

Cutting a diamond out of stone:
Psychological perspectives on changing self and identity

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'I'm just a chunk of coal now Lord, but I'm gonna be a diamond someday'
- Johnny Cash

Perhaps a diamond is hidden in each of us, but can we bring it out? The conviction that we can be whoever we want to be is widespread. Books, courses, and 'ten-step-programs' all provide recommendations for self-improvement and claim that dramatic changes in the way we feel about ourselves, in the relationships we have with others, and in our achievements at work are within reach. Television programs like 'extreme makeover' suggest that even aspects of our appearance that we tend to see as immutable can be altered, and that everyone can change into an attractive person. We can boost our self-esteem with the aid of a therapist, which nowadays is easily available on the internet, people who are dieting or quit smoking share their experiences with us so that we can follow suit, and at work guidelines are offered to help us optimize the way we interact with clients or co-workers. But to what extent can we actually change the way we are? Can we really consider these aspects of self as set of accessories that we can put on or off at will, or are they ingrained into our identity? Is it possible to attain an ideal self by just wiping away undesirable aspects of our identity? Can every chunk of coal actually become a diamond someday? These questions are the focus of this special issue that addresses different psychological perspectives relevant to the processes of change in self and identity.

Self and identity are a central topic of investigation in all areas of psychology. Cognitive psychologists study how self-relevance of stimuli affects attention and cognition, developmental psychologists try to understand the development of self-awareness and identity formation in children, personality psychologists design tools to reliably assess certain aspects of the self, clinical psychologists examine the role of self-views in psychopathology, and social psychologists address how aspects of self and identity affect the way we interact with

others. As a result, during the past decades, psychologists have gathered an enormous amount of knowledge about the content, structure and organization of the self, and its role in human cognition and behaviour (see for example Leary & Tangney, 2003). One central assumption underlying the majority of this work is that psychologically healthy people generally want to feel good about themselves and strive for a positive identity. This inclination to think of the self in a positive way implies that people tend to be intrinsically motivated to improve their identity whenever possible, and to present themselves towards others in the most desirable way. Changing people's self-views or identities also is the challenge most commonly faced by psychological practitioners. Some of them work with clients to address a severe personality disorder or pathologically low self-esteem, but others provide training and coaching for those who seek professional assistance to achieve self-improvement, for instance in order to enhance the quality of their relationships with others, or to optimize their effectiveness as leaders.

Many researchers have examined possibilities for change in the self and identity and they have focused on different aspects of this issue. However, the results of these efforts are dispersed across separate literatures, as researchers have been working from different areas of psychology, using different theoretical perspectives, and within different research traditions. As a result, an overview of the current state of affairs in this area of research is not easily gained, as separate strands of research have not been combined within a single overarching perspective. This special issue aims to provide a first step towards connecting these different bodies of knowledge on the changeability of the self, as it brings together recent insights into change of self and identity from different psychological perspectives.

The first contribution in this special issue focuses on personality disorders as an aspect of the self that can be subject to change. For a long time, the general conviction was that personality disorders were impossible to treat. People with personality disorders were

supposed to have a fundamentally different character make-up than healthy people, which was thought to be immutable. In their contribution, Arntz and Bernstein (2006) argue that this pessimism is unjustified. Recent insights indicate that highly specialized treatments do have high success rates. Furthermore, they demonstrate that psychological treatment can cause deeper changes, leading even to a change in character. Nevertheless, Arntz and Bernstein also concede that traces of the former character set-up cannot disappear completely and some specific vulnerability remains. As a result, people who seem to have overcome their personality disorder may still return into their old maladaptive patterns relatively easily, and thus need continuous monitoring and support to prevent this relapse.

The second article focuses on implicit self-esteem and its changeability. Implicit self-esteem is a relatively new concept that has emerged in the psychological literature during the past ten years, to refer to unconscious associations between the self and other stimuli. Dijksterhuis (2006) reviews the literature on implicit self-esteem to discuss a number of relevant issues. After explaining how implicit self-esteem relates to explicit self-esteem, the impact of different levels of implicit self-esteem on psychological functioning is considered. Subsequently, recent evidence for determinants of implicit self-esteem is presented to examine the long-term (in)flexibility of implicit self-esteem. Dijksterhuis points out the consequences when implicit and explicit levels of self esteem differ and addresses the possibility to change implicit self-esteem by evaluative conditioning

The third contribution examines possibilities for changing self-esteem in children and adolescents. Self-esteem is related to academic achievement, social functioning and various forms of psychopathology in youths. Therefore, many interventions have been developed to change self-esteem levels in this specific population. Bos, Muris, Mulkens and Schaalma (2006) provide an overview of psychological knowledge about self-esteem in children and adolescents and discuss the effectiveness of previous self-esteem interventions targeting youths. Based on recent research, they argue that such interventions can be more effective when they are theory- and evidence based and tailored at the specific needs of different target groups. They present a protocol to systematically develop such interventions and include concrete suggestions that should benefit future self-esteem interventions.

An important way in which internal conceptions of self connect to external characteristics of the self is through people's physical appearance. When there is a discrepancy between the two, people can attempt to change their appearance. One option to achieve this, which has become increasingly popular and available during the past fifteen years, is through cosmetic surgery. Although this still is seen as a rather drastic measure, it is generally thought of as a highly effective way to bring people's appearance more in line with their internal identity. People generally want to change their appearance when they are dissatisfied with their body image, in particular when their self-esteem is largely determined by their appearance. However, a subgroup of cosmetic surgery patients suffers from psychological pathology denoted as Body Dysmorphic Disorder (BDD), which is characterized by a preoccupation with an imaginary defect in appearance or an excessive concern with a slight physical abnormality. In the fourth contribution to this issue, Mulkens and Jansen (2006) review the literature about cosmetic surgery and BDD to examine this phenomenon. They argue that candidate patients for cosmetic surgery ought to be screened in advance to detect whether they have BDD, because for this group of patients the surgery is

unlikely to affect the way they see themselves, or to improve their well-being in the way they anticipate.

Health promotion interventions aim to change the behavior of people who are at-risk for specific health problems, but more often than not people resist these attempts to change their unhealthy habits, as these have become ingrained in their identity. In the fifth contribution to this special issue, van Empelen, Gebhardt and Dijkstra (2006) argue that health promotion interventions are unlikely to be successful when these are perceived as threatening central aspects of the self. They argue that the persistence in unhealthy behaviors is primarily motivated by mechanisms involved in the reduction of self-threat, and the desire to be self-consistent. However, they also demonstrate that the desire for self-enhancement and self-improvement can be used to design more effective interventions.

Even if we cannot change the way we are, we can use a range of self-presentation techniques to focus people's attention on what we like most about ourselves, de-emphasizing less highly valued aspects of our identity. People with a devalued identity that is not immediately visible (such as their religious identity, sexual orientation, or psychiatric history) have the opportunity to hide such devalued aspects of their identity when they enter a new situation. At work, this strategy is often used to avoid negative social reactions from others and to optimize work performance. In the final contribution to this special issue, Ellemers and Barreto (2006) review empirical research on this topic and examine the psychological mechanisms involved in the act of hiding. They demonstrate that attempts to reinvent the self at work are unlikely to yield the expected benefits, and instead may easily have adverse effects. Although those who hide a devalued identity anticipate that this will protect them from negative expectations of others about the self, in reality hiding undermines well-being and leads to suboptimal performance.

The range of contributions in this special issue examines different issues associated with the changeability of self and identity from a variety of psychological perspectives. The work presented here indicates that it is indeed possible to change certain aspects of self and identity. At the same time, it becomes clear that such change is not as easily achieved as is often suggested in the popular media. Achieving change requires specialized treatment or interventions (Arntz & Bernstein, 2006; Dijksterhuis, 2006) or carefully planned theory- and evidence-based interventions (Bos et al., 2006; Van Empelen et al., 2006), which often involve long-term monitoring or follow-up activities to help sustain the acquired change and prevent relapse into old habits. Indeed, if anything, the contributions in this special issue also demonstrate that changing self and identity is likely to carry important psychological costs and may have severe drawbacks for those who undertake such change. Improving one's physical appearance, or hiding devalued aspects of one's identity, does not necessarily improve well-being (Mulkens & Jansen, 2006) or performance (Ellemers & Barreto, 2006).

The overall conclusion thus seems to be that changing self and identity is possible, but it is not easily achieved, and has the potential to backfire at those who try. Thus, other than commonly held beliefs would suggest, we should not think too lightly of undertaking attempts to change ourselves or our identity, in particular when there is no compelling reason (e.g., psychological pathology) to do so. Furthermore, we should not rely on TV programs or amateur self-help books to guide us in how to do this, but are better advised to turn to psychologists instead. Achieving change in self and identity is like cutting a diamond out of stone: the work is not without risks and only succeeds when undertaken by a professional.

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