Abstract

The relationship between maternal self-esteem and adolescent self-esteem was examined in a descriptive, correlational study. The study sample consisted of forty mothers, and their adolescent (eighth grade) children, from six different middle schools in the Metro-Atlanta area. The school version of the Coopersmith Self-Esteem Inventory was administered to each eighth grade student who participated in the study; the adult version of the Coopersmith Self-Esteem Inventory was administered to each mother who participated in the study. A high score on the Coopersmith Self-Esteem Inventory corresponds with high self-esteem. Findings from this study showed that there is a positive correlation between maternal self-esteem and self-esteem of their adolescent children. Although there was a fifty-four point spread between the highest and lowest scores on the Self-Esteem Inventories, seventy percent of the mothers and adolescents scored within fifteen points on their respective surveys. Because self-esteem is closely related to physical and psychological health, awareness of the correlation between maternal self-esteem and adolescent self-esteem will allow nurses to better provide holistic care to patient and families with whom they are working. Specific techniques for building self-esteem may be both modeled and taught by nurses in their practice. Although the data collected for this study show a positive correlation between maternal and adolescent self-esteem, it is one of very few such studies in recent years. Most research on the subject of self-esteem comes from other disciplines and is outdated. Previous studies have also exhibited a wide range of findings, from a strong correlation between maternal and adolescent self-esteem to no correlation at all between the two. Further nursing research is warranted to increase nursing’s body of knowledge in this area, and to confirm or refute the results of this study.

Study Problem and Purpose

Current research concerning the relationship between maternal self-esteem and adolescent self-esteem is lacking. Further research is needed to obtain information which will allow the nurse to collaborate with the patient to develop nursing interventions that are specifically designed to allow patients to
reach their highest level of adaptation. The purpose of the study was to obtain information to help nurses and other healthcare workers collaborate with their patients to develop nursing interventions that will best benefit adolescent development.

**Literature Review**

Self-esteem and self-efficacy are important aspects of the human psyche and are closely related to physical and psychological health. Low self-esteem has been linked with both mental illness and physical illness (Killeen, 1993), while high self-esteem and self-efficacy have been associated with increased compliance with medicine regimens and fewer health problems (Litt, Cuskey, & Rosenberg, 1982). Although there is abundant literature on self-esteem in other disciplines, there has been little nursing research on the effects of self-esteem on health and health promotion activities in spite of its intrinsic importance to holistic nursing care (Lavender, 1988). For this study self-esteem is defined as “the evaluation which the individual makes and customarily maintains with regard to himself: it expresses an attitude of approval or disapproval, and indicates the extent to which the individual believes himself to be capable, significant, successful, and worthy” (Coopersmith, 1967, p. 4). Over the years there have been conflicting results from studies on the effect of parental influences on children’s self-esteem and self-efficacy. Several studies have found a strong correlation between high maternal self-esteem and competence and high self-esteem and self-efficacy in children (Baruch, 1976; Coopersmith, 1967; Kernis et al., 2000). Coopersmith noted that there appear to be marked differences in parental expectations for children with high self-esteem parents versus low self-esteem parents. Parents with high self-esteem value and encourage competitiveness and superior achievement and they instill those values into their children. Parents with low self-esteem prize accommodation, obedience, and adjustment to others. It seems as if those parents and children with low self-esteem rely on pleasing others for a sense of success as opposed to relying on their own achievements (Coopersmith, 1967, chap.6). Although many studies have supported a correlation between high parental self-esteem and competence and children’s high self-esteem and self-efficacy, there have been studies where no relationship between parental self-esteem and the child’s self-esteem was found (Lavender, 1988; Morvitz & Motta, 1992; Sears, 1970). Research indicates that children with high self-esteem have a much closer relationship with their parents than do children with low self-esteem (Coopersmith, 1967; Gecas & Schwalbe, 1986; Kernis et al., 2000). One must consider, however, that there may be a reciprocal effect between childrens’ self-esteem and parental warmth and acceptance. Although parental warmth and
acceptance have been shown to influence and elevate children’s self-esteem, there is the possibility that the high self-esteem child’s behavior influences the amount of warmth and acceptance shown by the parent (Felson & Zielinski, 1989; Gecas & Schwalbe, 1986; Kernis et al., 2000; Killeen, 1993; Sears, 1970). Authoritative parenting styles have been linked to high self-esteem in children (Kernis et al., 2000). When interpreting this data it should be clear that the correlations found are between the child’s self-esteem and discipline techniques and consistency as perceived by the child. Correlations are much stronger between childrens’ perceptions of discipline techniques and self-esteem than between parents’ self-reported discipline techniques and childrens’ self-esteem (Gecas, & Schwalbe, 1986; Morvitz, & Motta, 1992; Willoughby, King, & Polatajko, 1996). Research has shown that when compared with independent observer ratings, adolescent perceptions of maternal behaviors were more valid than the reports of behaviors given by the mothers (Parker, & Benson, 2004). According to Lavender (1988), self-esteem and self-efficacy are intrinsic aspects of holistic nursing care and greatly affect the physical and psychosocial well-being of patients. Lavender states that “by understanding the childhood roots of self-esteem and the factors that influence it’s development, the professional nurse will be able to provide appropriate anticipatory guidance to parents concerning their childrens’ psychosocial development as well as plan specific nursing interventions.” Current research concerning the relationship between maternal self-esteem and adolescent self-esteem is inadequate. Further research is needed to obtain information which will allow the nurse to collaborate with the patient to develop nursing interventions which are specifically designed to allow the patient to reach optimal adaptation in the self-concept mode.

Theoretical Framework

The theoretical framework for this study was based on the Roy Adaptation Model. According to Roy (1984), low self-esteem is a maladaptive response in the self-concept mode which requires nursing intervention. The nurse needs to identify behaviors which indicate low self-esteem and then identify the focal, contextual, and residual stimuli which affect those behaviors. The nurse may then work in collaboration with the patient to develop a care plan in which goals for optimal adaptation are established. The focus should be on manipulation of the various stimuli to promote an adaptive response by the patient (Catalano, 2003; Fitzpatrick, & Wallace, 2006; Roy, as cited in Lavender, 1988).

Research Question

Is there a relationship between mothers’ self-esteem and the self-esteem of their eighth grade adolescent children? If a relationship exists between the
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two, what is the relationship?

Study Setting
The study sample was drawn from six middle schools of varying sizes in the Metro Atlanta area. The following counties were represented: Coweta, Fayette, Fulton, and Troup.

Study Design
This was a quantitative research study which was conducted using a descriptive, correlational design. Data were collected and analyzed to determine whether or not a relationship exists between maternal self-esteem and the self-esteem of their adolescent children.

Sampling Procedure and Characteristics
Cluster sampling was used to gather subjects for this study. The sample consisted of forty eighth grade adolescents, and their mothers, from six middle schools of varying sizes in Coweta, Fayette, Fulton, and Troup counties. Individual subjects were enrolled in the study after the mother signed a consent form for both herself and her child. Each mother received a typed letter informing her of the nature of the study, what would be expected of her and her child, and of any risks that might be associated with the study. A telephone number for one of the researchers was provided in the letter in case additional information was desired by the mother. The information letter clearly stated that participation in the study was strictly voluntary and that she, and her child, could withdraw at any time without jeopardizing their relationship with LaGrange College.

Data Collection Strategies and Instruments
During school hours, adolescent subjects were asked to fill out coded copy of the Coopersmith Self-Esteem Inventory. They were clearly instructed not to put their name on the survey form to ensure confidentiality. The adolescent version of the Coopersmith Self-Esteem Inventory is a fifty-eight item questionnaire which they completed by checking either “Like me” or “Unlike me” next to each item. The adult version of the Coopersmith Self-Esteem Inventory is a twenty-five item questionnaire which was completed by checking either “Like me” or “Unlike me” next to each item. The coded adult survey form was sent home to the mother in a sealed envelope. The complete survey forms were returned to the school in a sealed envelope for the researchers to pick up. The Coopersmith Self-Esteem Inventories have been used successfully for many years and have an internal consistency coefficient of .86 - .90.

Plans for Storing, Retrieving, and Analyzing Data
Completed survey forms were retained by the individual researchers. Although a consent form is on file for all participants of the study, there is no

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master list of which survey number was assigned to which mother/adolescent set. This was done to assure participant confidentiality. Once the coded inventories were collected, they were scored using the Coopersmith Self-Esteem Inventory scoring template provided in the Self-Esteem Inventories Manual. The data were then analyzed to determine whether or not a relationship exists between maternal and adolescent self-esteem, and to describe the nature of any relationship found.

**Ethical Considerations**

The researchers kept all information strictly confidential and used all measures necessary to ensure that the subjects’ rights and the rights of others in the setting were protected. The research study proposal was presented to, and approved by, the LaGrange College Institutional Review Board as well as each school’s respective principal. In addition a copy of the research study proposal was sent to, and approved by, the Boards of Education for Fayette and Coweta counties. Each mother involved in the study signed a consent form for herself and her child to participate in the study. No student was allowed to participate without first presenting a signed consent from their mother. All of the Inventories were coded to ensure confidentiality. The potential benefits of this study outweighed any potential risks to the subjects.

**Timetable for the Study**

Planning for this study commenced in January, 2005. The proposal was submitted to the LaGrange College Institutional Review Board in December, 2005. Data collection occurred between February, 2006 and April, 2006. The final results will be presented on April 28, 2006.

**Budget and Statement of Resources**

The anticipated cost of this study is $175.00 which includes expenditures for purchasing a copy of the instruments to be administered along with the answer keys, purchasing permission to reproduce the instruments, and photocopying costs. An application for funding was filed with, and approved by, the LaGrange College Undergraduate Research Program. All expenditures must be approved by Dr. Sauter, and all funds must be dispersed by May 31, 2006.

**Study Findings**

The Coopersmith Self-Esteem Inventory was used to collect data for this study. The inventory forms were scored using the Coopersmith Inventory scoring keys which were provided along with the instrument. High scores on the Coopersmith Inventory correspond with high self-esteem scores. For this study, a score of 86 - 100 was considered high self-esteem, a score between 70 and 84 was considered medium self-esteem, and a score of 68 or less was considered low self-esteem. A correlation between the mother’s self-esteem score and the
adolescent’s self-esteem score was considered to exist if the two scores were within 15 points. The study included eighty subjects, forty mothers and forty adolescents. The scores on the adult inventory forms ranged from a low of 48 to a high of 100. The mean adult score was 86.35, the median score was 92, and the mode was 96. Of the forty mothers who filled out the inventory form, twenty-five (62.5%) fell into the high self-esteem range, 9 (22.5%) fell into the medium self-esteem range, and 6 (15%) fell into the low self-esteem range. The scores on the adolescent inventory forms ranged from a low of 46 to a high of 100. The mean adolescent score was 81, the median score was 87, and the mode was 88. Of the forty adolescents who filled out the inventory form, 22 (55%) fell into the high self-esteem range, 11 (27.5%) fell into the medium self-esteem range, and 7 (17.5%) fell into the low self-esteem range. Both the mean and median scores of the mothers were about 5 points higher than the corresponding scores for the adolescents. The mode for the mothers, however, was 8 points higher than the mode for the adolescents. Twenty-two sets of mothers/adolescents (55%) had scores which were within 10 points. Twenty-three sets of mothers/adolescents (57.5%) had scores which fell within the same high/medium/low category. Twenty-eight sets of mothers/adolescents (70%) had scores which were within 15 points. Of those sets of mothers/adolescents who did not show a correlation between self-esteem scores, 11 sets (61%) involved mothers who had the higher self-esteem score, and 7 sets (39%) involved adolescents who had the higher self-esteem score.

Conclusions

While there was a wide range of self-esteem scores for both the mothers and the adolescents, the overall self-esteem scores were good. The median and mode for both mothers and adolescents were in the high self-esteem range, the mean for the mothers was in the high self-esteem range, and the mean for the adolescents was in the medium self-esteem range. There does appear to be a positive correlation between maternal self-esteem and adolescent self-esteem. Of the 25 mothers whose scores were in the high self-esteem range, 17 (68%) of their adolescents also had high self-esteem scores, 6 (24%) of their adolescents had medium self-esteem scores, and only 2 (8%) of their adolescents had low self-esteem scores. Of the 9 mothers whose scores were in the medium self-esteem range, 4 (44%) of their adolescents had high self-esteem scores, 3 (33%) of their adolescents had medium self-esteem scores, and 2 (23%) of their adolescents had low self-esteem scores. Of the 6 mothers whose scores were in the low self-esteem range, only one (17%) of their adolescents had a high self-esteem score, 2 (33%) of their adolescents had a medium self-esteem score, and 3 (50%) of their adolescents had a low self-esteem score. As the mothers self-

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esteem score goes down, so does the percentage of adolescents who have a high self-esteem score. As the mothers self-esteem score goes up, so does the percentage of adolescents who have a high self-esteem score.

Implications for Nursing Care

Knowledge of the correlation between maternal self-esteem and adolescent self-esteem can help nurses deliver more holistic care to their clients. Because of their awareness of this relationship, nurses will be able to model and teach, to both adolescents and their parents, some of the following self-esteem building techniques: to accept feelings as real and support their expression, to be aware of individual differences in coping skills, to avoid sudden or drastic changes whenever possible, to provide a model of effectiveness, to help children develop constructive ways of dealing with difficult situations, and to maintain self-respect while increasing coping strengths.

Recommendations

Although this study indicates a positive correlation between maternal and adolescent self-esteem, it is one of very few such studies in recent years. Most research on the subject of self-esteem comes from other disciplines, and is very outdated. Previous studies have exhibited a wide range of findings, from a strong correlation between maternal and adolescent self-esteem to no correlation at all between the two. Further nursing research is warranted to increase nursing’s body of knowledge in this area, and to confirm or refute the results of this study.

References


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Appendices not included.