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The Effects of Gender and Maturation on Moral Reasoning Orientation, Care and Justice in Adulthood

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Abstract: Using a causal comparative cross sectional approach with 380 subjects Ranging from 23 to 85 years of age, relationships between gender, maturation and moral reasoning orientation were explored. The two major findings were that older adults differed from younger adults in their classifications of moral orientation and gender played less of a role in moral reasoning than previously hypothesized.

Introduction

Using Kohlberg's six stages of moral development as a template, Armon's (1998) study revealed that no subject attained Kohlberg's stage four of moral development before the age of 24 nor did anyone reach stage five before the age of 35, supporting the idea that the higher moral stages are exclusively adulthood stages. Brookfield (1998) pointed out similar concerns when he said that adult educators acknowledge, "learning what it means to act in a moral manner is one of the most significant and unavoidable imperatives of adulthood" (p. 283).

If adulthood is the place where one comes to a fuller understanding of moral choices, then is it not also the place where moral reasoning skills are honed to reflect one's true moral voice? In other words, are there particular patterns of moral reasoning specific to adulthood and related to gender and age? This study endeavored to undertake that very question of adult moral reasoning and by doing so to fill in some of the gaps, due to limited studies, in our understanding of what patterns and changes in moral reasoning are present throughout the various stages of early to later adulthood.

Not only are studies of adult moral reasoning limited, previous studies raised questions requiring further research rather than providing a solid framework upon which a theoretical base can be built. The questions that continue to persist with regard to moral reasoning orientation are found primarily in two areas, the effects of gender on moral reasoning and the effects of maturation on moral reasoning (Pratt, Golding, Hunter, & Sampson, 1988; Webster, 1996).

This study looked for an interaction between gender and age with regard to the use of the two dimensions of moral reasoning orientation. It also explored whether there was a relationship between maturation and any integration of the two separate intersecting dimensions of justice and care reasoning orientations. The following question was entertained by the study: Does moral reasoning orientation in adults, either care or justice, vary by gender or change, becoming more integrated or differentiated with maturation?

Research Design

The research design for this study used a causal-comparative method and investigated relationships among gender, maturation, and moral orientation in adults from the age of twenty-three and upward. Comparisons were made of the subjects' responses on a survey of moral orientation to determine if there were any significant differences in their response patterns. Four age categories were established to represent the various stages in the spectrum of adulthood: 23 to 34 year olds (young adulthood), 35 to 45 year olds (mid-life transition), 46 to 59 year olds

(middle adulthood), and 60 and over (older adulthood). The Reasoning Style Inventory (RSI) designed specifically for this study and based on Liddell's (1990) instrument for measuring moral orientation was used to establish a level for participants on separate scales for justice and care reasoning.

The current study stands alone in an endeavor to explore the question of moral reasoning in adulthood with a standardized, self report instrument, whereas other studies on the question (Pratt et al, 1988 & Webster, 1996) used semi-structured interviews. Measuring the constructs of care and justice as two intersecting factors allowed for the establishment of new classifications in moral reasoning orientation. The subjects were assigned moral reasoning orientation classifications based on their scores on the justice and care scales. Those scoring above the median on both scales were classified as integrated. Those who scored below the median on one scale and above the median on the other scale were assigned either a justice- or care-oriented classification and those who scored below the median on both scales were assigned an undifferentiated classification. (see Figure 1).

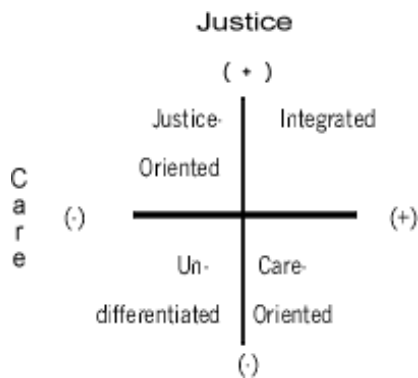


Figure 1.

In total 500 sets of Reasoning Style Inventories and Personal Data Questionnaires were distributed to adult students at university settings and participants at different seniors centers in the Denver, CO, Laramie, WY, and Greeley, CO areas, with 403 returned. Due to incomplete data, missing gender, age, or inventory question responses, or the respondents being under the age of twenty-three, 23 were unusable for the study. Of the 380 usable sets of RSI and Personal Data Questionnaires, 161 of the subjects were male (42.4%) and 219 (57.6%) were female.

Findings

Two major findings resulted from the current study. Significant maturational differences were found for the Care and Justice scales as well as the moral reasoning orientation classifications. The gender findings contradicted some previous findings and supported other more recent gender findings with regard to moral orientation.

An analysis of variance revealed that significant age group differences were found for both the Justice scale ($F = 4.951, (1,3,379), p = .002$) and the Care scale ($F = 4.194, (1, 3, 379), p = .006$). The older adulthood (60+) subjects differed from the three other age group categories, young adulthood (23 to 34), midlife transition (35 to 45), and middle adulthood (46 to 59) on the justice scale displaying a higher mean than the other age groups. The older adulthood group also differed from the young adulthood category on the care scale displaying a lower mean than the

younger subjects. The young adulthood age category also had a small significant difference from the midlife transition aged group displaying a higher mean score on the care scale.

Two-thirds of the participants differentiated either as justice oriented (32.6%) or care oriented (34.2%). The remaining participants (one-third) were divided between the integrated (19.2%) and undifferentiated (13.9%) classifications. A chi-square test showed a significant relationship between the categories of moral orientation and maturation (Chi-Square = 25.010, 9), $p = .003$).

A higher percentage ($n = 31$, 46%) of older adulthood (60+) participants fell into the justice-oriented category, while this same group was underrepresented in the care-oriented category. Additionally, the older adulthood (60+) age group had a high percentage of representation in the integrated category of moral orientation. The middle adulthood age group (46-59 year olds) was underrepresented in the integrated moral orientation category. A higher percentage ($n = 38$, 40%) of the midlife transition group (35-45 year olds) was represented in the care-oriented category. Additionally, the midlife transition group was underrepresented ($n = 15$, 16%) in the integrated category. The middle adulthood age group (46-59 year olds) had a higher percentage ($n = 40$, 42%) in the care-oriented category and a higher percentage ($n = 19$, 36%) of participants in the undifferentiated classification.

The scores on the justice scale and the care scale were calculated separately to render two interval level scores, one for justice and one for care. T-tests were then calculated to find whether or not there was a relationship between gender, a dichotomous variable, and scores on both the continuous variables of justice orientation and care orientation scales. No significant gender differences were found regarding the Care Scale ($t = .553$, (378), $p = .581$). The mean scores on the Care Scale were 25.85 (SD = 5.01) for males and 25.59 (SD = 4.21) for females.

Although gender differences were not found on the Care Scale, males did use a higher level of justice reasoning than females ($t = 1.86$, (378), $p = .063$). The mean score for males on the Justice Scale was 25.16 (SD = 5.03). The mean score for females on the Justice Scale was 24.21 (SD = 4.88). The difference observed between males and females on the Justice Scale represents a small effect size.

Discussion

The rise on the Justice scale for older adulthood and the subsequent decline on the Care scale for older adulthood can perhaps be explained by the findings of Pratt et al. (1988) that role taking, such as parental status, seems to influence moral reasoning. It is conceivable to hypothesize that role taking and life cycle are related and explain the divergent findings for the older adulthood (60+) subjects in the current study. It is reasonable to assume that the parental role-taking phase of the life cycle is completed for participants in the sixty plus age category. Therefore, it is also reasonable to assume that since parental status was a mediating factor in the Pratt et al. (1988) study that it remains a factor, although undefined and controlled for, in this study. Once the major parental role is complete, the individual no longer has a need to utilize as much care in their moral reasoning as when they were responsible for the direct care of others. Their reasoning can become more individuated and less connected, thus the increase in the use of justice and the decrease in the use of care for subjects in the older adulthood (60+) age group (see Figure 2).

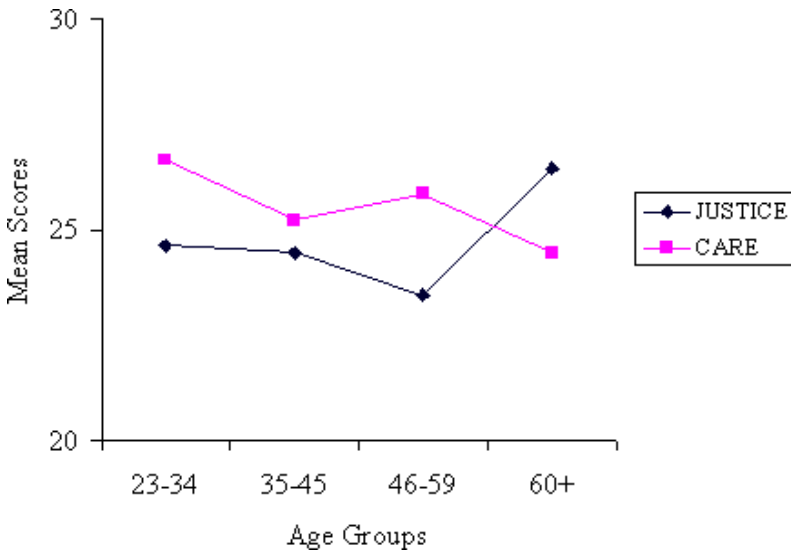


Figure 2. Care and Justice Scale Means Across the Age Categories.

An interesting finding is that there was a significant difference between age groups and classifications of moral orientation (Chi-Square = 25.010, (9), $p = .003$). The number of older adulthood (60+) participants in the Justice-oriented category supports the previous finding that there is an increase in the use of justice for this age group. The fact that the older adulthood participants are underrepresented in the Care-oriented classification of moral orientation also supports the finding that this age group employs less care-oriented reasoning.

Unlike the findings in Webster's (1996) study that revealed an equal amount of integration across age groups of both younger and older adults, the current study found that older adulthood (60+) had more integration than the other age groups. The current study, in fact, showed that both the midlife transition (35-45) and the middle adulthood (46-59) age groups were underrepresented in the integrated moral orientation category. Pratt et al's (1988) research could support this in that they observed an increase in differentiation among middle age participants. An increase in differentiation either towards care or towards justice could account for less integrated use of the two forms of moral reasoning. Parental role taking and generativity developmental concerns might account for why middle age adults tend to differentiate and thereby are underrepresented in the integrated moral reasoning category. Gender appeared not to be a factor in either the current study or Webster's (1996) study. Although gender did not appear to be a significant variable impacting integration of moral reasoning orientation in adulthood, maturation (age) did. The question remains, however, what facilitated this integration? And, if an integrated moral orientation is, indeed, a more mature one, as stated in the underlying assumptions, how can its development be encouraged?

The cross-sectional nature of this study makes it difficult to know with any degree of certainty that the maturational differences observed in the current study are a result due to age of the participants in each group or the experiences of the different individuals in each group. Thus, a cohort effect could be confounding the results of the study. Bateson (2000) does say, however, that generational differences do give a glimpse into the natural developmental patterns of maturation.

The relationship between moral orientation and gender was explored with interesting findings. The only significant gender finding for this study was that males had a slightly higher use of justice in their reasoning than females ($t = -1.863, (378), p = .063$). This result corresponds to those of some previous studies (Liddell, 1990; Pratt et al., 1988; Webster, 1996), but does not support others that found that women use more care than men (Gilligan, 1977, 1982; Gilligan & Attanucci, 1988).

Contrary to Gilligan's assertion that females prefer care-oriented reasoning and males focus on justice-oriented reasoning (Gilligan, 1977, 1982; Gilligan & Attanucci, 1988), males in this study show more equal usage of care and justice with slightly higher care scores than justice scores. Females used less justice in their reasoning. Both genders use both orientations, as recent research has found (Campbell, 1997; Clopton & Sorell, 1993; Pratt et al., 1991; Sochting & Marcia, 1994).

Differences in reported results may be due in part to methodology. The current study used a standardized, self-report instrument, whereas Gilligan and Attanucci (1988) and others (Campbell, 1997; Pratt et al., 1991; Webster, 1996; Williamson, 1994) used semi-structured interviews, which considered participant's spontaneous moral dilemmas. Such dilemmas have been found to show gender differences because women tend to produce personal situations using a care or relationship orientation, whereas men tend to produce impersonal situations generating a justice or rights orientation (Walker, 1989). Such findings make it clear that methodologies affect the outcome of the study, so they must be chosen deliberately. The current study specified a standardized, objective measure.

An alternate explanation for absence of major gender differences in moral orientation surmises that gender differences arise in the connection between moral orientation and conceptions of self, in that care orientation is more integral to identity in women than justice orientation is to identity in men (Skoe, 1995; Skoe & Gooden, 1993; Sochting et al., 1994). The methodology employed in the current study, made no consideration for how the participants viewed themselves and as such could have been a compounding factor in the results. The current study indicated that although gender differences are present they are less extensive than Gilligan (1977, 1982) has claimed and can vary depending on category of moral orientation.

Conclusions

This study suggested connections between maturation and moral reasoning orientation. Significant maturational differences were found for the care and justice scales as well as the moral reasoning orientation classifications. Additionally, the study demonstrated that gender may not be the major factor once believed to be for different orientations to moral reasoning. The gender findings dispelled some previously held assumptions and supported other more recent gender findings with regard to moral orientation.

Although questions were raised regarding methodology, it appears that the two constructs of moral reasoning orientation, justice and care, can be measured using a standardized objective instrument. More exploration is needed in the area of standardized instruments that measure moral orientation. Such standardization could provide new and different glimpses into the field of moral orientation that could not otherwise be obtained.

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