Chapter 12

Prosocial Behavior: Helping Others

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Focus Questions

1. Are people motivated to help for selfish or selfless reasons?
2. How do bystanders at an emergency short-circuit our tendency to help?
3. What types of people are most likely to receive help when they need it?
4. Why does receiving help sometimes increase people's stress and threaten their mental health?

Chapter Outline

Introduction

In Chapter 2, you learned how social psychological research is sometimes motivated by the researcher's desire to explain some real-life incident. One of the most powerful and memorable examples of a real-life event spurring social psychological research was the Kitty Genovese murder, which occurred on March 13, 1964, in the New York City borough of Queens. Although you may have previously read or heard about this infamous act of violence, almost all accounts in psychology textbooks have unknowingly misrepresented the facts in this case. Here is the story based on a reanalysis of archived material (Manning et al., 2007; Rasenberger, 2006).

(Courtesy of Queens, New York, Police Department, 1960, via Wikimedia)

On the night of March 31, 1964, Kitty Genovese was repeatedly stabbed outside her apartment building.

At 3:20 a.m., Kitty Genovese was returning home from work as a bar manager when a man attacked her with a hunting knife near her apartment building. Kitty screamed, "Oh, my God! He stabbed me. Please help me! Please help me!" After her cry rang out in the night, about 3–6 of her neighbors (not 38 onlookers, as is often reported) went to their windows to see what was going on. These first eyewitnesses certainly heard Kitty's voice, but they may not have understood her words. One alarmed woman looked out her window, saw Kitty and her assailant "standing close together, not fighting or anything," and decided this was not an emergency. This onlooker went back to bed. A second eyewitness saw the assailant bending over and beating Kitty, who was already on the ground. This onlooker did nothing to intervene. A third eyewitness hollered at the assailant from his seventh-story window, "Hey, get out of there! Let that girl alone!" Probably because of this shouted command, the assailant got into his car and drove away. By then, a large number of neighbors were looking out their apartment windows. They saw Kitty pick herself up off the ground, reach for her purse, look around, and begin walking unsteadily away. She was no longer screaming but seemed to be walking in a slow, "dreamlike" state. A couple of eyewitnesses later told police that Kitty's gait made them think, "she was either drunk, or had been beaten up."

Ten minutes passed in relative silence as Kitty staggered around a corner to a small hallway in a nearby building. She was now out of sight of almost all her neighbors. During that 10-minute time period, there is evidence that a few neighbors phoned the police but may have hung up before providing full details of the assault. Then witnesses saw the assailant return and begin casually walking down the sidewalk, looking side to side. One eyewitness ran from one window of her apartment to the next to keep the attacker in her sight. At the same time, another neighbor reached for the phone to call the police, but his wife told him, "Don't; 30 people have probably called by now." Within seconds, the killer found Kitty in the hallway where he sexually assaulted her and then stabbed her in the throat. Only one person saw part of that second attack. Instead of phoning the police, this man phoned a female neighbor, who immediately contacted the police and then rushed to Kitty's side. The police arrived on the scene within minutes, but Kitty died soon after.

It is now clear that most of the neighbors who were present during this tragic murder were not apathetic bystanders as has been so widely reported for so many years. Yet it is also clear that Kitty Genovese did not receive the timely help that may have saved her life that night. If you had heard Kitty Genovese's cries for help do you think you would have come to her rescue? If, instead, you had seen this victim walking unsteadily but did not see the first attack, do you think you would have understood what was happening? This murder and the events surrounding it—both real and misreported—were instrumental in prompting numerous studies on the social psychology of helping. In this chapter, we address and try to answer five basic questions about helping. First, why do we help? Second, who is most likely to help? Third, when do we help? Fourth, whom do we help? And fifth, are there hidden costs for those who receive help?

12.1 Why Do We Help?

> *"If you want happiness for an hour, take a nap. If you want happiness for a day, go fishing. If you want happiness for a year, inherit a fortune. If you want happiness for a lifetime, help somebody."*
>
> —Chinese Proverb

Before tackling these five helping questions, let's begin by defining our topic. **Prosocial behavior** is voluntary behavior that is carried out to benefit another person (Dovidio et al., 2006). This definition excludes beneficial actions that are not performed voluntarily or are not performed with the intention of helping another. Thus, if a store manager forces employees to donate part of their salaries to charity, their actions would not be considered prosocial because they really would have had no *choice* in rendering assistance. Likewise, if a terrified person fleeing from a charging bull accidentally pushes someone out of the path of the animal, this action also would not be prosocial because the pushing was unintentional and was not meant to benefit another. On the other hand, the actions of the female neighbor who called the police and then ran to Kitty Genovese's side perfectly fit our definition because she freely chose those actions and her intention was to benefit another. Volunteering your time at a community food pantry, donating money to a local charity, or mowing the lawn of a sick neighbor would also be examples of prosocial behavior. These behaviors each have unique characteristics, but they all involve intentional actions that benefit others.

> *"Nothing makes you happier than when you reach out in mercy to someone who is badly hurt."*
>
> — Mother Teresa, born Agnes Gonxha Bojaxhiu, Albanian Catholic nun and humanitarian, 1910–1997

12.1a There Are Two Basic Forms of Helping.

Beyond the basic definition, philosophers and social scientists have described two forms of helpful behavior based on different motives. For example, 19th-century philosopher Auguste Comte (1875) contended that **egoistic helping**—in which the person wants something in return—is based on *egoism*, because the ultimate goal of the helper is to increase his or her own welfare. In contrast, Comte stated that **altruistic helping**, in which the person expects nothing in return, is based on *altruism*, because the ultimate goal is to increase another's welfare.

As we discuss later in the chapter, social scientists disagree on whether any useful distinctions can be made between egoistic and altruistic helping, and some argue that all helping is ultimately egoistic in nature. As already noted, many social scientists believe that people sometimes help solely to benefit another, while at other times they help in order to achieve some personal gain. In addition, it has also been suggested that because of inborn characteristics, people may be predisposed to prosocial behavior. Before reading further, spend a few minutes answering the items in *Self/Social Connection Exercise 12–1*.

prosocial behavior

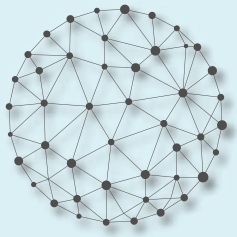
Voluntary behavior that is carried out to benefit another person

egoistic helping

A form of helping in which the ultimate goal of the helper is to increase his or her own welfare

altruistic helping

A form of helping in which the ultimate goal of the helper is to increase another's welfare without expecting anything in return



Self/Social Connection Exercise 12–1

Is Your Helping Orientation Altruistic, Egoistic, or Unhelpful?

Helping Orientation Questionnaire

Directions

While reading these descriptions of hypothetical situations, imagine yourself in each of them and pick the action that best describes what you would do:

1. You have come across a lost wallet with a large sum of money in it, as well as identification of the owner. You ___
   - A. return the wallet without letting the owner know who you are.
   - B. return the wallet in hopes of receiving a reward.
   - C. keep the wallet and the money.
   - D. leave the wallet where you found it.
2. A person in one of your classes is having trouble at home and with school work. You ___
   - A. help the person as much as you can.
   - B. tell the person not to bother you.
   - C. leave the person alone to work out his or her own problems.
   - D. agree to tutor the person for a reasonable fee.
3. When it comes to cooperation when you would rather not, you usually ___
   - A. cooperate if it is helpful to others.
   - B. cooperate if it is helpful to yourself.
   - C. refuse to get involved.
   - D. avoid situations where you might be asked to cooperate.
4. A neighbor calls you and asks for a ride to a store that is six blocks away. You ___
   - A. refuse, thinking you will never need a favor from him (or her).
   - B. explain that you are too busy at the moment.
   - C. immediately give the ride and wait while the neighbor shops.
   - D. consent if the neighbor is a good friend.
5. You are approached by someone asking for a contribution to a well-known charity. You ___
   - A. give if there is something received in return.
   - B. refuse to contribute.
   - C. give whatever amount you can.
   - D. pretend you are in a hurry.
6. You are in a waiting room with another person. If you heard a scream in the adjoining room and the other person failed to respond, you would ___
   - A. help the screaming person whether the other person helps or not.
   - B. help the screaming person only if the other person does too.
   - C. wait to see if the screaming continues.
   - D. leave the room.

7. When asked to volunteer for a task in which you will receive no pay, you
   A. avoid or put off answering.
   B. explain that you don't agree with the objectives to be accomplished and therefore couldn't volunteer.
   C. compromise and help if you will receive some recognition.
   D. volunteer without question.

Scoring

The information below shows which answers on the Helping Orientation Questionnaire indicate altruistic helping, egoistic helping, and unhelpful behavior. It also shows the percentage of people who gave each answer in a survey study. Do your responses indicate that your helping orientation is predominantly altruistic, egoistic, or unhelpful?

Item	Altruistic helping	Egoistic helping	Unhelpful behavior
1.	A (38 percent)	B (47 percent)	C,D (15 percent)
2.	A (86 percent)	D (4 percent)	B,C (10 percent)
3.	A (61 percent)	B (20 percent)	C,D (19 percent)
4.	C (33 percent)	D (56 percent)	A,B (11 percent)
5.	C (70 percent)	A (4 percent)	B,D (26 percent)
6.	A (50 percent)	B (10 percent)	C,D (40 percent)
7.	D (35 percent)	C (27 percent)	A,B (39 percent)

12.1b Helping Is Consistent with Evolutionary Theory.

As discussed in previous chapters, one principle of evolutionary theory is that any social behaviors that enhance reproductive success (the conception, birth, and survival of offspring) will continue to be passed on from one generation to the next. However, to reproduce, an animal must first survive. Often, an animal's survival depends on how well it can compete with other members of its own species for limited resources. This evolutionary fact would seem to dictate that animals should be selfish, looking out first and foremost for themselves. Yet what of the seemingly selfless act of helping?

Evolutionary psychologists have documented countless instances in which animals have put their own lives at risk to protect other members of their own species from danger (Fouts, 1997; Wilson, 1996). For example, a chimpanzee foraging for food with its troop will often emit a warning call to alert the others about a nearby predator. By calling out, this chimp is the one most likely to be caught by the predator. As this example illustrates, helping others can be downright deadly. When you are dead, your reproductive days are over. Thus, from an evolutionary perspective, how could helping be advantageous to reproduction?

Kin Selection

As previously outlined in the Chapter 11 discussion of aggression, evolutionary theorists contend that it is not individual survival that is important; rather, it is *gene* survival that promotes reproductive fitness (Archer, 1991). Because your blood relatives share many of your same genes, by promoting their survival you can also preserve your genes even if you don't survive the helpful act. This principle of **kin selection** states that you will exhibit preferences for helping blood relatives because this will increase the odds that your genes will be transmitted to subsequent generations (Madsen et al., 2007; Stewart-Williams, 2007).

Although the principle of kin selection explains why we are more likely to help those who are related to us by blood, it does not explain the countless incidents of people helping total strangers. Stranger helping is found not only in humans but in other species as well. For example, female chimpanzees, lions, mule deer, dolphins, and bluebirds have been observed protecting and taking care of nonrelated newborns deserted by or separated from their mothers (Goodall, 1986; Lingle et al., 2007). Given this fact, how can evolutionary theorists explain prosocial behavior that extends beyond one's family?

Reciprocal Helping

kin selection

A theory that people will exhibit preferences for helping blood relatives because this will increase the odds that their genes will be transmitted to subsequent generations

Robert Trivers (1971) has described a way in which helping strangers could have arisen through natural selection. This principle, which he called *reciprocal altruism*, involves mutual helping, usually separated in time. However, because "altruism" refers to motives and Trivers was merely referring to behavior, we will use the more accurate term **reciprocal helping** when referring to this mutual helping. According to this principle, people are likely to help strangers if it is understood that the recipient is expected to return the favor at some time in the future. In such a world of reciprocal helping, the cost of aiding another is more than offset by the later returned help (Hames & McCabe, 2007). For reciprocal helping to evolve, the benefit to the recipient must be high and the cost to the helper must be relatively low. In addition, the likelihood of their positions being reversed in the future must also be high, and there must be a way to identify "cheaters"—those who do not reciprocate (Brown & Moore, 2000).

("Silverback," by Patrick Cyusa, available under a CC 1.0 license via Wikimedia)

Social grooming among gorillas is an example of reciprocal helping. How does the evolutionary perspective explain such behavior?

A good example of reciprocal helping is *social grooming*. In many species, one individual cleans the other's fur or feathers; later, the "groomee" returns the favor (Schino et al., 2007). Grooming is a low-cost activity (only time is lost) that returns high benefits to the recipient (removing disease-carrying parasites). Trivers (1983) believes that reciprocal helping is most likely to evolve in a species when certain conditions exist. Three of these conditions are (1) *social group living*, so that individuals have ample opportunity to give and receive help; (2) *mutual dependence*, in which species survival depends on cooperation; and (3) the *lack of rigid dominance hierarchies*, so that reciprocal helping will enhance each animal's power. Reciprocity works best in small groups where one will regularly interact with those whom one helps or for whom one does favors. This is likely why reciprocity is stronger in rural villages than in large cities (Steblay, 1987).

reciprocal helping

An evolutionary principle stating that people expect that anyone helping another will have that favor returned at some future time; also known as reciprocal altruism

Considerable research supports both kin selection and reciprocal helping among humans and other animals. For example, when threatened by predators, squirrels are much more likely to warn genetically related squirrels and squirrels with which they live than unrelated squirrels or those from other areas (Sherman, 1985). Similarly, across a wide

variety of human cultures, relatives receive more help than nonrelatives, especially if the help involves considerable costs—such as being a kidney donor (Borgida et al., 1992). Reciprocal helping is also common in humans. Consistent with evolutionary-based mechanisms to prevent cheating, when people are unable to reciprocate, they tend to experience guilt and shame (Brase, 2017; Fehr & Gaechter, 2002). However, it is also true that people's perceptions of helpers' motives can weaken feelings of obligation to reciprocate. Helpers who appear to render assistance only after weighing their costs and benefits are perceived as less worthy of reciprocal helping than those who appear to help out of empathy for the victim (Ames et al., 2004).

"Carry out a random act of kindness, with no expectation of reward, safe in the knowledge that one day someone might do the same for you."

—Princess Diana, 1961–1997

Taken together, this research suggests that there may be mechanisms for the genetic transmission of helpful inclinations from generation to generation. Yet unlike many species where altruistic behavior is closely tied to genetic heritage, human genes influence behavior in a more indirect manner (Kruger, 2003). As we have stated throughout this text, although ancient evolutionary forces may have left us with *capacities* (such as the capacity to behave altruistically), current social and environmental forces encourage or discourage the actual development and use of those capacities.

12.1c Social Norms Define the Rules of Helping Others.

Although prosocial behavior may have a genetic basis, it makes sense that social mechanisms would develop to enforce these evolutionarily adaptive helping strategies (Nesse, 2000). Chapter 7 discussed how general rules of conduct, known as *social norms*, prescribe how people should generally behave. For example, research by Erik Nook and his coworkers (2016) found that people donate more money to a charity if they first observe others giving a generous donation rather than a small donation. These shared expectations are backed up by the proverbial carrot and stick: the threat of group punishment if the norms are not obeyed and the promise of rewards for conforming. Prosocial norms are expectations to behave selflessly in bestowing benefits on others. Three social norms that serve as guidelines for prosocial behavior deal with *reciprocity, responsibility,* and *justice*.

The first of these prosocial norms, the *norm of reciprocity*, is based on maintaining fairness in social relationships. As discussed in Chapters 7 (section 7.4a) and 10 (section 10.3a), this norm prescribes that people should be paid back for whatever they give us. Regarding prosocial behavior, this means helping those who help us (Brown & Moore, 2000; Gouldner, 1960). As mentioned in the previous section, this norm also explains the discomfort that people typically experience when they receive help but cannot give something back in return.

In comparison to the reciprocity norm, the other two prosocial norms dictate that people should help due to a greater awareness of what is right. For example, interviews with non-Jewish rescuers of Jews in Nazi-occupied territories during World War II found that the rescuers' willingness to risk their lives to save others was significantly shaped by a sense of social responsibility (Fagin-Jones & Midlarsky, 2007). According to the **norm of social responsibility**, we should help when others are in need and dependent on us. Acting on this norm, adults feel responsible for the health and safety of children, teachers have a sense of duty and obligation to their students, and police and firefighters believe they must help even at the risk of their own lives (Frey et al., 2010). This social responsibility norm requires help givers to render assistance regardless of the recipient's worthiness and without an expectation of being rewarded.

norm of social responsibility

A social norm stating that we should help when others are in need and are dependent on us

Unfortunately, even though most people endorse the social responsibility norm, they often do not act in accordance with it for the people in need throughout the world. One

reason for this nonadherence is that people also often believe in social justice (Darley, 2001). In contrast to the dependent-driven social responsibility norm, the **norm of social justice** stipulates that people should help only when they believe that others *deserve* assistance (Marjanovic et al., 2009). How does one become a "deserving" person? Melvin Lerner (1980, 1997) contends that, at least in North American society, people become entitled to the deserving label by either possessing socially desirable personality characteristics or by engaging in socially desirable behaviors. Thus, according to the social justice norm, if "good" people encounter unfortunate circumstances, they deserve our help and we have a duty to render assistance. The norm of social justice appears to be stronger in individualist cultures—where people are held more personally responsible for their actions—than in collectivist cultures (Mullen & Skitka, 2009).

12.1d Political Beliefs Shape Willingness to Help.

As previously discussed in Chapter 6 (section 6.2b), American democracy was founded on the sometimes conflicting belief systems of *individualism* (or self-reliance) and *egalitarianism* (equal treatment of groups and sympathy for the disadvantaged). Because conservatives emphasize individualism and liberals emphasize egalitarianism in their respective political ideologies, they often develop different positions regarding the moral obligations society should have toward the disadvantaged (Graham et al., 2009). In essence, willingness to help depends on how conservatives and liberals judge the morality of those in need. For example, in explaining poverty, conservatives tend to make dispositional attributions, blaming poverty on self-indulgence, laziness, or low intelligence; and they respond with anger and neglect. In contrast, liberals tend to make situational attributions, perceiving individuals with fewer economic resources as victims of social injustice; and they respond with empathy and help giving (Weiner et al., 2011).

norm of social justice

A social norm stating that we should help only when we believe that others deserve our assistance

Research also finds that conservatives are less willing to help victims of natural disasters than liberals. In a national sample of over 1,000 adults following floods in the Mississippi and Ohio River valleys, Linda Skitka (1999) found that people with a conservative political orientation consistently held flood victims more responsible for their plight and for resolving it than did those with a liberal orientation. Invoking the social justice norm, conservatives were even reluctant to provide public support for immediate humanitarian aid (clean water, food, shelter) to those who had not taken actions to protect themselves against flood risks. Although liberals were significantly more compassionate in their willingness to provide immediate help, like conservatives, they were unenthusiastic about using federal disaster assistance to financially bail out victims. Overall, these studies suggest that, when faced with those who need help in situations not immediately life-threatening, liberals are more likely to adhere to the norm of social responsibility, while conservatives adhere more closely to the norm of social justice.

(Adobe Stock)

Charitable organizations depend on people's generosity to receive the necessary funds to provide disadvantaged individuals with the help they need. Who is more likely to feel empathy for unfortunate others and donate a higher proportion of their income to the needy, the wealthy or the poor?

12.1e Individualists and Collectivists Differ in Their Helping Tendencies.

Research conducted in both individualist and collectivist cultures indicates that the norm of reciprocity is both universal (Gergen et al., 1975) and engaged in by people of all ages; even 3-year-old toddlers display reciprocity by being more willing to share with those who have shared with them (Warneken & Tomasello, 2013). Regarding the norm of social responsibility, a number of cross-cultural studies have found that adult members of collectivist cultures are more likely not only to help others of their ingroup than are members of individualist cultures but also to express greater enjoyment in meeting these social obligations than do individualists (Bontempo et al., 1990). Similar cross-cultural differences have also been obtained when studying children's prosocial actions. For example, children from the collectivist cultures of Kenya, Mexico, and the Philippines were found to be much more helpful than children from the United States (Whiting & Edwards, 1988). A likely reason for this difference is that collectivists are much more likely than individualists to stress ingroup cooperation and individual sacrifice. In such a context, people may feel greater moral obligation to help than if they grew up in a less group-oriented environment.

"If a free society cannot help the many who are poor, it cannot save the few who are rich."

—John F. Kennedy, 35th US president, 1917–1963

Joan Miller and her colleagues (1990) found support for this perspective in a study of the moral reasoning of South Asian Indians and Americans. Participants read a series of hypothetical situations in which the main character in the story failed to help someone experiencing either a life-threatening, moderately serious, or minor need. The needy person was either the main character's child, best friend, or a stranger. Results indicated that Indian respondents tended to perceive helping as the main character's social responsibility in all conditions, even when the need was minor. This means they believed that in all situations, giving help should be dictated by social norms and not by the personal norms of the potential helper. In comparison, American respondents believed that the norm of social responsibility should only be dictated in life-threatening cases or when parents were faced with moderately serious needs of their children. In all other instances, Americans believed that the main character's decision to help should be based on his or her own personal norms of help giving and should not be subject to social regulation.

"Help the weak ones that cry for help, help the prosecuted and the victim...they are the comrades that fight and fall."

—Nicola Sacco, Italian-born anarchist, 1891–1927

Overall, it appears that collectivist Indian culture holds to a broader and more stringent view of social responsibility than does individualist American culture (Miller, 1994; Miller et al., 2011). For life-threatening needs of both strangers and loved ones and for moderately serious needs of one's family members, both Indians and Americans are likely to subscribe to the social responsibility norm. However, for needs of friends and strangers that are not life-threatening, Americans are generally less likely than Indians to subscribe to the social responsibility norm.

"If you don't look out for others, who will look out for you?"

—Whoopi Goldberg, comedian, actress, and social activist for the homeless, born 1955

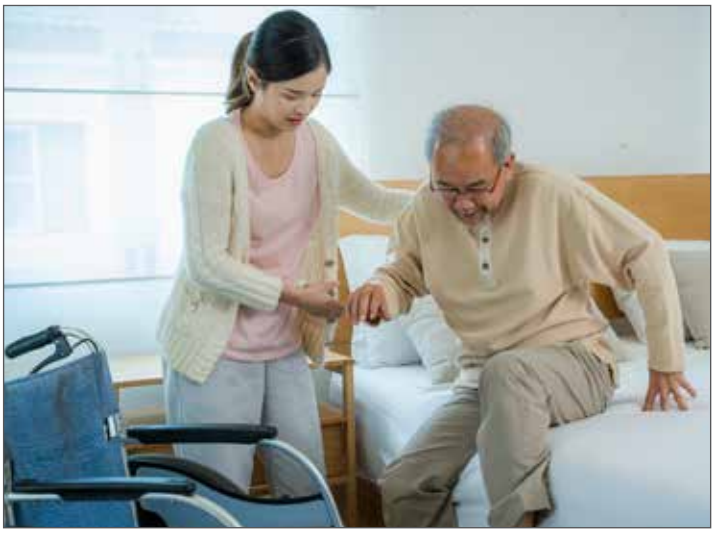
What about Americans with an ethnic heritage rooted in collectivism? Are they more helpful than Americans with more of an individualist heritage? Ronnie Janoff-Bulman and Hallie Leggatt (2002) tested this hypothesis by having Latine American and Anglo-American college students complete a questionnaire assessing the extent to which they felt obligated to help and wanted to help across a variety of social situations. Results mirrored the cross-cultural findings for people with collectivist versus individualist orientations. Although respondents from both ethnic groups reported a strong sense of obligation to help close friends and family members in need, the more collectivist Latines expressed a greater

desire to engage in these expected behaviors than the more individualist students. In addition, Latine students also felt a stronger sense of social obligation and desire to help more distant family members and friends than did Anglo-American students. The two ethnic groups did not differ in their motivation to help strangers. Additional research suggests that underlying Latine Americans' greater desire to help more distant family members and friends is a core aspect of traditional Latine American culture, namely *familism*, which refers to a set of norms related to family solidarity and emotional and economic interdependence within an extended family network (Armenta et al., 2011).

So does this mean that people with greater collectivist tendencies are more helpful than those with greater individualist tendencies? Not necessarily. The individualist-collectivist cultural differences discussed thus far apply only to ingroup helping. When ingroup members need help, people from collectivist cultures and collectivist-oriented Americans perceive help giving as both more obligatory ("I must help") and more personally desirable ("I want to help") than people from individualist cultures and Americans with a more individualist orientation. However, when those needing help are clearly members of an outgroup, research suggests that people with greater collectivist tendencies are often less helpful than people with greater individualist tendencies (Conway et al., 2001; Kemmelmeier et al., 2006). Thus, when it comes to providing help, "compassionate collectivism" does not necessarily extend to those who are seen as "them" rather than "us."

12.1f Gender and Personality Influence Helping Responses.

Do you think your willingness to help is influenced by your personality or gender? Meta-analytic reviews of helping behavior studies indicate small differences between men and women's helping, and these differences tend to reflect traditional gender role expectations (Eagly 2009; Xiao et al., 2021). For example, adolescent girls are more likely to engage in helping behavior in response to emotionally arousing situations or direct requests for assistance than boys (Xiao et al., 2021). In contrast, adolescent boys are more likely to engage in helping behaviors in public situations than adolescent girls. Adult men and women similarly engage in different prosocial actions; men generally help more than women, and they are more likely than women to help strangers (Eagly, 2009). These gender differences are greatest when there is an audience, when there is potential danger involved in helping, and when the person in need is female. Although these differences appear real, they apply most to nonroutine prosocial acts such as offering help to strangers in distress. When other forms of prosocial behavior—such as helping a friend or caring for children—are studied, women generally prove to be more helpful than men (Böckler et al., 2016). For example, women are more likely than men to provide social and emotional support to others (Shumaker & Hill, 1991), and they also are more willing to serve as caretakers for children and the elderly (Trudeau & Devlin, 1996). In addition, among children, there are few gender differences in helping, and the few differences that have been found indicate that girls tend to be a bit more helpful than boys (Eisenberg et al., 1996).



(Adobe Stock)

Women tend to take on the role of caretaker more than men.

Based on these findings, we can draw two conclusions. First, women and men appear to be helpful in different ways, such that men tend to engage in helping behaviors that require agentic or masculine traits while women's helping draws on communal or feminine traits. (Atkinson et al, 2021; Eagly, 2009). Second, these differences become stronger from childhood to adulthood and are most apparent when gender roles are salient. Consistent with the culturally valued male role of heroic rescuer, men are more likely than women to place themselves in danger when rendering assistance. In contrast, women are more likely than men to provide longer-term help involving empathy and caretaking, qualities consistent with the feminine gender role.

What sorts of cultural role models might influence the "helping habits" of boys and girls? How might greater gender role flexibility influence male and female helping tendencies?

In addition to exploring the role that gender socialization plays in prosocial behavior, researchers have also sought to identify personality traits associated with helping (Decety, 2011). Mera Habashi and her colleagues (2016) found that the personality trait of agreeableness is not only positively associated with prosocial behavior, it is also positively associated with two distinct emotional reactions—empathy and personal distress—that directly impact helping. **Empathy** is the feeling of compassion and tenderness you experience when viewing a victim's plight. This strong emotional reaction to the suffering of others is associated with parasympathetic activity, such as increased heart rate and, respiration (Stellar et al., 2015). The second emotional response is **personal distress**, which is an unpleasant state of arousal in which you become preoccupied with your own anxiety when seeing others in distress. As we will discuss in more detail later in the chapter, experiencing empathy is associated with helping in order to address the other person's needs, whereas experiencing personal distress is associated with helping others in order to reduce one's own distress.

Empathy appears to be a common experience. On average, people report having nine experiences where they feel empathy in a 12-hour day, and most of the empathy they feel is directed toward those with whom they have a close relationship rather than a stranger (Depow et al., 2021). There is some research indicating that parents who encourage the expression of emotion in their families tend to have children who experience empathic rather than distress reactions when witnessing others in need of help (Eisenberg et al., 1988). Additional longitudinal research indicates that as children emotionally mature, their feelings of empathy generally increase, while their feelings of personal distress generally decrease (Davis & Franzoi, 1991).

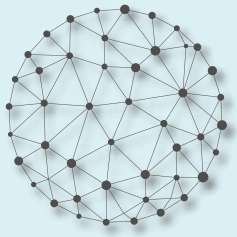
Despite these developmental trends, individual adults differ in the degree to which they habitually experience both empathy and personal distress. Studies of fraternal and identical twins indicate that individual differences in empathy and personal distress may be partly due to genetic factors (Davis et al., 1994; Zahn-Wexler et al., 1992). That is, high empathy and high personal distress people appear to have an inherited sensitivity to emotional experiences that causes them to react more strongly to the observed experiences of others. Before reading further, spend a few minutes answering the items in *Self/Social Connection Exercise 12–2*. Based on your responses, are you high or low on empathic concern and personal distress?

empathy

A feeling of compassion and tenderness upon viewing a victim's plight

personal distress

An unpleasant state of arousal in which people are preoccupied with their own emotions of anxiety, fear, or helplessness upon viewing a victim's plight



Self/Social Connection Exercise 12–2

What Is Your Degree of Empathic Concern and Personal Distress?

Directions

To discover your level of empathic concern and personal distress, read each item below. Then, using the following response scale, indicate how well each statement describes you.

0 = extremely uncharacteristic (not at all like me)

1 = uncharacteristic (somewhat unlike me)

2 = neither characteristic nor uncharacteristic

3 = characteristic (somewhat like me)

4 = extremely characteristic (very much like me)

Empathic Concern Scale

___ 1. When I see someone being taken advantage of, I feel kind of protective toward him/her.

___ 2. When I see someone being treated unfairly, I sometimes don't feel very much pity for him/her.*

___ 3. I often have tender, concerned feelings for people less fortunate than me.

___ 4. I would describe myself as a pretty soft-hearted person.

___ 5. Sometimes I don't feel very sorry for other people when they are having problems.*

___ 6. Other people's misfortunes do not usually disturb me a great deal.*

___ 7. I am often quite touched by things that I see happen.

Personal Distress Scale

___ 1. When I see someone who badly needs help in an emergency, I go to pieces.

___ 2. I sometimes feel helpless when I am in the middle of a very emotional situation.

___ 3. In emergency situations, I feel apprehensive and ill-at-ease.

___ 4. I am usually pretty effective in dealing with emergencies.*

___ 5. Being in a tense emotional situation scares me.

___ 6. When I see someone get hurt, I tend to remain calm.*

___ 7. I tend to lose control during emergencies.

Scoring

Several of the items on these two scales are reverse-scored; that is, for these items a lower rating actually indicates a higher level of empathic concern or personal distress. Before summing the items, recode those with an asterisk (*) so that 0 = 4, 1 = 3, 3 = 1, 4 = 0.

Gender Differences in Empathic Concern and Personal Distress

Davis (1980) has found the following gender differences in levels of empathic concern and personal distress:

Empathic concern:	***Personal distress:***
Male mean = 19.04	**Male mean = 9.46**
Female mean = 21.67	**Female mean = 12.28**

Are your scores above or below the mean for your sex?

Research indicates that individuals high in empathy are not only more willing to put themselves in situations in which the experience of sympathy for another is likely but also are generally more willing to help people in trouble than are those low in empathy (Pavey et al., 2012). For example, during the COVID-19 pandemic, individuals who felt empathy for people who were at high risk of serious illness were more likely to engage in prosocial behaviors of maintaining social distance and wearing a mask to prevent the other person from becoming ill (Pfattheicher et al., 2020). When people who are high in empathy become aware of others' misfortunes, they don't remain passive bystanders; rather, they tend to take action to try to relieve the suffering. In this regard, the experience of caring for others represents a central self-concept value for those high in empathic concern (Emmons & Diener, 1986). Later in this chapter, we will more closely examine how empathy and personal distress shape bystanders' responses to others' needs.

Before concluding this discussion of empathy and helping, we should mention that there is some evidence that empathy is declining among US college students. Using Mark Davis's empathic concern measure (see *Self/Social Connection Exercise 12–2*), Sara Konrath and her colleagues (2011) conducted a meta-analysis of 72 samples of about 14,000 American college students collected between 1979 and 2009. Their findings indicated that more recent generations of college students are reporting less empathy than earlier generations, and there was no evidence that this decline in empathy was greater for either women or men, nor related to any changes in economic prosperity over the three decades. The data also indicated that the sharpest drop in empathy occurred after the year 2000, or fairly recently. Compared to college students in the late 1970s and early 1980s, college students today are less likely to agree with statements such as "I often have tender, concerned feelings for people less fortunate than me" and "I would describe myself as a pretty soft-hearted person."

So why might empathy be declining among college students? We can only speculate at this point, but these findings are consistent with previously discussed research (see Chapter 1, *The Social World of American Young Adults* in section 1.2c) suggesting that during the past three decades Americans have developed a heightened self-focus and the value placed on individuality has increased (Twenge et al., 2013). From a theoretical standpoint, increasing focus on the self should lead to diminished attention to—and empathy for—others. Surveys do show that this current young generation is less charitable and less likely to volunteer to help others than previous generations (Philanthropic Giving

Index, 2008). Critics of the current generation of young adults have referred to them derisively as "Generation Me" or the "Look At Me" generation. It is possible that young adults' widespread use of social media—which reduces face-to-face contact between people—contributes to this diminished empathic tendency. Future research will provide more conclusive evidence on whether this current speculation is indeed accurate.

12.1g Learning to Be a Helper Involves Both Observation and Direct Reinforcement.

Many people subscribe to the same helping norms, but they differ in their tendencies to act consistently with these norms. The internalization of prosocial values begins in the preschool years, and parents and other adults play a significant role in this developmental process (Grusec et al., 2002). Just as Chapter 11 outlined how aggression can be learned through modeling and direct reinforcement, we now examine how prosocial behavior is similarly learned.

Observational Learning of Prosocial Behavior

Parenting plays an important role in fostering and inhibiting children's prosocial behavior (Knafo & Plomin, 2006). According to social learning theorists, observational learning or modeling can influence the development of helping in at least two ways (Rosenkoetter, 1999). First, it can initially teach children how to engage in helpful actions. Second, it can show children what is likely to happen when they actually engage in helpful (or selfish) behavior. In this learning process, what models *say* and what they *do* have different impacts on shaping observers' prosocial behaviors.

For example, in one study, sixth-grade girls played a game to win chips that could be traded for candy and toys (Midlarsky et al., 1973). Prior to actually playing, each of the girls watched a woman play the game. In the *charitable* condition, the adult put some of the chips she won into a jar labeled "money for poor children" and then urged the girls to think about the poor children who would "love to receive the prizes these chips can buy." In the *selfish* condition, the adult model also urged the children to donate chips to poor children, but she did so after putting all her chips into a jar labeled "my money." Results indicated a clear effect of prosocial modeling. Girls who had observed the charitable model donated more chips to the poor than those who had seen the selfish model. This study suggests that when an adult declares, "Do as I say, not as I do," children are more likely to model the adult's actions rather than their words.

(Adobe Stock)

What are some of the social psychological factors that increase our likelihood of helping after witnessing others' helpful actions?

Modeling prosocial behavior is not confined to children. In one study conducted in a natural setting, motorists who simply saw someone helping a woman change a flat tire were more likely to later stop and assist a second woman who was in a similar predicament (Bryan & Test, 1967). Additional research suggests that the adults who may be most likely to be positively influenced by observing others' helpful actions are those who define themselves as highly moral or helpful individuals. In a set of studies, Karl Aquino and his colleagues (2011) found that people whose moral identities are highly self-defining were more likely than others to not only feel more intense positive emotions after witnessing acts of uncommon goodness but also to profess a greater desire to become a better person by being more helpful to others. In a meta-analysis of over

25,000 children and adults worldwide, Haesung Jung and her colleagues (2020) found that people engaged in more prosocial behavior after seeing a role model engage in helpful behavior. These findings suggest that role models can have a robust, positive impact on prosocial behaviors for both adults and children.

The Lasting Consequences of Modeling

A number of studies have revealed the critically important role that prosocial parental modeling plays in the lives of extraordinary helpers. For example, a study of civil rights activists in the late 1950s and 1960s found that previous parental modeling of prosocial behavior distinguished those who made many personal sacrifices from those who participated in only one or two freedom rides or marches. The fully committed activists had parents who had been excellent prosocial models when the activists were children, while the parents of the partially committed tended to be inconsistent models, often preaching prosocial action but not actually practicing it (Rosenhan, 1970). A longitudinal study of Chilean families similarly found that parents who engaged in collective political activism against a dictator—often at great personal risk—raised children who also engaged in activism as adults (González, 2021). Combined with other studies, these findings indicate that adults' modeling of altruism can have a powerful effect on the altruistic tendencies of children that can last well into adulthood (Fogelman, 1996; Oliner & Oliner, 1988). Over time, helping others not only becomes one of the defining features of these individuals' self-concepts but also contributes to heightened self-esteem (Hitlin, 2007).

Based on this knowledge, social scientists believe they can make a clear recommendation to parents on how to raise children who will help those in need. Put simply, parents who try to instill prosocial values only by preaching and not by modeling altruism will likely raise children who are only weakly altruistic. Parents who not only preach altruism, but also let their prosocial actions serve as guidelines for their children's behavior, are much more likely to foster altruism in the next generation. In a very real sense, to be effective altruistic teachers, one must not only "talk the talk" but also "walk the walk."

Rewarding Prosocial Behavior

Although observing the prosocial actions of others can shape children's and adults' own helping, the consequences of their actions will often determine whether they continue to engage in prosocial behavior. Social rewards, such as praise and gratitude, are generally more effective reinforcers than material rewards, such as money (Grusec, 1991).

For example, imagine yourself walking along the main street in your hometown and being approached by a woman who asks how to get to a local department store. After giving her directions you continue along your way. Shortly, you pass by another woman who accidentally drops a small bag and continues walking, unaware that she has lost this possession. Would you return the bag to her? Do you think your decision to help the second woman would be influenced by how the first woman responded to your attempt to help her?

This was the question that researchers asked in a naturalistic study conducted on the streets of Dayton, Ohio, using just this scenario (Moss & Page, 1972). In the *reward* condition, the woman asking for directions rewarded her helper by saying, "Thank you very much, I really appreciate this." In contrast, in the *punishment* condition the woman responded to help by saying, "I can't understand what you're saying; never mind, I'll ask someone else." Researchers found that when the first woman rewarded people, 90% of them helped the second woman. However, when punished by the first woman, only 40% helped in the later situation.

This study suggests that people's future decisions to help are often influenced by the degree to which current helpful efforts are met by praise or rebuke. Additional research suggests that when helpers are thanked for their efforts, they experience stronger feelings of self-efficacy and social worth, which motivates them to help others in the future (Grant & Gino, 2010). The takeaway message here is that even small expressions of gratitude can motivate prosocial behaviors by leading helpers to feel socially valued (Ma et al., 2017). Therefore, saying thank you is not only the polite and correct thing to do when you receive help from someone, it is also an effective strategy to strengthen the person's tendency to provide you (and others) with help in the future.

Prosocial Video Games and Helping

In Chapter 11 we reviewed the findings from many studies indicating that playing violent video games increases aggressive cognitions, aggressive affect, and later aggressive behavior in the real world among both young adults and children. These same studies also found that playing violent video games reduces empathy and the willingness to help others. Given what we know about the learning of social behavior, if violent video games can increase aggressiveness, is it likely that prosocial video games will have the opposite effect?

That was the question posed by Tobias Greitemeyer and Silvia Osswald (2010) in a series of experiments in which they placed research participants in positions to assist or not assist others shortly after they played a prosocial video game. In one experiment, the researchers randomly assigned participants, ranging in age from 19 to 43, to one of three video game conditions. The prosocial game was Lemmings, in which the game's goal was to help a group of animals (lemmings) past a number of dangerous obstacles to a designated safe location. In contrast, the aggressive game was Lamers, which involved using an arsenal of weapons to destroy as many creatures, called lamers, as possible before they reached their intended destination. The neutral game was Tetris, which is a puzzle game with a number of random shapes the player manipulates to complete a solid row of blocks. After participants in each experimental condition had played their video game for 8 minutes, the female researcher came into the room, acted as if she was reaching for a questionnaire, and spilled a cup of pencils. She then waited five seconds to see if the participant would help. Results indicated that most participants who played the prosocial video game helped; and as a group, they were significantly more likely to help pick up the pencils than those who played the neutral or aggressive game.

(Courtesy of Legacy Interactive, Inc.)

Research indicates that when people play prosocial video games—such as Zoo Vet, in which gamers take care of zoo animals and help them when they are ill or injured—they are more likely to help others in need in their actual lives.

In a second experiment, Osswald and Greitemeyer wanted to determine whether participants playing prosocial video games would be more likely than other gamers to intervene when there was possible physical danger involved. Participants were randomly assigned to either play a prosocial video game or the Tetris video game, and they were monitored by a female researcher who remained in the room. After 10 minutes, a male confederate entered the room posing as the female researcher's boyfriend. The "boyfriend" approached the female researcher and yelled, "Ah, there you are! I was looking for you in the whole building! Why do you ignore me like that? Why do you do that to me? Now you have to talk to me!" He then kicked a trashcan and pulled the female researcher's arm to force her to leave the room with him. The female researcher resisted, saying to the boyfriend, "Shush, be quiet please. I have to work in here, I cannot talk to you. You are disturbing the experiment. Please do not be so loud." What did the participants do? Intervening was operationally defined as either saying something to the female researcher (for example, "Do you need help?") or saying something to the boyfriend (for example, "I think you need to leave."). Results indicated that participants playing the prosocial video game were significantly more likely to intervene than those playing the neutral video game (56% versus 22%).

Similar results have been obtained in other countries with participants of varying ages (Boduszek et al., 2019; Gentile et al., 2009). Further, a meta-analysis of 98 studies involving about 37,000 participants found that playing video games that encourage prosocial activities within the game increases the likelihood that those playing will behave more prosocially in their everyday lives (Greitemeyer & Mügge, 2014). In essence, just as violent video games prime attitudes and memories that make anger and aggressive behavior more likely, prosocial video games activate attitudes and memories that increase people's willingness to help.

12.1h Being Helpful Can Benefit Personal Well-Being.

When helping others we foster stronger feelings of self-efficacy and social worth, as well as developing deeper social connections with others, which suggests that helping might actually be good for our own health and well-being (Kahana et al., 2013; Kesenheimer, 2023; Weinstein & Ryan, 2010). A growing body of research substantiates this connection between engaging in prosocial behaviors and helper well-being (Curry et al., 2018). For example, in a study of 163 countries, people who are happy also report giving more of their time and money to charities (Kushlev et al., 2022). Furthermore, people who spend money on others rather than on themselves report greater happiness (Aknin et al., 2020). This could be because "prosocial spending" activates brain areas associated with pleasure and rewards (Harbaugh et al., 2007). You don't need to spend actual money to see these prosocial benefits; volunteering your time, donating blood, and simply giving advice are all associated with fostering higher subjective happiness and life satisfaction (Aknin & Whillans, 2021). There is also evidence that interventions encouraging people to engage in helpful behavior, such as random acts of kindness or spending money on others rather than oneself, increases personal well-being and happiness (Aknin et al., 2020;

> *"Life's most urgent question is: 'What are you doing for others?'"*
>
> —Martin Luther King, Jr., 1929–1968

(Adobe Stock)

Helping others can benefit your own well-being. Why might this be so?

Nelson et al., 2016). Meta-analytic studies indicate that the effect size of helping and well-being is small-to-medium and occurs for children as well as adults, regardless of the helper's gender (Curry et al., 2018).

Being kind and helpful, with its corresponding positive emotions, can also enhance both psychological and physical resilience, which has a positive impact on longevity (Post, 2005). Jeffrey Burr and his colleagues (2018) examined the long-term health benefits of engaging in prosocial behavior in adults over the age of 51 years and found that engaging in prosocial behaviors, such as volunteering and informal helping, reduced the likelihood of cardiovascular disease over a 10-year period compared to similar older adults who did not engage in such prosocial behaviors. This health benefit occurred even after taking into account baseline health and lifestyle factors. Finally, consistent with our definition of prosocial behavior (section 12.1) as being behaviors *voluntarily* engaged in to benefit others, the positive consequences of helping others for the helper are most apparent when the helper freely chooses to engage in their prosocial actions (Aknin & Whillans, 2021).

Section Summary

- In kin selection, we exhibit preferences for helping blood relatives because this increases the odds that our genes will be transmitted to subsequent generations.
- In reciprocal helping, aiding strangers can be adaptive because any helpful act or favor is expected to be returned.
- Following are relevant social norms that promote helping:

  Reciprocity norm: Help those who help you.

  Social responsibility norm: Help those in need or those dependent on you.

  Social justice norm: Help those who deserve assistance.
- Liberals tend to follow the social responsibility norm while conservatives tend to follow the social justice norm.
- Collectivist cultures hold to a broader and more stringent view of social responsibility than individualist cultures.
- Women and men appear to be helpful in different ways:

  Men are more likely to help in dangerous situations.

  Women are more likely to provide long-term help.

  These gender differences increase from childhood to adulthood and when gender roles are salient.
- Individual differences in empathy and personal distress have opposite effects on helping responses.
- Prosocial behavior that is rewarded will become stronger.
- Parents who model prosocial behavior raise children who become helpful adults.
- Playing prosocial video games increases the willingness to help.
- People who regularly help others often experience a heightened sense of well-being

12.2 When Do We Help?

As already mentioned, the chapter-opening story is a more accurate retelling of the Kitty Genovese murder than what has been commonly told over the past 50-some years in psychology textbooks. Rachel Manning and her colleagues (2007) contend that the original story of the 38 unresponsive witnesses became a kind of modern parable of group apathy. Although a good portion of the original story is now discredited, the social psychological insights that indirectly resulted from the widespread media coverage are still relevant—and largely valid—today. Let us now examine some of these classic studies and the theories that emerged from this research.

> *"When I was a boy and I would see scary things in the news, my mother would say to me, 'Look for the helpers. You will always find people who are helping.'"*
>
> —Fred Rogers (Mr. Rogers), 1928–2003

12.2a Bystander Intervention Involves a Series of Decisions.

The supposed apathy of Kitty Genovese's neighbors was the topic of news stories, commentaries, religious sermons, and dinner conversations for some time after the murder. Two people who discussed the murder at length were social psychologists John Darley and Bibb Latané. Years later, Darley recalled the content of their discussion:

> Latané and I, shocked as anybody else, met over dinner a few days after this terrible incident had occurred and began to analyze this process in social psychological terms. . . . First, social psychologists ask not how are people different or why are the people who failed to respond monsters, but how are all people the same and how might anybody in that situation be influenced not to respond? Second, we asked: What influences reach the person from the group? We argued for a several-step model in which a person first had to define the situation. Emergencies don't come wearing signs saying "I am an emergency." In defining an event as an emergency, one looks at other people to see their reactions to the situation and interpret the meaning that lies behind their actions. Third, when multiple people are present, the responsibility to intervene does not focus clearly on any one person. . . . You feel a diffusion of responsibility in that situation and you're less likely to take responsibility. We argued that these two processes, definition and diffusion, working together, might well account for a good deal of what happened. (Evans, 1980, pp. 216–217)

According to the **bystander intervention model**, which eventually emerged as a result of this dinner discussion, the presence of other bystanders during an emergency inhibits helping. This model further contends that being helpful during an emergency involves not just one decision but, rather, a series of five decisions. As you can see from Figure 12–1, at each point in this five-step process, one decision results in no help being given, while the other decision takes the bystander one step closer to intervention.

The first thing that you, as a potential helper, must do is *notice that something unusual is happening*. Unfortunately, in many social settings, countless sights and sounds flood our senses. Because it is impossible to attend to all these stimuli, and because we may be preoccupied with something else, a cry for help could conceivably go completely unnoticed. This *stimulus overload effect* is more likely to occur in densely populated urban environments than in rural settings (Milgram, 1970). Indeed, it is one of the likely reasons why there is a negative correlation between population density and helping (Levine, 2003; Steblay, 1987). That is, throughout the world, people who live in more crowded cities are less likely to help strangers in need of assistance than those who live in less densely

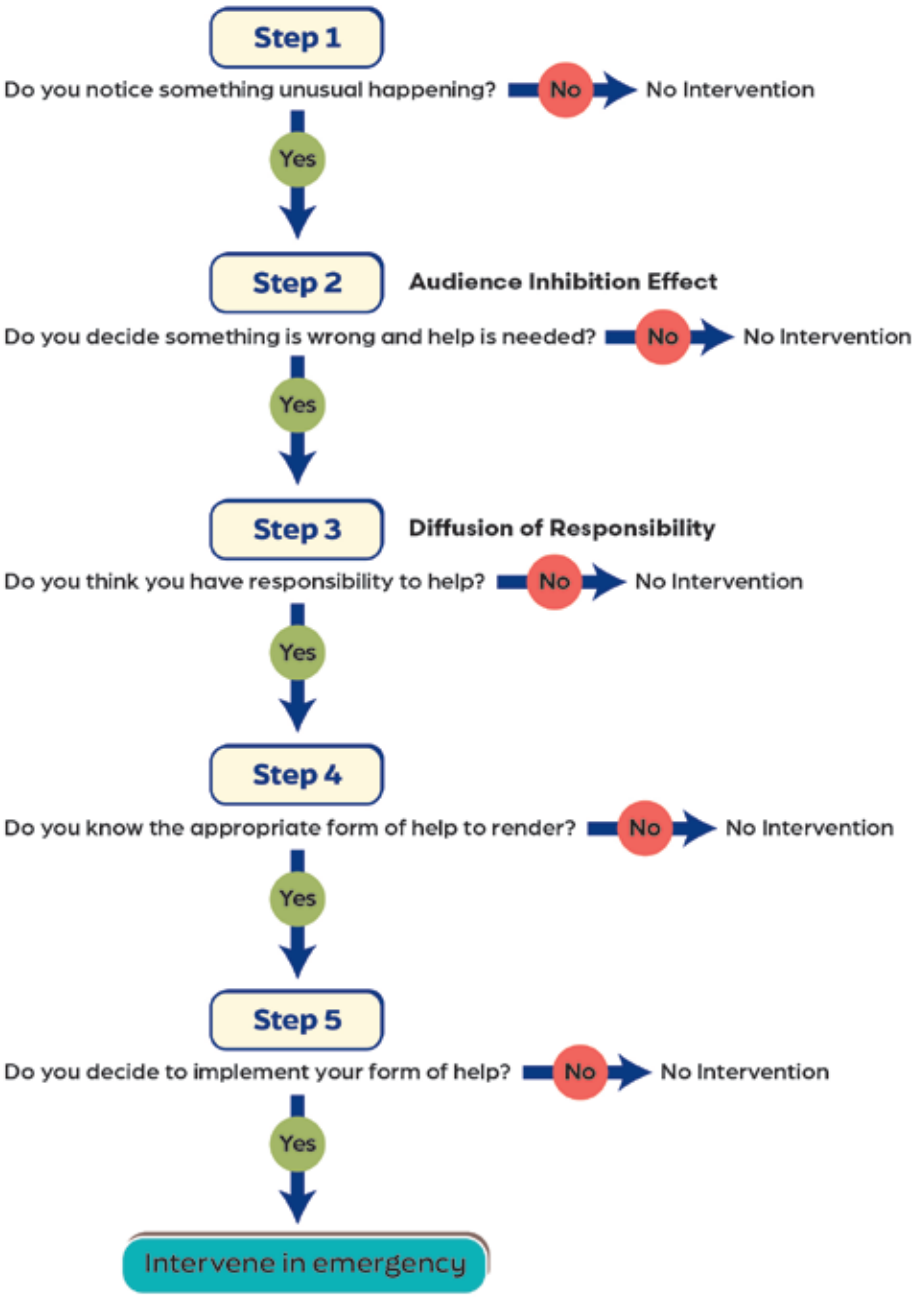
bystander intervention model

A theory that whether bystanders intervene in an emergency is a function of a five-step decision-making process

populated urban centers (Levine et al., 1994; Yousif & Korte, 1995). Another reason it is sometimes difficult to notice things out of the ordinary is that what is unusual in one setting may be a normal occurrence in another. For example, in some neighborhoods, a person lying unconscious on the sidewalk may be extremely unusual and cause passersby to take notice. Yet, in other neighborhoods, this same person may be one of many street people who live and sleep outdoors much of the year—an all too common sight that passersby generally would take little, if any, notice of.

Figure 12–1 The Model of Bystander Intervention: A Five-Step Decision Process

As outlined by Latané and Darley (1970), the decision to help someone involves a five-step process. At any step, a bystander's decision could lead to either further analysis of the situation or to nonintervention.



As a bystander to an emergency, if you do indeed notice that something unusual is happening, you move to the second step in the decision-making process: *deciding whether something is wrong and help is needed*. Returning to the previous example, if you pass by an unconscious man on the sidewalk you may ask yourself, "Did he suffer a heart attack or is he merely sleeping?" This is an extremely important decision, because if you decide he is merely sleeping you will continue on your way. But what if you are mistaken? Consider again the Kitty Genovese murder. After hearing Kitty's scream, one woman in the apartment building jumped out of bed and ran to her window because it was unusual to hear screams at this time of night (the first decision step). However, when she looked out her window and saw Kitty and her assailant "standing close together, not fighting or anything," she decided this was not an emergency (the second decision step). Only later did she learn that she was actually watching the commencement of a sexual assault and murder. Incorrectly defining the situation led to her nonintervention.

(Adobe Stock)

Some emergency situations are not as clearly defined as others. How does the presence of other people affect bystanders' decision-making when an emergency unfolds?

When you define the situation as an emergency, the bystander intervention model states that the third decision you must make is *determining the extent to which you have a responsibility to help*. According to Latané and Darley, one factor that may play a role in your decision to help or not is whether an appropriate authority figure is nearby. For instance, imagine sitting in your car at a busy intersection and noticing that in the car ahead of you, two people are arguing heatedly. Suddenly, one of these quarrelers begins hitting the other with a club. This is definitely unusual and it is clearly an emergency. The pertinent question now is: Do you have responsibility to come to the victim's aid? Further, imagine that to your immediate right is a police car with two officers sitting inside. If you decide that it is their responsibility to render assistance, you will likely assume the role of an unresponsive bystander.

Let's continue this hypothetical emergency situation, but now imagine that there is no police car in sight. Faced with the reality of a clear emergency, you still may not help if you convince yourself that all the other motorists watching this incident could help just as well as you. The presence of these other potential helpers, like the presence of authority figures, may cause you to feel less personally responsible for intervening. This is how some—but clearly not all—bystanders in the Kitty Genovese case responded.

If you assume responsibility for helping, a fourth decision you must make is *the appropriate form of assistance to render*. In the heat of the moment, however, what if you are not sure what to do? You may become paralyzed with uncertainty about exactly how to render assistance. Unable to decide, you may not offer any help at all. Children are particularly likely not to have the appropriate skills or confidence to make a decision at this stage in the helping process.

Finally, if you notice something unusual, interpret it as an emergency, assume responsibility, and decide how best to help, you still must decide whether to *implement your course of prosocial action*. If you have decided to run to the car where the person is being beaten and intervene, you must now act on this intention. However, due to fear of injury or concern about testifying at a future trial, you may decide not to implement your previous decision and remain a passive bystander. In the Kitty Genovese case, the only person who directly intervened was the woman who came to her aid, although others did indirectly intervene by either shouting at the assailant or phoning the police.

As you can see from the outline of this model, Latané and Darley believe that the decision to intervene in a possible emergency involves a rather complex set of decisions. As a bystander, if you make an incorrect choice at any point in this process, you will not

intervene. Two social psychological processes that often operate in emergency situations are the *audience inhibition effect* and the *diffusion of responsibility*. The inhibition effect can short-circuit helping at Step 2 in the bystander intervention model, and diffusion of responsibility occurs in Step 3.

12.2b Outcome and Information Dependence Produce the Audience Inhibition Effect.

Many emergency situations are not clearly defined as such, but rather, have some degree of ambiguity. You may realize that something unusual is happening (Step 1 in the model), but you are not sure that it's an emergency (Step 2). In a classic study designed to investigate bystander uncertainty, Latané and Darley (1968) recruited male college students for a study on the problems of urban life. When a research participant arrived at the laboratory, he was ushered into a room, given a questionnaire, and then left alone to complete it. Soon, what looked like white smoke (but wasn't) began to enter the room through a small wall vent. Within 6 minutes, the smoke was so thick it was difficult to see. The dependent variable was whether or not the participant would leave the room to report the problem before the 6 minutes had elapsed. What do you think happened?

When working alone, most participants usually hesitated a moment upon first seeing the smoke, but then walked over to the vent to investigate. In 75% of the trials, the participant finally left the room to report the emergency. In a second experimental condition, groups of three naive participants were seated in the room when smoke began to pour from the vent. In all trials, participants looked to one another to help them decide if there was an emergency, but in only 38% of these three-person groups did even a single person report the incident before the 6-minute mark. Although 55% of the participants in the *alone* condition reported the smoke within the first 2 minutes, only 12% of the three-person groups did so. Finally, in a third condition, two confederates—acting like research participants—joined the one real participant in the room. As it began to fill with smoke, the confederates acted unconcerned. If the real participant asked them any questions, they replied, "I dunno" and continued working on the questionnaire. In the presence of these unconcerned confederates, only 10% of the participants reported the smoke. The other 90% coughed, rubbed their eyes, and opened the window, but they did not leave the room. These findings, summarized in Figure 12–2, indicate that when others are present, people are less likely to define a potentially dangerous situation as an emergency, and they also respond more slowly to the possible emergency. This **audience inhibition effect**, which is driven by *pluralistic ignorance* (see Chapter 7, section 7.2a), is particularly likely when other people are acting calmly.

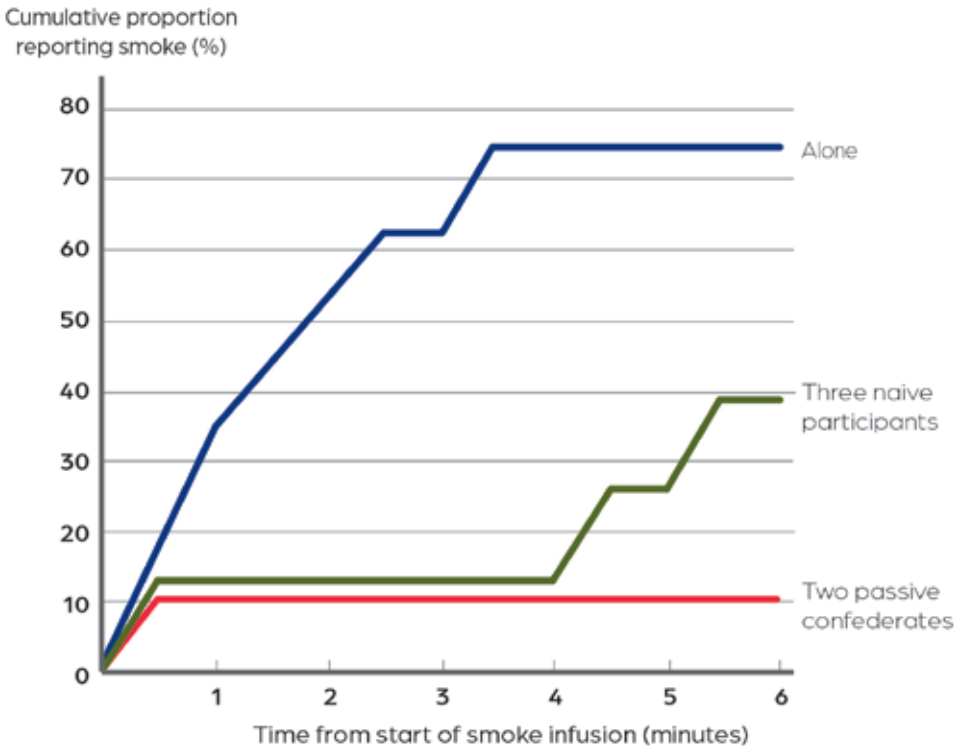
In another investigation of the inhibition effect, Latané and Judith Rodin (1969) set up a situation in which some other person, besides the research participant, was in possible danger. First, a female researcher set participants to work on a questionnaire and then left through a collapsible curtained doorway to work in an adjoining office. From their room, participants could hear her shuffling papers and opening and closing drawers. After 4 minutes, the researcher turned on a tape recorder that broadcast the sound of her climbing on a chair to reach a stack of papers on a bookcase. Participants then heard the researcher's scream, quickly followed by a loud crash. "Oh, my God, my foot. . . . I . . . I . . . can't move . . . it," she moaned. "Oh . . . my ankle. . . . I . . . can't get this . . . thing . . . off me." After about 2 minutes of moaning, the woman could be heard dragging herself out of her office.

audience inhibition effect

People are inhibited from helping for fear that other bystanders will evaluate them negatively if they intervene and the situation is not an emergency

Figure 12–2 The Audience Inhibition Effect

When a room began filling with white smoke, people were much less likely to report the incident—and did so more slowly—when they were with others rather than alone (Latané & Darley, 1968). What two types of social dependence are interacting here to create the audience inhibition effect?



Data source: "Group Inhibition of Bystander Intervention In Emergencies," by B. Latané and J. M. Darley, 1968, *Journal of Personality and Social Psychology, 10*(3), pp. 215–221.

Of the participants who were alone in the room, 70% tried to help by opening the curtain or running out the other door to find help. Consistent with the audience inhibition effect, when two strangers were sitting in the room, only 40% of the time did either of them help. When the two people sitting in the room were friends, at least one of them helped in 70% of the trials. Even though this is the same percentage of helping as in the alone condition, it still indicates an inhibition effect because two people were present. If these two friends did not inhibit each other's response, then helping should have occurred in 91% of the trials ($70\%_{\text{friend 1}}$ + (70% × remaining $30\%_{\text{friend 2}}$) = 91%). Finally, in the last condition, a naive participant sat in the room with a confederate who acted unconcerned and nonchalant about the ruckus behind the curtain. Again, consistent with the inhibition effect, in this setting the participant tried to help only 7% of the time.

To better understand why the inhibition effect occurs, let's return to two concepts previously discussed in Chapter 9 (section 9.1a), namely, *information dependence* and *outcome dependence*. As discussed in that chapter, when we are not clear about how to define a particular situation, we are likely to become dependent on others for a definition of social reality. Thus, when a group of people witnesses a possible emergency, each person bases his or her interpretation of the event partly or exclusively on the reactions of others (information dependence). The problem with this information seeking in an emergency is that, in our culture, we have learned that it is not socially acceptable to "lose your cool." If we become agitated and excitable during a crisis, we run the risk of being negatively

evaluated by others (outcome dependence). Due to this concern, we will often pretend to be calm while witnessing an emergency. Acting cool and calm, we then observe others' behavior for clues for how to define what we all are witnessing. However, because everyone else is also assuming a calm exterior, what we observe is a group of calm bystanders who, by their nonplussed demeanor, are defining the situation as a nonemergency.

In ambiguous emergency situations, then, the fear of being negatively evaluated (outcome dependence), combined with the tendency to look to others for further information (information dependence), results in the audience inhibition effect. In both the "smoke" study and the "woman in distress" study, the presence of others and their behavior significantly inhibited helping. Post-experimental debriefings indicated that some of those who did not intervene claimed they were either unsure of what had occurred or did not think the situation was very serious. Russell Clark and Larry Word (1972), in a replication of the Latané and Rodin study, made the situation even less ambiguous by allowing participants in the adjoining room to not only hear the crash of the person (this time a man) falling and his subsequent moaning but also feel the floor shake with the force of the crash.

With this reduction in ambiguity, every single participant helped—regardless of the number of bystanders. However, when the situation was made more ambiguous (the victim did not cry out in pain), helping occurred only 30% of the time. In addition, as with the previous studies, participants in groups were less likely to help than those who were alone. This study clearly indicates that the audience inhibition effect is driven by our fear of being negatively evaluated. Indeed, those of us who are especially sensitive to embarrassment are the most likely to experience inhibition in emergencies (Tice & Baumeister, 1985). Thus, in an ambiguous emergency situation, we seem to be thinking, "What if I cause a big fuss by intervening and there is no emergency? I'll look like a fool and be mortified." However, if the fear of committing a social faux pas is reduced due to clear emergency signals, our inhibitions are greatly reduced and we are more likely to help.

(Adobe Stock)

Why are potential helpers more likely to diffuse responsibility for helping as the number of bystanders to an emergency increases?

12.2c Diffusion of Responsibility Increases with the Number of Bystanders.

Fear of embarrassment is one reason we do not intervene in some emergencies, but what about those situations in which someone clearly needs help and no one raises a finger to come to the victim's aid? Surely some other social psychological factor is operating. For example, at least some of the neighbors of Kitty Genovese, sitting in their own separate apartments, correctly guessed what was happening before the second fatal attack occurred. However, they knew—or assumed—that others were also watching this drama unfold below them. Darley and Latané believed that this realization that others could also help diffused these neighbors' own feelings of individual responsibility (Step 3 in the model). They called this response to others' presence the *diffusion of responsibility*—the belief that the presence of other people in a situation makes one less personally responsible for events that occur in that situation (see Chapter 8, section 8.2b).

In an attempt to simulate the social psychological factors that they believed were present in the Genovese case, Darley and Latané (1968) designed an experiment in which they placed people in separate areas from which they then heard a victim cry for help. In this study, New York University students thought they were participating in a discussion about the kinds of personal problems undergraduates

typically face in a large urban environment. They were also told that, to avoid embarrassment, they would each be placed in a separate booth and would talk to one another through an intercom system. To further ensure they wouldn't be inhibited, the experimenter said he would not eavesdrop on their conversation. The way the intercom system worked was that only one person could speak at a time, and the others had to merely listen.

The study included three different conditions. Some participants were told the discussion would be with just one other student, while others were told they were either part of a three-person or a six-person group. In reality, all the other discussion participants were merely tape recordings. Discussion began with the first speaker stating that he was an epileptic who was prone to seizures when studying hard or when taking exams. When everyone else had spoken, the first speaker began to talk again, but now he was speaking in a loud and increasingly incoherent voice:

> I-er-um-I think I-I need-er-if-if could-er-er-somebody er-er-er-er-er-er-er give me a little-er-give me a little help here because-er-I-er-I'm-er-er-h-h-having a-a-a real problem-er-right now and I-er-if somebody could help me out it would-it would-er-er s-s-sure be-sure be good . . . because-er-there-er-er-a cause I-er-I-uh-I've got a-a one of the-er-seizure-er-things coming on and-and-and I could really-er-use some help so if somebody would-er-give me a little h-help-uh-er-er-er-er-er c-could somebody-er-er-help-er-uh-uh-uh (choking sounds). . . . I'm gonna die-er-er-I'm . . . gonna die-er-help-er-er-seizure-er-[chokes, then quiet]. (Darley & Latané, 1968, p. 379)

How did participants respond to this concocted, yet convincing, emergency? It depended on the number of bystanders they thought were also aware of the epileptic's seizure. When participants thought they were the only ones listening to the emergency unfold, 85% of them left their booths to help before the victim's pleas for help were cut off. When they thought they were one of five bystanders, only 31% reacted in a similar prosocial manner. When participants thought there was one other bystander aware of the emergency, helping was intermediate, with 62% helping. Not only was helping less likely as the number of bystanders increased, but the *speed* of rendering assistance was significantly slower as well. As you can see from Figure 12–3, when participants thought there were four other bystanders, it took them three times longer to take any action (if they helped at all) than it did in the alone condition.

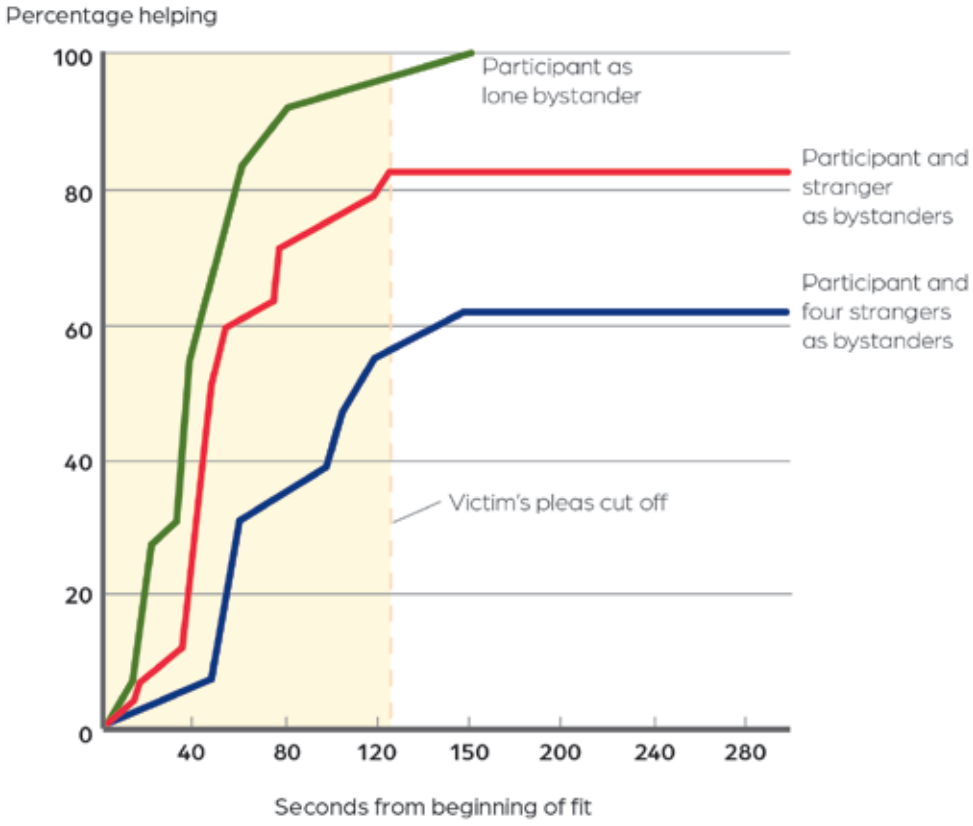
"Where are they who claim kindred with the unfortunate?"

—Caroline Lamb, English novelist, 1785–1828

More than 50 subsequent laboratory and naturalistic studies have confirmed this diffusion of responsibility effect (Latané & Nida, 1981). On average, when participants believed they were the only bystander to an emergency, 75% of them helped, compared with only 53% of those who were in the presence of others. Diffusion of responsibility also occurs when people need help on the internet (Barron & Yechiam, 2002; Blair et al., 2005). For example, in one study, more than 4,800 people were monitored in 400 different internet chat groups over a month's time to determine the amount of time it took a bystander to render assistance to someone who asked for help (Markey, 2000). Results indicated that it took longer for people to receive help as the number of people present in a computer-mediated chat group increased. However, this diffusion of responsibility was virtually eliminated and help was received more quickly when help was asked for by specifying a bystander's name.

Figure 12–3 The Diffusion of Responsibility Effect

When participants heard over an intercom system someone having a seizure, how did the number of perceived bystanders influence their speed and willingness to help the victim (Darley & Latané, 1968)?



Data source: "Bystander Intervention In Emergencies: Diffusion of Responsibility," by John M. Darley and Bibb Latané, 1968, *Journal of Personality and Social Psychology, 8*(4), pp. 377–383.

A meta-analysis of more than 100 studies, involving over 7,700 participants, strongly supported the finding that bystanders inhibit helping responses and that this effect becomes stronger with an increasing number of bystanders (Fischer et al., 2011). This meta-analysis also indicated that the audience inhibition effect is less pronounced in dangerous situations than in nondangerous situations. Why might this be so? In dangerous situations, bystanders are more likely than in nondangerous situations to label what they are witnessing as a clear-cut emergency because dangerous situations more closely fit the emergency prototype (Lindegaard et al., 2022). In other words, the uncertainty and fear of embarrassment that drives the audience inhibition effect is greatly reduced when there is danger present. Does all this research mean that when a crowd of bystanders becomes very large no one will help? Of course not. While it is true that bystanders inhibit individuals from helping, it is also true that if the group size gets sufficiently large, the mathematical odds become better that at least someone will defy the social forces and intervene, however delayed that help might be (Stalder, 2008).

Do you think you would find these same bystander effects among people whose jobs regularly deal with helping others? How might you test whether the situational context or the salience of their "helping" social roles would influence their tendency to intervene?

Despite clear evidence that the presence of others influences people's decision to help, in post-experimental interviews, participants in all of Latané and Darley's experiments tended to deny that others' assumed presence had any effect on their actions (or inactions). As discussed in Chapter 7, underestimating the effect that others have on your behavior makes it more likely that you will fall prey to their influence. After all, how can you guard against falling into the nonhelpful mode when you don't recognize how the simple presence of others can change your feelings of personal responsibility?

Besides bystanders influencing helping responses in the traditional ways described thus far, Stephen Garcia and his colleagues (2002) wondered whether the presence of actual people is necessary to induce the bystander effect. Is it possible that simply imagining others is sufficient to induce a similar mental state of diffused responsibility, regardless of whether those others are available to respond? Research on *priming* suggests that merely activating knowledge structures from memory can influence people's social perceptions and behavior (see Chapter 4, section 4.1c). Garcia hypothesized that merely activating the construct of *group* in the minds of people would result in diffusion of responsibility.

To test this hypothesis, he and his colleagues approached students who were sitting alone at a campus student center and asked them to complete a questionnaire. For participants in the *group condition*, the questionnaire included a group prime, which read as follows: "Imagine you won a dinner for yourself and 10 of your friends at your favorite restaurant." For participants in the *one-person condition*, the inserted statement was similar but focused on only one friend: "Imagine you won a dinner for yourself and a friend at your favorite restaurant." Next, all participants answered the filler question: "What time of day would you most likely make your reservation?" The choices were 5 p.m., 6 p.m., 7 p.m., 8 p.m., 9 p.m., or 10 p.m. In the *neutral control condition*, participants read only the filler question, which was slightly modified to "What time of day would you make a dinner reservation?" For all participants, helping behavior was measured by their willingness to volunteer to help out with an experiment. Thus, on the last page of the questionnaire all participants read the following: "In addition to this survey, we are conducting a brief experiment in another room. How much time are you willing to spend on this other experiment?"

As hypothesized, participants who were prompted to imagine a group of 10 people offered less assistance (helping) than did participants in either the one-person condition or the neutral control condition. Even though participants in the group condition imagined their friends, these imagined friends were not in the immediate vicinity to offer helping behavior. Hence, these results suggest that others need not be physically present for diffusion of responsibility to occur; merely imagining a group can lead to feeling lower levels of responsibility for helping others.

12.2d Bystander Intervention Is Shaped by Arousal and Cost-Reward Assessments.

Latané and Darley's bystander intervention model is best at explaining why people in a group of bystanders often don't interpret an event as an emergency, as well as why they often don't help even when it's clearly defined. Although this model provides a number of important pieces to the bystander puzzle, its focus is on the social problem of *nonintervention*. Yet why do we often decide to actually intervene in an emergency?

Jane Piliavin and her colleagues (1981) attempted to answer this question by developing a theory of bystander intervention that extends and complements Latané and Darley's model. These researchers added to the decision-making equation a consideration of bystanders' emotional arousal during an emergency and their assessment of the costs of

helping and not helping. Essentially, their work focuses on the second half of Latané and Darley's model—namely, deciding on personal responsibility (Step 3), deciding what to do (Step 4), and implementing action (Step 5).

This **arousal:cost–reward model** of helping contends that witnessing an emergency is emotionally arousing and is generally experienced as an uncomfortable tension that we, as bystanders, seek to decrease (Gaertner & Dovidio, 1977). This tension can be reduced in several different ways. We could intervene and thereby decrease our arousal, but we could also reduce arousal by either ignoring danger signs or benignly interpreting them as nothing to worry about. In addition to these avenues of action, we could reduce arousal by simply fleeing the scene. Which behavior we choose will be a function of our analysis of the costs and rewards for helping and for not helping. What are the costs to the bystander for helping? This could involve a host of expenditures—including loss of time, energy, resources, health (even life), as well as the risk of social disapproval and embarrassment if the help is not needed or is ineffective. Counterbalancing the costs of helping are the costs of not helping. These might include serious harm to the ignored victim and subsequent public scorn of the nonhelpful bystander. Realizing that one did not render assistance could also lead bystanders to engage in self-blame and experience loss of self-esteem.

According to Piliavin and her colleagues, if the costs of helping are low and the costs of not helping are high, bystanders will likely intervene (refer to Figure 12–4). In contrast, if these costs are reversed (high helping costs and low not-helping costs), bystanders are unlikely to render assistance. If both types of costs are low, intervention will depend on the perceived social norms in the situation. The most difficult situation for bystanders is one in which the costs for helping and for not helping are both high. Here, the arousal:cost-reward model suggests two likely courses of action. One is for bystanders to intervene indirectly by calling the police, an ambulance, or some other professional helping source. Another course of action is for bystanders to redefine the situation in a way that results in them not helping. Here, they could decide there really is no emergency after all, or that someone else will help, or that the victim deserves to suffer. For instance, imagine that you are walking down the street when you hear a child screaming in pain. Directing your gaze toward the screams, you see a lone young girl who has slammed a car door on her hand. In this situation, you will likely directly intervene because (1) the costs of not helping are high—the girl may seriously injure her hand if it is not removed from the door's grip soon, and you will experience terrible guilt if you don't help; and (2) the costs of helping are low—opening the car door will require little effort or loss of time, and helping will not put you in any danger.

arousal:cost–reward model

A theory that helping or not helping is a function of emotional arousal and analysis of the costs and rewards of helping

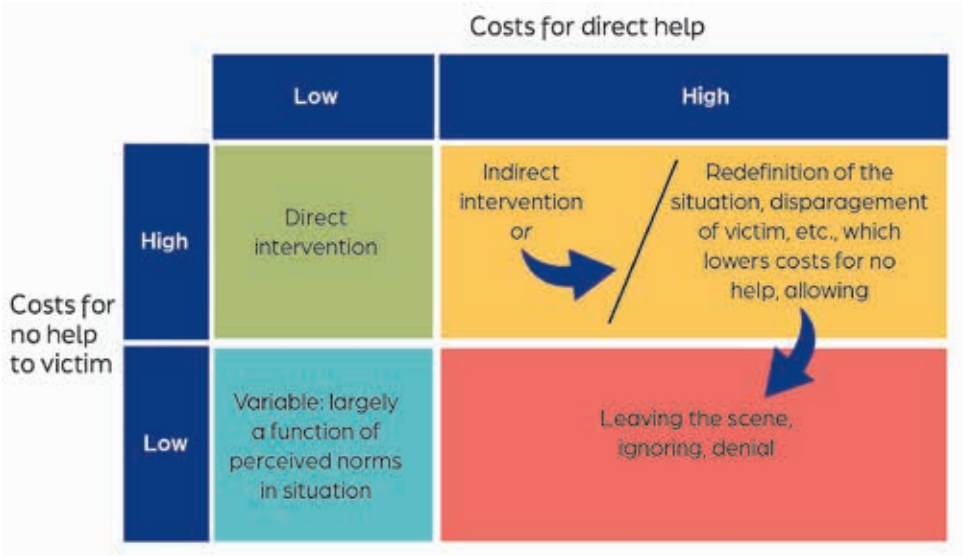
(Adobe Stock)

According to the arousal:cost–reward model, what factors do we likely consider when trying to decide whether to help homeless people we encounter on city streets?

Now, imagine that the child is not screaming in pain because her hand is caught in a door, but rather because an adult is beating her with a stick. Now what will you do? Here, the costs of both not helping and helping are high—the girl may be seriously hurt, and you will experience guilt if you don't stop the beating; but the adult could seriously injure you if you intervene. Faced with these high costs, you may help indirectly by calling the police or by yelling from a safe distance for the adult to stop. Sadly, you might also convince yourself that the child must deserve the beating she is getting and continue on your way.

Figure 12–4 The Influence of Costs and Rewards on Direct Helping

According to Piliavin and Piliavin (1972), the type of response a moderately aroused observer will have to someone's need for help will be influenced by his or her assessment of the combination of personal costs for direct help and costs for no help to the victim. According to this model, when are bystanders most and least likely to help?



Source: Adapted from "The Effect of Blood on Reactions to a Victim," by J. A. Piliavin and I. M. Piliavin, *Journal of Personality and Social Psychology, 23*, pp. 253–261. Copyright © 1972, American Psychological Association.

Now, imagine that the child is screaming in pain because an adult is spanking her bottom with moderate force. In this situation, both the costs of not helping and helping are probably low. Not intervening will probably not cause serious physical injury to the child, and intervening may only result in the adult telling you to mind your own business. If your perception of cultural norms is that spanking children is an unacceptable response to misbehavior, you may try to stop the punishment. Otherwise, you are unlikely to intervene.

Finally, imagine the same scene as in the previous paragraph, but now let's add that you are rushing to an important job interview. If you try to stop the spanking, you run the very real risk of arriving late. Here, your costs for helping are high and the costs for not helping are low. Weighing these factors, you are likely to continue on your way, perhaps muttering about the misguided actions of the adult but justifying your nonintervention to yourself ("If I didn't have this appointment, I'd give that adult a piece of my mind!").

A number of studies support the arousal:cost-reward model's hypothesis that people often weigh the costs of helping and not helping prior to rendering assistance (Dovidio et al., 1991; Fritzsche et al., 2000). For example, Lance Shotland and Margaret Straw (1976) staged a realistic fight between a man and a woman on an elevator. In one condition, 65% of the time bystanders intervened when the woman shouted, "Get away from me! I don't know you!" However, in another condition bystanders helped only 19% of the time when the woman shouted, "Get away from me! I don't know why I ever married you!" These differences in helping were apparently due to perceived costs. People who watched videotapes of the fights perceived the woman as being in greater danger when with the stranger than when with the husband. They also believed that the combatants would be more likely to turn on them if they tried to intervene in the "domestic" fight rather than the "stranger" fight. Thus, the "stranger" condition was perceived to involve higher costs for not helping and lower costs for helping than the "husband" condition.

Another study investigating the costs for helping and the costs for not helping was conducted on the Philadelphia subway system when a male confederate carrying a cane collapsed (Piliavin & Piliavin, 1972). In one condition, the victim had a thin trickle of fake blood slip from his mouth as he fell, while in a second condition he did not. The researchers assumed that the presence of blood would increase the costs of intervening because contact with blood for most people is repulsive. It was further assumed that bystanders would interpret the presence of blood to mean that the victim was in more danger than if no blood was visible. Thus, the "blood" condition was hypothesized to cause conflicting thoughts that would impede intervention ("The man needs help, but yikes! Look at that blood!"). True to these predictions, the unbloodied victim was directly helped more often (95% of the time) and more quickly than the bloody victim (who was helped 65% of the time). In one trial of the study, two teenagers witnessed the man collapse and rose to help but then saw the blood. "Oh, he's bleeding!" gasped one of them. Both promptly sat down.

12.2e Positive and Negative Moods Can Either Increase or Decrease Helping.

Beyond the influence that fellow bystanders and perceived costs can have on prosocial behavior, research also demonstrates that people's willingness to help is affected by the mood they happen to be in when assistance is needed.

Good Moods and Generosity

Imagine this scene. Ralph bounds out of his psychology class feeling on top of the world because he has achieved one of the highest scores on his midterm exam. As he happily walks back to his apartment, he notices a woman carrying a tall stack of papers. Suddenly, the stack slips from her grasp and begins flying in all directions across campus. Without hesitation, Ralph springs into action and helps retrieve the errant papers.

Would Ralph have been so willing to help if he were in a less positive mood? Perhaps not. Research indicates that good moods lead to more prosocial behavior (van Kleef & Lelieveld, 2022). In fact, a growing body of research suggests that a *good mood effect* for prosocial helping behavior can occur in response to a variety of situations that induce positive emotions. For example, people are more likely to help others on sunny days than on cloudy ones (Cunningham, 1979), after finding money or being offered a tasty treat (Isen & Levin, 1972), in situations where there is a pleasant smell (Guéguen, 2012), and even after listening to uplifting music or a comedian delivering a funny routine (North et al., 2004; Wilson, 1981). Experiences that induce a sense of wonder or "awe"—such as seeing the northern lights or a beautiful sunset that create an awareness of the greatness of the world—can also promote a positive mood and prosocial behavior (Prade & Saroglou, 2016; Sturm et al., 2022). For example, Paul Piff and his colleagues (2015) randomly assigned one group of participants to spend a minute looking up at awe-inspiring tall trees, while participants in the control condition looked up at a building. Those who looked at the awe-inspiring trees were later more helpful than participants in the control condition. People we interact with can also induce the good mood effect through their nonverbal behavior. In one field experiment, Nicolas Guéguen and Marie-Agnes De Gail (2003) had a confederate smile or not smile at a passerby a few seconds before another confederate dropped computer diskettes on the ground. Results indicated that the passersby were more likely to help pick up the diskettes if they had just received a smile. This finding is consistent with the more general finding that help seekers are much more successful in receiving aid if they smile while making their requests (Guéguen & Fischer-Lokou, 2004).

Why do positive moods lead to greater helping? Several possibilities have been offered. One is that when we are in a positive mood, we are more likely to perceive other people

as "nice," "honest," and "decent," and thus deserving of our help (Isen, 1987). Another possibility is that we help others to enhance or prolong our good mood (Wegener & Petty, 1994). A third reason might be that, when happy, we are less likely to be absorbed in our own thoughts ("stewing in our own juices"); thus, we are more concerned for, and attentive to, the needs of other people (McMillen et al., 1977; Perlin & Li, 2020). A fourth possibility is that good moods increase the likelihood that we think about the rewarding nature of social activities in general. With the rewarding properties of helping being salient, our helping becomes more likely. This enhanced attentiveness to the rewarding properties of helping may explain why good moods increase helpfulness only when the helpful task is expected to be pleasant. If helping is expected to entail unpleasant and aversive experiences, happy people are no more helpful than others (Isen & Simmonds, 1978; Rosenhan et al., 1981).

Bad Moods and Seeking Relief

What about negative moods and helping? Rewind your thoughts to Ralph and his psychology midterm. Imagine now that Ralph's exam grade was not an "A" but rather an "F." Now, instead of bounding out of class, he trudges. Given his present somber mood, will he still dart around campus retrieving wayward sheets of paper? Surprisingly, he might. Isen and her coworkers (1973) found that people who believed they had failed at an experimental task were more likely to help another person than those who did not experience failure. Although this response certainly seems to contradict the good mood effect just described, one possible link between the two is the rewarding properties of helping. Because helping others often makes us feel good about ourselves, when feeling bad we may help as a way of *escaping* our mood—just as we help to maintain a good mood.

Feeling guilty can also increase helping (Basil et al., 2008). Michael Cunningham and his colleagues (1980) conducted a field study in which a young man approached individuals on the street and asked them to use his camera to take his picture for a class project. The problem for the would-be helpers was that the camera had been rigged to malfunction. When the helpers realized the camera was not working, the young man examined it closely and asked the helpers if they touched any of the dials. He then informed them that it would have to be repaired. The researchers assumed that such an encounter would induce a certain degree of guilt in these individuals. As they continued on their way, these now guilty people passed a young woman who suddenly dropped a file folder containing some papers. How do you think they responded to this needy situation? Of those who were led to believe that they had broken the young man's camera, 80% helped the female stranger pick up her papers. Only 40% of the passersby who had no broken-camera experience paused to help. Another field study found that Roman Catholics were more likely to donate money to a charity just prior to confessing their sins to a priest—when their guilt level should have been high—rather than immediately after being absolved of those sins (Harris et al., 1975).

Although these studies demonstrate that negative moods can lead to prosocial behavior, other studies suggest that when we experience extremely negative moods, such as grief or depression, we may be so focused on our own emotional state that we simply don't notice others' needs and concerns (Carlson & Miller, 1987). Still other studies suggest that even when experiencing less severe negative moods, we are less likely to help than those who are in good moods (Isen, 1984). Robert Cialdini and Douglas Kenrick (1976) attempted to explain why this is the case by proposing that when we are in a bad mood, our decision to help is often based on a simple, self-serving question: Will helping make me feel better? This **negative state relief model** asserts that when we are in a bad mood, if the perceived benefits for helping are high and the costs are low, the expected *reward value* for helping will be high; thus, we will likely help to lift our own spirits. However,

negative state relief model

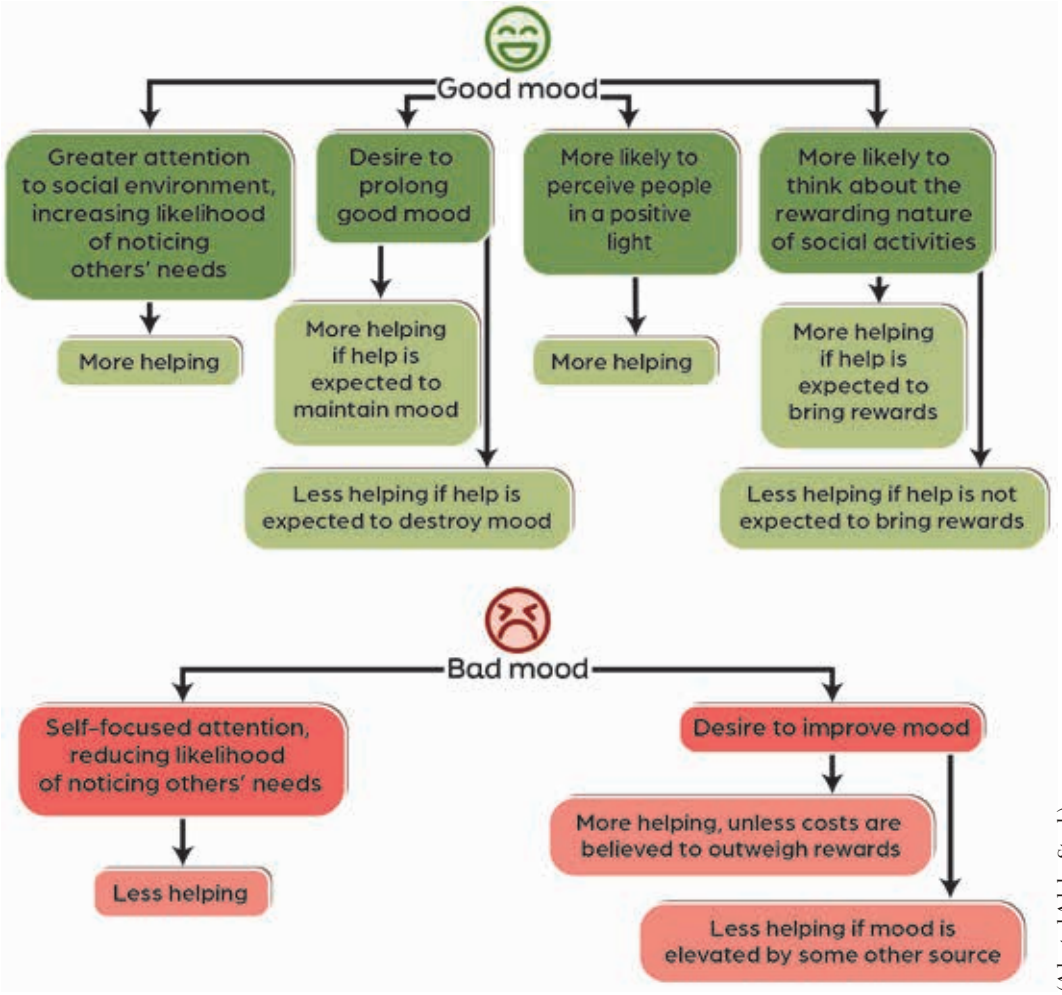
A theory suggesting that, for those in a bad mood, helping others may be a way to lift their own spirits if the perceived benefits for helping are high and the costs are low

if the perceived benefits and costs are reversed so that the reward value is low, we are unlikely to help. Essentially, this model predicts that bad moods are more likely to lead to helping than neutral moods when helping is easy and highly rewarding.

The negative state relief model has generated considerable scientific debate over whether it accurately depicts foul mood effects, and even its proponents have pointed out the limits of its application (Glomb et al., 2011). First, research indicates that increased helping due to bad moods is much more common among adults than children (Kenrick et al., 1979). One probable explanation for this age difference is that children are less likely to have learned the self-rewarding properties of helping—that it can pull one out of a bad mood. A second limitation is that the model specifies that only mildly negative feelings such as sadness, guilt, and temporary depression will increase helping. More intense negative emotions, such as hostile anger and resentment, result in decreased helping. Finally, because the helping exhibited by adults in a bad mood is of a self-serving nature, if sad or guilty people get their spirits raised from some other source (such as being complimented or hearing a funny joke), they will no longer have a need to help others (Cunningham et al., 1980). Figure 12–5 summarizes the effects that both bad and good moods have on helping.

Figure 12–5 The Varied Effects of Mood on Helping

Depending on the circumstances, positive and negative moods can either increase or decrease helping.



(Adapted Adobe Stock)

12.2f The Empathy-Altruism Hypothesis Contends That Empathy Produces Altruistic Motivation.

The three previously discussed explanations of the conditions under which people are most likely to help others—the arousal:cost-reward model, good mood effect, and negative state relief model—all assume there is an egoistic motive underlying prosocial behavior. All three explanations contend that helpful bystanders are ultimately trying to improve their own well-being by helping. Yet is egoism all that underlies prosocial action?

Although he does not deny that helping is often motivated by a desire to fulfill egoistic needs, Daniel Batson (1991, 2011) contends that sometimes our prosocial actions are truly *altruistic*, motivated solely by the desire to increase the welfare of another. In Batson's **empathy–altruism hypothesis**, he proposes that we typically experience either personal distress or empathy upon witnessing someone else's suffering (refer back to section 12.1f). Batson contends that these two contrasting emotional reactions to a victim's plight—one focused on our own well-being (personal distress) and the other focused on the victim's (empathy)—result in very different motivations.

Regarding the negative arousal state of personal distress, the greater our personal distress as a bystander, the more we will be motivated to have it reduced. Batson believes that Piliavin's arousal:cost-reward model does a good job of explaining how we respond to personal distress. Because reduction of this unpleasant arousal state is the primary motivation underlying personal distress, we will likely flee the stress-producing situation if at all possible. However, if we cannot easily escape, we will likely lend assistance in order to reduce our own unpleasant arousal. Described in this manner, one can clearly see that helping caused by personal distress is egoistic in nature.

Like personal distress, empathy for someone who is suffering will likely be an unpleasant emotion. However, unlike personal distress, empathy will not be satisfied by flight. Instead, Batson's empathy-altruism hypothesis contends that when we experience empathy, the stronger the feelings of compassion for the victim, the greater our motivation to help. Thus, when we feel great empathy, we are motivated more by our desire to improve the victim's welfare than attend to our own.

Support for the empathy-altruism hypothesis has been found in a number of studies in which bystanders' empathy or personal distress has been manipulated. In one of these studies, Batson and his coworkers (1981) had pairs of female college students participate in a task seemingly investigating how people work under aversive conditions. One participant was the "worker" who received electric shocks at random intervals during two trial periods; the other student observed the worker on a closed-circuit television as she performed the task. In actuality, the worker was a confederate. When the first aversive work trial began, the worker's facial expressions and body movements indicated that she found the shocks to be extremely uncomfortable. At the end of this trial, the worker explained that she had been traumatized by electric shocks in an accident as a child, and now even mild shocks were often very painful. Responding to this "dilemma," the researcher asked the observer—who was naturally disturbed by this story—whether she would be willing to help the woman by trading places with her on the last trial. Batson and his colleagues predicted two factors would determine how participants responded to this dilemma: (1) whether or not they felt personal distress or empathy, and (2) whether or not they could flee this aversive situation.

Regarding the first factor, the experimenters assumed that everyone would experience arousal when witnessing the victim's plight, and that they would naturally attribute this arousal both to sympathy for the victim (empathy) and to personal discomfort (personal distress). To more clearly direct participants' interpretation of their arousal, the

empathy–altruism hypothesis

A theory proposing that experiencing empathy for someone in need produces an altruistic motive for helping

experimenters gave them a fictional drug, "Millentana" (a cornstarch placebo), as part of another study just prior to observing their partner being shocked. All participants were told that Millentana had a side effect.

In the *empathy* condition, Batson and his coworkers wanted the participants to misattribute any feelings of personal distress to the drug and not to the victim's plight. To achieve this result, they said that the drug "produces a clear feeling of uneasiness and discomfort, a feeling similar to what you might experience while reading a particularly distressing novel." Due to this misattribution of personal distress to Millentana, the researchers assumed that participants in the empathy condition would perceive their emotional response to the victim to be primarily empathy.

In contrast, those in the *personal distress condition* were told that the drug "produces a clear feeling of warmth and sensitivity, a feeling similar to that you might experience while reading a particularly touching novel." Following a similar logic, the experimenters assumed that these people would misattribute feelings of empathy to Millentana and perceive their emotional response to the victim to be primarily personal distress. Participants' subsequent self-reports indicated that the experimenters were successful in manipulating the women's emotional responses in the desired directions.

Regarding the second factor, ease of escape was manipulated by the instructions participants had previously received concerning their role as observer. In the *easy-escape* condition, they were told they would observe only the first trial, while in the *difficult-escape* condition, participants were told they would observe both trials.

How do you think these different factors affected willingness to help the victim? Results found that regardless of whether escape was difficult or easy, empathic observers tended to help by deciding to trade places with the confederate. On the other hand, the personally distressed observers chose to flee when fleeing was easy; they helped only if that was the only way to relieve their own discomfort. These findings are perfectly consistent with the empathy-altruism hypothesis.

Critical Thinking

How could you design a donation pitch to members of a local community center to help starving people in a foreign country, knowing that some message receivers will react with empathy, while others will react with personal distress?

In a replication of this experiment, instead of manipulating empathy and personal-distress arousal by giving people a placebo drug, Batson and his coworkers (1983) asked participants to describe their emotions after watching the confederate suffer. Based on these responses, participants were categorized as being either personally distressed or empathic. As in the previous experiment, the empathic observers chose to help regardless of how easy or difficult it was to escape. Likewise, those who experienced personal distress tended to flee if they could, and helped only if fleeing was not an option. Overall, the pattern that emerged in five separate studies is that, regardless of ease or difficulty of escape, empathic individuals provided help about 75% of the time. Likewise, those who experienced personal distress and could not escape easily tended to help at approximately the same level, about 79%. In contrast, when escape was easy for the personally distressed, their level of helping dropped dramatically—to about 30%.

Based on these and other findings that are consistent with the empathy-altruism hypothesis (Sibicky et al., 1995), can we conclude that people who help due to empathy are motivated by true altruism? Certainly, Batson and most social scientists think there is compelling scientific evidence for this view (Batson, 2011; Fetchenhauer et al., 2007). Yet while empathy may indeed induce altruistic helping, additional research suggests that an important factor in actually triggering empathic feelings toward those in need is whether we highly value their welfare in the first place (Batson et al., 2007; Stürmer et al., 2006). When the welfare of those in need is highly valued, we often experience empathy and are more likely to respond with altruistic helping (M. H. Davis et al., 2004). However, if we perceive victims' welfare as being of relatively low value, we are unlikely to empathize with

their plight (Stürmer et al., 2005). Consistent with evolutionary theory, this link between helping and empathic concern is much more pronounced in the context of kinship relationships than among strangers (Maner & Gailliot, 2007).

Given the importance of empathy as a motivator for helping, it is noteworthy that there is evidence that the ability to experience empathy is at least partly determined by the ability to accurately read people's faces for emotions signaling danger and distress. In a series of studies, Marsh and Ambady (2007) found that participants who were exposed to fear facial expressions experienced more empathy and a greater willingness to help than participants who were exposed to neutral facial expressions. They further found that the participants who showed the greatest prosocial responding were those who recognized facial expressions of fear most accurately. Overall, these findings are consistent with the survival value hypothesis discussed in Chapter 4 (section 4.3a). Marsh and Ambady contend that the facial expression of fear serves as a *distress cue* to bystanders, triggering increased perceptual attention and empathic arousal. These findings are also consistent with one of the main insights from Darley and Latané's bystander intervention model: People are most likely to behave prosocially when they accurately interpret situational cues signaling that something is wrong and help is needed.

Because the experience of empathy often induces a helping response, is it possible that we are sometimes wary of feeling empathy out of concern for the costs of helping? This *empathy-avoidance hypothesis* assumes that we have an implicit knowledge of the empathy-helping relationship, and this knowledge sometimes causes us to actively avoid feeling empathy when we believe the cost of helping will be high. This collapse of compassion is most often motivated by self-interest, and research suggests that it accounts for many instances of nonintervention. For example, in a series of experiments, when people believed that helping a homeless man would entail considerable time and effort, they actively avoided situations in which their empathy for this man would be aroused (Shaw et al., 1994). Because helping large numbers of people is more costly than helping single individuals, empathy avoidance is especially likely when the number of people in need of help increases (Daryl & Keith, 2011). In essence, people often "turn off" their empathy in the face of mass suffering or when they otherwise conclude that helping will entail heavy costs (Slovic, 2007). These findings suggest that even normally softhearted people can steel themselves to the suffering of others if they avoid an empathic connection. Consider this the next time you pass a homeless person on the street or learn of a disaster affecting large numbers of people. Are you actively avoiding an empathic response because the perceived costs of helping are too great?

> *"One death is a tragedy; one million is a statistic."*
>
> —Joseph Stalin, Soviet Union premier, 1878–1953

Section Summary

- The model of bystander intervention focuses on the influence that bystanders have on prosocial behavior.
  - Audience inhibition effect: Bystanders inhibit people from defining dangerous situations as emergencies.
  - Diffusion of responsibility: Bystanders make people feel less personally responsible for helping.
- The arousal:cost-reward model focuses attention on the perceived costs of prosocial behavior.
- Greater helping often follows good moods, but we may sometimes try to eliminate negative moods by helping others.

- The empathy-altruism hypothesis contends that

  bystanders who experience empathy will help to provide comfort for victims and

  bystanders who experience personal distress will help victims only to reduce their own negative arousal state.

- Because empathy motivates helping, people sometimes actively avoid experiencing empathy when the cost of helping is high.

12.3 Whom Do We Help?

Thus far we have examined the *why, when*, and *who* of helping. Now it is time to ask the question, *whom* do we help? Are some people more likely to receive help than others?

12.3a We Tend to Help Similar Others.

As we discovered in Chapter 6 (see section 6.3), our natural inclination to place people into "us" and "them" categories often sets the stage for treating them differently. Therefore, it isn't surprising that if we perceive a needy person as similar to us, we are more likely to lend assistance (Stürmer et al., 2005). For example, gay men were more willing than heterosexuals to volunteer at an AIDS service organization, and their willingness to help was strongest when their sexual identity was most salient (Simon et al., 2000). In general, studies indicate that we are most willing to help ingroup members who need assistance. As already discussed (see section 12.1e), this preference for providing ingroup help over outgroup help is more pronounced among people with a collectivist orientation than among those with greater individualist tendencies.

We often rely on physical cues in guessing people's ingroup-outgroup status. One salient physical cue often used in categorizing needy people into ingroups and outgroups is the clothes they wear. In a series of studies conducted at Lancaster University in England, individual students on campus observed a young man falling while jogging down a grassy hill; the jogger then proceeded to hold onto his ankle while shouting out in pain (M. Levine et al., 2005). The injured man was either wearing a Lancaster team soccer shirt, a rival Liverpool soccer shirt, or an unbranded, nonsoccer sport shirt. Consistent with the similarity hypothesis, when onlookers had been previously primed to think of themselves as Lancaster soccer fans, the injured man was more likely to be helped while wearing the ingroup shirt than while wearing the outgroup or nonbranded shirts. However, when onlookers had been previously primed to think of themselves simply as soccer fans, they were as likely to help the injured man while he was wearing a Liverpool soccer shirt as while he was wearing a Lancaster shirt; they offered less help to the non-soccer-related victim. Together, these findings indicate that not only are we more likely to help people who are similar to us but also perceptions of dissimilarity can be submerged by inducing or encouraging potential helpers to expand their ingroup social categorization.

(Adobe Stock)

Even in natural disasters, we are more likely to donate funds to help victims if we perceive that they are similar rather than dissimilar to us.

Given the cultural prejudice that still exists concerning sexual orientation issues, it is not surprising to find an anti-gay bias among heterosexual adults in their willingness to offer help to those in need. In one study examining this effect, Jason Ellis and Pauline Fox (2001) used an adaptation of the *wrong-number technique* in measuring helping behavior. In this research technique, a confederate places a telephone call to a randomly chosen phone number and informs the respondent that he or she has misdialed while calling from a cell phone. The confederate then asks the respondent to call the confederate's romantic partner and convey an important message, as the confederate's cell phone battery is running out. The phone number given to the respondent is that of the experimenters, who record whether or not the call is made and the gender of the caller.

(Adobe Stock)

We tend to help similar others. For example, gay men are more willing than heterosexuals to volunteer at an AIDS service organization, especially when their sexual identity has been primed.

In this field experiment, the two independent variables were the gender of the caller (male or female) and the sexual orientation of the caller. The caller's sexual orientation was indirectly identified during the phone call. In the lesbian condition, the female caller, who identified herself as Jane, stated that she was trying to reach her partner, Karen. In the gay condition, the male caller, who identified himself as Barry, stated that he was trying to reach his partner, John. In the two heterosexual conditions, the female caller mentioned her partner Barry and the male caller mentioned his partner Karen. The dependent variable was whether or not the participant placed the call within 5 minutes of the request for help.

As expected, when the caller was self-identified as gay or lesbian, respondents were much less likely to help than when the caller was self-identified as heterosexual (31% versus 50%). Consistent with the greater prejudice expressed by heterosexual men toward gay men compared to lesbians, male respondents were significantly less likely to give help to gay men than to lesbians (14% versus 48%). In contrast, female respondents did not significantly differ in their helping toward gay men and lesbians. These results suggest that although lesbians and gay men are discriminated against in helping, such discrimination does not appear to be equally applied to both groups by heterosexual men. This finding is consistent with previous research indicating that heterosexual men feel more negatively toward gay men than toward lesbians (Kite & Whitley, 1996).

Unlike sexual orientation issues, the influence that a victim's race has on helping behavior is far more complex. In a meta-analysis of 31 studies published from 1987 to 2002 that examined discrimination against Black people in helping situations, Donald Saucier and his coworkers (2005) did not find evidence of blanket discrimination. However, consistent with the prediction of aversive racism (see Chapter 6, section 6.2b), Black people were least likely to be helped when White bystanders could rationalize decisions not to help using reasons that had nothing to do with race. Specifically, when helping required lengthier, riskier, more difficult, and more effortful actions by potential helpers, White people were less likely to help Black victims compared to White victims. These findings suggest that potential helpers perceive higher costs for helping when the person who needs help is of a different race. This meta-analysis also found that when White bystanders were farther away from victims, victim race predicted whether help was offered: Black victims were offered help less often than White victims. Finally, the researchers found evidence that discrimination against Black people was more likely for higher-level emergencies requiring quick helping decisions compared to lower-level emergencies allowing for more decision time. In other words, race-based discrimination in helping is most likely to occur when the ability to control prejudicial responding is inhibited by having to make fast decisions.

How can we reduce this disparity in helping? A series of studies conducted by Sasha Kimel and her colleagues (2016) found evidence that, when it comes to providing help to members of another ethnic group for which our own group has a history of conflict, whether we help or not is significantly influenced by whether we are made aware of similarities versus differences between our group and the other group. In this research, Kimel focused on Jews and Palestinians, because these two groups not only share a close genetic heritage, they also have a long history of conflict. In one study, the researchers randomly assigned Jewish American and Palestinian American participants to read a news article that described Jews and Palestinians as either genetically similar or genetically different. Participants who read the "genetic similarity" article reported less antipathy and behaved less aggressively toward a Jewish or a Palestinian outgroup member during a subsequent task. Similarly, in an online survey, US Jewish community members expressed more support for Israeli–Palestinian peace efforts when they read a "genetic similarity" article than when they read a "genetic difference" article. Finally, a field study conducted in Israel found that Jewish Israeli participants who read about genetic similarities between the two groups reported increased support and hope for political compromise and decreased support for collective punishment and political exclusion compared to those who read about genetic differences. Together, these findings suggest that when we are reminded about our similar human heritage rather than our superficial differences, we are more likely to extend helping hands to people who we might otherwise define as "other" (Nai et al., 2018).

12.3b We Help Deserving Others, but We Also Blame Victims.

As discussed earlier in the chapter (section 12.1c), whether people receive help in times of need will partly depend on others' inferences about the causes of their troubles. Following the principles of attribution theory discussed in Chapter 4 (see section 4.4a), we are more likely to help someone if we attribute the cause of their problems to external or uncontrollable factors rather than internal ones. For example, college students state that they would be more willing to lend an acquaintance money or give their lecture notes if the need arose due to an uncontrollable cause, such as illness, rather than an internal, controllable cause, such as laziness (Weiner, 1980). Similarly, people's willingness to help individuals who are experiencing financial hardship or disadvantage is substantially shaped by what they believe caused these unfortunate events in the first place (Dionne, 1991). Put simply, if we believe people could not have prevented their predicament, we are more likely to help.

(Adobe Stock)

Do you believe that the world is a fair and equitable place, with people getting what they deserve? If so, how does assigning blame to accident victims reinforce your just-world beliefs?

The reason we are more likely to help deserving others is due to the *norm of social justice* discussed earlier in the chapter. However, the problem in making inferences about the cause of a victim's troubles—and thereby deciding if she or he deserves our help—is that most of us believe in a just world (Callan et al., 2006). The **just–world belief** is a belief that the world is a fair and equitable place, where people get what they deserve (Lerner, 1997; Lucas et al., 2009). According to Melvin Lerner (1980), this social belief system is a defensive reaction to the sometimes cruel twists of fate encountered in life; it is comforting because most of us conceive ourselves to be good and decent people. By believing in a just world, we have the illusion that we have more control over our lives than we actually do (Lipkus et al., 1996).

just–world belief

A belief that the world is a fair and equitable place, where people get what they deserve in life

Although just-world believers often psychologically benefit from their positive illusions about how the world operates, this social belief can lead to some unfortunate social

judgments, as illustrated by people's tendency to blame rape victims for their sexual assaults (Bell et al., 1994; Hayes et al., 2013). Strong believers in a just world tend to make *defensive attributions* when explaining the plight of victims. In other words, they are prone to blame people for their misfortunes. Research demonstrates that this tendency to blame victims is strongest when people feel personally threatened by an apparent injustice (Hafer, 2000). Thus, accident victims are more likely blamed for their fate if they are similar to us on some relevant characteristic, or if their injuries are severe rather than mild (Burger, 1981). By disparaging the victim, we reassure ourselves that the world is not only just, but also that we are not likely to fall victim to similar circumstances ("Because I'm really not like *them*").

Although many people believe in a just world, individual differences exist in the extent to which this belief is held. Because those with a strong just-world belief are more likely to be unsympathetic to victims, it's not surprising to find that they generally are also less likely to help those in need. Does this mean that people who are strong believers in a just world are always unhelpful bystanders? No. When a victim's suffering can be easily and promptly corrected, strong believers in a just world are much more likely to help than when the problems are of a widespread and enduring nature (Bierhoff et al., 1991). The likely reason for this effect is that helping someone who needs just a little bit of assistance to get back on track confirms the just-world believer's perception that the truly deserving will not be unfairly punished. Thus, firm believers in a just world are much more likely to be one-time contributors to Billy's heart operation fund than they are to be continuing contributors to a fund in search of a cure for AIDS or a program to promote affordable housing.

Section Summary

- We are most likely to help similar others.
- We are also most likely to help deserving others.
- One unfortunate consequence of believing in a just world is that we tend to blame people for their misfortunes.

12.4 Are There Hidden Costs for Help Recipients?

Throughout the chapter we have examined some of the factors that inhibit bystanders from providing assistance to others—but what if help is given? How do recipients typically respond? And what might prevent a person in need from asking for help?

12.4a Being Unable to Reciprocate Help Can Create Stress.

People recognize that receiving help is a mixed blessing. Those who receive help often respond with feelings of relief and gratitude, but they also often feel embarrassed, indebted, and even inferior (Nadler, 1991). The contradictory feelings that often flow from prosocial actions help to explain why victims are sometimes less-than-gracious recipients of a helping hand. The potential that help giving has for producing resentment and hostility is aptly recognized in an Indian proverb that states, "Why do you hate me? I never even helped you."

(Adobe Stock)

Why does receiving help sometimes cause people to suffer a loss of self-esteem? Would allowing them to reciprocate the help in some manner bolster their feelings of self-worth?

In attempting to explain why receiving help may at times evoke unpleasant emotions, social psychologists have turned their attention to the fact that in exchange relationships (refer to Chapter 10, section 10.1b), people are especially attentive to *reciprocity*—a mutual exchange of resources. *Equity theory* (Chapter 10, section 10.5b) contends that people seek to maintain equity in their social relationships by keeping the exchange ratio of resources balanced, and they feel distressed when inequity exists (Hatfield et al., 1978). When people receive help, they commonly experience a feeling of inequity because, by definition, they realize they have a more favorable ratio of rewards to contributions than does the helper. Under such circumstances, recipients of help are motivated to restore actual equity by trying to return the favor (Greenberg & Frisch, 1972). But what happens if they cannot reciprocate?

Research indicates that recipients not only find nonreciprocal helping distressful but also are less likely to ask for assistance in the first place if they don't think they can repay the person in some way (Riley & Eckenrode, 1986). If they aren't in a position to refuse the help, they might sometimes deal with their inability to restore equity by resenting the helper (Gross & Latané, 1974). In essence, help givers may be resented if they don't allow recipients to restore equity in some way and thereby allow those who have been helped to live up to the reciprocity norm.

"It is natural to avoid those to whom we have been too much obliged."

—Héloise, French abbess, c. 1090–1164

12.4b Receiving Help Can Threaten Self-Esteem.

The notion that receiving help may produce inequity and feelings of distress in a relationship suggests that it may also pose a threat to the recipient's self-esteem. For instance, in our individualist culture we place a high premium on self-reliance, and this value is often a key defining feature of our self-concept. Receiving help from someone puts us into a dependent role that is contrary to this individualistic value. According to Jeffrey Fisher and Arie Nadler's **threat–to–self–esteem model**, if receiving help contains such negative self-messages, we are likely to feel threatened and respond negatively (Nadler & Fisher, 1986). More specifically, this model states that when receiving help, we can perceive it as either *self-supporting* or *self-threatening*. Aid will be supportive to the extent that it (1) conveys caring for the recipient and (2) provides real benefits (Dakof & Taylor, 1990). It will be threatening to the extent that it (1) implies an inferiority-superiority relationship between recipient and helper and (2) conflicts with important cultural values of self-reliance and independence (Dunkel-Schetter et al., 1992).

"A charitable deed must be done as a duty which man owes to man, so that it conveys no idea of the superiority of the giver or the inferiority of the receiver."

—The Koran 2:262, sacred scripture of Islam

threat–to–self–esteem model

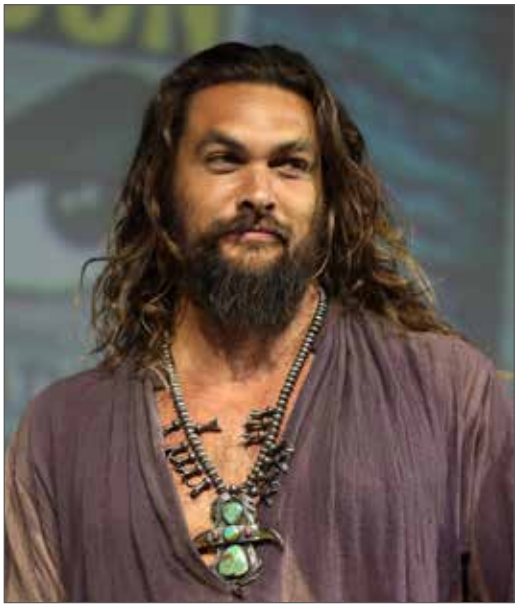
A theory stating that if receiving help contains negative self-messages, recipients are likely to feel threatened and respond negatively

Revisiting our previous discussion of help giving between conflicted groups, Nadler and Samer Halabi (2006) tested the threat-to-self-esteem model among Arab Israelis, an ethnic group within Israel that has lower social status than the more mainstream Jewish Israelis. The researchers predicted that Arab Israelis would be especially likely to react negatively to help from Jewish Israelis when they perceived such help as threatening to their desire for equality by implying that they are dependent on the higher-status Jewish Israelis. They also predicted that Arab Israelis who strongly identified with other Arab Israelis would be much more likely to reject such help because they would experience a stronger self-esteem threat than those who self-identified less with their ethnic group. In a series of both lab and field experiments, the researchers' hypotheses were supported: Arab

Israelis were much more likely to not seek and also to reject help from Jewish Israelis, and to evaluate the would-be helpers more negatively, when the help was perceived to imply dependency. This negative reaction was especially likely among high ingroup identifiers, probably because they are more likely than low ingroup identifiers to have an "us versus them" mindset regarding their ethnic group and Jewish Israelis. Therefore, just as an "us versus them" mindset can prevent people from helping outgroup members, it can also prevent them from accepting help from those in the outgroup due to self-esteem threat.

Characteristics of the helper and the recipient's own levels of self-esteem will also determine whether aid is seen as supportive or threatening. Being helped by a friend, sibling, or a *similar* person is more likely to prompt social comparison, which in turn may call into question the recipient's level of competence (Searcy & Eisenberg, 1992). This is especially true when the helpful task involves something important to the recipient's self-concept. For example, if you are an aspiring psychologist who does not understand the subtleties of a particularly complex theory, asking a fellow student would probably be more threatening to your self-esteem than asking your psychology professor. Why? The threat-to-self-esteem model would hypothesize that asking a fellow student for help would be more likely to reflect negatively on your own level of competence in this area than seeking help from the professor—a person who is clearly dissimilar to you in psychological training and knowledge (Nadler et al., 1983).

In one experiment testing this hypothesis, Nadler (1987) asked Israeli high school students to solve a series of anagrams when working alongside a same-sex partner. While describing the anagrams task the researchers told half of the students that their performance would provide accurate information on their intelligence and creativity. The rest were told that the task had no association with any important intellectual qualities. All the students were also told that during the task, they could ask their partner for help if they wished. Just before they began the anagrams, they were shown an attitude questionnaire their partner had supposedly completed a few minutes earlier. Half of these questionnaires were constructed to be similar to the participants' own attitude questionnaire responses, while the others were dissimilar in content. The question of interest was under what conditions the students would be most likely to avoid help seeking.



("Jason Momoa," by Gage Skidmore from Peoria, AZ, United States of America, CC BY-SA 2.0, via Wikimedia Commons)

Most men consider asking for help to be a sign of weakness. This is even portrayed by macho movie characters.

Consistent with the threat-to-self-esteem model, students were less likely to seek help from their partners when they believed they were similar to them, especially when the task was defined as requiring skills important to self-esteem—namely, intelligence and creativity. This reluctance to ask for help from similar others was greatest among adolescents high in self-esteem, who supposedly had the most self-regard to lose on these important personal qualities. One positive consequence of this self-esteem threat is that people who feel threatened in this manner become motivated to develop the necessary skills so that in the future, they will not have to seek help.

Section Summary

- The threat-to-self-esteem model hypothesizes that if receiving help poses a threat to self-esteem, the recipient may respond negatively, disparaging the help and the helper.
- Help recipients may resent help givers if they are not given the opportunity to return the favor in some way.

Applications

Can Social Psychological Knowledge Enhance Prosocial Behavior?

In October of 2021 a woman riding a train outside of Philadelphia was sexually assaulted by a man in front of onlookers. The assault occurred over 8 minutes and the other passengers onboard took photos and videos with their cell phones, but they did not intervene or help the woman being attacked. The assault was stopped only after an employee boarded the train, noticed what was happening, and called 911 for police assistance. Timothy Bernhard, police superintendent stated about the incident, "If you see something horrendous like this horrible incident, you have to do something, you have to intervene. I think that it starts here when we have to definitely go back to some decency, where we help each other out and we look out for each other."

It is very likely that at some point in your life you will find yourself in an emergency situation. After reading this chapter you might wonder, "Will someone help me?" Fortunately, recent research suggests that often we will get help when needed. Researchers analyzing video footage of public conflicts that were recorded by closed-circuit television cameras in South Africa, United Kingdom, and Netherlands, found that at least one bystander intervened in 90% of the recorded conflicts (Philpot et al., 2020). Bystanders were especially likely to intervene when the conflict included an act of aggression indicating the victim was in danger, consistent with our previous discussion that danger can act as a signal that the victim needs assistance (Lindegaard et al., 2022). Fortunately, only a small percentage (3.6%) of the bystanders who intervened were physically harmed because of providing assistance (Liebst et al., 2021). These findings are hopeful that in real world conflicts bystanders do help and rarely does their assistance result in their being harmed in the conflict.

Learning About the Barriers to Helping

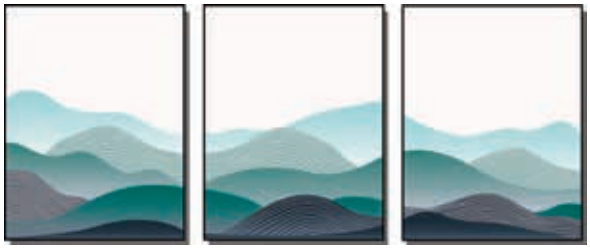
Social psychological knowledge truly can facilitate prosocial behavior and promote bystander intervention. Jane Piliavin, codeveloper of the arousal:cost-reward model, believes that we must understand that in our individualistic society we have been socialized to leave people alone and to mind our own business. Such an upbringing can effectively inhibit intervention:

> In our society, we are trained from an early age to see the problems of other people as "none of our business," to close our feelings off from others' experiences. We have only recently "discovered" child abuse, spouse abuse, incest, and other family "traditions" because of the sanctity of the home and respect for others' privacy. This tendency saves all of us a great deal of emotional distress, but it contributes to the bureaucratization of helping in our society and, we believe, to the increasing alienation and self-absorption of which we all are currently being accused. We may need more training as busybodies; respect for privacy prevents empathic arousal, and directs one's attention to the costs of intervention, specifically the cost of being thought "intrusive." (Piliavin et al., 1981, p. 254)

In an empirical demonstration of the empowering effects of social psychology knowledge, Arthur Beaman and his coworkers (1978) randomly assigned students to listen to either a lecture on Latané and Darley's bystander intervention research or a topic irrelevant to helping. Two weeks later, while participating in a seemingly unrelated study, these same students each walked past a person lying on the ground. A confederate accompanied each student and acted unconcerned at this possible emergency. How did the students react? Only 25% of those not previously exposed to the bystander intervention lecture stopped to offer assistance. This low prosocial response rate is consistent with Latané and Darley's own findings. Undoubtedly, these students took their cue from their unconcerned companion and defined the situation as a nonemergency. In contrast, students who had previously learned about the paralyzing effects of fellow bystanders on the intervention process acted very differently: 43% stopped to help the person.

Research supports the value of teaching bystander intervention to adolescents and college students for emergency situations that are likely to occur in their lives. As noted in Chapter 11 (section 11.5), sexual aggression on college campuses is a very prevalent problem. Numerous studies find that sexual assault awareness programs are most effective when they train adolescents and young adults to notice the warning signs of an assault and to take personal responsibility for intervening (Park & Kim, 2023). Bystander intervention training is also effective in promoting intervention for social problems such as cyberbullying and alcohol-related emergencies on college campuses (Anthenien et al., 2017; Torgal et al., 2023).

In a very real and important sense, making people aware of the social dynamics of emergencies and the inhibiting effects of socialization may be an important key to unlocking people's prosocial tendencies. These findings suggest that simply knowing about the social barriers to helping can free one from their antisocial effects. We hope that with the knowledge you have gained from this textbook you all are empowered to engage in prosocial behaviors for the benefit of others and our shared social world.



The Big Picture

In this chapter, we addressed five basic questions about helping: Why do we help? Who is most likely to help? When do we help? Whom do we help? And, are there hidden costs for those who receive help? Now, let's turn the tables a bit: What if you are the one who needs help? How can you use your social psychological knowledge to increase the likelihood that others will assist you?

The bystander intervention model provides valuable insights in this regard, for it tells you that deciding to intervene in a possible emergency involves a rather complex set of decisions. If bystanders make an incorrect decision at any point in this process, they will not help you. Faced with these facts, as the victim, you must attack and neutralize the psychological factors that cause nonintervention. Essentially, you need to capitalize on the self's ability to construct social reality. You can do so by actively and forcefully altering people's social perceptions so that they adopt helping social roles.

The first psychological hurdle is the audience inhibition effect, in which the fear of being negatively evaluated, combined with the tendency to look to others for further information, leads bystanders to identify emergencies as nonemergencies. As the victim, you can eliminate this inhibition by clearly letting everyone know that this is an emergency and you need help.

After clearing this hurdle, you must next attack the diffusion of responsibility, which is bystanders' tendency to believe they are less personally responsible for helping when others are present. Here, you should implore specific people to help you, because it's hard to deny assistance when singled out of the crowd.

Finally, because some people may want to help but are unsure what to do, you can overcome this last hurdle by specifically giving them instructions ("You! Call an ambulance!" "You! Gather my belongings and bring them to me!"). Using your most authoritative voice will further increase obedience. And obedience is exactly what you are seeking here. In all likelihood, you probably won't need to direct everyone who is assisting you. Once you get the ball rolling, others are likely to spring into action on their own. However, the more quickly you consciously transform the social dynamics to facilitate helping, the better off you will be.

Key Terms

Websites

Accessed through https://www.bvtlab.com/sop9

Websites for this chapter focus on research and theory on helping, including how to raise children to be more altruistic and personal life stories of people who help others.

- **American Psychological Association**

  The American Psychological Association has a web page that offers suggestions on how to raise children to be more altruistic and supports the suggestion with relevant theories.

- **Giraffe Project Heroes Program**

  This website highlights the personal life stories of people who stick their necks out for the common good.

- **The Altruistic Behavior Institute**

  This website is devoted to the institute founded in 1982 by Dr. Samuel Oliner and Dr. Pearl Oliner, who recognized the need for more research into the areas of altruism and prosocial behavior.

- **The University of Illinois at Chicago Bystander Intervention Web Page**

  This is an education and training page about bystander intervention on the sexual misconduct site for the University of Illinois at Chicago.

- **The National Sexual Violence Resource Center**

  This website contains resources and publications for survivors, friends and family, and advocates and educators.