

Self-Esteem: A Concept Analysis

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Abstract

The concept of self-esteem has been discussed in various disciplines. It is necessary to broaden the conceptualization to reach a better understanding in nursing discipline. The purpose of this paper is to explore the concept of self-esteem following Walker and Avant's concept analysis method. The concept analysis method consists of eight linear steps. The author addresses the self-esteem phenomenon from a nursing perspective due to its various uses. The analysis helps to expand the knowledge of self-esteem and enhance nursing science. Roy's adaptation model is used as a philosophical scheme to provide a scientific nursing definition.

Keywords

concept analysis, nursing, Roy adaptation model, self-esteem

Purpose of Self-Esteem Analysis

The purpose of analyzing self-esteem is to provide a better understanding and add to the existing body of knowledge about self-esteem's attributes in relation to nursing. This in turn enhances nursing science and provides nurses with more details about self-esteem that may improve nursing care. According to Modrcin-Talbott et al. (1998), self-esteem referred to the individual's perception of competence, worthiness of respect, and value. However, there have been minor variations on self-esteem's definition over time. For example, in the *Oxford English Dictionary*, self-esteem (n.d.) is defined as a "good opinion of oneself; high self-regard; confidence in one's own worth or abilities. Also, one's own estimation or evaluation of oneself." Self-esteem was further defined as "an inner attitude at the base of the personality's construction that is responsible about that individual's psychic balance and the adaptive processes over the course of life" (Doré, 2017). According to Roy (2009), the person, in her adaptation model, is viewed as an adaptive system that uses input, output, and feedback. Understanding Roy's model is extremely significant for nurses as it helps promoting adjustment to health challenges or illness and enhances the adaptation process through the four adaptive modes, thus contributing to health and quality of life. Nursing care has an important role in promoting the adaptation process to help achieving health through assessing and enhancing self-esteem. Foster (1990) recommended that it is imperative for nurses to assess self-esteem in adolescents and plan nursing interventions accordingly to improve and maintain self-esteem.

Uses of Self-Esteem

The concept of self-esteem is and has been addressed in the literature by many disciplines, such as sociology, psychology, philosophy, and nursing. In these disciplines, self-esteem is

categorized as a psychological construct, a social construct, and a behavioral construct (James, 1892; Rogers, 1951; Rosenberg, 1979).

James (1892), a psychologist and a philosopher, was thought to be the creator of the self-esteem movement because he was the one who identified the concept of self-esteem as a distinct psychological construct (Hewitt, 2005; Leary, Tambor, Terdal, & Downs, 1995; Seligman, 1996). He identified multiple dimensions of the self and created the self-esteem formula in which he thought that self-esteem is equated with one's successes divided by pretensions, which is one's expectations of success (James, 1892). Moreover, Maslow (1987), who was a psychologist as well, included self-esteem in his human hierarchy of needs. He believed that without fulfilling self-esteem's need, the individual would be unable to grow and reach self-actualization, which is at the top of the hierarchy. He described a self-actualized individual as having a desire "to become everything one is capable of becoming" (Maslow, 1987, p. 64).

Rosenberg (1979), a sociologist, discussed self-esteem as a social construct. He examined self-esteem as social forces' outcome and focused on how social structural positions such as race and ethnicity shape or relate to self-esteem. Additionally, he developed the Rosenberg self-esteem scale (RSES), which became the most widely used instrument to measure self-esteem. A study was conducted on 3,694 adolescents (mean age 14.3 years) to explore the association of self-esteem and resilience with cannabis use and smoking. The results showed an association of negative self-esteem with smoking and cannabis use among boys. It also showed that the prevention of substance use should target the social

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environment. That is the family and social network because it influences self-esteem (Veselska et al., 2009). Moreover, the sociometer theory in psychology, which was proposed by Mark Leary and his colleagues in 1995, has emphasized the theme of self-esteem. The sociometer theory stated that self-esteem is a sociometer of interpersonal relationships. In other words, the level of self-esteem is determined by an individual's internal measure (sociometer) of a social acceptance or rejection within the social group (Leary & Downs, 1995).

Self-esteem was also described in the literature as a behavioral construct. In the mid-20th century, a movement toward behaviorism, phenomenology, and humanistic psychology has been raised in which the human being was studied through experimenting and observing his or her behaviors in relation to the environment. Rogers (1951), an advocate of humanistic psychology, theorized that the origin of many people's problems or undesirable behaviors was feeling worthless or not being loved. In addition, he believed that giving an unconditional acceptance to clients could improve self-esteem, which in turn could improve behavior. Similarly, writers in the nursing discipline also found that (Modrcin-Talbott et al., 1998). Modrcin-Talbott et al. (1998) conducted a descriptive, correlational study on 77 adolescents aged 12–19 years who were enrolled in an outpatient psychiatric treatment. The study aimed to examine the difference in self-esteem levels by gender, age group (early, mid-, and late adolescence), smoking, and exercise participation. The study found that lower self-esteem in these adolescents was significantly associated with an older age group, no exercise, and more depression. The study concluded that self-esteem affects human behavior.

Self-Esteem and Roy's Adaptation Model (RAM)

At the center of RAM are the concepts of person, nursing, environment, and health (Roy, 2009). The person in the RAM is viewed as an adaptive system that uses input, output, and feedback. Roy stated that environmental input affects the behavioral development of both individuals and groups. As a result, there are two types of behaviors, either adaptive or maladaptive (Roy, 2009). Examples of the outputs in response to stimuli can be human behaviors such as anger expression. These behaviors can be adaptive, such as physical activity, or maladaptive, such as depression. When inputs are received, the adaptive system activates two coping mechanisms (the regulator and the cognator subsystems). The regulator subsystem responds instantly through chemical, neural, and endocrine activity, whereas the cognator subsystem responds through cognitive-emotive channels. The RAM also emphasized that the individuals' responses to stimuli are observed through four adaptive modes: physiological, interdependence, self-concept, and role function. The person has a behavioral response to maintain the adaptive system's integrity through these modes. Self-esteem comes under the

self-concept adaptive mode in the RAM. For instance, individuals with high self-esteem usually display adaptive responses such as assertiveness and self-respect, whereas individuals with low self-esteem may display maladaptive responses (Roy, 2009).

The self-concept adaptive mode in the RAM deals with the person's feelings and beliefs, which are responsible for psychic integrity and equilibrium. It consists of both the physical and the personal self. The physical self consists of body sensation, which is the ability to feel symptoms or express sensations, and body image, which is the personal view of his physical appearance. The personal self, which is how one views his values, qualities, and worth, includes the three components of self-consistency, self-ideal or expectancy, and the moral-ethical-spiritual self. Self-consistency is the self-description of qualities that include self-organized behaviors. Self-ideal is what a person would like to do or be, and the moral-ethical-spiritual self is the personal belief system, values, and worth. Roy explained that in each component of the self-concept mode, self-esteem is inherent (Roy, 2009).

Defining Attributes

To achieve conceptual clarity of self-esteem, the Walker and Avant (2005) method for concept analysis was used to explore the attributes. The attributes are worth, acceptance, and efficacy. All the defining attributes are connected to the personal self in the self-concept adaptive mode of the RAM.

Worth

Worth is a crucial attribute of self-esteem. It is the idea of an intimate evaluation of one's value. It comes with one's perspective about self and considering what is valuable and favorable. Moreover, self-worth is derived from one's own self-assessment. To respect self is to love self with sufficient confidence and worth, to be able to define self, assert self, and differentiate self from the expectations and demands of others. Self-respect and acceptance have been used most frequently as measures of self-esteem. They widely identify the overall feelings of respect and acceptance by people (Rosenberg, Schooler, Schoenbach, & Rosenberg, 1995). Worth is connected to the moral-ethical-spiritual self-component of the personal self in the self-concept adaptive mode of the RAM. Zamanzadeh et al. (2016) conducted a qualitative study on 14 nursing students in Iran to examine the extent and characteristics of the self-esteem concept. They found that the self-esteem of the nursing students is related to the perceived sense of worth of being nursing students.

Acceptance

Acceptance is another defining attribute of self-esteem. Wyllie (1974) defined self-acceptance as "respecting oneself including one's admitted faults" (Wyllie, 1974, p. 127). Self-accepting

people are those who can accurately regard themselves and are aware of their strengths and weaknesses and happy with the facts. It is not linked to accomplishments or capabilities. In fact, it is the ability to accept oneself. Acceptance can be linked to the self-consistency component of the personal self in the self-concept adaptive mode of the RAM.

Efficacy

Another attribute in defining self-esteem is efficacy. In the *Oxford English Dictionary*, efficacy (n.d.) is defined as “the ability to produce a desired or intended result.” It reflects a person’s perspective of self-competency and effectiveness. Unlike worth, which can be represented by “who am I,” efficacy can be represented by “what can I do.” Efficacy is more relevant to the domain of the social structure involving one’s structural position and roles in the society and performances having the desired effects (Stets & Burke, 2014). Efficacy can be linked to the self-ideal component of the personal self in the self-concept adaptive mode of the RAM. Nursing literature suggested using self-efficacy, through enhancing self-esteem, in improving nursing education because it helps narrowing the theory–practice gap (Kuiper & Pesut, 2004; Kuiper, Pesut, & Kautz, 2009).

Self-Esteem: Feeling Worthy and Accepted With the Level of Efficacy

Model Case

According to Walker and Avant (2005), a model case is an example that is used to illustrate the use of a concept including all its defining attributes: a senior nursing student who always felt confident and competent in doing simple nursing skills. She constantly took initiative when caring for patients. She believed that she was a helpful resource and offered to help the clinical instructor with any task whenever needed. She admitted that she didn’t know some procedures and asked questions accordingly. She always exhibited excitement and was eager to learn. This model case demonstrate all three defining attributes of the self-esteem concept, which are worth, efficacy, and acceptance.

Related Case

A related case is a case that is related to the concept but does not use all of the defining attributes (Walker & Avant, 2005): a middle-aged woman who had a high school diploma and many years of experience in office work yet was often unemployed due to unprofessional behavior. She always blamed her coworkers for her troubles. She felt that she was a good employee and had a pleasant personality. She would never admit her faults and deny her unprofessional behavior. This case represents a lack of acceptance, which is an important defining attribute of self-esteem.

Contrary Case

A contrary case is the case demonstrating what the concept is not (Walker & Avant, 2005). It is used to determine what does not represent the self-esteem concept: a senior nursing student who always felt anxious and not competent in doing simple nursing tasks. She preferred to be constantly supervised by the instructor and never took initiative when caring for patients. She exhibited extreme anxiety and hesitance. This case represents a lack of worth, acceptance, and efficacy, which are the defining attributes of self-esteem.

Antecedents and Consequences

At this stage, the reinterpretation of the definitions, as well as the uses of the term, and the attributes made it possible to identify the antecedents and the consequences of self-esteem.

The antecedents precede the concept and they serve as prerequisites for its construction. Antecedents thus represent favorable conditions for the emergence of attributes (Walker & Avant, 2005). With respect to self-esteem, two antecedents are identified: confidence and integrity.

Confidence is self-assurance with courage, and it results from the awareness of worth and capability. It is decisiveness in the setting of objectives and the acceptance of successes and failures (Perry, 2011). De Cremer and Van Hiel (2008) examined the effect of procedural justice on self-esteem through emotions and found that there was a difference in the self-esteem level when certainty and positive emotions were present. They rationalized that certainty with positive emotions lead to trust, which built confidence (De Cremer & Van Hiel, 2008).

Integrity (n.d.) is defined in the *Oxford English Dictionary* as “The quality of being honest and having strong moral principles.” Erikson (1968) described the stage of ego integrity in his theory that involved acceptance of the self, which is a precursor to self-esteem.

Consequences are manifestations that occur after the appearance of the concept. Two consequences of self-esteem are identified: assertiveness and resilience. Assertiveness is the ability to communicate opinions effectively and calmly and to engage in supportive interpersonal relationships without self-compromise (Doré, 2017). Finally, self-esteem promotes resilience, which is an adaptive process of bouncing back in the face of adversity. Resilience symbolizes control over the events of life (Doré, 2017).

Empirical Referents

Empirical referents are the ways the defining attributes of the concept can be operationalized and measured. They are important in nursing practice because they provide visible phenomena through which the concept is verified (Walker & Avant, 2005). Two numerical scales to measure self-esteem were found. The self-esteem scale RSES is undoubtedly one

of the most commonly used because of its simplicity (10 statements) and its validity. However, it should be noted that no update of this scale has been carried out since its creation in 1965 (Rosenberg, 1979). The RSES is considered a valid and a reliable quantitative instrument for self-esteem assessment (Donnellan, Trzesniewski, & Robins, 2015).

Heatherton and Polivy (1991) proposed "The State Self-Esteem Scale." This instrument assesses fluctuating self-esteem. It is recognized as important because self-esteem can vary according to different situations or contexts. It includes 20 detailed statements that explore the social evaluation, appearance, and academic performance (Heatherton & Polivy, 1991). The validity of this scale has been tested; however, it must be considered that the measure reflects the fluctuation of self-esteem (Doré, 2017). Thus, the RSES seems relevant for measuring the concept of self-esteem.

Summary

The purpose of this paper was to explore and define the self-esteem concept with Roy's theoretical perspective to expand the knowledge of self-esteem. Walker and Avant's concept analysis method was used to define self-esteem as a feeling of worth and being accepted with the level of efficacy. This 8-step method helped in clarifying self-esteem from a nursing perspective; however, it is imperative to operationalize the concept in order to understand the phenomenon.

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