a secondary or inclusive consequence of my otherwise self-directed action. (4) Intentions count more than consequences. If I try to do something for another's benefit and it does not work out as planned, the original action is still considered altruistic. (5) There must be some level of sacrifice or diminution of my own welfare in order to be truly altruistic, and (6) pure altruism sets no conditions nor anticipates any reward from the recipient. (Monroe, 1996, p. 6).

For our purposes, the term “altruism” will embody a fuller spectrum of behavior; at one end will be purely egoistic actions and at the other end will be purely altruistic actions. Between these two poles will be a “catch-all” for the many behaviors that Monroe calls “significant deviations from self-interest.” Monroe acknowledges that altruism is often used interchangeably, albeit confusedly, with all “good deeds,” including “giving, sharing, cooperating, helping, and different forms of other-directed and pro-social behavior.” Monroe’s thoughtful definition will be used in this exploration to refer to pure altruism or the altruistic ideal. Truly altruistic acts represent the epitome of good deeds, and the various actions included along our spectrum will be appreciated as possessing varying degrees of altruistic—or “quasi-altruistic”—attributes. (Monroe, 1996, p. 6).

Observing the phenomenon of altruism along a continuum will provide us with latitude in discussing the developmental stages of altruistic personality, while avoiding the shackles of an overly inflexible standard for inclusion. The nature of human behavior is not well matched to dichotomous characterizations, even though that is quite often the way that discrepancies in human experience are handled. There is something within the problem of altruism—that which has historically split apart schools of thought and

tempted many to leap to theology in order to end the argument. It is this ambiguous area which is being leapt past—that which is worthy of invoking the supernatural explanation—which may contain answers on how such a power might be harnessed and applied to psychodynamic intervention. Limiting our field of vision in this study would not serve our interests well. Perhaps we shall take our example from Daniel Boland (1992), who casts a fairly wide net in how altruism should be envisioned:

In practice altruism means giving more to others than we are expected to give while taking less for ourselves than we are allowed to take. Expressions of this kind of practical altruism vary from everyday gestures of courtesy to selfless, heroic action. Altruism can mean accepting simple inconveniences for the benefit of loved ones or giving one's life for one's friends. Altruism motivates kindness to strangers and aid to weary colleagues, food and shelter for the needy and care for the friendless. (Boland, 1992, p. 413).

Boland also acknowledges differing degrees of altruistic action without dismissing any of them; he accounts for purity of deed by describing a “true” altruism:

True altruism involves giving something personal: one's time or trust, one's loyalty or support. True altruism has no hooks; we act unreservedly, even anonymously, for others' well-being. We ask nothing in return, neither friendship nor loyalty, neither religious conversion nor ideological assent, neither appreciation nor thanks. (Boland, 1992, p. 413).

By considering the dynamics between egoism, altruism, and the space between the two extremes, the nature of the mechanisms involved in this phenomenon will likely be revealed. In a developmental model of altruism, egoism is the starting point and necessary means to progress, while a purer form of altruism is always held up—either consciously or through unconscious internal representations—as the ideal to which we might aspire. Each action along this continuum counts for something in our definition, whether it departs from egoism in the direction of altruism, or vice-versa. This forgiving model also helps to circumvent pejorative or judgment-laden categorizations of behavior;

the temptation may be to lump altruism with good, virtuous or moral ideas, and self-interest with bad, deviant or immoral ones. Conceptualizing behavior as being responsive to varying needs or to natural internal cues in the context of emotional development helps to avoid subjective and evaluative characterizations.

There is additional support in the literature for plotting our understanding of altruistic growth along a bipolar spectrum. Cognitive-Developmental theorists Krebs and Van Hesteren (1991) offer this observation with which our investigation will proceed:

From a developmental perspective, egoism and altruism are not mutually exclusive traits, but two poles of a continuum marked on one end by an ideal conception of pure selfishness, and on the other by an ideal conception of pure altruism, neither of which may actually exist. (Krebs & Van Hesteren, 1992, p. 159).

With this forgiving and flexible range of considerations in mind, this exploration will now apply some of the conceptual intricacies to an often-cited example of what evolutionary theorists have historically proclaimed “the problem of altruism.”

Not So Simple

“I was in pain to consider the miserable condition of the old man; and now my alms, giving some relief, doth also ease me,” said Thomas Hobbes (1588-1679) in regard to giving sixpence to a beggar on the street. (Ridley, 1996, p. 1).

Hobbes provides an excellent scenario for demonstrating the problem of altruism in human nature. This is made all the more compelling by virtue of this man’s particularly significant philosophical influence over centuries of Western political thought, including a worrisome precursor to “Social Darwinism” which has been referred to as “the Hobbesian War of all against all.” (Ridley, 1996, p. 251).

Herein lies the classic problem of altruism: Hobbes held that kindness was self-interest in disguise; we are all essentially selfish and equipped with the ability to appear altruistic. Development in Hobbesian terms consists of subtler and subtler forms of manipulation of self and other—so much so that even we, ourselves, are deceived by them. Monroe (1996) wrote of Hobbes' reduction of altruism:

Thomas Hobbes suggested an explanation for altruism that emanates not from genuine concern for the needy person but rather from the so-called altruist's personal discomfort at seeing someone else in pain. Economists designate such altruism as a form of psychic utility; psychologists identify the same general phenomenon but refer to it as aversive personal distress created by arousal. (Monroe, 1996, p. 7).

Hobbes, in all his chilling austerity, was actually quite accurate. His response to the beggar was not purely altruistic by our definition. However, it was also far from cruel and manipulative. Pure altruism may be unattainable, and egoistic underpinnings are not as definitively damning as Hobbes suggests. The rules are in a constant state of flux and the standards to uphold are subject to reevaluation and adjustments. In the spirit of discovery, what other explanations might have helped Hobbes to give meaning to his experience?

Developmental and social psychologists such as Van Hesteren and Batson often speak in terms of an "ideal altruistic personality," which involves the incremental refinement of cognitive cues and affective responses in the service of advanced-stage, strongly internalized principles of caring and justice. It would be safe to assume that Hobbes had not yet arrived at this mature step in his personality development. Degrees of empathic difference in regard to how one responds to the cues in a particular altruistic opportunity indicate where one may be on the scale between self- and other-oriented

motivation. Van Hesteren (1992) describes this distinction, while infusing some hope that Hobbes' distress is a positive signpost along his journey.

At the high developmental level characteristic of the ideal altruistic personality, such heightened empathic arousal is experienced as a sense of empathic concern that gives rise to high quality altruism that has its ultimate goal reducing the other's need rather than relieving one's own personal distress. (Van Hesteren, 1992, p. 185).

Hobbes' kindly response to the beggar is evidence that he has some access to personality ideal constructs that inform his behavior in order to negotiate this relational encounter. Dissonance theorists like Stone or Steele, as well as developmental theorists like Kohlberg or Loevinger, would posit that unconscious self-evaluations of Hobbes' altruistic behavior further inform him of any discrepancy between his self-structure—the very essence of how he defines himself—and how his behaviors may or may not be consistent with these constructs. This “moral compass” holds up the direction of the ideal to which he should aspire, while also evaluating his actual behavior for consistency with this ideal. (Cooper, 2007). Progress, through this lens, resembles more and more efficient strategies for maintaining self-consistency while also transforming personal distress into concern through behavior and value adjustments. The good news for Hobbes may be that by moving forward in his altruistic development, his ability to negotiate emotional arousal may become streamlined, while he may also become less subjective—and more objective—in his self-awareness and therefore less likely to experience subsequent events of this kind as personally distressful. (Van Hesteren, 1992).

Altruism-motivation researcher Daniel Batson, of the University of Kansas's Social Psychology Department, hypothesized that “individuals who experience empathy when witnessing another person's suffering are in a negative affective state—one of

temporary sadness or sorrow—and these individuals help in order to relieve this negative state.” (Batson et al., 1989, p. 922). Batson and his associates might suggest that “mood enhancement” was the underlying motivation for Hobbes and that relieving the man’s distress was entirely egoistic. Batson cites Cialdini’s (1987) explanation that, “Because helping contains a rewarding component for most normally socialized adults...it can be used instrumentally to restore mood.” (Batson et al., 1989, p. 922).

Assuming that Batson and Cialdini are correct, why then did Hobbes’ mood need enhancing in the first place? The encounter with the beggar seems to have offered Hobbes both the cause and cure for his malady, setting a bevy of wheels into motion. Behavioral constructs within Hobbes were accessed, existing templates for empathy and sympathy were employed, unconscious memories from his experience were retrieved, physiological systems were readied for further instruction, mechanisms of ego defense were brought to bear, while subtleties in attachment style and internalized representations of significant others were summoned to the event. The quality and quantity of these and other processes vary from individual to individual and from circumstance to circumstance. The only certainty is that some combination of cognitive and affective factors brought about a specific emotional reaction for Hobbes that he experienced, on some level, as a negative state that was best relieved by helping.

Many psychological camps would agree that these processes are not mutually exclusive and that the unconscious inner-conflict arises from contradictory messages that do not readily agree with one another, resulting in dissonant cognitions. Freud might have worked with Hobbes in bringing to the surface some of the more unconscious processes that might have prevented him from achieving mastery over his distress. Freud suggested

that the problematic moral conflicts of the superego's moral functions are not in the "consciously adopted moral code" department, where rational choice prevails, but in the "unconscious moral force" department, the contents of which—by definition—we are denied full access (Frank, 1999). Frank (1999) agrees with Freud about unconscious conflict, stating:

Experience suggests that Freud is correct; clinical data reveal that the really problematic issues are the unrealistic demands and punishments, attitudes about which people are generally unaware, which, nevertheless, have serious consequences to their lives. (Frank, 1999, p. 453).

Had Hobbes snubbed the miserable old man rather than having helped him, what internal consequences would he likely have experienced? What would have become of his newly acquired personal distress in seeing the man? In the short term, some dissonance-reduction strategy would most likely suffice to cognitively fill the fissure between what he felt and what he did (or did not do) as it relates to what his self-structures and personality ideals dictate (Aronson, 1968). There might have existed some level of denial or self-deception in his strategy to make sense of the discrepancy, but there would also have been the developmental opportunity to learn from the experience—even if only on the unconscious level (Bandura, 1991).

Despite his discrepancy-reduction attempts, some unconscious feelings of shame and guilt would likely have arisen for Hobbes should he not have helped, and this step "backwards" toward the pole of self-interest may have caused him greater discomfort over a longer period of time than had he acted upon his immediate arousal. He would have failed to confirm some inner belief about what kind of individual he ought to be, and this would have required some "work" to reconcile (Cooper, 2007). Simply

repressed, these feelings might have resurfaced, as Freud suggested, at inopportune moments in his life. Here we begin to see that even self-interested motivation seems to yield a better cost-benefit outcome when directed toward the improved welfare of another individual. Giving to the beggar to improve his own distress still resulted in greater benefits to Hobbes than not helping would have, while also helping his fellow man.

By simply relaying between the poles of selfishness and selflessness, Hobbes would potentially develop a taste for altruism simply because it costs less, emotionally speaking. This momentum is what Positive Psychology's Barbara Frederickson calls "upward spiraling." For Hobbes, this would mean that positive internal and external cues from choosing the less selfish action would lead to increased ability to find positive meaning in this event, which, in turn, makes him more likely to repeat the action, and so forth. Meanwhile, this change is potentially broadening his perspective. (Frederickson, 2003).

Plato offered a similar conceptualization with his "informed love of the good," which refers to the very same external and internal cues. Meaning is a function of age and development; one moves from simply doing and feeling the "goodness" through actions—which are the necessary steps—to understanding and appreciating the "goodness" on a deeper level. Plato's likely assessment of Hobbes' view is best described in this excerpt from Stanford's Marcia Homiak (2007):

A potentially virtuous person learns when young to love and take pleasure in virtuous actions, but must wait until late in life to develop the understanding that explains why what he loves is good. Once he has learned what the good is, his informed love of the good explains why he acts as he does and why his actions are virtuous. (Homiak, 2007).

Clearly, Hobbes was a bit too rigid in his interpretation of this seemingly simple donation to a stranger. This example only begins to flesh out the complexities involved in altruistic action. It would appear that his astute observation that his actions were not entirely selfless—barely scratched the surface. Hobbes had consciously learned that egoistic motives might have a role in why he did what he did, but what about the unconscious learning that took place? Did this event enlarge his emotional life on some imperceptible level? What did he learn affectively? How did his contribution to another man's welfare better his own life beyond instantaneous relief? If Hobbes went to the streets with helping in mind, how would the costs or benefits be different? What if he were instigated to help as part of a treatment strategy?

An exploration such as this one will likely spur an exponential array of questions. Keeping key questions at the forefront of our focus, it may be less likely that tidy and concrete conclusions would be prematurely drawn. The Socratic method of asking rather than telling is generally appropriate to any study involving human nature, as the intended recipients of this knowledge are best suited to their own conclusions. The following chapter on methodology will pose a series of questions that will serve as points of comparison and overlap between the theoretical lenses selected for this exploration.

CHAPTER III

METHODOLOGY

Do the actions that made us happy ten years ago still bring us happiness today? Perhaps some do, but they have likely evolved in some respects, as have our views of our selves and our world. As a simple function of time and experience, we make adaptations to our attitudes and skill sets that serve our valued goals in some manner. Abraham Maslow (1970) referred to a “self-actualization,” with which we have full access to our talents and strengths, as a prevalent and ever-changing goal behind making any adjustments to our selves (Maslow, 1970). Behaviors that seem to oppose this goal are likely vestiges of the best skills available at past points in our personal and social evolutions (Frederickson, 2003).

The instant gratification of needs that at one time seemed to be the very essence of life’s purpose, generally evolve to become subordinate to loftier goals that likely involve the welfare of others. Without our becoming developmentally derailed, time teaches us that short-term happiness is just that, and that the further we are from being the center of the universe, the grander we may actually be.

According to Monroe (1996), “Identity and our perceptions of who we are constitute important determinants of behavior.” (p. 13). Many questions have been posed regarding how a person’s self-image, in all its intricacy, can shape the nature of their behavior in the world. The construction of an individual’s self-view does not take place in a vacuum; life experience, important cultural influences and individual traits all add to

the complex nature of identity. “The self is situated; it exists in a cultural world. This means that the realities speakers construct are social realities and permeate all the transactions an individual has over a lifetime.” (Monroe, 1996, p. 13).

The way we perceive our selves and the way that these perceptions shape our behavior, together, encapsulate the trajectory of this exploration. The theoretical foci of this exploration are developmental and dissonance theories. In the developmental realm, we will look specifically at cognitive-developmental and developmental-interactional theories, and by proxy, the wealth of sources from which they are created. For dissonance, we will look specifically at cognitive dissonance theory, self-affirmation theory, self-discrepancy theory, self-consistency, self-standards and various subsets that have tested the waters along the way.

Three major questions will be entertained through each theoretical lens, concentrating on the larger topics of altruistic *motivation* (why?), altruistic *mechanisms* (how?), and the *clinical relevance* that a particular theory offers to a potential altruistic intervention (to what end?) As mentioned earlier, a Socratic structure of guiding questions will anchor our analysis while allowing us some latitude in connecting ideas that might be excluded by a less flexible system. The questions to be answered in each theoretical chapter will be: 1). How does this theoretical viewpoint help to explain why altruistic behavior takes place? 2). How does this theoretical viewpoint help to explain how altruistic behavior operates in humanity? What does the mechanism look like through this particular lens? 3). How does this theoretical perspective portray altruistic action’s role in psychological well-being? Does this line of thinking offer support for altruistic action as a self-perpetuating clinical intervention?

Author's Bias

This writer admits to certain methodological biases that may impact the overall direction of this theoretical exploration. The concept of altruistic action as a means of recovery is not an altogether unfamiliar one in this case. On the contrary, by way of a spiritually based 12- Step program, a notably positive change in outlook has emerged within me as a direct result of practicing altruistic principles on a daily basis. It is difficult to have such a life-altering experience—a change in perspective that ultimately has led to graduate studies in social work—without examining the processes involved and wishing that this solution would infect the multitudes. I believe we could all use it (and that is my major bias).

AA members have been known to suggest that newcomers will benefit from making efforts to help others, telling them, “Fake it until you make it!” This implies that action intended to help oneself might precede benevolent motivation, and is therefore robustly correlated to ‘prescribed’ altruistic action begetting authentically motivated altruism. That has been my experience, but how? Pre-existing psychological factors, both masked and fueled by the relief of substances, seem to cover a great span of diagnostic territory. From the “Big Book” of *Alcoholics Anonymous* (2001), the process of doing the 12 Steps will result in the relief of the following:

We are going to know a new freedom and a new happiness. We will not regret the past nor wish to shut the door on it. We will comprehend the word serenity and we will know peace. No matter how far down the scale we have gone, we will see how our experience can benefit others. That feeling of uselessness and self-pity will disappear. We will lose interest in selfish things and gain interest in our fellows. Self-seeking will slip away. Our whole attitude and outlook upon life will change. Fear of people and of economic insecurity will leave us. We will intuitively know how to handle situations which used to baffle us. (*Alcoholics Anonymous*, 2001, p. 84).

The self-defeating behavior, negative worldview, and insidious fears underlying this promising list cannot be claimed as the sole property of substance abuse. Working with those suffering from a myriad of disorders and difficulties has provided this social worker with much evidence to this fact. Many psychological barriers arise from egocentrism, and egocentrism is the natural response to many psychological barriers. Egocentrism can also be conceived of as the antithesis of altruism, and altruism is traditionally associated with morality and spirituality. I have the secondary personal goal of evaluating these associations for myself.

AA offers a “spiritual” solution; by surrendering to a power greater than one’s self, one should find the strength necessary to move from despair to well-being. However, this Agnostic has always been uncomfortable with the word “God” and assumptions that those phenomena beyond our easy explanation must result from some higher intelligent design. Sadly, many more individuals are inhibited by faith-related groups, and decide that AA is not for them. The action of the program has worked for me—regardless of my Agnosticism—and my curiosity in what transpired has been peaked. This is the driving force behind this study.

I have also become aware of some social conditioning from my own experience as an American man that weighs in with some heft on my own willingness to see “good deeds” as a worthy psychological platform. While gleaning much of the material that a research project such as this one entails, I find myself projecting the larger scientific conservative skepticism onto these more open-minded and optimistic realms of study. I liken it to nature conservationists being dismissed as “tree-huggers” by a society that believes that such feelings are to be ignored in order to expand our lives. I am trained to

fear the judgment of this opposition. The negative social training denying a place for universal love in clinical research is propagated by years of cultural sabotage and a deeply seated yet subtle aversion to collectivist notions of our world. I bring to the table the infectious germ of brainwashed capitalist pessimism, despite my strong conscious belief that love and kindness must somehow be the route to a happier world.

However, there still exists the hope in me that a widely recognized trend of good deeds may eventually come about in the world, and humanity's evolution will reflect a strong connection between emotional well-being and the future success of the species. For this reason, I have purposefully selected theories that propose that there is always room to grow as long as we can still take action. The psychologists and scholars doing this work are doing so with the patience of scientific methods in order to create evidenced-based studies upon which to build. The irrefutable results of this work will eventually make the skeptics among us stand up and take notice. In the meantime I will fight my own programming and maintain that these efforts will relieve some suffering for someone.

I have met people who did not feel that life was worth living, regardless of the many fine adaptive qualities they possessed. Despite high intelligence, perfect physical health and well-honed social skills, they felt as if something was missing—that success or meaning had somehow escaped them in their lives. I have met people who have selected suicide over continuing to struggle without a higher sense of purpose in doing so. We are endowed with minds that can, and sometimes do, prioritize happiness over survival. I have wondered how science would explain this. I wonder now how we might help to transplant a sense of meaning into those who lack it.

It is my sincere goal to weigh the different theoretical options objectively, despite the very human inclination to generalize my own experience to that of the many. I am hopeful that this effort may bring something useful to the surface, but, as previously mentioned, cynical enough to keep it grounded.

Chapters IV and V will further define the phenomenon through dissonance and developmental lenses, while demonstrating the utility of doing so. Much great work and thought has been poured into altruism research, and this is likely because many have recognized the phenomenon as an untapped powerful resource. Could psychotherapy also benefit from this?

CHAPTER IV

DISSONANCE THEORY AND ALTRUISM

“Egoism and altruism are not mutually exclusive traits.” (Krebs & Van Hesteren, 1992, p. 159). The same contention could be made of other dichotomous phenomena such as vice and virtue, emotion and rationality, passion and reason, immediate desires and long-term needs, external influences and internal wishes, individualism and collectivism, lower gratification and higher pleasure, what is and what ought to be—the list could go on ad infinitum. In each case, the existence of the converse pole is essential to either pole holding any meaning for us, and resolving the tension between them is fodder for growth.

As humans, we do not feel at ease when confronted with events or ideas that are difficult to categorize—that do not fit nicely into our already existing files. We would prefer to be able to say that something is absolutely right or else it is absolutely wrong; we want to know definitively that our own behaviors line up with our beliefs, and that we are who we think we are. Dissonance theories describe how we are driven to spruce up life’s hard-to-file realities in relation to our selves, and to adjust existing constructs or modify actions in order to accept cognitions that cause us tension. According to Balcetis and Dunning (2007), “This motivation maintains a widespread influence, changing attitudes, likelihood estimates, social judgments, and perceptions of self.” (Balcetis & Dunning, 2007, p. 917).

In the mid 1950’s, after making the astute observation that people are motivated to seek behavioral consistency, Leon Festinger (1954) developed cognitive dissonance

theory. Cooper (2007) cites Festinger as saying, “The holding of two or more inconsistent cognitions arouses the state of cognitive dissonance, which is experienced as uncomfortable tension. This tension has drive-like properties and must be reduced.” (Cooper, 2007, p. 7). The basic idea is that this tension, which can range from minor bother to alarming distress, motivates us to change our attitudes or to act in ways that will reduce the discrepancy. “The greater the inconsistency we face, the more agitated we will be and the more motivated we will be to reduce it.” (Cooper, 2007, p. 7). Much like our instinct for survival or our inborn propensity to seek loving attachments, we are equipped with a strong drive that will—one way or another—find some means of reconciling discrepant behaviors, beliefs, and feelings with one another.

The beauty of dissonance as a theoretical platform is that there is no lack of contradiction or paradox in either our inner or outer worlds. According to Festinger’s original theory, two simultaneous truths are all that are necessary to experience a discrepancy; humanity has a tendency to whittle their decisions down to two choices—an all-too-common trap when a fuller range of options could be considered. To speak of dissonance and altruism together is to speak of inner conflict and external realities, ego defenses, ideals, self-esteem, and development of personality. Cognitive dissonance is predominantly a theory of internal defenses, and altruism is considered to be among the top tiers of the defense mechanism hierarchy described in diagnostic manuals (APA, 1994) and others such as Anna Freud within the traditional psychoanalytical school of ego psychology. (Sharabany & Bar-Tal, 1982).

This chapter aims to demonstrate the utility of dissonance perspectives in considering altruistic action as a catalyst to psychic change. Dissonance is easily tied to

many existing theories that involve moral motivation and the development of personality. The “self-concept” is central to dissonance theory, but even more so to the concepts and theories that emerged with it—ideas such as the self-standards model (Stone & Cooper, 2001), the theory of self-affirmation (Steele, 1988), self-consistency theory (Aronson, 1968; Thibodeau & Aronson, 1992), and self-discrepancy theory (Higgins, 1989). Within these tributaries of dissonance theory, some connections between altruistic actions and our well-being will likely be revealed.

How does this theoretical viewpoint help to explain why altruistic behavior takes place?

“Festinger simply asserted that the drive for consistency existed, but not why or how.” (Cooper, 2007, p. 87). Cognitive dissonance theory is essentially a motivational-behavioral model addressing the action-attitude link. However, Festinger underestimated the scope of his theoretical lens and the connections that it would help to facilitate. The concept of bridging uncomfortable cognitive gaps clearly touches upon how we perceive ourselves in the world, how we make meaning of our experience and how we tune in to our internal self-systems for feedback. According to Cooper (2007),

The realm of dissonance is no longer restricted to comparing cognitions with one another to examine their logical consistency or inconsistency; it now includes considerations of responsibility for action, the consequences of our behavior, and our self-views. (Cooper, 2007, p. 181).

The initial response to the dissonance stance might be accompanied by some disillusionment, in that it implies that our impetus to do anything revolves around the extinguishing of one psychological fire after the next in the service of our own comfort (This is reminiscent of our example of Thomas Hobbes giving change to a beggar from Chapter II). Egoism’s indelible signature is on every action in which we participate. The

resulting awareness of this idea tends to leave the same bad taste that it has historically left for those who have pondered it; much like the perspective of Hobbes, acts of kindness are always strategies to reduce or prevent subjective discomfort on some level.

Things may not be all that gloomy; there are an infinite number of ways in which cognitions may be discrepant, and an equally infinite number of strategies to reduce dissonance—some that actually include altruism. Altruism or egoism may not actually exist in ideal form at all. However, without the existence of behaviors that lean toward one or the other, there would be no discrepancy to reduce, no work to be done, and no progress to be made. The fact that we realize the existence of a discrepancy is a good sign that more than one construct has been created and accessed. If subjective egoistic happiness were the only concern, then most types of dissonance would not arise; the choice would be clear and reduction of tension would be unnecessary. According to Jack Brehm's study on dissonance and choice, "The more difficult the decision, the greater the dissonance." (Cooper, 2007, p. 14). Along these lines, an egoist's obvious choice toward egoism would cause little-to-no dissonance.

Most developmentally inclined theorists, including Piaget, Sullivan, Kohlberg, Gilligan, Mahler, Maslow, Loevinger, Krebs and Van Hesteren, agree that we are born as almost entirely egoistic creatures, dependent on others to get our needs met and quite unable to see these others as serving any other purpose. As soon as we begin to see others as more than simple accessories, discrepancies of increasing complexity will appear on every front. The advent of these discrepancies is clearly delineated within Sullivan, Grant and Grant's first two levels of core personality development. At the first level, "The infant must first master the differentiation of self from non-self. There is poor

comprehension of reality, magical thinking, superstition, and a need for symbiotic relationships in which needs are instantly satisfied.” (Loevinger, 1976, p. 106).

Dissonance begins in the second level of this sequence because at this level, “The central problem is the integration of non-self differences. There is the beginning differentiation of people from objects, but both are seen merely as means to the person’s own gratification.” (Loevinger, 1976, p. 106).

The painful realization that one is not a universe unto oneself is generally met with some emotional conflict. These discrepant cognitions are felt as anxiety and resentment, and are met with superficially compliant or crudely manipulative attempts to continue the bliss of level one. The individual is forced to develop a self-system expressly for the purpose of mediating the otherwise unmanageable emotional reality of anxiety resulting from differentiation. (Loevinger, 1976).

It seems that our psychological discomfort—internal conflict, pain and suffering—serves us on a higher level, creating and developing self-constructs and calling them together to reduce unmanageable gaps in experience. As an essential facet of his theory of emotional development (the theory of positive disintegration), Kazimierz Dabrowski saw pain and discomfort as being transformative experiences in our emotional growth. Pain is instrumental, given that the negative feelings in question are triggered by increasingly discriminating inner conflicts of conscience. (Silverman, 1993).

The difference between ‘I’m mad that Sally got more candy than me’ and ‘I’m sad that Sally got more candy than Jim’ is that the latter example implies several constructs at work, rather than being sparked by the simple self-interest involved in the former example. However, an understanding of subjective feelings of anger for being

personally deprived is a necessary component in developing the empathic response of vicarious sadness for Jim. Both emotional conflicts are instrumental, yet in qualitatively different ways. “Inner conflict serves as a motivational purpose,” writes Sal Mendaglio. “Life events and introspection become catalysts to painful experiencing of the discrepancy between the way the world ought to be and the way it is.” (Mendaglio, 2002, p. 17)).

Cognitive dissonance is an integral piece of the Dabrowskian view, helping to characterize the motivational property of this inner conflict and to offer a possibility of why altruism takes place in human behavior. Mendaglio (2002) posits that the development of higher capacities is the logical reason for developing and implementing altruistic action stating, “As awareness of how the world ought to be leads to the preoccupation with what is good and right, personal values become transformed by an empathic connection with persons as individuals and in the form of humanity as a whole. Self-interest and gratification give way to altruism.” (Mendaglio, 2002, p. 17).

In other words, as we move away from the infantile pole of egocentrism, we open ourselves up to new qualities of psychological discomfort, negative affect and aversive arousal. The reward for this is that with the new struggles come new interpersonal skills and improved capacities to transcend the self-directed mindset. Along with the new skills and capacities, such as increased empathy and self-awareness, come more effective strategies at reducing the additional dissonance in a manner more befitting one’s growing ideals. (Dabrowski, 1967). As Krebs and Van Hesteren’s (1992) developmental- interactional theory observes, the old tools of self will still be available in a pinch, but the new altruistic tools prove to provide more enduring comfort in time. Altruistic ideals

cause us dissonance because they are seemingly unattainable; this tension presses us to discover new tools and to refine existing ones. (Krebs & Van Hesteren, 1992).

Cooper (2007) agrees that developmental progress might be an explanation as to why altruism's resulting dissonance operates in our lives as it does. "One possibility is that dissonance occurs as part of the unfolding of human development, part of the hard-wired system embedded in the phylogeny of the species." (Cooper, 2007, p. 87). As development "unfolds," innate proclivities to evolve lead us to experience arousal and distress as our interactions with the world constantly challenge the adequacy of the truths that we held up to that point. Feeling unwanted sadness for another's distress may be the result of expanding one's range of empathic capacity (Batson, 1991); this causes a discomfort that will generally lead to an altruistic response—the result of which could be developmental gain (Dabrowski, 1967). We become more emotionally developed following the successful reduction of discrepant feelings than we would have had the opportunity not arisen in the first place.

Dabrowskian perspectives would also give credence to the idea that internalized ideals of moral standards, including altruism, might drive the dissonance, which in turn could drive altruistic action should that be the strategy of choice. Failing to live up to one's own ideal moral standards—not acting altruistically, on conscious and unconscious levels, can result in "shame, guilt, and moral inadequacy," says Linda Silverman (1993). "These overwhelming feelings of moral failure proved to be the first step in the transformation of the personality toward higher level development's unshakable values." (Silverman, 1993, p. 114).

The overarching nature of altruism can also cause this essential dissonance because it challenges inherently, by scientific definitions such as those of Darwin, Hawkins, and Huxley, that which instinct should tell us in our own best interest. Such actions perplexed scientists since Darwin because placing another's welfare before our own flies in the face of any decent survival strategy; yet we are supplied with affective capacities such as empathy and justice that cause us to wrestle with what would otherwise be an obvious decision to act self-interestedly. Helena Cronin (1992) concisely states, "There is a discrepancy between nature red-in-tooth-and-claw and the willing self-sacrifice that many an animal displays." (Cronin, 1992, p.267). This discrepancy exists within us, giving rise to psychological discomfort and associated reduction strategies. Some level of altruistic action may exist as a strategic choice to reduce the aversive distress involved in these two truths, while intrinsically raising the bar for the quality of benefit we seek for our selves.

Choosing to act solely for one's self has a qualitatively different benefit than a more altruistic decision does. One dissonance-reduction strategy might get our immediate needs met, while the other might give us a warm feeling inside and invite repetition. We experience dissonance when faced with such conflicts because we are experiencing two opposing directives. According to positive emotion researcher Barbara Frederickson (2003), our differing "thought-action" tendencies are the product of our evolved emotional adaptations. She states that,

The negative emotions have an intuitively obvious adaptive value: In an instant, they narrow our thought-action repertoires to those that best promoted our ancestor's survival in life-threatening situations. In this view, negative emotions are efficient solutions to recurrent problems that our ancestors faced. (Frederickson, 2003, p. 332).

This is one of the hard-wired truths that we hold inside us. However, we are not always saddled with the same issues with which our predecessors were. Waiting anxiously for the attack of the saber-toothed tiger has eventually given way to more creative and less overwhelmingly stressful concerns—a positive development considering that constant stress is tough on the overall human condition and trumps most other experience. This fact, in and of itself, is a possible reason for developing capacities that counter our survival mindset. However, Frederickson offers us this second truth, holding that positive emotions further us in other respects, following the immediacy of the survival response:

Positive emotions solve problems concerning personal growth and development. Experiencing a positive emotion leads to states of mind and to modes of behavior that indirectly prepare an individual for later hard times. In my broaden-and-build theory, I propose that the positive emotions broaden an individual's momentary mindset, and by doing so help to build enduring personal resources. (Frederickson, 2003, p. 332).

The concept of these two simultaneous truths is comparable to the old metaphorical question of whether to “fish or cut bait” when faced with a strategic decision. On one hand, we are wired to survive, while on the other hand we must prepare to become more effective—and potentially happier—fishermen. Frederickson's theory seems to complement dissonance theories; as we develop a broader thought-action repertoire, we hone our skills in holding more truths simultaneously, while gaining additional skills to better negotiate the inherent discomfort involved in this ability.

We generally receive positive internal cues for performing altruistic acts (Post, 2007); these positive emotional benefits give way to personal resources, according to Frederickson's theory, which makes these behaviors quite valuable to individual and

group evolution. When dissonance reduction equates to altruistic action, we benefit immediately by way of an emotional boost, developmentally by way of building personal resources, and socially by moving beyond a stance of safety and threat to self. From this standpoint, one could posit that altruism intrinsically makes room for more altruism. From the perspective of interpersonal attachment, Mikulincer and Shaver (2005) agree with this notion, observing that, “Many have probably entertained the intuitive notion that if only people could feel safer and less threatened, they would have more psychological resources to devote to noticing and reacting favorably to other people’s suffering.” (Mikulincer & Shaver, 2005, p. 34).

Dissonance perspectives imply that we may behave altruistically because it is the option that offers the least resistance within us—that which is most in line with our beliefs about our selves—while also moving us intuitively away from our archaic survival mode and all of the negative emotions, physiological consequences and myopia that dominate that stance. These perspectives, according to Cooper, “allowed us to see the occasions in which the discomfort that arose from cognitive inconsistency led us to change the view of our world.” (Cooper, 2007, p. 181).

Regarding our potential for change, one could speculate optimistically that egoistic motivations hold more dissonance for us as we develop because we more clearly perceive the discrepancy between operating in self-protective survival mode—a genetic gift from our understandably nervous ancestors—and the experiential evidence that some substantial benefit more powerful than self-gratification is causing us to challenge our innate natures.

Altruistic action can serve as a dissonance reduction strategy that ameliorates the discrepant cognitions involved in certain decisions, but via inherent positive emotional feedback, also renders the conflicts obsolete by developmentally surpassing them. We only use a fraction of our brainpower; perhaps we are being challenged by our interpersonal experiences to tap into the rest of it. Perhaps we understand intuitively that cooperation with others is actually in our own best interest, that altruism exists because it accommodates both individual and collective growth. Let us now take a closer look at this mechanism.

How does this theoretical viewpoint help to explain how altruistic behavior operates in humanity? What does the mechanism look like through this particular lens?

The underlying question of this exploration asks if altruistic action performed in the service of self-interest could lead to more purely altruistic attitudes and qualitatively evolving experiences of those actions. Asked if and how such a mechanism might work, Dan Batson replied,

I suspect the answer is yes, but insofar as I know, there are no clear data. The way I would expect the transformation to work is that by benefiting another one may come to value the other's welfare intrinsically (i.e., as an end in itself, not as a means to some other end). (Batson, personal correspondence, 2008).

In his response, Batson offered, "Such valuing is, I think, a key antecedent of empathy-induced altruistic motivation." (Batson, personal correspondence, 2008). This falls in line with dissonance perspectives, in that what we value (ideals of self) dictate the amount of arousal or discomfort that a situation might generate for us, and the amount of energy that we might pour in to resolving it (Cooper, 2007). This raises the important question: How do we come to place value on others or the standards they represent?

It may be necessary to take a closer look at the notion of ideals before delving deeper into the overlap of self and dissonance. In attempting to explain how altruistic action works within our selves, we must also ask how an ideal becomes an ideal, and consider some explanations that have been offered on the subject. Without some internalized ideal of what our own moral standards might be, we would be completely dependent on external punishments and rewards to move us through day-to-day events.

The concept of some internalized standard with which we compare our actual actions has gone by many different names in many psychoanalytic and philosophical schools. Most of these are reminiscent of the “superego” or “ego ideal,” in Freudian terms, or the “internal working models” of the British school of Fairbairn, Mahler and Bowlby. In his richly reflective (1999) article, *A Rational Superego*, J. D. Velleman observes that Freud’s formulation of the superego as an authoritative moral agency capable of inflicting punishment also provides an alternate capacity as ego ideal. “The superego tells us what to do; the ego ideal gives us a model to emulate.” (Velleman, 1999, p. 531).

Velleman (1999) cites an uncomfortable paradox from Kantian ethics, stating that “We are bound by the authority of morality, according to Kant, and yet we somehow exercise that authority in our own right.” (p. 531). It is up to us, yet we have no choice in the matter. Velleman then refers to Freud’s model of moral development as an answer to this discrepancy, in that it provides the story for how we come to exercise moral authority over ourselves. He explains,

The external authority of morality is represented as the authority of another person, the parent; the autonomous exercise of that authority is represented as the

assumption of the parent's role by a part of the self, in which the parent is internalized. (Velleman, 1999, p. 531).

We idealize another person, usually a parental figure, thereby creating an authority within us that questions our every motive and action. But why would we listen to a fictitious authority? What would drive us to pay any attention to it whatsoever?

According to Velleman's interpretation, the answer is "love."

The main theme of Freud's moral theory is that we are inducted into morality by our childhood experience of loving and being loved—the experience without which we would neither idealize nor internalize a parental figure. Love is our introduction to the fact that we are not alone in the world; and morality as formulated by Kant is our practical response to that fact. (Velleman, 1999, p. 532).

Altruism is an inherent part of the idealization process. A child's love is, fundamentally, "his response to a value that the parents genuinely possess," theorizes Velleman (p. 556). The child responds to what the child recognizes of their love, and that is "their capacity to take another person as an end." (Velleman, 1999, p. 557).

What the child experiences in being loved by his parents, and what he responds to in loving them, is their capacity to anticipate and provide for his needs, often at the expense of their own interest. (Velleman, 1999, p. 556).

Created through altruistic love and respect for another, a moral agency is capable of guiding truly altruistic action; created merely by fear and punitive intimidation, such an agency would continue to limit the self's domain to the egoistic realm, spawning only skills for self-serving and patronizing pseudo-altruistic action. Inner conflict occurs because the ideals that we internalize hold powerful meanings for us—something essential and worthy of moving toward—and so we continue to experience discrepancies as we close the gap between those values and who we are at any given point. It could be deduced from this line of thought that our values and moral authority are descendants of

loving sentiment, and are therefore likely to endorse behaviors such as altruistic action that can result in positive, loving feelings. (Velleman, 1999).

The values that are part and parcel of the ideals of self are inextricably involved in necessary conflict. According to Edward S. Reed (1996) of Franklin and Marshall College, we must look at self-development “as a genuine, often conflict-ridden, developmental process.” (Reed, 1996, p. 13). Reed speaks of dissonance reduction strategies that are quite similar to those described in dissonance discourse, stating, “Self-development is a complex process of appropriation and transformation of some of the values available in one’s milieu, often under conditions of conflict, either over expediencies (needs) or proprieties (choices) or both.” In other words, some process exists in which we use internal and external resources to challenge the assumption of our simpler needs as ends in them selves. (Reed, 1996, p. 13).

Reed might agree with the traditional psychoanalytic school in that we have a significant amount of ambivalence toward our own internalized core values left over from childhood experiences, as “the family setting both structures basic patterns of evaluation and creates long lasting conflicts.” (p. 13). Because we form our ideals from experiences of reality, through the imaginative perceptions of egocentric eyes, they will surely be imperfect, malleable and inherently full of contradiction. Closely related to the reasons posited by other contributors in this exploration, Reed puts forth development as the end game in the moral struggle. “Throughout the course of development, these conflicts and ambivalences fuel developmental change,” states Reed before citing Nucci. “As Nucci points out, the development of a personal domain tends to emerge from such processes of conflict and their resolution.” (Reed, 1996, p. 13).

In postulating his interpersonal theory of psychiatry (1949), Harry Stack Sullivan chose anxiety as the centerpiece for human development. “It is the most unpleasant experience that an infant has, the opposite of euphoria; hence avoiding it is a major motive.” Sullivan explained, “An infant will gravitate toward that which decreases anxiety and away from that which increases it.” Sullivan differentiated between physiological and interpersonal security needs as the two main categories of needs. “Anxiety is aroused when security needs are not satisfied.” Anxiety represents a security problem with which the individual is not able to simply “learn to cope.” (Loevinger, 1976, p. 70). Loevinger interprets Sullivan’s concept of this bind thusly:

He has no way of coping with anxiety. None of his actions are appropriate to remove it, and it interferes with gratification of all other needs. The self-system arises as a means of avoiding and managing anxiety.” (Loevinger, 1976, p. 70).

The self is implicated here as both emanating from and being responsible for anxiety management. It would be difficult to consider subjective strategies to maintain self-consistency without considering the self. According to Sullivan’s theory, the self-system is initially created for anxiety reduction in the absence of a strategy that can be learned by trial and error. Such a system necessarily includes ego defense mechanisms, personality ideals and moral agency. (Loevinger, 1976).

Claude Steele’s (1988) self-affirmation theory suggests that “we are indeed motivated to see ourselves as good and honest people and any evidence to the contrary will upset our equilibrium.” (Cooper, 2007, p. 90). Protecting the integrity of our self-system is an extremely high priority for us, and we generally are the good and honest people that we find it important to be. “We set high standards, have good values, and

generally live up to them. However, there are times when we act in ways that we find problematic.” (Cooper, 2007, p. 90).

This concept is qualitatively different from simpler notions of conscience in that it infers that we need to rationalize our behavior, distort our realities, or to add information in order to protect our beliefs about our selves. It is not simply referring to an internal evaluative agency, such as Freud’s concept of superego, but rather to a motivational force that works toward resolving the conflict, or dissonance, that these constructs produce. We will likely reconsider our reality or, in dissonance terms, “distort our cognitions” in the service of protecting our self-systems. We might also take action that is in line with our self-concept in order to correct the disruption. (Cooper, 2007, p. 91).

In terms of altruistic action, our internalized ideals of self might hold that being helpful and selfless are characteristics that we value. Discrepancies between this altruistic ideal and how we behave when faced with opportunities to act in line with this standard set into motion some strategy for reconciliation that includes either taking action to repair the damage to self-structures, or adjusting attitudes about one’s self or the situation. (Cooper, 2007). One might infer that by compromising our values in order to reduce dissonance, our self-system remains static—or actually regresses away from the pole of ideal altruism; by taking corrective action to fulfill the demands of the ideal, we actually bolster our self-system while keeping in line with a standard that holds these values as sacrosanct. In this way, an altruistic action holds an advantage over an altruistic attitude when developing toward an ideal.

According to Steele’s theory, when the integrity of one’s self-system is threatened, there are many ways in which one might address the discrepancy. “The

problem is not one of rectifying the specific wrong, but in finding some way to affirm the global integrity of the self.” (Cooper, 2007, p. 92). If one feels badly for not helping someone in need when internal ideals of self indicate that one should, some other action, such as donating to charity or assisting a disabled person across the street should suffice at making up for past failures.

Through this lens, any behavior that marginally balances out the gap left in failing to meet our altruistic ideals will work. In other words, if an individual’s sense of self is morally tied to helping others—even if only ideally—then self-esteem may be strengthened by incorporating altruistic action that is not necessarily related to a specific deficit in self-regard. For Festinger, the domain of the reduction strategy had to be specific to the cognition in question, while Steele believed that the reconciliation could also be made at the general level in achieving the desired homeostasis. “As Steele has commented, it’s the war, not the battle, that has to be won.” (Cooper, 2007, p. 95).

Eliot Aronson (1968) held a similar conceptualization of how the self is involved in motivation. Aronson’s self-consistency theory held that cognitive dissonance was aroused by only personally discrepant cognitions, because the self was a necessary player in the game of dissonance. In Aronson’s words,

At the very heart of dissonance theory, where it makes its strongest predictions, we are not dealing with just any two cognitions; rather, we are usually dealing with the self-concept and cognitions about some behavior. If dissonance exists, it is because the individual’s behavior is inconsistent with his self-concept. (Aronson, 1968, p. 23).

Aronson and Steele agreed that the reduction of dissonance is “intimately involved with a person’s self-conception.” (Cooper, 2007, p. 97). They were also in agreement that we aim to maintain a healthy self-esteem, and anything that disrupts this

notion is a threat to that system. Unlike self-affirmation, self-consistency requires, as does Festinger's theory, that repairs are relevant to the cause of the dissonance, but also that it is always related to some failed expectation of self. In other words, Aronson might say that our expectations for our selves dictate that taking actions that fail to address the specific inconsistency that disrupted our self-view in the first place would be, in and of itself, inconsistent and cause for dissonance. (Cooper, 2007). If the strategy itself is grounds for dissonant feelings, then this puts into question the efficacy of many basic coping strategies.

Dissonant cognitions are synonymous with anxiety as far as our inner selves can tell; we are uncomfortable with it and will bring our best tools to bear in relieving it. Dissonance reduction refers to the strategy or strategies, generally unconscious in nature, that constitute this array of tools. These mechanisms could also be known as "defenses" or, as George Vaillant (2000) of Brigham and Women's Hospital would say, "adaptive mental mechanisms." (Vaillant, 2000).

According to Vaillant, "Adaptive defenses are essential to positive mental health. Defenses reduce conflict and cognitive dissonance during sudden changes in internal and external reality." (Vaillant, 2000, p. 90). There are different degrees and levels in which these mechanisms function for us. Among the myriad of services rendered us by our adaptive defenses are restoring psychological homeostasis, deflecting sudden increases in affect and impulses, slowing down the process for mitigating discrepancies that cannot be readily integrated, transmuted irreconcilable conflicts with significant objects (living or dead), softening conflicts of conscience, distorting our perceptions of internal and

external realities, reducing subjective distress and shielding us from life's hard-to-digest details. (Vaillant, 2000, p. 90).

According to the Diagnostic and Statistical Manual of Mental Disorders (APA, 1994), altruism falls into the “high adaptive level” of defensive functioning along with anticipation, humor, sublimation, and suppression. This level of defensive functioning serves to “maximize gratification and allow conscious awareness of feelings, ideas and their consequences.” (APA, 1994, p. 752). This is completely different range of functions than those of the lower level defenses, which generally protect the integrity of our self-system by withholding information—limiting conscious awareness, minimizing feelings, and denying consequences—regarding the facts of our lives. A clear parallel exists between our egoism-to-altruism continuum and the lower-defense-to-higher-defense continuum; as we grow out of the tools of self in managing our responses to life, we are intrinsically drawn to the tools of other-directed growth.

Lower level defenses do serve the noble purpose of protecting our egos when they are most fragile, but are less effective against complexities requiring defensive savvy; they are inclined to extinguish one psychological flare-up while igniting another. Simply denying that some horrible event took place (denial) is qualitatively different than working to inform others so that they might not have to experience such things (altruism). Both exemplify functional adaptations to protect the self from anxieties and insecurities specific to the event, but the more mature defense of altruism contains less potential for becoming maladaptive over time and are more constructive in personal development (Vaillant, 2000).

From a dissonance perspective, the protection of the self is the driving force behind behaving in ways that correspond with an altruistic ideal, and self-esteem both defines and is defined by conflicts and how we resolve them. Stone and Cooper's (2001) self-standards model holds that there are two basic categories of assessing our behaviors; one is "normative," based upon comparison of our behaviors to external and culturally accepted norms, or "personal," based upon one's comparison to one's own internalized values, judgments and ideals. "Personal standards may or may not be similar to normative standards." (Cooper, 2007, p. 106) Our own altruistic ideals are partly derived from normative standards of comparison, as culture and environment play an important role in forming our moral authorities. Likewise, normative standards may represent the collective personal ideals of most individuals in a given culture (Stone & Cooper, 2001).

Stone and Cooper's research on the normative and personal judgments of human behavior shows that self-esteem is involved when we are using personal standards to evaluate our actions. Cooper (2007) writes,

If people use personal standards to judge their behavioral outcomes, and if those outcomes are judged to be unwanted, then they will experience dissonance arousal. Just as various self-theories would predict, the magnitude of that arousal will be affected by what people think of themselves—i.e., by their self-esteem. (Cooper, 2007, p. 106).

Most relevant to this exploration is the idea that different standards will be accessed and employed by different individuals at different places in their development. Much like the tiers of defenses, the standards of comparison we are likely to use run along parallel lines with our egoism-to-altruism continuum. Cooper states that people might lean toward one standard or the other, depending on which end of the continuum they frequent and offers this comparison:

For reasons unique to their own developmental histories, some people are more likely to think of themselves and their unique histories, while others are more likely to carry with them the views and norms of their society and culture. (Cooper, 2007, p. 108).

The point Cooper makes here is that the latter normative characterization causes less dissonance within us because it is not directly tied to our self-concept, neither impacts nor is impacted by issues of self-regard. However, as will be discussed more substantially in our chapter on developmental theory, identifying and conforming to the conventions and expectations of society can eventually give way to a more complex subjective moral deliberation in later stages of our character development. “Laws and conventions make sense only to the extent that they are staked to defensible moral considerations.” (Lapsley, 2006, p. 47).

It appears, through this part of the exploration, that developmentally grounded explanations of why altruistic actions take place also provide the mechanism—the how—of these actions. Thus far, it has been proposed that the creation of the self-system begins by creating a means for anxiety management, including the incorporation of moral ideals by way of internalizing loving others worthy of emulation. The resulting inner conflicts generally lead to resolutions, which lead to new perspectives, which in turn lead to more complex conflicts, more complex resolutions, more complex perspectives, and so forth. Albert Bandura (1991) so concisely describes this dialectical area of dissonance and the acquisition of altruistic attitudes, stating, “Changes in the standards of moral reasoning are produced by cognitive conflict arising from exposure to higher levels of moral reasoning.” (Bandura, 1991, p. 47). Bandura explains,

The presumption is that exposures to moral reasoning that are too discrepant from one’s dominant stage have little impact because they are insufficiently understood

to activate any changes. Judgmental standards of lesser complexity are similarly rejected because they have already been displaced in attaining more advanced forms of thinking. Views that diverge moderately above one's stage presumably create the necessary cognitive perturbations, which are reduced by adopting the higher stage of moral reasoning. (Bandura, 1991, p. 47).

In this sense, altruistic attitudes are adopted because we are exposed to some new truth regarding our moral behavior that is not easily—yet could feasibly be—accommodated by our present self-structure. At some point, stepping up to the next stage in development is the strategy that offers the least resistance to the self. We may defend our selves against the discrepancy through present-level strategies, or we may redefine our selves through moving developmentally toward those altruistic ideals, opening up the possibility for new strategies. It may be proposed that by taking altruistic action we intrinsically expose ourselves to views of ourselves that are beyond our present selves, yet are harmonious with our internalized altruistic ideal. The resulting discomfort is best reduced through assuming a more complex altruistic attitude, which inherently begets more complex altruistic action.

These are mechanisms that operate naturally within us, but can the developmental challenges necessary for structural growth be fostered in a clinical setting? The following section will examine further determine whether or not altruistic dissonance mechanisms are useful to consider for psychodynamic clinical work.

Does this line of thinking offer support for altruistic action as a link to well-being that could serve as a self-perpetuating clinical intervention?

Altruism researcher, David G. Myers (1990), once proclaimed,

Happiness makes people less self-focused and more altruistic. But it works the other way around too. Doing good makes us feel good. Altruism enhances our self-esteem. It gets our eyes off ourselves, makes us less self-preoccupied, gets us

closer to the unself-consciousness that characterizes the flow state. (Myers, 1990, p. 195).

It is difficult to deny the truth of Myers' words, yet the tendency of modern Western culture and of psychotherapeutic tradition is to turn ourselves inward, expending self-focused energy on conflicts better resolved by realigning one's actions with foundational ideals such as altruism.

According to Cooper, psychotherapy works "precisely because of the arousal and reduction of cognitive dissonance." (Cooper, 2007, p. 157). Fostering more adaptive dissonance reduction tools in individuals who struggle with the ineffectuality of the cruder tools of self—approaches that are no longer up to life's increasing complexity—is a main tenet of psychodynamic therapy. Making this transition to a higher level of defensive functioning not only increases one's skill set (Vaillant, 2000), but according to Dabrowski, these moral milestones bring new freedoms and capacities. In his (1967) book, *Personality Shaping Through Positive Disintegration*, he explains, "Objectivity in relation to oneself and others increases, therefore, and also the independence of the feelings, appraisals, and behavior from the lower instinctive structures and primitive reactions." (Dabrowski, 1967, p. 165).

One might also posit that many chronic issues of aversive distress will continue and worsen without the development of positive strategies to reduce them; therapy may be a place where an individual identifies other-oriented solutions that have been disallowed by fear-activated defenses such as denial or repression. It could also serve as a vehicle for renewing valued ideals that may have been corrupted by poor behavioral

modeling or deficient cognitive structuring by caregivers or other influential figures in early years.

Thompson, Meyer and McGinley (2006) explain that, “the sight and sound of another person’s distress is a motivationally complex event for young children.” (Thompson, Meyer, & McGinley, 2006, p. 279). In the best-case scenario, the child develops “sympathetic feelings and pro-social initiatives,” but without modeling and structure, a child might instead “ignore, laugh at, or aggress toward another in distress, or seek comfort for themselves because of threats to their own emotional security.” (Thompson et al., 2006, p. 279). If an individual does not gain adequate tools for positively addressing this empathic distress, adulthood may hold a great deal of dissonant cognitions ineffectively bombarded by egoistic remedies.

Given that the arousal of dissonance is necessary to personality formation (Dabrowski, 1967; Bandura, 1991; Silverman, 1993; Mendaglio, 2002), it could be implied that by identifying our more persistent discrepant cognitions that one may better understand the reduction strategies—the defense mechanisms and self-regulation skills—that an individual might benefit from cultivating. If we can see where people become led astray from growth opportunities by a lack of non-egoistic approaches, then we can see where introducing altruistically aligned actions may help in attaining higher level functioning.

E.T. Higgins (1987) tried something similar when he developed his dissonance-based self-discrepancy theory, which details a “framework for relating patterns of discrepancies to distinct negative emotional responses.” (Tangney et al., 1998, p. 256).

“Self-discrepancy theory postulates that we are motivated to reach a condition where our self-concept matches our personally relevant self-guides.” (Higgins, 1987, p. 321).

Higgins approached this impressive task by first categorizing negative affective responses to self-discrepant cognitions into the two clusters of “dejection-related emotions,” which include feelings that are traditionally associated with depressive moods, and “agitation-related emotions,” which include feelings generally associated with anxiety. (Higgins, 1987, p. 319). He viewed the self-concept as one’s actual self from one’s own standpoint (“actual/own”), referring to the other combinations of “standpoints on the self” (our own or internalized others’) and “domains of the self” (actual self, ideal self, and ought self) as “self-guides,” which could be reasonably equated to subsets of Freud’s superego and ego ideal. (Higgins, 1987, p. 321).

Self-discrepancy theory is similar to Cooper and Stone’s self-standards model in that it considers multiple standards, such as normative and personal evaluative stances, as motivational forces in how we create and approach conflict. Also similar is the notion that different standards engage one’s self-regard differently, resulting in qualitatively nuanced discrepancies (Cooper, 2007). “James (1890) pointed out that standards both directly prompt action and, through their use in self-evaluation, arouse emotions that are themselves motivating.” (Higgins, 1987, p. 321).

June Price Tangney (1998) and her associates were particularly interested in Higgins’ predictions for guilt and shame, their distinctions, and their relation to self-discrepancies. “In a nutshell, shame involves a focus on the self, whereas guilt involves a focus on a specific behavior.” Shame, in this light, “involves a global negative evaluation

of the self.” Guilt, on the other hand, “involves a negative evaluation of a specific behavior, somewhat apart from the global self.” (Tangney et al., 1998, p.257).

According to Steele’s self-affirmation theory, dissonance is reduced by “finding some way to affirm the global integrity of the self.” (Cooper, 2007). As previously proposed, altruism is fundamental to the process of idealization and internalization (Velleman, 1999) and, therefore, is a value held—to some degree—by most everyone who has experienced early ego developmental processes. Revisiting our case of Thomas Hobbes, let us imagine that he enters into therapy admittedly suffering from feelings of shame. Clinically suggesting that he incorporate volunteering at a local shelter into his weekly routine, in Steele’s view, may indeed be a means of helping him to restore his self-system, provided that other-directed behavior follows a valued ideal that he—like most others—possesses on some level (Steele, 1988; Velleman, 1999).

It could be speculated that this altruistic strategy may be a better fit for Hobbes’ shame than for any guilt that he may hold, according to Cooper and Stone’s self-standards model, because he is judging himself with deeply seated ideals. Constructs like the may correlate more with abstract values rather than with specific behaviors (Tangney et al., 1998). Hobbes’ self-esteem is far more vulnerable to shame than to guilt; self-esteem is tied to his personal—not his normative—standards of evaluation. From this platform it is a short leap to inferring that his shame-related discrepancies are born of more personal standards of evaluation, while any guilt-related discrepancies seem to be more closely tied to normative standards that may impact him (Cooper, 2007). Guilt feels more like a reaction to outside factors, while shame seems to emanate from the self, toward the self (Tangney et al., 1998). Although altruistic action could be beneficial for

most everyone, it could, hypothetically, hold especially significant restorative value to those with low self-esteem and harsh personal standards of evaluation.

One would be hard-pressed in finding solid reasons why altruistic action such as volunteering in the community would be counter-indicated. In fact, a great deal of research (Wink & Dillon, 2007; Kahana et al., 2004; Allen et al., 1997; Musick & Wilson, 2003; Greenfield & Marks, 2004; Lawler et al., 2003; Liang et al., 2001; Harlow & Cantor, 1996; Schwartz et al., 2003) has shown that people of all ages who volunteer regularly enjoy benefits that include living longer, faster physical recovery, less depression, less loneliness, less anxiety, less somatic complaints, improved self-esteem, more subjective happiness, better mood, social competence, academic improvements, sense of purpose, reduced self-absorption, decrease in substance abuse, less antisocial behaviors and consequent social support (Post, 2008).

Yet, our more primitive instincts for self-preservation, in effect, steer us away from all of that. Stephen Post says of this discrepancy, “self preservation and love of neighbor can be in conflict, and it is here where real loss to the self comes into play and here that the love for another is measured.” (Post, 2008, p. 35). Along related lines, Harmon-Jones and his associates (1996) pursued a consistency argument suggesting that we are intuitively oriented to opt for action but are waylaid by discrepancy. “He suggests that people acquire a stance toward the world that makes it adaptively better to act on the world without ambivalence and conflict.” (Cooper, 2007, p. 81).

It is a need of our evolutionary nature, according to Harmon-Jones’ theory, “to have an unequivocal stance toward action in the social and physical environment.” (Cooper, 2007, p. 82). The action orientation concept would indicate that we want to be

altruistic and be active toward that ideal, but we become sidetracked by confusing messages. “Inconsistent cognitions interfere with our action tendencies and thus create a negative emotion, motivating us to rid ourselves of the inconsistency.” (Cooper, 2007, p. 81). By this logic, not taking altruistic action is reason enough for cognitive dissonance; therefore, action should prevail over attitude adjustment as the preferred route to resolving altruism-specific discrepancies (Harmon-Jones et al., 1996).

We naturally want to help other people and this fits with our earliest formed personality ideals. But, we often forego altruistic action in favor of more egoistic strategies because, until we experience the perspective of taking that action, some parts of our internal and external worlds warn us against the risk. Altruistic action as a dissonance reduction strategy generally loses out to more egoistic strategies when we have not yet experienced the benefit of being that much closer to the altruistic ideal—we don’t know what we are missing because we haven’t been there yet. Moving toward an ideal in spite of inevitable confusion is in keeping with prescribed altruistic action as a means to living more harmoniously with one’s self.

Dissonance concepts of motivation generally support that altruistic action may be a catalyst in affecting enduring change on a developmental level (Aronson, 1968; Cooper, 2007; Festinger, 1954; Higgins, 1987; Steele, 1988). Issues of self-regard— which appear in many symptom constellations—are of particular salience to such an intervention due to the self-system constructs they employ. Altruism is instrumental in the process of internalizing the more fundamental ideals of most individuals (Velleman, 1999), and is therefore seated at the core of one’s personal self-evaluative standards (Cooper, 2007). We may also have a natural orientation toward action. Altruistic action is attractive to the

self because it harmonizes with both the inherent altruism of our rudimentary ideals as well as our innate predisposition to reach those ideals (Harmon-Jones et al., 1996). These actions spur the positive emotions necessary in expanding our “thought-action repertoires” to prepare creatively for life’s challenges rather than simply waiting stressfully for the next one (Frederickson, 2003).

Self-centered solutions to life’s challenges serve their limited functions, yet may impede our “independence from the feelings, appraisals, and behavior from the lower instinctive structures and primitive reactions.” (Dabrowski, 1967, p. 165). Self-discrepancies, in their various manifestations, are the inner conflicts between the internal agencies, ideals and actual experiences of self (Higgins, 1987). By utilizing higher-level defenses such as altruism to resolve these conflicts, we “maximize gratification and allow conscious awareness of feelings, ideas and their consequences.” (APA, 1994, p. 752). In contrast, our more primitive and egoistic defenses generally prevent us from acknowledging dissonant cognitions and unwanted feelings (Vaillant, 2000), keeping the ego intact yet developmentally stagnant.

Altruistic action can add a healthy dimension to an individual’s experience while helping to leap past instinctual impediments that would have us clutching the pole of self-interest for dear life. Clinicians are in the unique position of helping to dispel internal myths regarding the risks of taking such beneficial steps. By encouraging reasonable and appropriate altruistic action in the clinical setting, therapists also create psycho-educational opportunities for clients to learn how such endeavors may help them to transcend present issues and generate meaning and connection to the world. They may come in for help and leave helping.

CHAPTER VI

DEVELOPMENTAL THEORY AND ALTRUISM

The path of least resistance is a rather duplicitous notion when it comes to altruism. Deciding to act self-interestedly when faced with an opportunity to behave altruistically appears, on the surface, to be the easier option. It is certain that not helping others takes up less energy and time than it would to help them. By not acting altruistically in such situations we know that we get nothing from the experience—aside from possible self-preservation—but, at least we know what we are getting. Or do we?

Nineteen student-subjects of a social-psychological experiment at the University of Oregon (Moll et al., 2006) were each given one hundred dollars, a portion of which could be spent on charitable organizations from a reasonably long list of causes. While performing this activity, they underwent functional magnetic resonance imaging (fMRI), which “revealed that making a donation activated the mesolimbic pathway, the brain’s reward center, that is responsible for dopamine-mediated euphoria.”(Moll et al., 2006). Pleasure centers of the brain—the same areas triggered by having sex or eating delicious food—lit up robustly during altruistic acts. However, the two students who gave most generously, and who tested as being more disposed to other-oriented activities, received the least emotional benefit, or “neural kick,” as Jim Holt says (Holt, 2008, p. 11).

Do the most altruistic individuals receive the least emotional benefit, or is something more important than “warm feelings” taking place? Cognitive-developmental theories of altruism may hold the clue as to why, how, and to what possible ends altruistic

phenomena might occur, as well as providing a theoretical crossroad for many theories that historically claimed mutual exclusivity. According to Sharabany and Bar-Tal's (1982) *Theories of the Development of Altruism: Review, Comparison and Integration*,

The cognitive-developmental approach assumes that the developmental trend of the individual is the movement from a phase of being illogical, egocentric, and selfish-hedonistic to a phase of being logical, empathetic, and moral. The achievement of a high stage of cognitive, social perspective, and moral development is a necessary precondition for individuals to be able to perform altruistic behavior. (Sharabany and Bar-Tal, 1982, p. 64).

In other words, we are inclined to become less self-directed in our thoughts and actions, and that improved cognitive, social, and moral skills are necessary for truly altruistic action to be possible. But what part does altruistic action play in improving our cognitive, social and moral skills? Without our moral ideals, what meaning would be attached to the struggle to improve?

Again, it may be important to keep Monroe's (1996) definitional concerns in mind, in that altruism, as we are to understand it in its pure form, is the ideal at one end of a continuum. In this way, actions that appear similar may be driven by various combinations of egoistic and altruistic motives, and therefore fall further from or closer to that ideal. (Monroe, 1996). Our continuum works with cognitive-developmental concepts that some altruistic actions are more altruistic than others, depending on how far one has come along. This is an especially important distinction in considering the clinical suggestion of altruistic action for real people seeking psychological relief. According to Krebs and Van Hesteren (1992), "Children are expected to display different types of altruism from adults, and immature adults are expected to display the forms of altruism

characteristic of children.” (Krebs & Van Hesteren, 1992, p. 163). Expectations of behaviors must match capacities.

Cognitive-developmental concepts revolve around stage sequential structures that map out the incremental steps on the journey toward the pole of ideal altruism, while identifying the specific qualities inherent to those steps. “People normally pass through several stages of development during their lives in an invariant sequence, acquiring cognitive structures that enable them to interpret events in qualitatively different ways,” according to Dennis Krebs and Frank Van Hesteren (1992). “Each succeeding stage structure has a greater range of applicability and is more cognitively complex, more highly organized, and more adaptive than its predecessors.” (Krebs & Van Hesteren, 1992, p. 150).

How does this theoretical viewpoint help to explain why altruistic behavior takes place?

Cognitive-developmental theories provide the possibility that altruism represents the alpha and omega of human experience; we are imbued with its valued essence from the start, influencing all the decisions and evaluations we make for ourselves on the way to actualizing it in its ideal form (Blasi, 1980; Dabrowski, 1968; Van Hesteren, 1992). Altruistic love from caregivers may be the first ideal that an individual experiences as being worthy of internalizing as a guiding personality structure, absorbed reflexively because such capacities represent physical security in the world and anxiety management in the affective realm (Velleman, 1999). In this fundamental way, altruistic values become central players in structuring and balancing our identity in the face of recognizing through differentiation processes that we are social beings (Van Hesteren, 1992).

In very much the same manner as described by Steele, Aronson and Cooper in our dissonance chapter, Blasi (1980, 1984) posits that our motivation to act altruistically is a product of “self-consistency strivings” and the closing of the “is-ought” gap within our moral identity (Blasi, 1980; Blasi, 1984). Similar concepts to self-consistency strivings in developmental spheres are “highly internalized moral commands” (Kohlberg & Candee, 1984), the “self-perfection instinct” (Dabrowski, Kawczak, & Piechowski, 1970), and “self-actualization” (Maslow, 1970). For Harry Stack Sullivan’s (1953) ego development theory, “The self-system tends to preserve self-consistency by means of selective inattention to facts inconsistent with the current level of development.” (Loevinger, 1976, p. 60). Selective inattention refers to the lower-level defenses (denial, repression, etc.), where keeping uncomfortable cognitions away from the self-structures is the priority, whereas higher-level defenses foster awareness, acknowledge consequences and define personal responsibility (Vaillant, 2000).

Blasi (1984) explains that “responsibility and integrity” are concepts that bridge our ideals with our actions, stating,

These two concepts are closely related and derive their meaning from a view of moral action as an extension of the essential self into the domain of the possible, of what is not but needs to be, if the agent has to remain true to himself or herself. (Blasi, 1984, p. 132).

Responsibility, in this view, compels us to act in accordance with our most central values, while integrity is the goal of retaining global equilibrium of the self as a whole. The more centrally a value is held—and altruism is generally seated in that central location—the more essential to the concept of integrity it is and the more responsible one feels to act upon it (James, 1982). As with dissonance reduction, failure to meet such a

responsibility or to uphold essential self-structures will require some compensatory adjustments or defenses appropriate to one's level of functioning (Cooper, 2007).

Contrasting some aspects of the Harmon-Jones et al. (1996) concept of action-orientation—that we are predisposed to act—but are prevented by cognitive conflict, Snyder and Kendzierski (1982) theorized that cognitive conflict leads to “relevance strategies” which “will effectively enhance correspondence between attitude and behavior to the extent that they successfully induce individuals to adopt a ‘believing means doing’ orientation to choosing their actions.” (Snyder & Kendzierski, 1982, p. 181). In this sense, altruistic action could be seen as being the obvious choice for operationalizing our ideals and inching us forward developmentally.

Higgins and King (1981) make pertinent altruism's central location as a value in their concept of “construct accessibility,” which refers to our ability to use stored constructs within one's identity structure to process information. Individuals who are in later stages of cognitive and moral development also enjoy fuller access to self-constructs that hold central values (Higgins & King, 1981). “The ideal altruistic personality is characteristically considered to have ready access to a rich and highly elaborated array of prosocial-altruistic constructs,” claims Van Hesteren. “Prosocial-altruistic constructs have a high activation potential because of the central significance of altruism as a value and aspect of personal identity.” (Van Hesteren, 1992, p. 180).

Altruism as a core values has been there, according to Dabrowski (1967), “since the birth of personality.” Immutable values such as altruism “have already been accepted and experienced by an individual as central ones and which constitute for a necessary condition for the meaning of existence.” (Dabrowski, 1967, p.46). Other values may

come and go, but those absorbed intrinsically, by virtue of their universal appeal, will become part of the self-concept.

In response to the question of why altruistic behavior exists in us, developmental theorists might propose that recognizing loving behavior appeals to our innate desires to seek attachment, interpersonal connectedness, and proximity to caring others (Bowlby, 1969; Oliner, 1992), while also providing important details of the motivational blueprint for our cognitive development (Van Hesteren, 1992). Cognitive development, in turn, repays the self by bringing it closer to that loving ideal with the capacities to get there.

It has been theorized that altruism is somewhat of a sleeping giant within us, always waiting to be awakened; altruistic ideals stand as central values that guide many of the choices that we make (Dabrowski, 1968). They disrupt our regressive tendencies to be egoistic and provide us with challenging moral situations to navigate (Kohlberg, 1964), while all the time holding up a snapshot of the moral self—autonomous, loving, and wise—that we wish to become. The next section will focus on the step-by-step mechanism of how such a mechanism develops within us.

How does this theoretical viewpoint help to explain how altruistic behavior operates in humanity? What does the mechanism look like through this particular lens?

In many ways, cognitive-developmental theories are quite malleable, while also offering us a very clear and stable structure from which to hang the myriad of ideas that accompany them. Krebs and Smolenska (1992) claim that many minds have contributed to the theoretical mix:

They suggest that the stages of development described by theorists such as Maslow, Piaget, Loevinger, Kegan, Selman, Hoffman, Haan, Kohlberg, Gilligan, and Eisenberg correspond to one another along basic structural dimensions, and

that each set of corresponding stage structures exerts a press toward a different type of altruism. (Krebs & Smolenska, 1992).

It is for this reason that Krebs and Van Hesteren's (1992) developmental-
interactional approach to altruism has been selected as the structural base of this section.
Although the fundamental assumptions of cognitive-developmental theory apply, their
model departs from the norm, assuming...

...(a) that individuals retain old stage structures after they acquire new ones, (b)
that individuals may acquire different modal stages in different domains of
development, and (c) that the forms of altruism individuals display are a product
of the interaction between the stage structures they have acquired and the
demands of the situations they face. (Krebs & Van Hesteren, 1992).

The developmental-interactional lens is quite appropriate for the proposed
therapeutic ends of altruistic intervention strategies in that it allows for regressive
behavior to be an active part of the process; we are not always bringing our greatest
acquired abilities to bear at all times, and some situations may actually call for us to
invoke cruder structures (Van Hesteren, 1992).

The theory does not offer stages in terms of age ranges, therefore leaving a
broader interpretation of developmental arrest and proliferation, as well as making
behavioral correlations to maladapted adults (It may be of some utility to consider
relevant clinical issues in lieu of simple levels of maturity). The model is also sensitive to
the differential learning domains—that fact that “individuals may process different types
of information in different ways”—that also add wonderful complexity to our world
(Krebs & Van Hesteren, 1992, p. 149).

The first of the eight stage structures (Stage 0) presented in Krebs and Van Hesteren's model is the stage of "Undifferentiated Affective Responsiveness," in which "survival-maintaining prosocial behaviors such as smiling and cooing are emitted reflexively in response to stimuli associated with the satisfaction of basic physiological needs." (p. 156). Here, the individual has yet to encounter the harsh reality that they may not be the center of the universe and differentiating oneself from the environment will activate that process (Loevinger, 1976). Primitive empathic experiences exist, but because the self-system is not yet created, there is not a way to make meaning of them. (Krebs & Van Hesteren, 1992, p. 156). Altruistic action at this level is rated at "Stage 0", as it may exist only abstractly; the individual does not have the capacity to evaluate motivational forces in a way that meets definitional criteria (Monroe, 1996).

The second stage (Stage 1) is the stage of "Egocentric Accommodation," the goals of which are "to do what one is supposed to do, to ingratiate oneself to those in power, and to foster feelings of security." Altruistic action at this level consists of confused responses to overt distress—similar to those of pleasing the demands of an authority figure—that are "accommodating, physical, material, superficial, inappropriate and egocentric (the individual gives others what he or she would want)." Altruistic behavior at this stage is generally imitative of those in authoritative roles, directed at receiving positive feedback, and empathic only to the extent of relieving personal distress (Krebs & Van Hesteren, 1992, p. 156).

The third stage (Stage 2) is the stage of "Instrumental Cooperation," in which the altruistic objective "is to give in order to get." Altruistic action at this level consists of seeking concrete gains in a fair, cooperative manner by doing one's share of giving with a

“tit for tat reciprocity” comprehension. Altruism-specific skills such as assuming others’ perspectives and identifying standards of evaluation are being exercised somewhat egocentrically until they are brought back under the influence of central values. Understanding another’s subjective needs and motives demonstrates evolving empathic capacity in this stage, but only insofar as it might be considered in matters of concrete, practical, and rule-dominated exchanges of goods or actions. Moral reasoning is fleeting, as “exchanges tend to be situationally specific and temporally constrained.” (Krebs & Van Hesteren, 1992, p. 156).

Reciprocity is a term more common to evolutionary biology (Dawkins, 1976; Hamilton, 1964) and economics (Axelrod, 1984) than to psychological theory, yet developmental theories view the exchange of benefits as an inextricable factor (Gilligan, 1977; Gilligan, 1982; Kohlberg, 1976). That said it is clearly the highest form of altruistic behavior available in the “Instrumental Cooperation” stage. It is certainly far from ideal, in that it implies reward or payback of some kind in the future, but it does appear to engender necessary skills for future moral growth. Less direct forms of reciprocity, according to Vine (1992), “encourage moral systems” and are sustained by “a readiness to internalize the group’s expectations—for altruism, the control of selfishness, and pulling one’s weight.” (Vine, 1992, p. 80).

The fourth stage (Stage 3) is the stage of “Mutual Altruism,” in which reputation is the altruistic goal, with the motivation to “sustain one’s conception of oneself as a good person in the eyes of those with whom one identifies.” Altruistic behavior in this stage consists of actions that are “aimed at fulfilling shared role obligations, avoiding social disapproval, sustaining a good reputation, upholding bonds of friendship, securing one’s

place in one's reference groups, conforming and behaving in a socially acceptable manner." (Krebs & Van Hesteren, 1992, p. 156).

Interestingly, this stage involves somewhat of a pendulum swing of morality's importance following the more "instrumental" motives of Stage 2. The individual has experienced the real and is now, as in Piaget's "Early Formal Operations" stage, "reorienting" oneself toward the altruistic ideal. This idealism is guided by flatly applied "values of trust, care, friendship, altruism, cooperation, loyalty solidarity, intimacy and a sense of belonging." (Krebs & Van Hesteren, 1992, p. 156).

The individual begins to interpret events with more of a "we" consciousness than a "me" consciousness, as group membership is interpreted as holding a growing importance; this causes cognitive discrepancies for the person because the importance of others to the self is now qualitatively different than others being a pragmatic means to egoistic ends. The discrepancy is actually quite moderate, but dissonant enough to warrant accessing central self-structures to reconcile. Bandura (1991) explains this mechanism thusly:

According to this equilibrium mechanism (Piaget, 1960), discrepancies between the cognitive schemas that children already possess and perceived events create internal conflict that motivates exploration of the source of discrepancy until the internal schemas are altered to accommodate the contradictory experiences. (Bandura, 1991, p. 61).

Studies initiated by Kohlberg (1969) revealed that when faced with moral dilemmas slightly beyond their current stage constraints, individuals "are likely to adopt modeled views one stage above their own." (Bandura, 1991, pp. 62-63). Social interactions in one stage give rise to self-other experiences that do not readily mesh with already acquired affective and cognitive structures, yet do agree with unconscious

fundamental values at one's core. The strategy for bridging this gap is to reestablish one's self-concept through accessing one's internal moral guides; one must realize a higher stage structure that offers perspective and meaning with more advanced moral considerations of self and other (Kohlberg, 1969).

Kohlberg (1964, 1969, 1976) formulated a stage theory of moral and cognitive development in which, according to Loevinger, "qualitatively different modes of role taking, the cognitive abilities to take into account the other's perspective in order to solve moral dilemmas, are considered the determining factor in unfolding moral structures." (Loevinger, 1976, p.43).

The point here is that Kohlberg's "role taking" mechanism implies that empathic altruistic action gets us there; increasingly complex altruistic action, therefore, implies increasingly complex cognitive ability, which in turn implies more adequate, effective, and deliberative altruistic action, and so forth. As we improve our access to central values, we incorporate an overarching "believing means doing" attitude toward altruistic action (Snyder & Kendzierski, 1982, p. 181), as will be evidenced by the final stage's ethic of responsibility and service (Krebs & Van Hesteren, 1992).

The fifth stage (Stage 4) is the stage of "Conscientious Altruism," in which the altruistic goal is "to fulfill internalized social responsibilities." Altruistic action at this level involves employing an internalized sense of social responsibility and conscience. In this stage, one is oriented toward ends such as, "fulfilling internalized, self-defining obligations to assist in maintaining the institutions of one's society even when such obligations violate the expectations of reference groups." (Krebs & Van Hesteren, 1992, p. 157). The norms that protect and maintain the welfare of one's society and self are

what one is upholding; one is aware of the complexities of social relationships and values “conscientiousness, responsibility, honor, and good citizenship.” (Krebs & Van Hesteren, 1992, .p. 157).

Loevinger (1976) explains the quality of this altruistic perspective in the “Conscientious Stage” of her stage theory, writing,

Thus rules are no longer absolutes, the same for everyone all the time; rather, exceptions and contingencies are recognized. A person at this stage is less likely than the Conformist to feel guilty for having broken a rule, but more likely to feel guilty if what he does hurts another person, even though it may conform to the rules. (Loevinger, 1976, p. 21).

Nations as a whole seem to operate at this level; it is frightening to realize that with the capacity to assess the rules for oneself, we are capable as a group of adjusting them to suit our ill-conceived collective reactions—sometimes even more regressive as a group—and clinging to lower-level defensive and self-protective structures. With the power of choice comes the power to choose incompetently, despite our increased abilities to make distinctions between moral standards and social norms.

The sixth stage (Stage 5) is the stage of “Autonomous Altruism,” in which the altruistic goal is “to uphold self-chosen, internalized utilitarian values.” Altruistic action in this stage is based on a “deep appreciation of individual differences, which mediates enhanced tolerance, and extends principles such as liberty, equality, and justice to all.” (Krebs & Van Hesteren, 1992, p. 157). The main difference between “Conscientious” and “Autonomous” stages of altruism is the internal subordination of external laws to higher order principles and essential values. External laws of society contain discrepancies best resolved by realigning the self with the ideal in order to shore up self-structure and direct energies (Blasi, 1984). This stage is also marked by the quantitative expansion of groups

and individuals with which one identifies; deeply held beliefs and values such as human dignity and equal rights are held impartially and in a more universal perspective than in previous stages (Krebs & Van Hesteren, 1992, p. 157).

The seventh stage (Stage 6) is the stage of “Integrated Altruism,” in which the altruistic goal is “to foster perfectly balanced and integrated social relations.” At this level, “Altruism is guided by humanitarian principles that prescribe that individuals give in accordance with their abilities and receive in accordance with their need.” The individual has become at one with humanity, transcending any previously held self-other dichotomies, and “the self’s interests become integrated with the interests of others.” This stage is characterized by proactive altruism—altruistic action—performed in the service of bettering the condition of humanity, of which one is an inclusive member (Krebs & Van Hesteren, 1992, p. 157).

The stage of “Integrated Altruism” is very closely paralleled by the Categorical Imperative of Kantian ethics. Homiak cites Kant’s Imperative, stating, “Act in such a way that you treat humanity, whether in your own person or in the person of any other, always at the same time as an end and never merely as a means.” (Homiak, 2007). Here we see that Kant has addressed the details that separate this stage of altruism from lower stages. Notably, Kant includes the self in the humanity to whom we should be kind. This plays an important role in the psychological aspects of normal and pathological altruism, as maintaining the self as part of being an effectual altruist is an inherent responsibility to being useful to others. Self-forgetting and unnecessary self-sacrifice can be born of unhealthy disrespect for oneself, diminishing one’s capacity to behave with authentic altruism (Seelig & Rosoff, 2001).

The final stage (Stage 7) is the ideal stage of “Universal Love,” in which the altruist has a dedication “to mesh with an ultimately transformed and coordinated nonviolent world.” This stage represents the pole of ideal altruism, which may only exist in principle or in idealized structures unmediated by the constraints of reality. Altruistic action is first priority, emanating from an ethereal, and perhaps spiritual, feeling of interconnectedness with all of humanity. At this ideal stage,

Altruism is selfless, stemming from *agape*, an ethic of responsible universal love, service, and sacrifice that is extended to others without regard for merit. Stage 7 altruism upholds the dignity of its recipients, freely giving up, perhaps not even considering, the self’s just claims. (Krebs & Van Hesteren, 1992, p. 158).

Bert, a Dutch rescuer of Jews during the reign of Nazi Germany, said, “You help people because you are human and you see a need. There are things in this life you have to do, and you do it.” (Monroe, 1996, p. 197). From her qualitative study of heroes, philanthropists, and rescuers of Jewish people from Nazi Germany, Monroe (1996) reveals that the common denominator between all later stage altruists is what she calls “perceptions of a shared humanity.” Monroe writes, “Altruists share a view of the world in which all people are one. This world view appears to bond them to all humanity in an affective manner that encourages altruistic treatment.” (Monroe, 1996, p. 198).

This “oneness” is an interesting conundrum for altruism research, in that “self-other overlap” forces us to reconsider the distance between egoism and altruism (Cialdini et al., 1997). Likewise, it also touches on stage development in that oneness, like altruism, seems to exist at the beginning and end—the alpha and omega—of development. Maria Jarimowicz (1992) elaborates on the two self-other phenomena:

The first type is based on an inability to differentiate self from others. Stemming from a low level of self-structure development, it implies an absence of personal

standards of evaluation and internal sources of motivation and reinforcement. (Jarimowicz, 1992, p. 194).

As in Stage 0 of the selected model, differentiation hasn't happened yet, nor has the development of a self-system necessary to cope with that step. We are born believing—quite literally and magically—that we are one with everything and everyone. “The second type of altruistic involvement is based on well-consolidated self-structures, indicating well-developed personal standards and internal mechanisms of regulation.” (Jarimowicz, 1992, p. 195). This brings us full circle to the altruistic ideal of later stages, where all are worthy of our high quality altruism, as self and other are fully differentiated yet part of a universal collective.

Cialdini et al. (1997) considered that through taking the perspective of another—the empathic skills necessary for altruistic responsiveness—the boundaries between self and other become blurred. They posited that via the empathic process, “one comes to incorporate the self within the boundaries of the other.” They expose the crux of the matter, stating,

If true, such a process would seriously undermine the logic of the empathy-altruism hypothesis. That is, if the distinction between self and other are compromised by perspective taking, then so is the distinction between selflessness and selfishness. (Cialdini et al., 1997, p. 482).

“Altruism is both “pushed” out of people by internal stage structures, and “pulled” out of people by altruism-evoking situations.” (Krebs & Van Hesteren, 1992, p. 161). The mechanism for altruistic behavior, through a cognitive-developmental lens, seems to be an impossible dream infused in us, fortunately, before we have the capacity to judge it. It can be “pushed” and “pulled” from us throughout our development because it has been there all along. “The origins of altruism are likely to evolve, as Batson and

Shaw suggest, in the context of an attachment relationship in which parent and child forge bonds that create, in their terms, a we-feeling,” agrees Carolyn Zahn-Waxler (1982). Just as we are building a system that will enable us to humbly step away from the pole of self-interest on our continuum, the ideal of the opposite pole is embedded into our core through a loving connection. Zahn-Waxler states,

These early forms of cooperative awareness between caregiver and child begin to create a world of shared meaning, empathic understanding and appropriate linking of one’s own emotions with those of others that then generalize beyond the parent-child dyad. (Zahn-Waxler, 1982, p. 156).

Zahn-Waxler’s description of the world created between caregiver and infant reflect an uncanny parallel with the characterization of the world as seen by the ideal altruistic personality. The strange paradox in altruism is that the closer one gets to the ideal, the less one requires reward; the shorter the stick becomes, the less necessary is the carrot. One might speculate that the more altruistic one becomes, the less discrepancy exists between the pre-self fantasy and the self-realized ideal. Without discrepancy, relief is obsolete and internal feedback becomes passé. The carrot becomes unnecessary. In the case of the altruistic students linked to brain-imaging scans in Oregon, they received less of a “neural kick” from doing the right thing because they didn’t need it like the others might have; they are developmentally on track or ahead of the game—realizing their ideals with notable self-consistency—and on some cognitive level, they know it.

Does this line of thinking offer support for altruistic action as a link to well-being that could serve as a self-perpetuating clinical intervention?

One may consider the road map of development provided by the stages of the previous section and immediately conjure certain personalities that have been

encountered in one's own interpersonal experiences. One might be surprised at times, considering the difficult relational experiences for some individuals, that people are as kind as they are. Likewise, one may be suspect of the moral origins of those who seem to struggle behind a weighty barricade of self-interest with only blunt tools at their disposal. Discussing altruistic perspectives could be an excellent point of access into the experience of another, while the suggestion of altruistic action may provide fodder for conversation.

Eisenberg, Spinrad, and Sadovsky (2006), point to affect regulation as being closely connected to altruistic behavior. In an empathy-arousing situation, the nature of one's individual empathy-related responses—aversive distress, arousal and sympathy—indicates one's ability to integrate cognitive and affective structures with morally central values. According to Eisenberg et al. (2006), "Individuals who are better regulated in general would be predicted to be prone to sympathy, whereas those who are low in regulation would be expected to be predisposed to experience personal distress." (Eisenberg et al., 2006, p. 528).

Sympathetic responses to others in need require some access to cognitive constructs in order to make meaning of the event and enact appropriate reactions. On the other hand, an inability to access constructs that imbue regulation skills with meaning can lead to a felt discrepancy for which one has only insufficient and confused reduction strategies (Higgins & King, 1981).

Consider the stage of "Egocentric Accommodation" (Stage 1), which involves "superficial, inappropriate and egocentric" strategies for reducing the personal distress at seeing another in need. (Krebs & Van Hesteren, 1992, p. 156). The egocentrically

accommodating individual does not interpret the other's distress accurately because more altruistic practice is needed. Mikulincer and Shaver (2005) agree with Batson's (1991) point that personal distress is "a form of self-focused agitation and discomfort that is not translated into effective helping." (Mikulincer & Shaver, 2005, p. 35). Aversive distress is experienced more personally, which affects the focus of an individual's response. "Individuals who experience sympathy appear to be affectively aroused, but not so distressing a level that one becomes self-focused." (Eisenberg et al., 2006, p. 528).

"Self-focus" is key to our analysis in that those who are mired in self-centered fear, as well as the lower-level skills that address such fears, become caught in a "Catch-22" of arrested development as a result of being more protective than adaptive in handling opportunities to act altruistically. If threat is perceived to the self in any way, the prioritized task at hand will be safety and security; one retreats in the direction of egoistic concerns and development freezes. Our perceptions of self-security may be rooted, along with our altruistic ideal, in our earliest formative relational experiences. From a cognitive-developmental standpoint, these are essential, centrally located structures (Krebs & Van Hesteren, 1992).

Mikulincer and Shaver (2005) make the connection between attachment security, compassion, and altruistic actions, offering that the attachment system is the basis for affect regulation. Maladaptive avenues for approaching life's moral dilemmas become likely when these core constructs are flawed. "When attachment figures are not supportive, however, a sense of security is not attained, negative working models are formed, and other, secondary strategies for regulating distress are adopted." (Mikulincer

& Shaver, 2005, p. 34). When these strategies become integrated full-time, development in certain domains is drastically altered.

Secondary strategies, according to this idea, include “hyperactivation and deactivation of the attachment system.” “Hyperactivation” refers to intense attempts to get attention and to seek proximity, in attachment terms: “People who rely on hyperactivating strategies compulsively seek proximity and protection, are hypersensitive to signs of possible rejection or abandonment, and are prone to ruminating on personal deficiencies and threats to relationships.” (Mikulincer & Shaver, 2005, p. 34). “Deactivation,” on the other hand is when one inhibits the tendencies to seek attachment or to act upon those drives. “People who rely on these strategies tend to maximize distance from others, experience discomfort with closeness, strive for personal strength and self-reliance, and suppress distressing thoughts and memories.” (Mikulincer & Shaver, 2005, p. 34).

It is clear that a great many clinical cases will involve some degree of these behavioral clusters, including anxiety, depression, self-worth, self-hatred, low self-esteem, shame, rejection, social phobias, intimacy problems, repressed feelings, loneliness, self-perfection, relationship insecurities, and debilitating fears—to name a few. Recent social-psychological experiments (Mikulincer & Shaver, 2005) provide support for robust correlations between attachment-security, empathy-related issues and altruistic perspectives. In one such experiment (Mikulincer et al., 2003) enhancing the subjects’ attachment security through recollection exercises actually “strengthened endorsement of two transcendent values, benevolence and universalism.” Likewise,

people who rely on “deactivation” strategies showed a noteworthy “lack of concern for other people’s needs.” (Mikulincer & Shaver, 2005, p. 36).

There is much support within cognitive-developmental frameworks for altruistic action oriented strategies for improving well-being, developing interpersonal skills and realizing personal ideals. In locating a person’s current stage of moral, altruistic and social development, we can understand the role of kindness on the trajectory of one’s life, while possibly gaining access to hidden cognitive structures, affective structures, and value constructs. Therapeutic strategies involving altruistic action, especially in regard to issues that hinder altruistic development, are likely to appeal to human nature in a manner in keeping with deeply seated developmental inclinations. Mikulincer and Shaver propose that such interventions would likely show promise, stating,

It would be interesting to see whether participation in compassionate activities can alleviate attachment insecurity, by bolstering a person’s sense of being loved and needed, and by bolstering prosocial working models of self. It will also be important to explore how various experiences and techniques, including psychotherapy, family therapy, skilled meditation, and participation in religious or charitable organizations, might enhance a person’s sense of security and thereby foster compassion and altruism. (Mikulincer & Shaver, 2005, p. 37).

This suggestion should be of particular interest to social work professionals, as it indicates the need for a full array of individual, family, and community experiences, rather than an over-simplified panacea; no matter how good a primary attachment one can make, our self-concept is forged from a variety of sources. As mentioned throughout this exploration, altruism is a self-other phenomenon, and likely develops more effectively through a variety of social situations, one of which could be therapy.

CHAPTER VI

GENERAL DISCUSSION AND IMPLICATIONS

Thus far, this exploration has illuminated valuable considerations for potential altruistic interventions in therapy. The relevant dialectical areas between dissonance theories and developmental theories of altruism are broader than one might initially expect, with far reaching implications for many psychodynamic settings.

To speak of dissonance is to speak of inner and outer conflicts, simultaneous truths, complex realities, psychological discomfort and the inevitable discrepancies between our realities and our valued ideals. To speak of dissonance reduction is to speak of mechanisms of ego defense, resiliency against adversity, coping strategies, capacities for making meaning, the drive for psychological comfort, thought-action repertoires, and the transcendence of our current perspectives in search of better methods and views. And to speak of altruistic development is to speak of personal growth, transforming personal distress into meaningful concern, replacing restrictive tools of psychological protection with more mature and adaptive defenses, realizing values and ideals, bringing cognitive skills to bear upon emotional matters, inviting more and more complexity for a richer understanding of our world and seeking new ways to negotiate such complexities.

One would be hard pressed to find a diagnosis in mental health that is exempt from this list. This exploration posits that for most individuals seeking mental health treatment, altruistic action stands as a solid option for achieving psychological growth and recovering from injured self-systems. As an avenue for intervention, acts of altruism

could be win-win situations; such strategies fall naturally in line with most people's ideals and self-constructs; they help to bolster an individual's global self-esteem; they offer new perspectives that could lead to expanded cognitive and emotional capacities; they encourage positive social interactions with others, and most often lead to positive self-appraisals and affective experiences. At the very least, an orientation toward acting for the needs of others can occupy an otherwise self-absorbed mind, with little chance of adverse side effects.

Assessing a person's strengths and defensive functioning is an inherent part of most psychodynamic models of therapy, such as ego psychology, interpersonal, attachment, and relational modalities. "We delineate critical elements associated with resilience," states Yehuda, Flory, Southwick and Charney (2006), "including positive affectivity and optimism, cognitive flexibility, coping, including religious coping, social support and intimacy, emotion regulation and mastery." (Yehuda et al., 2006, p. 384). Through the dissonance and developmental lenses, these elements could all be considered as psychological constructs that are readily linked to altruistic action on some significant level. Most notably on this list is the resilient trait of positive affectivity.

From before the ancient Greek philosophers to today's technological advances in brain imaging, the observation that good deeds are generally met with positive emotional feedback, or "internal rewards," as Post (2008) calls them, has become more and more difficult to dispute. Altruistic actions beget positive affectivity, most likely because of the core self-constructs that they access and activate within us, as well as the fact that these actions rarely elicit negative social consequences. Yehuda et al. (2006) describe how these good feelings could, in and of themselves, be dissonance reduction strategies,

stating, “Positive affectivity refers to the trait of being joyful, interested, and contented in life. That this trait is associated with resilience is supported by findings showing that positive affectivity decreases autonomic arousal and facilitates positive reappraisal.” (Yehuda et al., 2006, p. 384).

In other words, being in a good mood helps us to negotiate discrepancies more effectively and to adopt perspectives that tend to favor that mood. This suggests that altruistic attitudes are more likely among people with positive affectivity, which could be a result of altruistic action and attitudes. Indeed, according to Alice Isen and Stanley Simmonds (1978), “A growing body of research indicates that good mood, induced in a variety of ways, can facilitate everyday helping.” (Isen & Simmonds, 1978, p. 346). Conversely, people are more likely to behave egoistically under conditions of negative affectivity. Exceptions to this are negative states induced by altruistic constructs such as empathic distress, in which case specific altruistic action is the strategy best suited to the discrepancy (Cooper, 2007). Mood has also been researched by other social psychologists such as Batson (1989) and Cialdini (1987) who have suggested that people experiencing bad moods might help others in order to improve their own mood states—that altruistic behavior may be “instrumental” in improving affect (Batson et al., 1989; Cialdini et al., 1987).

It has also been proposed that self-conflicts might be diminished in a general sense by incorporating solutions that reinforce one’s desired self-view. For many of the people seeking therapy, there have been threats to the individual’s self-system. According to Steele’s self-affirmation theory, “Threats occur whenever information, certainly information contained within our own behavior, makes us feel less than worthy, honest,

or capable.” (Cooper, 2007, p. 92). The point here is that one might “affirm the global integrity of the self” through actions that appeal to core valued constructs, one of which could be altruism. (Cooper, 2007).

Isen and Simmonds (1978) also indicate that people in positive mood states tend to be less inhibited, most likely as a result of “access to positive material, general optimism, and willingness to take risks” that are inherent in positive affectivity. (Isen & Simmonds, 1978, p. 346). As Krebs and Van Hesteren (1992) have observed, higher stage altruism is characterized by a person’s ability to override inhibitive functions in weighing decisions, “based more in high order principles than in external laws, norms, or social conventions.” (Krebs & Van Hesteren, 1992, p. 157). This indicates further support for a self-perpetuating mechanism; positive affectivity and higher stage altruism have in common the extremely useful characteristic of loosening the reins of inhibitive functions and therefore alleviating conflict. Isen and Simmonds (1978) suggested “the relationship between good feeling and behavior may be mediated by cognitive processes, including a “loop” of positive cognitions.” (Isen & Simmonds, 1978, p. 346).

Unfortunately, altruistic action is not the most popular way to counter inhibition or to achieve such mood states in the modern world. To understand the larger concept in context, a practical illustration is called for: alcohol consumption is one obvious shortcut to the behavioral conditions described above. Statistically, it is clear that alcohol is not a stable catalyst for psychological improvement for most individuals in most circumstances, but the mechanism is worth considering here in that it shows that developmental goals cannot truly be reached by circumnavigating experience.

At its best, alcohol is well known for its capacity to directly bring about relaxation, social ease, relief from anxiety and stress, enhanced mood, agreeability, courage, amorousness, ego inflation, and so forth (Steele & Josephs, 1990). However, as with other lower level defenses that limit rather than expand our conscious awareness, using substances often becomes a maladaptive strategy when not replaced or balanced by more adaptive defense mechanisms and generally results in further conflict (Vaillant, 2000).

Perhaps we have all met someone who is generally quite reserved and introverted, but when they become intoxicated (i.e., at the company holiday party) they might demonstrate a greater capacity for caring, generosity and other-directed tendencies than they do in sobriety. The idea of the "helpful drunkard" begs the question: what is happening motivationally for the individual when intoxicated? What could possibly replace such a powerful coping tool? Claude Steele, the social psychologist behind the dissonance discourse's self-affirmation theory, has explored this offshoot of our phenomenon through a series of studies designed to test such correlations (Josephs & Steele, 1990; Steele, Critchlow & Liu, 1985; Steele & Josephs, 1988; Steele & Southwick, 1985;).

According to one such study regarding alcohol's impact on helping behaviors (Steele, Critchlow & Liu, 1985), altruistic behaviors are something of an anomaly in that they cause us as much conflict as behaviors with predictably negative consequences such as aggression, self-disclosure, gambling, risk-taking and so on. "We examined alcohol's effect on helping, a behavior that, like many of the antisocial behaviors included in the meta-analysis, is frequently conflictual," reported Steele, Critchlow and Liu (p. 36).

The dissonance in question here is conceptualized as "inhibition conflict," a discrepancy between behavior that is at once instigated for and inhibited against. "Once an impulse to help is aroused by an empathetic reaction or urgent appeal, for example, it can be inhibited by anticipated costs, such as lost time, boredom, fatigue, the possibility of harm, and so on." (Steele, Critchlow & Liu, 1985, p. 36). On the other hand, deeply seated, fundamentally held, centrally located altruistic personality ideals are strong examples of behavioral constructs that may be "instigated for" in such situations.

According to the findings of the (1985) "Helpful Drunkard" study, alcohol does indeed interfere with inhibitive functioning; the greater the inhibition conflict, the more emphatic the helping response would be in comparison to a sober response. Likewise, without a conflict—weak instigation, weak inhibition, or both—there is no discrepancy to which one must respond extremely or otherwise. By suppressing inhibitive agencies, alcohol frees us up to respond more helpfully in instances when access to mediating processes might hold us back. Such processes are indispensable when aggression or risky behavior is the instigated response (hence the strong relationship between drinking and legal problems). However, the same considerations of personal safety, comfort and self-preservation may hinder us from participating in altruistic activities (Steele, Critchlow & Liu, 1985, p. 36).

It is useful to consider that these mediating faculties are also extremely valuable to us in the development of our altruistic capacities; our ever-growing ability to be genuinely altruistic—to understand the needs of others, to process distress as concern, or to transcend one's own simpler needs—is sculpted by interceding cognitive cues,

ultimately allowing us fuller access to our embedded values and intrinsically making us more effective altruists. (Krebs & Van Hesteren, 1992).

According to the Substance Abuse and Mental Health Services Administration's (SAMHSA) 2005-2006 estimates, about 51.4 % of the U.S. population aged 12 or older reported being current regular drinkers (Hughes et al., 2008, p. 37), keeping in mind that minimizing consumption is inherent in substance abuse. For millions of problem drinkers, consuming alcohol has proven itself to be a dangerous shortcut to approaching ideal states with fairly serious developmental, social and physical costs. As of 2000, "Untreated alcohol problems waste an estimated 184.6 billion dollars per year in health care, business and criminal justice costs, and cause more than 100,000 deaths." (Harwood, 2000). This is certainly not an evolutionary asset.

By virtue of the self-deception and dependency that it causes, substance abuse tends to mercilessly crumple the ego it once inflated. As Steele, Aronson and Cooper have all brought forth in their respective dissonance stances, most people have a powerful and fundamental need to think positively of themselves, especially along valued dimensions such as altruism. Banaji and Steele (1988) proposed that self-evaluative conflicts—discrepancies regarding how well one should evaluate one's self—become less inhibitive with the aid of alcohol. This proves to be a rather reinforcing quality of alcohol consumption, making it an addictive strategy that is tough to outshine in the short run (Banaji & Steele, 1989; Steele & Josephs, 1990).

Unfortunately, these evaluative discrepancies would be the same conflicts or cognitive perturbations that, according to developmental theorists such as Dabrowski and Kohlberg, are necessary for new emotional development (Dabrowski, 1967; Kohlberg,

1964). Alcohol subdues judgments of self in favor of self-perceptions more befitting one's personality ideals, in effect sidestepping life's developmental challenges and the evolving standards necessary for transcending present functioning. One falsely feels that they are following the path of their ideal without actually mastering the necessary challenges along the way, therefore yielding developmental arrest and possible regression. (Steele & Josephs, 1990).

However, 12-Step groups such as Alcoholics Anonymous seem to have found the loophole here; somewhere in the generous social sphere and altruistically oriented structure of some recovery groups is a strategy that seems to replace the need for alcohol by realigning the basic relational human elements that were blocked in the first place. It seems to appeal to some very basic necessity for hundreds upon thousands of individuals. Boland (1992) cites the 1974 research of Tamerin and Neumann, which suggested that core constructs are a big part of the success of AA. "Their studies concluded that alcoholics, who are often over-controlled and inhibited, also seem to be unusually altruistic and selfless, hard working and highly idealistic." (Boland, 1992, p. 414).

It has been suggested, thus far, that altruistic action can benefit the altruist by improving mood, affect and, by proxy, one's resiliency and ability to mitigate risk factors in our environment. Altruism is a self-perpetuating phenomenon that is often restrained by the same mental agencies responsible for keeping us out of trouble. Our very ability to consider new perspectives is facilitated by the "neural kick" (Holt, 2008) achieved through helping others. Much in the way that Frederickson's (2003) "broaden-and-build" theory implies, negative emotions are associated with self-protective, cognitively restrictive defensive mechanisms, while positive affect is associated with exploration,

creativity, cognitive expansion and developmental progress. (Frederickson, 2003).

Coping strategies that entail positive affect, therefore, help to lay the groundwork for achieving higher levels of moral reasoning and emotional growth. Dabrowski (1967) succinctly and poetically describes this overall mechanism:

Love, unselfishness, conscious ability to sacrifice oneself, contemplative ability, all purify, elevate, and broaden our thinking, introducing it to a more objective area; they widen our horizons of thinking, weaken the factor of the lower passions and cunning, which are associated with the basic instinctive dynamisms. (Dabrowski, 1967, p. 128).

That said we are still left facing the question of whether or not altruistic action, prescribed by a clinician in a psychodynamic setting, could lead to more authentic altruistic attitudes. How does one determine what type of action might most successfully initiate this self-perpetuating process in a developmentally beneficial way? Through the developmental lens of Kohlberg's stage theory, "A universal, though not inborn, latent preference for higher modes of moral thinking is posited to explain why people do not preserve their cognitive equilibrium simply by adhering to their own opinions and rejecting conflicting ones." (Bandura, 1991, p. 47). In other words, repeatedly trying crude dissonance reduction strategies in the service of resolving conflict is a rather limiting road to progress, yet we develop some unconscious constructs that inform us of this. If the same old response is not helping us to master the challenge, then more of the same is certainly not going to work. Yet, to keep trying seems a common human tendency.

Bandura (1991) cites Rest (1973) for raising the important point that we do not always adopt the highest mode of moral behavior despite how well we may comprehend it. For example, I fully understand and appreciate the perspective of Gandhi, yet

knowledge of that stage does not mean that I have adopted it as my “dominant mode” of thinking, despite the fact that I wish that I were that evolved. I have neither faced nor resolved the same conflicts as has Gandhi. This implies that developmental stages are necessarily sequential and cannot be skipped with optimum results—a crucial caveat when considering how one might evaluate the suitability of prescribed altruistic actions. We grow individually, differentially, and incrementally, and expectations should reflect this fact. As Bandura and Kohlberg have noted, people are cognitively and affectively capable of adopting higher stage perspectives that are only “moderately” more complex than their present stage and will reject solutions that are too far off in either developmental direction (Bandura, 1991, p. 47).

There are clearly many issues involved with prescribing altruistic action; moral dilemmas are complicated and personally relevant, the solutions to which are most developmentally useful when resolved by the individual discretely. Also, altruistic development is a gradual process and does not happen overnight. According to Bandura (1991), “Rather than exhibiting wholistic reorganization of their moral thinking, people gradually adopt new moral standards, eventually discard simpler ones, and draw from among a coexisting set of standards in judging different moral predicaments.” (Bandura, 1991, p. 51). In other words, development is a long—some might say a life long—process, and only time will tell what enduring transformations such an intervention might produce.

In matters of morality such as altruism, there exists quite a bit of wiggle room for interpretation, which also makes universal solutions difficult to prescribe; this difficulty embodies the richness and complexity of a society of individuals exercising individual

judgment. Kohlberg believed strongly that moral behavior is “nonprescriptive,” because it is more about the thought process than the content of moral judgment. A person’s present stage can only be determined by the way that they reach a decision, rather than by the decision that they reach. This “prescriptive ambiguity,” in Bandura’s (1991) terms, points to the “judgmental thicket” of social comparison and abstract principles of justice that make true moral dilemmas as enigmatic as they are, and specific actions difficult to assign. (Bandura, 1991).

However, cognitive-developmental theorists such as Kohlberg, Candee, Dabrowski and Loevinger, would be quick to point out that strategies calling for individualized adjustments in actions rather than in attitudes could indeed be prescriptive. Kohlberg and Candee (1984) supports that action is the likely entry into the ‘loop,’ stating that,

...moral judgment arises out of moral action itself, although there is no single causal direction. A new stage of moral judgment may guide new behavior, whereas a new action involving conflict and choice may lead one to construct a new stage of moral judgment. (Kohlberg & Candee, 1984, p. 53).

Dabrowski called this learning-by-doing process “self-education,” stating that it is mainly through dissonant experiences in the social environment that an individual will develop attitudes toward self and other (Dabrowski, 1967, p. 146). We adopt more altruistic attitudes through exposing ourselves to experiences that call for us to do so, and these experiences necessarily involve action. As Monroe’s definition clearly states, altruism “must entail action; well-meaning thoughts are not enough.” (Monroe, 1996, p. 6). It is also within altruistic actions, not in thinking about them, that we find the internal rewards, which reinforces our propensity to select for those behaviors.

Simply prescribing altruistic strategies—as with any prescriptive psychological intervention—is clearly insufficient; the development of our altruistic capacities is a self-other phenomenon and cannot take place in isolation. Our positive integration of various facilitative or inhibitory developmental factors is a function of relational interactions and attachments (Dabrowski, 1967). In other words, an interpersonally dynamic relationship between the individual and another person or persons, such as the therapeutic dyad or group, is necessary for any exploratory action to hold meaningful developmental sway. Painful or confusing growing experiences without reflective personal relevance are simply painful or confusing, and do not generally inspire development (Bandura, 1991).

The collaborative therapeutic dyad represents an ideal place where one might employ altruistic strategies to mobilize change. As attachment theory proposes, the clinician surrogates as the attachment figure—often (unfairly) generalized as an older, stronger and wiser parent in the parent-child dyad—for the client seeking therapy. (Bowlby, 1973). “Evolutionarily, the function of attachment has been to protect the organism from danger.” (Fosha, 2003, p. 226). This view of the individual requiring safety and security for survival, and in this case, development, fits well with the idea that positive affectivity is associated with developmentally progressive activity, while negative affectivity elicits self-protective defenses. (Frederickson, 2003).

The safer the client feels in the dyad, the more likely he or she will be to mitigate increasingly complex inhibitive processes and to surpass defensive tactics that have previously limited exploration. Through a variety of verbal and nonverbal methods, an interactive bond forms between clinician and client (Bridges, 2005), creating an atmosphere in which one may become less fettered by the egoistic shackles of negative

emotions and explore the conflicts that can—and do—derail development. The client will ideally internalize a positive attachment to the clinician, which can help access blocked constructs or give rise to new ones that guide his or her development toward valued ideals. (Dabrowski, 1967).

“Learning new relational moves both through verbal exchanges and unconscious identification, her fund of knowledge about how to advance in relationships expands,” states psychoanalyst Nancy Bridges (2005). She posits that “by doing something different, trying out new relational behavior, leads to a broader and more integrated affective experience and an altered sense of self.” (Bridges, 2005, p. 40). In seeking an answer to our underlying query, some individualized, co-created form of clinically suggested altruistic action could indeed lead one to higher modal considerations, provided that the dyad or group is supportive and attuned to the client’s current strengths and experiences. Dabrowski (1967) uses the term “adviser” as the teacher, parent or clinician that should ideally be present at transitional stages of development. He wrote of this agency that,

We must, however, lay stress on the fact that in every phase, and particularly in the initial and following phases—that is, in the period of great conflictive and creative tensions, the period of a very real possibility of a breakdown—the adviser plays a fundamental role in the development of personality. (Dabrowski, 1967, p. 151).

Sadly, realistic treatment constraints resulting from managed healthcare and time-limiting financial considerations may also bear down upon long-term intervention strategies. In designing and implementing strategies that are sensitive to developmental lines, time is unfortunately still money in our modern society. On a more optimistic note, altruistic action is self-perpetuating, is done mostly outside of the therapy office, fosters

new and supportive relationships, and could easily be designed as the focus of peer-led support groups (such as AA). It is also important to note that an “adviser” need not be there every step of the way and may indeed be more useful, as Dabrowski suggested, at critical moments of change

Just exactly how a person might incorporate altruistic action into a dynamic intervention should be co-authored by the clinician-client dyad, based upon the client’s specific issues and openness to attempt other-directed behaviors as a focus of attention in therapy. Altruistic action, with its focus on activating positive valued constructs for current action, is a future-oriented and strength-based approach; we are not asking, “What’s wrong?” We are asking, “What’s right?” And “What’s the difference?” The aim is not so much to observe what individuals do when faced with an opportunity for altruism, but what they value in life, how they come to value such things, and how they make meaningful progress toward those values.

Batson et al. (2007) have suggested that valuing the welfare of another results in placing “positive value on events we think will the person joy, satisfaction, safety or relief,” while placing “negative value on events that we think will bring them pain, sorrow, discontent, danger, or disappointment.” (p. 65). This relational dynamic is key to the ongoing development of empathic skills, the honing of which is a necessary component of reaching higher stages of altruistic capacities. Batson and his colleagues point to self-structures as being the governing agency being built through this mechanism, stating, “We are primed to imagine how this person thinks and feels about events because his or her pleasure and pain have become part of our value structure.” (Batson, Eklund, Chermok, Hoyt & Ortiz, 2007, pp. 65).

One could easily transfer these dynamics and goals to the therapeutic dyad, support and process groups, or any number of mentoring or social-learning scenarios. The point is that it is never too late to come to value others, that enlarging one's group concept to grow from self to other to all can be fostered within us all. Although goodwill appears to work best at the group level, it always begins—much in the way of development itself—with one individual reaching out beyond the self. Psychotherapy is a safe and ideal place to explore the steps necessary to make such progress, as well as to examine the barriers that have stood in the way. Batson et al (2007) imply that an active altruistic strategy, aligning with both cognitive and emotional constructs, may be a useful part of social reeducation, stating,

Such valuing may be increased through strategies designed to reduce prejudice; to improve attitudes toward out-groups; or to produce more positive, cooperative social interactions. Typically, cognitive processes are assumed to mediate the beneficial effects of such strategies. The effects are attributed to reduced stereotyping, more inclusive self-categorization, and so on. Our analysis suggests that emotional processes may mediate at least some of these effects. Benefits occur because we feel for those we care for. (Batson et al., 2007, p. 73).

Most importantly, clinicians must be accountable for responsible modeling—self-compassionately assessing their own altruistic ideals and development—and relating one's own humanity to their clients' relational explorations with courageous and thoughtful transparency; in this way the teacher will always—necessarily and instrumentally—remain the student.

This study robustly indicates the pragmatic utility for further research in psychological interventions involving altruistic actions of various kinds. There is a need for much more empirical evidence indicating the types of strategies that yield beneficial results, the nature of the issues most responsive to such treatment, and the combinations

of cultural and dispositional factors that demonstrate relevance to such models. It stands to reason that we should set our sights on active interventions that appeal to our innermost positive human inclinations to be useful to others.

Final Reflections

This exploration was undertaken with an equal balance of good intentions and self-righteous indignation—cognitive dissonance at its height. On the one hand, I saw a vehicle for spreading the seeds of good fortune to other people suffering from the bondage of self and associated myopic views of life; I sincerely wanted to share the secrets of “the good life” that I have stumbled upon with any and all interested, and I hope that I have accomplished this to some degree.

On the other hand, I may have placed myself closer to “Stage 7” on the altruistic scale than honest criteria indicate; I find that believing in a universal humanity and acting upon that belief are fundamentally different. For example, it is actually less evolved, altruistically speaking, to feel “more humble” than other people. Humble people don’t feel that way. Resisting the temptation to use social comparisons or to invoke rationalizing dissonance reduction strategies to remedy this ironic problem was more difficult than I imagined. The idea that we generally do the best we can with what we have at any given point in time is a priceless bit of knowledge for this clinician. The viewpoints and stories of actual altruists that I have read again and again in this venture have humbled me. For this I am grateful.

Throughout the vast array of altruism literature, were examples of unbelievable caring and sacrifice, heroic integrity and fearlessly selfless acts. Many of the narratives of the rescuers of Jewish refugees from Nazi Germany gave me a glimpse of what it means

to use self for principle rather than principle for self—an enormously different concept. When faced with opportunities for human potential to shine through the darkest darkness, altruism can and does happen. It happens naturally and non-regrettably. It happens when powerfully negative forces threaten to eclipse that which is most bright in our beings. To step away from the pole of egoistic needs is to trade the pull of self-centered fear for challenges that actually engage us in our lives as people among people. I have asked myself what I might do should a victim of injustice come knocking at my door, and the only thing that I know with some certainty is that I hope that egoistic factors do not dominate my thinking. I hope to be that man.

I am often impressed with the over-compensatory altruistic nature of the winter holiday season in America and the enduring need for such traditions; the pressures of making a living appear to have relegated our kindness to an annual quota. However, it is obviously recognized as important; we would no sooner dispense with it than we would our food and shelter. Perhaps we should be more consciously aware of everyday situations in which we might exercise our ideals—to be right with ourselves—despite the myriad of individualistic messages in our social programming. It is my hope that altruistic strategies, ranging from casual discussions to active and challenging clinical suggestions, might soon merit serious psychological consideration as altruism gains recognition as being essential to the survival of our species.

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