The Healthy Pursuit of Self-Esteem: Comment on and Alternative to the Crocker and Park (2004) Formulation

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J. Crocker and L. E. Park (2004) proposed both (a) that the importance of self-esteem lies more in how people strive for it rather than whether it is high or low and (b) that the benefits of pursuing self-esteem are of a limited, short-term nature and are outweighed by the significant costs that entail for functioning in multiple areas. The authors review research that raises questions about the validity of each of these assumptions. They conclude that findings are more consistent with a view in which (a) high self-esteem, or at least the avoidance of low self-esteem, is an important factor contributing to overall health and well-being and (b) the pursuit of self-esteem, when directed toward adaptive ends, can be instrumental in promoting long-term outcomes that are of value to both individuals and society. They also describe an integrative theoretical framework that encompasses both of these possibilities.

In their article “The Costly Pursuit of Self-Esteem,” Crocker and Park (2004) pointed out that studies of self-esteem and its implications for health and well-being have focused overwhelmingly on the levels of self-regard that are reported by individuals. They made a compelling case for the need for greater attention to the adaptive implications of the pursuit of self-esteem, defined as “what people do to achieve boosts to self-esteem and avoid drops in self-esteem in their daily lives” (Crocker & Park, 2004, p. 393). Their review of available literature suggests that increased consideration of the pursuit of self-esteem and its consequences for health and well-being could be instrumental in deepening understanding of the implications that feelings of self-worth have for functioning across a wide range of domains. In this regard, their analysis represents a valuable addition to the growing body of theory and research that underscores the limitations of focusing on static levels of self-esteem (and other self-system constructs) in the absence of consideration of more dynamic processes through which such attributes are formed and maintained by individuals across the life span (see, e.g., Harter, 1998, 1999; Nowalk, Vallacher, Tesser, & Borkowski, 2000).

Crocker and Park (2004), however, went well beyond this basic understanding in their analysis. First, they argued that the processes used to pursue self-esteem overshadow the individual’s resulting characteristic level of self-esteem in their significance, proposing that “the importance of self-esteem lies more in how people strive for it rather than whether it is high or low” (Crocker & Park, 2004, p. 392). Accordingly, they emphasized the need for a “shift [in] the focus of research and theory on self-esteem from whether people have it to what they do to get it and the costs and benefits of this pursuit” (Crocker & Park, 2004, p. 407). Second, Crocker and Park also proposed that if overall health and well-being are the objective, then the pursuit of self-esteem should be abandoned as a primary goal in favor of alternative goals that are less self-focused and that involve others. They argued that although there may be immediate emotional benefits of adopting self-esteem as a superordinate goal, these are likely to be substantially outweighed over the longer term by costs that accrue in a wide range of areas such as learning, competence, relationships, and mental and physical health. In this article, we review research that raises questions about the validity of both of the preceding assumptions—that is, the relative unimportance of achieving a high level of self-esteem and the presumed net costs of pursuing self-esteem as a focal goal. We present findings that are more consistent with a view in which (a) high self-esteem, or at least the avoidance of low self-esteem, is an important factor contributing to overall health and well-being, and (b) the pursuit of self-esteem, when directed toward adaptive ends, can be instrumental in promoting long-term positive outcomes for both individuals and society. We describe an integrative theoretical framework that encompasses both of these possibilities.

Benefits of Achieving a High Level of Self-Esteem

A careful examination of the available empirical literature reveals considerable support for the idea that achieving a high level of self-esteem, or perhaps more important, avoiding low self-esteem, is important for health and well-being throughout the life span (Harter, 1999). This evidence includes numerous prospective investigations in which higher levels of self-esteem have predicted more positive outcomes at follow-up even after controlling for initial levels of outcomes and other potential confounds. Prospective studies conducted with children, adolescents, and young adults, for example, suggest that low self-esteem increases their susceptibility to a wide range of problematic outcomes and experiences such as depression, eating disorders, teenage pregnancy, victimization, difficulty sustaining and forming close relation-

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ships, involvement in antisocial behavior, substance use, and suicide ideation and attempts (for reviews, see DuBois & Tevendale, 1999; Emler, 2001; see Baumeister, Campbell, Krueger, & Vohs, 2003, for a less favorable appraisal of this literature, although they too acknowledged evidence of effects of self-esteem on many of the same outcomes). Higher levels of self-esteem similarly have been found in other research to prospectively predict growth in socioemotional functioning among younger, preschool-age children (Verschueren, Buyck, & Marooren, 2001) and, at the other end of the developmental continuum, decreased likelihood of mortality among older adults (O'Connor & Vallerand, 1998). Several long-term longitudinal studies also have found that relatively high levels of self-esteem (or, alternatively, the relative absence of indications of low self-esteem) during childhood and adolescence predict more favorable psychological, social, and occupational outcomes during adulthood (for a review, see DuBois & Tevendale, 1999).

Similarly, intervention research points toward the benefits of helping individuals to achieve a high level of self-esteem. In a recent meta-analysis of the effectiveness of esteem-enhancement programs for children and adolescents (Haney & Durlak, 1998), program participants were found to experience gains not only in self-esteem but also in behavior, personality and emotional functioning, and academic performance. It is notable that the programs that produced the largest effects on the latter types of outcomes were those in which participants experienced the greatest increases in self-esteem (Haney & Durlak, 1998). Improvements in self-esteem also appear to contribute to the effectiveness of a range of other types of interventions, such as cognitive–behavioral therapy (Shirk, Burwell, & Harter, 2002), mentoring programs (Rhodes, 2002), and school reform initiatives (Cauce, Comer, & Schwartz, 1987). It is noteworthy that such interventions have the aim of not only strengthening self-esteem but also facilitating positive outcomes in a range of other areas (e.g., academic performance). High levels of self-esteem may be more likely to prove adaptive when support and guidance is available to help individuals achieve feelings of self-worth in ways that are desirable from the standpoint of their overall health and well-being (Harter, 1999). This consideration may help to account for the seemingly less consistent evidence of favorable effects of high self-esteem in the absence of intervention procedures (DuBois & Tevendale, 1999; Emler, 2001). Indeed, as explained below, the importance of linking the pursuit of self-esteem to adaptive ends is central to our overall critique of the Crocker and Park (2004) formulation.

Cumulatively, the foregoing types of evidence indicate to us that the level of self-esteem achieved by individuals is indeed a matter for concern. Accordingly, it seems counterproductive to view whether self-esteem is high or low as less important than other considerations such as the pursuit of self-esteem. Yet, at the same time, it is equally important to acknowledge several qualifications to findings that address the benefits of having a relatively high level of self-esteem. These include the mixed success of prospective (nonintervention) studies in demonstrating beneficial contributions of self-esteem to the prediction of adjustment outcomes, the relatively small magnitude of effects suggested by the findings of many of these investigations, and a small but significant number of studies in which high levels of self-esteem have been found unexpectedly to exhibit associations with undesirable outcomes such as poorer academic performance and greater involvement in risk-taking behavior (Baumeister et al., 2003; DuBois & Tevendale, 1999; Emler, 2001).

One approach that seems promising for reconciling conflicting evidence regarding the benefits of achieving a high level of self-esteem is to view this as a necessary but not sufficient condition for feelings of self-worth to be implicated in positive health and well-being. It is useful to consider in this regard that high self-esteem has been included consistently among criteria used to define positive mental health. Yet an equally prominent theme in these conceptualizations is the interdependence of self-esteem with a range of other facets of positive mental health, such as a sense of mastery, autonomy, accurate perceptions of reality, a sense of optimism, interpersonal relatedness, and responsible behavior toward others (DuBois, Felner, Lockerd, Parra, & Lopez, 2003). Only when self-esteem is pursued and attained in ways that promote these broad underpinnings of positive mental health does it seem reasonable to expect feelings of self-worth to be implicated consistently in overall health and well-being. The failure of prior studies to address this concern may be a prime factor contributing to the pattern of results described previously in which the benefits of high self-esteem have not always been clear. Conversely, to the extent that self-esteem is low, it seems quite plausible that this often may come with significant costs regardless of the presence of other proposed indicators of positive mental health. Thus, it could well prove equally limiting to adopt a focus on how individuals pursue self-esteem without incorporating consideration of the relative success of those efforts. For this reason, we are skeptical of the recommendation of Crocker and Park (2004) that attention simply be shifted from a concern with level of self-esteem to factors involved in its pursuit. A more integrative conceptualization that still recognizes a role for level of self-esteem while attending to the processes through which differing levels are acquired and maintained seems more promising to us.

Healthy Pursuit of Self-Esteem

As noted, a central conclusion of Crocker and Park (2004) is that the pursuit of self-esteem as a superordinate or primary goal is necessarily counterproductive for overall health and well-being. Theoretically, however, the pursuit of self-esteem may promote overall health and well-being when two conditions are met (DuBois & Tevendale, 1999; Harter, 1998, 1999; Kaplan, 1986). First, individuals generally must be engaged in efforts to acquire and sustain self-esteem through cultivation of competencies and positive relationships with others that represent an appropriate fit with norms and adaptive demands that they encounter both in the immediate settings that make up their daily lives (e.g., home, school, work) and in the larger society or culture. These efforts may entail the development of personal skills that are important for successful adaptation (e.g., academic) as well as engaging in adaptive interpersonal behaviors such as the receipt and exchange of social support. Second, when individuals find it necessary to use self-protective or self-enhancing strategies, these too must be adaptive in the sense of not conflicting significantly with the norms and demands of the person’s surrounding environments. As defined by Kaplan (1986), “Self-protective/self-enhancing responses are oriented toward the goal of (1) forestalling the experience of self-devaluing judgments and consequent distressful self-feelings (self-protective patterns) and (2) increasing the occasions.
for positive self-evaluations and self-accepting feelings (self-enhancing patterns)” (p. 174). Self-protective and self-enhancing strategies can involve self Referent cognition, personal need-value systems, and behavior (Kaplan, 1986). Strategies within each of these areas thus have the potential to prove maladaptive. To illustrate, individuals may attempt to boost their self-esteem through denial of personal shortcomings in a manner that inhibits goal-setting and self-improvement efforts (cognition), devaluation of the importance of pursuits that are critical to their immediate or long-term well-being (need-value system), or superiority strivings in dealings with others that have significant interpersonal costs (behavior).

Several studies provide indirect support for the hypothesis that the pursuit of self-esteem in ways that represent a good fit with the individual’s surrounding environment is conducive to overall health and well-being. With relevance to the first of the preceding conditions (emphasis on securing a high level of self-esteem through cultivation of competencies and adaptive interpersonal behavior), it appears that positive feelings of self-worth when achieved in combination with a strong sense of personal efficacy are especially likely to contribute to positive adaptive outcomes during the course of development (Rutter, 1987; Werner & Smith, 1992). Relatedly, among children and adolescents, positive feelings about abilities to be successful in school predict gains in academic achievement over time (Valentine, DuBois, & Cooper, in press) and an overall sense of self-worth that is derived in a balanced manner from a sense of being competent in multiple domains (e.g., peers, family, school) is associated with significantly reduced likelihood of impairments in emotional and behavioral functioning (DuBois & Tevendale, 1999; Harter, 1999). With respect to the second condition (avoiding maladaptive self-protective and self-enhancing strategies), it is noteworthy that individuals who exhibit inflated self-concepts of the type likely to result from motivated denial of shortcomings fare significantly poorer on a range of outcomes pertaining to psychological adjustment, interpersonal behavior, and learning (DuBois & Tevendale, 1999; Harter, 1998). Similarly, those who report narcissistic tendencies and who therefore may strive for a sense of superiority in their dealings with others as a way of enhancing self-esteem have been found to display higher levels of aggressive and violent behavior (Baumeister et al., 2003). By implication, individuals who pursue self-esteem without resorting to maladaptive self-protective or self-enhancing strategies may be relatively immune to such health-compromising consequences (as may those with whom they interact).

Clearly, for present purposes, the preceding types of findings are limited in numerous respects. The extent to which study participants adopted self-esteem as a superordinate goal, for example, cannot be determined based on the data available. Studies, furthermore, have not assessed directly for actual efforts to obtain self-esteem in accordance with contextual norms and demands or tendencies to refrain from self-protective and self-enhancing strategies that are likely to prove counterproductive. The available evidence, however, is encouraging enough to suggest an intriguing question: What might happen if individuals were actively encouraged to pursue self-esteem as a superordinate goal and to do so in a manner consistent with each of the two conditions that we have suggested to be important? If the Crocker and Park (2004) formulation is correct, then we would expect to see evidence of significant costs for health and well-being, with the exception of possibly some short-lived emotional benefits. Alternatively, if the conceptualization presented here is viable, then long-term, significant benefits should be evident across a variety of different areas of functioning.

Positive Action (PA), a comprehensive school-based character and health promotion program (Allred, 1995), comes remarkably close to possessing the characteristics of the type of intervention that might be envisioned as a test of whether the pursuit of self-esteem can be beneficial under the conditions that we have outlined. The basic underlying philosophy of PA, rooted in self-esteem motivation theory, is that “we feel good about ourselves when we do positive actions” (Components of the Positive Action Program, 2003, Section 1, ¶ 1). This concept is embodied in the Thoughts—Actions—Feelings Circle, according to which, “Our thoughts lead to actions, and those actions lead to feelings about ourselves, which lead to more thoughts” (Components of the Positive Action Program, Section 1, ¶ 2). The circle can be positive or negative. Students are taught to understand this concept, to identify positive behaviors and realize that they feel good about themselves when they do them, and to identify negative behaviors and realize that they feel bad about themselves when they do them. Greater involvement in positive behaviors and less involvement in negative behaviors is expected to prove self-reinforcing for students because these tendencies satisfy their intrinsic motivation to feel good about themselves. The program includes a kindergarten–12th-grade classroom curriculum that is taught for 15–20 min almost every day in every grade, together with school-wide climate change, family involvement, and community components. A foundational introductory unit addresses the importance of forming and maintaining a positive self-concept. The remainder of the program focuses on actions for achieving positive feelings about the self in the areas of physical health, academic achievement, thinking and learning, self-management, social skills, self-honesty, and self-improvement. The use of these positive behaviors is encouraged and reinforced in multiple ways by teachers and parents and supportive environments.

PA clearly is a program that explicitly encourages the pursuit of self-esteem as a superordinate goal. The program, furthermore, is designed to encourage youth to seek to acquire and maintain positive feelings about themselves through the development of skills that promote competence and prosocial behavior in ways that represent a good fit with the norms and adaptive demands of both their immediate environments and society more generally. Several units (e.g., self-honesty), additionally, are oriented toward helping youth to identify and avoid reliance on maladaptive self-protective and self-enhancing strategies to boost their self-esteem. The content of PA thus satisfies both of the conditions that we have identified as necessary for the healthy pursuit of self-esteem. More generally, the PA program is consistent with a wide array of theories of education and behavior change (Petraitis, Flay, & Miller, 1995) and with current approaches to character and social development, health promotion, and prevention of unhealthy behaviors. The model is consistent as well with educational theories of brain development, higher level thinking skills, and multiple intelligences, and with knowledge from psychological and sociological theories of school ecology, social learning, attitudes and behavior, and social skill development (all integrated into Flay’s theory of triadic influence; see Flay & Petraitis, 1994).
Initial evaluations of the PA program have yielded highly encouraging results. A matched control design was used to evaluate program effects in two separate large school districts in Nevada (36 schools, mean enrollment = 715) and Hawaii (24 schools, mean enrollment = 559; Flay, Allred, & Ordway, 2001). School-level archival data (percentage receiving free or reduced lunch, mobility rate, ethnic distribution) were used to find two matching control schools for each school implementing PA. Outcomes were assessed using achievement data (standardized test scores) and school disciplinary reports (referrals to the principal’s office for violence-related behaviors in Nevada and for felonies, misdemeanors, and violations of school rules in Hawaii). It was found that implementation of the PA program was associated with both improvements in achievement (16% in Nevada and 52% in Hawaii) and reductions of disciplinary referrals (85% in Nevada and 78% in Hawaii) as assessed by differences at posttest between PA and control schools using the matching variables as covariates.

A subsequent study (Flay & Allred, 2003) further evaluated effects of the PA program in a large Southeastern U.S. school district (36 elementary schools, mean enrollment = 747; 33 middle schools, enrollment range = 608–1,607; and 18 high schools, enrollment range = 1,121–3,178). Elementary schools that had used PA for 4 or more years were matched with control schools on the same criteria as in the Flay et al. (2001) evaluation. Findings replicated evidence of positive effects of the PA program on achievement (standardized test scores) and behavior (disciplinary referrals) at the elementary school level, as assessed by differences at posttest between PA and control schools using pretest achievement scores and the matching variables as covariates. To examine long-term effectiveness, school-level achievement, attendance, and discipline data were compared for middle and high schools with low, medium, and high proportions of students from elementary schools using PA. At the middle school level, findings indicated a clear dose–response relationship such that schools with more PA graduates had lower levels both of problem behavior (drug, alcohol, and tobacco use; violence; disrespect; property crime) and absenteeism and had higher levels of achievement (standardized test scores for reading and math). At the high school level, similar benefits were evident in each of these areas as well as for post-high school accomplishment (continuing education and employment assessed using school-level records).

Notably, in several other evaluations, PA also has been indicated to have positive effects on self-concept and self-esteem (for a review, see Flay et al., 2001). These results suggest that PA not only provides a framework for the healthy pursuit of self-esteem but also helps youth to be successful in this pursuit. They also indicate that the long-term gains evident on multiple facets of adjustment for youth participating in PA may be attributable both to the use of adaptive strategies in seeking self-esteem and to the resulting high levels of self-esteem. An integrative theoretical framework that is consistent with this interpretation is described briefly in the following section.

Integrative Theoretical Framework

The integrative framework, as shown in Figure 1, includes four major components (for a more detailed description, see DuBois, Burk-Braxton, & Tevendale, 2002): (a) contextual opportunities, (b) esteem formation and maintenance processes, (c) self-esteem, and (d) health and well-being. The bidirectional relations between various components of the model are consistent with contemporary, transactionally based views of life span development, in which emphasis is on the potential for reciprocal and hence mutually reinforcing and self-sustaining patterns of influence (Sameroff, 1995). Furthermore, in accordance with a holistic, interactionistic view of life span development, the focus is person oriented.
rather than variable oriented (Bergman & Magnusson, 1997). A major implication of adopting this perspective is that the emphasis shifts from self-esteem and whether it is high or low in relative isolation from other factors (i.e., a variable-oriented approach) to a primary focus instead on the overall patterning of operating factors in the model that is characteristic of any given individual. These other operating factors include esteem formation and maintenance processes and whether they are adaptive or maladaptive. The model assumes, in particular, that it is the patterning of both the level of self-esteem (and its various facets) in combination with the strategies relied on to acquire and sustain self-esteem that will be most influential in shaping outcomes.

Conceptualized within this framework, the curriculum and other components (e.g., school climate change) of the PA program would represent contextual opportunities that encourage and reinforce efforts of youth to acquire and sustain feelings of self-worth in ways that are adaptive in relation to environmental norms and demands. These efforts would be represented in the model as esteem formation and maintenance processes, with further program activities relevant to this portion of the model actively discouraging reliance on maladaptive strategies for boosting feelings of self-worth. Esteem formation and maintenance processes promoted by the program would be expected to be successful in allowing youth to achieve a high level of self-esteem and therefore to be continued through a positive feedback cycle. The combination of high self-esteem and adaptive processes for acquiring and sustaining self-esteem then would be assumed to promote overall health and well-being, with positive functioning in different areas (e.g., behavioral) having a reciprocal influence on self-esteem and other model components in desirable directions. The multiple opportunities for positive feedback cycles in the model, furthermore, provide a mechanism through which the processes described would be expected to become self-sustaining and thus continue to yield benefits after participation in the program has ended. This feature of the model provides a framework for predicting the types of long-term effects that are evident for the PA program (Flay & Allred, 2003).

Conclusion

The theory and research that we have reviewed indicate that both the level and pursuit of self-esteem can be influential in shaping overall health and well-being. Accordingly, the investigation of how these relatively more static and dynamic facets of the self-esteem construct interrelate with one another to influence outcomes of interest should be a priority in future research. In doing so, attention should be given to clarifying the capacity for strategies that are relied on in the pursuit of self-esteem to be not only costly but also beneficial in terms of their implications for health and well-being. Both the favorable and unfavorable consequences of adopting self-esteem as a superordinate goal should be similarly evaluated. As suggested by Crocker and Park (2004), for example, an emphasis on the pursuit of self-esteem may prove counterproductive in some collectivist cultures. By the same token, however, this orientation may have heightened value in highly individualistic societies such as the United States. As these types of considerations illustrate, there is a long journey ahead for those seeking to unravel all of the complexities of self-esteem and its implications for health and well-being. In addressing the need for greater attention to the pursuit of self-esteem, Crocker and Park have laid the groundwork for several new and promising avenues of exploration. It would run counter to the existing base of knowledge, however, to assume that these avenues are necessarily more important than those already well-traveled or to presume to know where they ultimately will lead in terms of understanding the relative costs and benefits of the processes involved.

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