POSITIVE AND NEGATIVE SELF-WORTH BELIEFS AND EVALUATIVE STANDARDS

CATHERINE LEITE, NICHOLAS A. KUIPER* 

Abstract

This study examined several different types of self-worth beliefs and evaluations as predictors of depression and self-esteem. Based upon a self-schema model of emotion, some of these beliefs and evaluations had a traditional negative focus (e.g., “I am failing at work”), whereas others focused specifically on positive aspects of self-worth (e.g., “I am able to give, as well as receive, in relationships”). Findings indicated that positive self-worth evaluations were one of the main predictors of greater self-esteem and less depression, thus indicating a need for further exploration of the role of positive evaluative components of the self-schema on psychological well-being. Our findings also revealed that self-worth beliefs and evaluative standards pertaining to independence and a sense of mastery over one’s environment were generally better predictors of well-being than those pertaining to relationships with others. This pattern was particularly evident for self-esteem, and supports the distinction made in the self-schema model between self-worth based upon individualism versus relatedness themes. Finally, we compared the relative predictive utility of the self-schema model with a self-worth contingency model advanced by Crocker. Here, the beliefs and evaluations specified in the self-schema model were significant predictors of well-being, above and beyond the specific content domains specified in the self-worth contingency model.

Cuvinte-cheie: evaluările valorii de sine, depresie, stimă de sine.

Key words: self-worth evaluations, depression, self-esteem.

1. INTRODUCTION

The construct of self-worth, which incorporates both the beliefs used to judge one’s self and the resulting evaluations based on these beliefs, has long been a prominent topic in psychology. More than half a century ago, Maslow (1954) proposed that one of the most central human needs is the feeling that one is worthwhile and valued as an individual. Accordingly, self-worth has been examined in the context of a number of aspects of psychological well-being, including both depression and self-esteem (Kuiper & Olinge, 1986).

The two components of self-worth highlighted above, namely, the beliefs used to judge self-worth and the resulting evaluative judgments themselves, have been incorporated in a self-schema model of emotion proposed by Winter and

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Rev. Psih., t. 56, nr. 3–4, p. 219–230, București, iulie – decembrie 2010
Kuiper (1997). Building upon previous work in the depression domain by Kuiper and Olinger (1986), the first component of this model describes the self-worth beliefs that may be used by an individual to guide, assess and integrate one's life experiences. One example of such a belief is “If others dislike you, you cannot be happy.” In turn, the second component of the model describes the evaluative standards that derive directly from these beliefs. The extent to which a person either agrees or disagrees with these evaluative standards then determines their degree of self-worth. For the belief just described, the corresponding evaluative standard is “I am disliked by other people.” If a person endorses this standard, there will be an increased negative evaluation of self, marked by lower self-esteem and heightened depression. Conversely, if the person disagrees with this standard, then a negative evaluation of self would not occur (i.e., self-esteem would not decrease and depression would not increase).

Consistent with cognitive approaches to psychopathology, the self-schema model of emotion postulates that certain self-worth beliefs are negative and quite maladaptive. For example, an individual may have the negative self-worth belief, “If I fail at my work, then I am a failure as a person.” The implication of this belief is that an individual’s self-worth is contingent upon the absence of any failures in the work domain. As most individuals will have at least some setbacks in this domain, there is an increased likelihood that the negative evaluative standard associated with this belief (“I have been failing at my work”) will be endorsed; thus resulting in negative perceptions of self-worth and reduced psychological well-being.

A second contribution of the self-schema model is that it also acknowledges the potentially important role of positive self-worth beliefs and their associated evaluative standards in determining psychological well-being. That is, individuals may also hold some self-worth beliefs that are positive, such as, “One should expect strengths and weaknesses, but overall be positive about oneself”. In turn, the evaluative standards that are associated with these positive self-worth beliefs are more realistic and viable, and thus more likely to be endorsed. As such, evaluative standards based upon positive self-worth beliefs will more likely result in enhanced levels of self-worth and psychological well-being (i.e., greater self-esteem and less depression). In this regard, it is important to note that the inclusion of a distinct set of positive self-worth beliefs and associated evaluative standards in the self-schema model stands in marked contrast to prior theoretical approaches, which have focused almost exclusively on the negative components of self-worth as predictors of psychological well-being (Kirsh & Kuiper, 2002).

A third contribution of the self-schema model is that the positive and negative components of self-worth (both beliefs and evaluative standards) have also been categorized in terms of their individualistic or relatedness orientation (Kirsh & Kuiper, 2002). Individualism refers to a sense of identity that is separate from others, control over the environment, and a personal desire to achieve. Relatedness pertains to a focus on one’s relationships and attachment with others. Prior research
has empirically demonstrated that negative self-worth beliefs and evaluative standards clearly map onto these two domains (Kirsh & Kuiper, 2003). In particular, work on the Dysfunctional Attitudes Scale, which taps negative self-worth beliefs, has consistently revealed two major factors. These are “performance evaluation” (e.g., “People will probably think less of me if I make a mistake”) which pertains to the individualism domain; and “need for approval” which assesses the relatedness domain (e.g., “It is awful to be disapproved of by people important to you”). In a similar fashion, positive self-worth components have also been found to map onto these two domains. For example, a positive self-worth belief that pertains to the individualism domain is, “A person needs to develop and improve one’s self over time.” An example of a positive self-worth belief that pertains to the relatedness domain is, “It is important to be able to receive, as well as give, in relationships”.

Although prior work has provided empirical support for considering both negative self-worth beliefs and evaluations when predicting depression, there has been no research to date that has directly examined the utility of positive self-worth components in predicting psychological well-being; especially when done so in direct comparison with negative components. As such, one purpose of the present study was to offer an initial empirical examination of the role of both positive and negative self-worth beliefs and evaluations in the prediction of depression and self-esteem. In doing so, the present study also considered the possible impact of the individualistic versus relatedness focus of these beliefs and contingencies on well-being. Thus, in order to test the predictive utility of the various facets of the self-schema model of emotion, participants in this study completed measures of both depression and self-esteem; and also provided ratings of their degree of endorsement of positive and negative self-worth beliefs and evaluative standards that had either an individualistic or relatedness focus. The resulting four categories of beliefs and evaluations (i.e., positive and negative individualistic, positive and negative relatedness) were then used to predict depression and self-esteem.

2. COMPARISON OF SELF-WORTH MODELS IN PREDICTING DEPRESSION AND SELF-ESTEEM

The second purpose of this study was to compare the predictive utility of the self-schema model with another theoretical model that also focuses on self-evaluations and psychological well-being, namely Crocker’s self-worth contingency model. Their model proposes that individuals invest their self-worth in specific life domains; and that personal evaluations of self-worth become contingent upon success or failure within each domain (Crocker, Luhtanen, Cooper & Bouvrette, 2003). For example, after being exposed to negative interpersonal feedback, Park and Crocker (2008) found that individuals with more negative self-worth contingencies, pertaining to the approval of others, displayed lower self-esteem and heightened negative affect, relative to individuals with only a few negative self-worth contingencies in this domain.
In Crocker’s model, the seven specific domains are approval of others, appearance, academic competency, competition, God’s love, family support, and virtue. This relatively large number of domains is in contrast to the self-schema model which articulates only the two broad themes of individualism and relatedness (but does so in terms of both positive and negative beliefs and their associated evaluative statements). As such, we were particularly interested in comparing the relative efficacy of each model in the prediction of self-esteem and depression.

2.1. METHOD, PARTICIPANTS

A sample of 137 university students (44 male, 93 female) enrolled in introductory psychology courses at the University of Western Ontario participated in this study, in partial fulfilment of course requirements. Their mean age was 19.64 years (sd = 2.5).

Self-Worth Beliefs and Evaluations Scale (SWBE). The SWBE is a two-part self-report scale measuring self-worth beliefs (Part 1), and their associated evaluative standards (Part 2). In order to assess negative individualistic and relatedness self-worth beliefs, 14 statements were selected from the two factor domains of the Dysfunctional Attitudes Scale (DAS). In particular, the 7 highest factor loading statements on the Performance Evaluation factor, such as “If I fail partly, it is as bad as being a complete failure”, were selected to measure negative individualistic self-worth beliefs. Similarly, the 7 highest factor loading items on the Approval by Others factor, such as “What other people think about me is very important”, were chosen to measure negative relational beliefs.

In order to measure positive self-worth beliefs in both the individualistic and relatedness areas, 14 further items were selected from a Positive Belief Statements Questionnaire (PBSQ) developed by Hillson (1997; see Kirsh & Kuiper, 2003 for details). Of these 14 statements, 7 pertain to positive individualistic beliefs, such as “A person should be in charge of creating a satisfying life for themselves”, and 7 pertain to positive relational beliefs such as “It is important to have a sense of belonging with those around you”.

Thus, in Part 1 of the SWBE, participants rated their agreement with each of the above 28 belief statements on a five-point scale ranging from strongly disagree (1) to strongly agree (5). In terms of psychometric properties, the original DAS is a highly reliable measure, with internal consistencies ranging from .79 to .93; and a test-retest reliability of .74 over an 8-week interval. Strong predictive validity is evident, as DAS scores predict subsequent levels of depression and self-esteem for up to three years, even after controlling for initial depression (Otto et al., 2007; Winter & Kuiper, 1997). The original PBSQ has also demonstrated good reliability, with internal consistencies ranging from .70 to .85; and has been shown to converge appropriately with other measures of positive individualism and relatedness (Kirsh & Kuiper, 2003).

Part 2 of the SWBE was printed on a separate page and contained the evaluative standards for each of the 28 self-worth beliefs presented previously in Part 1.
An example of an evaluative standard pertaining to the positive individualistic belief provided above is, “I am in charge of creating a satisfying life for myself”. All of the positive evaluative items (for both individualism and relatedness) were taken from the PBSQ developed by Hillson (1997). The evaluative standards pertaining to the negative individualistic and relatedness self-worth beliefs were taken from a modified version of the Dysfunctional Attitudes Scale that specifies the negative evaluations associated with each belief (Kuiper & Olinger, 1986). For example, the evaluative standard corresponding to the negative relatedness belief provided above is, “Other people do not think very much of me”. Participants rated each evaluative standard using a 5 point scale ranging from not at all true (1) to extremely true (5). Thus, higher scores on the positive evaluative scale reflected greater perceived fulfillment of positive self-worth standards. In contrast, higher scores on the negative evaluative scale indicated greater perceived failure in meeting the negative standards of self-worth.

**Contingencies of Self-Worth Scale** (CSW; Crocker et al., 2003). The CSW measures the extent to which an individual’s evaluation of self-worth is contingent on each of seven specific content domains (approval of others, appearance, academic competency, competition, God’s love, family support, and virtue). The CSW is comprised of 35 statements, such as, “I can’t respect myself if others can’t respect me” and “When I think I look attractive, I feel good about myself”. Participants rate the extent to which they agree with each item on a scale of 1 to 7, with 1 representing Strongly disagree and 7 representing Strongly agree. Higher scores on each subscale indicate the individual’s greater use of that domain as a basis of self-worth evaluation. The CSW has been shown to have good temporal stability, as evident from test-retest reliabilities of .60 to .85 over a five month period (Crocker et al., 2003).

**Rosenberg Self-Esteem Inventory** (RSEI; Rosenberg, 1965). The RSEI measures global self-esteem. Participants rated 10 items, such as “I feel that I have a number of good qualities”, on a four-point scale ranging from Strongly Disagree (1) to Strongly Agree (4). Scores range from 10 to 40, with higher scores indicating higher levels of positive self-esteem. The RSEI has been shown to have good psychometric properties.

**Centre for Epidemiological Studies – Depression Scale** (CESD; Radloff, 1977). The CESD is a 20-item questionnaire designed to assess depressive symptomatology among both community and clinical populations. Examples of such items include, “I felt that everything I did was an effort”, and “I thought my life had been a failure”. Participants were asked to indicate how frequently they had experienced each symptom during the past week on a scale of (1) rarely or none of the time to (4) most or all of the time. Scores range from 20 to 80, with higher scores indicating increased levels of depressive symptomatology. Studies have shown the CESD to have high internal consistency in both community and clinical samples; and to have high reliability and validity among university populations.
2.2. PROCEDURE

Participants were tested in groups of 20 to 25 people. After providing informed consent, participants completed a booklet of questionnaires within approximately 30 minutes. Measures were presented in different orders across the booklets. Upon completion of the booklet, participants were given a debriefing form that provided further details of the study.

2.3. RESULTS. DESCRIPTIVE STATISTICS AND CORRELATIONS

The means, standard deviations and correlations between the self-worth and well-being measures are presented in Table 1. The correlations in Part 1 of this table indicate that greater agreement with negative self-worth beliefs (either individualistic or relatedness) was associated with significantly higher depression and lower self-esteem. Positive self-worth beliefs were generally unrelated to either of these well-being measures, except for a very modest relationship between higher levels of positive individualism and greater self-esteem. When considering self-worth evaluative standards (see Part 2 of Table 1), all four types of evaluations were significantly related to the two well-being measures. In particular, increased personal endorsement of positive self-worth evaluative standards (either individualistic or relatedness) was linked to greater well-being (i.e., lower depression and higher self-esteem); whereas increased endorsement of either type of negative evaluative standard was associated with higher depression and lower self-esteem. Finally, the bottom portion of Table 1 shows that there were only very modest relationships between some of the CSW content domains and well-being. The most notable were approval of others, appearance, and competition. In general, these correlational findings indicate that all four types of self-worth evaluations, along with negative individualism and relatedness self-worth beliefs, display the strongest links to well-being; with only modest relationships evident for a specific subset of CSW content domains.

2.4. REGRESSIONS PREDICTING SELF-ESTEEM AND DEPRESSION

Self-schema Model of Emotion. To simultaneously examine the contribution of all of the self-worth beliefs and evaluative standards to the prediction of psychological well-being, two multiple regression analyses were conducted (one for each criterion variable of self-esteem and depression). In these two analyses, all four types of self-worth beliefs were entered as the first block of predictor variables, followed by all four types of evaluative standards as the second block.

For self-esteem, the overall regression model was significant, $R^2 = .61$, $F (8,128) = 27.91, p < .001$. When considering just the 1st block of predictors (self-worth beliefs), the regression equation was also significant, $R^2 = .43$, $F (4,132) = 24.39, p < .001$; with negative individualistic beliefs being the sole significant contributor ($\beta = -.54$). The subsequent inclusion of the 2nd block of predictors (evaluative standards) resulted in a significant incremental change in $R^2$ of .21,
$F$-change (4,128) = 18.50, $p < .001$. Thus, in the overall equation, positive individualistic evaluations were the largest significant predictor ($\beta = .54$), followed by negative individualistic beliefs ($\beta = -.37$), then negative individualistic evaluations ($\beta = -.16$), and finally, positive individualistic beliefs ($\beta = .14$). Overall, this pattern highlights the strong role of both positive individualistic evaluations and negative individualistic beliefs in predicting self-esteem, with some further limited contributions evident for the two remaining individualistic components. None of the beliefs or evaluations involving relatedness was significant predictors of self-esteem.

Turning to depression, the second regression equation revealed that the overall model was significant, $R^2 = .44$, $F(8,128) = 14.20, p < .001$. The regression equation for the 1st block of predictors (self-worth beliefs) was also significant, $R^2 = .29$, $F(4,132) = 13.58, p < .001$, with negative individualistic beliefs once again being the only contributor ($\beta = .54$). When the 2nd block of predictors was entered into the equation (i.e., evaluative standards), the incremental $R^2$ change of .18 was significant, $F$-change (4,128) = 10.80, $p < .001$. The resulting overall equation showed that both positive individualistic evaluations and negative individualistic beliefs were the two largest predictors (respective $\beta$’s of -.35 and .35), with both negative individualistic and relatedness evaluations adding further (but more limited) predictability (respective $\beta$’s of .20 and .17). This pattern is quite similar to that obtained for self-esteem, and once again highlights the importance of positive individualistic evaluations, negative individualistic beliefs, and negative individualistic evaluations as significant predictors of well-being. The sole distinction in predicting depression was that relatedness also played a role, with the degree of endorsement of negative relatedness evaluations also adding to the predictability of this well-being measure $^\ast\ast$.

Comparing the Self-Schema versus Contingencies of Self-Worth Models. Two regression analyses (one for self-esteem and one for depression) were conducted to test the relative utility of the two models of self-worth. In each analysis, all seven content domains of the Contingencies of Self-worth (CSW) model were entered first as block 1 (e.g., Family, Approval of Others, Competition, etc.). Following this, the five significant predictors associated with the self-schema model of emotion (as reported in the above regression analyses) were entered next. Thus, block 2 consisted of positive and negative individualistic beliefs and evaluations, along with negative relatedness evaluations $^\ast\ast\ast$.

$^\ast\ast$ As a check, the entry order of the blocks was reversed in two further regression analyses. Both blocks still contributed significantly to the prediction of each well-being measure. However, block 1 (evaluations) now accounted for slightly more predictability for both self-esteem ($R^2 = .52$) and depression ($R^2 = .39$); whereas block 2 (beliefs) now accounted for slightly less (self-esteem $R^2$ change = .11; depression $R^2$ change = .08). These findings reinforce the proposal that both beliefs and evaluations contribute significantly to the prediction of well-being, regardless of order of consideration.

$^\ast\ast\ast$ As a check, further regression analyses were conducted that included all 8 of the self-worth beliefs and evaluations. The findings for these analyses were essentially similar to those reported in the text.
When predicting self-esteem, the first regression analysis revealed that three of the CSW domains in block 1 were significant predictors (family $\beta = .28$; approval of others $\beta = -.21$; and competition $\beta = -.19$), $F(7, 129) = 3.70, p < .01$, with an $R^2 = .12$. The incremental change in $R^2$ of .47 when entering the five self-worth beliefs and evaluations (block 2 predictors) was substantial, $F$-change $(5, 124) = 31.96, p < .001$, with positive individualistic evaluations being the largest predictor ($\beta=.51$), followed by negative individualistic beliefs ($\beta = -.34$) and finally, negative individualistic evaluations ($\beta = -.14$). Interestingly, in this overall regression model, $R^2 = .60$, $F(12, 124) = 18.07, p < .001$, none of the block 1 CSW predictors remained significant.

The second regression analysis focused on the prediction of depression. Here, when the seven CSW predictors were entered first, the regression equation was not significant, $R^2 = .04$, $F(7, 129) = 1.82, ns$. However, the subsequent entry of the block 2 predictors (the 5 self-worth beliefs and evaluations), resulted in a substantial increase in $R^2$ of .42, $F$-change $(4, 125) = 26.98, p < .001$. Four of the five self-schema predictors were significant in this overall model, as was one of the seven CSW domains, $R^2 = .47, F(11,125) = 11.91, p < .001$. In descending order, these were positive individual evaluations ($\beta = -.38$), negative individualistic beliefs ($\beta = .28$), negative relatedness evaluations ($\beta = .25$), CSW family domain ($\beta = .18$), and negative individualistic evaluations ($\beta = .15$). Overall, these two regression analyses indicated that even after entering the seven CSW domains first, there was still considerable predictive utility that could be ascribed to the self-worth beliefs and evaluations associated with the self-schema model****.

2.5. DISCUSSION

Our findings showed that both the self-worth beliefs and evaluations in the self-schema model of emotion are predictive of psychological well-being. Evaluative standards (particularly in the positive individualistic domain) were the strongest predictor of self-esteem, and also one of the major predictors of depression. Self-worth beliefs (particularly in the negative individualistic domain) were the second strongest predictor of self-esteem, and one of the main predictors of depression. In contrast to prior studies which have focused solely on negative self-worth beliefs and evaluations in predicting well-being (Kuiper & Olinger, 1986), the present study examined both negative and positive beliefs and

**** Two final regression analyses were conducted in which the order of blocks was reversed. For self-esteem, the CSW domains (as block 2) did not provide a significant increment in predictability above and beyond that already accounted for by the self-worth beliefs and evaluations entered as block 1, $R^2 = .60, F(12, 124) = 18.07, p < .001$. For depression, the CSW family domain (block 2) did add significantly to predictability, albeit an $R^2$ change of only .06, $F$-change $(7, 125) = 2.26, p < .05$. Congruent with the presented analysis, the self-worth beliefs and evaluations (in block 1) counted for the bulk of the predicted variance, $R^2 = .43, F(11, 125) = 11.91, p < .001$. 
evaluations. In doing so, we provided further support for the self-schema model by demonstrating that positive self-worth components are also very important predictors of psychological well-being. In particular, positive self-evaluations were found to be the strongest predictor of self-esteem. Positive self-evaluations were also found to be one of the major predictors of depression, along with negative self-worth beliefs. Thus, while depression is strongly predicted by the presence of negative and irrational self-worth beliefs, it is also predicted by the extent to which individuals are fulfilling the adaptive, rational, and positive components of their self-worth. Little prior work has examined positive elements of the self-schema in this fashion, and the present findings indicate that further theoretical and empirical consideration is definitely warranted.

The current study further extends the self-schema model by examining the relative predictive utility of both the individualistic and relatedness dimensions. Overall, self-worth beliefs and their associated evaluative standards pertaining to independence, achievement, and a sense of mastery over one’s environment were better predictors of psychological well-being than those pertaining to relationships with others. Although depression is primarily predicted by the individualistic aspects of self-worth components, it should be noted that it is also predicted, to a limited degree, by greater endorsement of irrational and unrealistic self-evaluative standards pertaining to relationships with others.

A second purpose of this study was to examine the relative predictive utility of the self-schema model, when compared with Crocker’s self-worth contingency model. Their model proposes that individuals invest their self-worth in specific life domains, and self-evaluations of self-worth become contingent upon success or failure within those domains (Crocker et al., 2003). The self-schema model, in contrast, focuses on the broader dimensions of positive and negative self-worth beliefs and evaluations. Our findings indicate that the endorsement of more general self-worth evaluative standards that are either positive (i.e., rational and feasible) or negative (i.e., irrational and unrealistic), significantly adds to the prediction of psychological well-being, over and above the extent to which individuals invest their self-worth in specific content domains. In addition, our findings show that the valence of self-worth beliefs is also an important consideration when predicting psychological well-being. Recall that the self-schema model of emotion differentiates between self-worth beliefs that are positive (i.e., rational and adaptive) and negative (i.e., irrational and maladaptive). In contrast, Crocker’s model primarily focuses on the degree to which individuals invest their self-worth in particular domains. As such, their model does not consider the valence of the self-worth beliefs that may underlie an individual’s assessment of self-worth in a given domain. Our findings, however, indicate that the extent to which individuals hold negative self-worth beliefs significantly adds to the prediction of psychological well-being, over and above the extent to which individuals invest their self-worth in a specific domain of life.
Table 1
Means, Standard Deviations and Correlations between Predictors and Criteria

<table>
<thead>
<tr>
<th>Predictors</th>
<th>M</th>
<th>SD</th>
<th>Correlations</th>
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<tbody>
<tr>
<td><strong>Self-worth Beliefs and Evaluations Scale (SWBE)</strong></td>
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<tr>
<td>Part 1: Self-worth Beliefs</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Negative Individualism</td>
<td>15.24</td>
<td>4.92</td>
<td>–.63**</td>
</tr>
<tr>
<td>Negative Relatedness</td>
<td>19.55</td>
<td>4.71</td>
<td>–.44**</td>
</tr>
<tr>
<td>Positive Individualism</td>
<td>31.15</td>
<td>2.43</td>
<td>.19*</td>
</tr>
<tr>
<td>Positive Relatedness</td>
<td>31.01</td>
<td>2.67</td>
<td>.12</td>
</tr>
<tr>
<td>Part 2: Evaluative Standards</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Negative Individualism</td>
<td>19.82</td>
<td>4.02</td>
<td>–.38**</td>
</tr>
<tr>
<td>Negative Relatedness</td>
<td>13.46</td>
<td>3.76</td>
<td>–.34**</td>
</tr>
<tr>
<td>Positive Individualism</td>
<td>28.33</td>
<td>4.06</td>
<td>.65**</td>
</tr>
<tr>
<td>Positive Relatedness</td>
<td>28.91</td>
<td>4.16</td>
<td>.36**</td>
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<tr>
<td><strong>Contingencies of Self-Worth Scale (CSW)</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Competition</td>
<td>24.26</td>
<td>5.17</td>
<td>–.24**</td>
</tr>
<tr>
<td>Academic Competence</td>
<td>27.03</td>
<td>4.29</td>
<td>–.12</td>
</tr>
<tr>
<td>Virtue</td>
<td>25.67</td>
<td>4.79</td>
<td>.06</td>
</tr>
<tr>
<td>Family</td>
<td>27.85</td>
<td>4.37</td>
<td>.18*</td>
</tr>
<tr>
<td>Appearance</td>
<td>25.15</td>
<td>4.96</td>
<td>–.20*</td>
</tr>
<tr>
<td>God’s Love</td>
<td>19.22</td>
<td>9.04</td>
<td>.11</td>
</tr>
<tr>
<td>Approval of Others</td>
<td>20.74</td>
<td>5.33</td>
<td>–.25**</td>
</tr>
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*p < .05    **p < .01

The present findings also have implications for interventions associated with self-esteem and depression. Consistent with theory underlying cognitive therapy, individuals with low self-worth and depression are likely to benefit from therapies that address irrational standards of self-worth, particularly those pertaining to independence and achievement. The present study also found positive individualistic self-evaluative standards to be a strong predictor of depression and self-esteem. This suggests that perceived failures in meeting rational, realistic standards of self-worth may also play a role in the onset and maintenance of maladaptive functioning. As such, individuals might benefit from cognitive interventions that help to establish a sense of self-worth that is less contingent on meeting particular standards, be they positive or negative.

Finally, it should be noted that the present study has several limitations. Since we used a correlational design, it is not possible to determine whether self-worth beliefs and evaluative standards caused changes in psychological well-being, or vice versa. For example, self-esteem and depression may also influence individuals’
endorsement of self-worth beliefs and evaluative standards. Furthermore, although depression was equally predicted by negative self-worth beliefs and the failure to fulfill positive standards of self-worth, it still remains possible that the depression associated with each of these predictors may have quite distinct characteristics. For example, failing to achieve adaptive self-evaluative standards may lead to depressive symptoms that are temporary and relatively mild, reflecting more of a transient mood response. In contrast, negative, maladaptive beliefs that underlie and guide the assessment of one’s self-worth may be associated with a depression that is more long-lasting and recurring. This information is not attainable from the current study, and it would be worthwhile for this issue to be included in future research. In this regard, it may also be useful to examine the extent to which negative self-worth beliefs increase an individual’s sensitivity to failure to fulfill a wide range of self-evaluative standards, including those that are rational and feasible.

REFERENCES

REZUMAT

Acest studiu a examinat diverse tipuri de credințe despre valoarea de sine și evaluările ca predictori ai depresiei și estimării de sine. Bazând-se pe un model al self-schemei emoției unele dintre aceste credințe și evaluări s-au axat în mod tradițional pe negativ (de exemplu, „Nu voi izburi la locul de muncă”), în timp ce altele s-au concentrat în special asupra aspectelor pozitive ale valorii de sine (de exemplu, „Sunt capabil să ofer precum și să primesc în relațiile cu ceilalți”). Rezultatele au arătat că evaluările pozitive ale valorii de sine sunt predictorii principali pentru o stimă de sine mai ridicată și mai puțină depresie, indicând astfel nevoia de a explora în continuare rolul componentelor evaluative pozitive ale schemei de sine asupra stării psihice de bine. Descoperirile noastre au relevat de asemenea că de fapt credințele valorii de sine și standardele evaluative referitoare la independență și sentimentul de stăpânire a mediului sunt în general mai buni predictori ai stării de bine decât cele referitoare la relațiile cu ceilalți. Acest model este deosebit de important pentru stimă de sine, sprijinind distincția facută în cadrul acestuia între valoarea de sine bazată pe individualism versus teme corelate. În ultima parte am comparat utilizarea predictivă a modelului self – schemei cu modelul schemei de sine contingente, avansat de Crocker. Credințele și evaluările menționate în modelul schemei de sine sunt predictori semnificativi ai stării de bine, dinclo de conținutul domeniilor specifice în modelul schemei de sine contingente.