Distinct Sources of Self-Discrepancies: Effects of Being Who You Want to Be and Wanting to Be Who You Are on Well-Being

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Self-discrepancy theory contends that well-being depends, in part, on the amount of overlap between one’s actual and ideal selves. There is a variety of supportive evidence, but Rabbi Hyman Schachtel’s (1954, *The real enjoyment of living*, New York, NY, Dutton) contention that “happiness is not having what you want, but wanting what you have” (p. 37) highlights that a distinction between two potential sources of overlap between one’s actual and ideal selves has been overlooked. Whereas most measures of ideal self-discrepancies index the extent to which people are who they want to be (i.e., *ideal self-actualization* [ISA]), others index the extent to which people want to be who they are (i.e., *actual self-regard* [ASR]). In several studies, we measured ideal self-actualization by asking people to identify traits they would ideally like to possess and rate the extent to which they had these traits. We also measured actual self-regard by asking participants to identify traits they possessed and indicate the extent to which they wanted those traits. In all four studies, ideal self-actualization and actual self-regard were distinct from one another (rs = .24 to .32) and both were distinct from self-compassion (Study 1) and global self-esteem (Study 4). Moreover, ASR consistently accounted for unique variance in aspects of well-being (e.g., subjective well-being, positive affect, psychological growth) and ISA often did so. Finally, a longitudinal study provided evidence that actual self-regard is a precursor, but not a consequence, of subjective well-being (Study 4).

Keywords: self, self-discrepancies, well-being, self-concept, self-esteem

A variety of findings provide evidence for the contention of James (1890), Freud (1933/1965), Rogers (1954, 1961), and, most recently, Higgins (1987) that well-being depends, in part, on the amount of overlap between one’s actual and ideal selves (Carver, Lawrence, & Scheier, 1999; Cheung, 1997; Boldero & Francis, 2000; Francis, Boldero, & Sambell, 2006; Hardin & Lakin, 2009; Shah, Higgins, & Friedman, 1998). Specifically, those with higher levels of *actual–ideal self-discrepancies* (i.e., lower overlap between the actual self they have and the ideal self they want) have lower levels of well-being. Rabbi Hyman Schachtel’s (1954) contention that “happiness is not having what you want, but wanting what you have” (p. 37) highlights that there are two conceptually distinct sources of these actual–ideal self-discrepancies. Specifically, the extent to which people have the traits they want to have may be distinct from the extent to which they want the traits they have. Moreover, these two sources of actual–ideal self-discrepancies may have distinct consequences for well-being.

It might seem that the extent to which people have what they want (that is, pr[wantHave]) must equal the extent to which they want what they have (that is, pr[haveWant]). In fact, this inference is no more valid than using the premise that all cats are animals (that is, pr[animal|cat] = 1) to conclude that all animals are cats (that is, pr[cat|animal] = 1; see Cacioppo & Tassinary, 1990). Once this logical fallacy, which is known as *affirming the consequent*, is set aside, Schachtel’s (1954) contention that the extent to which people want what they have and have what they want can indeed be distinct. Larsen and McKibban’s (2008) findings not in terms of the universe of possessions one might have and want, but in terms of the universe of *traits* one might have and want. Doing so gives rise to the possibility that the extent to which people have the traits they want and want the traits they have are conceptually distinct. Those who have the traits they want can be characterized as having high levels of *ideal self-actualization* (ISA) because they have attained, or actualized, their desired ideal selves. Those who want the traits they have can be characterized as having high levels of *actual self-regard* (ASR) because they have positive regard for their actual selves. Both ISA and ASR reflect overlap between the wanted ideal self and the currently possessed actual self. By extension, low levels of both ISA and ASR represent sources of actual–ideal self-discrepancies. The fundamental distinction is...
what is used as the frame of reference: what one wants or what one
has.

The original measure of self-discrepancies, Higgins’ Selves Questionnaire (Higgins, Bond, Klein, & Strauman, 1986), did not
distinguish between ISA and ASR because it used neither the actual
nor ideal self as the frame of reference. On the Selves Questionnaire, participants list the traits composing both their ideal
and actual selves. Overall actual–ideal self-discrepancy scores are
calculated by comparing the words that appear on the two lists.
With no particular frame of reference, matches (e.g., “I want to be
honest” “I am honest”) reflect both high ISA (e.g., “I want to be
honest and I am”) and ASR (e.g., “I am honest and I want to be”).

Subsequent measures of actual–ideal self-discrepancies can be
more precisely viewed as measures of ISA or ASR because, in
relying on a specific frame of reference, they have focused on one
of the two sources of self-discrepancies and overlooked the other
source. Most researchers have taken the ideal self as the frame
of reference and thus have measured ISA (Carver, Lawrence, &
Scheier, 1999; Cheung, 1997; Francis, Boldero, & Sambell, 2006;
Hardin & Lakin, 2009; Shah, Higgins, & Friedman, 1998). Par-
icipants generate a list of traits they ideally want to possess and
then indicate the extent to which they actually possess those traits.
Higher ratings are interpreted as indicating lower actual–ideal
self-discrepancies, but they can be interpreted more precisely as
indicating higher ISA (“Do you have the traits you want?”).
Boldero and Francis (2000, Study 5) took the actual self as the
frame of reference and thus measured ASR. They asked partici-
pants to describe who they actually were as students and then
indicate the extent to which their ideal student selves matched
those descriptions. They, too, interpreted higher ratings as indicat-
ing lower actual–ideal self-discrepancies, but these ratings can be
interpreted more precisely as indicating higher ASR.

Note that we have not merely replaced a serviceable set of terms
(lower actual–ideal self-discrepancies) with a new set of terms
(high ideal self-actualization, high actual self-regard). Rather, we
have recognized that people’s ratings on each of these two types of
seemingly similar measures do not assess overall actual–ideal
self-discrepancies (i.e., the amount of overlap between the actual
and ideal selves; Higgins, 1987) in the way that the Selves Quest-
ionnaire does. They each assess one of the two sources of actual–
ideal self-discrepancies, much in the same way that verbal and
quantitative subscales on an intelligence test assess specific as-
pects of general intelligence.

Despite (apparently unwittingly) failing to recognize the con-
ceptual differences in actual–ideal self-discrepancies yielded by
measures of overall self-discrepancies (Higgins et al., 1986; Pel-
ham & Swann, 1989), ISA (e.g., Hardin & Lakin, 2009; Shah et
al., 1998), and ASR (Boldero & Francis, 2000), researchers have
shown that all three types of measures are associated with affective
outcomes. When treated as measures of global actual–ideal self-
discrepancies, however, measures of ISA and ASR offer somewhat
limited content validity. Moreover, they have each been used in
isolation, which leaves questions about whether ISA and ASR are
empirically distinct and whether they have distinct affective con-
sequences unanswered.

We therefore conducted four studies to test Schachtel’s (1954)
maxim in the domain of the self-concept. In Study 1, we consid-
ered whether ISA (i.e., how much people have the traits they want)
and ASR (i.e., how much people want the traits they have) are
distinct from each other and from the potentially similar construct
of self-compassion and, if so, whether either or both account for
unique variance in well-being. In Study 2, we included negative
affect (specifically, depressive symptoms) as another indicator of
subjective well-being. In Study 3, we considered whether ASR,
rather than being unambiguously good, reflects complacency by
examining the relations between ASR and personal growth. Study
4 addresses a number of questions, including whether ASR and
ISA are precursors versus consequences of well-being.

Study 1

The goal of Study 1 was to provide an initial investigation of the
relationship between ISA and ASR and of their relationships with
well-being. In addition to examining whether ASR is distinct from
ISA, we also examined whether it is distinct from self-compassion.
Self-kindness and self-judgment, two of several aspects of self-
compassion identified by Neff (2003), deal with one’s attitude
involving the content of the current self, which make them concep-
tually similar to ASR. However, whereas self-kindness and self-
judgment involve tolerating one’s negative traits (e.g., “I’m toler-
ant of my own flaws and inadequacies,” Neff, 2003, p. 231), ASR
involves actually wanting to be who one is. We therefore suspected
that ASR would be distinct from self-kindness and self-judgment.

Method

Participants. Participants were 220 undergraduates. In this
and all studies, participants were recruited from introductory psy-
chology classes at Texas Tech University in exchange for course
credit. Excluding data from four participants with outlying data on
the measure of ASR (i.e., scores more than 3.25 SD from the mean,
confirmed with visual inspection of histograms; Tabachnick &
Fidell, 2006) yielded a final sample of 216 participants1 (72.6%
female, 61.1% European American, 63.0% first-year students,
average age of 18.92 years, SD = 1.35 years).

Measures and procedure. Participants completed all mea-
ures online via a Web-based survey. Participants were required to
enter a unique code number that allowed us to identify and remove
duplicate responses. As is standard in self-discrepancies research
(e.g., Francis, Boldero, & Sambell, 2006; Higgins, Klein, & Strau-
man, 1985), participants first completed the measures of ASR and
ISA (counterbalanced) followed by our criterion measures. Fol-
lowing standard approaches (e.g., Carver et al., 1999; Cheung,
1997; Francis et al., 2006; Hardin & Lakin, 2009; Shah et al.,
1998), we measured ISA by asking participants to list five words
to describe “the type of person you would IDEALLY like to be;
the type of person you wish, desire, or hope to be.” Participants
then indicated “how much each of the qualities listed . . . actually
describes who you are now,” using a 5-point rating scale from 1
(does not describe me at all) to 5 (completely describes me).
Average ratings are typically reverse-scored to yield an index of

1 We excluded outliers so that these extreme scores would not inflate the
correlations among variables in our subsequent analyses. Including the
outliers in analyses did indeed increase the variance accounted for (e.g.,
from 11% to 13%), but did not change the conclusions of the analyses from
any of the four studies. Thus, we report the more conservative results from
analyses that exclude the outliers.
ideal self-discrepancies. Hardin and Lakin (2009) have demonstrated that a similar measure reliably predicts positive and negative affect in ways predicted by Higgins’s (1987) self-discrepancy theory. For ease of comparison with our measure of ASR, we did not reverse-score average ratings, such that higher scores reflect greater ISA: People with higher scores were who they wanted to be more than those with lower scores.

We modified the measure of ISA to assess ASR. Participants listed five words to “describe the type of person you are right now; the traits you actually do have.” Participants then answered, “To what extent do you WANT each of these traits?” on a 5-point scale from 1 (“I do not want to be this kind of person at all”) to 5 (“I want to be this kind of person very much”).2 The average rating is an index of ASR, such that individuals with higher scores wanted to be to who they were more than those with lower scores. We did not ask participants to “rate how ideal each of these traits is,” because such a question would have assessed the normative desirability of the traits, as opposed to how desirable they were to the individual participant.

Given both the ideographic nature of the measures of ISA and ASR and the likelihood that individual participants will vary in the extent to which they want (have) various traits, there is no requirement that interitem reliabilities for these measures be especially high. For example, participants who described themselves as both lazy and friendly would not be expected to want both of these traits equally (or even similarly), which would contribute to reduced interitem reliability among the ratings. In any event, interitem reliabilities were α = .80 and .55 for ISA and ASR, respectively.

After completing the measures of ISA and ASR, participants completed counterbalanced measures of self-compassion and wellbeing. We used the 26-item Self-Compassion Scale (Neff, 2003). Participants indicated how they behave consistently with each descriptive statement (e.g., “I try to be understanding and patient toward those aspects of my personality I don’t like”) using a 5-point scale from 1 (almost never) to 5 (almost always), such that higher scores indicate more of that aspect of self-compassion. In the current study, only scores from the five-item Self-Kindness (α = .76) and five-item Self-Judging (α = .82) scales were analyzed because the other scales (e.g., Common Humanity) are not conceptually related to self-discrepancies. We used two measures of well-being, the five-item Satisfaction with Life Scale (Diener, Emmons, Larsen, & Griffin, 1985; α = .87) and six positive affect items from the Multiple Adjective Affect Checklist (Zuckerman & Lubin, 1965; α = .86). After completing these measures, all participants completed a basic demographics questionnaire.

Results and Discussion

As shown in Table 1, participants generally were who they wanted to be and wanted to be who they were. In other words, participants generally scored high on our measures of ISA (M = 3.61 out of 5; SD = 0.85) and ASR (M = 4.40 out of 5; SD = 0.71). ISA and ASR were modestly correlated (r = .32, p < .01). Though clearly related to one another, then, ISA and ASR are not only conceptually distinct but also empirically distinct. Thus, ISA and ASR represent two sources of overlap between the actual and ideal selves and, by extension, of variance in actual–ideal self-discrepancies. Having demonstrated that ISA and ASR are distinct, we tested Schactel’s (1954) hypothesis by investigating their relationships with well-being. As shown in the first two correlation columns in Table 1, ISA was positively correlated with both satisfaction with life (r = .31) and positive affect (r = .24), which replicates previous evidence that ISA is associated with higher well-being (e.g., Carver et al., 1999; Cheung, 1997; Francis et al., 2006; Hardin & Lakin, 2009; Shah et al., 1998). ASR was also positively correlated with both satisfaction with life (r = .29) and positive affect (r = .30), which replicates findings of Boldero and Francis (2000). A series of hierarchical regression analyses (see Table 2) indicated that, together, ISA and ASR accounted for 13% and 11% of the variance in satisfaction with life and positive affect, respectively. They accounted for comparable amounts of variance in satisfaction with life, but ASR accounted for more than twice as much unique variance in positive affect than ISA did (see Table 2 and Figure 1).

Results shown in Table 1 also speak to whether ASR (as well as ISA) is distinct from self-kindness and self-judgment. Correlations between the aspects of ideal self-discrepancies and the aspects of self-compassion were significant, but modest, ranging from r = −.18 (p < .01) for the correlation between ISA and self-judgment to r = .30 (p < .001) for the correlation between ISA and self-kindness. To determine whether our measures of ISA and ASR accounted for variance in well-being that is distinct from that accounted for by self-compassion, we conducted a series of hierarchical regression analyses with satisfaction with life and positive affect serving as criterion variables. We entered the two self-compassion scores in Step 1 and the two self-discrepancy scores in Step 2 (see bottom of Table 2). In both analyses, the change in R² was significant (p < .01), indicating that self-discrepancies accounted for unique variance in satisfaction with life (ΔR² = .06) and positive affect (ΔR² = .04) after controlling for self-compassion. ASR and self-kindness both accounted for unique variance in both criterion variables, ISA only accounted for unique variance in satisfaction with life, and self-judging did not account for unique variance in either criterion variable (see Table 2). Taken together, these results indicate that ASR is distinct from self-kindness and self-judgment. Thus, ASR is not simply a matter of being tolerant of one’s flaws.

Study 2

Although subjective well-being is often readily thought of in terms of the presence of positive outcomes such as satisfaction with life, the absence of negative outcomes is also a key component of subjective well-being (e.g., Lucas, Diener, & Suh, 1996). The purpose of Study 2 was to replicate and extend the results of

2 In light of evidence that wanting and liking can be dissociated in some contexts (e.g., Robinson & Berridge, 2003), a reviewer noted that the term actual self-regard might give the impression that we measured the extent to which people liked, as opposed to wanted, the traits they possessed. There is little evidence for a dissociation of constructs related to wanting or liking aspects of the self. In fact, the correlation between the extent to which people want to have and like having self-esteem has been shown to be as high as r = .78 (Bushman, Moeller, Konrath, & Crocker, 2012). We therefore strongly suspect that the extent to which people want and like the traits they have are also highly correlated.
Table 1
Descriptive Statistics and Correlations From Studies 1 and 2

<table>
<thead>
<tr>
<th>Variable</th>
<th>Study 1 Mean (SD)</th>
<th>Study 2 Mean (SD)</th>
<th>Bivariate correlations</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
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</tr>
<tr>
<td>1. Ideal self-actualization</td>
<td>3.61 (0.85)</td>
<td>3.29 (0.69)</td>
<td></td>
</tr>
<tr>
<td>2. Actual self-regard</td>
<td>4.40 (0.71)</td>
<td>4.19 (0.79)</td>
<td>.32*</td>
</tr>
<tr>
<td>3. Self-kindness</td>
<td>3.11 (0.70)</td>
<td>—</td>
<td>.19</td>
</tr>
<tr>
<td>4. Self-judgment</td>
<td>3.06 (0.79)</td>
<td>—</td>
<td>−.18*</td>
</tr>
<tr>
<td>5. Satisfaction with life</td>
<td>5.14 (1.15)</td>
<td>5.06 (1.21)</td>
<td>.31*</td>
</tr>
<tr>
<td>6. Positive affect</td>
<td>5.14 (1.15)</td>
<td>5.06 (1.21)</td>
<td>.31*</td>
</tr>
<tr>
<td>7. Depressive symptoms</td>
<td>4.19 (1.21)</td>
<td>4.06 (1.20)</td>
<td>.31*</td>
</tr>
</tbody>
</table>

Note. Cronbach’s alpha reliabilities from Study 1 (Study 2) are presented on the diagonal (in bold). Correlations from Study 1 are presented below the diagonal. Correlations from Study 2 are presented above the diagonal. Ideal self-actualization, actual self-regard, self-kindness, and self-judgment scores may range from 1 to 5. Satisfaction with life scores may range from 1 to 7. Positive affect scores may range from 6 to 42. Depressive symptoms scores may range from 0 to 60.

*p < .05.

Study 1 by including depressive symptoms as another key indicator of well-being.

Method

Participants. Participants were 148 undergraduates (65.5% female, 82.4% European American, 65.5% first-year students, average age of 18.76 years, SD = 1.07 years). Data from one additional participant with outlying data were removed.

Measures and procedure. In small groups, participants completed paper-and-pencil versions of all measures. As before, participants first completed measures of ISA (α = .55) and ASR (α = .55), which were counterbalanced, followed by the well-being and distress measures, which were also counterbalanced. As in Study 1, participants completed the five-item Satisfaction with Life Scale (α = .87) and six positive affect items from the Multiple Affect Adjective Checklist (α = .87). Participants also completed a measure of depressive symptoms, the 20-item Center for Epidemiological Studies Depression Scale (CES-D; Radloff, 1977; α = .90).

Table 2
Hierarchical Regression Analysis Results From Study 1

<table>
<thead>
<tr>
<th>Predictor variables</th>
<th>B</th>
<th>SE B</th>
<th>β</th>
<th>ΔR²</th>
<th>B</th>
<th>SE B</th>
<th>β</th>
<th>ΔR²</th>
</tr>
</thead>
<tbody>
<tr>
<td>Step 1: Ideal self-actualization</td>
<td>0.41</td>
<td>0.09</td>
<td>.31*</td>
<td>.09*</td>
<td>1.51</td>
<td>0.42</td>
<td>.24*</td>
<td>.06*</td>
</tr>
<tr>
<td>Step 2: Ideal self-actualization</td>
<td>0.32</td>
<td>0.09</td>
<td>.24*</td>
<td></td>
<td>1.11</td>
<td>0.43</td>
<td>.16*</td>
<td></td>
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<tr>
<td>Actual self-regard</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>1.87</td>
<td>0.51</td>
<td>.25*</td>
<td>.06*</td>
</tr>
<tr>
<td>Step 1: Actual self-regard</td>
<td>0.46</td>
<td>0.11</td>
<td>.29*</td>
<td>.08*</td>
<td>2.25</td>
<td>0.49</td>
<td>.30*</td>
<td>.09*</td>
</tr>
<tr>
<td>Step 2: Actual self-regard</td>
<td>0.34</td>
<td>0.11</td>
<td>.21*</td>
<td></td>
<td>1.87</td>
<td>0.51</td>
<td>.25*</td>
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</tr>
<tr>
<td>Ideal self-actualization</td>
<td>0.32</td>
<td>0.09</td>
<td>.24*</td>
<td>.05*</td>
<td>1.00</td>
<td>0.43</td>
<td>.16*</td>
<td>.16*</td>
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<tr>
<td>Step 1: Self-kindness</td>
<td>0.49</td>
<td>0.12</td>
<td>.30*</td>
<td>.13*</td>
<td>2.96</td>
<td>0.56</td>
<td>.39*</td>
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<tr>
<td>Self-judging</td>
<td>−0.15</td>
<td>0.11</td>
<td>−.10</td>
<td></td>
<td>−0.18</td>
<td>0.40</td>
<td>−.03</td>
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<tr>
<td>Step 2: Self-discrepancies</td>
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<td></td>
<td></td>
<td>.06*</td>
<td></td>
<td></td>
<td></td>
<td>.04*</td>
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<tr>
<td>Self-kindness</td>
<td>0.34</td>
<td>0.13</td>
<td>.21*</td>
<td></td>
<td>2.44</td>
<td>0.58</td>
<td>.32*</td>
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<tr>
<td>Self-judging</td>
<td>−0.13</td>
<td>0.11</td>
<td>−.09</td>
<td></td>
<td>−0.06</td>
<td>0.49</td>
<td>−.01</td>
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<tr>
<td>Ideal self-actualization</td>
<td>0.24</td>
<td>0.09</td>
<td>.18*</td>
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<td>0.53</td>
<td>0.42</td>
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<tr>
<td>Actual self-regard</td>
<td>0.25</td>
<td>0.11</td>
<td>.15*</td>
<td></td>
<td>1.34</td>
<td>0.50</td>
<td>.18*</td>
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</tr>
</tbody>
</table>

Results and Discussion

As in Study 1, participants generally scored high on our measures of ISA (M = 3.29 out of 5; SD = 0.69) and ASR (M = 4.19 out of 5; SD = 0.79; see Table 1). ISA and ASR were again correlated (r = .24, p < .01). As in Study 1, however, a series of hierarchical regression analyses indicated that ISA and ASR accounted for significant (ps < .001) unique variance in satisfaction with life (total R² = .19) and positive affect (total R² = .24), with ASR accounting for 4 or more times as much unique variance in satisfaction with life (12%) and positive affect (14%) than ISA (3% and 5%, respectively; see Table 3 and Figure 1). For depressive symptoms, only ASR accounted for significant variance. In sum, Study 2 replicated Study 1’s evidence that both ISA and ASR are uniquely associated with positive aspects of well-being and extended Study 1 by demonstrating that ASR (but not ISA) is associated with the absence of depressive symptoms. Combined with the evidence that ASR accounted for 4 or more times as much unique variance in well-being than ISA did, the results of Study 2
highlight the relative importance of ASR in predicting well-being. The results of the first two studies demonstrated not only that there are two unique types of ideal self-discrepancies but also that these two types of ideal self-discrepancy are not equally important in understanding subjective well-being.

**Study 3**

Although the concept of ASR may be construed as unambiguously beneficial, people who are content with being who they are may simply be complacent and lack the motivation for personal growth. Larsen and McKibban (2008) found that the more participants wanted the material possessions they had, the higher they scored on measures of personal growth and purpose in life, but it remains possible that those with high levels of ASR will show lower levels of personal growth and purpose in life. We explored this possibility in Study 3 by including measures of personal growth and purpose in life.

**Method**

Participants were 192 undergraduates (60.4% female, 71.4% European American, 65.1% first-year students, average age of 19.29 years, SD = 2.61 years). Data from an additional four participants with outlying scores were removed. In small groups, participants completed the ISA and ASR measures, which were counterbalanced, followed by the criterion measures, which were also counterbalanced.

Participants completed all of Study 2’s measures and two additional measures. The first was the original Personal Growth Initiative Scale (PGIS; Robitschek, 1998), a nine-item assessment of participants’ active and intentional involvement in growing and changing (α = .86). The second additional measure was the Ryff Scales of Psychological Well-Being (Ryff, 1989), which includes six 14-item scales. We include results from only the two scales most relevant to our question: Personal Growth (α = .83) and Purpose in Life (α = .88).

**Table 3**

<table>
<thead>
<tr>
<th>Predictor variable</th>
<th>Depressive symptoms</th>
<th></th>
<th></th>
<th></th>
<th>Satisfaction with life</th>
<th></th>
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<th>Positive affect</th>
<th></th>
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<tbody>
<tr>
<td></td>
<td>B</td>
<td>SE B</td>
<td>β</td>
<td>ΔR²</td>
<td>B</td>
<td>SE B</td>
<td>β</td>
<td>ΔR²</td>
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<td>.10*</td>
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<td>−.05</td>
<td>.08*</td>
<td>0.32</td>
<td>0.14</td>
<td>.18*</td>
<td>.12*</td>
<td>1.83</td>
<td>0.61</td>
<td>.23*</td>
<td>.14*</td>
</tr>
<tr>
<td>Actual self-regard</td>
<td>−3.50</td>
<td>0.99</td>
<td>−.29*</td>
<td>.09*</td>
<td>0.54</td>
<td>0.12</td>
<td>.35*</td>
<td>.16*</td>
<td>2.74</td>
<td>0.53</td>
<td>.39*</td>
<td>.20*</td>
</tr>
<tr>
<td>Step 1: Actual self-regard</td>
<td>−3.64</td>
<td>0.95</td>
<td>−.30*</td>
<td>.09*</td>
<td>0.60</td>
<td>0.12</td>
<td>.40*</td>
<td>.16*</td>
<td>3.14</td>
<td>0.53</td>
<td>.44*</td>
<td>.20*</td>
</tr>
<tr>
<td>Step 2: Actual self-regard</td>
<td>−3.50</td>
<td>0.99</td>
<td>−.29*</td>
<td>.09*</td>
<td>0.54</td>
<td>0.12</td>
<td>.35*</td>
<td>.16*</td>
<td>2.74</td>
<td>0.53</td>
<td>.39*</td>
<td>.20*</td>
</tr>
<tr>
<td>Ideal self-actualization</td>
<td>−0.63</td>
<td>1.13</td>
<td>−.05</td>
<td>&lt;.01</td>
<td>0.32</td>
<td>0.14</td>
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<td>.03*</td>
<td>1.83</td>
<td>0.61</td>
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<td>.05*</td>
</tr>
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</table>

*p < .05.
Table 4
Descriptive Statistics and Correlations From Study 3

<table>
<thead>
<tr>
<th>Variable</th>
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<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
<th>6</th>
<th>9</th>
<th>11</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Ideal self-actualization</td>
<td>3.33 (0.73)</td>
<td>.46</td>
<td>.00</td>
<td>.01</td>
<td>.00</td>
<td>.00</td>
<td>.00</td>
<td>.00</td>
<td>.00</td>
</tr>
<tr>
<td>2. Actual self-regard</td>
<td>4.15 (0.72)</td>
<td>.27</td>
<td>.60</td>
<td>.00</td>
<td>.00</td>
<td>.00</td>
<td>.00</td>
<td>.00</td>
<td>.00</td>
</tr>
<tr>
<td>3. Satisfaction with life</td>
<td>5.04 (1.17)</td>
<td>.37</td>
<td>.29</td>
<td>.85</td>
<td>.00</td>
<td>.00</td>
<td>.00</td>
<td>.00</td>
<td>.00</td>
</tr>
<tr>
<td>4. Positive affect</td>
<td>25.69 (5.58)</td>
<td>.22</td>
<td>.31</td>
<td>.58</td>
<td>.89</td>
<td>.00</td>
<td>.00</td>
<td>.00</td>
<td>.00</td>
</tr>
<tr>
<td>5. Depressive symptoms</td>
<td>34.41 (9.20)</td>
<td>-.29</td>
<td>-.24</td>
<td>-.62</td>
<td>-.38</td>
<td>.99</td>
<td>.89</td>
<td>.99</td>
<td>.89</td>
</tr>
<tr>
<td>6. PGIS</td>
<td>38.76 (6.42)</td>
<td>.13</td>
<td>.28</td>
<td>.48</td>
<td>.45</td>
<td>.36</td>
<td>.86</td>
<td>.86</td>
<td>.86</td>
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<tr>
<td>7. Ryff: Personal Growth</td>
<td>68.00 (8.04)</td>
<td>-.05</td>
<td>.30</td>
<td>.47</td>
<td>.53</td>
<td>-.32</td>
<td>.55</td>
<td>.83</td>
<td>.83</td>
</tr>
<tr>
<td>8. Ryff: Purpose</td>
<td>65.17 (9.75)</td>
<td>.13</td>
<td>.38</td>
<td>.62</td>
<td>.61</td>
<td>-.48</td>
<td>.71</td>
<td>.68</td>
<td>.68</td>
</tr>
</tbody>
</table>

Note. Cronbach’s alphas are presented on the diagonal (in bold). Ideal self-actualization and actual self-regard scores may range from 1 to 5. Satisfaction with life scores may range from 1 to 7. Positive affect scores may range from 6 to 42. Depressive symptoms scores may range from 0 to 60. PGIS scores may range from 9 to 54. Scores on the two Ryff scales may range from 14 to 84. PGIS = Personal Growth Initiative Scale.

Results and Discussion

As in Studies 1 and 2, participants generally scored high on our measures of ISA (M = 3.32; SD = 0.73) and ASR (M = 4.15; SD = 0.71). Moreover, ISA and ASR were modestly correlated with each other (r = .27, p < .001) and were correlated with satisfaction with life, positive affect, and depressive symptoms (see Table 4).

In contrast to the possibility that people who are high in ASR are merely compliant, ASR was positively correlated with personal growth initiative and both of Ryff’s (1989) well-being scales (see Table 4). ASR also accounted for unique variance in all six criterion measures after controlling for ISA (ΔR² ranged from .03 for depressive symptoms to .13 for Purpose in Life; see Table 5 and Figure 1). In contrast, ISA was uncorrelated with three of the measures (personal growth initiative, personal growth, and purpose in life; see Table 4). In addition, ISA only accounted for unique variance in two measures: satisfaction with life (ΔR² = 7.5%, p < .001) and depressive symptoms (ΔR² = 4.2%, p < .01; see Table 6 and Figure 1).

Thus, ASR and ISA are related to both subjective and psychological well-being. Moreover, ASR does not reflect passive complacency. Those who want to be who they are tend to be more satisfied with life, experience fewer depressive symptoms, experience greater purpose, and are actively involved in growing and changing. Moreover, we replicated the findings that, in general, ASR is not only distinct from ISA but accounts for more unique variance in outcomes than does ISA.

Study 4

Study 4 addressed several outstanding questions, which we will describe in the following sections.

Is ASR a Precursor of Well-Being?

Though Studies 1 through 3 all demonstrated a reliable relationship between ASR and well-being, the single-shot design of the first three studies makes it impossible to determine whether ASR predicts well-being or vice versa; perhaps ASR is simply a consequence or symptom of being happier or more satisfied with life. To address the underlying mechanism more directly, in Study 4, we used a time-lagged design in which participants completed all measures at two different points in time. This allowed us to measure the relationship between ASR at Time 1 on measures of well-being at Time 2 after controlling for well-being at Time 1.

Does ASR Reflect Normative Desirability of the Actual Self?

We also explored underlying mechanisms by exploring how people who differ in ASR differ in terms of the content of their actual selves. By definition, people high in ASR find the traits they use to describe themselves desirable. What is not clear is whether others also find those traits desirable. One possibility is that traits generated by people with high levels of ASR are no more normatively desirable than those generated by people with low levels of ASR. Consider two individuals who describe themselves as reserved, a trait that people do not generally find especially desirable (Anderson, 1965). All else held constant, the individual who wants to be reserved will achieve higher ASR than the other individual. Another possibility is that people achieve high levels of ASR by possessing more normatively desirable traits. For instance, being honest is more normatively desirable than being reserved (Anderson, 1965), so people who describe themselves as honest will likely achieve higher ASR than those who describe themselves as reserved. To investigate these two possibilities, we had judges rate the desirability of the words that participants used to describe the actual self.

Is ASR Associated With the Availability of Normatively Desirable Traits?

The question of whether people high in ASR possess more normatively desirable traits raises a follow-up question involving Higgins’s (1987) distinction between available traits (i.e., those that people think they possess) versus accessible traits (i.e., the subset of available traits that come to mind most readily). If people...
high in ASR do list traits that are more normatively desirable than people low in ASR, it may be because more normatively desirable traits are available to them (i.e., because these individuals possess more normatively desirable traits). A more intriguing possibility, however, is that normatively desirable traits are more accessible for people high in ASR, but not more available.

We investigated these possibilities in Study 4 by supplementing our idiographic measures of ASR with nomothetic measures. Specifically, we presented participants with a nomothetic list of normatively desirable and undesirable traits and asked them to indicate which they possessed, which allowed us to generate an index of the extent to which participants had more normatively desirable traits available to them. To the extent that participants idio- graphically generate more normatively desirable traits because they possess more normatively desirable traits (i.e., these traits are more available to them), we would expect the normative desirability of the idio- graphically described actual self to be highly correlated with the number of desirable traits an individual endorses on the nomothetic measure.

Are Idiographic Measures Superior to Nomothetic Measures?

The inclusion of idiographic measures also allowed us to address a long-standing debate about the measurement of self-discrepancies. Higgins (1999) has argued that self-discrepancies must be measured idio- graphically in order to assess the traits that each individual finds most personally relevant or meaningful. Indeed, the use of nomothetic measures has been highlighted as a possible reason for some authors’ failure to support fundamental predictions of the theory (see Hardin & Lakin, 2009; Higgins, 1999). Even if nomothetic measures contain traits that nearly everyone wants to possess (e.g., compassionate), possessing such traits will only increase well-being for those individuals who find them especially personally relevant. Unfortunately, few studies have included both idiographic and nomothetic measures, so it remains unclear whether idiographic measures offer greater predictive ability (for an exception, see McDaniel & Grice, 2008).

Is ASR Distinct From Global Self-Esteem?

Finally, in Study 4, we examined whether ASR is distinct from global self-esteem by including a measure of global self-esteem. It may simply be that people who like themselves more are more likely to endorse possessing desirable traits and thus generate higher ASR scores. In light of some evidence that measures of self-discrepancies account for no additional variance in negative affect after controlling for global self-esteem (Phillips, Silvia, & Paradise, 2007), we also examined whether ASR accounts for
unique variance in well-being even after controlling for global self-esteem.

Method

Participants. A total of 81 undergraduates completed measures via an online survey at two points in time, approximately one week apart (M = 8.05 days; SD = 2.59 days, Mode = 7 days, Mdn = 7 days; range = 6 to 26 days). A 1-week delay was somewhat short for longitudinal studies but consistent with earlier self-discrepancy studies (e.g., Higgins et al., 1985). An additional 25 participants who completed the first session opted not to complete the second session. Our attrition rate of 23% was to be expected because institutional review board policy prevented participants from being penalized for opting out of follow-up sessions and because participants may have completed all of their required research experience hours before Time 2. The 25 participants who failed to complete Time 2 had significantly lower global self-esteem at Time 1 than the participants who returned at Time 2 ([t(103) = -1.99, p < .05], but did not differ on the other variables of interest (ts < -1.80, ns).4 We removed data from three additional participants with outlying data, which resulted in a final sample of 78 participants (65.4% female, 62.8% European American, 55.1% first-year students, average age of 19.56 years, SD = 2.29 years).

Procedure. At Time 1, participants were randomly assigned to complete measures in one of two orders. One group completed idiographic and nomothetic measures of ASR first. These participants generated five traits to describe their actual selves, as in Studies 1 through 3. We also selected five nomothetic traits that undergraduates in a previous self-discrepancy study (Hardin & Leong, 2005) had generated most frequently to describe their ideal selves (i.e., successful, happy, smart, caring, and independent) and another five traits that they generated most commonly to describe their undesired selves (i.e., selfish, lazy, dishonest, unhappy, and mean).5 Participants then rated the extent to which they wanted all 15 of the traits (i.e., 5 idiographic + 10 nomothetic) in a random order. These participants then completed idiographic and nomothetic measures of ISA, which entailed generating five traits to describe their ideal selves, then rating the extent to which they had each of those five traits as well as the 10 nomothetic traits. The other half of participants completed the measures of ASR and ISA in the opposite order.

All participants then completed the 10-item Rosenberg Self-Esteem Scale (Rosenberg, 1965; Cronbach’s alpha = .87) and the Satisfaction with Life Scale (α = .89), which were counterbalanced. At Time 2, participants completed the measures of ASR and ISA again. These measures included the same sets of idiographic and nomothetic words included at Time 1 (i.e., at Time 2, participants were not asked to idiosyncratically generate words to describe their actual and ideal selves, but were presented with their own idiographic words from T1, along with the 10 nomothetic words). After completing these measures, they again completed the Rosenberg Self-Esteem Scale (α = .89) and Satisfaction with Life Scale (α = .92).

Calculation of self-discrepancy indices.

Idiographic ASR and ISA. We calculated idiographic ASR and ISA scores as in the previous studies by averaging ratings of the extent to which participants wanted (had) each idiomatically generated trait.

Nomothetic ASR and ISA. To calculate nomothetic ASR scores, we followed the basic procedure used by Larsen and McKibban (2008). We first recoded responses to range from 0 to 4 (rather than 1 to 5) and then determined whether participants had that trait. Words rated with 0 (does not describe me at all) were considered (i.e., traits that participant did not have). Words rated from 1 (describes me slightly) to 4 (completely describes me) were considered present (i.e., traits that participant did have). We then averaged participants’ ratings of the extent to which they wanted each trait they reported having to yield overall nomothetic ASR scores. Similarly, we calculated nomothetic ISA scores by identifying the traits that participants wanted, to at least some extent, then averaging the extent to which they had those traits.

To illustrate this procedure, Table 7 presents data from two actual participants. Participant A had seven of the 10 traits; this participant’s ASR score is the average rating for the extent to which he or she wanted these seven traits: (4 + 4+4 + 3+3 + 0+0)/7 = 2.57. In contrast, Participant B had all 10 of the traits; this participant’s ASR score is (3 + 3+3 + 3+3 + 1+0 + 0+0 + 1)/10 = 1.70. Participant A wanted six of the 10 traits, so this participant’s ISA score is (3 + 3+3 + 3+3 + 0)/6 = 2.67, compared with (1 + 2+2 + 2+1 + 1+3)/7 = 1.71 for Participant B.

We dichotomized traits as being either present or absent in our measure of ASR (and wanted or unwanted in our measure of ISA) for two reasons. First, dichotomizing the ratings made the process of calculating the scores conceptually similar to the process by which idiographic scores were calculated. In order to measure idiographic ASR, for instance, participants were simply asked to list five traits they had. We made no attempt to quantify the extent to which they had those traits.

Second, attempts to weight the nomothetic scores by the extent to which participants wanted and had each trait were unsuccessful. Higgins’s (Higgins, Klein, & Strauman, 1987) method of weighting was unfeasible because it does not distinguish between ISA and ASR. Other approaches to distinguishing ISA and ASR were also unfeasible. For example, it was unclear whether strongly wanting a trait one strongly possessed (ratings of 5) should be considered the same level of ASR as slightly wanting a trait one slightly possessed (ratings of 2). Both indicate a perfect match between wants and haves but clearly indicate different levels of both wanting and having. We therefore used Larsen and McKibb-
Table 7
Example Data to Demonstrate the Nomothetic Scoring Procedure in Study 4

<table>
<thead>
<tr>
<th>Trait words</th>
<th>Participant A</th>
<th>Participant B</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Have</td>
<td>Want</td>
</tr>
<tr>
<td>Successful</td>
<td>3⁰</td>
<td>4⁰</td>
</tr>
<tr>
<td>Happy</td>
<td>3⁰</td>
<td>4⁰</td>
</tr>
<tr>
<td>Smart</td>
<td>3⁰</td>
<td>4⁰</td>
</tr>
<tr>
<td>Caring</td>
<td>3⁰</td>
<td>3⁰</td>
</tr>
<tr>
<td>Independent</td>
<td>4⁰</td>
<td>3⁰</td>
</tr>
<tr>
<td>Selfish</td>
<td>1⁰</td>
<td>0⁰</td>
</tr>
<tr>
<td>Lazy</td>
<td>0⁰</td>
<td>1⁰</td>
</tr>
<tr>
<td>Dishonest</td>
<td>0⁰</td>
<td>0⁰</td>
</tr>
<tr>
<td>Unhappy</td>
<td>1⁰</td>
<td>0⁰</td>
</tr>
<tr>
<td>Mean</td>
<td>0⁰</td>
<td>0⁰</td>
</tr>
<tr>
<td>Actual self-regard</td>
<td>—</td>
<td>2.57</td>
</tr>
<tr>
<td>Ideal self-actualization</td>
<td>2.67</td>
<td>—</td>
</tr>
</tbody>
</table>

⁰ Indicates values that contribute to the ASR/ISA score for each participant.

The results generated indicate that participants’ ASR scores at Time 1 (r = .80, p < .001) and moderately correlated at Time 2 (r = .48, p < .001). These results indicate that people do not achieve ASR simply by wanting to have whatever traits are most accessible to them; rather, they have high ASR because normatively desirable traits are most accessible to them.

Is ASR associated with the availability of normatively desirable traits? To determine whether participants generated more normatively desirable traits because they have more available (i.e., because they actually possess more normatively desirable traits), we calculated the correlation between the judges’ ratings and our measure of the availability of desirable traits, which was not significant (r = .11, p > .34). This null correlation suggests that participants who describe their actual selves more positively do not do so simply because they possess more normatively desirable traits. Such traits were more accessible for participants high in ASR, but they were not more available.

Are idiographic measures superior to nomothetic measures? To determine whether the idiographic or nomothetic self-discrepancy scores were more predictive of well-being, we conducted a simultaneous regression analysis with the four self-discrepancy scores as predictors and Time 2 satisfaction with life as the criterion variable (see Table 9). Together, the self-discrepancy scores accounted for 38.4% of the variance in Time 2 satisfaction with life. However, only the idiographic scores were significant predictors. These results are consistent with Higgins’ (1999) contention that self-discrepancies involving accessible traits are more impactful than those involving traits that are merely available.

Does ASR reflect normative desirability of the actual self? We investigated whether participants with higher ASR scores used more normatively desirable words to describe their actual selves. Indeed, judges’ ratings of the desirability of the words participants generated to describe their actual selves were highly correlated with participants’ ASR scores at Time 1 (r = .80, p < .001) and moderately correlated at Time 2 (r = .48, p < .001). These results indicate that people do not achieve ASR simply by wanting to have whatever traits are most accessible to them; rather, they have high ASR because normatively desirable traits are most accessible to them.
Table 8
Descriptive Statistics and Correlations From Study 4

<table>
<thead>
<tr>
<th>Variable</th>
<th>M (SD)</th>
<th>I ni d y g r a ph i c measures</th>
<th>I di og r a ph i c ASR</th>
<th>S at i s f ac t i on with life</th>
<th>G loba l self-esteem</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Time 1</td>
<td>Time 2</td>
<td>Time 1</td>
<td>Time 2</td>
<td>Time 1</td>
</tr>
<tr>
<td>T1 ISA</td>
<td>3.57 (0.75)</td>
<td>—</td>
<td>.70*</td>
<td>.33*</td>
<td>.16</td>
</tr>
<tr>
<td>T2 ISA</td>
<td>3.78 (0.71)</td>
<td>.70*</td>
<td>—</td>
<td>.36*</td>
<td>.32*</td>
</tr>
<tr>
<td>T1 ASR</td>
<td>4.38 (0.68)</td>
<td>.33*</td>
<td>.36*</td>
<td>—</td>
<td>.53*</td>
</tr>
<tr>
<td>T2 ASR</td>
<td>4.07 (1.03)</td>
<td>.16</td>
<td>.32*</td>
<td>.53*</td>
<td>—</td>
</tr>
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</table>

Normative desirability of actual self’s traits

<table>
<thead>
<tr>
<th>Variable</th>
<th>M (SD)</th>
<th>I ni d y g r a ph i c measures</th>
<th>I di og r a ph i c ASR</th>
<th>S at i s f ac t i on with life</th>
<th>G loba l self-esteem</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Time 1</td>
<td>Time 2</td>
<td>Time 1</td>
<td>Time 2</td>
<td>Time 1</td>
</tr>
<tr>
<td>T2 ISA</td>
<td>3.66 (0.55)</td>
<td>.55*</td>
<td>.40*</td>
<td>.30*</td>
<td>.21</td>
</tr>
<tr>
<td>T2 ISA</td>
<td>3.77 (0.61)</td>
<td>.44*</td>
<td>.60*</td>
<td>.33*</td>
<td>.28*</td>
</tr>
<tr>
<td>T1 ASR</td>
<td>3.50 (0.55)</td>
<td>.13</td>
<td>.30*</td>
<td>.41*</td>
<td>.27*</td>
</tr>
<tr>
<td>T2 ASR</td>
<td>3.59 (0.69)</td>
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<td>.41*</td>
<td>.28*</td>
<td>.26*</td>
</tr>
<tr>
<td>Desired trait availability</td>
<td>1.69 (0.38)</td>
<td>.28*</td>
<td>.31*</td>
<td>.24*</td>
<td>.19</td>
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</tbody>
</table>

Outcome measures

<table>
<thead>
<tr>
<th>Variable</th>
<th>M (SD)</th>
<th>I ni d y g r a ph i c measures</th>
<th>I di og r a ph i c ASR</th>
<th>S at i s f ac t i on with life</th>
<th>G loba l self-esteem</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Time 1</td>
<td>Time 2</td>
<td>Time 1</td>
<td>Time 2</td>
<td>Time 1</td>
</tr>
<tr>
<td>T1 satisfaction with life</td>
<td>4.93 (1.32)</td>
<td>.47*</td>
<td>.51*</td>
<td>.36*</td>
<td>.29*</td>
</tr>
<tr>
<td>T2 satisfaction with life</td>
<td>5.05 (1.32)</td>
<td>.46*</td>
<td>.49*</td>
<td>.50*</td>
<td>.37*</td>
</tr>
<tr>
<td>T1 global self-esteem</td>
<td>31.04 (5.54)</td>
<td>.34*</td>
<td>.40*</td>
<td>.41*</td>
<td>.18</td>
</tr>
<tr>
<td>T2 global self-esteem</td>
<td>30.91 (5.74)</td>
<td>.31*</td>
<td>.41*</td>
<td>.40*</td>
<td>.21</td>
</tr>
</tbody>
</table>

Table 9
Regression Analysis Results From Study 4

<table>
<thead>
<tr>
<th>Predictor variable</th>
<th>SAT with life</th>
<th>B</th>
<th>SE B</th>
<th>β</th>
<th>ΔR²</th>
</tr>
</thead>
<tbody>
<tr>
<td>Step 1: T1 satisfaction with life</td>
<td>.67</td>
<td>.09</td>
<td>.67*</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Step 2: T1 satisfaction with life</td>
<td>.61</td>
<td>.09</td>
<td>.61*</td>
<td></td>
<td></td>
</tr>
<tr>
<td>T1 idiographic scores: ASR</td>
<td>0.59</td>
<td>0.20</td>
<td>.30*</td>
<td>.38*</td>
<td></td>
</tr>
<tr>
<td>ISA</td>
<td>0.48</td>
<td>0.20</td>
<td>.26*</td>
<td></td>
<td></td>
</tr>
<tr>
<td>T1 nonomothetic scores: ASR</td>
<td>0.40</td>
<td>0.25</td>
<td>.17</td>
<td></td>
<td></td>
</tr>
<tr>
<td>ISA</td>
<td>0.28</td>
<td>0.28</td>
<td>.12</td>
<td></td>
<td></td>
</tr>
<tr>
<td>T1 global self-esteem</td>
<td>.05</td>
<td>.02</td>
<td>.20*</td>
<td>.67*</td>
<td></td>
</tr>
</tbody>
</table>

Note: ASR = actual self-regard; ISA = ideal self-actualization; T1 = Time 1; T2 = Time 2.
*p < .05.

General Discussion

The results of four studies extend self-discrepancy theory (Higgins, 1987) by disentangling two sources of overlap between the actual and ideal selves. Across four studies, we found that ISA and ASR are distinct from one another, as evidenced by the finding that correlations between them ranged from .24 to .32. They were also distinct from self-compassion (Study 1) and global self-esteem (Study 4). Moreover, ASR consistently accounted for unique variance in aspects of well-being, including subjective well-being, positive affect, depressive symptoms, and psychological growth. ISA also accounted for unique variance in some of these outcomes in most studies. Study 4’s longitudinal design highlighted the role of ASR in well-being. Results provided evidence that ASR is a precursor, not a consequence, of subjective well-being, and that ASR does not simply reflect the extent to which normatively desirable traits are available in the actual self.

These results provide evidence that how much people want to be who they are (i.e., ASR) and how much they are who they want to be (i.e., ISA) represent distinct sources of ideal self-discrepancies. Moreover, the finding that ASR was consistently associated with well-being provides evidence for the second half of Schachtel’s (1954) contention that “happiness is not having what you want, but wanting what you have.” Even so, the finding that ISA was also associated with some aspects of well-being provides evidence against the first half of Schachtel’s contention. Effects of both ASR and ISA are consistent with self-discrepancy theory, which simply contends that overlap between the actual and ideal selves contributes to well-being, regardless of whether the overlap is a result of ASR or ISA.

Across these studies, ASR often appeared to be a stronger predictor of well-being than ISA for several of the criterion variables, and the results of Study 4 indicated that this is not simply because people higher in ASR possess more normatively desirable traits. It is not clear why ASR tended to be a stronger predictor than ISA. Some insight may come from Ogilvie’s (1987) speculation about his evidence that distance from the undesired self was simply a better predictor of satisfaction with life than was proximity to the desired self. He hypothesized that “the undesired self is composed, in a better predictor of satisfaction with life than was proximity to the desired self. If so, it would follow that ASR is more tangible than ISA, which might make ASR more impactful.

The results of Study 4 also demonstrate that, as with other aspects of the self (cf. Higgins, 1999), it makes sense to assess
ASR and ISA idiographically, rather than nomothetically. People generally agree about which traits are desirable (e.g., Anderson, 1968), but aspects of the self that have the greatest effect on affect are those that are most meaningful, accessible, and available to that particular individual (Higgins, 1987, 1999). Nomothetic measures are unable to capture these personally meaningful traits as well as idiographic measures, and this limitation outweighs the benefits of standardized content afforded by nomothetic measures. Our findings underscore a general conclusion from the self-discrepancies literature that it is more important for people to possess the constellation of desirable traits that they find most meaningful than that they possess the entire universe of normatively desirable traits (cf. McDaniel & Grice, 2008, who reached a different conclusion, albeit using idiographic and nomothetic measures that were quite different from one another).

**ASR Is Distinct From Self-Esteem and Self-Compassion**

In Study 4, ASR was most strongly associated not with well-being but with self-esteem. This makes sense because both variables involve people’s evaluations of their actual selves. Indeed, the Rosenberg Self-Esteem Scale (Rosenberg, 1965), which is the most common measure of global self-esteem and the one we used, explicitly asks participants to indicate the extent to which they “have a number of good qualities.” Thus, one obvious question is why ASR was not even more highly correlated with self-esteem than it was ($r = .41$). One reason may be that measures of self-esteem do not require individuals to actually enumerate their good qualities, which raises the possibility that people will systematically understate or (more likely) overestimate the extent of their good qualities on such global measures. Our measure of ASR may provide a more objective index of self-evaluation because it requires participants to actually identify aspects of their self-concept and to rate the extent to which they value each of those individual aspects, rather than evaluate their global self-concept.

ASR is also distinct from self-compassion (i.e., tolerating one’s negative traits and painful experiences; Neff, 2003). As with the Rosenberg Self-Esteem Scale, the Self-Compassion Scale measure of self-compassion does not ask participants to enumerate their negative qualities. Moreover, the Self-Compassion Scale focuses explicitly on acceptance or tolerance of one’s negative traits, which is different than our measure of wanting one’s actual traits (which are both positive and negative). Both empirically and conceptually, then, self-compassion and ASR are distinct.

**Future Directions**

Future research may reveal boundary conditions for the effects of ASR and ISA on well-being. The extent to which ASR influences well-being may depend on the extent to which people have a clear idea of who they are. That is, the effect of ASR on well-being should be especially strong among those who are high in self-concept clarity (Campbell et al., 1996). There may also be cultural differences in the relationship between ASR and subjective well-being. Western cultures’ pervasive self-enhancement biases (Heine, Lehman, Markus, & Kitayama, 1999) may lead Westerners to underestimate the extent to which they possess undesirable traits. If such self-enhancement biases lead to a restriction in range in ASR scores among participants in our predominantly European American samples, the effect of ASR on subjective well-being may have been dampened. In contrast, subjective well-being may be more tightly coupled with ASR among members of Eastern cultures, who may be less likely to demonstrate such self-enhancement biases.

We followed standard practice in self-discrepancies research by measuring self-discrepancies first (e.g., Francis, Boldero, & Sambell, 2006; Higgins, Klein, & Strauman, 1985). It is possible that calling people’s attention to their ASR and ISA spuriously strengthened the relationships between these sources of self-discrepancies and subjective well-being. Manipulating the order of the self-discrepancy and outcome measures in future research would address such possibilities. In the meantime, Study 4’s evidence that ASR and ISA predicted well-being collected 1 to 3 weeks later assures concerns about priming effects.

Finally, we focused on distinguishing between two sources of actual–ideal self-discrepancies, but a similar distinction can be drawn for other types of self-discrepancies. To provide but one example, typical approaches to measuring the discrepancy between who one is and who one ought to be (i.e., actual-ought self-discrepancies) use the “ought self” as the frame of reference (“Whom do you think you should be or are morally obligated to be? To what extent are you this person?”). Such measures assess the extent to which people are who they ought to be but overlook the extent to which people ought to be who they are. Simple adaptations of our measures may therefore provide novel tests of hypotheses about, for instance, the unique contribution of actual-ought discrepancies to anxiety and of actual–ideal discrepancies to dejection.

**Final Thoughts**

We offer the idea that individuals can find happiness by increasing ASR, but stop short of unconditionally claiming that people should value who they already are. Finding virtue in normatively undesirable qualities (e.g., selfishness, recklessness) may foster a temporary sense of well-being but make it difficult to meet long-term goals (e.g., establish meaningful social relationships). Fortunately, Study 4’s finding that idiographic ASR scores were highly correlated with judges’ ratings of the desirability of the traits participants used to describe themselves indicates that people do not want to possess whatever normatively undesirable traits they generated. These findings provide little evidence that people achieve ASR and find well-being by valuing their normatively undesirable traits.

The variety of earlier evidence that ideal self-discrepancies are associated with well-being suggests that people can increase well-being by reducing their self-discrepancies. Indeed, research has demonstrated that self-discrepancies decline over the course of successful psychotherapy (Rogers, 1954; Strauman et al., 2001). However, in light of our distinction between ISA and ASR, the question is which is a more effective approach to increasing well-being: becoming whom one ideally wants to be by moving closer to the ideal self (i.e., increasing ISA) or wanting to be whom one is by moving the ideal self closer to the actual self (i.e., increasing ASR)? Evidence that personality traits are fairly stable across adulthood (Ferguson, 2010; Roberts & DelVecchio, 2000)
suggests that changing one’s actual self may be particularly difficult. Our evidence that ASR is more strongly associated with subjective well-being than is ISA suggests a potentially more successful alternative. For instance, rather than taking the difficult path of becoming outgoing, individuals for whom being reserved is an accessible component of their actual selves may find happiness by making accessible other, more desirable—traits that are available to them. After all, in Study 4, normatively desirable traits were just as available for individuals with low ASR as they were for those with high ASR. Answers to such questions about the malleability of—and consequences of changing—the actual versus for those with high ASR. Is there a universal need for positive self-regard? Psychological Review, 106, 766–794. doi:10.1037/0033-295X.106.4.766


References


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