

The goal of this brief review is to inform the general reader about what is known and not known about self-esteem, a frequent topic of conversation among parents, educators, and mental health professionals. In general, one hears conversations about the dangers of low self-esteem, how best to raise children and adolescents' self-esteem, and how to avoid practices and circumstances that threaten to lower it. It is assumed that there is a large body of research that unequivocally demonstrates that self-esteem is an important developmental asset and the goal of increasing self-esteem ought to be incorporated in most if not all educational programs. Unfortunately, while the body of literature on self-esteem is vast, a certain degree of controversy surrounds what self-esteem is, why it is important, how to measure it, or whether it can be improved. My goal is to inform readers of the state of the art in scientific knowledge about self-esteem regarding what has been generally established and what remains uncertain.

This is not an exhaustive review because the literature is indeed vast. Rather, whenever possible, I rely on the results of meta-analyses that summarize the outcomes of a large number of studies. Meta-analysis is a technique to integrate results from a large number of research studies on the same topic (Glass & Smith, 1981). Meta-analyses report results in terms of "effect sizes." One way to view an effect size is as a measure of how much difference there is between peoples' ratings of themselves at two different points in time. In studies of whether aerobic exercise improves self-esteem, for example, the effect size would indicate the difference in self-esteem before adolescents participated in an aerobic exercise program and after their participation relative to adolescents who did not participate in aerobic exercise. In other words, the effect size can represent the *amount of change* that can be attributed to the impact of the independent variable, which in this example is aerobic exercise.<sup>1</sup> Different people offer different advice regarding how to interpret effect sizes but the most accepted opinion is that

of Cohen (1988) who proposed that 0.2 indicates a small effect, 0.5 a medium and 0.8 a large effect size.

### *Definition of Self-esteem*

Self-esteem has been generally defined as the evaluation of the self; it is an affective response to one's self-description. The evaluation refers to a judgment of one's worth and what is being judged is one's perception of who one is, or one's self-concept.<sup>2</sup> In every day terms, self-esteem can be expressed in "I like who I am," "I don't like who I am," or someplace in between these two end points. In this sense, related words such as self-confidence, self-worth, self-image, and positive self-regard can be used interchangeably; even self-concept has been used in some studies to suggest positive beliefs about the self. This focus on affect (different degrees of feeling good about one's self) in the definition of self-esteem has its roots in William James' views (1892), which emphasized that self-evaluation is influenced by one's self-perceived competencies in important domains. Embedded in James' view of self-esteem is measuring up to an internal standard in arenas deemed important by the individual. According to James' view that self-esteem is a reflection of how good one believes one is in fields that are important, a girl (let's call her Maria) would like herself if she viewed herself to be good at math and basketball. It would not matter that Maria viewed herself as the worst violin player in her class because being good at school and in sports is more important to her view of who she is than being good in music.

But, how does one come to believe that one is good or good at something? The answer to this question was provided by Cooley (1902) and later by Mead (1934). These symbolic interaction theorists have emphasized that people come to know who and how good they are based on the feedback they receive from significant others. The notion of self-evaluation being derived from others' views has given rise to the notion of the "looking glass self," as

in, "I am who I think others think I am." It reflects the point of view that we learn about who we are by internalizing reflected appraisals, which are other people's perceptions and evaluations of us.

The intellectual legacy of William James and social interaction theorists has been most influential in formulations of self-esteem as an individual personality trait. Self-esteem as an enduring trait is believed to have wide relevance to how people behave, think, and feel in societies that are variously called independence-fostering or individualistic.

Cross-cultural researchers have questioned the relevance of traits that describe people in individualistic societies to the lives of people who live in more collectivist societies that value interdependence (e.g., Kağıtçıbaşı, 1996; Markus & Kitayama, 1991; Triandis, 1989; Triandis & Suh, 2002). Consequently, a significant body of research has examined self-esteem cross-culturally, with particular emphasis on whether self-esteem has similar meanings and correlates in individualistic and collectivist culture (e.g., Diener & Diener, 1995; Farrugia, Chen, Greenberger, Dmitrieva, & Macek, 2004). I will say more about the generalizability of the North American concept of self-esteem under *Measurement*.

### *Why the Interest in Self-Esteem?*

Self-esteem has intuitive appeal. The common sense assumption is that if you like yourself, you will be less likely to engage in self-destructive behaviors such as bullying, delinquency, low academic achievement, drug abuse, or even suicide. The general public, educators, psychologists, mental health professionals, and child and adolescent advocates have long been interested in self-esteem because of the assumed association of low self-esteem with poor academic performance, depression, and engaging in health risk behaviors, such as drug abuse. This assumption implies that self-esteem can be protective of better physical health, mental health, and good academic outcomes. The belief in the "protective" powers

of self-esteem is so strong that it is routinely assessed as an outcome variable in evaluations of intervention and prevention programs for youth.

Many programs have been set up with the expressed purpose of boosting children's and adolescents' self-esteem. One of the more famous of these is the California task force on self-esteem and social and personal responsibility. In the 1980s, proponents of the task force, led by State Assemblyman John Vasconcellos, argued that boosting young people's self-esteem would reduce crime, teen pregnancy, drug abuse, and underachievement in school. Among other activities, the task force commissioned a number of scholars to review the relevant literature which resulted in the volume, *The Social Importance of Self-Esteem* (Mecca, Smelser, & Vasconcellos, 1989). This task force disbanded in 1995. The National Association of Self-Esteem (NASE) is another high visibility initiative whose continuing mission is to improve quality of life by creating, facilitating, and supporting a positive change in individuals and their communities through the application of the principles of self-esteem (Fountain, 2004).

Research on self-esteem has consistently found a relationship between depression and low self-esteem (e.g., Kernis, Grannemann, & Mathis, 1991; King, Naylor, Segal, Evans, & Shain, 1993; Lewinsohn, Seely, & Gotlib, 1997) and a relationship between high self-esteem and life satisfaction (e.g., Diener & Diener, 1995; Lyubomirsky, Tkach, & DiMatteo, 2006). Diener and Diener's (1995) cross-cultural study of over 13,000 college students in 31 countries showed that the relationship between life satisfaction and self-esteem is stronger than the relationship between life satisfaction and financial satisfaction except in very poor countries. Beyond these two associations (depression with low self-esteem and life satisfaction with high self-esteem), relationships of other variables of interest to people committed to boosting self-esteem (such as academic achievement and avoiding health risk behaviors) have been inconsistent, very small, or opposite of what was hoped for (see Baumeister, Campbell, Krueger, & Vohs, 2003, 2005).