Is the desire for fame related to well-being or ill-being?

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Abstract

The construct of fame in self-determination theory is very similar to the construct of social status in Anderson, Hildreth, and Howland's (2015) status-as-fundamental-motive perspective. Both fame and social status are characterized by admiration and (admiring) respect by other people. Yet, while desiring fame is believed to distract or interfere with the fulfillment of basic needs (e.g., Ryan et al., 1999), desiring social status is believed to be very much equivalent to a basic need (Anderson et al., 2015). Inspired by these two theoretical standpoints, we tested opposing hypotheses in a pre-registered secondary data analysis of prospective longitudinal data spanning 10 years ($N = 4,625$; M_{age} at T1 = 19.60). Specifically, we tested whether or not desire for fame among early adults is related to their (a) concurrent subjective well-being, self-esteem, and health, (b) subsequent subjective well-being, self-esteem, and health, and (c) subsequent changes in subjective well-being, self-esteem, and health. Furthermore, we investigated (d) whether changes in desire for fame are related to contemporaneous changes in subjective well-being, self-esteem, and health. In line with self-determination theory, we found several positive correlations between desire for fame and the negative affect subscale of the PANAS, low self-esteem, and self-reported health complaints. In line with the status-as-fundamental-motive perspective, we found almost no substantial negative correlations between desire for fame and life satisfaction, the positive affect subscale of the PANAS, and self-rated health status. Thus, our results did not support either of the two positions unequivocally, indicating the need for further theoretical refinement.

Keywords: fame, social recognition, social status, status striving, well-being, happiness

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In self-determination theory, fame refers to the extent to which a person is admired and recognized by many other people (e.g., Kasser & Ryan, 1996). Similarly, a major component of Anderson et al.'s (2015) social status definition is admiration and admiring respect by other people. Despite the similarities of self-determination theory's fame and Anderson et al.'s social status construct, desiring fame has been differently portrayed than desiring social status. According to self-determination theory, desiring fame runs counter to the satisfaction of basic needs and thus leads to ill-being (e.g., Ryan et al., 1999; Ryan & Deci, 2000). According to Anderson et al. (2015), the desire for social status is a fundamental motive (i.e., very much equivalent to a basic need)¹.

The present study tested the implications of these two opposing positions by investigating the associations of desire for fame with three indicators of ill-being: low subjective well-being, low self-esteem, and poor physical health. In particular, we investigated with data from a prospective longitudinal study how individual differences in desire for fame among early adults were related to their (a) concurrent levels, (b) subsequent levels, and (c) subsequent changes in subjective well-being, self-esteem, and health. Furthermore, we investigated (d) how changes in desire for fame were related to changes in subjective well-being, self-esteem, and health during the same period. If desiring fame leads to ill-being, we should find negative relationships between desiring fame and subjective well-being, self-esteem, and health.

Fame as an Extrinsic Goal

¹ The definitions of basic needs and fundamental motives widely overlap (e.g., Anderson et al., 2015; Ryan & Deci, 2000). According to Anderson et al. (2015), a motive is fundamental if it fulfills four criteria. (a) The attainment of goals associated with the motive influence long-term psychological adjustment, well-being, and health. (b) The motive induces a wide range of behavior designed to satisfy its associated goals. (c) The motive is nonderivative, that is, it serves as an end goal, or a reward or punishment in and of itself. (d) The motive is universal or observed across individuals that differ in culture, age, gender, or personality. According to Ryan and Deci (2000), a basic need is "innate, essential, and universal" and it is "an energizing state that, if satisfied, conduces toward health and well-being but, if not satisfied, contributes to pathology and ill-being" (p. 74).

Fame (also called “social recognition”) is seen by self-determination theory as an extrinsic goal (e.g., Kasser & Ryan, 1996; Ryan & Deci, 2000; Vansteenkiste, Niemiec, & Soenens, 2010). Extrinsic goals such as fame, image, or money focus on elevating self-worth through achievement and external validation and detract from basic need satisfaction according to self-determination theory and its goal content theory. In contrast, intrinsic goals such as close relationships and physical health are believed to be conducive to need satisfaction by satisfying basic needs for autonomy, competence, and relatedness (e.g., Vansteenkiste et al., 2010). Autonomy, competence, and relatedness are considered to be basic and innate needs because only their satisfaction is believed to lead to sustainable well-being (i.e., “eudaimonia”), psychological adjustment, and health (e.g., Chen et al., 2015; Ryan et al., 1999; Ryan & Deci, 2000; Ryan, Huta, & Deci, 2008; Vansteenkiste & Ryan, 2013; see also, Sheldon, 2011). According to self-determination theory, aspiring to extrinsic goals may distract or interfere with the fulfillment of basic needs. Thus, a strong emphasis on extrinsic goals is believed to lead to ill-being.

Furthermore, strongly aspiring to extrinsic goals such as fame is seen as a sign of unhealthy compensation for frustrated basic needs (e.g., Ryan et al., 1999; Thøgersen-Ntoumani, Ntoumanis, & Nikitaras, 2010; Vansteenkiste & Ryan, 2013):

To the extent that individuals have had inadequate experiences of autonomy and relatedness, they are expected to feel less secure in their personal worth and thus more prone to the belief that extrinsic “trappings” will make them worthwhile and esteemable [...]. (Ryan et al., 1999, p. 1510)

Extrinsic goals are seen as traps because striving for extrinsic goals is believed to entail unstable forms of well-being (hedonism) and an ego-involved engagement in activities: self-esteem derived from extrinsic goals is contingent on task performance/positive feedback (e.g., Deci & Ryan, 1995; Ryan, Koestner, & Deci, 1991; see also, Nicholls, 1984).

In line with these propositions, several studies inspired by self-determination theory found that aspiring and attaining extrinsic goals were negatively related or unrelated to

subjective well-being, self-esteem, physical health, relationship quality, and academic adjustment (e.g., Kasser & Ryan, 1996; Niemiec, Ryan, & Deci, 2009; Romero, Gómez-Fraguela, & Villar, 2012; Ryan et al., 1999; Van Hiel & Vansteenkiste, 2009). That said, not all studies confirmed that striving for extrinsic goals is negatively related to subjective well-being. For example, Martos and Kopp (2012) found in a nationally representative Hungarian sample ($N = 4,841$) that extrinsic aspirations were weakly to moderately positively related to subjective well-being.

In conclusion, self-determination theory proposes that aspiring to extrinsic goals such as fame is a sign of unhealthy compensation for frustrated basic needs, and that the desire for extrinsic goals distracts and interferes with the satisfaction of basic needs and thus leads to ill-being (i.e., low well-being, low psychological adjustment, and poor health). Based on this perspective, it can be hypothesized that the desire for fame is negatively related to subjective well-being, self-esteem, health.

The Desire for Social Status as a Fundamental Motive

The notion that fame does not satisfy any basic need can be questioned given that a construct very similar to fame, social status, has been found to be a fundamental motive (Anderson et al., 2015). The construct of fame is similar to Anderson et al.'s social status construct because the core of self-determination theory's fame construct is not simply being *known* by many other people (e.g., being a famous criminal), it is being *admired* by many other people (e.g., Kasser & Ryan, 1996). Similarly, admiration and admiring respect by others are the first of three major components of social status according to Anderson et al. (see also e.g., Leary, Jongman-Sereno, & Diebels, 2014; Magee & Galinsky, 2008). A second component of Anderson et al.'s social status definition is social influence without force or coercion. Others voluntarily comply with the high-status person's wishes, desires, and suggestions (i.e., *voluntary deference* by others; see also Leary et al., 2014). A third

component is that people high in status are perceived to possess personal characteristics (e.g., skills, generosity) that will facilitate the perceiver's goal accomplishment (i.e., *perceived instrumental social value*; see also Anderson & Kennedy, 2012; Leary et al., 2014).² To our knowledge, self-determination theory has not specified whether fame involves also the other two components of social status (*voluntary deference* and *perceived instrumental social value*). That said, research on social status indicates that admiration and admiring respect by others go hand in hand with voluntary deference (i.e., a consequence of admiration and admiring respect) and perceived instrumental social value (i.e., an assumed cause of admiration and admiring respect; e.g., Anderson et al., 2015; Anderson & Kennedy, 2012; Leary et al., 2014). Thus, desiring status from the Anderson et al.'s perspective should be to a large extent equivalent to desiring fame from the self-determination theory perspective. Although, desiring social status is less ambitious than desiring fame because desiring status means desiring admiration by friends, colleagues, and the neighborhood, while desiring fame means desiring admiration even by people beyond the scope of one's immediate friends, colleagues, and neighborhood.

In contrast to self-determination theory, which argues that fame is not a basic need, Anderson and colleagues (2015) argued that the desire for social status is what they called a "fundamental motive." The criterion for a basic need proposed by self-determination theory was that the satisfaction of the need leads to sustainable subjective well-being, adjustment, and health (e.g., Ryan & Deci, 2000). Similarly, one of Anderson et al.'s criteria for a fundamental motive was that motive attainment positively affects subjective well-being, long-

² Social status as defined by Anderson et al. (2015) should not be confused with socioeconomic status, power, and dominance. *Socioeconomic status* refers to objectively measureable indicators of status in a society such as income, occupation, and education (Adler et al., 1994; Anderson et al., 2015; see also Saegert et al., 2016). Social status, on the other hand, refers to self- or other reported respect, admiration, and voluntary deference one is afforded. *Power* is usually defined as the ability to influence others due to control over valued resources or capacity to reward and punish others (e.g., Anderson et al., 2015; Magee & Galinsky, 2008). Similarly, *dominance* is defined as the use of fear, intimidation, and coercion to attain influence (e.g., Anderson et al., 2015; Cheng, Tracy, Foulsham, Kingstone, & Henrich, 2013). While power and dominance are characterized by extrinsically motivated deference from others (i.e., influence *with* force), social status refers to influence via voluntary deference from others (i.e., influence *without* force).

term adjustment, and health (for other criteria, see Footnote 1). Anderson et al. concluded that social status meets this criterion because the extensive research they reviewed suggested that *having* social status positively predicted subjective well-being, self-esteem, and health. If the desire for status is indeed a fundamental motive, it can be also considered a basic need because the criteria for fundamental motives and basic needs widely overlap (see Footnote 1). Moreover, if the desire for status is itself a basic need, the desire for fame should not distract and interfere with the satisfaction of basic needs and thus *not* lead to ill-being.

Furthermore, individual differences in aspirations for extrinsic goals such as fame have been found to strongly relate to concurrent and subsequent attainment of extrinsic goals (Niemic et al., 2009; Romero et al., 2012). Thus, desiring fame should positively relate to fame attainment. In turn, fame attainment might relate positively to subjective well-being, self-esteem, and health just like social status attainment relates positively to well-being, self-esteem, and health according to the review by Anderson et al. (2015). Based on these considerations, it can be hypothesized that desire for fame does *not* relate negatively to subjective well-being, self-esteem, and health.

Hypotheses

This is a pre-registered secondary data analysis testing hypotheses drawn from self-determination theory (i.e., fame is an extrinsic goal) against hypotheses inspired by the theoretical position that social status is a fundamental motive. The hypotheses are summarized in Table 1. Hypotheses with the letter “A” (e.g., H1A) were derived from self-determination theory (Table 1). These hypotheses predicted that the desire for fame correlates negatively with subjective well-being, self-esteem, and health ($-1 \leq r < 0$; $p \leq .01$). Hypotheses with the letter “B” (e.g., H1B) were inspired by Anderson et al.’s (2015) status-as-fundamental-motive perspective. These hypotheses predicted that the desire for fame does *not* correlate negatively with well-being, self-esteem, and health, that is, that the effect is

more positive than a small negative effect ($-.10 < r \leq 1; p \leq .01$; Cohen, 1988; Gignac & Szodorai, 2016). In other words, not only the presence of a positive association but even the absence of an association ($r = .00$) would be in line with the status-as-fundamental-motive perspective. Thus, we tested each association against a specific, non-zero value ($r = -.10$), so that even a r of .00 could yield a p value below the α level. This is similar to equivalence testing (e.g., Lakens, 2017), but we only tested whether r is more positive than a small negative effect, not whether r is more negative than a small positive effect.

Our pre-registered decision rule for each correlation was: If Hypothesis A is supported ($-1 \leq r < 0; p \leq .01$) and Hypothesis B is *not* supported ($-.10 < r \leq 1; p > .01$), then the found association is evidence for self-determination theory but not for the Anderson et al.'s (2015) status-as-fundamental-motive perspective. If Hypothesis A is *not* supported ($-1 \leq r < 0; p > .01$) and Hypothesis B is supported ($-.10 < r \leq 1; p \leq .01$), then the found association is evidence for Anderson et al.'s (2015) status-as-fundamental-motive perspective but not for self-determination theory. If both Hypothesis A and B are supported or if both are *not* supported, then the found evidence is inconclusive with regard to the two theoretical positions (potentially due to a lack of statistical power).³

³ We did *not* perform a power analysis because (a) a power analysis is less useful after data collection than prior to data collection because the sample size cannot be altered, (b) information about statistical power is not crucial in the current study because the tests of both Hypothesis A and B have roughly the same statistical power and too little power would lead to inconclusive results, and (c) we would need to run a large number of power analyses because the statistical power varies across our tests and dependent variables and these analyses would be based on a large number of assumptions about variances and covariances (especially in the models involving change).

Table 1

Hypotheses about the associations between desire for fame and well-being, self-esteem, and health.

	Self-determination theory ^a	Status-as-fundamental-motive ^b
Hypotheses 1-3		
concurrent well-being self-esteem health	The desire for fame is negatively related ($-1 \leq r < 0$) to concurrent...	The desire for fame is <i>not</i> negatively related ($-.10 < r \leq 1$) to concurrent...
	H1A: ...subjective well-being.	H1B: ...subjective well-being.
	H2A: ...self-esteem.	H2B: ...self-esteem.
	H3A: ...health.	H3B: ...health.
Hypotheses 4-6		
subsequent well-being self-esteem health	The desire for fame is negatively related ($-1 \leq r < 0$) to subsequent...	The desire for fame is <i>not</i> negatively related ($-.10 < r \leq 1$) to subsequent...
	H4A: ...subjective well-being.	H4B: ...subjective well-being.
	H5A: ...self-esteem.	H5B: ...self-esteem.
	H6A: ...health.	H6B: ...health.
Hypotheses 7-9		
subsequent changes well-being self-esteem health	The desire for fame is negatively related ($-1 \leq r < 0$) to subsequent changes in...	The desire for fame is <i>not</i> negatively related ($-.10 < r \leq 1$) to subsequent changes in...
	H7A: ...subjective well-being.	H7B: ...subjective well-being.
	H8A: ...self-esteem.	H8B: ...self-esteem.
	H9A: ...health.	H9B: ...health.
Hypotheses 10-12		
contemporaneous changes well-being self-esteem health	Changes in the desire for fame are negatively related ($-1 \leq r < 0$) to contemporaneous changes in...	Changes in the desire for fame are <i>not</i> negatively related ($-.10 < r \leq 1$) to contemporaneous changes in...
	H10A: ...subjective well-being.	H10B: ...subjective well-being.
	H11A: ...self-esteem.	H11B: ...self-esteem.
	H12A: ...health.	H12B: ...health.

Note. All hypotheses are tested with α level = .01, i.e. a hypothesis is supported if $p \leq 0.01$. The pre-registration of the hypotheses can be found here https://osf.io/n62tb/?view_only=ace03c21bc7a4aa2b9d86e74db23880e. In the pre-registration, the label of the independent variable was “desire for status” not “desire for fame.” We changed the label after the pre-registration because (a) “desire for fame” corresponds more closely to the

rationale of the study and measurement of the independent variable and (b) the “desire for status” label might have been misleading to some readers given the disagreement about the social status definition in the literature (e.g., Cheng et al., 2013). This change did not affect the pre-registered measurement of the independent variable and the analysis plan to test the hypotheses.

Neither of the two perspectives is very explicit about temporal dynamics between desire for fame/status and ill-being. For example the time scale on which the desire for fame might lead to ill-being is not specified by self-determination theory. Hence, the current study investigates not only whether the desire for fame is related to concurrent levels of ill-being but also whether desire for fame is related to subsequent levels and changes in ill-being. Furthermore, we investigated whether changes in desire for fame are related to contemporaneous changes in ill-being. If the desire for fame leads to ill-being (i.e., self-determination theory), the desire for fame should not only be positively related to concurrent levels of ill-being but also to subsequent levels and changes in ill-being. Similarly, if the desire for fame does *not* lead to ill-being, then the desire for fame should *not* be positively related to subsequent levels and changes in ill-being. Thus, we had hypotheses for the cross-sectional as well as for the longitudinal sphere (Table 1).

Methods

The empirical study we use was approved by the Ministry of Education and Cultural Affairs of the state of Baden-Württemberg, Germany. At the time the study was conducted, the ministry took sole responsibility for reviewing research ethics/privacy issues in all state-wide research studies that took place in schools. It also approved the follow-up contacting of participants.

Participants and Procedure

We tested our hypotheses with the 2002 cohort of the ongoing Transformation of the Secondary School System and Academic Careers longitudinal study (TOSCA; Köller, Watermann, Trautwein, & Lüdtke, 2004). In the TOSCA study, participants were surveyed every other year from their last year of upper secondary school onwards. We used the first six

measurement times: from Time 1 (age: $M = 19.60$; $SD = 0.72$) to Time 6 at around age 29.5 years. Students and upper secondary schools were randomly selected in the state of Baden-Württemberg (Germany) at Time 1, with a participation rate of 99% at the school level, and around 80% at the student level.

The sample size varied for different analyses from 4,208 to 4,625. Of the 5,903 students targeted at Time 1, respondents were excluded from a specific analysis model if they had *not* responded to any of the variables in the respective model. Participants who provided valid information on at least some of the variables were included (i.e., incomplete cases were included in the analysis because we used full information maximum likelihood estimation). Furthermore, we excluded two persons who indicated that they were older than 30 years at Time 1, as was done in a previous study with the TOSCA data (Grosz et al., 2017). Otherwise, we did not exclude participants based on their response behavior or demographic criteria.

Attrition. Most attrition effects were small. Participants who responded at more measurement occasions than just Time 1 were more likely to be female than participants who responded only at Time 1 (61 vs. 48% females), and they reported a somewhat higher life satisfaction ($d = 0.06$) and positive affect ($d = 0.14$). The details can be found in Table S1. Table S1 and all other supplemental tables can be found at

https://osf.io/je825/?view_only=85f1872466d44850b8db9314610d7824.

Pre-registration and overlap with previous research. We pre-registered the rationale for the study, the hypotheses, and the analysis plan for the current study at https://osf.io/n62tb/?view_only=ace03c21bc7a4aa2b9d86e74db23880e. In the pre-registration, the label of the independent variable was “desire for status” not “desire for fame.” After the pre-registration, we changed the label because (a) the “desire for fame” label corresponds more closely to the rationale of the study and measurement of the independent

variable and (b) the “desire for status” label might have been misleading to some readers given the disagreement about the social status definition in the literature (e.g., Cheng et al., 2013). This change in labeling did not alter the pre-registered measurement of the independent variable and analysis plan to test the hypotheses.

The data for the study had already been collected when we pre-registered the study. Prior to the pre-registration, we had access to the data proposed for analysis, and we and other researchers had analyzed the data to answer other research questions than the ones of the current study (for more information about the data and publications that have used the data, see <http://www.uni-tuebingen.de/en/43701>). Furthermore, in the unpublished Studies 3 and 4 of her dissertation, Husemann (2007) investigated a similar but slightly different research question than we did with a subsample of the data that we used. She cross-sectionally investigated, among other things, whether subjective well-being was related to the importance of extrinsic goals (i.e., a composite of financial success, image, fame, and power goals), the importance of financial success goals, and the importance of power goals.

Availability of data, analytic methods and code, and research materials. The R code, Mplus output files, and the relevant pages of the codebooks⁴ can be found at the Open Science Project (OSF) page https://osf.io/je825/?view_only=85f1872466d44850b8db9314610d7824. The data are also stored on the OSF project page, but it was not permitted to make the data publicly available. If you would like to check the analysis and data, please contact the first author for a link to access the private OSF folder containing the data.

Measures

Desire for fame. Our measure of desire for fame consisted of three items from the Fame subscale (also labeled “Social Recognition”) of the Aspiration Index (all α s > .74;

⁴ Codebooks exist only in German and only for Time 1 to 5 but not for Time 6.

Kasser & Ryan, 1996; Klusmann, Trautwein, & Lüdtke, 2005).⁵ The Aspiration Index asks respondents how important for them various life goals are. The three Fame items contained the following life goals: “being admired by many people”, “being famous”, and “being admired by many different people.” The items were administered with a 4-point Likert-type scale ranging from 1 (*very unimportant*) to 4 (*very important*).

Subjective well-being. Our measure of subjective well-being included three scales, one of which measured the cognitive component and the other two measured the affective component of subjective well-being (e.g., Lucas, 2018). The cognitive component of well-being was assessed in the TOSCA study with four translated life satisfaction items (e.g., “I am satisfied with my current life”; all α s > .84; Pavot, Diener & Suh, 1998; Trautwein, 2004). The life satisfaction items were administered with a 4-point rating scale ranging from 1 (*does not apply at all*) to 4 (*applies completely*). The affective component of well-being was assessed with the two scales of the Positive and Negative Affect Schedule (PANAS; Krohne, Egloff, Kohlmann, & Tausch, 1996; Watson, Clark & Tellegen, 1988). The PANAS asks participants how they feel in general. It consists of two 10-item scales, a positive affect scale (example item: “excited”; all α s > .79) and a negative affect scale (“distressed”; all α s > .81). All PANAS items were administered with a 5-point rating scale ranging from 1 (*not at all*) to 5 (*completely*). The PANAS was only administered from Time 1 to Time 4.

Self-esteem. Self-esteem was assessed in the TOSCA study with three translated items from the Rosenberg Self-esteem Scale (all α s > .83; Rosenberg, 1965; item contents: “At times, I think I am no good at all”, “All in all, I am inclined to feel that I am a failure”, and “I wish I could have more respect for myself.”). The items were administered with a 4-point rating scale ranging from 1 (*does not apply at all*) to 4 (*applies completely*). Self-esteem was only assessed from Time 2 onwards.

⁵ The Fame subscale comprised five items at the first measurement time and four items at the second measurement time. We used only three of the Fame items because only three Fame items were assessed at later measurement times.

Physical health. Physical health was assessed in two ways: health status and health complaints. Health status was assessed by one item asking participants how their health was in comparison to people of the same age and gender (Staudinger, Fleeson, & Baltes, 1999). The response format ranged from 1 (*much worse*) to 7 (*much better*). Health complaints were assessed by asking participants how often they had experienced each of 13 somatic complaints (e.g., “headache”) in the last month. The response format ranged from 1 (*never*) to 5 (*often (more than 10 times)*). Health status was assessed from Time 2 to Time 6 and health complaints were assessed from Time 3 to Time 6.

Statistical Analyses

The analyses were run as pre-registered. Additionally, we ran a robustness check that we did not pre-register. In this robustness check, we re-ran all analyses—if possible—with person-mean centered desire for fame items. That is, the person’s time-specific unweighted mean score on 21 Aspiration Index items⁶ was subtracted from each of the three desire for fame item scores. We person-mean centered the desire for fame items to assess the relative desire for fame (i.e., strength of the desire for fame relative to the strength of the desire for other goals) and control for scale use and acquiescence. Some previous studies pointed out that the relative importance of aspirations rather than the absolute importance of aspirations matters (e.g., Kasser & Ryan, 1996).

Pre-registered analyses. For all analyses, we used structural equation modeling and maximum likelihood estimation with robust standard errors in Mplus (version 8; Muthén & Muthén, 2017) and the R package MplusAutomation (version 0.7-2; Hallquist & Wiley, 2018). Full information maximum likelihood estimation uses not only information from complete responses but also information from incomplete responses. Full information

⁶ The 21 Aspiration Index items comprised three items from each of seven life goal domains: personal growth, relationships, community, health, wealth, fame, and image (Klusmann et al., 2005). The 21 items were administered at the first four measurement times in the TOSCA study. Thus, the associations for only the first four measurement times were analyzed in this robustness check.

maximum likelihood usually comes with less bias and more power than traditional missing data handling techniques such as listwise or pairwise deletion (e.g., Enders, 2010).

Measurement models and invariance. The structural equation modeling framework allowed us to take into account measurement error in the desire for fame, the three measures of subjective well-being, and self-esteem. The desire for fame, the three measures of subjective well-being, and self-esteem were modeled as unidimensional latent variables measured with their items as indicators. Health status and health complaints were not modeled as latent variables because health status was assessed by only one item and the health complaints items are causal-formative indicators. In the models with health status, we included the health status item as an observed variable. In the models with health complaints, we calculated the unweighted mean of item scores on the 13 health complaints items and entered this variable also as an observed variable.

We assumed strong measurement invariance over time for the measurement models of the five latent variables (desire for fame, the three measures of subjective well-being, and self-esteem): the intercepts and factor loadings of all items were set to be equal across measurement times. We tested the assumption of measurement invariance for each construct in a separate model, in a global test (e.g., $\Delta CFI \geq .01$ and $\Delta RMSEA \geq .015$; Chen, 2007). If the assumption was not tenable for a construct, we checked the robustness of the results of our main analysis by additionally running all analyses *without* setting *all* intercepts or factor loadings equal across measurement times (i.e., partial measurement invariance). That is, we set the intercepts and factor loadings free that seemed to account for the lack of measurement invariance.

Furthermore, in all analyses, the errors of the same item were allowed to correlate across measurement times to account for item specificity (*correlated uniqueness*; Figures 1 to

5). Item specificity could otherwise inflate estimates of stability in latent variables over time (Marsh & Hau, 1996).

Hypothesis testing. We tested our hypotheses in separate models each containing the desire for fame variable and one of the six outcome variables (Figures 1 to 5). Desire for fame and life satisfaction were assessed at all six measurement times. Positive and negative affect, self-esteem, and health were not assessed at all measurement times (for details, see above). Thus, models with self-esteem, positive and negative affect, and health contained only a subset of the measurement times.

All hypotheses were tested one-tailed. The hypotheses with the letter “B”, which state that the respective association is *not* negative (i.e., that the effect is more positive than a small negative effect: $-.10 < r \leq 1$), were tested by the means of the Mplus “Model Constraint: New” option. This option allowed us to test whether the observed correlation coefficients were significantly less negative (or more positive) than $-.10$.

Hypotheses 1A to 6B. To test Hypotheses 1A to 3B (Table 1), we investigated how desire for fame correlated with subjective well-being, self-esteem, and health at each measurement time cross-sectionally (Figure 1). To test Hypotheses 4A to 6B, we investigated how desire for fame at Time 1 correlated with subjective well-being, self-esteem, and health at Time 6. To additionally test Hypotheses 4A to 6B, we investigated how desire for fame at Time 1, 2, 3, 4, and 5 correlated with subjective well-being, self-esteem, and health assessed at Time 2, 3, 4, 5, and 6, respectively (Figure 1).

Figure 1. Latent state model to test Hypotheses 1A to 6B. Bidirectional paths are only depicted for the hypothesized associations. All latent variables were allowed to covary. For simplicity, the figure displays only three items per construct even though some constructs were measured by more than three items. x_t = desire for fame at measurement time t ; y_t = subjective well-being, self-esteem, or health at measurement time t .

Hypotheses 7A to 9B. Hypotheses 7A to 9B were tested by investigating how the level of desire for fame related to subsequent changes in subjective well-being, self-esteem, and health in *latent change score models* (also called *true intraindividual change models*; e.g., Geiser, 2011; McArdle, 2009; Steyer, Eid, & Schwenkmezger, 1997; Figure 2) and *latent growth curve models* (e.g., Bollen & Curran, 2006; Figure 3). In the latent change score models, we first investigated how desire for fame at Time 1 correlated with changes in well-being, self-esteem, and health over the entire period (i.e., between Time 1 and 6; Figure 2, upper panel). Second, we investigated how desire for fame at Time 1, 2, 3, 4, and 5 correlated with changes in well-being, self-esteem, and health between Time 1 and 2, Time 2 and 3, Time 3 and 4, Time 4 and 5, and Time 5 and 6, respectively (Figure 2, lower panel).

Figure 2. Latent change score models (e.g., Geiser, 2011; McArdle, 2009; Steyer, Eid, & Schwenkmezger, 1997) to test Hypotheses 7A to 9B. Bidirectional paths are only depicted for the hypothesized associations. All unidirectional paths are fixed to one (except for item loadings). The residual variances of y_1 to y_6 are fixed to zero. All latent variables with (residual) variance were allowed to covary. For simplicity, the figures display only three items per construct even though some constructs were measured by more than three items. x_t = desire for fame at measurement time t ; y_t = subjective well-being, self-esteem, or health at measurement time t .

We chose latent change score models over residual change score models and cross-lagged panel models to test Hypotheses 7A to 9B, because the change score models are simpler and contain an unbiased estimator of change (i.e., the difference score). Residual

change score models and cross-lagged panel models are more complicated (to interpret) and are believed to contain a biased estimator of change (i.e., the residual change score; e.g., Hamaker, Kuiper, & Grasman, 2015; Rogosa, Brandt, & Zimowski, 1982).

In the latent growth curve models, we investigated how desire for fame at Time 1 correlated with the linear growth curve factor of subjective well-being, self-esteem, and health, respectively (Figure 3). The advantage of the latent growth curve model over the latent change score model is that the change parameter in the growth curve model is estimated based on more than two measurement times whereas the latent change score is estimated based on only two measurement times (e.g., Rogosa et al., 1982). The disadvantage of the latent growth curve model is that, in contrast to the latent change score model, it imposes the *same shape* of the curve onto every individual. Individuals can vary in the intercept and slope factors that are specified, but not in the shape of the curve—in our case a linear slope is imposed (i.e., a linear function of change between first and last measurement time; e.g., Steyer et al., 1997).

Figure 3. Latent variable model and latent growth curve model with intercept and linear growth curve factor (e.g., Bollen & Curran, 2006) to test Hypotheses 7A to 9B. The residual variances of y_1 to y_6 are *not* fixed to zero. Bidirectional paths are only depicted for the hypothesized associations. Both growth curve factors (i.e., intercept and slope) were allowed to covary with x_1 . For simplicity, the figure displays only three items per construct even though some constructs were measured by more than three items. x_t = desire for fame at measurement time t ; y_t = subjective well-being, self-esteem, or health at measurement time t .

Hypotheses 10A to 12B. Hypotheses 10A to 12B were tested by investigating how changes in desire for fame related to contemporaneous changes in subjective well-being, self-esteem, and health in *bivariate latent change score models* and *bivariate latent growth curve models* (Figures 4 and 5). In the latent change score models, we first investigated how changes in desire for fame over the entire time period (i.e., between Time 1 and 6) correlated with changes in well-being, self-esteem, and health over the same period (Figure 4, upper panel). Second, we investigated how changes in desire for fame between Time 1 and 2, Time 2 and 3, Time 3 and 4, Time 4 and 5, and Time 5 and 6 correlated with changes in well-being, self-esteem, and health over the same periods (Figure 4, lower panel).

Figure 4. Bivariate latent change score models (e.g., Geiser, 2011; McArdle, 2009; Steyer, Eid, & Schwenkmezger, 1997) to test Hypotheses 10A to 12B. All unidirectional paths are fixed to one (except for item loadings). The residual variances of x_1 to x_6 and y_1 to y_6 are fixed to zero. Bidirectional paths are only depicted for the hypothesized associations. All latent variables with (residual) variance were allowed to covary. For simplicity, the figures display only three items per construct even though some constructs were measured by

more than three items. x_t = desire for fame at measurement time t ; y_t = subjective well-being, self-esteem, or health at measurement time t .

In the bivariate latent growth curve models, we investigated how the linear growth curve factor in desire for fame correlated with the linear growth curve factor in subjective well-being, self-esteem, and health (Figure 5).

Figure 5. Bivariate latent growth curve model with intercept and linear growth curve factor (e.g., Bollen & Curran, 2006) to test Hypotheses 10A to 12B. The residual variances of x_1 to x_6 and y_1 to y_6 are *not* fixed to zero. Bidirectional paths are only depicted for the hypothesized associations. All growth curve factors (i.e., intercepts and slopes) were allowed to covary. For simplicity, the figure displays only three items per construct even though some constructs were measured by more than three items. x_t = desire for fame at measurement time t ; y_t = subjective well-being, self-esteem, or health at measurement time t .

Method of correction for multiple tests. As pre-registered, we moderately corrected the p -values for multiple testing by using a significance level of $\alpha = .01$ instead of the conventional $\alpha = .05$ to test our hypotheses. We reasoned that a strict Bonferroni correction would have been too conservative (see also Footnote 3).

Results

The results for the main analysis can be found in Figure 6 and Table S2. The results of the robustness check with partial invariant measurement models were almost identical to the main results and will thus be only reported in the supplemental material (Table S3). The results of the (*not* pre-registered) robustness check with relative desire for fame (i.e., person-mean centered desire for fame items) can be found in Figure 6 and Table S4.

Subjective well-being as outcome. The first indicator of subjective well-being was life satisfaction. In the main analysis, one correlation between the desire for fame and life satisfaction was negative ($-1 \leq r < 0$; $p \leq .01$) and thus in line with self-determination theory (Figure 6). Nineteen correlations were *not* negative ($-.10 < r \leq 1$; $p \leq .01$) and thus in line with the status-as-fundamental-motive perspective. Six correlations were inconclusive. Notably, the status-as-fundamental-motive perspective was supported across the entire range of cross-sectional and longitudinal associations. We found similar, albeit less unequivocal results, in the robustness check with the person-mean centered desire for fame items (Figure 6).

Figure 6. Associations between absolute and relative desire for fame with subjective well-being, self-esteem, and health. The sample size varies between 4,208 and 4,625. Detailed results can be found in Table S2 and S3. All associations were tested in structural equation models. The fit indices for the structural equation models can be found in Table S5. For the outcome variables that were not assessed at all measurement times, some change intervals are shorter than indicated in the figure (e.g., the interval is T41 instead of T61 in the analysis with the PANAS scales; see also Methods section). TX = measurement time X (e.g., T1 = measurement time 1); TXY = change between two time points (e.g. T21 = change between Time 2 and Time 1). LGCM = test involved Latent Growth Curve Model (e.g., Bollen & Curran, 2006).

The results for positive affect (PANAS) were very similar to those for life satisfaction. Very few associations were in line with self-determination theory. Most associations were in line with the status-as-fundamental-motive perspective (Figure 6). The cross-sectional correlations between desire for fame and positive affect reached the size of a small positive effect at Time 1 ($r = .13$) and Time 2 ($r = .10$; for similar results, see Martos & Kopp, 2012). We even found a medium-size positive correlation ($r = .29$) between changes in desire for fame over a 6-year period and changes in positive affect over the same time period in the bivariate latent growth curve model (Figure 5)—positive affect was only assessed in the first 6 of 10 years (see Method section). Yet, in line with self-determination theory, two negative correlations indicated that people who showed a strong desire for fame at age 19 tended to show decreases in positive affect in the subsequent 6 years. In the robustness check, not a single correlation was in line with self-determination theory, whereas five correlations were in line with the status-as-fundamental-motive perspective (Figure 6). Taken together, the results for the first two indicators of subjective well-being, life satisfaction and positive affect, provided less support for the hypotheses derived from self-determination theory than for the hypotheses inspired by the status-as-fundamental-motive perspective.

This picture changes when we look at the third indicator of subjective well-being, negative affect (PANAS; Figure 6). Twelve correlations between desire for fame and negative affect were positive and thus in line with self-determination theory. Five were *not* positive and thus in line with the status-as-fundamental-motive perspective. The positive correlations of desire for fame with concurrent and subsequent negative affect were the strongest and most robust effects that we found in the current study (Figure 6). Changes in desire for fame were also positively correlated with simultaneous changes in negative affect. In other words, increases in desire for fame tended to be accompanied by increases in negative affect, and decreases in desire for fame tended to be accompanied by decreases in negative affect. The

five non-negative correlations in line with the status-as-fundamental-motive perspective were correlations between initial desire for fame and subsequent changes in negative affect. The absence of such negative associations suggests that the level of desire for fame does not elicit constant changes in negative affect. The results involving negative affect were similar in the robustness check with relative desire for fame (Figure 6).

Self-esteem as outcome. The results for self-esteem were similar to the results for negative affect, albeit the support for self-determination theory was weaker (Figure 6). Desire for fame correlated negatively with self-esteem cross-sectionally, and changes in desire for fame correlated negatively with changes in self-esteem two out of six times. The initial level of desire for fame did not correlate negatively with subsequent changes in self-esteem, which was in line with the status-as-fundamental-motive perspective. The other associations were mostly inconclusive. The results were similar in the robustness check with relative desire for fame.

Health as outcome. The results for health status were unequivocally in line with the status-as-fundamental-motive perspective. The correlations were all close to zero in the main results and in the robustness check (Figure 6). The single-item measure of health status might be less valid and reliable than the 13-item health complaints measure, which we report next.

The results for health complaints showed a mixed picture (Figure 6). The cross-sectional correlations between desire for fame and health complaints were all but one negative and thus these associations supported self-determination theory. Similarly, the correlations between desire for fame and subsequent health complaints tended to support self-determination theory. When we look at the associations involving changes in health complaints, none of the correlations supported self-determination theory and most correlations were in line with the status-as-fundamental-motive perspective. This pattern was similar in the robustness check with relative desire for fame (Figure 6).

Discussion

The current study tested opposing hypotheses drawn from self-determination theory on the one hand (e.g., Ryan et al., 1999; Ryan & Deci, 2000) and the status-as-fundamental-motive perspective on the other hand (Anderson et al., 2015). The results were not unequivocally in line with either of the two competing perspectives, but rather painted a mixed picture. In line with self-determination theory, the desire for fame was several times positively associated with negative affect, low self-esteem, and health complaints. These findings are in accordance with research showing that a strong emphasis on extrinsic goals is negatively related to well-being and health (e.g., Kasser & Ryan, 1996; Niemiec et al., 2009; Ryan et al., 1999). For example, Kasser and Ryan (1996) found that the relative importance of extrinsic goals such as money or fame was positively associated with responses to a physical symptoms questionnaire similar to our health complaints questionnaire—the time frame of the two questionnaires was different though (physical symptoms in last 7 days vs. health complaints in last month).

In contrast to self-determination theory and in accordance with the status-as-fundamental-motive perspective, the desire for fame was mostly uncorrelated, and sometimes positively correlated, with life satisfaction, positive affect, and health status. Moreover, the desire for fame was several times *not* negatively correlated with negative affect, low self-esteem, and health complaints. These findings are in line with those of Martos and Kopp (2012) who found positive associations between importance of extrinsic goals (including fame) and an aggregate measure of subjective well-being consisting of positive mood, life satisfaction, and happiness in a large representative Hungarian sample.

If we were to tally up the number of times each of the two sets of hypotheses was supported, we would find that self-determination theory was less frequently supported than the status-as-fundamental-motive perspective. However, such a tally might be regarded unfair

given that we considered negative as well as non-positive associations between desire for fame and ill-being as support for the status-as-fundamental-motive perspective while considering only positive associations as support for self-determination theory. Our predictions derived from self-determination theory were more precise (i.e., narrower interval prediction) than the predictions derived from the status-as-fundamental-motive perspective because we were more confident in the hypotheses derived from self-determination theory than in the hypotheses derived from the status-as-fundamental-motive perspective. Deriving hypotheses from self-determination theory was straightforward because fame is an extrinsic goal and desiring extrinsic goals should lead to ill-being according to self-determination theory and research. Deriving hypotheses from the status-as-fundamental-motive perspective was less straightforward because (a) Anderson et al.'s (2015) status construct is very similar but not identical to the fame construct in self-determination theory, (b) Anderson et al. only state that the attainment of status, not the *desire* for status, leads to well-being, self-esteem, health and (c) only a few studies indicate that the desire for fame relates positively to fame attainment and the found associations were via the aggregate measure of extrinsic goals (e.g., Niemiec et al., 2009). Therefore, we were more careful with our predictions in the latter case. In turn, our test of self-determination theory was stronger (i.e., more informative and corroborative; see also Fiedler, 2017; Meehl, 1990) than our test of the status-as-fundamental-motive perspective. This needs to be taken into account when interpreting the results. Therefore, we think the picture is mixed rather than in favor of either of the two positions.

Explanations for the mixed findings regarding desire for fame and ill-being

To reconcile these mixed findings, let us first have a look at the definition of fame. By definition, the attainment of fame is dependent on other people. In order to attain fame (i.e., to receive admiration and recognition), one needs to be perceived favorably by other people.

Thus, if fame is important for oneself (i.e., high desire for fame), one's well-being, self-esteem, and health depends to a larger degree on other people than if fame is not important (i.e., low desire for fame). This dependency might lead to stronger fluctuations in well-being, self-esteem, and health. As a consequence, people with a strong desire for fame might report both higher levels of positive affect and higher levels of negative affect, a pattern which was observed in our main results (Figure 6). Stronger fluctuations might also explain the found associations of desire for fame with low self-esteem and health complaints. Moreover, stronger fluctuations would be in line with the argument of self-determination theory that aspiring to extrinsic goals leads to unstable forms of well-being (hedonism) rather than to sustainable well-being (or "eudaimonia") because the attainment of extrinsic goals is contingent on task performance or positive feedback (e.g., Deci & Ryan, 1995; Ryan, Koestner, & Deci, 1991; see also, Nicholls, 1984).

That said, a strong desire for any goal, not only a desire for fame or other extrinsic goals, might lead to a dependence on goal attainment (e.g., Brunstein, 1993; Lawrence, Carver, & Scheier, 2002). If one strongly desires intrinsic goals such as relationships (i.e., social belongingness) or personal growth, one's well-being, self-esteem, and health should also depend on the progress towards these goals. According to self-determination theory, the crucial difference between extrinsic goals such as desire for fame and intrinsic goals is that intrinsic goals but not extrinsic goals satisfy any of the three basic, innate needs proposed by the theory: relatedness, competence, and autonomy (e.g., Ryan et al., 1999; Ryan & Deci, 2000). The extrinsic nature of desire for fame might explain why the absolute and especially the relative desire for fame was associated with negative outcomes (negative affect, low self-esteem, and health complaints) but hardly with any of the positive outcomes.

Still, the desire for fame was uncorrelated or positively correlated with more than half of the indicators of ill-being regardless of whether the absolute or relative desire for fame was

assessed. Furthermore, alternative explanations for why the (relative) desire of fame is associated with some negative outcomes might be proposed that do not contradict the status-as-fundamental-motive perspective. It might simply be more difficult to attain fame than other goals, and the lack of progress towards the goal rather than the nature of the goal might cause (on average) negative affect, low self-esteem, and health complaints. Fame is tied to the rank in the hierarchy of a group, and not all people can be on top of the hierarchy (Anderson et al., 2015; Freund, 2017). Some people are more admired in their friendship or workplace group than others, and only a few people are admired in the society of a region or country. In contrast, intrinsic goals such as relationships, personal growth, or health can be achieved by all or most of the people in a group, especially in the sample of the current study. German upper secondary school graduates who prioritize fame over relationships, personal growth, or health might be less likely to attain what they desire than graduates who prioritize relationships, personal growth, or health over fame. If attaining fame is indeed more difficult than attaining other goals, the claim by self-determination theory that strongly desiring fame is maladaptive might be valid, but the reasons for the maladaptiveness might not be the reasons proposed by self-determination theory.

Longitudinal associations between desire for fame and ill-being

In contrast to most previous studies, the current study investigated not only cross-sectional associations between desire for fame and ill-being but also longitudinal associations. To test the longitudinal implications of the claim that desire for fame leads to ill-being, we investigated whether the level of desire for fame is associated with (a) subsequent levels of ill-being and (b) subsequent changes in ill-being, and (c) whether changes in desire for fame are associated with simultaneous changes in ill-being.

In general, the longitudinal associations, especially the longitudinal associations involving change parameters (Hypotheses 7 to 12), were less consistent (i.e., showed less

consistently support for either self-determination theory or the status-as-fundamental-motive perspective) than the cross-sectional associations (Hypotheses 1 to 3). A reason for this inconsistency might be lower reliability in the change variables than in the single-time variables. Our measures of desire for fame and ill-being are not only influenced by relatively stable individual differences but also by daily fluctuations (i.e., state variance). These daily fluctuations can be considered a source of measurement error in our trait measures. This kind of measurement error cannot be corrected for by traditional latent variable modeling techniques because all items at one measurement time should be affected equally by daily fluctuations. Measurement error tends to affect change scores more strongly than it affects single-time variables when the rank-order stability is high (e.g., Williams & Zimmerman, 1996). Given that the rank-order stabilities were rather high in the current study (e.g., desire for fame at Time 1 correlated .63 with desire for fame at Time 2), the reliability of change variables should be a bit lower than the reliability of single-time variables. The lower reliability might explain why the longitudinal associations involving change scores were usually less consistent and smaller than the associations involving single-time variables (Figure 6).

In detail, the desire for fame correlated positively with subsequent levels of negative affect and changes in the desire for fame correlated with changes in negative affect, but the desire for fame did not correlate with subsequent changes in negative affect (Figure 6). The absence of associations between desire for fame and subsequent changes in negative affect indicates that a high level of desire for fame is not associated with consistently increasing negative affect. This contradicts or limits the proposition by self-determination theory that a strong emphasis on extrinsic goals (including fame) leads to ill-being (e.g., Ryan et al., 1999). If desiring fame is a trap (Ryan et al., 1999), then people who strongly desire fame should have shown stronger increases in ill-being over time than people who barely desire fame. The

correlations between changes in desire for fame and changes in ill-being suggest that increases in desire for fame lead to increases in negative affect, increases in negative affect lead to increases in desire for fame, or increases in both are caused by a third variable. The first two causal mechanisms would be in line with the propositions by self-determination that the desire for fame leads to ill-being and that frustrated basic needs lead to the pursuit of extrinsic goals such as fame, respectively (e.g., Ryan et al., 1999; Vansteenkiste & Ryan, 2013).

The desire for fame sometimes correlated negatively with subsequent levels of self-esteem and changes in the desire for fame sometimes correlated with changes in self-esteem, but the desire for fame did not correlate with subsequent changes in self-esteem. These findings again suggest that increases in desire for fame are linked to decreases in self-esteem (the causal mechanism remains unclear), but a high level of desire for fame does not lead to consistent decreases in self-esteem.

The desire for fame sometimes correlated with subsequent health complaints but not with subsequent changes in health complaints, and changes in desire for fame did not correlate with changes in health complaints. This is odd because associations of desire for fame with concurrent and subsequent health complaints should be accompanied by associations between (changes in) desire for fame and changes in health complaints, at least if the desire for fame leads to ill-being. Perhaps (changes in) desire for fame correlated with changes in ill-being prior to the assessment of health complaints, which was assessed only from Time 3 onwards. Somewhat in line with this explanation, the cross-sectional correlation between desire for fame and health complaints was not significant anymore at Time 6.

Limitations and Directions for Future Research

A major contribution of the current study was to contrast two research strands, self-determination theory and status-as-fundamental-motive perspective, and empirically test

hypotheses inspired by them against each other. Such a challenging endeavor comes not without potentially controversial issues. For example, it might be argued that desiring fame differs from desiring social status because (a) desiring fame is more extreme than desiring status and (b) fame involves only one of three features of Anderson et al.'s (2015) social status construct: being admired and esteemed by other people. We agree that desire for fame items might be on average less strongly endorsed than (less extreme) desire for status items. Yet, both fame and social status items should reflect individual differences in the desire to be admired by other people. Second, admiration by other people is usually accompanied by the other two features of social status: influence without force (i.e., voluntary deference by others) and perceived instrumental social value (e.g., Anderson et al., 2015; Leary et al., 2014). In line with our argumentation, the three desire for fame items we used correlated .46, .35, and .43 with an item that asked participants about the importance of the goal “possessing a high social status” at Time 2 of the TOSCA study ($N = 2,270$)—this item was not administered at Time 1. The three inter-item correlations are well above the lower-bound of .20 proposed for mean inter-item correlations of homogenous scales (e.g., Briggs & Cheek, 1986). Thus, we believe that the current results are not only informative for researchers on fame and self-determination theory but also for social status researchers. That said, future research might want to investigate how the desire for status is related to ill-being with original measures of the desire for social status.

Although our data had several strengths (e.g., longitudinal design spanning over 10 years, large sample size, and the quality and variety of outcome measures), it also comes with some limitations. First, due to the two-year intervals between measurement occasions, we were not able to assess more short-term fluctuations in subjective well-being, self-esteem, and health. Because the desire for fame might be related to such fluctuations, future research might want to probe this possibility by the use of experience sampling methods. Second, our

single-item measure of subjective “total health” might not be very reliable and valid in this specific population (i.e., young people who are well except a few persons who suffer from chronic illnesses). This psychometric issue might explain why we found different results for health status than for health complaints. Third, although the random sampling combined with a very high participation rate are strength of the sampling, we need to emphasize that the population of upper secondary school graduates in the state of Baden-Württemberg are not representative of the German general population. For example, German upper secondary school graduates might be more likely to attain fame in the society of a region or country than less educated people. On the other hand, graduates might only attain fame after the time frame of the current study (i.e., age 20 to 30). Furthermore, the instrumentality of fame to attain subjective well-being and health might be different in a welfare state like Germany than in other countries. Future research might want to investigate the associations between desire for fame and ill-being in populations with lower education and different age, and in populations from countries without welfare state.

Conclusion

The current study was a big first step to empirically test the contrasting implications of self-determination theory and the status-as-fundamental-motive perspective. In line with self-determination theory, desiring fame was positively associated with negative affect, low self-esteem, and health complaints in several instances. In line with the status-as-fundamental-motive perspective, desiring fame was mostly uncorrelated, and sometimes positively correlated, with life satisfaction, positive affect, and health status. This mixed picture encourages both research strands to refine some of their theoretical conceptions about the intrapersonal consequences of the desire to be admired by other people.

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