"Maslow's Hierarchy of Needs" is a diagram etched in the minds of most business and social science majors and many practitioners. It is much like a mantra and has been widely accepted, though initially it was not empirically tested. In a *Theory of Human Motivation* (Maslow, 1943) A. H. Maslow postulated that only needs not yet satisfied influence human behavior. The theory also predicted that when needs are satisfied, they are no longer motivators. The hierarchy starts with physiological needs and moves upward in a pyramidal shape to safety and security, social activity (or love and belonging), to esteem (or ego), and finally to self-actualization. Most of us inferred that self-actualization with an emphasis on the self was the end of the line, the highest need one could satisfy.

We were wrong. In the *Farther Reaches of Human Nature* (Maslow, 1971) published by his family a year after Maslow's death, he reveals his later thinking: that there is a definition and process that transcends the self in self-actualization characterized by such terms as selfless, devoted, working at a calling and "being-values" (Maslow, 1971:128). We will label this level, consistent with Maslow's terminology in the 1971 book as "Beyond Self-Actualization" (Maslow, 1071:42).
This paper seeks to accomplish four tasks: (1) To provide an orderly introduction that briefly summarizes a typology of motivation theory espoused in 1941 (2) To elaborate on and diagram Maslow’s early theory (3) To introduce the work of Maslow that transcends his 1943 model and proposes a modification to that model and (4) To discuss the managerial implications and applications of the expanded model.

“CONTENT” MOTIVATION: A DEFINITION

Maslow’s hierarchy of needs is categorized as a content theory of motivation. Content theories study the things, rather than the processes, that motivate people. Rakich, Longest and Darr (2000:274) express the widespread recognition of Maslow’s hierarchy by stating: “Perhaps the most widely recognized content theory of motivation—and certainly one of the most important and enduring—was developed by Abraham Maslow.”

A psychologist by training, Maslow advanced a theory with two major premises: (1) that human beings, by nature, want things and are motivated to acquire things that they do not have, and (2) that once one set of needs are satisfied, those needs are no longer a motivator (Maslow, 1943).

Figure 1 illustrates Maslow’s hierarchy of five basic needs. From lowest, meaning the most basic to sustain life to highest, the five need categories, according to Maslow (1943), begin with basic physiological needs. These include water, air, food, and shelter, which are all necessary for survival. After physiological needs are met and one can survive, then the person attempts to find safety and security.

Applying the theory to the workplace, job security is a major concern after one has basic needs fulfilled and has become employed. According to Rakich, et. al.
(2000:775), health insurance also helps people meet these security needs. The approximately forty-four million uninsured people in the U.S. makes safety a largely unmet need.

Figure 1: Maslow's hierarchy of needs.

**Being Needs**

- Self-actualization
- Esteem Needs
- Belonging Needs
- Safety Needs
- Physiological Needs

**Deficit Needs**

Source: http://www/age:2

Once safety and security needs are met, social needs become a motivator. The social needs recognize that humans are social beings and want to have their lives nurtured through significant associations with others. Such needs can be met partially by family and relationships outside of work, such as religious affiliations. Employment fulfills a major part of our social needs, as employees form friendships with co-workers. Employer sponsored team activities such as softball and bowling leagues further meet social needs.

The fourth level "ego" (also referred to as "esteem" needs) includes the need for recognition and respect from others. Examples in the healthcare area include "employee of the month," a letter of commendation, praise for a job well done, and self respect. Given the team or group orientation and organization of much of health care
delivery esteem needs might more appropriately be met through rewarding collective activity. Coupled with the thinking that process predicts quality (Deming, 1986) more than individual effort, hiring staff who have esteem needs met, at least in part, through team effort, and providing team oriented bonuses, or other rewards could be approaches to addressing this need. Maslow referred to the four levels of need already discussed as "Deficit Needs," because he saw these as needs essential to sustaining life (http://ww/age:2).

The fifth and last level of the pyramid is distinctly different from the previous four. Maslow used the term “Being Needs” in contrast to “Deficit Needs” to describe this level. He also used the term “growth needs.” The fifth level, self-actualization, is also termed self-fulfillment by Rakich, et. al. (2000) and as noted earlier is frequently interpreted as a focus on self.

In a later development of his theory, Maslow describes a level beyond self-actualization. In the next sections we will explore in more detail what we believe Maslow meant by this new level and ways to move beyond self-actualization as informed by this meaning.

BEYOND SELF-ACTUALIZATION MASLOW REVISITED

Maslow’s use of the term “self-actualizing” is often thought of as having an inner focus i.e. differentiation of self, psychological integration or achieving some level of personal potential. The goal is to "better" the self. A closer examination of the concept as he further developed it seems to point to an opposite meaning. Based on his research and views expressed in the Farther Reaches of Human Nature (Maslow, 1971) a more accurate term could be “selfless-actualization” indicating human development beyond the self in self-actualization.
Maslow's message is that to achieve peak experience people must move from self to other. Social justice, generativity, and transformative thinking and acting are all concepts that could be associated with this orientation. The fundamental idea is that people must move to a focus and concern for other people to achieve the highest level of human nature. People who move beyond self-actualization "are, without a single exception, involved in a cause outside of their skin: in something outside of themselves, some calling or vocation" (Maslow, 1971:42). This view is supported by, among others, Erik Erikson (1987) and Carl Rogers (1961). Both affirm in their research the concept of selflessness or the ability to look outside oneself as a critical characteristic of the highest level of human development. Figure 2 illustrates this interpretation of Maslow's hierarchy by adding a new sixth level. As depicted in Figure 2 the self-actualizing stage becomes a precursor to "selfless-actualization" or "beyond self-actualization." In this sense personal work associated with meeting the self-actualization needs focuses on achieving a personal identity and complete acceptance of self.

There are several interesting dimensions associated with this interpretation of Maslow's hierarchy. One of these is creativity. Real creativity (not repackaging or adaptations) is a hallmark of "selfless-actualization." According to Maslow creativity means "being lost in the present, timeless, selfless and being outside oneself" (Maslow, 1971:59). Creativity as commonly conceived "consists of lightning striking you on the head in one great, glorious moment" (Maslow, 1971:77). The fact that people who create are in a general sense good workers tends to be lost in Maslow's view. "We have found that the sources of creativeness ie the generation of really new ideas are in the depths of human nature (Maslow, 1971: 56) or in selfless-actualization (a term we use in this paper synonymously
Figure 2: Maslow’s hierarchy with a new 6th stage

"SELFLESS-ACTUALIZATION"
(BEYOND SELF-ACTUALIZATION)

SELF-ACTUALIZATION
ESTEEM NEEDS
BELONGING NEEDS
SAFETY NEEDS
PHYSIOLOGICAL NEEDS
(Source: author created)

with “beyond self-actualization”). Maslow recommends that organizations need to find ways to permit people to be individualistic to encourage this “real” creativity. For example, one healthcare organization that wants to undergo a cultural shift is seeking thoughts and approaches that would encourage employees to take more initiative. What this organization might be seeking are ways to encourage true creative expression.

Maslow writes, “The question is, who is interested in creativity? And my answer is that practically everyone is” (Maslow, 1971:92). “There is an immediate necessity for a viable political, social, or economic system and that is to turn out more creative people” (Maslow, 1971:93). This is one, among many essential reasons to encourage the growth of individuals so that they become selfless-actualizing. This seems to be particularly true in the healthcare arena where leaner staffing, retention and recruitment of staff are current and strategic concerns.

According to Maslow people who go “beyond self-actualization” share a pattern of behavior. They are authentic, genuine and bring the future to the present i.e. what ought to be is! Maslow includes other descriptors such as:
• They try to set things right, to clean up bad situations
• They like to reward and praise others
• They are very practical and realistic, they like being effective
• They respond to the challenge of the job
• They tend to be attracted to unsolved or difficult problems
• They tend to feel that everyone should have the opportunity to develop to their highest potential, to have a fair chance
• They enjoy greater efficiency, making an operation more neat, simpler, turning out a better product.
• (Source: Maslow, 1971).

If these are valued characteristics for a society, organization and individuals how can movement in this direction be influenced? And what outcomes could we predict? The next section will explore and attempt to answer these questions.

BEYOND SELF-ACTUALIZATION: SO WHAT AND HOW?

Two essential questions are associated with the notion that moving toward selfless-actualization is important for individuals, organizations and societies. Those questions are: Why and How? Is there a significant outcome and if so how would one engage in the process?

From a societal point of view it appears to be increasingly important to focus on the needs, interest, and well being of people in general if contemporary world events are an indicator. Economic, political, medical, environmental, and safety issues have and continue to emerge in need of more, and more complex “other” focus. This in itself would seem to answer the “why” question. In addition, at the organization level, particularly in health
delivery settings, we want to attract and retain staff who have or can be encouraged to stay on the selfless journey. Not only does this alignment help create satisfying work but as Maslow indicates it is an important contributor to creativity and delivery of effective service. These traits seem increasingly important in the healthcare environment where the value systems are oriented toward staff who truly care for others and have altruistic intentions.

What can leaders do to provide a stimulus for this development in their communities, organizations and staff? The good news according to Maslow is that everyone can move "beyond self-actualization." He writes, "If everyone does not, it is because something has happened to gum up the process" (Maslow, 1971:220). Certainly one starting place is to get clear on the outcomes expected.

The journey beyond self-actualization is ongoing, iterative, and has no particular "road map." Several approaches based on Maslow's thinking might be helpful. The following are suggestions.

Educate through art. Encouraging creative and introspective expressions via artistic outlets has proven to be effective for "turning out better people" according to Maslow. Some healthcare organizations have used artistic expression to manage change, nurture leaders and encourage the constructive expression of emotional energy. An example of the latter is a health care network that was acquiring several facilities including a large multi-service hospital, a specialty hospital and several clinics. Changes like this bring "hopes and concerns" to all parties involved. To acknowledge these dynamics the network's senior leadership brought together all mid-level and senior leaders (about 120 people) with the intent to explore, surface and encourage expression of these feelings. Small groups representing each facilities' leaders were asked to express their feelings about this impending change by drawing representative pictures on large pieces of
newsprint. The ensuing discussion proved constructive, at times humorous, and effective in creating positive working relationships.

- **Understand how to think in, work and manage polarities.** Avoiding either/or thinking encourages inclusive and creative solutions. Barry Johnson (1996) provides useful explanations and applications of this concept. A theme in Johnson’s work on polarity management is that there is typically no one correct solution to complex problems. By thinking that there is a “silver bullet” we foreclose on opportunities and creative alternatives. In fact “polar” opposite solutions may both be correct, helpful and need to be managed over time. Flat v. layered organizational designs, self-managed v. autocratic authority structures, and process v. outcomes measures of health care delivery are all examples of polarities that need to be managed rather than chosen from.

- **Provide structures for, encouragement of and a culture that stimulates individuality, autonomy and initiative.** Frederick Herzberg is referenced by Maslow for his organizational research and applications of this practice. Herzberg’s article on employee motivation is an excellent review of this subject (Herzberg, 1968). He suggests that features of job design such as levels of responsibility, autonomy, decision making authority, and opportunities for growth produce intrinsic motivation, satisfaction and expressions of creativity and individuality.

- **Engage in dialogues on ethics.** This is an ongoing and increasingly complex territory in healthcare i.e. the genome project. Maslow reports that people who develop to the “farther reaches of human nature” are very good perceivers of reality and truth, and also that they are generally unconfused about right and wrong, and make ethical decisions more quickly and more surely than people who have not reached this level of development (Maslow, 1971). Certainly leaders, particularly in the health services
arena, are busy! But scheduling opportunities to explore ethical issues, participating on ethics committees, or providing ethics education to leaders would all be useful. Possibly more to the point would be to make ethical considerations part of the virtual decision making process as part of the routine of work life.

- **Provide opportunities for dialogues on spirituality and its relationship to work.** The notion that spirituality in the broadest sense is at the core of finding meaning in life and work is an important part of Maslow’s thinking. One health care organization has tried to encourage introspection, expression and encouragement of the link between spirituality and work satisfaction by surveying staff on the subject, holding dialogue groups, and assessing organizational impact on service, turn over and attendance.

- **Practice sense-making, invention, connectiveness.** For example explore the work of Karl Weick on the skills needed to apply this concept (Weick, 1998). According to Weick sense-making is an attempt to reduce multiple meanings (equivocally) and handle complex informational data used by people in an organization. A detailed and constructive discussion of sense-making is found in Weick’s article “Prepare Your Organization to Fight Fires” (Weick, 1996). In this article Weick recounts the tragic attempts by a group of “smoke jumpers” to extinguish a forest fire in the mountains of Montana. Spontaneous cooperation, improvisation, resilience and creating fluid role systems are all skills, Weick concludes, that are “life saving” in environments of constant and/or sudden change.

- **Be keenly aware of and accept reality, be candid and genuine in a nonreactive way.** Daniel Goleman’s writing and application suggestions on this subject are particularly useful (Goleman, 1998). Goleman is probably best known for his work on emotional intelligence. In short emotional intelligence helps people understand and control
their emotional systems and develop empathy toward others. According to Goleman emotional intelligence is based on developing competence in self-awareness, self-regulation, motivation, empathy and social skills. Experience has demonstrated that these are skills that can be developed in everyone. Education, coaching, providing 360 feedback and mentoring are alternatives for influencing this development.

• Be a role model. For example research by Burke has demonstrated that healthcare executives are likely to have reached the higher levels of Maslow’s model (Burke, 1989). These leaders should be visible to staff, communicate their values, mentor others, and demonstrate their commitment to social issues.

• Be aware of stage dependency as espoused in Maslow’s theory and the importance of satisfying precursor stages. Trying to encourage higher level stage attainment without fulfilling lower level needs would at best be fruitless and possibly counterproductive according to Maslow. His is a developmental model and as such each need level serves as a foundation for the next.

CONCLUSION

Self-actualization may be commonly misunderstood as a focus on self and as the last level of Maslow’s hierarchy. This article is an amplification and affirmation of what it appears Maslow intended. That is, movement from self to other. Maslow expanded on self-actualization to “beyond self-actualization” in his 1971 book. In this sense to be self-actualized is to move beyond the self. Work published after his death makes it clear that Maslow intended to use his expanded research to emphasize this point.

This meaning is increasingly important in a world that is more interconnected and interdependent and thus in
need of strategic cooperation rather than strategic self-interest. This is true in the economic, political, safety and especially health arenas. Giving thought and action to Maslow’s message may be more timely than ever.

Further exploration of the topic and sharing others’s experiences, thoughts and research would be very pertinent and helpful.

REFERENCES


