Contents lists available at ScienceDirect

Organizational Behavior and Human Decision Processes
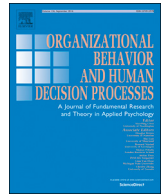
No self to spare: How the cognitive structure of the self influences moral behavior☆

Maferima Touré-Tillery[a],[*], Alysson E. Light[b]

[a] Marketing Department, Northwestern University, Kellogg School of Management, 2211 Campus Drive, Evanston, IL 60208, United States
[b] Psychology Department, University of the Sciences, 600 S. 43rd St., Philadelphia, PA 19104, United States

ARTICLE INFO

ABSTRACT

People represent knowledge about their self-concept in terms of multiple cognitive structures or self-aspects. "Self-overlap" refers to the extent to which people perceive their various self-aspects as interconnected, such that their thoughts and feelings about themselves are similar across these self-aspects. The present research shows self-overlap influences moral behavior. Specifically, people high in self-overlap (interconnected self-aspects) are more likely to behave ethically than people low in overlap (independent self-aspects), because they tend to see their actions as "self-diagnostic" (i.e., representative of the type of person they are). In six studies, we find this pattern of behavior for chronic/measured (Studies 1 and 2) and situational/manipulated self-overlap (Studies 3 – 6). We show people low in self-overlap behave as though they have "no self to spare"—unless their actions are presented as non-diagnostic for inferences about the self (Study 5), or unless they do not value the context-relevant moral characteristic (e.g., being altruistic; Study 6). Finally, we introduce a 7-item measure of perceptions of self-diagnosticity (SDS).

1. Introduction

People often learn about themselves by observing their own behaviors and drawing inferences about their own attitudes, traits, and characteristics (Baca-Motes, Brown, Gneezy, Keenan, & Nelson, 2013; Bem, 1972; Fishbach, Dhar, & Zhang, 2006; Gneezy, Imas, Brown, Nelson, & Norton, 2012; Khan & Dhar, 2006; Kristofferson, White, & Peloza, 2014). Notably, most people are motivated to maintain a positive mental image of who they are (i.e., self-concept), and so they often "do the right thing" at least in part to present themselves *to themselves* in a positive light (i.e., self-signaling; Bodner & Prelec, 1996; Greenwald & Breckler, 1985; Prelec & Bodner, 2003; Schlenker, 1985; Steele, 1988). For example, a person might donate to charity because doing so will make her feel "generous," and she might forgo an easy opportunity to cheat, because she does not want to think of herself as a "cheater" (Batson, Thompson, Seuferling, Whitney, & Strongman, 1999; Dunning, 2002; Gino, Gu, & Zhong, 2009; Mazar, Amir, & Ariely, 2008; Gneezy, Gneezy, Riener, & Nelson, 2012; Savary, Goldsmith, & Dhar, 2015).

Recent research suggests people are particularly motivated to engage in self-signaling behaviors when they perceive their actions as "self-diagnostic" (i.e., representative of the type of person they are). For example, Touré-Tillery and Fishbach (2012, 2015) found that people completing a sequence of actions toward achieving a goal see actions at the beginning and the end as more self-diagnostic than actions in the middle and hence, they are more likely to adhere to their standards (of morality, religion, and performance) at the beginning and end (vs. middle) of such sequences. Drawing from memory research on primacy and recency effects (see Greene, 1986, for review), the authors suggest these differential perceptions of self-diagnosticity occur because people might expect to remember their actions at the beginning and end better than those in the middle of the sequence of actions. Similarly, Bryan, Walton, Rogers, and Dweck (2011) found that people are more likely to comply with a call to action when the action is linked explicitly to a desirable identity (e.g., "being a voter") than when the action is not presented as self-diagnostic (e.g., "vote"). By contrast, when an action is explicitly linked to the undesirable identity of cheater (e.g., "don't be a cheater" vs. "don't cheat"), people are less likely to take advantage of an opportunity to lie for their own financial gain (Bryan, Adams, & Monin, 2013). Taken together, these findings highlight the important role of perceptions of self-diagnosticity for moral behavior (see also Shu, Mazar, Gino, Ariely, & Bazerman, 2012).

In the present article, we explore another factor that influences moral behavior through perceptions of self-diagnosticity: people's mental representations of the structure of their self-concept (self-structure). Specifically, we investigate the possibility that people who represent their self-concept with more (vs. less) overlap between their various identities (or self-aspects) will be more likely to behave morally, because they will tend to see their actions as more self-diagnostic.

2. Structural dimensions of the self-concept

The self-concept is a collection of ideas people have about who they are. People's representations of their self-concepts vary not only in terms of content ("I am smart," "I am clumsy"), but also in terms of structure. Social-cognitive theories suggest people represent knowledge about their self-concept in terms of multiple cognitive structures or self-aspects (Gergen, 1971; Greenwald & Pratkanis, 1984; James, 1892; Kihlstrom & Cantor, 1983; Kivetz & Tyler, 2007; Linville, 1985; Markus & Nurius, 1986; Markus & Wurf, 1987; McConnell, 2011; Rosenberg & Gala, 1985). These self-aspects may take the form of social roles, interpersonal relationships, activities, or goals. For example, a person might think of himself as a politician (social role), a grandfather (relationship), and a ping-pong player (activity) who aims to master multiple languages (goal). In turn, each of these self-aspects would be associated with subordinate traits, personal memories, thoughts, and emotions that describe this person's perception of himself within that life domain (Garczynski & Brown, 2013; Showers, 1992; Zeigler-Hill & Showers, 2007).

Self-complexity refers to the extent to which people's representations of their self-concepts vary along two structural dimensions: the number of aspects they use to organize their self-knowledge, and the degree of overlap among these aspects (Linville, 1985; Rafaeli-Mor, Gotlib, & Revelle, 1999). Indeed, while self-representations tend to be inherently different from one context to another (Nurius & Markus, 1989), individuals vary in the extent to which they perceive these differences. Some people view their self-aspects as distinct and independent, such that their thoughts and feelings about themselves are different across these self-aspects ("I am a gentle and relaxed grandfather, but I am a competitive and resilient politician"). Other people view their self-aspects as interconnected, such that their thoughts and feelings about themselves are similar across these identities ("I am a gentle and relaxed grandfather and politician"). Self-overlap refers to the extent to which people perceive their self-aspects as containing similar features. The highest degree of self-complexity occurs when a person has a large number of aspects and a low level of self-overlap, whereas the lowest degree of self-complexity occurs when a person has a small number of aspects and high level of self-overlap.

Research shows self-complexity influences how people respond to and cope with positive and negative events (McConnell & Brown, 2010; McConnell, Rydell, & Brown, 2009; Rafaeli-Mor & Steinberg, 2002). For example, Linville (1987) found that college students low (vs. high) in self-complexity were more likely to suffer from physical and mental illnesses when faced with highly stressful life events. Similarly, Dixon and Baumeister (1991) found that after failure feedback, participants low (vs. high) in self-complexity were more likely to seek to escape from self-awareness by avoiding their own reflection in a mirror, and their subsequent performance was impaired. Indeed, Linville (1985, 1987) argues that when people experience positive or negative events in one self-aspect (e.g., a politician losing an election), corresponding thoughts and feelings become associated with that self-aspect ("I am an awful politician"). "Spillover" occurs when these thoughts and feelings spread from the original self-aspect to other self-aspects ("I am also an awful grandfather)—either through an inferential process or through spreading activation within a network consisting of self-aspects as semantic nodes with corresponding affect (see Bower, 1981; Clark & Isen, 1982). The more overlapping a person's self-aspects are—in terms of their cognitive and affective contents—the more likely thoughts and feelings associated with one self-aspect will spread to others, and hence affect a greater proportion of the self-concept. Furthermore, for a person with a small (vs. large) number of self-aspects, a greater proportion of the overall self-concept will be affected by the event (Linville, 1985; McConnell, 2011; McConnell et al., 2009).

Thus, research on self-complexity suggests both structural dimensions of the self-concept (self-overlap and number of self-aspects) can work together to amplify or attenuate people's emotional reactions to past actions and events in their lives. In the present research, we go beyond these retrospective effects of the self-structure to explore its prospective influence on moral behavior. In particular, we propose that in the context of prospective actions, the extent to which people perceive their self-aspects as overlapping will play an important role in shaping their moral decision-making and behaviors through perceptions of self-diagnosticity.

3. Self-diagnosticity and self-overlap

Research distinguishes between prescriptive morality, which focuses on what people believe they should do (e.g., donating to charity and other prosocial behaviors), and proscriptive morality, which focuses on what people believe they should not do (e.g., cheating and other unethical behaviors; Janoff-Bulman, Sheikh, & Hepp, 2009). While individuals might vary in the motivational strength of each type of morality, most people generally desire to be the type of person who refrains from immoral acts and engages in moral deeds. In fact, Janoff-Bulman et al. (2009) found that whereas proscriptive immorality resulted in greater blame, prescriptive morality resulted in greater moral credit. Thus, most moral decisions people face—whether proscriptive or prescriptive—have the potential to lead to positive or negative inferences about the self, and the extent to which people deem these decisions self-diagnostic will have an important influence on what they choose to do (Bryan et al., 2013; Bryan et al., 2011; Touré-Tillery & Fishbach, 2012, 2015, 2018).

Self-diagnosticity reflects the extent to which people perceive a given action as representative of the type of person they are. Previous research shows when people deem their actions are self-diagnostic, they will be motivated to "do things right," behaving in ways that allow them to signal desired characteristics to themselves (e.g., adhere to moral standards, apply themselves at tasks, give to charity, and exercise self-control). Many factors can influence the perception that an action is self-diagnostic, ranging from where an action is positioned in a sequences of actions (Touré-Tillery & Fishbach, 2012; 2015) to how an action is labelled (Bryan et al., 2013, 2011). For example, research on self-signaling suggests the more effort an action requires (e.g., physical or mental exertion), the more the action will seem diagnostic for inferences about the self (see Prelec & Bodner, 2003; Savary et al., 2015). In their studies, Dhar and Wertenbroch (2012) found that participants preferred choice sets requiring self-control (e.g., featuring a mix of healthy and indulgent options) to those not requiring self-control (e.g., featuring healthy options only), because the former were deemed more diagnostic for inferences about one's willpower or health consciousness.

We propose that beyond these external influences, perceptions of self-diagnosticity should also be susceptible to people's internal structural representations of their self-concept, specifically to the extent to which people see themselves as "the same person" from one self-aspect or life context to the next—i.e., self-overlap. Indeed, compared to people who think they are different across situations (low in self-overlap), people who describe themselves similarly regardless of the situation (high in self-overlap) should be more likely to apply any negative or positive ideas they form about themselves in one self-aspect to other self-aspects, thus leading to greater perceptions of self-diagnosticity. Furthermore, we propose this tendency to view one's actions as more or less self-diagnostic should be more closely related to the degree of self-overlap than to the number of self-aspects and individual has. Whether a person has two or five self-aspects, if she perceives her