Dimensions of Moral Emotions

Kurt Gray\textsuperscript{1} and Daniel M. Wegner\textsuperscript{2}

\textsuperscript{1}University of Maryland

\textsuperscript{2}Harvard University

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Corresponding author:

Kurt Gray
3123G Biology-Psychology Building
Department of Psychology
University of Maryland
College Park, MD 20742
kgray@psyc.umd.edu
Abstract

Anger, disgust, elevation, sympathy, relief. If the subjective experience of each of these emotions is the same whether elicited by moral or non-moral events, then what makes moral emotions unique? We suggest that the configuration of moral emotions is special – a configuration given by the underlying structure of morality. Previous research suggests that people divide the moral world along the two dimensions of valence (help/harm) and moral type (agent/patient). The intersection of these two dimensions gives four moral exemplars – heroes, villains, victims and beneficiaries – each of which elicits unique emotions. For example, victims (harm/patient) elicit sympathy and sadness. Dividing moral emotions into these four quadrants provides predictions about which emotions reinforce, oppose and complement each other.
Dimensions of Moral Emotions

Is there anything special about “moral emotions?” The list of moral emotions seems no different than non-moral emotions: anger, elevation, disgust, happiness and the like can be experienced from both moral and non-moral situations. While the elicitors of moral emotions may be unique – moral situations – it is unclear what inferences this supports; whether people are disgusted by rotten meat or rotten deeds, they still feel disgusted. Though the subjective experience of moral and non-moral emotions may be the same, we suggest that the structure of moral emotions is unique. In this paper, we advance that the variety of moral emotions elicited by observing moral situations can be charted on a unique two-dimensional space – a space dictated by the underlying dyadic structure of morality.

Dimensional approaches of emotion have a long history in psychology (e.g., Russell, 1980; Wundt, 1897) and even some history in moral psychology (Haidt, 2003). Non-moral emotions appear to be best described by the dimensions of valence (good/bad) and arousal (high/low) (Russell, 1980), which stem from the underlying structure of the body and brain (Bliss-Moreau & Barrett, 2009). Here, we suggest that the underlying structure of morality also defines a two dimensional space for moral emotions.

While moral judgments concern a number of domains (Haidt & Graham, 2007), the core of right and wrong are the acts – and the people – that cause help or harm (Turiel, 1983). Analyses of moral judgments find that the vast majority of them concern harm (Robinson & Kurzban, 2006), and even seemingly non-harm domains are understood in the currency of harm (Gray & Wegner, 2011). For instance, people who see flag burning or having sex with a dead chicken as morally wrong cannot help but see harm in those actions (Desclioli, 2008). Thus, we
propose that the first dimension in the space of moral emotions is valence, anchored by harm, and its opposite, help.

The second dimension stems from the fundamentally dyadic structure of morality. Most moral acts, whether evil (e.g., assault) or good (e.g., rescue), require at least two different people – one person to assault or rescue (a moral agent); and another to be assaulted or rescued (a moral patient) (Gray & Wegner, 2009). Of course, some questionable acts seem to involve an isolated moral agent or patient (e.g., suicide or smoking), but research shows that even these are squeezed into a dyadic template by imagining a patient harmed by wrong deeds (DeScioli, 2008), or an agent to blame for isolated suffering (Gray & Wegner, 2010a). Importantly, the more people are seen as moral agents, the less they are seen to be moral patients, and vice versa, a phenomenon called moral typecasting (Gray & Wegner, 2009). This perceptual opposition between moral agents and patients allows them to occupy opposite ends of a second dimension, that of moral type (agent/patient).

Mapping Emotions onto Morality

Combining the help/harm dimension with the agent/patient dimension yields a two-dimensional space on which a variety of moral emotions can be plotted (Figure 1). These emotions are elicited not just from moral situations, but from people – either agents or patients – within moral situations. Indeed, moral judgments are often more concerned with the people who complete acts rather than acts themselves (Pizarro, 2011). Such a person-centric approach allows moral emotions to extend beyond specific moral acts to those people who are characteristically moral agents (i.e., heroes and villains) or moral patients (i.e., victims and beneficiaries). The four quadrants and their respective emotions are listed below.

*Agent/Help*
Heroes such as Mother Teresa or the Dalai Lama evoke inspiration, elevation, admiration, and perhaps awe (Algoe & Haidt, 2009).

*Patient/Help*

Those helped by others, such as charity recipients, evoke relief and general happiness (Cialdini et al., 1987).

*Agent/Harm*

Villains such as Hitler and serial killers evoke anger and disgust (Rozin, Lowery, Imada, & Haidt, 1999).

*Patient/Harm*

Those victimized by others evoke sympathy and sadness (Batson, Duncan, Ackerman, Buckley, & Birch, 1981), at least in cases where observers are interpersonally distant (Gray & Wegner, 2010b)

**Implications of Moral Dimensions for Emotion**

A dimensional mapping not only describes emotional experience in terms of more fundamental processes, but makes unique inferences about the relations among emotions. Three such inferences are made below

*Inference 1: Emotions within the same quadrant reinforce each other.*

Emotions within each quadrant should be mutually reinforcing. For instance, when viewing villains, the experience of anger should encourage the experience of disgust and vice versa (J. Moll et al., 2005).

*Inference 2: Emotions in different quadrants oppose each other.*

Emotions in different quadrants should be mutually exclusive in experience. Thus, experiencing anger (agent/harm) towards someone should make it difficult to experience
sympathy towards the same person (patient/harm) (Weiner, 1980). Importantly, moral
typecasting suggests that the opposition between agent and patient emotions should stricter than
between help and harm emotions (Gray & Wegner, 2009).

Inference 3: Agent emotions generate complementary patient emotions and vice versa.

Dyadic morality means that morality needs both an agent and patient. Thus, isolated
agent emotions towards someone (e.g., anger) should potentiate patient emotions toward another
person (e.g., sympathy), and vice versa. Studies finding that perceptions of suffering increase
blame point to this effect (Gray & Wegner, 2010a).

Conclusion

Moral emotions are elicited by moral events and exemplars, but more importantly, they
follow the underlying structure of morality. This structure consists of the dimensions of valence
(help/harm) and moral type (agent/patient) and allows the variety of moral emotions to be placed
into one of four categories. Of course, any particular dimensional or categorical mapping will be
incomplete and there are always alternative mappings. Here, we focused solely on emotions
experienced by observers of moral situations, but other important moral emotions are those
experienced by actors; an additional self/other dimension (Haidt, 2003) could incorporate such
important emotions such as gratitude (Bartlett & DeSteno, 2006), guilt and shame (Keltner &
Buswell, 1996). Nevertheless, the conceptual space of valence and moral type allows not only a
simplification of moral emotions, but also makes important theoretical predictions about which
emotions reinforce, oppose and complement each other. Such an approach accords with both
subjective experience and the way people divide up the moral world into villains, victims,
beneficiaries and heroes.
Figure 1. The structure of morality and corresponding moral emotions, mapped by valence (help/harm) and moral type (agent/patient). Emotions in each quadrant are elicited by their respective exemplar. For example, villains – those who harm others – elicit anger and disgust. Emotions in the same quadrant reinforce each other, those in different quadrants oppose each other, and agent and patient emotions complement each other.
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