Kohlberg’s Dilemmas
How to Align the Internal-Structural Definition of Moral Competence with Measurement

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Theory-driven Measurement

“What is lacking is a psychological theory that dictates explicitly which items should be included on the test. Then the criterion would be used, not to validate the test, but to validate the theory on which the test was based. Such an explicit theory - if it were true - would resolve all doubts as to whether or not the test actually measured what it was intended to measure.”

Moral Judgment Competence...

is "the capacity to make decisions and judgments which are moral (i.e., based on internal principles) and to act in accordance with such judgments."

Lawrence Kohlberg (1964, p. 425)
Kohlberg’s Methodological Dilemmas

Internal \[\rightarrow\] External

Structural

Definition

Atomistic

Measurement
Dilemma #1

**Internal Definition** → **External Measurement**

“Morality ... defined as 'having moral principles' ... includes [aspects like] selection and ordering of the rules, intelligent interpretation of them, and *inner conformity* to them in difficult situations rather than outer conformity in routine situations.” (Kohlberg 1958, p. 3; emphasis added)

“Proponents of behavioristic conceptions of moral conduct typically define conduct as moral if it conforms to a socially or culturally accepted norm. All of us recognize this is intuitively incorrect...” (Kohlberg 194, p. 392)

“Right action is defined by valid universalizable moral principles ... defined by, and justified by philosophers.”
(Kohlberg 1984, p. 393)

“I include in my approach a normative component. [...] I assumed the need ... to give a philosophic rationale for why a higher stage is a better stage.”
(p. 400)

“Moral rightness [cannot be] judged by an opinion poll of high stage subjects.” (p. 393)
Dilemma #2

Structural Definition

“Cognitive structures are always structures (schemas) of action.” (Kohlberg 1958, p. 8)

“Our stages of moral judgment are defined by the form of moral judgment, not its content.”
(Kohlberg 1984, p. 524)

“The responses of subjects to the dilemmas and their subsequent responses to clinical probing are taken to reflect, exhibit, or manifest the structure.” (p. 407)

Structure “is a construct rather than an inference, and is warranted only on the grounds of intelligible ordering of the manifest items.” (p. 408)

“If a test is to yield stage structure, a concept of that structure must be built into the initial act of observation, test construction, and scoring.” (pp. 401-402)

Atomistic Measurement*

“The structures themselves can never be observed…” (Kohlberg 1984, p. 242)

“My colleague and I … have required each item in the manual to clearly reflect the structure of the stage to which it is keyed.” (p. 403; emphasis added)

“Test reliability and test construct validity are one and the same thing.” (p. 424)

*That is, classical test theory, and item-response theory (Rasch-scaling).
Aligning Definition and Measurement: The *Moral Competence Test (MCT)*

**Experimental Design**: The standard MCT consists of pro & contra arguments, two dilemma stories (workers, doctor), representing six moral orientations, forming a $2 \times 2 \times 6$ orthogonal design.

**Moral Task**: The MCT confronts the participants with a difficult moral task, namely to judge agreeing and opposing arguments by their *moral quality* rather than their opinion-agreement.

**Behavioral Data**: Participants’ ratings of arguments for and against a given decision on a 9-point scale (reject – accept).

**Scoring the two aspects of moral behavior**:
- **Moral competence**: C-score, by multivariate analysis of variance components of *individual response pattern* (moral competence score)
- **Moral orientation**: Summated ratings of six moral orientations (Kohlberg).

* Formerly called “Moral Judgment Test” (MJT)
Theory-Driven Test-Construction: MCT

- The items (arguments) represent each of the six moral orientations defined by Lawrence Kohlberg
  - The items of the master version (in German) were validated through expert ratings
  - No data-driven item selection was done to enhance ‘reliability’ of test-items or correlation of the MCT with age
- Theory-derived criteria for construct validation:
  - Preference hierarchy of the six types of moral orientations (Rest 1969)
  - Quasi-simplex structure of inter-correlations of the six types (Kohlberg 1958)
  - Affective-cognitive parallelism (Piaget 1981; Kohlberg 1984): the higher moral competence is the more will high orientations be preferred and the more will low orientations be rejected
  - Non-fakeability of the moral competence score (Kohlberg 1958; 1984)
- The MCT meets all four criteria without exceptions, as studies in many countries show
  - See Lind (2008); Nowak et al. (2013); Hemmerling (2014)
2. Doctor's Dilemma

A woman had cancer and she had no hope of being saved. She was in terrible pain and so weakened that a large dose of a painkiller such as morphine would have caused her death. During a temporary period of improvement, she begged the doctor to give her enough morphine to kill her. She said she could no longer endure the pain and would be dead in a few weeks anyway. The doctor complied with her wish.

20. Do you disagree or agree with the doctor's behavior?

I strongly disagree  I strongly agree

-3  -2  -1  0  +1  +2  +3

How acceptable do you find the following arguments *in favor* of the doctor? Suppose someone said he acted *rightly* ...

21. because the doctor had to act according to his conscience. The woman's condition justified an exception to the moral obligation to preserve life. ........................................

I strongly reject  I strongly accept

-4  -3  -2  -1  0  +1  +2  +3  +4

22. because the doctor was the only one who could fulfill the woman's wish; respect for her wish made him act as he did. .............................

-4  -3  -2  -1  0  +1  +2  +3  +4

23. because the doctor only did what the woman talked him into doing. He need not worry about unpleasant consequences. ...........................

-4  -3  -2  -1  0  +1  +2  +3  +4

24. because the woman would have died anyway and it didn't take much effort for him to give her an overdose of a painkiller. ..........................

-4  -3  -2  -1  0  +1  +2  +3  +4

25. because the doctor didn't really break a law. Nobody could have saved the woman and he only wanted to shorten her suffering. ..........

-4  -3  -2  -1  0  +1  +2  +3  +4

26. because most of his fellow doctors would presumably have done the
26. because most of his fellow doctors would presumably have done the same in a similar situation. ................................. -4 -3 -2 -1 0 +1 +2 +3 +4

How acceptable do you find the following arguments against the doctor? Suppose someone said that he acted wrongly .

27. because he acted contrary to his colleagues’ convictions. If they are against mercy-killing the doctor shouldn’t do it. ................................. -4 -3 -2 -1 0 +1 +2 +3 +4

28. because one should be able to have complete faith in a doctor’s devotion to preserving life even if someone with great pain would rather die. ................................. -4 -3 -2 -1 0 +1 +2 +3 +4

29. because the protection of life is everyone’s highest moral obligation. We have no clear moral criteria for distinguishing between mercy-killing and murder. ................................. -4 -3 -2 -1 0 +1 +2 +3 +4

30. because the doctor could get himself into much trouble. They have already punished others for doing the same thing. ................................. -4 -3 -2 -1 0 +1 +2 +3 +4

31. because he could have had it much easier if he had waited and not interfered with the woman’s dying. ................................. -4 -3 -2 -1 0 +1 +2 +3 +4

32. because the doctor broke the law. If one thinks that mercy-killing is illegal, then one should refuse such requests. ................................. -4 -3 -2 -1 0 +1 +2 +3 +4

Thank you!
### Structural

The moral competence score \([C]\) is based on the *individual pattern* of responses to a multi-variate test situation. Fictitious example: Two participants with different competence-scores.

<table>
<thead>
<tr>
<th>Arguments on Stage 1</th>
<th>Person A</th>
<th>Person B</th>
</tr>
</thead>
<tbody>
<tr>
<td>Contra</td>
<td>-4</td>
<td>-3 -2</td>
</tr>
<tr>
<td>Pro</td>
<td>-3 -2 -1</td>
<td>-3 -2 -1</td>
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<table>
<thead>
<tr>
<th>Arguments on Stage 2</th>
<th>Person A</th>
<th>Person B</th>
</tr>
</thead>
<tbody>
<tr>
<td>Contra</td>
<td>-4 -4</td>
<td>-3 -2 -1</td>
</tr>
<tr>
<td>Pro</td>
<td>-4 -4</td>
<td>-4 -4</td>
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<table>
<thead>
<tr>
<th>Arguments on Stage 3</th>
<th>Person A</th>
<th>Person B</th>
</tr>
</thead>
<tbody>
<tr>
<td>Contra</td>
<td>-4 -4 -4</td>
<td>-3 -2 -1</td>
</tr>
<tr>
<td>Pro</td>
<td>-4 -4 -4</td>
<td>-4 -4 -4</td>
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<table>
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<tr>
<th>Arguments on Stage 4</th>
<th>Person A</th>
<th>Person B</th>
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</thead>
<tbody>
<tr>
<td>Contra</td>
<td>-4 -4 -4 -4</td>
<td>-3 -2 -1</td>
</tr>
<tr>
<td>Pro</td>
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<thead>
<tr>
<th>Arguments on Stage 5</th>
<th>Person A</th>
<th>Person B</th>
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<tr>
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<thead>
<tr>
<th>Arguments on Stage 6</th>
<th>Person A</th>
<th>Person B</th>
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<tbody>
<tr>
<td>Contra</td>
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<td>-3 -2 -1</td>
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<tr>
<td>Pro</td>
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Person: 
Opinion: 

<table>
<thead>
<tr>
<th>Person A</th>
<th>Opinion: The decision was right</th>
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</thead>
<tbody>
<tr>
<td>Contra</td>
<td>-4</td>
</tr>
<tr>
<td>Pro</td>
<td>-3 -2 -1</td>
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</table>

C-score: 0.4
Low moral competence

<table>
<thead>
<tr>
<th>Person B</th>
<th>Opinion: The decision was right</th>
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<tr>
<td>Contra</td>
<td>-4</td>
</tr>
<tr>
<td>Pro</td>
<td>-3 -2 -1</td>
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</tbody>
</table>

C-score: 92.2
High moral competence

**Internal**

The moral competence score [C] is tied to the participant’s *internal* orientations, not to *external* norms.

Example: Two persons with same moral competence, but different moral orientations.

<table>
<thead>
<tr>
<th>Person: C</th>
<th>Opinion: “The decision was right”</th>
<th>Arguments on</th>
</tr>
</thead>
<tbody>
<tr>
<td>Contra</td>
<td>Pro</td>
<td>Stage 1</td>
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<td>Stage 5</td>
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<td>Stage 6</td>
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</tbody>
</table>

C-score: **92.2**
High moral competence
Modal moral orientation: Stage 1

<table>
<thead>
<tr>
<th>Person: B</th>
<th>Opinion: “The decision was right”</th>
<th>Arguments on</th>
</tr>
</thead>
<tbody>
<tr>
<td>Contra</td>
<td>Pro</td>
<td>Stage 1</td>
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<td>Stage 2</td>
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<td>Stage 5</td>
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<td>Stage 6</td>
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</tbody>
</table>

C-score: **92.2**
High moral competence
Modal moral orientation: Stage 6

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Report card

With the Moral Competence Test (MCT) “a scoring algorithm can be arrived at for assessing pure stage structure score for an individual.”

Sample Finding: Parallelism of Moral Orientation and Competence

FORM-Project
German Univ Students
N = 756

Type of Moral Orientation (Kohlberg)

Groups:
Level of Moral Competence

0-9
10-19
20-29
30-39
40-49
50-59
60-69
70-79
80-100

Strongly accept

Strongly reject
The voice
There is a voice inside of you
That whispers all day long,
‘I feel that this is right for me,
I know that this is wrong.’
No teacher, preacher, partner, friend
Or wise man can decide
What's right for you – just listen to
The voice that speaks inside.

(Shel Silverstein)
References


P For more references see: http://www.uni-konstanz.de/ag-moral/