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ADOLESCENT DEPRESSION:
THE INFLUENCE OF SELF-ESTEEM, SELF-CONSCIOUSNESS,
AND GENDER
BY
KEVIN W. ADAMS

A THESIS SUBMITTED IN PARTIAL FULFILLMENT OF THE
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RUNNING HEAD: ADOLESCENT DEPRESSION

Masters Thesis

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1998

Running Head: Adolescent Depression

Adolescent Depression: The Influence of Self-Esteem,
Self-Consciousness, and Gender

Kevin Adams

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Abstract

This study explored gender differences in reports of depressive symptoms among adolescents. Self-esteem was examined for its relationship to reports of depressive symptoms and self-consciousness was examined to determine its influence on self-esteem and depression. One hundred four 10th grade students were involved in the study. The Beck Depression Inventory-II, the Imaginary Audience Scale, and the Rosenberg Self-Esteem Inventory were used in the analysis. A hierarchical multiple regression analysis was used to analyze the data. Alpha was set at .05. A positive relationship was found between gender and the variables of depression, abiding self-consciousness, transient self-consciousness, and self-esteem. Females scored significantly higher than males in depression, abiding self-consciousness, and transient self-consciousness. Females also reported having lower self-esteem than males. A significant relationship was found between transient self-consciousness and depression in male and female adolescents. Implications of the findings and intervention techniques for adolescent depression are discussed.

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Adolescent Depression: The Influence of Self-Esteem,
Egocentrism, and Gender

The Diagnostic Statistical Manual, Fourth Edition (APA, 1994) does not differentiate the criteria for the diagnosis of depressive disorders across different ages. Research (Asarnow & Bates, 1988; Lewinsohn, Gotlib, & Seeley, 1997; Allgood-Merten, Lewinsohn, & Hops, . 1990) suggests reported symptoms of depression in younger populations are similar to those of depressed adults. Different psychological factors, however, may influence the occurrence of depression at various ages. Some psychosocial variables in adolescents may place them at a high risk for the development of depression (Allgood-Merten et al.; Baron, 1986; Garber, Weiss, & Shanley, 1993). Researchers have examined self-esteem, self-consciousness, and gender as an important psychosocial variable in the development of depression (Lewinsohn et al.; Allgood-Merten et al.; Schonert-Reichl, 1994).

Some researchers (Flippo & Lewinsohn, 1971; Kernis, Grannemann, & Mathis, 1991; Rosenberg, 1965) found lower levels of self-esteem to be associated with higher levels of depressive symptoms. Feelings of worthlessness have been associated with indications of low self-esteem. Attitude towards the self (i.e., feelings of worthlessness) are identified as components in the diagnosis of depressive disorders by the DSM IV (APA, 1994).

Another factor that may influence the experience of

depression is adolescent egocentrism. Elkind (1967) contends that adolescent egocentrism emerges as an inability to distinguish their views towards situations from the views of others toward the same situation. He suggested adolescents develop an "imaginary audience" that is observant and critical of their behavior. Elkind (1978) proposed self-consciousness as an aspect of adolescent egocentrism.

Lewinsohn, Hoberman, Teri, and Hautzinger (1985) present a multifactorial model of depression where a critical component of the model is self-focus. Others (Pyszczynski & Greenberg, 1987) conclude that the influence of self-focus on depression is influenced by self-esteem. The exact way in which self-esteem and self-focus exert influence on adolescent depression is unclear. Pyszczynski and Greenberg contend that self-focus, when self-esteem is reduced due to a major negative life event, will influence the development and maintenance of depression. According to Garber et al. (1993) adolescents diagnosed with depression are more self-conscious and have lower self-esteem. Richter, Reaves, and Deaver (1982) conclude that low self-esteem leads to higher self-consciousness in adolescents.

Gender influences in depression are well documented (Dohrenwend & Dohrenwend, 1976a; Gjerde, Block, & Block, 1988; Allgood-Merten et al., 1990; Lewinsohn, Duncan, Stanton, & Hautzinger, 1986). The researchers indicate females experience more depressive symptoms than males. Inderbitzen and Hope (1995) found that adolescent females report higher levels of social

anxiety and depressive symptoms than males. Allgood-Merten et al. report adolescent females experience a more unfavorable body image than males which may be a supportive factor in the development of depression. Schonert-Reichl (1994) identifies gender differences with respect to levels of egocentrism and depressive symptoms. The author found significant positive correlations between depressive symptomology and self-consciousness in adolescent females. No correlation was found between depressive symptoms and self-consciousness in males.

Research suggest egocentrism (e.g., Garber et al., 1993; Lewinsohn et al., 1997; Schonert-Reichl, 1994), self-esteem (e.g., Allgood-Merten et al., 1990; Garber et al.), and gender (e.g., Allgood-Merten et al., Dohrenwend & Dohrenwend, 1976a) may all play important roles in the manifestation of depression in adolescents. The exact influences are yet unknown. It may be that a tendency to self-focus in adolescence, when the self-esteem is decreased, leads to depressive symptoms. Alternatively, it may be that when self-esteem is high, a tendency to self-focus does not lead to depression. Adolescents who have low self-esteem, on the other hand, may not experience depression when they have low self-consciousness. The exact relationship between the influences of these factors also may vary across gender.

The present research explored gender differences in depression in adolescence. Self-esteem was examined for its

possible relationship with depressive symptoms.

Self-consciousness was assessed as a possible influence on both self-esteem and depressive symptoms.

Method

Subjects

Subjects were obtained from solicitation of students on a volunteer basis from a local high school in Raleigh County. Students who were enrolled in the 10th grade for the 1998-99 school year were asked to participate in the study. No incentives were offered by the researcher for participation. Parental and student informed consent were obtained (See Appendix B).

Instruments

The Beck Depression Inventory Second Edition (BDI-II) is a group or individually administered test measuring the presence of depressive symptoms (Beck, Steer, & Brown, 1996). The test was normed on subjects 13 years and older. The BDI-II is a revision of the original BDI. Revision included dropping four items (i.e., Weight loss, Body Image Change, Somatic Preoccupation, and Work Difficulty) and adding four new items (i.e., Agitation, Worthlessness, Concentration Difficulty, and Loss of Energy). Many of the statements used in rating the other symptoms were reworded. The questionnaire consists of 21 statements which are rated on a four-point scale ranging from 0-3 with total scores ranging from 0-60. Each subject is asked to circle one statement in each group of statements that best describes the way

they have been feeling in the past two weeks. The BDI-II was standardized on a psychiatric outpatient sample of 500 subjects from three separate groups (63% females and 37% males) and one normal group of 120 college students (56% female and 44% males). The coefficient alpha ranged from .92 to .93.

The Rosenberg Self-Esteem Inventory (RSEI) (Rosenberg 1965, 1979) was used to measure self-esteem. The RSEI is a 10-item self report inventory which yields a seven-point scale.

Questions measure the extent to which individuals are satisfied with themselves. Convergent and discriminant validity has been demonstrated. The Alpha coefficient is .88 and the test retest coefficient is .76 (Silber & Tippet, 1965).

The Imaginary Audience Scale (IAS) was used to measure adolescent egocentrism. The IAS has two subscales: Transient Self (TS) and Abiding Self (AS). The TS subscale measures self-consciousness in temporarily embarrassing situations such as a bad haircut. The AS subscale measures self-consciousness to more permanent aspects of behavior such as worrying about whether they are liked by others. The IAS consists of 12 questions (six abiding and six transient) that describes situations in which the self is revealed. Subjects are asked to respond in one of three ways: (a) unwillingness to participate, (b) an indifference to participate, (c) willingness to participate.

Adams and Jones (1981) and Elkind and Bowen (1979) indicate that the IAS has reasonable reliability and construct validity. The TS and AS scales correlate moderately with one another and

with the IAS, but only the AS scale correlates with measures of self-esteem (i.e., Piers-Harris .32, Coopersmith .34). Test retest reliability is .66 for the AS, .62 for the TS, and .65 for the IAS. Alpha coefficients for internal consistency are .54 for AS, .52 for TS, and .63 for total IAS (Elkind & Bowen, 1979).

Procedure

Parents of all the students in the participating classes were sent letters requesting permission to include their child in the study. All students receiving parental permission and volunteering to participate were included in the study. Questionnaires were administered in large group settings occurring during class periods. The examiner read the directions aloud for each questionnaire and asked students to complete it. A period of 20 minutes was allowed for completion of the BDI-II, 15 minutes was allowed for completion of the IAS, and 15 minutes was allowed for completion of the RESI. The ordering of the presentation of questionnaires varied across the group settings with a counter-balance design. Questionnaires were collected at the end of the testing session.

Results

The researcher used a survey design. The independent variables were gender, self-esteem, and egocentrism, and the dependent variable was depressive symptoms.

Because the data was to be analyzed using a multiple regression analysis, prior to testing the proposed equation, the multiple regression was violated (i.e., curvilinearity,

outliers, and heteroscedasticity). Based upon the analyses, all the assumptions underlying the use of multiple regression were met.

The data were analyzed using hierarchical multiple regression. Because gender has been shown to influence depression, this variable was entered first into the regression equation. The next variable of interest was self-esteem. It was entered next. The last variable entered into the equation was self-consciousness variable. In a hierarchical regression, the coefficient of interest is the proportion of variable accounted for as a particular step over and above that accounted for by the variables previously entered (Wampold & Freund, 1987). Alpha was set at .05.

Table 1 presents the correlations among the variables for all subjects. As can be seen, a significant positive relationship emerged between gender and the variables of depression, abiding self-consciousness, transient self-consciousness and self-esteem. A significant positive relationship emerged between transient self-consciousness and depression, and between self-esteem and depression.

As can be seen in Table 2, which compares males and females on all variables, significant differences were found in all of the variables. Females scored significantly higher than males on depression, self-esteem, abiding self-consciousness, and transient self-consciousness.

Table 3 reflects the results of the regression analysis. As

can be seen the variable of gender is associated with 11% of the

Table 1 Correlations Among Variables for All Subjects

	Gender	Self-Esteem	Abiding Self	Transient Self	Depression
Gender		.29**	.26**	.24*	.33***
Self-Esteem			.19	.11	.60***
Abiding Self				.41***	.13
Transient Self					.25

Note:

*p <.05.

**p <.01.

***p <.001.

Table 2

Comparisons of Males (n=43) and Females (n=61) on the Variables

	<u>Males</u>		<u>Females</u>		t-value
	M	SD	M	SD	
Depression	7.95	6.18	14.43	10.58	-3.92***
Self-Esteem	7.70	4.26	10.74	5.50	-3.17***
Abiding Self	4.23	1.89	5.411	2.33	-2.84**
Transient Self	3.14	2.26	4.36	2.52	-2.59*

Note: *p <.05 **p <.005 ***p <.001

Table 3

Regression Analysis for Depression with Independent Variables of Gender, Self-Esteem, and Self-Consciousness

Variable	Total R2	Increase in R2	F for Increase	dfs	p
Gender	.11	.11	12.95	1,102	.0005
Self-Esteem	.39	.28	46.51	2,101	.0000
Abiding Self	.39	.00	.90	3,100	.76
Transient Self	.42	.03	5.06	499	.0264

variance in depression. When self-esteem is added into the regression equation, 39% of the variance in depression is associated with gender and self-esteem. The addition of the abiding self-consciousness variable added no contribution to the regression equation. The transient self-consciousness variable, enter last in the equation, contributed to explaining an addition 3% of the variance in depression. With all the variables in the model, 42% of the variance in depression is explained.

Discussion

One purpose of the present study was to explore gender differences in depression in adolescence. Gender was found to have a significant relationship to depression in adolescents. Female adolescents report more depressive symptoms than male adolescents. The results are similar to the results found by Allgood-Merten et al. (1990), and Inderbitzen and Hope (1991).

Self-esteem was examined for its possible relationship to depression in adolescents. The findings suggest a significant relationship between self-esteem and depression. The results are consistent with findings by Kernis et al. (1991), Garber et al. (1993), and Lewinsohn et al. (1997), Asarnow et al. (1987), and Kazdin (1987). No gender differences in reports of self-esteem were found. The results contradict findings by Allgood-Merten et al. (1990).

In contrast to the findings of Ritcher et al. (1982) the present study found no relationship between self-esteem and self-consciousness. A significant relationship was found between

the transient characteristics of self-consciousness as measured by the IAS and depressive symptoms. The results contradict the findings of Schonert-Reichl (1994). The relationship suggests that depressed adolescents are more concerned with transient, less permanent aspects of self (ie. bad hair cut, clothing). It may be that depressed and nondepressed adolescents are overly concerned with abiding characteristics, where as, only depressed adolescents become preoccupied with transient characteristics. Further studies should focus on the separate scales of the IAS to determine which scale is most helpful in identification of adolescent depression.

Adolescents at risk for depressive disorders may evidence low self-esteem and a preoccupation with transient aspects of the self. Therefore, educating school faculty and parents to the characteristics of adolescents with low self-esteem would be helpful in preventing adolescent depression. Adolescents at risk may benefit from prevention programs aimed at increasing self-esteem. Considering that adolescent females consistently report higher levels of depressive symptoms than males, schools and parents need to develop gender specific programs which focus on raising the self-esteem of female adolescents.

A limitation of the study is the use of self report inventories of self-esteem and depression. Future studies may utilize measures of the constructs that are not dependent upon self-reported measures (eg., rater reports, reports of significant others, structured interviews by clinicians, teacher

reports, etc.).

The subjects in the present study were volunteers from a nonclinical population. There may have been students who refused to participate because they were hesitant to reveal depressive symptoms. The relationship between self-esteem and depression can be better understood if further studies utilize a population of adolescents diagnosed with a depressive disorder. Studies of this nature would be helpful in identifying adolescents at risk for depression.

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Appendix A
Literature Review

LITERATURE REVIEW

The Diagnostic and Statistical Manual, Fourth Edition (APA, 1994) does not differentiate the criteria for the diagnosis of depressive disorders across different ages. Lewinsohn, Hoberman, Teri, and Hautzinger (1985) suggest that any theory of depression must include a curvilinear relationship between age and depression. Lewinsohn, Duncan, Stanton, and Hautzinger (1986) contend unipolar depression is low during childhood, increases during adolescence and early adulthood, plateaus during middle age, and begins to decline during later ages. The author will explore the influence of self-esteem, self-consciousness, self-focus, and gender on depression in adults and adolescents.

Self-Esteem and Depression

Asarnow and Bates (1988) provide specific maladaptive patterns associated with depression in adults. One factor found to be associated with depressive symptomology is low self-esteem. The DSM-IV (1994) identifies feelings of worthlessness as a characteristic of depression. Rosenberg (1965) found a significant association between self-esteem and depressive affect. The author stated that individuals rated as higher self-esteem were thought of as being less "gloomy" than those rated as lower self-esteem. Tennen and Herzberger (1987) also found a negative relationship between self-esteem and depressive

symptoms in adults. Beck (1967) proposed that the levels of self-esteem correlate with depressive symptoms and suggest that low self-esteem may be a causal factor in the development of depressive symptomology. Flippo and Lewinsohn (1971) found higher levels of depressive symptoms were associated to lower levels of self-esteem in adults.

Kernis, Grannemann, and Mathis (1991) not only found that low self-esteem is associated with higher reports of symptoms of depression, but also that the stability of self-esteem plays an important role in the development of depressive symptoms. The researchers defined stability of self-esteem as "the magnitude of short term fluctuations in global self-esteem" (p. 80). Individuals with an unstable high self-esteem were found to have an increase in depressive symptoms. Individuals with an unstable low self-esteem showed a decrease in depressive symptoms. The results provide further evidence of the predictive value of levels of self-esteem, especially for individuals with less stable self-esteem. Considering the relationship between self-esteem and depression in the adult populations it may be possible that the relationship between these factors will generalize to the adolescent population.

Asarnow, Carlson, and Guthrie (1987) found that depressed children generally exhibit lower self-esteem than nondepressed children. Garber, Weiss, and Shanley (1993) also found that adolescents with greater levels of depressive symptoms report experiencing more negative thoughts about self. The researchers

suggest the strength of the associations with adolescents may be greater than reports in adult populations. Asarnow and Bates (1988) report that depressed children exhibit a similar attributional style as depressed adults.

Kazdin (1987) found that children with more depressive symptoms demonstrate lower self-worth and self-esteem. Allgood-Merten, Lewinsohn, and Hops (1990) found self-esteem and body image to be significant contributors to the development of depressive symptoms in adolescents. The researchers indicate support for low self-esteem as a precursor to adolescent depression. The results suggest that the association between self-esteem and depression in younger populations are similar to those found in adults.

Lewinsohn, Gotlib, and Seeley (1997) examined self-esteem as an important psychosocial variable in the development of depression in adolescents. The study used three groups of adolescents: Nonaffective disorder, Major depression, and Never mentally ill. The researchers found a large number of psychosocial factors were correlated with depressive symptoms in adolescents as in adults, but only three variables were found to be specific to clinically depressed individuals: self-consciousness, self-esteem, and low physical activity. The findings suggest low self-esteem is a critical component in the expression of depressive symptoms.

Ritcher, Reaves, and Deaver (1982) found that low self-esteem was associated with higher levels of

self-consciousness. The results suggest that individuals with low self-esteem have a greater need to present an enhanced self-image to others.

Self-consciousness and Depression

Another factor that may influence the experience of depression is adolescent egocentrism. Elkind (1967) contends that adolescent egocentrism emerges as an inability to distinguish their views toward situations from the views of others toward the same situation. The author suggests adolescents develop an "imaginary audience" that is observant and critical of their behavior. Elkind (1978) found that self-consciousness was an aspect of adolescent egocentrism.

Allgood-Merten et al. (1990) found that self-consciousness accompanies depressive symptoms in adolescents. Garber et al. (1993) stated that adolescents diagnosed with depression were more self-conscious than nondepressed adolescents. Schonert-Reichl (1994) found a significant correlation between the Abiding Self traits (AS) and depressive symptomology. Baron (1986) found evidence that supports the relationship between depression and adolescent egocentrism. The author suggests that the degree of egocentrism influences the prominence of depressive symptomology. Individuals with increased levels of egocentric behavior displayed significantly more depressive symptoms than those with a lesser degree of egocentric thinking.

Adams, Abraham, and Markstrom (1987) found that individuals

who were identity achieved (having self defined goals and values) were less self-conscious and less self-focused than diffused adolescents (being role confused and lacking clearly defined goals). The researchers suggest that adolescents who are more satisfied with self are less likely to seek the approval of others and less likely to experience anxiety and distress associated with being the center of attention in embarrassing situations.

Lewinsohn et al. (1985) presented a multi-factorial model of depression where a critical component of the model is self-focus. When an individual is unable to cope with negative life situations (specific stressors) attention is focused on the self rather than the environment. The switch of focus sets in motion the conditions necessary for depressive cognitions.

Carver and Scheier (1981) present a theory of self-focused attention which employs a self-regulating feedback loop. The authors suggest individuals set standards for their own behavior and use self-focus as a means of comparison between the current and standard behavior. In comparing the two behaviors the self-focus becomes aversive if the probability of reducing the discrepancy is low. According to the authors, individuals who are more self-attentive report more reliable symptoms of depression than those less self-focused. Pyszczynski and Greenberg (1987) expanded this theory to include the development and maintenance of depression. According to the authors when the standard behavior or goal is unattainable but of central

importance the individual is unable to exit the system. The continuance of self-focused behavior results in negative affect which may be exhibited as depressive symptoms. When self-esteem is low due to a negative event (i.e. Loss of job), the self-focus that results may influence the occurrence of depressive thinking.

Gender Differences in Depression and Self-Consciousness

Gender differences have also emerged as a factor in depression. Dohrenwend and Dohrenwend (1976a) found manic-depressive psychosis to be consistently more prevalent in women. Gjerde, Block, and Block (1988) found that in dysthymic adolescents, females are seen to be more self-evaluating and reserved in the expression of depressive symptoms where male adolescents are more apt to be assertive and aggressive. The authors indicate depressed females are more prone to use analysis and ponder over feelings where males will more likely take action.

Inderbitzen and Hope (1995) using a large sample of adolescent subjects found females report more social anxiety and depressive symptoms than male adolescents. Allgood-Merten et al. (1990) also found that adolescent females scored higher in depressive symptoms, self-consciousness, and negative body image\self-esteem. The researchers suggest if adolescent females were as confident in their physical features as adolescent males then they would be less likely to be depressed.

Richter et al. (1982) found that females will avoid negative

social situations more than males thus indicating females are more self-conscious of potential negative feedback. Significant positive correlations have been found between self-consciousness and depressive symptomology in adolescent females where no correlations were found to be significant regarding these two factors in adolescent males (Schonert-Reichl, 1994). Baron (1986) reports finding adolescent females with high egocentrism scored higher in depressive symptoms than adolescent males high in egocentrism. The results of the study suggest females are higher self-consciousness than males and report more symptoms of depression.

Overall the research suggest factors that influence depression in adults are similar to the variables in adolescent depression. Self-esteem has been identified as a factor influencing depression in adult and adolescent populations. Adolescents with lower self-esteem report more depressive symptoms. There may be a linear relationship between self-esteem and self-consciousness. Adolescents with lower levels of self-esteem also report higher levels of self-consciousness. Self-consciousness may also influence depressive symptoms in adolescents. Gender also plays a significant factor in depression. Adolescent females report more depressive symptoms than males. Adolescent females have been found to have higher levels of self-consciousness than adolescent males. The manner in which adolescent males and females express depressive symptoms also may differ. The review of the literature also suggests

gender differences in levels of self-esteem.

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Appendix B
Consent Forms

October 13, 1998

Kevin W. Adams
P. O. Box 725
Coal City, West Virginia 25823

Dear Parent:

I am a graduate student at Marshall University Graduate College. I am currently conducting research for my Masters Thesis in Clinical Psychology. This research project has been approved for Raleigh County School students that elect to participate. I am asking you and your child's permission to complete questionnaires. The questionnaires will ask questions about how your child feels about himself or herself, how he or she would behave in certain situations he or she may have. Both you or your child may choose not to participate or choose to withdraw from the study at anytime. No name will be placed on the questionnaires and your child's identity is not known to the investigator. The information gathered will be kept confidential, and no results will be provided on any individual's responses.

Your child may benefit from the study by having the opportunity to learn about how research is conducted. No known harm is associated with the completion of the questionnaires. If you would like further information feel free to contact me at the above address or at my office at 732-9132.

Thank you,

Kevin W. Adams

Graduate Student, MUGC

Check Your Reply Below

_____ I do not wish for my child to participate.

_____ I give permission for my child to participate.

Signature of Parent or Guardian

Student's Signature

September 3, 1998

Kevin W. Adams
P.O. Box 725
Coal City, WV 25823

Dwight Dials
Superintendent of Schools
Raleigh County Board of Education
105 Adair St
Beckley WV, 25801

Dear Mr. Dials:

I am a student at Marshall University Graduate College currently pursuing a Master of Arts degree in Clinical Psychology. At this time I am researching depressive symptomatology in adolescents and how these symptoms relate to self esteem and self-awareness. The results of this study may help to identify adolescents at risk for developing depressions.

In order to complete this project I would like to work with tenth grade students. I am asking for permission to pursue this research in the Raleigh County school system.

I would welcome the opportunity to meet with you or your representative to discuss study. If any additional information is needed, regarding the study, please feel free to contact me at 683-3838 (home) or 732-9132 (work). Thank you for your consideration in this matter.

Sincerely,

Kevin W. Adams
Psychology Intern
Marshall University Graduate College

Appendix C
BDI-II, IAS, RSEI

Name: _____ Marital Status: _____ Age: _____ Sex: _____
Occupation: _____ Education: _____

Instructions: This questionnaire consists of 21 groups of statements. Please read each group of statements carefully, and then pick out the **one statement** in each group that best describes the way you have been feeling during the past two weeks, including today. Circle the number beside the statement you have picked. If several statements in the group seem to apply equally well, circle the highest number for that group. Be sure that you do not choose more than one statement for any group, including Item 16 (Changes in Sleeping Pattern) or Item 18 (Changes in Appetite).

1. Sadness

- 0 I do not feel sad.
- 1 I feel sad much of the time.
- 2 I am sad all the time.
- 3 I am so sad or unhappy that I can't stand it.

2. Pessimism

- 0 I am not discouraged about my future.
- 1 I feel more discouraged about my future than I used to be.
- 2 I do not expect things to work out for me.
- 3 I feel my future is hopeless and will only get worse.

3. Past Failure

- 0 I do not feel like a failure.
- 1 I have failed more than I should have.
- 2 As I look back, I see a lot of failures.
- 3 I feel I am a total failure as a person.

4. Loss of Pleasure

- 0 I get as much pleasure as I ever did from the things I enjoy.
- 1 I don't enjoy things as much as I used to.
- 2 I get very little pleasure from the things I used to enjoy.
- 3 I can't get any pleasure from the things I used to enjoy.

5. Guilty Feelings

- 0 I don't feel particularly guilty.
- 1 I feel guilty over many things I have done or should have done.
- 2 I feel quite guilty most of the time.
- 3 I feel guilty all of the time.

6. Punishment Feelings

- 0 I don't feel I am being punished.
- 1 I feel I may be punished.
- 2 I expect to be punished.
- 3 I feel I am being punished.

7. Self-Dislike

- 0 I feel the same about myself as ever.
- 1 I have lost confidence in myself.
- 2 I am disappointed in myself.
- 3 I dislike myself.

8. Self-Criticalness

- 0 I don't criticize or blame myself more than usual.
- 1 I am more critical of myself than I used to be.
- 2 I criticize myself for all of my faults.
- 3 I blame myself for everything bad that happens.

9. Suicidal Thoughts or Wishes

- 0 I don't have any thoughts of killing myself.
- 1 I have thoughts of killing myself, but I would not carry them out.
- 2 I would like to kill myself.
- 3 I would kill myself if I had the chance.

10. Crying

- 0 I don't cry anymore than I used to.
- 1 I cry more than I used to.
- 2 I cry over every little thing.
- 3 I feel like crying, but I can't.

1.. Agitation

- 0 I am no more restless or wound up than usual.
- 1 I feel more restless or wound up than usual.
- 2 I am so restless or agitated that it's hard to stay still.
- 3 I am so restless or agitated that I have to keep moving or doing something.

2.. Loss of Interest

- 0 I have not lost interest in other people or activities.
- 1 I am less interested in other people or things than before.
- 2 I have lost most of my interest in other people or things.
- 3 It's hard to get interested in anything.

3.. Indecisiveness

- 0 I make decisions about as well as ever.
- 1 I find it more difficult to make decisions than usual.
- 2 I have much greater difficulty in making decisions than I used to.
- 3 I have trouble making any decisions.

4.. Worthlessness

- 0 I do not feel I am worthless.
- 1 I don't consider myself as worthwhile and useful as I used to.
- 2 I feel more worthless as compared to other people.
- 3 I feel utterly worthless.

5.. Loss of Energy

- 0 I have as much energy as ever.
- 1 I have less energy than I used to have.
- 2 I don't have enough energy to do very much.
- 3 I don't have enough energy to do anything.

6.. Changes in Sleeping Pattern

- 0 I have not experienced any change in my sleeping pattern.

- 1a I sleep somewhat more than usual.
- 1b I sleep somewhat less than usual.

- 2a I sleep a lot more than usual.
- 2b I sleep a lot less than usual.

- 3a I sleep most of the day.
- 3b I wake up 1-2 hours early and can't get back to sleep.

17. Irritability

- 0 I am no more irritable than usual.
- 1 I am more irritable than usual.
- 2 I am much more irritable than usual.
- 3 I am irritable all the time.

18. Changes in Appetite

- 0 I have not experienced any change in my appetite.

- 1a My appetite is somewhat less than usual.
- 1b My appetite is somewhat greater than usual.

- 2a My appetite is much less than before.
- 2b My appetite is much greater than usual.

- 3a I have no appetite at all.
- 3b I crave food all the time.

19. Concentration Difficulty

- 0 I can concentrate as well as ever.
- 1 I can't concentrate as well as usual.
- 2 It's hard to keep my mind on anything for very long.
- 3 I find I can't concentrate on anything.

20. Tiredness or Fatigue

- 0 I am no more tired or fatigued than usual.
- 1 I get more tired or fatigued more easily than usual.
- 2 I am too tired or fatigued to do a lot of the things I used to do.
- 3 I am too tired or fatigued to do most of the things I used to do.

21. Loss of Interest in Sex

- 0 I have not noticed any recent change in my interest in sex.
- 1 I am less interested in sex than I used to be.
- 2 I am much less interested in sex now.
- 3 I have lost interest in sex completely.

Subtotal Page 2

Subtotal Page 1

Gender: Male ___ Female ___

Age: ___

Ethnic Background: Black ___

Caucasian ___

American Indian ___

Asian ___

Hispanic ___

Other (specify) ___

Instructions: Please read the following stories carefully and assume that the events happened to you. Circle only one answer that best describes what you would do or feel in the real situation.

1. You have looked forward to the most exciting dress party of the year. You arrive after an hour's drive from home. Just as the party is beginning, you notice a grease spot on your trousers or skirt. (There is no way to borrow clothes from anyone.) Would you stay or go home?
 - a. Go home.
 - b. Stay, even though I'd feel uncomfortable.
 - c. Stay, because the grease spot wouldn't bother me.

2. Let's say some adult visitors came to your school and you were asked to tell them a little bit about yourself.
 - a. I would like that.
 - b. I would not like that.
 - c. I wouldn't care.

3. It is Friday afternoon and you have just had your hair cut in preparation for the wedding of a relative that weekend. The barber or hairdresser did a terrible job and your hair looks awful. To make it worse, that night is the most important basketball game of the season and you really want to see it, but there is no way you can keep your head covered without people asking questions. Would you stay home or go to the game anyway?
 - a. Go to the game and not worry about my hair.
 - b. Go to the game and sit where people won't notice me very much.
 - c. Stay home.

4. If you went to a party where you did not know most of the kids, would you wonder what they were thinking about you?
 - a. I wouldn't think about it.
 - b. I would wonder about that a lot.
 - c. I would wonder about that a little.

5. You are sitting in class and have discovered that your jeans have a small but noticeable split along the side seam. Your teacher has offered extra credit toward his/her course grade to anyone who can write the correct answer to a question on the blackboard. Would you get up in front of the call and go to the blackboard, or would you remain seated?
 - a. Go to the blackboard as though nothing had happened.
 - b. Go to the blackboard and try to hide the split.
 - c. Remain seated.

6. When someone watches me work.....
- I get very nervous.
 - I don't mind at all.
 - I get a little nervous.
7. Your class is supposed to have their picture taken, but you fell down the day before and scraped your face. You would like to be in the picture but your cheek is red and swollen. Would you have your picture taken anyway or stay out of the picture?
- Get your picture taken even though you'd be embarrassed.
 - Stay out of the picture.
 - Get your picture taken and not worry about it.
8. One young person said, "When I'm with people I get nervous because I worry about how much they like me."
- I feel like this often.
 - I never feel like this.
 - I feel like this sometimes.
9. You have been looking forward to your friend's party for weeks, but just before you leave for the party your mother tells you that she accidentally washed all your good clothes with a red shirt. Now all your jeans are pink in spots. The only thing left to wear are your jeans that are too big and too baggy. Would you go to the party or would you stay home?
- Go to the party, but buy a new pair of jeans to wear.
 - Stay home.
 - Stay, but try to borrow some clothes to wear.
10. Suppose you went to a party that you thought was a costume party but when you get there you were the only person wearing a costume. You'd like to stay and have fun with your friends but your costume is very noticeable. Would you stay or go home?
- Go home.
 - Stay and have fun joking about your costume.
 - Stay, but try to borrow some clothes to wear.
11. Let's say you wrote a story for an assignment your teacher gave you, and she asked you to read it aloud to the rest of the class.
- I would not like that at all.
 - I would like that but I would be nervous.
 - I would like that.
12. If you were asked to get up in front of the class and talk a little bit about your hobby.....
- I wouldn't be nervous at all.
 - I would be a little nervous.
 - I would be very nervous.

Instructions: Please read each statement carefully and circle only one of the following responses to each statement: Strongly agree, agree, disagree, or strongly disagree.

1. On the whole, I am satisfied with myself.
 - a. Strongly agree
 - b. Agree
 - c. Disagree
 - d. Strongly disagree

2. At times I think I am no good at all.
 - a. Strongly agree
 - b. Agree
 - c. Disagree
 - d. Strongly disagree

3. I feel that I have a number of good qualities.
 - a. Strongly agree
 - b. Agree
 - c. Disagree
 - d. Strongly disagree

4. I am able to do things as well as most other people.
 - a. Strongly agree
 - b. Agree
 - c. Disagree
 - d. Strongly disagree

5. I feel I do not have much to be proud of.
 - a. Strongly agree
 - b. Agree
 - c. Disagree
 - d. Strongly disagree

6. I certainly feel useless at times.
 - a. Strongly agree
 - b. Agree
 - c. Disagree
 - d. Strongly Disagree

7. I feel that I'm a person of worth, at least on an equal plane with others.
 - a. Strongly agree
 - b. Agree
 - c. Disagree
 - d. Strongly disagree

8. I wish I could have more respect for myself.

- a. Strongly agree
- b. Agree
- c. Disagree
- d. Strongly disagree

9. All in all, I am inclined to feel I am a failure.

- a. Strongly agree
- b. Agree
- c. Disagree
- d. Strongly disagree

10. I take a positive attitude toward myself.

- a. Strongly agree
- b. Agree
- c. Disagree
- d. Strongly disagree

Appendix D

Letters

Kevin W. Adams
P. O. Box 725
Coal City, W.V. 25823

September 2, 1998

The Estate of Dr. Rosenberg
Dept. of Sociology
University of Maryland
College Park, MD 20742

Dear Sir or Madam:

I am currently conducting research for a Masters Thesis in clinical Psychology at the Marshall Graduate College in West Virginia. My research and thesis will focus on the relationship between Self-Esteem, Egocentrism, and Adolescent Depression. I would like to request your permission to use the Self-Esteem Scale as a measurement device in my research project. I would appreciate any information you could give me regarding reliability and validity of the scale. I also would like to request all information regarding scoring of the Self-Esteem Scale.

Your prompt attention to this matter would be greatly appreciated.

Kevin W. Adams
Psychology Intern
Marshall Graduate College