Self-Actualizing: Where Ego Development Finally Feels Good?

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This article addresses a paradox surrounding psychosocial maturity and self-actualizing in relation to well-being: Several stage theories of maturity (notably ego development; Loevinger, 1976) culminate in self-actualizing, which Maslow (1968) characterizes as the pinnacle of psychological health and well-being. However, empirical measures of maturity and well-being do not correlate. In a reanalysis of three datasets, we find preliminary support for the notion that people scoring at the highest stage of Loevinger’s ego development might have higher levels of well-being and narrate a more growth-focused self-identity than people scoring at all other stages. Drawing on Erikson’s (1959/1994) claim that the acceptance of life’s complexities underlies ego integrity, we attempt to provide a theoretical explanation for how well-being might emerge normatively at the highest stage of psychosocial maturity.

Several theories of personality development posit a highest stage that parallels Maslow’s (1968) stage of self-actualizing. Examples include the integrated stage of Loevinger’s (1976) ego development (ED), interindividuial self-understanding in Kegan’s (1982) model of the evolving self, universalizing faith in Fowler’s (1981) model of faith development, and ego integrity in Erikson’s (1959/1994) psychosocial development. The highest stage in these theories and Maslow’s highest stage share a focus on exceptionally advanced, psychosocial maturity—the pinnacle of progressively increasing capacities to think complexly, deeply, and richly about the self and others. Maslow (1968) also characterizes self-actualizing as the epitome of psychological health and well-being. However, most of the stage models of personality development—notably those that focus on structural, cognitive development (e.g., Loevinger, Kegan, and Fowler, but not necessarily Erikson)—do not deal with psychological health and well-being. The problem is that psychosocial maturity is neither empirically nor theoretically the same thing as well-being.

Empirically, research shows consistently that higher levels of psychosocial maturity do not correlate with higher levels of well-being (e.g., Bauer & McAdams, 2004a, 2004b, 2010; Helson

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& Roberts, 1994; Helson & Wink, 1992; King & Noelle, 2005; King & Raspin, 2004; King, Scollon, Ramsey, & Williams, 2000; King & Smith, 2004; Pals, 2006b; Vaillant & McCullough, 1987; Westenberg & Block, 1993). In other words, on average, people who score at higher relative to lower stages of maturity are not more likely to score higher on measures of well-being. However, this body of research has not compared people who score at specifically the highest stage versus other stages, primarily because only one or two people per hundred score at the highest stage of Loevinger’s ego development (Cook-Greuter, 2000; Cramer, 1999; Manners, Durkin, & Nesdale, 2004; McCrae & Costa, 1980; Trulock, 2002; Westenberg & Gjerde, 1999). Still, these normative data give little reason to even suspect that the highest stage should function any differently than earlier stages.

Theoretically, by drawing connections between their highest stage and Maslow’s self-actualizing stage, these theorists are in the position of having to explain how well-being should suddenly emerge at the highest stage as a result of the same mechanisms that propel development through the other stages, which have little or nothing to do with psychological health and well-being. Yet theoretical explanations for how well-being suddenly emerges are scarce (though see Noam, 1998). Perhaps the lack of attention to this problem rests on the cherished assumption in Western thought that arete, or excellence of personal character, goes hand in hand with happiness (Flanagan, 1991)—and that well-being increases as one matures along the path of knowing oneself more fully (e.g., Rogers, 1961).

All told, we have neither empirical nor theoretical reason to expect that well-being should be higher for people at the highest stage of maturity than for people at other stages. The only reason to expect otherwise rests on theorists’ highly speculative claim that their highest stage corresponds to Maslow’s self-actualizing. (In their defense, these theorists responsibly point out the immense difficulty of characterizing the highest stage from an empirical perspective.) In our studies, we present preliminary data—garnered from the further analysis of past datasets—to examine whether the highest stage of psychosocial maturity might accompany higher levels of well-being than earlier stages do, even though past research with these datasets has shown that the higher stages, as a group, do not correspond to higher well-being than lower stages do. If the highest stage does coincide with higher well-being, we are then left with the question of how psychosocial maturity, after stages and stages of not reflecting well-being, suddenly does so.

**TWO FACETS OF OPTIMAL DEVELOPMENT**

At the risk of oversimplifying, people who think more intricately about the self and others are just as likely to have high or low levels of well-being. In this way, psychosocial maturity and well-being can be viewed as representing two, empirically orthogonal facets of optimal or eudaimonic development (e.g., Bauer & McAdams, 2004a, in press; Bauer, McAdams, & Sakaeda, 2005; King, 2001).

**Ego Development as a Process toward Self-Actualizing**

In this article we employ Loevinger’s theory of ED as our model of psychosocial maturity. ED is one of the most comprehensive and empirically validated theories of psychosocial maturity (Pfaffenerberger & Marko, 2011; Westenberg & Block, 1993). The lack of correlation between
ED and well-being turns out to be consonant with theory; Loevinger’s (1976) ED is not a theory of psychological health as typically defined (though see Noam, 1998). However, Loevinger explicitly aligns the highest stage of ED, the Integrated stage, with Maslow’s (1968) self-actualizing.

At progressively higher stages of ED, people exhibit, among other things: increasing capacities to think about the self and others in a more differentiated and integrated manner; increasing capacities for perspective-taking and understanding the self and others; an increasingly interdependent identity; increasing awareness of the emotional and developmental causes of psychosocial conflicts; an increasingly universally minded ethical reasoning; an increasing concern for growth processes; decreasing levels of defensiveness, and other increasing capacities for transcending self-interest (Bauer, 2008).

ED theory charts eight stages beyond the pre-egoic stages of infancy, some of which we describe here (also see Table 1). At the self-protective stage, the individual has difficulty understanding the world from others’ perspectives and is preoccupied with getting or maintaining what one wants, nearly regardless of others or long-term consequences. The Conformist stage involves a strong respect for and loyalty to others in one’s own group. The person at this stage accepts the values of those in authority and looks down upon those who do not—an assessment made predominantly upon appearances, which serve generally as a key criterion for Conformist-stage evaluations of persons. The Self-Aware stage, the normative stage for adults in industrialized nations (Loevinger, 1976), combines elements of the previous and following stages, such as critical thinking about psychosocial life (Conscientious) amid stereotypic and group-based assessments of personality (Conformist). At the Conscientious stage, which is characterized by openness to experience, the person evaluates the self and others based on his or her own self-evaluated standards (rather than static rules) and on individual personality traits and personal motives (rather than merely group affiliation). The Individualistic stage combines

<table>
<thead>
<tr>
<th>Ego level (Approximate f %)</th>
<th>Characteristics</th>
<th>Impulse control</th>
<th>Interpersonal mode</th>
<th>Psychosocial concerns</th>
</tr>
</thead>
<tbody>
<tr>
<td>Impulsive (&lt;1%)</td>
<td>Impulsive</td>
<td>Egocentric, dependent</td>
<td>Bodily feelings</td>
<td></td>
</tr>
<tr>
<td>Self-protective (&lt;10%)</td>
<td>Opportunistic</td>
<td>Manipulative, wary</td>
<td>“Trouble,” control</td>
<td></td>
</tr>
<tr>
<td>Conformist (~10%)</td>
<td>Respect for rules</td>
<td>Cooperative, loyal</td>
<td>Appearances, behavior</td>
<td></td>
</tr>
<tr>
<td>Self-aware (~40%)</td>
<td>Exceptions allowable</td>
<td>Helpful, self-aware</td>
<td>Feelings, problems, adjustment</td>
<td></td>
</tr>
<tr>
<td>Conscientious (~30%)</td>
<td>Self-evaluated standards, self-critical</td>
<td>Intense, responsible</td>
<td>Motives, traits, achievements</td>
<td></td>
</tr>
<tr>
<td>Individualistic (~10%)</td>
<td>Tolerant</td>
<td>Mutual</td>
<td>Individuality, development, roles</td>
<td></td>
</tr>
<tr>
<td>Autonomous (&lt;2%)</td>
<td>Coping with conflict</td>
<td>Interdependent</td>
<td>Self-fulfillment, psychological causation</td>
<td></td>
</tr>
<tr>
<td>Integrated (&lt;1%)</td>
<td>Reconciling inner conflicts</td>
<td>Cherishing of individuality</td>
<td>Identity</td>
<td></td>
</tr>
</tbody>
</table>

Note. Adapted from Loevinger (1976). Approximate frequency percentages are representative of several sources (Cook-Greuter, 2000; Cramer, 1999; Manners, Durkin, & Nesdale, 2004; McCrae & Costa, 1980; Trulock, 2002; Westenberg & Gjerde, 1999).
elements of the Conscientious and Autonomous stages. Approximately 98% of adults score between the Self-Protective and Individualistic stages (see Table 1).

The last two stages, Autonomous and Integrated, have both been compared to Maslow’s (1968) portrait of self-actualizing (Pfaffenberger, 2005). At the Autonomous stage, the person interprets the self and others in dynamically interdependent terms, are cognizant of how people’s underlying beliefs and emotional conflicts can guide psychosocial life, and are concerned with fostering the developmental processes of the self and others. The Integrated stage receives only a brief description in Loevinger’s (1976) seminal book on ego development, primarily because so few people get scored at this stage, making normative characteristics difficult to ascertain (though see Cook-Greuter, 2000). One characteristic of this stage is the resolution of various dilemmas and integration of discrepancies within the self-system that were recognized at the Autonomous level. Rather than provide lengthy speculation of the Integrated stage, Loevinger (1976) simply equates the stage with self-actualizing: ‘‘Probably the best description of this stage is of Maslow’s Self-Actualizing person’’ (p. 26).1

Maslow (1968) characterizes self-actualizing in ways that represent heightened capacities for understanding the self and others, such as the capacities: to distinguish genuine from dishonest or scripted motives; to accept and respect others as whole human beings; to resist enculturation and cherish one’s own and others’ individuality while simultaneously experiencing the self as interdependent with humanity; to consider ethical issues in a postconventional manner. These characteristics intimately parallel those of highest-stages ED. Although we do not claim that the highest stage of ED (much less the empirical measure of it) captures the full range of characteristics of self-actualizing, we do argue that the highest stage of ED captures enough of self-actualizing to warrant a parallel (as is often done; Pfaffenberger & Marko, 2011). Notably, those characteristics shared between the Integrated stage and self-actualizing seem to imply psychosocial well-being, despite the fact that other stages of ED are largely independent of well-being (at least as well-being is commonly construed and measured).

Theoretical Conceptions of Psychosocial Maturity Versus Well-Being

Whereas theories of psychosocial maturity focus on the progressive development of psychosocial understanding, theories and research on well-being tend not to focus on development in a progressive sense. The theories and research on the development of psychosocial well-being typically do not involve stage models—particularly not the well-being models that are associated with widely used measures, such as subjective well-being (Diener, Lucas, & Scollon, 2006) and psychological well-being (Ryff & Singer, 2008). Well-being is typically studied as a relatively enduring personality characteristic that may change temporarily according to life circumstances.

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1Loevinger (1976) equated Maslow’s (1968) self-actualization with her Integrated stage (and/or Autonomous stages; cf. pp. 26 and 140). However, Maslow (1971/1993) portrays self-actualization in two ways, both as a suite of personality characteristics of advanced personality development and as a direction of development (as in ‘‘self-actualizing’’) that one moves toward gradually. He writes, ‘‘To make the growth choice instead of the fear choice a dozen times a day is to move a dozen times a day toward self-actualization’’ (p. 44). From this latter perspective, each stage of ego development involves a greater degree of self-actualizing than at the previous stage. I prefer to use the term self-actualizing, as this term also connotes for Maslow the subjective perspective of the self-actualized individual him- or herself that one can never be fully self-actualized but rather continuing in one’s own self-actualizing, even if one does appear to exhibit routinely the characteristics of self-actualization.
but then returns to a set point for the majority of people (Diener et al., 2006). Research generally does not show that well-being develops incrementally over time in a progressive pattern. Levels of well-being are typically measured not with stages but as degrees of how much well-being one reports to possess. Although some research shows well-being to increase in the form of reduced negative affect across the adult years (Mroczek & Kolarz, 1998), no qualitatively distinct stages are part of such findings. Observations such as these demonstrate that the academic conceptions of psychosocial maturity and well-being are both theoretically and empirically distinct (though see Noam, 1998).

Eudaimonic Well-Being and Optimal Development

ED itself has been framed as a path to optimal personality development (e.g., Pfaffenberger, 1995). However, it is important to keep in mind that ED does not correlate with well-being and that most people define a good life in terms of well-being (King & Napa, 1998). It is hard to imagine a comprehensive model of optimal human development that would dismiss as irrelevant the individual’s “feeling good about life.” However, well-being can mean more than simply feeling good about life and include psychosocial maturity when describing a more optimal form of human functioning (e.g., Rogers, 1961). Such a portrayal of well-being has been called eudaimonic well-being.

Research on eudaimonia and eudaimonic well-being has proliferated recently in scientific psychology (e.g., Bauer, McAdams, & Pals, 2008; King & Hicks, 2007; Ryan, Huta, & Deci, 2008; Ryff & Singer, 2008; Waterman, Schwartz, & Conti, 2008). The concept of eudaimonia has roots in Aristotle, who portrays eudaimonia as a combination of pleasure and arete, or excellence (which in the context of eudaimonia involves excellence of moral or psychosocial character). Although contemporary definitions in psychological science vary, most involve something in addition to hedonic happiness, such as meaning, growth, vitality, wisdom, or psychosocial maturity. Some researchers have operationally defined eudaimonic well-being as the combination of high levels of ED (though not necessarily the highest stage) and high levels of well-being (Bauer & McAdams, 2004a, 2004b; Bauer et al., 2005b; King et al., 2000; King & Smith, 2005; Pals, 2006x). To the degree that self-actualizing is a blend of (among other things) the highest stage of ED and well-being, self-actualizing is a highly developed form of eudaimonic well-being (see also Ryan & Deci, 2001).

NARRATIVES SELF-IDENTITY AND EUADAIMONIC GROWTH

Next we examine how personal narratives relate to eudaimonic well-being and can be used to study how people at the Integrated stage of ED interpret and make sense of their lives. People interpret and make sense of their lives by creating a narrative self-identity, that is, by constructing personal narratives that give meaning to the events in their lives and that combine to create a life story (McAdams, 2008). The life story, like any story, uses narrative themes to give the story meaning. In addition to the great narrative themes of agency and communion (McAdams, 1993), the theme of growth plays a prominent role in the creation of self-identity (McAdams, 2008). A growth narrative or growth story is a personal narrative that emphasizes, among other things, a theme of developmental progress. For example, a growth narrative might describe a past event as
important explicitly because growth was associated with the event—perhaps the individual develops valued skills, perhaps a meaningful relationship deepens. In other words, a growth narrative is a story that uses the idea of growth to give personal meaning to that story.

Research has shown consistently that people whose personal narratives emphasize intellectual growth (e.g., learning, gaining life insights) have higher levels of ED, whereas people whose personal narratives emphasize experiential, intrinsically motivated growth (e.g., deepening personal experiences, strengthening interpersonal relationships) have higher levels of well-being (for a review, see Bauer et al., 2008). This is consonant with Loevinger’s (1976) claim that people at the highest (or postconventional; Pfaffenberger et al., in press) stages of ED are consciously preoccupied with growth processes. Indeed, these growth narratives can even predict eudaimonic growth, which has been operationally defined as increases in eudaimonic well-being—i.e., in both ED and well-being—over time (Bauer & McAdams, 2010). More specifically, intellectual growth narratives were shown to predict increases in ED three years later, whereas experiential (or “socioemotional”) growth narratives predicted increases in well-being three years later.

In our studies, we examine narratives that emphasize both kinds of growth—what we call optimal growth narratives. In contrast to people at higher stages of ED, who tend to have intellectual but not experiential growth narratives, people at the Integrated stage of ED are expected to be more likely to have optimal growth narratives. By serving as a bridge between the orthogonal constructs of ED and well-being, growth narratives may serve as a useful construct in the empirical study of self-actualizing.

METHOD

Each of our three studies involves measures of ED, well-being, and growth narratives. Different analyses from these datasets have been published elsewhere (explained in the following), and a new book chapter gives a cursory presentation of the present data as part of a broader topic (Bauer, 2011). Previous studies examined ED as a variable of continuous-level data, without analyses of specific stages. We present the studies together for conceptual ease. In each study we test for differences in well-being and growth narratives between participants scoring at the highest stage of ED in that study and participants scoring at other stages.

Participants

The three studies, in total, included 320 participants. Study 1 was a study of autobiographical memories and personality development and included 51 mid-life adults and 125 students at Northwestern University (adults’ $M_{\text{age}} = 51$ years, $SD = 10$; see Bauer & McAdams, 2004a; Bauer et al., 2005). Study 2 was a study of voluntary life transitions (namely, changing careers or changing religions) and included 67 participants, mostly in young and middle adulthood ($M_{\text{age}} = 41$ years, $SD = 10$) and living in a community of relatively high socioeconomic status and education (see Bauer & McAdams, 2004b). Study 3 was a longitudinal study of autobiographical memories and personality development and included 87 students at Northwestern University who participated at Time 1 and Time 2, three years later (see Bauer & McAdams, 2010).
Measures

_Ego development._ Participants in all three studies took the Washington University Sentence Completion Test of Ego Development (Hy & Loevinger, 1996), with participants in Study 3 taking the measure at Times 1 and 2. The measure asks participants to complete 18 sentence stems, e.g., “When a child will not join in group activities . . .,” “A man’s job . . .,” “My mother and I . . .,” “A wife should . . .,” and “Rules are . . .” Each item is scored according to guidelines, aggregated for each participant, and assigned a Total Protocol Rating (TPR). The TPR scores correspond to different levels or stages of ego development. Starting at Level 1 (with Level 1 being reserved for the pre-social infant who as yet lacks an ego), the TPR scores are: (2) Impulsive (passively dependent), (3) Self-protective (opportunistic), (4) Conformist (following rules), (5) Self-aware (fairness; consideration of rules), (6) Conscientious (self-evaluated standards), (7) Individualistic (respect for others’ standards), (8) Autonomous (understanding of interdependence), (9) Integrated (reconciles conflicts within a broader identity). In each study, an advanced graduate student spent several months in training to code the SCT and attained high levels of agreement (85% or more) with test items. The ED scoring guidelines, which are self-instructive, have shown high levels of reliability and internal consistency (Loevinger, 1976). In our analyses, for each sample, we compared levels of well-being among people at the highest stage of ED versus those at lower stages. In two of the studies, no participants scored at the Integrated stage, so for those studies we ran analyses of those at the Autonomous stage (Stage 8) versus all other stages (figuring that they represented the highest stage, relative to the others in that sample).

_Psychological well-being._ Participants in Studies 1 and 2 took the Psychological Well Being scale (PWB; Ryff & Keyes, 1995), which is a widely used and validated measure of six dimensions of eudaimonic well-being: autonomy, environmental mastery, personal growth, positive relationships, purpose in life, and self-acceptance. Our studies involved either 72 items (Study 1) or 54 items (Study 2) and a 6-point Likert-type scale.

_Subjective well-being._ Participants in all three studies completed the Satisfaction with Life Scale (LS; Diener, Emmons, Larson, & Griffen, 1985). LS is a well-validated, five-item measure of overall life satisfaction. Items include “I am satisfied with the current state of affairs in my life” and “If I could live my life over, I would change almost nothing.” Items are rated on a scale of 1 (strongly disagree) to 7 (strongly agree). Participants in Study 3 also completed the Positive and Negative Affect Schedule (PANAS; Watson, Clark, & Tellegen, 1988) at Times 1 and 2. PANAS has two subscales, one for positive affect and one for negative affect. Participants rated to what extent (1 = very slightly or not at all to 5 = extremely) they generally experience each of 20 emotions—10 positive and 10 negative. The aggregate of LS and PANAS has been widely used as a measure of subjective well-being (SWB; Diener et al., 2006). Thus, in Study 3, scores for life satisfaction and PANAS were standardized and aggregated (with NA scores subtracted) to form a measure of SWB at Times 1 and 2.

_Growth narratives._ Participants wrote narratives of autobiographical memories and major life goals in Studies 1 and 2 and wrote narratives of major life goals in Study 3. Growth narratives were coded by two researchers in each study, based on coding protocols established in the articles cited earlier for these research projects. Participants were given approximately one page
to hand-write three autobiographical memories (high points, low points, and turning points in life) and approximately one page to hand-write two major life goals. In each study, an advanced graduate student, trained in narrative coding, and the first author (Bauer) coded the narratives for themes of intellectual and experiential growth. Intellectual growth themes involved explicit concerns for conceptual exploration and learning, whereas experiential growth goals involved explicit concerns for personal growth (e.g., building meaningful skills, but not necessarily conceptual ones), deepened relationships, or contributing to the development of others. Individual narratives that included an emphasis on both intellectual and experiential growth were identified as optimal growth narratives and received a numerical code of 1; narratives that did not include an emphasis on both intellectual and experiential growth were coded as 0. For Studies 1 and 2, each participant wrote five narratives (three memories and two goals), so a participant could have anywhere from 0 to 5 optimal growth narratives. For Study 3, each participant wrote two goal narratives, so a participant could have anywhere from 0 to 2 optimal growth goals. Interrater reliabilities met industry standards (generally above 80% agreement; kappas above .60). Discrepancies were resolved by discussion.

RESULTS

Table 2 presents the frequency distributions for the stages of ED for the three studies. Table 3 presents the statistics described in the following.

Study 1

Participants scoring at the Integrated stage of ED had significantly higher levels of PWB (but not LS) than participants scoring at other stages of ED. Participants at the Integrated stage were also more likely to have greater than the median number of optimal growth narratives.

| TABLE 2 |
| Frequencies of Participants Scoring at Each Stage of Ego Development (ED) in Three Studies |
| Study 3 |

<table>
<thead>
<tr>
<th>ED Stage</th>
<th>Study 1 f</th>
<th>Study 2 f</th>
<th>T1 f</th>
<th>T2 f</th>
</tr>
</thead>
<tbody>
<tr>
<td>9</td>
<td>4</td>
<td>0</td>
<td>0</td>
<td>4</td>
</tr>
<tr>
<td>8</td>
<td>10</td>
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<td>7</td>
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<tr>
<td>7</td>
<td>50</td>
<td>22</td>
<td>10</td>
<td>13</td>
</tr>
<tr>
<td>6</td>
<td>72</td>
<td>25</td>
<td>43</td>
<td>32</td>
</tr>
<tr>
<td>5</td>
<td>34</td>
<td>14</td>
<td>26</td>
<td>30</td>
</tr>
<tr>
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<td>3</td>
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<td>1</td>
</tr>
<tr>
<td>3</td>
<td>2</td>
<td>0</td>
<td>1</td>
<td>0</td>
</tr>
</tbody>
</table>

Note. T1 = Time 1. T2 = Time 2 (three years later).
Table 3
Integrated Versus Other ED Stages in Relation to Well-Being and Growth Narratives in Three Studies

<table>
<thead>
<tr>
<th>Study</th>
<th>ED group (n)</th>
<th>Well-being M (SD)</th>
<th>Test</th>
<th>High</th>
<th>Low</th>
<th>Test</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>ED = 9 (4)</td>
<td>PWB = 68.91 (1.15)</td>
<td>t = 5.19***</td>
<td>4</td>
<td>0</td>
<td>$X^2 = 12.29^{***}$</td>
</tr>
<tr>
<td></td>
<td>ED &lt; 9 (172)</td>
<td>PWB = 64.77 (7.26)</td>
<td>t = .08 n.s.</td>
<td>39</td>
<td>129</td>
<td></td>
</tr>
<tr>
<td></td>
<td>ED &lt; 9 (172)</td>
<td>LS = 24.50 (6.45)</td>
<td>t = 3.06*</td>
<td>5</td>
<td>59</td>
<td>$X^2 = 10.61^{***}$</td>
</tr>
<tr>
<td>2</td>
<td>ED = 8 (3)</td>
<td>PWB = 45.17 (2.25)</td>
<td>t = 3.31*</td>
<td>17</td>
<td>66</td>
<td></td>
</tr>
<tr>
<td></td>
<td>ED &lt; 8 (64)</td>
<td>PWB = 40.52 (6.28)</td>
<td>t = 2.17</td>
<td>1</td>
<td>3</td>
<td>$X^2 = 6.41^*$</td>
</tr>
<tr>
<td></td>
<td>ED &lt; 8 (64)</td>
<td>LS = 28.67 (3.06)</td>
<td>t = .08 (2.29)</td>
<td>1</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>ED2 = 9 (4)</td>
<td>SWB1 = 2.27 (.58)</td>
<td>t = 6.09***</td>
<td>3</td>
<td>1</td>
<td></td>
</tr>
<tr>
<td></td>
<td>ED2 &lt; 9 (83)</td>
<td>SWB1 = -.04 (2.22)</td>
<td>t = 2.68</td>
<td>66</td>
<td>17</td>
<td></td>
</tr>
</tbody>
</table>

Note. ED = Ego development. “ED = x” and “ED < x” refer to the groups of participants who were scored at or less than stage x of ED. PWB = Psychological well-being. LS = Life satisfaction. SWB = Subjective well-being (a standardized aggregate of positive affect, inversely coded negative affect, and life satisfaction). Low, High = Below or above the median. Subscripts 1 and 2 refer to measures at Time 1 and Time 2 (three years later). For t-scores, equal variances were not assumed.

No participants were scored at the Integrated stage of ED (see Table 2). However, a similar proportion of participants scored at the Autonomous stage in this study as scored at the Integrated stage in the other studies, so we conducted analyses to compare those who scored at the Autonomous stage with those who scored at other stages. Participants scoring at the Autonomous stage of ED had significantly higher levels of both PWB and LS than participants scoring at other stages of ED. Participants at the Autonomous stage were also more likely to have greater than the median number of optimal growth narratives. Study 3

No participants were scored at the Integrated stage of ED at T1, but four participants were scored at the Integrated stage at T2 (three years later). Thus we conducted analyses with this latter group versus participants who were scored at other stages of ED at T2.

Participants scoring at the Integrated stage of ED had significantly higher levels of SWB at T1 and marginally significantly higher levels of SWB at T2 than did participants scoring at other stages of ED. Looking at the component parts of SWB, one notable finding is that participants scoring at the Integrated stage had significantly lower levels of negative affect at T2, $t (85) = -3.82, p = .011$, and significantly higher levels of life satisfaction at T1, $t (85) = 2.68, p = .050$. Participants at the Integrated stage were also more likely to have greater than the median number of optimal growth narratives.
DISCUSSION

These studies provide preliminary evidence that the highest stage of ED might involve higher levels of well-being and a more growth-oriented self-identity than other stages of ED. These studies suggest—again, in a preliminary way—an empirical portrait of optimal development that includes the capacities to think about one’s life at a high level of complexity and integration, to feel good about one’s life, and to identify closely with processes of both intellectual and experiential growth. In this discussion, we consider how the two paths of maturity and well-being might come together at the highest stage of ED.

Two Paths to Well-Being

To address the mystery that the highest stage of maturity might culminate in well-being, after stages and stages having no greater likelihood of well-being, we begin by considering two paths to well-being: the short road and the long road.

The short road. Well-being is typically measured as the subjective appraisal that one’s life is pleasurable and/or meaningful. This assessment boils down to being satisfied with what one has in life, a matter of matching expectations with perceived realities—regardless of how complexly or integratively one interprets those realities. The path to such appraisals of well-being may, to a large extent, be a product of genetic endowment, a general set-point for well-being (Diener et al., 2006) and other hard-to-change personality characteristics—what Haidt (2006, p. XX) calls “winning the cortical lottery.” For some people the road to well-being is simply shorter.

The long road. Despite showing a biological basis for well-being, research also shows that the set-point for well-being affords ample room (roughly 50% of the variance in well-being) for factors like environmental circumstances (Diener et al., 2006) and, perhaps more influential, the individual’s purposeful actions (Lyubomirsky, Sheldon, & Schkade, 2005). In other words, changes in how the individual interprets his or her life may heighten or dampen one’s average level of well-being. Perhaps the changes in how the individual interprets his or her life upon developing into the highest stage of ED help to heighten well-being. Our findings suggest that such a hypothesis is worth further investigation. If the short road to happiness is not one’s own road, then perhaps another path to happiness involves the long road of psychosocial maturity and self-actualizing. King (2001) calls this path “the hard road to the good life” (p. XX), emphasizing the tendency for those of heightened maturity to acknowledge head-on rather than gloss over life’s difficulties. The road is also long, as Integrated ED generally does not emerge before mid-life. However, even if the preliminary findings are correct, then we are still left the question of how, after stages and stages of having no tie to well-being, ED suddenly at the highest stage establishes such a tie.

The “sudden” Emergence of Well-Being at the Highest Stage of Ego Development

People who are disposed toward psychosocial maturity are concerned with life’s deeper, conceptual meanings. Some of these people are happy on average, and some are not (again, there’s no
relation between ED and well-being). But some of these people (if the preliminary data are correct) eventually experience well-being upon scaling the heights of psychosocial maturity. Here we attempt an explanation of how well-being might suddenly emerge—not suddenly as in overnight, but rather as in moving from the Autonomous stage to the Integrated stage, when movement from one any stage to the next previously had accompanied no increase in well-being.

We focus on how the individual subjectively interprets his or her psychosocial life. Well-being as studied historically in psychological science is a subjective phenomenon by definition, a product of how one construes one’s actualities and expectations in life (Diener et al., 1985; James, 1890/1950) and how one constructs a narrative self-identity (Bauer et al., 2008). People who are dispositionally happy—e.g., by winning the cortical (or environmental) lottery—think about their lives in ways that lead to life satisfaction. Those who are not so disposed are left to figure out how to think about their lives in such a manner (assuming that people prefer to be satisfied rather than not satisfied with life). Perhaps Erikson (1959/1994) provides a key idea to unlocking a solution. Erikson claimed that Ego Integrity (his theory’s highest stage of development) demands that one integrates the various components and forces in one’s life, e.g., the good and the bad, the individual and the cultural. This takes a good deal of integrative complexity (Tadmor, Tetlock, & Peng, 2009) in thinking about one’s life—though perhaps not to the degree characteristic of Loevinger’s (1976) Integrated stage. To accomplish such an integration, Erikson says, one must accept that all parts of one’s life are, or actually constitute, one’s ‘‘one and only life:’’

It is the acceptance of one’s one and only life cycle and of the people who have become significant to it as something that had to be and that, by necessity, permitted of no substitutions. It thus means a new different love of one’s parents, free of the wish that they should have been different and an acceptance of the fact that one’s life is one’s own responsibility . . . . For he knows that an individual life is the accidental coincidence of but one life cycle with but one segment of history; and that for him all human integrity stands and falls with the one style of integrity of which he partakes. (Erikson, 1959/1994, p. 104)

This acceptance is probably much like the kind of self-acceptance that dispositionally happy people have as a matter of course, although adjusted for the degree of complexity with which one interprets the parts of one’s life that one must accept. In other words, dispositionally happy people simply accept the worth of their lives—regardless of whether they interpret their lives in a more self-protective or a more integrated manner. People at higher stages of ED are in the position of having to accept as satisfying a vision of psychosocial life that appreciates and even identifies with human suffering and inequities. How do these people do this? What about the mindset of the Autonomous and Integrated stages allows for such an acceptance?

At the Autonomous stage of ED, people are highly tolerant of others’ perspectives, they work toward the growth of both the self and others, and they deal directly with conflicts that are recognized to be psychological at heart (Loevinger, 1976). However, the ability to do all these things does not necessitate the ability to accept the important parts and influences in one’s life as they are. However, with some experience at Autonomous-stage thinking and some movement into Integrated-stage thinking, individuals begin to find resolutions of the subtle conflicts of which Autonomous-level thinking is aware. Perhaps these resolutions come from becoming emotionally comfortable with the conceptual understanding that the conflicts themselves are predicated...
on mental constructs (Cook-Greuter, 2000) or that the conflicts are less brute facts than parts of processes that afford opportunities for growth (Bauer & Bonanno, 2001). At the Integrated stage, individuals have had experience with and understand what it means at a lived level that constructs like self-identity, life circumstances, outcomes, and growth are all projections of mental, linguistically bound constructs (Cook-Greuter, 2000). This construct-awareness does not mean that once-meaningful phenomena are now meaningless—or more precisely, that meaningfulness (i.e., the emotional sense of having enough conceptual meaning; Baumeister, 1991) is now lacking. Instead one becomes comfortable with the fact that the very meanings and conflicts (as well as their resolutions) in one’s life—the subtleties of which were made discernable around the Autonomous stage—are constituted of and are limited by interpretation. Becoming comfortable here is key; a merely conceptual understanding of constructivism is but a step toward the acceptance that emerges with self-actualizing and that allows for a sense of well-being at the highest stage of psychosocial maturity.

Perhaps a comparison can be made to the process of a Zen koan (Suzuki, 1964/2004). After wrestling with a Zen koan, if all goes well, one ultimately drops the ideal of making conceptual sense of the conceptually absurd question, and—as the ego is quieted—one’s mind opens to and accepts at a visceral level what is present. Similarly, the Integrated stage involves a quieted ego (Bauer, 2008), though not necessarily as quieted as in a state of satori. Perhaps at the Integrated stage, people, on average, recognize at a visceral level that the direct, experiential facet of concepts—unmediated by explicit, conceptual interpretations—carry the source of meaning (and perhaps more importantly in terms of well-being, carry the meaningfulness). This analogy may overstate what the person at the Integrated stage does routinely. At the very least, it seems that the person accepts life (or such-and-such situation, routinely), even while knowing that a final meaning of it remains elusive—and indeed irrelevant.

In any case, this personal comfort with constructivism seems to accompany an interpretation of everyday life in terms of longer-term process, as well as a greater flexibility in one’s interpretations of one’s life. At this point, one transcends (at a felt—not merely conceptual—level) a paradox of growth: That to grow one must accept things as they are while simultaneously taking steps to change things for the perceived better. As Maslow (YEAR) describes self-actualizing, gratitude and acceptance of the way things are coexist with an overarching concern for growth.

Limitations of These Studies

It is critical to keep in mind, as we have tried to emphasize, that we are talking about preliminary data. Although we do find significant differences—which are notable, given the low numbers of participants at the highest stage in any one study—we wish to exercise caution in interpreting these findings as proof that participants at the highest stage of ED are happier. Only with larger numbers of participants scoring at the Integrated stage should we make any claim about the sudden appearance of well-being at the height of psychosocial maturity. We also note that our samples had higher proportions of participants scoring at higher stages of ED than is typical in research. The reason, we expect, is that the student samples came from one of the most competitive universities in the United States, and the adult sample came from a highly educated community (see Cohn, 1999). Finally, Study 2 did not have any participants scoring at the
Integrated stage. As for the use of the Autonomous stage as a proxy for self-actualizing, we note that self-actualizing is sometimes characterized as ED stages of Autonomous or higher (Pfaffenberger, 2005). Despite these limitations, we think it is reasonable to consider these findings to suggest in a preliminary way that future research is warranted on the relation between the Integrated stage of ED and well-being.

Conclusion

These studies provide preliminary evidence that the pinnacle of psychosocial maturity may involve the relatively sudden emergence of well-being, potentially supporting Loevinger’s (1976) claim that the Integrated stage of ED can be described in terms of Maslow’s (1968) self-actualizing. We attempted to provide an explanation of how a structural-developmental theory like ED, which has little theoretical and no empirical tie to well-being (when ED is measured as a continuous variable), might culminate in well-being. Our explanation rests on Erikson’s (1959/1994) notion that ego integrity depends on accepting one’s life in all its complexities. We propose that only after identifying with growth processes for some time—a tendency that emerges in the postconventional stages of ED (Loevinger, 1976)—can the individual who had not previously accepted his or her life as satisfactory gain enough experience to accept it eventually. For those people who did not win the cortical or environmental lottery of well-being, such an acceptance may amount to a revolution within the more gradual evolution of their psychosocial maturity.

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REFERENCES


