Applying Theory for Human Betterment

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I began my career at the height of behaviorism. At that time, behavior was believed to be shaped and modified by response consequences. Psychodynamic theories dominated the clinical field and the popular culture. It was in this context that I was developing social cognitive theory, which is rooted in an agentic perspective (Bandura, 2008). In this agentic approach, individuals are enabled and guided to take the steps to improve their lives (Bandura, 1977). The theory was widely applied in diverse activity domains across disciplinary lines. However, because of space limitations, the present review focuses mainly on large-scale applications addressing some of the most challenging global problems.

Paradigm Shift in Models of Causation and Change

In the early 1960s, growing evidence showed that psychodynamic theories lacked predictive and therapeutic efficacy. Even if psychodynamic approaches were highly effective, they would be of little social utility. Improving people's lives by lengthy analysis of unconscious complexes would be but a tiny contribution to the enormous need for psychosocial treatments. Some changes require modification of the practices of adverse social systems that contribute to psychosocial problems.

The 1960s ushered in sweeping paradigm changes in causal models and modes of individual and social changes (Bandura, 2004). Within a decade, new conceptual models and analytic methodologies were created. New sets of periodicals were launched, and new professional organizations were formed to advance given avenues of research. New professional conventions provided forums for exchange of ideas. The emerging mode of treatment, *cognitive behavior therapy*, focused on altering ingrained faulty styles of thinking and behaving. While these new modes of treatment were gaining widespread acceptance professionally through their demonstrated effectiveness, socially, they were stirring up a blustery storm.

In the midst of this transformative change, Skinner (1971) published his controversial book *Beyond Freedom and Dignity*. It made *The New York Times* bestseller list and was widely publicized on a national book tour. Skinner portrayed the right to freedom and dignity as simply mental by-products of environmental influences. He characterized social change as "cultural engineering" by environmental direction. This view alarmed the public, which was concerned that application of these new psychological methods would strip people of their dignity and deprive them of their freedom.

The popular media deluged the public with repugnant imagery of brainwashing and frightful scenarios from *Nineteen Eighty-Four* (Orwell, 1949) and *Brave New World* (Huxley, 1932) dominated by social engineers wielding powerful methods of behavioral control. The hit movie *A Clockwork Orange* (Kubrick, 1971) graphically portrayed the fiendish nature of behavior modifiers shocking wrongdoers into submission. In his movie *Sleeper*, Woody Allen (1973) amusingly outwits the ironclad control of despotic social engineers who reduce humans to mindless zombies.

The Unabomber targeted Jim McConnell at the University of Michigan as his first victim with a tirade about the evils of behavior modification. Lyndon LaRouche, who became a perennial candidate for the U.S. presidency, branded the practitioners of behavioral approaches as "Rockefeller Nazis," formally tried some of the leading figures in his tribunal for crimes against humanity, and stormed classes at the State University of New York at Stony Brook.

At the height of this media frenzy, I began my term as president of the American Psychological Association. A responsible social science must not only promote advancement of knowledge but also address the social effects of its applications. In keeping with this dual commitment, we formed an interdisciplinary task force to examine how psychological methods were being used at both the individual and institutional levels. The task force's wide-ranging analysis, which was published as *Ethical Issues in Behavior Modification* (Stolz, 1978), provided a thoughtful evaluation of existing applications and a set of standards for ethical practice that dispelled

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the frightful misconceptions propagated by the mass media. Growing applications of our knowledge of personal and social change won public acceptance, and cognitive behavior treatments were cited as the method of choice for diverse psychosocial problems.

Development of Guided-Mastery Treatment

During this time I was developing a guided-mastery treatment for people with severe snake phobias who were leading profoundly debilitated lives. Some of them had difficulty performing their occupational activities or did so with considerable distress. Geologists, biologists, telephone repairmen, and firefighters had to work in grassy areas where they feared snakes lurked. Some included Peace Corps volunteers and sabbatical faculty headed for snake-infested countries. Virtually all had abandoned recreational activities such as hiking, camping, and gardening. Golf was an expensive game because they feared searching for their golf balls in the rough. In the true spirit of the West, one of the phobics shot himself in the leg trying to kill a harmless snake. The more pervasive consequences of the snake phobia were thought-produced distresses: "During spring and summer they are constantly on my mind when I'm outdoors."

When people with phobias vigorously avoid what they fear, they lose touch with the reality they shun. Guided mastery provides a quick and effective way of restoring reality testing by disconfirming tests of phobic beliefs. But even more important, guided mastery treatment enables people with phobias to eliminate their intractable phobic behavior (Bandura, 1997; Bandura, Blanchard, & Ritter, 1969). In guided-mastery treatment, therapists model coping strategies for managing increasing phobic threats. People with phobias then confront their nemeses and are enabled to master them with the help of a variety of performance mastery aids. This collaborative process is repeated until they are rid of the phobia. To avert misattribution of coping efficacy to the therapist, the newly emboldened ex-phobics manage prescribed phobic threats entirely on their own.

This is an unusually powerful treatment. Within a few sessions, it eliminated tenacious phobias in all cases and reduced generalized anxiety and biological stress reactions. It is similarly effective in treatment of the most profound anxiety disorder, agoraphobia (Bandura, Adams, Hardy, & Howells, 1980; Williams, 1990).

The most surprising finding in the snake-phobia treatment was transformation of dream activity. After treatment, the people with the phobia no longer experienced distressing ruminative thought. At the beginning of treatment, the snakes in their dreams were terrorizing:

"Before treatment I dreamt about scary snakes growing larger and larger. Now I don't have those dreams at all . . ." and "I haven't had frightening thoughts since treatment." The snakes became benign ones as participants began to gain a sense of coping mastery: "I had a dream in which a boa constrictor became my friend and even washed the dishes. This is a marked improvement over my recurrent dream of being terrorized by snakes." With further growth of perceived mastery, their dreams focused on their accomplishments rather than on the characteristics and behavior of snakes: "I had a dream but it was only what I had accomplished that day— touching and holding him." Eventually the dreams ceased: "I haven't had a dream about snakes . . . I'm not having dreams anymore."

In follow-up assessment, participants remained free of their snake phobia. However, they explained that the treatment had a more profound transformative effect on their lives. Eliminating lifetime phobic dread and tormenting nightmares by brief guided mastery instilled a resilient sense of efficacy that they could take greater charge of their lives. They tackled activities they had avoided with delight in their successes. Formal empirical tests verified that self-efficacy operates as a common mechanism through which diverse modes of treatment effect behavior changes (Bandura, 1997).

Enlisting Functional Properties of Self-Efficacy

I launched a multifaceted program of research to shed light on the nature of this agentic self-belief system. People are not efficacious in all things under all conditions. The self-efficacy belief system is a differentiated set of self-beliefs linked to distinct realms of functioning, not a one-size-fits-all trait. To ensure that self-efficacy measures reflect the construct, I created a manual for constructing appropriate self-efficacy scales (Bandura, 2006b). Findings from different lines of research specified how to develop resilient beliefs in one's efficacy and explained the cognitive, motivational, affective, and decisional mechanisms through which self-efficacy beliefs produce their effects.

The theory diffused rapidly to different fields of psychology and across disciplinary lines. In the book *Self-Efficacy: The Exercise of Control* (Bandura, 1997), I documented widespread applications of the theory to the fields of education, health, clinical disorders, athletics, the corporate world, and social and political change. Other scholars, some in other disciplines, published edited volumes that offered rich overviews of applications of self-efficacy theory in important spheres of life (Feltz, Short, & Sullivan, 2008; Maddux, 1995; Pajares & Urdan, 2006; Schwarzer, 1992).

Going Global With Social Cognitive Theory

Some of the most ambitious large-scale applications of social cognitive theory address growing global threats to preserving a sustainable environmental future (Bandura, 2006a, 2009). Achievement of society-wide changes requires three operative components. The first component is a *theoretical model*. It specifies the determinants of psychosocial change and the mechanisms through which those determinants produce their effects. The second component is a *translational and implemental model*. It converts theoretical principles into innovative operational models. It specifies the content and the strategies of change and their mode of implementation. We often do not profit from our theoretical successes because we lack effective means for disseminating proven psychosocial approaches.

The large-scale model of change had a novel origin. One morning, I received a call from Miguel Sabido, a gifted producer and dramatist at the Televisa broadcasting company in Mexico. He explained that he extracted a number of modeling principles from our social-modeling studies and used this knowledge to produce long-running serial dramas that were accomplishing sizable societal changes (Bandura, 2006a). We had a reliable theory and an innovative transformational model, but we lacked the knowledge and resources to diffuse the social-change programs globally.

The third component is a *social-diffusion model* designed to adapt effective psychosocial programs to diverse cultural milieus. The Population Media Center, directed by David Poindexter (2004), served as the worldwide dissemination system. This media center, works with host countries in developing culturally relevant programs.

These dramatic productions are not whimsical stories. The storylines portray the realities of people's everyday struggles and the impediments they face. The dramas help people to see a better life and inform, enable, and guide them to take the steps to realize their hopes and dreams. Hundreds of episodes spanning several years allow viewers to form strong emotional bonds with the models, whose thinking and behavior evolve at a believable pace. In the words of one viewer, "This is our story." Viewers comment on their similarity to the models in the storylines struggling to better their lives: "I recognize myself in the character of Françoise." Viewers are inspired and enabled to improve their own lives. Multiple intersecting storylines and subplots address different aspects of people's lives rather than focusing on a single issue.

The flexibility of this format contributes to its generalizability, versatility, and power (Bandura, 2006a).

For example, the storylines in the serial broadcast in Sudan included the benefits of family planning, educational opportunities for girls, the injustice of forced marriage, the risks of early childbearing, prevention of HIV infection, and the harm of entanglement in drug-related activities. A special theme centered on the devastating consequences of the widespread practice of genital mutilation. About 130 million women in Africa are subjected to this brutal procedure. In the dramatization, a young girl whom the viewers deeply adore is shown undergoing the devastating physical harm and psychological trauma. Characters representing Muslim clerics disapprove of the practice. The serial drama shifted the social norm toward abolishing the brutal practice.

The serial dramas are not social programs foisted on nations by outsiders. Rather, they are created only by invitation from countries seeking help with intractable problems. The Media Center works in partnership with media personnel in host countries to create serial dramas tailored to their cultures and addressing the types of benefits they seek.

Contrast modeling is used to provide a variety of guides and motivators for change. The plotlines include positive models exhibiting beneficial lifestyles, negative models exhibiting detrimental ones, and transitional models changing from detrimental to beneficial styles of behavior. Modeled practices provide knowledge, skills, and strategies for effecting change. Enabling models exemplify a vision of a better future and realistic paths to it. Seeing transitional models similar to themselves succeed by perseverance raises observers' belief in their efficacy to improve their lives by their actions. Unless people see the modeled lifestyles as improving their welfare, they have little incentive to adopt them. The benefits of favorable practices and costs of the detrimental ones, vividly portrayed by contrast modeling, provide incentives for change.

It is of limited value to motivate people for change if they lack the resources and environmental supports to realize those changes. As shown in Figure 1, our model of social change is designed to operate through two pathways. In the direct pathway, media influences promote changes by informing, enabling, motivating, and guiding viewers to improve their lives. In the socially mediated pathway, media influences are used to link people to social networks and community settings. Epilogues provide contact information to relevant community services and support groups. These places provide continued personalized guidance, natural incentives, and social supports for individual and social changes.

This model is highly generalizable to diverse cultures because the dramatic productions are tailored to
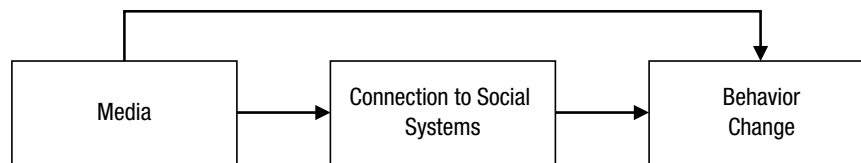
Fig. 1. Paths of influences through which communications affect psychosocial changes. They do so both directly and via a socially mediated pathway that links viewers to social networks and community settings.

cultural practices and the types of changes people desire. These productions are reaching millions of people worldwide (Bandura, 2006a, 2009). For example, applications in Africa, Asia, and Latin America are raising literacy levels; enhancing the status of women in societies in which they are marginalized and denied their freedom and dignity; reducing unplanned childbearing to break the cycle of poverty and stem the soaring population growth; curtailing the spread of the AIDS epidemic; mobilizing communities to clean contaminated water supplies that are the leading cause of death and illness worldwide; and promoting environmental conservation practices, such as sustainable foresting and farming, land conservation, and preservation of natural resources and wildlife habitat preservation to protect biodiversity.

These global applications demonstrate the far-reaching changes that can be achieved by a comprehensive theory of psychosocial functioning. Unlike the tendency to focus on psychopathology in our field, social cognitive theory strives to develop and bring the best in others at both the individual and social system levels.

Action Editor

Darby Saxbe served as action editor and June Gruber served as interim editor-in-chief for this article.

Declaration of Conflicting Interests

The author(s) declared that there were no conflicts of interest with respect to the authorship or the publication of this article.

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