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The effect of similarity in parents' moral stage on children's moral development.

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THE EFFECT OF SIMILARITY IN PARENTS' MORAL STAGE ON CHILDREN'S MORAL DEVELOPMENT

A Master Thesis Presented

by

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ABSTRACT

THE EFFECT OF SIMILARITY IN PARENTS' MORAL STAGE ON CHILDREN'S MORAL DEVELOPMENT

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The study investigated the effect of similarity of parental moral stage on adolescents' moral development, as determined within the framework of Kohlberg's theory of moral development. A subsample of 123 subjects from the Adolescent and Family Development Study of Harvard Medical School was used: 22 non-patient adolescents and their parents and 19 adolescents with serious psychological problems and their parents. Adolescent moral development was measured when the adolescents were 14 years old and again when they were 16 years old. Parents' moral development was also measured at Time 1. Multiple regression techniques were used to examine whether there is an effect of similarity of parental moral stage on adolescents' moral development, and if yes, whether it is a positive or negative effect. The effect of parental similarity was not significant in this study with a limited number of subjects, but did approach significance level

(p=.13). If anything, there was a negative effect of parental similarity on adolescents' moral development which can be understood within a Vygotskian framework.

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INTRODUCTION

This study investigated the effect of parental similarity in moral stage on the child's moral development. Parental similarity in moral stage is defined as mother and father having the same moral stage (in Kohlberg's scheme of moral development). The basic hypothesis of this study is that the constellation of moral stage within the parental dyad does have an impact on the child's moral development. Rather than looking at father's or mother's stage in isolation or at some average measure of parental moral stage this study concentrates on the child's parental moral environment, as shaped by the interplay of father's and mother's stage.

Research in schools has shown that cognitive conflict created by exposure to different levels of moral reasoning stimulated students' moral development (Turiel, 1966), but it is doubtful whether this finding applies to the family. As regards the type of possible effect of parental similarity in moral stage on a child's moral development, two possibilities will be explored: (1) Parental similarity stimulates children's moral development. Children need internal cognitive conflict and a homogeneous stage parental environment to progress rather than a conflict in moral reasoning between their parents. According to this

hypothesis, an environment that contains conflicting moral stages would actually impede the child's development. Because there is no consistency or agreement between the dissimilar parents in their teaching of moral reasoning for their child, the child may become confused. (2) Parental similarity impedes children's moral development. Differences in moral stage between the parents facilitate the child's moral development in a similar manner as cognitive conflict in schools, so that children in an heterogeneous family environment have an advantage over children in a homogeneous environment.

The emphasis of moral development research on school rather than the family environment is reflected in the relative dearth of research literature on the family's influence on children's moral development. There are only a small number of articles (Azrak, 1980; Foder, 1973; Haan, Langer, & Kohlberg, 1976; Hudgins & Prentice, 1974; Stanley, 1978, 1980; Powers, 1988) and several dissertations (Azrak, 1978; Grimes, 1974; Holstein, 1969; Parikh, 1975; Peterson, 1976; Powers, 1982; Shoffeitt, 1971; Speicher-Dubin, 1982) dealing with this topic.

This thesis has the following parts. First, I discuss why researchers in the cognitive-developmental tradition neglected the impact of the family environment on the moral development of children and adolescents. Then, a general overview of the mechanisms of stage change is given,

followed by a review of the few empirical studies about the relationship of parental and adolescent moral reasoning. The fourth section presents results of research about the moral development of adolescents who have serious psychological difficulties. Then, the rationale of the study, methods, and hypothesis are described. The last sections are results, discussion and conclusion.

1.1 Moral Development and the Family

The main focus of Lawrence Kohlberg's influential theory of moral development has been to establish the concept of stage sequence in the development of a person's moral reasoning. He postulated six stages which are grouped into three levels. The six stages are described in Table 1. Level 1 is the preconventional level that consists of stages 1 and 2. This is the level where most children under 9, some adolescents, and many adolescent and adult criminal offenders are. Individuals at the preconventional level have no understanding and do not uphold socially shared norms and expectations. Level 2 is the conventional level that comprises stages 3 and 4. Most adolescents and adults in the American society are at this level. Individuals at the conventional level share societal moral rules, norms and roles. Level 3 is the postconventional level which contains stages 5 and 6. Only a small number of adults reach the postconventional level and usually only after the age of 20-

25 years. Those at the postconventional level understand and generally accept society's rules, but acceptance of society's rules is based on formulating and accepting the general moral principles that underlie these rules. These principles in some cases come into conflict with society's rules, in which case the postconventional individual judges by principle rather than by convention (Colby and Kohlberg, 1987). Kohlberg also postulated intermediate stages between his six stages (e.g. 1/2, 2/3, 3/4, 4/5 and 5/6).

TABLE 1: The Six Moral Stages

Level and stage	Content of stage: What is right	Content of stage: Reasons for doing right	Sociomoral perspective of stage
Level 1: Preconventional: Stage 1. Heteronomous morality	To avoid breaking rules backed by punishment, obedience for its own sake, and avoiding physical damage to persons and property.	Avoidance of punishment and the superior power of authorities.	Egocentric point of view. Doesn't consider the interests of others or recognize that they differ from the actor's, doesn't relate two points of view. Actions are considered physically rather than in terms of psychological interests of others. Confusion of authority's perspective with one's own.
Stage 2. Individualism, instrumental purpose, and exchange	Following rules only when it is to someone's immediate interest; acting to meet one's own interests and needs and letting others do the same. Right is also what's fair, what's an equal exchange, a deal, an agreement.	To serve one's own needs or interests in a world where you have to recognize that other people have their interests, too.	Concrete individualistic perspective. Aware that everybody has his own interests to pursue and these conflict, so that right is relative (in the concrete individualistic sense).
Level 2: Conventional: Stage 3. Mutual interpersonal expectations, relationships, and interpersonal conformity	Living up to what is expected by people close to you or what people generally expect of people in your role as son, brother, friend, etc. "Being good" is important and means having good motives, showing concern about others. It also means keeping mutual relationships, such as trust, loyalty, respect, and gratitude.	The need to be a good person in your own eyes and those of others. Your caring for others. Belief in the Golden Rule. Desire to maintain rules and authority which support stereotypical good behavior.	Perspective of the individual in relationships with other individuals. Aware of shared feelings, agreements, and expectations which take primacy over individual interests. Relates points of view through the concrete Golden Rule, putting yourself in the other guy's shoes. Does not yet consider generalized system perspective.
Stage 4. Social system and conscience	Fulfilling the actual duties to which you have agreed. Laws are to be upheld except in extreme cases where they conflict with other fixed social duties. Right is also contributing to society, the group, or institution.	To keep the institution going as a whole, to avoid the breakdown in the system "if everyone did it," or the imperative of conscience to meet one's defined obligations.	Differentiates societal point of view from interpersonal agreement or motives. Takes the point of view of the system that defines roles and rules. Considers individual relations in terms of place in the system.

continued next page

TABLE 1 continued

Level 3: Postconventional or principled: Stage 5. Social contract or utility and individual rights	Being aware that people hold a variety of values and opinions, that most values and rules are relative to your group. These relative rules should usually be upheld, however, in the interest of impartiality and because they are the social contract. Some nonrelative values and rights like life and liberty, however, must be upheld in any society and regardless of majority opinion.	A sense of obligation to law because of one's social contract to make and abide by laws for the welfare of all and for the protection of all people's rights. A feeling of contractual commitment, freely entered upon, to family, friendship, trust and work obligations. Concern that laws and duties be based on rational calculation of overall utility, "the greatest good for the greatest number."	Prior-to-society perspective. Perspective of a rational individual aware of values and rights prior to social attachments and contracts. Integrates perspectives by formal mechanisms of agreement, contract, objective impartiality, and due process. Considers moral and legal points of view; recognizes that they sometimes conflict and finds it difficult to integrate them.
Stage 6. Universal ethical principles	Following self-chosen ethical principles. Particular laws or social agreements are usually valid because they rest on such principles. When laws violate these principles, one acts in accordance with the principle. Principles are universal principles of justice: the equality of human rights and respect for the dignity of human beings as individual persons.	The belief as a rational person in the validity of universal moral principles, and a sense of personal commitment to them.	Perspective of a moral point of view from which social arrangements derive. Perspective is that of any rational individual recognizing the nature of morality or the fact that persons are ends in themselves and must be treated as such.

Source: Reprinted from Kohlberg (1976).

Second in importance only to developing a measure of moral development and corroborating the concept of a stage progression of moral development itself, Kohlberg's theory of moral development has the additional task of explaining the determinants of moral development.

Moral development, according to Kohlberg, is not an internal maturation process determined only by the individual's traits, nor is it merely a function of environmental stimuli, as radical behaviorists may hold. Rather, Kohlberg considered moral development "a product of interaction between the social environment and an individual's internal cognitive structures." (Powers, 1988, p. 209). Consequently, Kohlberg and other researchers who shared his basic theory have examined the impact of individuals' social environments on their moral development. These studies primarily investigated the impact of the school environment on students' moral development (Higgins, Power, & Kohlberg, 1984; Power, Higgins, & Kohlberg, 1988). In contrast, the impact of the family environment on moral development was a neglected research question. One reason for this neglect may be the fact that an institutional environment, such as a school, is more directly accessible than the family environment for efforts that aim at furthering moral development. Another reason was opposition to the traditional emphasis in developmental psychology on the family's primary role in moral development. Kohlberg

emphasized that the family is not a privileged environment for moral development -- other environments can have similar effects on moral development. Moreover, from a methodological point of view, it appeared advantageous to study the effects of the social environment on moral development in an environment that has fewer and more specific effects on the child's development than the family whose numerous interrelated functions make it hard to isolate its specific contributions to moral development.

Neither policy-making nor methodological convenience, however, justify the neglect of the family in the study of moral development. Important things do, unfortunately, happen not only in areas to which the social reformer has immediate access. And even if one accepts that it may be methodologically easier to demonstrate the general principles of environmental impact on moral development in schools than in the family, there may be unique conditions in the family that set it apart from the school environment, as Powers (1982, 1988) and Speicher-Dubin (1982) have argued. "The same interactions assumed to stimulate moral development in the classroom may have a different meaning within the family and, thus, not facilitate development." (Powers, 1988, p. 211). Thus, research is needed to determine the precise role of the family for children's moral development.

1.2 The Mechanisms That Facilitate Stage Changes

Powers (1982) described in detail the mechanisms that facilitate moral stage change. The concept of equilibration, pioneered by Piaget, is widely used to understand cognitive development. Basically, equilibration is the process between an individual's interactions with others and objects (external environment) on the one hand, and his/her internal cognitive organization on the other. The individual is in a so-called stable state when internal cognitive organization and external stimuli are in agreement. New information or stimuli from the external environment can cause an uncomfortable disturbance to this internal stable state, and, as a result, disequilibrium. The discomfort of this disturbance would prompt the individual to assimilate or re-organize his/her internal cognitive structure in view of the new information. The individual would then integrate the new information with his/her existing internal cognitive structure to form a new internal organization in order to have a stable, comfortable internal state again (equilibrium). There is an assumption that each disturbance would either be assimilated to the individual's existing structure, or the structure would change to accommodate the new information. These processes of assimilation and accommodation, thus, build more complex thought processes.

Another concept that is important to developmental stage change is role-taking. According to Kohlberg (1984), "social cognition always involves role-taking, that is, awareness that the other is in some way like the self and that the other knows or is responsive to the self in a system of complementary expectations" (p.9). Role-taking is important because it provides an opportunity for the individual to experience and to understand the other person's perspective which may be different from his/her own. If it is different, then disequilibrium will come about and the individual will have the opportunity to incorporate the new perspective in his/her existing perspective and the result would be a new perspective for the individual. Thus, role-taking stimulates growth from stage to stage through a process of equilibration. Most of the opportunities for role-taking are available in the social environment. Depending on the individual's activities, he/she may find opportunities for role-taking in various settings, such as, in religious and political groups, schools or families. Interactions with different age groups and ethnic groups would also provide opportunities for role-taking. Piaget stressed the importance of peer relationships in developmental change. He considered peer relationships very important because in them the child is equal to the other child, thus providing a neutral ground for learning from each other. This

relationship provides a favorable atmosphere for the child to be more motivated in trying to understand the other child's different perspective. Piaget felt that developmental change is best served by peer relationships, not by parental relationships which are unequal, authoritarian relationships. Basically, the child is not required to understand the parent's perspective since the child has his/her own prescribed roles within the family relationship.

The third concept important to developmental change is cognitive conflict. Powers (1982) stated that "disequilibrium must be manifested experientially as confusion and internal conflict. If the internal consistency of a stage or the adequacy of a person's interaction with the environment is weak (this is true at all lower stages) it is not enough to produce disequilibrium. The natural disequilibrium of a lower stage produces change when the thought structure is recognized and experienced in confusion. This experience of disequilibrium is called 'cognitive conflict' because an individual's cognitive organization is felt to be in conflict" (p. 14).

Furthermore, Powers (1982) pointed out the distinction of controversy and cognitive conflict. She cited Johnson and Johnson's (1979) definitions for both: "Controversy 'exists when one person's ideas, information, conclusions, theories or opinion are incompatible with those of another

person and the two seek to reach an agreement.' Cognitive conflict appears when 'two incompatible ideas exist simultaneously within an [individual's] mind and must be reconciled' (p.52)" (p.14). Controversy serves as an antecedent to stimulate cognitive conflict in the individual. However, the strength and the level of the controversies must be adequate in order to stimulate cognitive conflict and, consequently, cognitive change or stage change. There has not been total agreement on which level of controversy facilitates moral stage change, as results of studies have been mixed in this area (Walker, 1982; Walker and Taylor, 1991).

In order for controversies to facilitate stage change, Powers (1982) pointed out several conditions. First, controversy has to be within the right context. Depending on context, its effects can be constructive or destructive. Criteria for constructive controversies are that parents must provide clear communication of different perspectives and information for their child. They must also create a supportive atmosphere in order for the child to feel safe to disagree without defensiveness or punishment. Also, the way in which the parents define the purpose of the controversy (whether competitive or non-competitive) has an important impact on the effectiveness of the controversy. Moreover, the family not only must have clear communication but also

be able to recognize the similarities in their reasoning in order to achieve integration of perspectives and reasoning.

Second, controversy must be appropriate to the child's existing cognitive structure. When parents expose the child to a controversy that is argued at an inappropriate stage level, the child may not understand. In other words, the controversy must be presented in a way that matches the child's existing stage level or ability. Children can understand reasoning at their own stage, all lower stages, and at the next higher stage if they already have partial usage of that stage. A preference for higher stage reasoning was supported by Rest's (1968) and Rest, Turiel & Kohlberg (1969) findings. The researchers interviewed children and asked them to write down their own reasoning after the children had been shown prepared statements obtained from each of Kohlberg's six moral judgment stages. These studies are important because they demonstrated that the limits set by a child's own existing stage affect how moral controversy may be perceived.

Third, parents must be able to assess the child's level of understanding in order to articulate their perspectives or understanding of a particular controversy on a level that the child can understand. Walker and Taylor (1991) noted in their article the Kohlbergian view on the effective and optimal level of mismatch in stage for development. According to Kohlberg, moral reasoning that is one stage

higher than that of the individual (+1) is the most conducive for stage change. However, Walker (1982) found that +2 stage reasoning is just as effective in facilitating moral stage change as +1/3 stage reasoning, which Berkowitz, Gibbs, and Broughton (1980) in their stage disparity study obtained as the optimal level of mismatch.[1] In his latest family interaction study, Walker and Taylor (1991) found that reasoning about one stage higher than the child's reasoning stage is the best facilitator for moral development, which is consistent with the Kohlbergian view. Another result from Walker and Taylor's (1991) study was that parents were able to lower their level of moral reasoning to accommodate their child's level during the family discussion of a moral issue. However, there was a certain amount of limitation in parental accommodation. "Parents of low-stage children lowered their level of reasoning more so than parents of high-stage children. However, it was not to the extent that the parent/child moral stage disparity was the same for children at different stages of development: greater disparities were evidenced for low-than for high stage children" (p.26-27). Another finding from this study was that when parental accommodation occurred, there was a tendency for the child to reason at a

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[1]. A third of a stage was obtained from "moral maturity scores" (MMS). Moral stage scores can be converted to "moral maturity scores" by a process of weighing each stage score and multiplying by 100 to obtain a scale from 100 to 600.

higher level than his/her own assessed level from pre-test (interview). Walker and Taylor suggested that this illustrated Vygotsky's notion of "zone of proximal development" and Wood's notion of "scaffolding". These two notions have been closely linked together in the fields of cognitive development and learning. Vygotsky's (1978) notion of "zone of proximal development" means that the child is not able as yet to perform successfully on certain tasks by his/her self but can accomplish certain parts of the task with direct adult support and guidance. In learning, teachers or tutors will seek out this zone and gradually reduce the support and guidance when the child is capable to work independently. The notion of "scaffolding" was introduced by Wood and Bruner (Wood, 1980) to describe the strategies by which parents support children's learning through interventions that provide task information at different levels of structure, depending on the child's current capabilities. In relation to moral development, these two notions mean that parents will need to seek out the child's level of moral reasoning, lower their (parental) moral reasoning, introduce new moral concepts at appropriate stages of the child's moral development. If all of this is combined with support and guidance, the child will have a good opportunity to learn to reason at a higher level.

The preceding section surveyed some major theoretical concepts about stage changes in children's moral

development. It remains unclear, however, what prediction these concepts would make about the effect of parental similarity in moral stage on adolescents' moral development. On the one hand, it could be argued that parental dissimilarity in moral stage violates important conditions for the facilitation of stage change. These conditions are that parents need to provide both clear communication and clear definition of moral issues in order to facilitate stage change. The adolescent may be confused by receiving conflicting communications from parents operating at different moral stages. On the other hand, one could hypothesize that children with dissimilar parents could first orient themselves at the lower-stage parent and later at the higher-stage parent. Dissimilar parents would thus present a longer scaffold or an extended zone of proximal development, in Vygotsky's terms, that would facilitate the child's development. This study will investigate empirically which hypothesis appears more plausible.

1.3 Parental Moral Reasoning and Adolescent Moral Reasoning

Powers (1982, 1988) and Speicher-Dubin (1982) did a comprehensive review of the relationship of parental moral reasoning to adolescent moral reasoning. Literature in this area is extremely limited (e.g. Holstein 1969, 1976; Parikh, 1975; Haan, Langer & Kohlberg, 1976; Speicher-Dubin, 1982; Powers, 1982, 1988; Walker & Taylor, 1991). Results from

early studies have been inconsistent and weak, partly because researchers were using different moral stage scoring systems which had poor reliability and validity (Aspect Scoring System, Issue Scoring System, and Structural Issue Scoring System). I will review Speicher-Dubin's and Powers' research because they used the latest scoring manual with the highest reliability, the Standard Form Scoring Manual (Colby & Kohlberg, 1987).

Speicher-Dubin (1982) investigated family interaction and the relationship between the parental and the children's moral reasoning scores. She used data from the Kohlberg longitudinal study (Kohlberg, 1958) and the Oakland Growth Study (Jones, 1939) in both of which longitudinal data were collected. The quality of the Moral Judgment Interviews varied because of the different method of administrations, (personal interview vs. paper and pencil). Speicher-Dubin rescored the Oakland Growth Study with the Standard Form Scoring Manual for better reliability and consistency with the scoring of the Kohlberg longitudinal study. My review of Speicher-Dubin's findings will be limited to the relationship of the parental and the children's moral reasoning. Additionally, I will only review the findings for the 13 to 18 year old children as applicable to my study.

In the Kohlberg sample, Speicher-Dubin studied 21 subjects out of the original 84 subjects because this

smaller sample had parents (18 fathers and 19 mothers) who completed the moral judgment interviews. The sampling of the Kohlberg longitudinal study consisted of sons and parents. The correlations of mothers' and sons' for moral reasoning in both the 13 to 14 years old and 16 to 18 years old groups was non-significant. Likewise, the correlation between fathers and sons in the two particular age groups was also non-significant.

The Oakland Growth Study sample consisted of daughters, sons, mothers and fathers. The 13-15 year old group included 21 sons and 17 daughters. The 16-18 year old group consisted of 20 sons and 21 daughters. Speicher-Dubin found a significant correlation between mothers' moral judgment and daughters' moral judgment in the 13-15 year old group. However, there was non- significant correlation between mothers' and sons' moral judgment in the 13-15 year old age group. In addition, there were non-significant correlations between mother-daughter and mother-son moral reasoning in the 16-18 age group. Fathers' moral judgment was significantly correlated with their daughters' moral judgment in the 13-15 age group, but not with sons' moral judgment in the same age group. Moreover, fathers' moral judgment was not significantly correlated with either sons or daughters in the 16-18 age group.

Powers (1982) drew her sample from a larger sample in the Adolescent and Family Development Project of the

Laboratory of Social Psychiatry at Harvard Medical School. Her study consisted of two groups: psychiatric adolescents and non-psychiatric adolescents and their parents. The non-psychiatric adolescents were from a local suburban high school (N = 32, 18 girls and 14 boys). The psychiatrically hospitalized adolescents were from a private psychiatric hospital (N = 27, 14 girls and 13 boys). All the subjects were from intact families. Powers' (1982) sample is a subsample of the data used in this study because Powers' sample contained only data from year 1 and only from those children from intact families that had participated in a family interaction task. The age range of the adolescents in the total sample was from 12-16 years of age. Eighty-five percent of the adolescents were either 14 or 15 years old. Each parent and adolescent was individually administered Kohlberg's Moral Judgment Interview by trained interviewers. The interviews were scored according to the Standard Form Scoring Manual.

The distribution of the moral judgment scores for the non-psychiatric adolescent sample of mothers' ranged from stage 3 to stage 4/5. The majority of the mothers' scores were either at stage 3 or 3/4. The non-patient adolescent sample of the fathers' moral judgment scores ranges from stage 2/3 to stage 4/5. Most of the fathers' scores were at stages 4.

Mothers and fathers of non-psychiatric adolescents differed in their moral development. Fathers' moral maturity scores were significantly higher than mothers' moral maturity scores. When father's and mother's levels of education and occupational status were controlled, however, no differences were found.

The non-psychiatric adolescents stage scores distribution was as followed: 6 percent at stage 2; 25 percent at stage 2/3; 44 percent at stage 3; 16 percent at stage 3/4; and 9 percent at stage 4.

There were no significant sex differences between boys' and girls' moral maturity scores in the non-psychiatric group. In addition, Powers found no significant correlations within this group of the adolescents' moral maturity scores and their parents', mothers' and fathers' moral maturity scores.

To summarize the reviewed studies that addressed the relationship between parental and adolescent moral reasoning, two of them (Speicher-Dubin [Kohlberg sample], Powers) did not detect any correlation, whereas one (Speicher-Dubin [Oakland Growth Study sample]) found correlations only between mothers' moral stage and daughters' stage at age 13 - 15 and between fathers' moral stage and daughters' stage in the same age group. Thus, empirical evidence of parental impact on adolescents' moral development is far from overwhelming. These studies,

however, always considered the stage of one parent in isolation. My approach is to examine both parents' stages together to see whether there is a combined effect (in the form of parental stage similarity) on children's stage.

1.4 Parental Moral Reasoning and Psychiatric Adolescent Moral Reasoning

There is little empirical information about the moral reasoning of adolescents with psychological difficulties, although there is an abundance of research information regarding court defined delinquents' moral reasoning.

Powers' (1982) was one of the first researchers who included a psychiatric sample in her study. Her findings showed that there were significant differences between the psychiatric adolescents' moral maturity scores and the non-psychiatric adolescents' moral maturity scores. The psychiatric adolescents' stage score distribution was as follows: 7 percent at stage 1/2; 37 percent at stage 2; 41 percent at stage 2/3; 11 percent at stage 3; and 4 percent at stage 3/4. This distribution indicates that the psychiatric adolescents' moral development is considerably lower than the non-psychiatric adolescents'. Similar to the non-psychiatric adolescents, there is no significant sex differences between the psychiatric group of boys' and girls' moral maturity scores.

There were no significant differences of the parental moral stage scores between the parents of psychiatric adolescents and parents of non-psychiatric adolescents after parental SES and level of education were controlled. However, when the mean moral maturity scores of parents with non-psychiatric adolescents were compared with the mean moral maturity of parents with psychiatric adolescents, fathers' and mothers' moral maturity were significantly higher in the non-psychiatric adolescent group than the psychiatric adolescent group. In the psychiatric group, fathers' moral maturity scores were also significantly higher than mothers' moral maturity scores. However, when father's and mother's levels of education and occupational status were controlled, no differences were found. Additionally, Powers' study did not find any significant correlations between the psychiatric adolescents' moral maturity scores and their parents', mothers' and fathers' moral maturity scores. So far in this sample, the issue of parental similarity was not examined.

1.5 Rationale for the Present Study

All the reviewed studies investigated the relationship between children's moral development and father's or mother's moral development in isolation. Their findings were mixed and no strong trend emerged. These studies, however, did not examine whether the constellation of moral

development within the parental dyad had any effect on children's development.

This study investigates whether similarity in parents' moral stage has any effect on children's moral development, and if yes, if it is a positive or negative effect. At issue here is the relationship between "controversy" and "cognitive conflict" in Johnson's (1979) terms, as regards children's moral development. Although controversy between the child and his/her environment is an antecedent of cognitive conflict and thus stage change, too much controversy within the child's environment, as one might expect when the parent's moral stages are dissimilar, may confuse the child. As Powers (1988) noted, a family may be substantially different from a school environment. External controversies within the family environment may impede the internalization and transformation of controversies into internal conflict, whereas they were found to be beneficial for moral development in school settings (Turiel, 1960).

Alternatively, a heterogeneous family environment may widen the range of the "zone of proximal development" (Vygotsky, 1978) or, in other words, extend the length of the scaffold. This might facilitate the child's climbing up in the stage sequence as the child can orient his/herself first to the lower stage parent and then, having reached that stage, to the higher stage parent.

Since there is a paucity of empirical research on moral development of adolescents with psychological difficulties, I am exploring the existing data to see if there is a difference in the effect of parental similarity on these adolescents' moral development compared with adolescents without any serious psychological difficulties.

1.6 Hypotheses

The primary hypothesis of this study about the effect of parental similarity in moral stage on adolescents' moral development is:

(1) Adolescents with parents of similar moral stage experience a different rate of moral development than adolescents with parents of dissimilar moral stage.

In addition to these primary hypothesis, the following hypotheses can also be examined:

(2) The effect of similarity is bigger for the psychiatric group (because they have higher need for consistency).

(3) The stage of adolescents increases with age.

(4) Psychiatric adolescents have lower stage than the non-psychiatric adolescents at year 1.

(5) Psychiatric adolescents close the gap of stage difference with the non-psychiatric adolescents at year 3.

CHAPTER 2

METHODS

2.1 Sample

My project uses existing data from the Adolescent and Family Development Study of Harvard Medical School. This study collected four consecutive years of data from 1979 to 1982. This original sample consisted of 194 adolescents who were divided in 3 groups: psychiatrically hospitalized adolescents and their parents; non-patient adolescents and their parents; and diabetic adolescents and their parents. The diabetic group will not be used for this study and will not be described. In year 1, there were 70 psychiatric adolescents and 76 non-psychiatric adolescents. In year 2, there were 63 psychiatric and 70 non- psychiatric adolescents. In year 3, there were 56 psychiatric and 57 non-psychiatric adolescents. Due to monetary constraints in year 4, the sample size was intentionally reduced to 35 psychiatric and 39 non-psychiatric adolescents. The psychiatric adolescents were drawn from successive admissions to the children's unit of a private psychiatric hospital in year 1 of the study. All patients diagnosed as having a thought disorder or organic brain damage were excluded from the sample. The non-patient adolescents were drawn from freshman volunteers attending a suburban public high school. In the first year of the study, the adolescents were in the ninth grade and their mean age was

fourteen and a half years old. By the fourth year of data collection, the adolescents were in the twelfth grade and with the mean age of seventeen and a half years old.

For this study, a subsample is used consisting of only the psychiatric and non-psychiatric subjects who participated in year 1 and year 3 of the original study, whose families were "intact year 3" (adolescents living with both parents in year 3) and whose two parents also participated in the study. Thus, the study contains the following 123 subjects: 19 psychiatric adolescents and their parents, and 22 non-patient adolescents and their parents.

2.2 Measure of Moral Development

Kohlberg's structured Moral Judgment Interview was administered to each parent and adolescent individually by trained interviewers. Subjects are asked to discuss how best to solve three hypothetical moral dilemmas. Individual's responses were scored for stage of moral reasoning about justice issues. These interviews were tape recorded and then transcribed.

Five graduate research assistants were trained to score moral judgment interviews by a consultant from the Harvard Center for Moral Development. The interviews were scored according to the Standard Form Scoring Manual (Colby and Kohlberg, 1987). Standard scoring of Kohlberg's moral

judgment interview produces a nine-integer stage score: full stage scores of 1 through 5 and transitional scores between each of the five full stages. These stage scores can be converted to "moral maturity scores" (MMS) by a process of weighing each stage score and multiplying by 100 to obtain a scale from 100 to 600. There is strong evidence for the reliability and construct validity of Kohlberg's measure of moral development (Colby et al., 1983). The Moral Judgment Interviews of all adolescents and parents in the psychiatric and non-patient samples were scored for years 1, 3, and 4. In addition, all Moral Judgment Interview protocols of the adolescents were scored for year 2. Parental moral judgment data for year 2 were not scored because preliminary data analyses showed that there was no significant change in parents' scores from year 1 to year 3.

2.3 Interrater Reliability

The five scorers each obtained good interrater reliability, ranging from .86 to .93 (Pearson product-moment correlations).

2.4 Design

The study is a multiple regression design. The dependent variable is the change in the adolescent's moral development between year 1 and year 3 (change score). It

was computed as the difference between the moral development scores in these years (year 3 minus year 1).

The similarity of parental moral stage was measured as the absolute difference between father's and mother's moral stage in year 1. This measure disregards which of the parents scores is higher. Analyses were performed for two versions of the similarity measure: a continuous variable of parental difference, and a dichotomous variable distinguishing between parents who have the same moral development scores and all others who are considered dissimilar as regards moral development. The other predictor variable is the site (non-psychiatric versus psychiatric).

Two control variables were included in the analyses: the average parental moral development score of year 1, and the adolescent's moral development score in year 1. These control variables were included in the analysis for the following reasons. The parental similarity measure is independent of the developmental level of the parents. For instance, parents at stages 2 and 2/3 receive the same similarity score as parents at stages 4 and 4/5. Yet the general level of parental moral development may play an important role in adolescents' moral development. Growing up with parents of high moral stage may have a stimulating effect, whereas growing up with parents of low moral stage may have a depressing effect on adolescents' moral

development. An analogous problem exists with the dependent variable (change score), a difference score between moral stage in year 3 and year 1, that disregards the initial level from which the development starts. The initial level may be important because of a possible ceiling effect. Those who are at an advanced moral stage in year 1 may not register as much moral development between year 1 and year 3 as those who are at a low initial stage.

CHAPTER 3

RESULTS

3.1 Univariate Descriptive Statistics

Adolescents' moral development (change score - KIDDEV)

Of the 41 adolescents, five (12.2%) regressed between year 1 and year 3 of the study. Of those, four (9.8%) regressed half a stage and one (2.4%) regressed one-and-a-half stages. Eleven adolescents (26.8%) did not change, whereas 17 (41.5%) advanced half a stage; seven adolescents (17.1%) advanced one stage, and one (2.4%) adolescent advanced one-and-a-half stages. The mean stage change was a third of a stage (0.33), the median was half a stage (0.5) (Table 2). Thus, hypothesis (3)--that the moral stage of adolescents increases with age--is clearly supported.

Parental dissimilarity in moral development (SIMIL-dichotomous; APARDIFF-continuous)

No differences in the two parents' stage scores were found in 15 cases (36.6%). In the rest of the cases (63.4%), the parents differed by at least half a Kohlberg Stage. This distinction was used in our dichotomous measure (SIMIL) of the dissimilarity of parents' moral development. The continuous measure was the absolute difference between the parental scores (APARDIFF). The parents of sixteen adolescents (39.0%) were half a stage apart. Eight

adolescents (19.5%) had parents whose moral development differed by one stage. In one case (2.4%) the parents were one-and-a-half, and in one they were two stages apart. The mean of the continuous dissimilarity measure was almost a half-stage (0.48), the median a half-stage.

Site (SITE)

Whereas 19 subjects were adolescents who were in-patients at a psychiatric hospital, 22 subjects were non-psychiatric adolescents from a high school in Brookline, MA.

Parental average moral development (PARAV)

For the following, intermediate stages are expressed in decimals (e.g. stage 2/3 is 2.5). The average parental moral development ranged from 2.25 (between 2 and 2/3) to 4.25 (between 4 and 4/5). The mean was 3.41 (almost 3/4), the median 3.5 (3/4), and the mode 3.25. The standard deviation was 0.45. The average for parents of non-psychiatric subjects is 3.58 (median = 3.63, mode = 4), which is higher than for parents of psychiatric subjects (mean = 3.21, median = 3.25, mode = 3).

Adolescents' initial moral stage [year 1] (AMORSC1)

The adolescents' initial moral development ranged from stages 2 to 4. The average was 2.72, with a median of 2.5 (2/3) and a mode of 3. The standard deviation was 0.58.

The non-psychiatric adolescents had an average stage of 3.00 (median = 3, mode = 3), whereas the psychiatric patients scored lower (mean = 2.39, median = 2.5, mode = 2).

In year 3 the adolescents had advanced to a mean of 3.05 (median = 3, mode = 3.5). The non-psychiatric adolescents (mean = 3.34, median = 3.5, mode = 3.5) again scored higher than the psychiatric adolescents (mean = 2.71, median = 2.5, mode = 2.5).

Table 2: Univariate Statistics

Variable	N	Mean	Median
KIDDEV	41	0.33	0.5
APARDIFF	41	0.48	0.5
PARAV	41	3.41	3.5
non-psychiatric	22	3.58	3.63
psychiatric	19	3.21	3.25
AMORSC1	41	2.72	2.5
non-psychiatric	22	3.00	3.0
psychiatric	19	2.39	2.5

Note: Means and medians are in Kohlberg stages.

3.2 Zero-order Correlational Analysis

An inspection of the correlation matrix (Table 3) of the dependent variable and the four predictor variables confirms the importance of the control variable of adolescents' initial moral stage in the prediction of adolescents' development (change score -- KIDDEV). There is

a strong negative correlation (r=-.50; p=.0008) between adolescent's moral stage in year 1 and adolescent's moral development (change score). Those who were already at a relatively high stage in year 1 did not progress as much as those at lower stages in year 1. The trend goes toward evening out initial developmental differences. This is the only significant correlation of adolescents' moral development (change score) with any of the predictor variables.

Furthermore, there is a strong positive correlation (r=.40; p=.0087) between the two control variables, adolescent's initial stage (AMORSC1) and parents' average stage (PARAV), indicating that high-stage parents have high-stage children. Parental average score is not significantly associated with parental similarity (APARDIFF) in moral development (r=-.13; p=.4213), underscoring that parental similarity in moral development is relatively independent of the absolute level of parental moral development. Site and adolescent's moral stage in year 1 (AMORSC1) show a strong negative correlation (r=-.53; p=.0004). Psychiatric adolescents tend to be at a lower stage than non-psychiatric adolescents, as predicted in hypothesis (4). Also, the parents of psychiatric adolescents are at a lower moral stage, on the average, than the parents of non-psychiatric adolescents (r=-.42; p=.0066).

TABLE 3: Zero-order Correlations

	KIDDEV	APARDIFF	SIMIL	PARAV	AMORSC1	SITE
KIDDEV		.19785	-.08680	.02371	-.50103	-.02286
		.2150	.5895	.8830	.0008	.8872
APARDIFF			-.77209	-.12905	-.09353	.10071
			.0001	.4213	.5608	.5310
SIMIL				.10015	-.11397	.00495
				.5333	.4780	.9755
PARAV					.40438	-.41738
					.0087	.0066
AMORSC1						-.52551
						.0004

Note: Numbers in the second line are p-values.

3.3 Multivariate Analysis

A multiple regression of adolescent's development (change score) on the four predictors (including the dichotomous similarity measure) showed that the adolescent's moral development in year 1 is the most powerful predictor ($t=-5.15$, $p=.0001$), and site is also significant ($t=-2.27$, $p=.0294$), as shown in Table 4.[2]

[2]. Almost identical results to those described in the text were obtained for a regression using the continuous similarity measure, instead of the dichotomous measure.

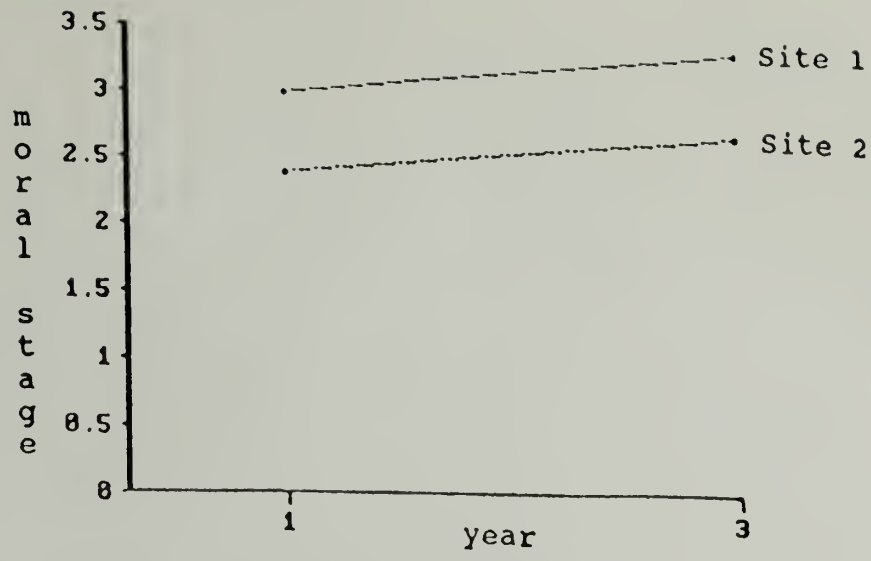
TABLE 4: Multiple Regression of KIDDEV (Main Effects)

Predictors	Parameter Estimate	Standard Error	t	p	R2
Intercept	3.72	1.40	2.650	.0119	
PARAV	.27	.18	1.523	.1365	
AMORSC1	-.76	.15	-5.146	.0001	
SITE	-.76	.34	-2.268	.0294	
SIMIL	-.45	.29	-1.539	.1326	
					.4289

Note: The measure of KIDDEV is in half-stage. 1 is equivalent to stage 1, 2 to stage 1/2, 3 to stage 2, and so on up to 9 which corresponds to stage 5.

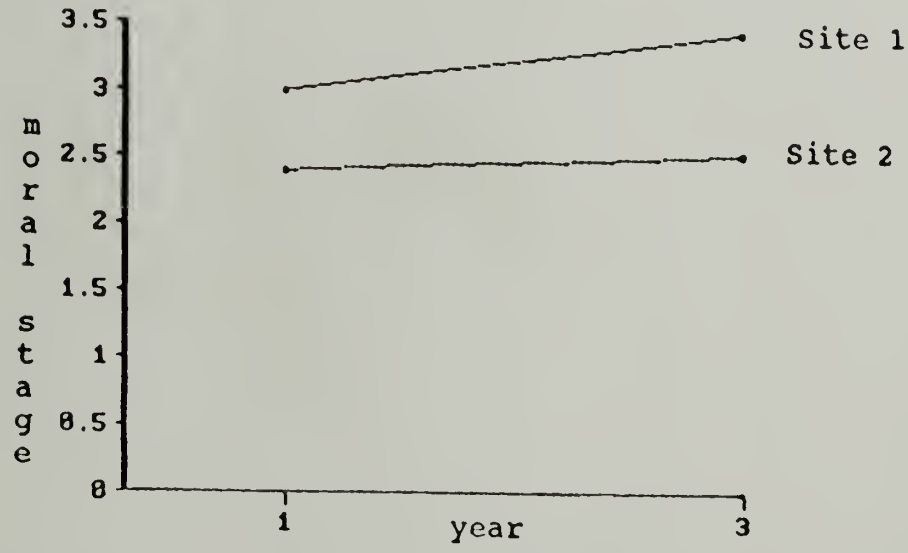
Adolescents with high initial moral stage showed less development between year 1 and year 3 than adolescents with low initial stage. Also, the psychiatric adolescents evidenced less development (parameter estimate: -.76) than their non-psychiatric counterparts, controlling for the other predictors. In this case, the multiple regression result contradicts the zero-order correlations. If one just compares the development (change score) of psychiatric and non-psychiatric adolescents there is no difference (r=-.02; p=.8872), but this comparison disregards the effects of other intervening variables, in particular adolescent's initial moral stage. Those who are at a low initial stage improve more as we have seen (probably simply because there is more room for improvement) and psychiatric adolescents

have a lower initial moral stage on the average. Taking these two facts into consideration the multiple regression leads to the conclusion that, controlling for adolescents' initial stage, psychiatric adolescents experience less net moral development (change score) than non-psychiatric adolescents (Fig. 1, 2). This contradicts hypothesis (5)--that psychiatric adolescents close the gap to non-psychiatric adolescents. Whereas in a zero-order correlation the gap remains constant, it even widens when controlling for initial stage.



Note: Site 1 = non-psychiatric, Site 2 = psychiatric.

Figure 1: Moral Development by SITE



Note: Site 1 = non-psychiatric, Site 2 = psychiatric. To control for the effect of AMORSC1, KIDDEV was regressed on AMORSC1, and the residuals of this regression were regressed on SITE. The estimates from the second regression determine the slope in this figure. The starting points in year 1 are the same as in Fig. 1.

Figure 2: Moral Development by SITE net of moral stage at year 1 (AMORSC1)

The other two predictors failed to be significant. The average moral stage of the parents was not shown to be related to adolescents' moral development (change scores) ($t=1.52$, $p=.1365$). And as regards this study's main hypothesis (1), parental similarity does not quite show a significant effect on adolescents' moral development (change score), although there was a trend that parental similarity impedes adolescents' moral development ($t=-1.53$, $p=.1326$). Controlling for the other three independent variables, the predicted adolescents' moral development (change score) is almost a quarter stage, i.e. half a score (.45), less for those whose parents are at the same moral stage than for those whose parents are at different moral stages. To measure the net effect of parental similarity in moral development more precisely, an increment-to-R-square test was performed for adding this predictor to a regression model already containing the three other predictors. This inclusion increases the proportion of variance explained from 39.13% to 42.89%. This corresponds to an F-value of 2.37 which is below the critical F-value at .10 alpha level of 2.86.

Contrary to our hypothesis that the effect of parental similarity is larger for the psychiatric group, such an interaction was not selected as significant in a stepwise regression procedure for all possible interactions. It was also non-significant ($F=.21$, $p=.6531$) in a regression

including the four predictors and all possible two-way interactions between them (Table 5).

TABLE 5: Multiple Regression of KIDDEV (Interactions)

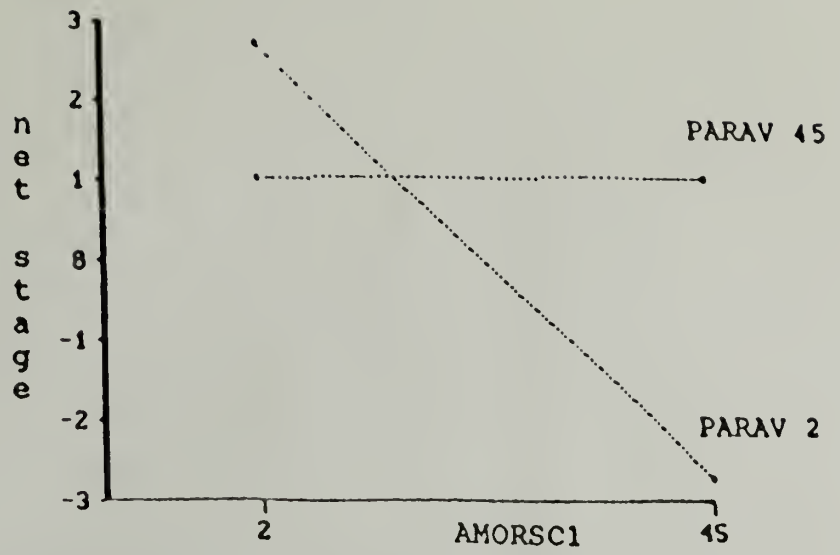
Predictors	Parameter Estimate	Standard Error	F	p	R2
Intercept	18.07	10.46	2.98	.0945	
PARAV	-2.01	1.53	1.73	.1987	
AMORSC1	-3.50	1.70	4.26	.0478	
SITE	-3.08	3.44	.80	.3778	
SIMIL	.97	3.52	.08	.7838	
ISMPA	.31	.42	.53	.4726	
ISMAM	-.63	.36	3.08	.0894	
ISMSI	-.41	.89	.21	.6531	
IPAAM	.44	.23	3.67	.0649	
IPASI	.22	.46	.22	.6395	
IAMSI	.20	.45	.19	.6648	
					.5160

Note: The measure of KIDDEV is in half-stage. 1 is equivalent to stage 1, 2 to stage 1/2, 3 to stage 2, and so on up to 9 which corresponds to stage 5. ISMPA=SIMIL*PARAV, ISMAM=SIMIL*AMORSC1, ISMSI=SIMIL*SITE, IPAAM=PARAV*AMORSC1, IPASI=PARAV*SITE, IAMSI=AMORSC1*SITE.

The only interactions that came close to significance are those between average parental development and adolescents' moral stage in year 1 (F=3.67, p=.0649) and parental similarity and adolescents' moral stage in year 1 (F=3.08, p=.0894). The first interaction (Fig. 3) suggests that given high parental moral development, adolescents with a high initial stage develop similarly to adolescents with a

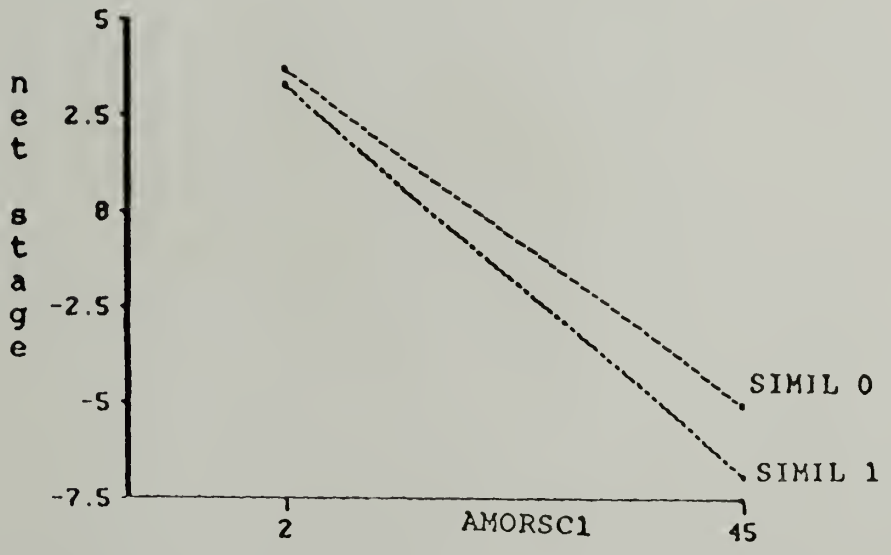
low initial stage. With parents of low moral development however, adolescents who start out at high stage experience much less development than those who start out at low stage. The second interaction (Fig. 4) indicates that for adolescents with a low initial moral stage parental similarity has less of an effect than for adolescents with a high initial moral stage. Higher order interactions are far from significant.

To recapitulate the results of testing our hypotheses: Hypothesis (1)--adolescents with parents of similar moral stage experience a different rate of moral development than adolescents with dissimilar parents--was not significant. But there was a trend suggesting that parental similarity impedes adolescents' moral development ($p=.13$). Hypothesis (2)--the effect of similarity is bigger for the psychiatric group (because they have higher need for consistency)--was not supported. Hypothesis (3)--the stage of adolescents increases with age--and hypothesis (4)--psychiatric adolescents have lower stage than the non-psychiatric adolescents at year 1--were corroborated. Finally, hypothesis (5)--psychiatric adolescents close the gap of stage difference with the non-psychiatric adolescents at year 3--was not supported.



Note: Stage 45 means 4/5. The figure shows predicted values of relative stage changes (net stage). They were calculated using the regression coefficients from Table 5 for AMORSC1, PARAV, IPPAM, and intercept, controlling for all other predictors.

Figure 3: Interaction between AMORSC1 and PARAV



Note: Stage 45 means 4/5. SIMIL 0 means no parental similarity, SIMIL 1 means parental similarity, The figure shows predicted values of relative stage changes (net stage). They were calculated using the regression coefficients from Table 5 for AMORSC1, SIMIL, ISMAM, and intercept, controlling for all other predictors.

Figure 4: Interaction between AMORSC1 and SIMIL

CHAPTER 4

DISCUSSION

The impact of parental similarity in moral stage on children's moral development was not significant in this study with a limited number of subjects, but did approach the significance level. If anything there was a negative effect of parental similarity. This potential negative effect of parental similarity in moral stage on adolescents' moral development (change score) suggests that the function of parental dissimilarity in moral stage can be understood within a Vygotskian framework as a beneficial extension of the zone of proximal development or of developmental scaffolding. At the same time, the results cast severe doubt on the antithetical idea that parental similarity in moral stage would support adolescents' moral development.

Having parents of different moral stages may actually foster the adolescent's moral development rather than create confusion and stagnation in the adolescent. Families appear to be similar to schools as regards the effect of a diverse moral environment. Turiel's (1960) findings about schools may also apply to families. Further research (using larger samples if possible) should determine whether this positive effect of parental dissimilarity exists and then investigate the underlying mechanisms that bring about this effect. One possible explanation of the effect would be that adolescents

benefit from witnessing, and participating in, family discussions about moral issues in which arguments are presented at different levels of moral reasoning. The adolescent might emulate the lower-stage parent first and then progress to emulating the higher-stage parents. In Vygotsky's terms, parents at different moral stages may provide a wider zone of proximal development through which the adolescent can progress. In their educational efforts, many parents try to lower the stage of their moral arguments to an appropriate level within the adolescents' zone of proximity, as found by Walker and Taylor (1991). But in terms of supporting adolescents' moral development such conscious attempts may be only a poor substitute for the real-life extended zone of proximity that exists in families in which the parents are at different moral stages.

As regards our secondary hypotheses, the effect of parental similarity did not significantly differ for non-psychiatric and psychiatric subjects, which contradicts hypothesis (2), that the effect of similarity would be larger for the psychiatric group.

It is not surprising to find that psychiatric adolescents had a lower average moral stage than non-psychiatric adolescents in year 1, as predicted in hypothesis 4. Given the psychological difficulties that the psychiatric adolescents had, their cognitive abilities may be limited as to how much external stimulation and conflict

they could take in and how much new information they could integrate. Additionally, the psychiatric adolescents may not have had as much opportunity for role-taking since they spent some time in the hospital where opportunities for role-taking may have been restricted. Thus the psychiatric adolescents, in contrast to the non-psychiatric adolescents, may have been exposed to a non-stimulating environment.

Alternatively, one could also think of a reversed causal relationship between developmental deficit and psychiatric problems. Instead of psychological difficulties impeding moral development, a developmental deficit may also increase the adolescents' probability of being diagnosed with psychiatric problems. Adolescents who reason at a lower level than their age cohort on developmental tasks may be viewed as having "psychological difficulties" and be labeled as having conduct disorder and adjustment problems according to the DSM-III-R.

That the stage of adolescents indeed increased with time (hypothesis [3]) can be considered normal at that age. However, it came as a surprise that the psychiatric adolescents did not close the gap of stage difference, as predicted in hypothesis (5). Rather, the stage gap remained about the same in year 3 as it was in year 1. Once we controlled for a possible ceiling effect, the gap between psychiatric and non-psychiatric adolescents even widened,

which points to a potentially serious developmental deficit incurred by the psychiatric adolescents.

4.1 Conclusion

In this study with a small number of subjects, the hypothesis that similarity in parents' moral stage had an effect on children's moral development could not be corroborated at the statistical .05 level of significance. However, there was a trend indicating that parental similarity had a negative effect on adolescents' moral development ($p=.13$). Adolescents' moral development appeared to benefit from their parents being at different stages of moral development. Research on larger samples may generate more definite findings.

APPENDIX

MORAL JUDGMENT INTERVIEWS

Form A.

Dilemma III: In Europe, a woman was near death from a special kind of cancer. There was one drug that the doctors thought might save her. It was a form of radium that a druggist in the same town had recently discovered. The drug was expensive to make, but the druggist was charging ten times what the drug cost him to make. He paid $200 for the radium and charged $2,000 for a small dose of the drug. The sick woman's husband, Heinz, went to everyone he knew to borrow money and tried every legal means, but he could only get together about $1,000, which is half of what it cost. He told the druggist that his wife was dying, and asked him to sell it cheaper or let him pay later. But the druggist said, "NO, I discovered the drug and I'm going to make money from it." So, having tried every legal means, Heinz gets desperate and considers breaking into the man's store to steal the drug for his wife.

1. Should Heinz steal the drug?
1a. Why or why not?

2. Is it actually right or wrong for him to steal the drug?
2a. Why is it right or wrong?

3. Does Heinz have a duty or obligation to steal the drug?
3a. Why or why not?

4. If Heinz doesn't love his wife, should he steal the drug for her?
(If the subject favors not stealing, ask: Does it make a difference in what Heinz should do whether or not he doves his wife?)
4a. Why or why not?

5. Suppose the person dying is not his wife but a stranger. Should Heinz steal the drug for the stranger?
5a. Why or why not?

6. (If the subject favors stealing the drug for a stranger.)
Suppose it's a pet animal he loves. Should Heinz steal to save the pet animal?
6a. Why or why not?

7. Is it important for people to do everything they can to save another's life?
7a. Why or why not?

8. Is it against the law for Heinz to steal? Does that make it morally wrong?
8a. Why or why not?

9. In general, should people try to do everything they can to obey the law?
9a. Why or why not?

10. In thinking back over the dilemma, what would you say is the most responsible think for Heinz to do?
10a. Why?

Dilemma III: Heinz did break into the store. He stole the drug and gave it to his wife. In the newspapers the next day, there was an account of the robbery. Mr. Brown, a police officer who knew Heinz, read the account. He remembered seeing Heinz running away from the store and realized that it was Heinz who stole the drug. Mr. Brown wonders whether he should report that it was Heinz who stole the drug.

1. Should Officer Brown report Heinz for stealing?
1a. Why or why not?

2. Suppose Officer Brown were a close friend of Heinz, should he then report him?
2a. Why or why not?

Officer Brown did report Heinz. Heinz was arrested and brought to court. A jury was selected. A jury's job is to find whether a person is innocent or guilty of committing a crime. The jury finds Heinz guilty. It is up to the judge to determine the sentence.

3. Should the judge give Heinz some sentence, or should he suspend the sentence and let Heinz go free?
3a. Why is that best?

4. Thinking in terms of society, should people who break the law be punished?
4a. Why or why not?
4b. How does this apply to how the judge should decide?

5. Heinz was doing what his conscience told him when he stole the drug. Should a law breaker be punished if he is acting out of conscience?
5a. Why or why not?

6. Thinking back over the dilemma, what would you say is the most responsible thing for the judge to do?
6a. Why?

Dilemma I: Joe is a fourteen-year-old boy who wanted to go to camp very much. His father promised him he could go if he saved up the money for it himself. So Joe worked hard at his paper route and saved up the forty dollars it cost to go to camp, and a little more besides. But just before camp was going to start, his father changed his mind. Some of his friends decided to go on a special fishing trip, and Joe's father was short of the money that it would cost. So he told Joe to give him the money he had saved from the paper route. Joe didn't want to give up going to camp, so he thinks of refusing to give his father the money.

1. Should Joe refuse to give his father the money?
1a. Why or why not?

2. Does the father have the right to tell Joe to give him the money?
2a. Why or why not?

3. Does giving the money have anything to do with being a good son?
3a. Why or why not?

4. Is the fact that Joe earned the money himself important in this situation?
4a. Why or why not?

5. The father promised Joe he could go to camp if he earned the money. Is the fact that the father promised the most important thing in the situation?
5a. Why or why not?

6. In general, why should a promise be kept?

7. Is it important to keep a promise to someone you don't know well and probably won't see again?
7a. Why or why not?

8. What do you think is the most thing a father should be concerned about in his relationship with his son?
8a. Why is that the most important thing?

9. In general, what should be the authority of a father over his son?
9a. Why?

10. What do you think is the most important thing a son should be concerned about in his relationship to his father?
10a. Why is that the most important thing?

11. In thinking back over the dilemma, what would you say is the most responsible thing for Joe to do in this situation?
11a. Why?

Form C

Dilemma V: In Korea, a company of Marines was way outnumbered and was retreating before the enemy. The company had crossed a bridge over a river, but the enemy was mostly still on the other side. If someone went back to the bridge and blew it up, with the head start the rest of the men in the company would have, they could probably then escape. But the man who stayed back to blow up the bridge would not be able to escape alive. The captain himself is the man who knows best how to lead the retreat. He asks for volunteers, but no one will volunteer. If he goes himself, the men will probably not get back safely and he is the only one who knows how to lead the retreat.

1. Should the captain order a man to go on the mission or should he go himself?
1a. Why?

2. Should the captain send a man (or even use a lottery) when it means sending him to his death?
2a. Why or why not?

3. Should the captain go himself when it means that the men will probably not make it back safely?
3a. Why or why not?

4. Does the captain have the right to order a man if he thinks it's best?
4a. Why or why not?

5. Does the man who is selected have a duty or obligation to go?
5a. Why or why not?

6. What's os important about human life that makes it important to save or protect?
6a. Why is that important?
6b. How does that apply to what the captain should do?

7. In thinking back over the dilemma, what would you say is the most responsible thing for the captain to do?
7a. Why?

Dilemma VIII: In a country in Europe, a poor man named Valjean could find no work, nor could his sister and brother. Without money, he stole food and medicine that they needed. He was captured and sentenced to prison for six years. After a couple of years, he escaped from the prison and went to live in another part of the country under a new name. He saved money and slowly built up a factory. He gave his workers the highest wages and used most of his profits to build a hospital for people who couldn't afford good medical care. Twenty years had passed when a tailor recognized the factory owner as being Valjean, the escaped convict whom the police had been looking for back in his home town.

1. Should the tailor report Valjean to the police?
1a. Why or why not?

2. Does a citizen have a duty or obligation to report an escaped convict?
2a. Why or why not?

3. Suppose Valjean was a close friend of the tailor. Should he then report Valjean?
3a. Why or why not?

4. If Valjean was reported and brought before the judge, should the judge send him back to jail or let him go free?
4a. Why?

5. Thinking in terms of society, should people who break the law be punished?
5a. Why or why not?

6. Valjean was doing what his conscience told him to do when he stole the food and medicine. Should a law breaker be punished if he is acting out of conscience?
6a. Why or why not?

7. In thinking back over the dilemma, what would you say is the most responsible thing for the tailor to do?
7a. Why?

Dilemma VII: Two young men, brothers, had got into serious trouble. They were secretly leaving town in a hurry and needed money. Karl, the older one, broke into a store and stole a thousand dollars. Bob, the younger one, went to a retired old man who was known to help people in town. He told the man that he was very sick and that he needed a thousand dollars to pay for an operation. Bob asked the old man to lend him the money and promised that he would pay him back when he recovered. Really, Bob wasn't sick at all, and he had no intention of paying the man back. Although the old man didn't know Bob very well, he lent him the money. So Bob and Karl skipped town, each with a thousand dollars.

1. Which is worse, stealing like Karl or cheating like Bob?
1a. Why or why not?

2. What do you think is the worst thing about cheating the old man?
2a. Why is that the worst thing?

3. In general, why should a promise be kept?

4. Is it important to keep a promise to someone you don't know well or will never see again?
4a. Why or why not?

5. Why shouldn't someone steal from a store?

6. What is the value or importance of property rights?

7. Should people do everything they can to obey the law?
7a. Why or why not?

8. Was the old man being irresponsible by lending Bob the money?
8a. Why or why not?

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