Institute for Christian Teaching
Education Department of Seventh-day Adventists

BASIS:

A MODEL FOR INTEGRATING PSYCHOLOGICAL THEORIES OF MORAL DEVELOPMENT IN CHILDREN AND ADOLESCENTS

by Ruth S. Smith

Associate Professor
West Indies College
Mandeville, Jamaica

Prepared for the
18th International Faith and Learning Seminar
held at
West Indies College
Mandeville, Jamaica - June 16-28, 1996

268-96 Institute for Christian Teaching
12501 Old Columbia Pike
Silver Spring, MD 20904 USA

BASIS: A MODEL FOR INTEGRATING PSYCHOLOGICAL THEORIES OF MORAL DEVELOPMENT IN CHILDREN AND ADOLESCENTS

Introduction

The purpose of this paper is to show how morality develops across five dimensions of life--biological, affective, social, cognitive, and spiritual. I will try to show that although all five dimensions develop simultaneously, certain of these features play more important roles in the interaction of moral forces at different times in the individual's life. Moreover, the interaction of these dimensions are far more important than any part in isolation. Thus, although at birth children are primarily biologically determined beings, as soon as they begin to experience contact with others, first in the home and then within the wider community, the social environment begins to influence the biological heritage, and thus individuals with unique emotions evolve. At the same time, through the interaction of the biological-emotional child and the social world, the cognitive abilities are developing until full faculties are reached in early adulthood. Usually after all these processes are more or less complete (although it may occur earlier), the culmination of these developments occurs as the young person adopts a worldview, which may be either religious or secular, but which gives meaning or purpose to life. This spiritual element is a confirmation or final validation of the life experiences. That is, the lifeview, which was an outgrowth of the attitudes developed through the life experiences, now becomes the reason for holding those attitudes.

This paper defines morality in simple terms--the qualities of honesty, kindness and fairness. It will present (1) a six-step integrated model which incorporates the five domains of moral development, (2) a sampling of the scientific research that supports the impact of each of these six steps for the development of morality, and (3) implications the model suggests for fostering the moral growth of the child at each of the steps.

The BASIS of Moral Development

Figure 1 diagrams the relationships of the five domains of morality as it will be developed in this paper. The acronym BASIS is formed from the first letters of the five domains: Biological, Affective or emotional, Social, Intellectual, and Spiritual, which form the horizontal axis of the diagram. The major theories or steps relating to moral development are represented by a rectangle placed vertically at the typical ages in which they occur, and horizontally in the area of the domains which best represent the part of the personality in which each event occurs. It can be seen that the major events tend to move from the lower to the upper areas of the diagram, illustrating the proposition that the moral arena moves from the more biological effects to the more spiritual levels as the child advances in age.

Whereas each of these psychological processes are thought to be more or less distinct, they are interrelated, overlap, and may all operate within an individual child at one time. The age at which each is thought to be operating most strongly is only approximate, but satisfactory resolution of all these processes at the appropriate age should maximize moral development. Delayed development may occur however, and inadequacy of development in one step be rectified in another.

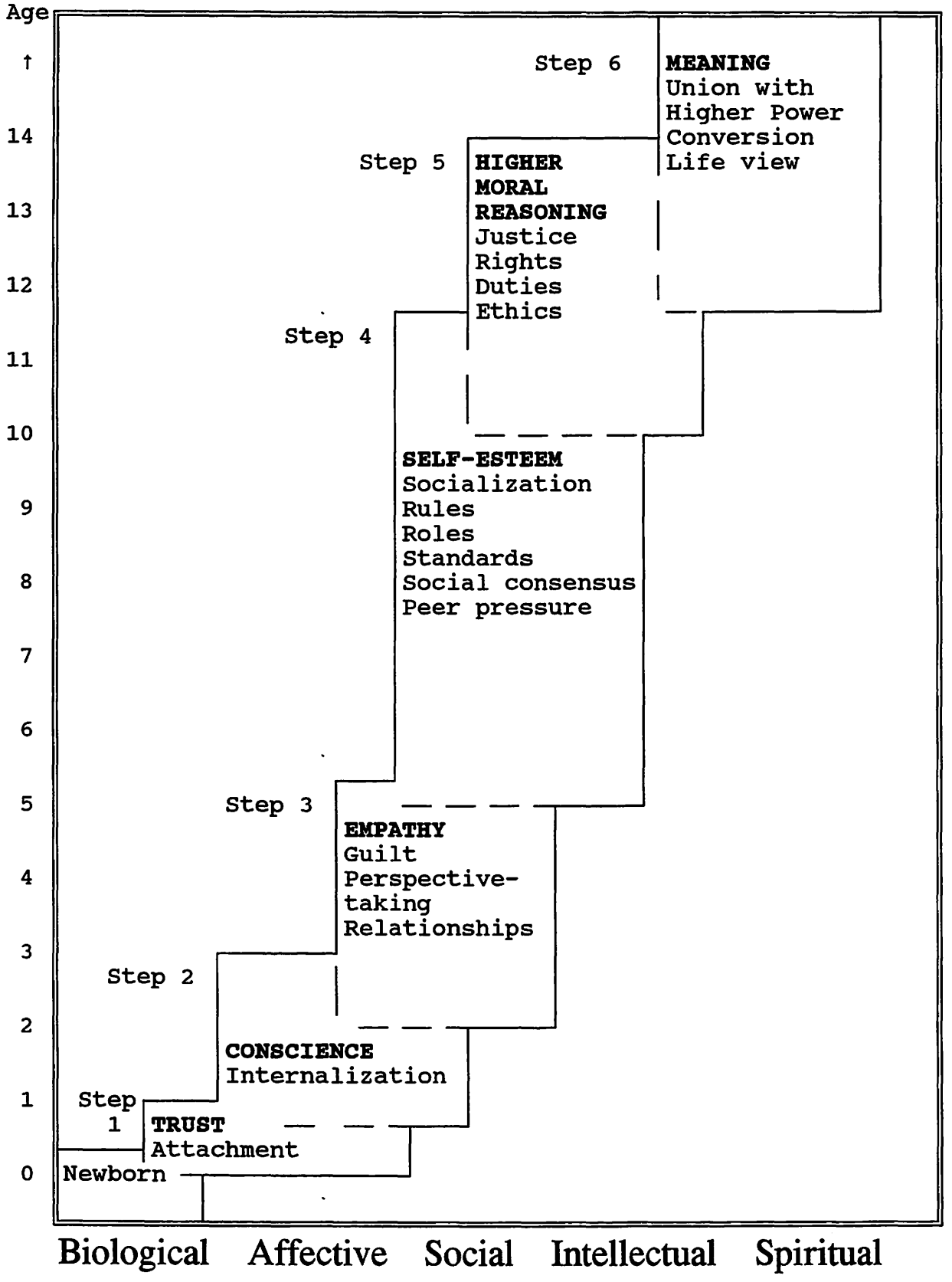

Figure 1, The BASIS of Moral Development Through Childhood

Biological Influences on Moral Development

The Beginnings of Morality
From Conception to Birth

Biological influences as defined here include both genetic effects on the personality and also environmental conditions that may affect moral development through physiological factors. Although biology may affect moral behavior throughout life, it is only at the beginning and end of life that biological determinants are not heavily affected by the influence of the other domains. Therefore, this inquiry is limited to the biological beginnings of life as they affect moral behavior.

Effects of Genetic Inheritance

Character development begins at conception when the genetic heritage is determined. A review of twin adoption studies by Bouchard, et al, (1990) confirms that about 50% of the difference in personality factors in people are considered to be due to heredity. Factors such as introversion-extroversion, aggression, locus of control, impulsiveness, empathy, religiosity, and compliant morality, all have implications for moral development. Moreover, Bouchard found that intelligence, which is a vital component in Kohlberg's theory of moral reasoning, is more than 70% genetically determined. Matthews (1981) also found that up to 72% of the variance in empathetic concern in twins was due to genetic factors.

Cloninger, et al. (1982) considered the general genetic contribution to violence, aggression, and criminality. They studied court records of sons who either lived with their biological fathers or who were adopted. They found strong correlations between criminality of the sons and their biological father's court records, and when both adoptive and biological fathers' had court records, the sons had extremely high criminality. Alcoholism was also related to criminality in both the biological fathers and their sons. Other studies found that higher aggression in teenage boys was correlated with the levels of several different hormones, which are probably factors of biological heredity. Although many specific genetic personality factors are relevant to moral development, we will discuss only temperament, which is a combination of many different inherited traits. It is a major determinate of the personality and an important aspect of moral behavior. Thomas, Chess, and Birch (1970) described three types of temperaments in infants: easy, difficult, and slow-to-warm-up. These temperaments were reflected later in childhood, with "difficult" babies becoming behavior problems in school. The interactional nature of temperament is emphasized by the authors' concept of "goodness of fit." That is, if the expectations of the parents are in harmony with the child's temperament, maximum positive development can be assumed, but if the caregiver's temperament is antagonistic to the child's natural characteristics, maladaptive behavior may develop. Thus the children's temperamental qualities help shape the way others relate to them, and children partly create their own social environment.

Moreover, negative temperament traits in the child appear to persist into adolescence and adulthood. Ill-tempered children become ill-tempered adults. It appears that not only are negative temperament traits quite

consistent over a length of time, if any change occurs, they tend to get worse as the child gets older.

Environmental Biological Effects

On the basis of the research cited above, it is assumed that any parameter that can alter a person's ability or motivation may also have moral implications. Therefore, environmental influences on the child's physiology may also affect morality. For years Seventh-day Adventists have had the counsel of Ellen G. White (1980) on the importance of pre-natal environment, touching on nutrition, toxins, and mental attitudes. Only recently has science confirmed her statements.

Today doctors are very aware of the effect of drugs on the fetus, and pregnant mothers are advised to refrain from any toxic substance, including prescribed drugs and aspirin, as well as tobacco, alcohol and other popular drugs.

The effect of alcohol on the human fetus was recognized by Aristotle, who noted that alcoholic mothers produced feebleminded children. Known today as Fetal Alcohol Syndrome (FAS), certain abnormalities in infants appear to be related to heavy maternal drinking, and are evidenced by mental deficiency, abnormal facial features, and hyperactivity in the child (Abel, 1981). Although it is difficult to sort out which effects are purely alcohol-induced from factors such as malnutrition, socioeconomic status, neglect, and others that accompany alcoholism, it is apparent that alcohol alone affects fetal development, and that the adverse effects continue beyond infancy and into adulthood. Streissguth, et al. (1991) found that the adults who had been diagnosed with FAS as children continued to show some of the facial abnormalities and small heads as seen in young FAS children. All the subjects showed significant maladaptive behavior. Their average IQ was 68, they had arithmetic deficits, poor judgment, distractibility, and difficulty perceiving social cues. Moreover, many were known to lie, cheat, or steal. The effect of the abnormal development caused by alcohol appeared to affect their ability to reason morally, and to have the desire or ability to act morally. Although FAS usually involves alcoholic mothers, even in moderate drinkers, abnormalities in the babies increased in proportion to the amount of alcohol the mothers had drunk during pregnancy.

Pre- and post-natal nutrition plays an important role in the development of the brain, especially in the synapses, the number of which may be reduced by as much as 40% in malnourished animals (Lewin, 1975). This causes problems in mental ability with malnourished infants. Although the effects of malnutrition, like those of alcohol, are compounded by the socioeconomic variables that accompany it, studies of war-related famine suggest that prenatal malnourishment may not have a long term effect if not continued into infancy (Shafer, 1989). Nevertheless, it appears that the slower brain development of long-term malnourishment may affect the children's ability to reason morally, and their apathy may affect their motivation and ability to act morally.

Summary of biological factors

In summary, biological factors appear to play important roles in the physical well being of the child, which may affect the ability and desires of the child to act morally. Even in those children whose genetic and prenatal environment is optimal, heredity has been shown to play a significant role in activity level, alertness, emotionality, sociability and intelligence. On the other hand, severe biological deviances from the norm have even greater consequences.

Moreover, as the studies on the interrelationships of the effects of socioeconomic status and alcohol or malnutrition cited above indicate, a person's general health affects his or her sense of well-being at any time of life. Therefore, the combination of genetic endowment, health practices, mind-altering drugs, and illness, which make up a person's general health, affects one's motivation and ability to reason morally, resist temptation, or perform moral actions. However, biology is just the foundation, other domains also affect the developing child.

Affective Factors in Moral Development

Most moral development theorists have recognized the importance of the affect or emotions as well as reasoning in the performance of moral acts. This study assumes that for younger children, emotions may control behavior more than reasoning; therefore emotions may play a larger role in moral behavior in the young child than they do later in life.

The development of the moral emotions are traced below from their beginnings in bonding and attachment to the parent and the subsequent development of trust. To these are added the positive prosocial emotion of empathy and the influential emotions of shame and guilt. The emotions develop within a social environment, so these two domains need to be treated together. Research is cited that supports the concept that the interactions of the emotions and social environment are crucial in the development of conscience as well as in the formation of important attitudes toward the self and others, such as self-esteem and hostility.

Step One, Trust
Birth to Age One

Bonding and Attachment

The newborn's only avenue to experience and communication with the world seems to be its emotions. At birth the human infant is a helpless creature, totally dependent on others for continuance of life, but it's ability to respond physically and emotionally affects the bonding of the person who cares for it. Several authors (Bowlby, 1969; Klaus & Kendell, 1982) stress the importance of the first moments after birth for the formation of the parents' bonding to the newborn. Rosenblatt (1963) studied hormones and their affect on mothering behavior, and found that in some animals, those hormones are only in effect for a few days after giving birth. Afterwards direct eye-contact, suckling, and the reflexive smiles of the baby all appear to induce mother-love even in women who do

not have children. However, if deprived of contact with the infant for several months, mothers had much more trouble bonding.

The caregiver's bonding and the subsequent attachment of the infant to the caregiver are reciprocal in nature. The baby's cry of pain or hunger should induce the mother to care for it, and the baby's expressions of pleasure should prompt loving responses, whereas an unresponsive infant may encourage the parent to reject it. Since both mother and child must respond to each other, problems in one affect the other.

Commenting on the importance of this intense love relationship between the parent and child, Bowlby stated, "The young child's hunger for his mother's love and presence is as great as his hunger for food" (p. xii). He found that deprivation of this contact affected both child and adult. Other studies in orphanages where large numbers of babies often died, found that infants who were held several times a day were much more likely to thrive instead of dying.

Parents usually want to know the effect of mother's working outside the home. Research is inconclusive on the effects of mother's working on the emotional or moral development of the child, but apparently working mothers do not seriously affect the attachment in two-parent middle-class families who share responsibilities for raising the children. However, there is evidence that there is a negative effect for the children of single, low income parents who have the heavy burden of the home as well as work and may not be able to afford quality day care for the child (Shafer, 1988).

A number of studies relate attachment to later moral development, as observed from both a state of deprivation and from a state of adequacy. Ainsworth (1962), and Bowlby (1969), related maternal deprivation in infancy, whether from separation or from neglect, to the unattached antisocial personality of some youth and to delinquent behavior. Magid (1987) claimed that a majority of the criminals who show defects of conscience had disturbances of bonding and attachment in infancy.

The Development of Trust Versus Hostility

According to Erikson (1963) trust is the first of his eight stages of psychosocial development. Normally developed through bonding and the sensitive nurturance of the mother and their subsequent attachment to each other, the child's establishment of trust helps to develop a positive life view. If maternal care is deficient because of the parent's inability to provide the reliable and stable loving environment the child needs, the child may develop mistrust, which in turn leads to a world view that is negative, fearful and hostile. Negative attitudes toward others appear to be among the personality traits of delinquents; moreover these attitudes may predominate over positive empathic views of others that motivate moral behavior. Negative attitudes also appear to be related tendencies to falsely assume that others have hostile feelings towards oneself. Not only fostered by attachment, these attitudes are also related to social influences discussed later such as harsh punishment and peer rejections.

The development of trust, then, is the first stage of moral development. At birth, biological child and the environment begin to interact within the family. The first consequence of the interaction of child and parents in attachment and bonding results in the development of

trust, which sets the stage for later development of feelings of security and self-esteem.

Implications for Developing Trust: Education programs for new parents should stress the need for stable and faithful care and nurture of infants. Stronger education is needed in schools, churches and the public media to provide social support and encouragement to impress parents of the importance of early contact with the baby. Mothers should be encouraged to stay home with their infants at least for the first year. Legislation providing longer maternity and adoption leave would help families where mothers must continue earning or employers could guarantee that the parent could return to the same position after a parenting leave of absence. The church family may assist in providing financial assistance to young parents, or by providing stable quality day care for infants whose mothers must work away from home.

Step Two, Conscience
Ages One to Three

Internalization as an Outcome of Attachment

On the positive side of the attachment process, several theories (Emde et al 1987, and Grusec and Goodnow, 1994) suggest that this attachment to the caregiver permits internalization to occur. Now believed to begin at the end of the first year and to proceed to the third year, internalization occurs when the child's loving caregiver begins to administer disapproval and approval in response to the child's behavior.

Since attached young children are very dependent on their parent's care and nurture, they experience emotional arousal or "deviation anxiety" when they do things that arouse their parents' disapproval. Therefore, they will try to behave in a way that meets the parents' approval. How they justify their change of behavior to reduce the deviation anxiety depends on how they experience the parent's method of showing disapproval. If the caregivers use strong punishment the children will think they must obey in order to avoid the unpleasantness of the forthcoming discipline. The children thus look for external causes for having changed their behavior. Externalization poses a threat to both self-esteem and conscience development since the child's conformity is not seen as being self-chosen but imposed. On the other hand if the caregivers use gentle means of showing disapproval, the children will attribute their desire to obey to internal sources, or because it is "right," thus internalizing the parents' wishes. In other words, they develop a conscience regarding those behaviors.

Obviously, the conscience is not fully formed at this time; further experiences will develop the content of what is considered right and wrong. However, the mechanism for internalization is usually in place by age three. From a Christian standpoint, we might say that the conscience is the vehicle through which the Holy Spirit is able to impress a person to do right. Or negatively stated, if early internalization is not adequate, the conscience may be seared.

Implications for Developing Conscience: However effective this view of internalization may be in the United States, it is obvious that most of the parents in the world do use harsh methods of discipline, and many of these countries have much lower crime rates than the United States. Inductive discipline methods must not be the only means of developing conscience. I propose an alternative mechanism for the internalization process. Even if a child has not internalized the parent's requests because the punishment was too strong, as the child later comes into contact with the wider social world, the child may see that other important persons also view the behavior with disapproval. As the evidence mounts that the behavior is considered bad by society, the child may then accommodate the instruction into his or her own thinking. Therefore, in societies that have consensus on their moral standards, even though harsher discipline methods are the norm, children may reason that the social importance of the rule is justification for harsh discipline. However, the less consensus within the society about the appropriateness of a behavior, the more important is the use of milder forms of correction that incorporate the child's reasoning.

Parents and teachers need to recall their own corrective experiences with God. God does not use harsh punishment or coercive methods. Instead he draws us by his intense love and his concern for our welfare. While never condoning or minimizing sin, Christ always respected the sinner. His counsels are seen as being for the our own good and they enable the sinner to walk closer to him. With his method of dealing with us in mind, we will endeavor to use the methods of Jesus Christ when we deal with our erring children.

Excellent books and seminars are now available that teach parents methods of training their children that enlist the child's cooperation. Churches and schools should provide seminars and discussions dealing with parenting skills where parents may discuss parenting concerns. Harsh methods which often lead to child abuse should incur strong disapproval from the society.

Step Three, Empathy
Ages Three to Six

The Development of Empathy

Empathy has been shown to be present even at birth in a very rudimentary manner. Hoffman (1984) found that infants averaging 34 hours old cried when they heard the cry of another infant. In this early first stage of empathy which Hoffman called "global empathic distress response," children do not distinguish between their own emotions and those of others, and their response is apparently to comfort themselves.

The second stage of empathy is "sympathetic distress," which occurs by the end of the first year. During this stage children often accurately distinguish another person's emotions but try to alleviate them with solutions that would please themselves, such as offering a weeping adult a baby bottle or doll to comfort them.

Perspective taking, which is imagining oneself in the other person's place or seeing an event as another person sees it, is an important

cognitive turning point in understanding others' emotions. This development, beginning about age three, is needed before the child can move on to the next stage in which the child has the ability to recognize someone in trouble and to help relieve the distress in appropriate ways. Later in this stage the child realizes that people can simultaneously have two conflicting emotions, and that they may hide some emotions from others.

The fourth stage of empathy development occurs in late childhood. It is a generalized empathic distress response which permits the child to be concerned not only with a person's pain in the present situation, but also with the other's life conditions in general. Thus, according to Hoffman, entire groups of poor, handicapped, or oppressed people may arouse children's empathic concern.

Guilt and Shame in the Moral Process

Empathy is a prerequisite for the development of guilt, which is the personally experienced discomfort that comes from the knowledge that the child has harmed someone. Most writers on moral development in children agree that guilt is a pro-moral emotion, motivating the child to rectify wrongful behavior. According to Hoffman (1984), earliest forms of guilt may have come about because some action of the child occurred at the same time as the distress that another person was experiencing, without understanding the cause of the other person's distress. When the children are old enough to realize that others are separate from themselves, they may experience guilt if they feel responsible for the other's pain. The next step is to feel guilt if they see themselves as causing another's hurt feelings. The last step after the children realize the general plight of groups is to feel guilt for causing that condition, or because they are not likewise disadvantaged. Hoffman indicated that these moral emotions may form the motives for moral actions because they transform others' pain into personal discomfort, and make one feel responsible for the other's plight.

Damon (1988) distinguished between shame and guilt. He considered shame to refer to the embarrassment one feels after doing something disapproved of by society. However, it also involves a judgement of one's whole self, not just the behavior. Tangney (1991) found that even if the act has not been discovered, shame comes from external valuation and prompts a tendency to hide the evidence or to escape the situation. Whereas shame may promote conformity to the standards of the group, it may also present a blow to self-esteem and encourage the use of defense mechanisms in shifting blame onto others to preserve one's own ego. Shame, therefore, although affecting morality, is somewhat erratic, sometimes making a child behave more morally, sometimes prompting cover-up instead.

Damon asserted that an understanding of shame and guilt is invaluable in providing a point of entry into the child's awareness of moral values and that they orient and motivate the child to pay attention to moral events. The awareness of having hurt another person will develop an unpleasant feeling of guilt. Attempts to reduce guilt usually result in avoidance of hurtful behaviors or restitution after the behavior has occurred.

Failure to develop appropriate empathy and guilt may be a function of low self-esteem and the accompanying hostile attitudes which develop from low self-esteem. Apparently the effect of low self-esteem is to cause the child to think others are trying to do harm. Therefore the understanding of other's feelings will not be used to alleviate their distress but to take every advantage of the other person in order to ward off the threat that person poses to the self. Instead of becoming empathetic, the child becomes insensitive and cruel.

Implications for Developing Empathy: The best example of empathy is that provided by Jesus. He wept with Mary and Martha's sorrow; he understood the dismay of the hosts who did not have enough wine at the wedding; he shared the widow's sorrow when her only son died. Surely empathy is an attribute we should cultivate.

Schulman and Mekler (1985) suggest ways to help empathy develop. Expressions of empathy in the toddler should be encouraged. Questions such as "How does Bobby feel?", "How would you feel?", "Have you ever felt...?" are ways to encourage the child to consider others' feelings. Explain how others feel when they are hurting. When children have harmed others, if they feel empathy, wholesome guilt will usually also be present. Parents and teachers can then suggest or encourage effective means of moderating or removing the other's distress.

Let the child know that you care whether he is empathetic or not. Share your empathetic feelings with him and be empathetic with his feelings as well. Point out empathetic behavior in stories or real life and communicate your approval of such behavior. Remind him of the good feeling he gets when he is kind to others.

Pre-school children learn best by doing, therefore, helping to care for the unfortunate will promote empathy. They could adopt a "Grandma" in a nursing home, take gifts to a children's ward in the hospital, care for injured animals. Pre-schoolers also love stories. Acting out favorite stories from the life of Jesus, Bible heroes or other books is a valuable means of conveying empathy in action.

The social experiences, which are discussed in the next section, refine the moral emotions and give the child guidance for action and information regarding other's reactions.

Social Influences

Step Four, Self-esteem
Age Six to Eleven

Although we list the social domain after the biological and emotional domains, we have already discussed some of the social effects because the social arena is the field upon which the game of life is played and on which all the aspects of character interact. The first social encounter is at birth when the baby and parents first see each other, and this parent-child relationship continues to be very important for character development throughout life. However, in later years peer

influences also become important. Additional social influences later on include the school, church, community, government and workplace.

The child's attachment to the caregiver, which was discussed in the previous section as a precursor to conscience, may also be the most important of the social developments as it provides the foundation for further human relationships. This section describes the effect of parental discipline and peer relationships on the child's self-esteem and the society's contribution to the development of social values.

The Effects of Parental Discipline

We have already discussed that the methods parents use to control the child may be major determinants in developing the child's conscience. We now want to look at the way it affects self-esteem in middle childhood. Baumrind (1971) identified the authoritarian, authoritative, and permissive parenting styles. Authoritative parenting which couples unconditional love with high expectations of behavior enforced by procedures which make the children responsible for their own behavior. It appears to foster the ability of the children to govern themselves wisely and to develop self-esteem. On the other hand, the harsh control of authoritarian parents whose word is law, or the lack of control by the permissive parents who have no control, leave children defenseless in a world where self-discipline is essential. The review by Maccoby and Martin, (1983) leaves little doubt that authoritative parenting yields the most positive consequences for desired behavior and self-esteem in the child.

Consistent with Baumrind's research, and relating directly to the development of moral reasoning, studies have found that children who acquired the highest level of moral judgement had parents who (1) shared their moral views with their children, (2) did not have many conflicts with the children and (3) encouraged their child to think. Looking at moral development from the other side, early harsh discipline was associated with later aggressiveness in children, which may stem from the development of a negative life view which encourages aggressive behavior.

Peer Relationships and Self-esteem

As children begin to move out into the wider social circle of sibling and playmate relationships, they encounter a different set of rules. Damon observed that in the child-parent relationships power is unequal, whereas with peers the power has to be negotiated among equals. Children learn to attract other children to play and they must learn how to share toys, food and attention in a way that is satisfying to everyone. Although children often quarrel, they are also easily moved by the distress of others. Parents direct and enhance this natural empathy into prosocial actions by focusing on how the child's actions affect the feelings of others. Parents' use of punitive actions may only model aggressive behavior.

The social milieu is also a source of another very important affect, self-esteem. Self-esteem is usually based on two separate feelings about oneself: being lovable and being capable. Unconditional parental love and positive feedback is the first important information a child receives about his being lovable, but that feeling of being valuable needs to be

validated by others as the child grows older. The second component of self esteem, the sense of being capable, comes from other people's feedback and also from comparing oneself with others.

Both of these aspects of self-esteem have their first big test when the child starts school. School brings a new set of social demands: new authority figures, new peer relationships, and expanding cognitive and behavioral responsibilities. Children poorly prepared for school, mentally, socially, or behaviorally, may have difficulty making the adjustment, and find school a conflict and a serious blow to their self-esteem. Academic or social inferiority leads to personal and behavioral problems (Erikson, 1963). Ideally, however, school means further development in affective, social, and mental growth, through interaction with peers and authorities.

The qualities on which children base their self-esteem are of vital importance, for if self-esteem is based on comparison via competition, only a few children will find themselves at the peak. Kagan (1984) has suggested that children tend to compare themselves with the extremes rather than the average, so that the larger the peer group, the more likely the child will find others that excel and thus cause the child to label himself as inferior. Teachers should help the child to base self-esteem on self-acceptance, rather than competitive assessments. Then accurate feedback, even if negative, will not damage the child's self-esteem.

In a similar vein, several authors distinguish between true self-esteem and false self-esteem which is more of an attempt to look good. Some children, who did not have other indications of high self-esteem but had a high need for approval from others, scored highly on self-esteem tests. The need to "look good" seemed to stimulate "correct" or socially accepted answers rather than their own feelings, giving a false indication of self-esteem. True self-esteem does not need to prove itself through external approval but it is an internal process which is not defensive. Children with "true" high self-esteem did not cheat as much as those with low self-esteem or those with "false" self-esteem. Therefore, "true" self-esteem may be an important link between affect, cognition, and moral behavior.

On the negative side, Staub's research (1989) showed that criminals tend to have low self-esteem. Some criminals see threat everywhere and always act defensively, whereas others seek to establish their self-esteem through being tough and physical confrontation.

Social Sources of Moral Standards

As the children move away from the home and into the wider world of school and community, they come in contact with the demands, standards and values of others. The reference group may be peers, school, church, or the media, but these role models highly influence the values of the child.

The child's perceived ability to live up to the expectations of all these groups affects the child's sense of competence. Ideally, the social environment will re-affirm the child's sense of worth and healthy self-esteem will emerge. When these reference groups model behaviors that comply with standards found in the home, even if lower levels of moral development were faulty, the child may conform to the society's values.

Since Western pluralistic society does not present a unified view, often behavior that the family and church proclaim is right is not the same as the behavior that peers and the media display. This leads to confusion, so children tend to accept the standards of whichever models they can relate to and who appear to be most creditable, prestigious, and nurturant. Unfortunately, these models are often movie stars or sports heros.

Implications for Developing Self-esteem:

Unconditional love is a major source of self-esteem. This love is experienced in the life and death of Jesus Christ for each of his children. Parents and teachers need to lead the children to the love of Jesus, but also they need to experience his love in their hearts and respond to their children with the same love.

Parents can enhance their children's self-esteem by showing them appreciation, understanding and respect. It should not be necessary to say that parents will not call them names or refer to their errors as personality problems, but often the parents own frustrations lead them to say things that can significantly harm the child's self-esteem.

Trust needs to be both received and given. Parents need to be trustworthy and do what they say they will do. Children need feel that they are trusted also. This reciprocal relationship builds both self-esteem and good relationships.

Children can also be taught self-reliance and a feeling of competence by giving them opportunities to make their own decisions as they are able. Parents will not overprotect children from all evils or dangers, but will trust them to handle many of their own needs and encourage them to assist in the smooth running of the home.

Some children will need help in making the adjustment to school. Parents can be sensitive to the child's problems in school, and perhaps some tutoring in classwork or relationship skills will be needed. The child should not be pushed faster than he is ready. Often delaying entrance to school until the child is 7 or 8 years of age is the best answer for both academic and relationship problems.

It is important that the parents or teacher do not convey the idea that only the best or superior contestants are of value. Not all children can be superior in even one area of competition, therefore, everyone should be valued for their effort, not their super achievement. Comparing one child with another should also be avoided. Whereas derogatory statements or comparisons clearly destroy self-esteem, surprisingly, even praise is not recommended by either psychologists or E.G. White who said:

> "Children need appreciation, sympathy and encouragement, but care should be taken not to foster in them a love of praise. It is not wise to give them special notice, or to repeat before them their clever sayings...(the parent or teacher) will not encourage in the youth the desire or effort to display their ability or proficiency" (White, 1952, p 237)

In preparation for higher moral reasoning, children of this age love to discuss moral issues. Parents and teacher should be prepared to answer their "What if..." questions giving their own moral values and reasons. The children should also be encouraged to think through the problems on their own, then discuss moral issues in a group, which seems to be the most effective method of extending moral reasoning. Stories, followed by group discussions of the moral factors are prime motivators of moral development. (Smith, 1993).

These sections have shown how the biological capability of the individual reacts with the social environment, first with the parents and then with other authority figures and peers to produce the moral emotions of trust, conscience, empathy, guilt, altruistic motivation and finally self-esteem in the child. All of this occurred within the framework of the child's developing cognitive abilities as well. The next section traces the development of these cognitive functions and their moral implications.

Cognitive Effects on Moral Development

Step Five, Higher Moral Reasoning
Ages eleven to sixteen

This section first reviews the cognitive development theories of Piaget and Kohlberg, upon which most of the moral development research has been based. Next, the relationship between cognition and morality is explored.

Two Cognitive Theories

Piaget (1983), watching his own children's mental development, proposed four stages of development. During the first stage, which he called the Sensorimotor stage, from birth to about 2 years, the child learns mainly through physical sensations. This is followed by a Pre-operational stage in which the preschool child begins mental operations on ideas. During the Concrete Operations stage during the primary school years children's mental operations of classification, relationships and numbers are bound to concrete objects that they have experienced and can visualize. The last stage, known as Formal Operations, which permits abstract thinking, thinking about thought, and idealism, begins in early adolescence.

Kohlberg (1958) listed three levels of moral reasoning, each with two stages, which follow the child's cognitive development according to Piaget. Summarized, the theory catalogs rationales for moral behavior from (1) avoidance of punishment and (2) acting in one's own best interests and letting others do the same, on to (3) living up to what is expected of you as a consequence of your role within the family or community and to (4) a recognition of the need of law and order, culminating in (5) human rights and social welfare and (6) freely chosen ethical principles.

Piaget's concept of preoperational thinking of the preschool child limits the cognitive ability of the young child to understand others,

whereas concrete operational thinking in the primary grades leads to stereotyped, other-directed behavioral standards. However, in the development of formal operational thinking beginning in early adolescence, the person becomes capable of principled moral thinking. Consequently higher moral reasoning appears to depend upon, or is limited by, the child's cognitive development.

Although these cognitive theories have dominated the moral development studies for many years, and are still considered important aspects of morality, they are not now considered sufficient for explaining all of moral behavior. Some children may never have the cognitive ability to engage in principled moral judgments. Nevertheless, these children may be quite moral in their emotional reactions to others even though they may not operate on the higher levels of cognitive moral reasoning. Rational thought processes are not the only sources of moral judgements. Empathy and guilt, as we have seen are other important origins. The Holy Spirit may work on the conscience and decisions may also be based on Biblical standards. The moral reasoning theories are also criticized on technical aspects such as the age at which the events take place and cultural bias.

Therefore, as a complement to the earlier foundations of morality, moral reasoning may serve the purpose of determining the right response at times when moral goals are in conflict, or when society does not have clear standards. Conversely, inadequate preparation in the emotional foundations of the previous levels of moral development will probably fixate the child at lower stages of moral behavior with lower levels of reasoning. On the other hand, children with inadequate trust, conscience, empathy or self-esteem may use their higher levels of reasoning to justify immoral practices.

Implications for Development of Higher Moral Reasoning: Adults should not be unduly concerned if adolescents sometimes appear to reject some of the values the elders hold dear. Youth in the Formal Operations stage of cognitive development often need to cast off some of the parental ties so that they can develop their own value system. Patience, trust and understanding on the part of the elders will help the youth to cultivate their growing powers without throwing out all of the previously acquired beliefs that may have been imposed by well-meaning adults.

Children entering their teens need freedom to be themselves. However, parents and teacher should realize that youth also need authorities to guard them against damaging themselves with their freedom. Young teens especially need parental limits to their freedom, they need parents who will calmly and with understanding discuss issues with them even as they let the young people make most of their own decisions.

Teachers can continue to initiate moral discussions with teen peers. To their everyday moral concerns, they may wish to add issues of social concern, such as abortion, euthanasia, war, etc. Since the teens idealism is not yet tempered by practical experience, they can be encouraged to get active in the causes they espouse by writing letters to newspapers and politicians, or working actively for the underprivileged.

The youth's moral reasoning will also be enhanced if they are allowed a degree of self-government at school and in the family. Family meetings can democratically work out the problems of social living instead

of governing by commands coming from authorities. The children can be involved in family decisions, helping them become aware of the many forces which operate in daily life. Schools may allow student government more latitude in making and enforcing school policy, giving practice for living in the real world later on.

Spiritual Influences

Step Six, Meaning

Ages thirteen to eighteen

The culmination of the child's growth in all the areas previously considered leads to the spiritual dimension. Although many of the young child's moral judgments were based on religious beliefs, they were often reflections of the parents' beliefs (Fowler, 1981). In later childhood personal beliefs develop. Some youth call upon divine power and religious writings, such as the Bible, for help in personal understanding, but all develop some sort of a life view or narrative from which they make sense out of the world. These two aspects of the spiritual influences are examined under the headings of life view or meaning, and religion.

Life View or Meaning

Fowler (1981) describes the contents of faith by three elements. First, the centers of value reflect the causes, concerns, or people that have most value for the person. According to Fowler, conversion is the shifting from one set of values to another that is expected to be more effective in forming a harmonious view of life. A second element is the images of power and the powers such as God with which one aligns oneself. Finally, the master stories that one tells oneself shape one's life view. It is this life view of faith, which may or may not be religious, that ties all the bits and pieces of life into a single narrative which is the motivating force that causes a person to act in a moral or nonmoral way.

Religious Beliefs

The spiritual life view may include the concept of an external omnipotent God. Although some religions appear to disrespect a belief in an external power, Christianity's understanding of God's infinite love for each person can be of great value in establishing a child's healthy self-esteem (As God's chosen people, holy and dearly beloved... Col 3:12). Moreover, God's way of dealing with sin is an object lesson in dealing with failure (If we confess our sins, he is faithful and just to forgive us our sins and purify us from unrighteousness. 1 John 1:9). God's love for both sinner and saint also models love and understanding to others and creates the desire to do good in response to this love (Do not be overcome by evil, but overcome evil with good. Rom 12:21). Self-esteem is the natural result of experiencing God's love, and His behavioral expectations as given in the sacred writings or as revealed by His Spirit become the child's accepted standard of life.

On the other hand, the very young children's sense of God comes from their relationship with their parents (Fowler, 1981; White, 1952). If that relationship is faulty, children may get a distorted view of God and of the world. Conversely, those who have had inferior parental relationships and attachments may find resolution of that deficit in a relationship with God, thus fulfilling some of the neglected needs for personal development (Magid & McKelvey, 1987).

Implications for Developing Spirituality: During the teens, the spiritual dimension integrates all the previously mentioned mechanisms and gives the youth a stable outlook on relationships and right versus wrong. However, a danger also exists. The emerging personality seeks meaning in the context of the experiences of the past. Children who approach adulthood with hostile feelings toward others and low self-esteem, will try to find meaning for these feelings as well. The pain of low self-esteem may be eased by association with a group perceived to be powerful and hostility may be directed at outside groups that are thought to be enemies (Baumeister, 1994).

Teens will continue to be influenced by group discussions, so it is advisable that the school and church provide opportunities for these discussions without interfering unduly in the conclusions. Parents and teachers may share their life view, but must take care not to impose it on the youth. They may, however, make opportunities for the youth to develop their own values and meanings. The youth may be asked to write out responses to questions such as: "What does this mean to you?" "What values would you be willing to die for?" "What would you like to be imprinted on your tombstone?" etc. After writing their own answer privately, the issues could be discussed in the group.

Teens also benefit from opportunities to aid others. Work bees for the underprivileged, or a near-by mission field help them to see another side of life, and often inspire commitment to lifetime service for others.

The Moral Goals

In full maturity, we should find an individual who has rationally thought out life's major decisions, and come to accept God's standards and most of society's rules. Most of the adult's moral decisions are made on the basis of conformity to society's established expectations and Biblical principles which the person has internalized. These decisions do not have to be considered; they have become habit. Yet these are only baseline decisions. Beyond these, when confronted with a new situation, for which no rules exist, or when the existing rules are not just, the moral individual will be able to make decisions based on personal and universal principles.

The moral person does not just think rightly, he or she also acts rightly. The moral person will be loving, understanding, respectful, considerate, just, and active in promoting these ideals in the social world. In addition, the moral person is willing to take personal risks beyond the call of duty in order to advance the welfare of others, and will do so without sacrificing self, instead self will be enhanced.

REFERENCES

Abel, E. (1981) Behavioral teratology of alcohol. Psychological Bulletin, 90, 564-581.

Ainsworth, M. D. (1962). The effects of maternal deprivation: A review of findings and controversy in the context of research strategy. In Deprivation of maternal care: A reassessment of its effects. Geneva, World Health Organization.

Baumeister, R.F., Stillwell, A.M., & Heatherton, T.F. (1994) Guilt: An interpersonal approach. Psychological Bulletin, 115, 2, 243-267.

Baumrind, D. (1971). Current patterns of parental authority. Developmental Psychology Monograph, 4(2,Pt.2).

Bouchard, T. J., Lykken, D. T., McGue, M., Segal, N. L., Tellegen, A. (1990). Sources of human psychological differences: The Minnesota study of twins reared apart. Science, 250, 223-228.

Bowlby, J. (1969). Attachment and loss, Vol. I, Attachment. New York: Basic Books, Inc.

Cloninger, C. R., Bohman, M., von Knorring, A., Sigvardsson, S., (1982). Predisposition to petty criminality in Swedish adoptees: II. Cross - fostering analysis of gene-environment interaction. Archives of General Psychiatry, 39, 1242-1247.

Damon, W. (1988). The Moral Child. New York, Free Press.

Emde, R. N., Johnson, W. F. and Easterbrooks, M. A. (1987) The do's and don'ts of early moral development: Psychoanalytic tradition and current research. In Kagan, J. & Lamb, S. (Ed.) The emergence of morality in young children. Chicago. University of Chicago Press.

Erikson, E. H. (1963). Childhood and society. New York: W. W. Norton.

Fowler, J. W. (1981). Stages of faith. San Francisco: Harper & Row.

Grusec, Joan & Goodnow, Jacqueline. (1994). Impact of parental discipline methods on the child's internalization of values: A reconceptualization of current points of view. Developmental Psychology, 30, 1, 4-19.

Hoffman, M. L. (1984). Empathy, its limitations, and its role in a comprehensive moral theory. In Kurtines, W. M. & Gerwitz, J. L. (Eds.). Moral behavior and moral development. New York: Wiley.

Kagan, J. (1984). The nature of the child. New York: Basic Books, Inc.

Klaus, M. H. & Kennell, J. H. (1982). Parent-infant bonding. St. Louis, Missouri: C. V. Mosby.

Kohlberg, L. (1981, 1984). Essays on moral development Vol. I, II. Cambridge: Harper & Row.

Lewin, R. (1975, September). Starved Brains. Psychology Today. pp. 29-33.

Maccoby, E. E. & Martin, J. A. (1983). Socialization in the context of the family: Parent-child interaction. In P. H. Mussem (Ed.) Handbook of child psychology Vol. 4. (pp 1-101). New York: Wiley.

Magid, K. & C. A. McKelvey. (1987) High risk: Children without a conscience. New York: Bantam Books.

Matthews, K. A., Batson, C. D., Horn, J. & Rosenman, R. H. (1981). "Principles in his nature which interest him in the fortune of others . . .": The heritability of empathic concern for others. Journal of personality, 49:3, 237-247. Free Press.

Piaget, J. (1983). Piaget's Theory. (G. Gellerier, Trans.). In P. Mussen (Ed.) Handbook of child psychology. Vol. 3, 4th ed. (pp 103-128). New York: Wiley. (original work published in 1970)

Rosenblatt, J. S. & Lehrman, D. S. (1963). Maternal behavior of the laboratory rat. In H. L. Rheingold (Ed.), Maternal behavior in mammals. New York: Wiley.

Schulman, M. & Mekler, E. (1985). Bringing up a moral child: A new approach for teaching your child to be kind, just, and responsible. Reading, MA: Addison-Wesley.

Shafer, D. (1998). Developmental psychology: Childhood and adolescence. 2nd. ed. Belmont, CA: Brooks/Cole.

Smith, R. & Habenicht, Donna. (1993) Stories: an old education method rediscovered. Education, 113, 541-547.

Staub, E. (1989) The roots of evil: The origins of genocide and other group violence. Cambridge, The Press Syndicate of the University of Cambridge.

Streissguth, A. P., Aase, J. M., Clarren, S. K., LaDue, R. A., Randels, S. P., & Smith, D. F. (1991). Fetal alcohol syndrome in adolescents and adults. JAMA, 265, 1961-1967.

Tangney, J. P. (1991). Moral affect: The good, the bad, and the ugly. Journal of Personality and Social Psychology, 61, 4, 598-607.

Thomas,A., Chess, S., Birch, H. G. (1970). The origin of the personality. Scientific American. 223, 102-109.

White, E. G. (1952/1980). The Adventist home. Hagerstown, MD: Review and Herald.

White, E. G. (1903/1952). Education. Mountain View, CA: Pacific Press.

White, E. G. (1905/1941). The Ministry of Healing. Mountain View CA: Pacific Press.