Role of Self-esteem on Internalising Behavior Of youth

Dr Sinto P Anto

Assistant Professor

Vimala College, Thrissur

Abstract

The present study is aimed to determine the role of self-esteem on the internalizing behavior of youth. The study comprised of 821 young people who were contacted individually for collecting the data. Tools used for the study were Self-esteem inventory and Revised Anxiety and Depression Scale. One Way ANOVA was conducted to find out the result and it was found that the self-esteem significantly influences the internalizing behavior.

Key words: Self-esteem, Internalising Behvavior

Youth is a fascinating and crucial period characterized by change, transition and challenge. During this period, young people experience a number of stresses associated with the tremendous developmental changes in physical, cognitive, emotional and social spheres and the consequent adjustment difficulties.

The mental health of young people is a growing concern within the developed countries and has become the major threat to health during adolescence and early adult life" (Mc Gorry, Parkell & Purcell; 2006)

According to the National Youth Policy of India (2014), youth is defined as those between the ages of 15 to 29. This age group constitutes 27.5 percent of the Indian Population. India has the largest youth population in the world that is poised to increase further in the coming decade.

Factors like self-esteem, skills among individuals having a suitable relation, determining the goals, decision making skills, problem solving, skills determination and detection of individual values have important roles in the prevention of different kinds of behavioral problems and psychological disorders of adolescents/youth and increase their psychological health (Nejad,2012). Promotion of self esteem helps the individual for effective confrontation of conflicts and stressful situations, so that he acts positively and compatible in relation with other people in society.

Self-esteem is often implicated in the development of youth behavior, with high self esteem serving as a source of resiliency or positive adaptation (Rutter,1987). Conversely low self esteem has been implicated in the development of a wide range of maladaptive responses to the issues of adolescence.

Self esteem is an important aspect of our daily experiences. Self esteem generally reflects the interactions that individuals have with their social environments such that they generally feel better about themselves when they believe that others value and accept them (Leary & Downs, 1995). Self esteem is defined as an overall evaluation

of an individual's self worth and encompasses beliefs about oneself as well as an emotional response to those beliefs. Representing the capacity to feel worthy of happiness and be able to successfully address life challenges is an important determinant of mental health and development. Accordingly low self-esteem has been associated with a number of psychological, physical, and social consequences that may influence successful adolescent development and transition to adulthood, including depression, anxiety, suicide, disordered eating etc.

Internalizing behavior is defined as over control of emotions which include anxiety, depressive symptoms, obsessive compulsive symptoms, generalized anxiety symptoms, phobic symptoms and panic symptoms.

Self esteem has long been considered an essential component of good mental health. Various studies have indicated that self-esteem contribute to internalizing behaviors such as depression, anxiety disorders etc. Hence studying the role of self-esteem on these internalizing behaviors of youth may help to enhance healthy outcomes or protect youth.

Objectives

To examine the influence of self esteem on mental health

HYPOTHESIS

There will be significant difference between low, moderate and high self -esteem groups on the overall internalizing behavior and its dimensions.

METHOD

Sample

The sample comprises 821 college students. They were selected randomly from various parts of Kerala.

Tools

1. Self esteem inventory

It is developed by Immanuel Thomas & Sam Sananda Raj in 1985.It is constructed in the form of an interval scale. It is a five point scale which consists of 20 items pertaining to a wide variety of behavioral domains includes academic, social, physical and emotional aspects. There are 10 positive and 10 negative items in random order .This inventory is reported to have a split half reliability of .95,Test retest reliability coefficient of .90 and a content validity correlation of .41.

2. Revised Anxiety And Depression Scale

The tool was prepared by Weiss and Chorpita(2011).It is a 47-item self-report questionnaire   comprising   the   following   subscales-Social   Phobic   symptoms (SP),Panic symptoms (PD),Seperation Anxiety symptoms (SAD), Generalised Anxiety symptoms (GAD),Obsessive Compulsive symptoms (OCD) and Major Depressive symptoms (MDD). It also yields a Total Anxiety Scale (sum of the 5 anxiety scales) and a total Internalizing Scale(sum of 6 subscales).Items are rated on a 4-point Likert Scale from 0 (never) to 3 (always).

PROCEDURE A sample of 821 college students is included for the study. The Participants of the present study are contacted individually. Before the administration

of the questionnaire, the participants are briefed about the purpose of their study and their task. After getting the consent of the participant, the aforesaid questionnaires were administered as per the standard instructions of each questionnaire. All participants were requested to ensure that they responded to each items of every questionnaire/scale

The investigator has made an attempt to classify the whole sample into different groups on the basis of their level of self esteem. For this Self esteem Inventory is given. The calculated mean is treated as the cutoff point and the scores below the means minus 1SD constitute low Self esteem group ;the scores between mean minus 1 SD and mean plus 1SD constitute the moderate self esteem group; and the high self-esteem group constitute mean plus 1SD and above. After the classification of the whole sample, the dimensions of internalizing behavior were assessed.

RESULT AND DISCUSSION

Inorder to findout the effect of Self-esteem on the Internalizing Behavior and its dimensions, the whole sample is divided into low, moderate and high Self-esteem groups. These groups are tested for the mean values for each of the dimensions of Internalizing Behavior. F values as shown in Table 1 obtained for Overall internalizing Behavior(15.955),Social Phobic symptoms (16.143),Panic symptoms (6.542),and Major Depressive Symptoms(23.711),significant at .01 level and Separation Anxiety symptoms (3.179),significant at .05 level suggest that three Self-esteem groups differ significantly with respect to these dimensions. These Values indicate that Self-esteem significantly influence Overall Internalizing Behavior and its dimensions such as Social Phobic symptoms, Panic symptoms, and Major Depressive Symptoms and Separation Anxiety symptoms.

Table 1 : Results of one way ANOVA of Self-esteem, on Internalising Behavior and its dimensions.

Variables	F value
Over all Internalising behavior	15.955**
Social Phobic symptoms	16.143**
Panic symptoms	6.542**
Separation Anxiety symptoms	3.179*
Generalized Anxiety symptoms	6.099
Obsessive Compulsive symptoms	2.042
Major Depressive symptoms	23.711**

*p<.05, ** p<.01

Table 2 indicates the Mean and Standard Deviation of Self-esteem on Internalizing Behavior and its dimensions. Mean Scores of Overall Internalizing Behavior for low, moderate and high Self-esteem groups are 100.60, 85.71 and 75.62 respectively. These values suggest that Internalizing Behavior occur due to low Self-esteem. Mean Values of Social Phobic symptoms for low Self-esteem group is 22.02 and for high Self-esteem group is 15.89 which indicates that low Self-esteem leads to Social

Phobic symptoms. It can be seen that Mean value of Panic Symptoms for low Self-esteem group is 17.43 and for high Self-esteem group is 13.05, which suggest that Panic Symptoms is associated with low Self-esteem. Separation Anxiety symptoms has a Mean Score of 13.16 for low Self-esteem group and 10.15 for high Self-esteem group which points out that Separation Anxiety occur due to low Self-esteem. Mean Sores of Major Depressive Symptoms show that its mean value is higher for low Self-esteem group (20.83) than for high Self-esteem group(15.21).Hence it can be confirmed that low Self-esteem increases the incidence of Overall Internalizing Behavior and its dimensions such as Social Phobic symptoms, Panic symptoms, and Major Depressive Symptoms and Separation Anxiety symptoms.

Table 2: Mean and Standard Deviation of Self-esteem on Internalising Behavior and its dimensions

Self-esteem / Internalising Behavior Dimensions	Low (N=242)		Moderate (N=326)		High (N=253)	
	Mean	SD	Mean	SD	Mean	SD
Over all Internalising behavior	100.60	21.146	85.71	15.854	75.62	16.137
Social Phobic symptoms	22.02	4.905	18.35	4.067	15.89	4.290
Panic symptoms	17.43	4.979	14.92	3.792	13.05	3.445
Seperation Anxiety symptoms	13.16	4.356	11.25	3.292	10.15	2.885
Generalised Anxiety Disorder	14.09	3.751	12.25	2.854	10.81	3.512
Obsessive Compulsive symptoms	13.07	3.367	11.71	2.955	10.50	2.889
Major Depressive symptoms	20.83	4.712	17.21	3.806	15.21	3.806

Orth et al., (2009) supported the idea that self-esteem and symptoms of depression are closely related. Orth et al., explained that during life challenging situations, persons

with low self-esteem do not have enough coping resources and are not able to face the deleterious consequences of stressful life events and hence become vulnerable to depression.

Veselka et al., (2009) found that girls with lower self-esteem are more likely to develop internalizing behaviors such as depression, anxiety etc. Beck (1983), Baumeister (1993) and Choi et al.,(2010) suggested that negative beliefs about self or low self-esteem leads to depression.

Maldonaldo et al.,(2013) found self-esteem as a significant predictor of obsessive compulsive symptoms. According to Maldonaldo et al.,(2013),OCD persons exhibit a self-esteem decline. Doron and Kyrios (2005) explained that individuals with obsessive thoughts evaluate their self-worth based on moral standing, social skills and acceptance and physical attraction. This view is supported by Wu et al.,(c.f.Zeigler-Hill,2011)

Har and Kyrios (2007) suggested that OCD individuals amplify the importance of perceived negative characteristics of the self, resulting in lowered self-esteem. As revealed from the present study researchers like Ehntholt, Salkovskis. Rimes,1999; Marchand,Goupil and Trudel et al.,1995 (c.f.Maldonado,2013) also found that subjects with anxiety disorders had lower levels of self-esteem. Maldonado et al.,(2013) found that social anxiety disorder has greatest relative impact on self-esteem. Iancu, Bodner and Ben-Zion(2015),Henning et al., (c.f.Zeigler-Hill,2011) also agree with this view.

Isomaa,Rasmus,Vaananen,JuhaMatti,Frojd,Sari,Kaltiala,Rittakerttu,Martunen,Mauri(2013) stated   that low self – esteem serve as an indicator of internalizing psychopathology.

Recent research also suggests that low self-esteem in adolescents is important in developing interventions to prevent and to enhance adolescent's self esteem.

Many research findings support the notion that self esteem influences the mental health of individuals. Representing the capacity to feel worthy of happiness and be able to successfully address life challenges, self-esteem is an important determinant of adolescent mental health development. Accordingly low self esteem has been associated with a number of psychological, physical, and social consequences that may influence successful adolescent development and transition to adulthood, including depression, violent behavior, earlier initiation of sexual activity (girls) or substance use. Recent research also suggests that low self esteem in adolescence may be a harbinger for poor longer term outcomes such as greater likelihood of joblessness, financial difficulties as well as poorer mental ,physical and higher rates of criminal behavior (Mc clure et al., 2008).

Compton, W.C. (1992) conducted research variables associated with mental health and psychological adjustment and suggested that the use of positive illusions can be associated with self esteem and psychological adjustment. Trzensniewsker, Kali H et al (2006), using prospective data from the Dunedin Multidisciplinary Health and Development study birth cohort found that adolescent with low self esteem had

poorer mental and physical health, worse economic prospects and high levels of criminal behavior when compared with adolescents with high self esteem.

Thus the present study emphasizes the importance of self esteem in the mental health of youth. Identification of risk factors for self esteem in adolescents is important in developing interventions to prevent and to enhance adolescent self esteem so that their mental health status can be enhanced.

Conclusion

The study explored the role of self esteem on internalizing behavior. It was found that low self -esteem leads to internalizing behavior. Study findings throw light on the importance of self- esteem as the predictor in the development of mental health of youth.

Reference

Baumeister,R.F.,Bratslavsky,E.,Muraven,M.,& Tice,D.M.(1998).Ego depletion: Is the active self a limited resource.*Journal of Personality and Social Psychology*,74,1252-1265.

Beck,A.T.(1983).Cognitive models of depression:New perspectives in P.J.Clayton & J.E.Barrett(Eds).Treatment of depression:Old Controversies and New Approaches.Raven Press:Newyork.

Choi.H., Kim,Ji-Hyeon.,Hwang.,Mae-Hyang.,& Heppner,M.J.(2010).Self-esteem as a mediator between Instumentality,Gender Role conflict and Depression in Male Korean High school students.*Sex roles*,63:361-372.

Doron,G.,& Kyrios,M.(2005).Obsessive compulsive disorder:A review of possible specific internal representations within a broader cognitive theory.*Clinical Psychol Rev*,25:415-432.

Iancu,I.,Bodner,E.,& Ben-Zion,I.(2015).Self-esteem dependency,self-efficacynand self-criticism in social anxirty disorder. *Comprehensive Psychiatry*.58(2015),165-171.

Maldonado,l.,Huang,Y.,Chen,R.,Kasen,S.,Cohen,P., & Chen,H.(2013).Impact of early adolescent anxiety disorders on self-esteem development from adolescence to young adulthood.*Journal of Adolescent Health,*53(2013),287-292.

Nejad,S.(2012). Impact of assertiveness training and Family Economic Condition on the subscale of Anxiety and Insomnia of Mental Health.*Journal Of the Indian Academy of Applied Psychology*.July,2012,Vol 38No.2,287-293.

Orth,U.,Robins,R.,& Meier,L.L.(2009).Disentangling the effects of low self-esteem and stressful life events on depression:findings from three longitudinal studies.*Journal of Personality and Social Psychology*,97.307-321.

Rutter, w.w. (1987).Psychosocial resilience and protective mechanisms.*American Journal of Orthopsychiatry,*57,316-331

Veselska,Z.,Geckova,Orosova,O.,Gajdosova,B.,Dijk,J.P.V.,&Reijneveld,S.A. (2008)Self –esteem and resilience: The connection between risky behavior among adolescents.*Addictive Behaviors* 34(2009) 287-291.

Zeigler-Hill,V.(2011).The connections between Self-esteem and Psychopathology.*Journal of contemporary Psychotherapy*,41:157-164.