Communities have been concerned with the type of person that children become throughout human history, and scholars have addressed the topic for over two thousand years. Aristotle addressed this issue in the Nichomachean Ethics. Jean Jacques Rousseau faced it directly in Emile in 1762. Over the past century a wealth of data has been amassed concerning the development of morality in children and adolescents. Throughout this time, the role of adults, especially parents, in the development of children’s morality has been a central focus. This paper will address the influence of parents on children’s moral development by first examining some selected aspects of moral development and then exploring the specific role of parenting and parent training in those domains.

First this discussion will address what is meant by morality in childhood; i.e., what characteristics or behaviors define a morally good or bad child. Next, the discussion will turn to an exploration of how parents impact the development of those moral characteristics. Finally, practical implications for parenting and parent training will be drawn from the prior discussions.

The Moral Nature of the Child

Whereas most people would likely agree that they "know a good person when they see one," there is decidedly less agreement as to what characteristics centrally define psychological morality. Psychoanalytic models (Gilligan, 1976; Sagan, 1988) tend to focus on internalized societal norms for behavior (i.e., conscience or superego) and the corresponding emotions of self-reproach for their violations (e.g., guilt and shame). Behaviorists (Pelaez-Nogueras & Gewirtz, 1995) focus on overt behavior as the core of psychological morality; e.g., sharing, helping, cheating, etc. Socio-cultural theorists emphasize the role of cultural transmission of values, personality traits (moral character), and cognitive patterns (Bandura, 1986; Etzioni, 1996; Shweder et al., 1987; Staub, 1979). Biologists tend to focus attention on evolutionary functions, genetic selection of moral characteristics, hormones, and neuroanatomy (Alexander, 1987; Eysenck, 1976). Cognitive psychologists emphasize moral reasoning and decision-making (Kohlberg, 1976; Piaget, 1965).

This heterogeneity results in a quite confusing picture of the moral person (Berkowitz, 1997). Diverse disciplines and theoretical models have generated disconnected, myopic views of the moral person. This is exacerbated by the problem of studying morality with people at different developmental levels. For example, the study of emergent morality in the second year of life (infancy) by necessity emphasizes empathy (Hoffman, 1976) and self-other differentiation.
(Lamb & Feeny, 1995) whereas the study of pre-school morality focuses, appropriately, on perspective-taking (Selman, 1980), self-control (Berkowitz, 1982), and social behaviors such as sharing (Eisenberg & Mussen, 1989). Those who study moral development in adolescence, by contrast, might focus instead on ethical philosophy (Forsyth & Pope, 1984) and moral identity (Blasi, 1993).

For these reasons, it is necessary to define the scope of moral development that will be addressed in this analysis. The goal is to identify how parents can be taught to nurture the development of "building blocks" of morality, a core set of characteristics that either (1) underpin and give rise to moral functioning or (2) reflect fundamental human morality. The focus thus necessarily will be on early and middle childhood, when these characteristics develop. Further, given the interest in the effects of parenting on moral development, only those aspects of morality that are most susceptible to parental influences will be addressed. Consequently, biological and evolutionary perspectives and concepts such as temperament or prenatal teratogens, for example, will not be considered. This nevertheless still leaves a fairly substantial domain of potential scrutiny.

Such moral characteristics, however, do not appear spontaneously nor are they disconnected from the larger core of what constitutes healthy psychology. Rather, the moral nature of a person is fully integrated with other aspects of that person's psychological make-up. For example, Colby and Damon (1992), in their study of moral exemplars, found many non-moral characteristics that were common among their subjects; e.g., a sense of humor, optimism, certainty. The final component of Berkowitz's (1997) "moral anatomy", meta-moral characteristics, refer to qualities such as these. Moral characteristics are matters of morality or ethics, whereas meta-moral characteristics are necessary for moral functioning but are not themselves intrinsically moral in nature. That is, they potentially serve either morality or immorality. For example, to be morally effective one needs self-control. However, self-control can also support criminal behavior, sadistic behavior, etc. Rest (1985) incorporates a variety of such characteristics into his model of the components of moral action; e.g., sensitivity and ego strength. In a sense, the first major model of moral character recognized this distinction as well. Aristotle describes practical wisdom or prudence as the intellectual capacity to discern what will and how to serve the moral virtues. Therefore, this discussion will focus on both types of characteristics: specifically moral characteristics and the more foundational meta-moral characteristics upon which they depend.

Based upon these criteria, and the emphases in the relevant literature, eight psychological outcomes of parenting will be examined. The first four are meta-moral characteristics: social orientation, self-control, compliance, self-esteem. Understanding these characteristics is important for explaining how parents influence their children’s moral development. The next four are components of psychological morality: empathy, conscience, moral reasoning, altruism. All of these components are all well-researched areas with clear relations to parental behavior. Furthermore, all are evident during childhood and collectively span the entire range of childhood, beginning with the first appearance of an attachment bond and a moral sense in infancy (Lamb & Feeny, 1995) and ending with puberty (adolescence).
Four Psychological Foundations for Moral Agency

A social orientation

Description. Moral behavior flows from an interest in and concern for other people. Psychologists have long viewed the desire to take part in social interaction, to develop relationships, as critical to psychological health. Indeed, the absence of this desire is viewed as pathological. In the Diagnostic and Statistical Manual of Mental Disorders (DSM-IV; American Psychiatric Association, 1994), a person exhibiting pervasive detachment from and disinterest in social relationships is said to have schizoid personality disorder, and one of the major signals of emerging psychopathology in childhood and adolescence is the onset of an anti-social life-style in which the rights of others are ignored or violated (Weiner, 1980). Given its primacy for psychological health as well as moral development, it is important to understand how a healthy social orientation develops in childhood.

Consensually, researchers and clinicians tend to point to the formation of a secure attachment bond in the first few years of life as the origin of healthy social orientation. Lickona (1983), in his prescription for raising moral children, argues that "given a loving environment, kids make huge strides in their relationships with other people. Babies get attached to those who cuddle and care for them, and that’s their first vital link to the human community” (p. 10). Attachment is the special affective relationship that forms between infants and their primary caretakers (Ainsworth et al., 1978; Bowlby, 1969). Research with humans and other primates has repeatedly demonstrated that the formation of a healthy attachment bond in the first two or three years of life leads to a broad variety of positive psychological outcomes (Bowlby, 1988) and that these outcomes are long-lasting (Kobak & Sceery, 1988; Main & Cassidy, 1988). Of particular interest for this discussion are the findings of a relation between the nature of the attachment bond and social and moral outcomes in the child. Healthy ("secure") attachment relationships have been found to predict successful relationships throughout life. For example, Park and Waters (1989) report that preschool children with secure attachments had more harmonious interactions with peers than did children with insecure attachments. Indeed, it has been argued that the attachment relationship is the template for most later relationships (Oliner & Oliner, 1988; Sroufe & Fleeson, 1986). Magid and McKelvey (1987) argue that the single most consistent cause of childhood antisocial behavior is the lack of a secure attachment bond in infancy, because of the resultant failure to develop a conscience (one of the moral components to be discussed later). Ainsworth et al. (1978) report that securely attached children are more likely to comply with family rules (another of our foundational elements of moral agency).

Relation to parenting. It is a bit tautological to argue that parenting influences the development of a social sense, having already established that the core of a social sense derives from the formation of the attachment bond that is formed with one’s primary caretakers. Nevertheless, one can examine which features of parenting affect the development of a secure attachment bond. Unlike other species in which the attachment bond is instinctive and very narrow and triggered by specific physical cues, in humans the attachment bond can form in a variety of ways and result in a broad range of outcomes.
Secure attachments are understood generally to derive from the quality of the interaction between infant and caretaker (Schaffer, 1996). Although such interactions are best conceptualized as social systems (Schneider-Rosen & Rothbaum, 1993), the contributions of mother (or other attachment figure) can be meaningfully teased out of the system. One of the most widely recognized parental characteristics that predict secure attachment bonds is responsivity. Mothers of securely attached infants tend to respond consistently and rapidly to the infants’ signals (Ainsworth, Bell, & Stayton, 1972). Securely attached infants also tend to have mothers who more accurately interpret the infants’ signals and therefore respond more appropriately (Ainsworth, et al., 1978). Research has demonstrated that this characteristic continues to be present in parents of securely attached toddlers (Matas, Arend, & Sroufe, 1978).

As already noted, the influence of the infant is also important in the nature of the relation that produces the attachment bond. Even here, there is useful information in parent training, however. Crockenberg (1981) demonstrated that infant temperament interacts with parental resources. Mothers with irritable infants were at risk for not forming secure attachments unless they had ample social support for their parenting. This support (e.g., from relatives) allowed the mother to escape the stress of the irritable infant for short periods of time.

**Self-control**

Description. Even though there are a broad variety of perspectives on moral psychology, beginning at least with the seminal work of Hartshorne, May, and Maller (1929), they generally seem to agree that effective and mature moral agents must have some capacity to control their own behaviors effectively; i.e., "developmental implications of early differences in inhibitory control include differences in multiple aspects of morally relevant conduct, such as the tendency to violate prohibitions while without surveillance..., adolescent drug use..., self-control in the face of temptation..., or empathy" (Kochanska, Murray, & Coy, 1997, p. 264). Etzioni (1993) in his Communitarian approach considers self-discipline, along with empathy, to be one of the two building blocks of character. Rest (1985) includes the ability to carry out one’s moral vision to be one of four central ingredients in his cognitive-developmental model of moral maturity. Blasi and Milton (1991) parallel Rest in their focus on "moral will."

Self-control is first recognized to develop in the deliberate motor schemes of infants, perhaps most notably in the achievement of toilet training. However, self-control as a personality or character trait has been studied most intensively in the pre-school years. As young children develop the ability to use mental mediators, such as mental imagery (Mischel, 1981) and private speech (Luria, 1961), they develop the capacity to resist temptation, suppress impulses, and delay gratification. The most marked gains in such cognitively-mediated self-control abilities seem to develop between approximately five and seven years of age (Berkowitz, 1982).
Relation to parenting. The development of self-control is a gradual and complex process in which maturation and development of the child’s capacities plays a great role. Parents also, however, affect the development of self-control capacities, through a process that is consistent with "scaffolding" (Bruner, 1975) or guided self-regulation (Sroufe, 1995). Both of these concepts refer to a process in which parents provide support for unmastered skills via guidance, feedback, etc. Along these lines, Schaffer (1996) points out that parents can help at each phase of self-control development by (1) creating the external controls necessary before self-regulation is mastered and (2) engineering the situations so that they are more readily controllable, given the nascent nature of infant and toddler self-control strategies. For example, during the first months of life "the problem of regulation involves safeguarding the infant from stimulation that is too strong and which will therefore have too great an arousing effect. Caregivers have a vital role in protecting and soothing" (p. 248). Maccoby (1980) concurs and lists five ways parents can assist in the complex transition from impulsivity to self-regulation: (1) protect children from the effects of their impulsivity by situational management; (2) provide the ego-controls that children have not yet developed (e.g., soothing children during emotional outbursts); (3) teaching coping skills, like how to shift one’s own attention in delay of gratification situations; (4) helping children to anticipate the consequences of their actions; (5) modeling self-control.

Block (1971) reports that impulsive adolescents come from homes in which there was a high level of conflict, especially about child-rearing values, parents neglected to teach their children, and parents demanded very little of their children both in terms of household chores and school work.

**Compliance with external standards**

Description. Part of the nature of a moral being is adherence to selected external controls; an effective moral agent must eventually learn to internalize external standards for behavior. For example, children must learn that sharing valued objects in work and play is societally encouraged (Eisenberg & Mussen, 1989). The roots of such compliance have been identified as beginning to develop in infancy (Lamb, 1993). Beginning at around 18-19 months of age, toddlers begin to want to comply with mothers’ demands. They begin to spontaneously make reparations for their transgressions; e.g., tattling on themselves or soliciting praise when complying.

Relation to parenting. Parental behavior is highly influential in the development of early compliance. Mother’s flexibility (Westerman, 1990), reliance on negotiation rather than direct control (Kuczynski, et al., 1987), and positive affect when parenting (Kochanska, et al., 1989) have all been found to relate to higher levels of compliance in toddlers. Furthermore, such behaviors have been linked to the development of conscience six years later (Kochanska, 1991).

**Self-esteem**

Description. Platitudes and "truisms" about self-esteem abound: "You have to like yourself before others can like you," "Be your own best friend," etc. Indeed, research supports the gist of these contentions. Self-esteem in childhood has been related to mental health later in life, while a lack of self-esteem has been related to social dysfunctions and mental pathologies such as
depression and anxiety (Harter, 1993). The relation is not always straightforward as overly high self-esteem (an inflated sense of self) has also been found to be dysfunctional in peer relations (Hartup, 1983), but the bulk of the evidence suggests that a positive sense of self is psychologically healthy.

Relation to parenting. Coopersmith (1967) reported that three central dimensions of parenting promote children’s self-esteem: acceptance of their children, setting clearly defined limits for the child’s behavior, allowing individual expression and respecting the child’s unique personality and point of view. These dimensions correspond closely with what Baumrind (1971) has identified as the "Authoritative" parenting, a style of parenting that will be discussed later in this paper.

Parental Influences on Moral Development

Empathy

Description. Empathy has been identified by Kagan (1984) as one of the "core moral emotions." Damon (1988) considers it "one of morality’s primary emotional supports" (p. 14) and argues that "because morality is fundamentally concerned with one’s obligations to others, it cannot be developed solely through introspection and recognition of one’s inner feelings... Children must learn to become attuned not only to their own emotional reactions but also to those of others. Children must learn to be receptive to the input from others’ emotional expressions, modifying their own feelings when appropriate" (p. 128). Empathy has been defined in different ways, but the most widely recognized position on empathy comes from the work of Martin Hoffman (1991). Hoffman considers empathy to be an affective response to another’s distress that is "more appropriate to someone else’s situation than to one’s own" (p. 275). He describes it as a bystander phenomenon, such that empathy is aroused in one who is observing (or imagining) another’s plight from the outside. In a fairly complex model, Hoffman describes five types of empathy ranging from automatic and involuntary reactions of infants to the sound of other infants’ cries to mature, reflective reactions to the meaning of others’ unfortunate circumstances. Empathic responding has been positively related to altruism (Eisenberg & Miller, 1987) and negatively related to antisocial behavior (Gibbs, 1987).

Relation to parenting. Where does empathy come from? Clearly, Hoffman (1991) thinks it is born in the infant’s innate tendency to match the noxious affect of others, what he calls "global empathy." This is fed and nurtured by the cognitive development of the child, most notably the child’s developing ability to take others’ perspectives (Damon, 1988). But Hoffman (1983) also very strongly emphasizes the role of parental induction, and conversely the avoidance of power assertion and love withdrawal techniques, in the development of empathic responding.

Conscience

Description. Conscience has long been understood as a combination of (1) internalized standards and (2) behavioral and affective results of adherence to or violation of those standards (Gilligan, 1976). Much of the literature on conscience derives from a psychoanalytic perspective (the Super
Ego), but researchers from other perspectives have also found it useful to study aspects of conscience.

The most impressive work on the development of conscience, however, comes from the work of Kochanska and her colleagues (e.g., Kochanska, et al., 1994; Kochanska, Murray, & Coy, 1997). These researchers have described conscience as having two major aspects. The first is affective discomfort which encompasses the emotional results of transgression; e.g., guilt, apology, empathy for the victim, etc. The second is active moral regulation or vigilance, which encompasses the classical internalization of standards along with confession, reparation, and monitoring of others’ wrongdoing.

Kochanska (1991) has demonstrated a link between early temperament, specifically high inhibitory control and low impulsivity, and later conscience development. This substantiates the assertion that self-control is a foundational element in the development of morality.

Relation to parenting. Hoffman and Saltzstein (1967) reported that parental use of induction led to increased internalization of moral standards and guilt in children. Allinsmith and Greening (1955) similarly reported that avoidance of power assertion by parents increases guilt more than does reliance on power assertion. Kochanska and colleagues have also investigated the parenting correlates and predictors of the development of conscience in young children. Kochanska and Aksan (1995) reported that mutual positive affectivity between mother and child and maternal avoidance of power assertion are related to the internalization of standards in pre-school children. In a different report, Kochanska (1997) extended the notion of mutuality of affect to encompass a broader reciprocity between mother and child, and reported that conscience development is related to a sustained pattern of mother-child reciprocity including mutual affectivity, low power assertion, and maternal empathy.

**Altruism**

Description. Perhaps one of the most widely recognized and studied aspects of moral psychology is altruism, or the giving to another at cost to oneself. Altruism has been studied in anecdotes of toddlers offering solace to one another, in laboratory manipulations with children, adolescents, and adults, and in real-life acts of common altruism (e.g., charitable donations) and heroism (e.g., Christian saviors of Jews during World War II in Europe). Altruism may be construed as a behavior (or set of behaviors) or as a personality trait (character). The latter tends to represent an enduring tendency to engage in the former (Berkowitz, 1997).

An extensive body of research has illuminated the characteristics and determinants of altruism. Eisenberg and Mussen (1989), in a review of the literature, conclude that altruistic children tend to be "active, sociable, competent, assertive, advanced in role taking and moral judgment, and sympathetic" (p. 151). In examining altruism as a behavior rather than a trait, they also point out that there are diverse situational factors that determine whether a child will act altruistically; factors such as the cost to the actor, the nature of the victim, the mood of the actor, etc.

We can also find a link to the foundational elements discussed above. In their classic study of rescuers of Jews in Nazi Europe, entitled The Altruistic Personality, Samuel and Pearl Oliner
(1988) argued that the rescuers were motivated by strong values of care and inclusiveness which were in large part transmitted to them by their parents through the formation of an early attachment bond, a bond which "shapes personality and becomes the prototype for all subsequent relationships" (p. 171). Furthermore, Eisenberg and Mussen (1989) contend that altruism is linked to moral reasoning, an aspect of morality that shall be discussed shortly.

Relation to parenting. Parenting is an important determinant of altruism. Eisenberg and Mussen (1989) conclude that parents of altruistic children are nurturant and supportive, model altruism, highlight the effects of actions on others, use induction, establish clear expectations for mature behavior, and create opportunities for their children to manifest responsibility for others. Research also shows that parents of altruistic children tend to moralize, i.e., lecture about right and wrong, using strong affect (Zahn-Waxler, Radke-Yarrow, & King, 1979) and use an authoritative parenting style (Baumrind, 1971). As noted above, Oliner and Oliner (1988) found that WWII rescuers were motivated by "values learned from their parents which prompted and sustained their involvement" (p. 143).

Moral Reasoning

Description. While there are a number of models of the development of moral reasoning (Damon, 1977; Eisenberg, 1986; Haan, et al., 1985; Kohlberg, 1976; Piaget, 1965), most research on the relation of parenting to moral reasoning development has relied predominantly on Kohlberg’s model. This section will therefore describe the Kohlberg model and summarize findings related to parenting and Kohlbergian moral reasoning development, but will include findings about the relation of parenting to some of the other models of moral reasoning development.

Kohlberg (1976) has identified an invariant sequence of six stages of reasoning about morality; i.e., a developmental progression of increasingly more effective ways of thinking about and resolving moral problems and issues. Only the first three stages apply to the developmental levels under investigation in this discussion. The first stage represents a very dogmatic, physicalistic, and egocentric perspective on right and wrong. Acts are right if (1) they are sanctioned by authorities or other powerful individuals or (2) they do not result in undesirable concrete consequences to the actor (consequences that are typically understood as inevitable, even magical or automatic). At the second stage, right and wrong are still calculated by concrete consequences, but the child has come to see that others may have different perspectives than the self. This opens the door for negotiation. Right is still what maximizes desirable and minimizes undesirable consequences, but authorities no longer have absolute control and consequences are no longer perceived as inevitable. Hence a "I’ll scratch your back if you scratch mine" morality arises; i.e., a morality of exchange. At the third stage, right and wrong are no longer limited to the concrete consequences of actions, nor to consequences to a specific individual (usually the self). Now morality is based less upon concrete and more upon psychological and covert consequences. Furthermore the consequences are to social units, most notably to dyads. Hence the bottom line for calculating right and wrong is relationships with others; e.g., what significant others think is right, what will happen to the relationship, what will happen to one’s reputation, etc. Research suggests that Stage 1 is an early childhood stage, Stage 2 is a middle childhood
stage, and Stage 3 is an adolescent stage, although there are quite varied rates of development through these stages (Colby & Kohlberg, 1987).

Relation to parenting. Ironically, the effects of parenting on the development of Kohlbergian moral reasoning were largely ignored for decades. This was due in part to the Piagetian (1965) thesis that parents tended to be authoritarian and therefore suppress moral reasoning development, whereas peers were more egalitarian and therefore fostered moral reasoning development. Fortunately, researchers eventually questioned or ignored this position (Holstein, 1976; Lickona, 1983; Parikh, 1980; Speicher, 1994; Speicher-Dubin, 1982; Youniss, 1980) whereas other researchers had studied this with outcome variables other than Kohlberg stage (e.g., Hoffman & Saltzstein, 1967). Hence a substantial body of literature exists (see Speicher, 1994, for a review). Most research has focused on three principal parent variables: parental stage of moral reasoning, parental discipline style, family communication patterns.

Parent stage of reasoning has been systematically related to child stage of reasoning (e.g., Holstein, 1976; Parikh, 1980; Walker & Taylor, 1991), but this effect is difficult to interpret. First, moral reasoning has a strong cognitive component and this correlation may be reducible to intelligence. Second, there is a strong relation between parental stage of moral reasoning and parenting style of communication and discipline; hence the variables are confounded. Third, it is clear that parents and other adults adjust the stage of their rhetoric to the level of assumed understanding of their children (Olejnik, 1980; Walker & Taylor, 1991). Fourth, the results of these studies are quite variable; e.g., Walker and Taylor find the effect only for real dilemmas and not for hypothetical dilemmas and Speicher (1994) finds both gender and age variability. When these variables are considered together, however, it appears that the relation between parents’ and children’s stage is not causal (Parikh, 1980); rather, the other two parenting variables seem to account for most of the development of moral reasoning in children.

Baumrind (1971) and others (e.g., Hoffman & Saltzstein, 1976; Schaefer, 1959) have identified discrete patterns of parental behavior that are referred to as Parenting Styles. Baumrind describes three predominant parenting styles. Authoritarian parents are highly controlling and demanding but affectively cold and hostile and generally uncommunicative. Permissive parents tend to be loving and communicative but wield little control and set few demands for mature behavior. More recently (Baumrind, 1980), Permissive parenting has been differentiated into the more classically warm laissez faire style and the more distant neglectful style; however, the research being reviewed here pre-dates this differentiation. Authoritative parents are loving, controlling, communicative, and set high maturity demands for their children. It is those latter parents whom researchers have found to produce the most positive child characteristics, including higher moral functioning.

Only a few studies have directly examined the relation of parenting style to moral reasoning development; however, numerous studies have examined component variables that comprise distinct parenting styles. For example, Clarity of Communication, a predominant characteristic of Authoritative parenting, includes parental behavior that has been identified most prevalently as Induction; i.e., explaining one’s parenting behavior to the child especially with a focus on consequences of one’s actions for others. Induction, under a variety of names, has been significantly positively related to moral reasoning development, of both the Piagetian and
Kohlbergian varieties (Hoffman & Saltzstein, 1967; Holstein, 1976; Parikh, 1980; Shoffeit, 1971; Speicher-Dubin, 1982). Three studies have directly examined the relation of parenting style to moral reasoning development. Pratt and Diessner (1994) reported that adolescent moral reasoning is predicted positively by Authoritative parenting style and negatively by Permissive parenting style. Boyes and Allen (1993) reported similar results while employing different methods of assessing both moral reasoning and parenting style. They found the highest levels of moral reasoning in college students with Authoritative parents and lowest with Authoritarian parents. Berkowitz, et al. (1995) however found no relation between parenting style and adolescent moral reasoning; however, their sample was a clinical sample. Finally, research has demonstrated that parents at higher stages of moral reasoning tend to use more Induction and other Authoritative parenting elements (Parikh, 1980). Hence, it appears that a pattern of Authoritative parenting, especially with its focus on open supportive communication, is nurturing of children’s moral reasoning development.

The communicative element of parenting style has already been addressed; however, there is a second way in which family communication has been studied in the development of children’s moral reasoning capacities. Numerous investigators have examined the nature of family discussions of moral issues (both real and hypothetical) and their relation to children’s moral reasoning development. There are two types of such studies: those that use family discussions as interventions intended to stimulate children’s moral reasoning development and those that simply analyze family discussions and look for relations to children’s levels of moral reasoning.

Two intervention studies have been identified. Grimes (reviewed in Higgins, 1980) found significantly greater moral reasoning development when mothers were included in moral discussion with their children than in a traditional classroom moral discussion intervention. Stanley (1980) noted that the only successful parent training group was composed of parents with their adolescent children. Furthermore, only those parents showed a parallel decrease in authoritarian decision-making in family discussions.

Three studies have examined the relation of transactive discussion (Berkowitz & Gibbs, 1983) in family discussions to children’s moral reasoning stage. Transactive discussion is a form of discussion originally identified in adolescent peer moral dilemma discussions. It is defined as speech acts in which the speaker re-presents (e.g., paraphrases) or actively operates on (e.g., analyzes, extends, logically critiques) the reasoning of a co-discussant. Powers (1982) reported that transaction was weakly related to adolescent moral reasoning. The greatest moral development was found in families that are supportive of their children in the discussions and share perspectives. Kruger, in a series of studies, reported that transaction in both peer and mother-daughter moral discussions is positively related to moral reasoning development (Kruger, 1992; Kruger & Tomasello, 1986). Walker and Taylor (1991) found that children’s moral reasoning development was best predicted by three features of parent-child moral discussions: "Socratic" questioning, affective support, presentations of moral reasoning above the child’s stage. The authors also note that it was the discussion of real family dilemmas and discussions with "re-presentational" transaction that were the richest developmentally.

It appears that parents and children naturally tend to regulate the way they communicate when discussing moral topics with each other. Children who are most advanced in moral reasoning
tend to have parents who, either naturally or through training, affectively support their children in the discussions, ask challenging questions and elicit children’s reasoning, present advanced challenging moral perspectives, and openly reflect on and re-present their children’s reasoning.

**Educating Parents as Natural Moral Educators**

As demonstrated in the review above, research investigating parental influences on children’s moral development consistently identifies a set of processes that relate reliably to moral thought, feeling, and action in children. Within this set can be identified a short list of five parenting processes that relate to two or more of the seven components of moral psychology featured in the preceding discussion. Parents’ use of induction, expression of nurturance and support, use of demandiness and limit setting, modeling of socio-moral behavior, and implementation of a democratic open family discussion and conflict resolution style are each positively related to two or more of the fundamental “building blocks” of morality described above (see Table One). Thus, by focusing on a relatively small number of parenting dimensions, parents can play a significant role in shaping the moral development of their children. Below we discuss each of these dimensions and provide practical recommendations for helping parents become more effective moral educators (for a more extensive and less technical treatment of this issue, see Lickona, 1983).

**Induction**

Perhaps the single most powerful parental influence on children’s moral development is induction. Explaining parental behavior and its implications for the child and others is linked to greater empathy, more highly developed conscience, higher levels of moral reasoning, and altruism. Why should this rather simple process be so potent for shaping moral development? Perhaps because it explicitly links the self and other, simultaneously stimulating children’s understanding of the reasons for choosing one behavior over another and the impact of that behavior on another person. Thus, it directly addresses and connects the cognitive (moral reasoning) and affective (empathy) aspects of moral functioning, and helps children to internalize standards for moral behavior. As Lickona (1983) points out, children "need to see us lead good lives, but they also need to know why we do it. For our example to have maximum impact, they need to know the values and beliefs that lie behind it... We teach, directly, by telling. We need to practice what we preach, but we also need to preach what we practice" (p. 22). It also spurs children’s perspective-taking abilities by focusing on how others might feel or think in a given situation.

At the same time, induction models a rational, respectful approach to interpersonal relations. When parents take the time to explain their behavior to their children and show awareness of how that behavior affects the child, they implicitly acknowledge that the child’s feelings and viewpoint are important and worthy of attention. Indeed, such respect for children is at the heart of both Damon’s (1988) and Lickona’s (1983) models of raising good children. Damon offers the principle of respectful engagement as the underlying model for moral parenting: "respond to the child’s own experience without intruding upon this experience, while at the same time presenting the child with consistent expectations, guidelines, and mature insights clearly explained" (p. 124). Lickona argues that respect is the core of morality and parents need to
nurture mutual respect in their relationships with their children: "one of the most basic ways to develop kids’ respect for themselves and others is to respect them, and require respect in return...Treating kids with respect means treating them like persons...Treating kids like persons means trying to be fair with them" (pp. 18-19). Finally, the discussion of behaviors that parents consider more or less acceptable helps children understand and internalize particular standards for behavior (Schulman & Mekler, 1985).

There are many opportunities to employ induction. One of the most obvious is in the context of discipline. When children disobey, parents have the opportunity to teach their children about what is right and wrong, and more importantly, why certain behaviors are preferable to others. Taking the time to go through this process will further the child’s understanding of moral principles and consequently reduce the need for such interventions in the future. Of course, at times short-term goals such as stopping a particular behavior (e.g., hitting another child) take precedence over such long-term goals and make other kinds of discipline necessary (e.g., time-out). Nonetheless, talking through what happened with the child at a later time will help them better understand the moral implications of their behavior.

Induction need not take place only when discipline is required. Discussing the day’s events also can involve a focus on the "whys" of behavior and their consequences for other people. Talking explicitly about why the child, parent, or other some other person did something and how it affected other people can flow naturally out of everyday conversations and again make salient the rational and emotional aspects of behavior.

During dialogues generated by parents’ use of induction, parents also can help stimulate children’s moral development by the use of Socratic questioning within an emotional supportive context (Walker & Taylor, 1991). For example, parents can ask children why they think that their behavior (say, refusing to share a toy) led another child to cry, helping children come to the answer themselves. How parents can do this depends on the child’s level of development; parents need to be cognizant of what children can understand and adjust their language accordingly. This is what Lickona (1983, p.8) refers to as "the moral development approach to raising good children." For example, telling toddlers not to hit another child because it hurts the other child may be sufficient for communicating the message that one’s behavior affects others, and is an improvement over simply telling them that such behavior is wrong. Preschoolers with more advanced perspective-taking skills can make the connection between not liking to get hurt themselves and their behavior toward other people. As children get older, engaging them in more sophisticated discussions about why some behaviors are preferable to others becomes feasible.

**Nurturing and support.**

Another element of parenting related to several core components of morality is Authoritative Parenting (Baumrind, 1980). "Maladaptive moral-emotional patterns are prevented in the authoritative type of parenting advocated by Baumrind; for as Baumrind has shown, authoritative child rearing fosters social sensitivity, self-awareness, and respect for rules and authority" (Damon, 1988, p. 122). This style of parenting has been defined by the intersection of two parental tendencies: responsiveness and demandingness. We will deal with them separately. Responsiveness is understood as the provision of nurturance and support. Establishing a warm,
mutually positive basis for interaction promotes the development of conscience and moral reasoning in children. Moreover, it is linked to secure attachment and self-esteem, two of Berkowitz’s (1997) meta-moral characteristics, and thus has effects that go beyond the province of moral development.

One effect of warm and responsive parenting is communication of the idea that the child is valuable and worthy of such treatment. "We raise children by giving them love. The kind of love that helps them develop a positive self-concept. A sense of their worth." (Lickona, 1983, pp. 28-29). A broader message is that people in general are deserving of respectful treatment, and therefore it is wrong to do something that is hurtful to another. Violation of this standard leads to guilt and shame, affects linked closely to conscience. It also provides a basis for moral reasoning: if people are worthy of humane treatment, what course of action is best in a given situation?

Even more than with induction, opportunities to express nurturance abound in parent-child relationships; in fact, the level of warmth and support is a pervasive quality of these relationships. One implication of this is that many interactions not related to the domain of moral functioning will affect children’s development in this area. However, the expression of support during interactions around moral issues may be especially important. For example, parents trying to challenge children to think through the moral consequences of some behavior will be more effective if they show support for and interest in the child’s point of view and exhibit empathy for the child’s feelings. In addition to providing a supportive platform for children to confront the moral implications of their (or others’) behavior, parents who take this approach also model concern for others, and so there may be indirect benefits as well. As noted above, parent-child discussions of moral issues seem to be most developmentally nurturing when done in a respectful and emotionally supportive way (Powers, 1982; Walker & Taylor, 1991). What is most interesting about these data is that this pattern is quite different than what one finds in examining the most developmentally productive peer moral discussions, which tend to be highly conflictual and combative in nature (Berkowitz & Gibbs, 1983).

**Demandingness**

As noted, the second component of Authoritative parenting is demandingness. Demandingness is more than simply requiring certain behaviors from children. Effective demandingness requires three major ingredients. First, parents need to set high but realistic goals for their children. This entails understanding what the child can and cannot reasonably be expected to do. Children whose parents have low expectations for them, develop low expectations for themselves. Children whose parents set unreasonable high expectations for them, become frustrated, angry, and develop a sense of self as a failure. Clearly also, parents need to communicate these goals to their children. One of the more common breakdown in all human relations is the tendency to hold others accountable for failing to meet expectations of which we have never informed them.

Second, parents need to provide the support necessary to help children attain these goals. Parental involvement in supporting and monitoring school work is one example. The technique of scaffolding described earlier offers a detailed description of how to provide such support in a way that nurtures development rather than becoming a surrogate for it.
Third, parents need to monitor whether or not children meet their expectations. Children will quickly recognize the impotence of demands that are not monitored and therefore are unrelated to consequences. Such demands will have little impact on the development of morality in children.

If demandingness is appropriately and consistently implemented as part of Authoritative parenting, we have already demonstrated that children will develop greater self-control, altruism, and self-esteem.

**Modeling**

"One of the surest ways to help our children turn their moral reasoning into positive moral behavior is to teach by example. Teaching kids respect by respecting them is certainly one way to teach by example... But teaching by example goes beyond how we treat our children. It has to do with how we treat and talk about others outside the family -- relatives, friends, strangers. It has to do with how we lead our lives" (Lickona, 1983, p. 20). We have already discussed how parents’ behavior during interactions with their children regarding moral issues serves as a model for them; parents who express empathy or discuss moral reasoning also are modeling these qualities.

There also are more direct ways that modeling can influence children’s moral development. Children closely observe their parents’ interactions with each other, with family members, and with people more generally, and from those observations learn a great deal about how to treat others. As parents can model respect and compassion toward others, so may they model behavior that is harmful or abusive. For example, parents who resolve disagreements by belittling, coercing, or physically dominating their spouse may teach children that aggression is an appropriate response when their interests conflict with another’s. Indeed, families marked by angry, poorly resolved interparental conflict tend to have children who are more aggressive (Grych & Fincham, 1990). Grych and Fincham (1990, 1993) have argued that children actively attempt to make sense of the causes and consequences of parental behavior during conflictual interactions, and that these appraisals can have long term effects on their functioning. Although children may not imitate the specific behaviors they observe, their beliefs and attitudes about how to treat other people may well be shaped by such family experiences. The fact that these "lessons" are unintended makes them no less powerful.

Parents also act as models for moral behavior when they relate events in their lives to their children. Damon (1988, p. 124) offers as the first of his four specific recommendations for parenting moral children that "parents should share openly with children moral reactions to events in their own adult lives. Sharing emotional reactions means demonstrating them when appropriate, describing them clearly, and answering children’s questions about them candidly." Similarly, prosocial behaviors, which could involve everything from sharing with their children to discussing contributions to charities, teaches children that they should treat others with respect.
Democratic Family Decision-making and Discussion

It has often been argued that "you can’t legislate morality." This is not necessarily true. It depends on the nature of your legislature. You can’t legislate morality by fiat. But you can if your legislature is truly democratic; that is, if all stake-holders are given equal power to enter into the public arena and participate in decision-making. This leads to morality in two ways. First, decisions and rules are more likely to be just. Second, the participation in the process is more likely to stimulate the more development of the participants. This has been demonstrated empirically in Kohlberg’s Just Community school approach (Power et al., 1989). It is equally true, however, in the family.

We have seen in our analysis of the components of moral development, that various aspects of such a democratic process produce compliance, moral reasoning development, conscience, higher self-esteem, and altruism in children. Such families respect children’s voices as meaningful contributions to family discussions, decisions, and conflict resolution processes. They let children know that their voices are valued and provide affective support for their participation in family discussions.

Lickona (1983) highlights this component of raising moral children with his "fairness approach." "This approach requires parents to respect kids by considering their point of view. It teaches kids to reason morally – to think of others’ needs as well as their own... (It) also gives kids necessary practice in the skills of conflict resolution...These important life skills will help kids translate their moral reasoning into fair behavior in their human relationships" (p. 271). Lickona describes a 10-step process entailing behaviors for (1) achieving mutual understanding of the nature of and perspectives on the problem, (2) solving the problem, and (3) following through to monitor the success and implementation of the solution.

Putting it All Together

Thus far we have tried to identify the components of a moral child and the parenting behaviors that foster or impede their development. We also have tried to explicate in more detail how parents can implement five core parenting strategies that have been empirically related to the growth of our eight aspects of child morality. Many parents naturally engage in these strategies, but others may require education or structured training to provide the kind of parenting that supports moral development.

Parent training programs have a well-established place in the treatment of noncompliance, aggression, and other externalizing problems in children. These behaviorally-based psycho-educational programs are designed to teach parents principles of effective behavior management, including but not limited to the proper use of reinforcement and punishment and guidelines for clear communication. Outcome research on the efficacy of parent training programs for reducing externalizing problems in children consistently supports their utility (Moreland, et al., 1982; Weisz, et al., 1995), suggesting that this model also may work well for teaching parents how to foster moral and prosocial behavior in their children.
Parent training programs also have been designed for non-clinical populations as a way of enhancing parents’ interactions with their children, and focus more on improving parent-child relationships than on eliminating problem behaviors. These programs provide a preexisting platform for teaching the five parenting strategies described; each above is amenable to presenting in an individual, small group, or workshop format. Although the specific content taught would need to be adjusted to fit the developmental level of the child, the principles are applicable across ages. For example, a 4 year-old may be included in a democratic approach to family decision-making by inviting their opinions and giving them choices (within limits acceptable to parents) in some situations (such as whether to go to the zoo or the park). A 14 year-old, in contrast, may be involved in making decisions about an appropriate curfew or reasonable consequences for failing to complete homework.

Unfortunately, little attention has been paid to teaching parents how to foster specifically moral characteristics in children. As noted above, two studies have taught parents how to participate in discussions of moral issues with their children (Grimes, cited in Higgins, 1980; Stanley, 1980). Although both were successful in accelerating moral reasoning development, only Stanley documented a change in parenting style outside of the artificial school-based discussion sessions. Nevertheless, these studies do suggest that interventions with parents can change parental behavior related to moral development and can positively influence children’s moral development. More attention has been paid to teaching parents how to prevent child risk behaviors such as substance use (Kumpfer & Alvarado, 1995). It is worth noting that one popular model, the "resiliency model" (Richardson, et al., 1990), includes empathy and self-esteem as two of seven basic resiliency characteristics in youth.

However, even though parent training programs generally are effective, not all children and parents benefit from these interventions. Factors such as marital discord, parental psychopathology (especially depression), and adverse socioeconomic circumstances can make it difficult for parents to understand and utilize the skills taught in these programs (Sanders, 1992). Some parent training programs attend to these issues, teaching skills for resolving marital discord (Dadds, Schwartz, & Sanders, 1987; Greist, et al., 1983) and reducing depression (Greist, et al., 1983), but some parents will need more intensive interventions, such as individual or couples therapy, before they can provide the kind of parenting that promotes moral development. Moreover, parents’ behavior, both with their partner and with their child, may go beyond failing to stimulate moral growth and actually undermine their children’s moral development. Marital conflict, interspousal and parent-child abuse, and inconsistent discipline are related to aggressive and antisocial behavior in children (Hinshaw & Anderson, 1996), and consequently need to be directly addressed before there can be any reasonable expectation that children will exhibit more moral behavior. Thus, for some families, attention to promoting moral development begins with changing destructive behavior in the family.

Finally, cultural norms and values for appropriate parenting may be inconsistent with the goals and methods of standard parent training programs (Forehand & Kotchik, 1996). The majority of research on links between parenting and moral development has been conducted with White, middle class samples and may not apply to other ethnic or socioeconomic groups. What is viewed as desirable and appropriate behavior in children and parents is not invariant, and for parent education to be effective, educators and therapists need to be aware of and sensitive to the
cultural context of parenting (Forehand & Kotchik, 1996). Failure to do so could result in viewing parents from minority cultures as inadequate and teaching them methods that clash with their values.

References


