QUALITATIVE LITERATURE REVIEW ON TRANSITION STATES OF SELF ESTEEM DEVELOPMENT: FROM CHILDHOOD TO OLD AGE

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Abstract: Self-esteem, the fulcrum of every human being existing in the world, and it determines many aspects till he reaches the grave. High self esteem is an asset at any point of time, as well the lower self esteem is like a nuclear bomb ticking in, which might trigger anything but negative. A trait which is gaining prominence while measuring a personality is still a very curious area of research. Every individual if asked to do a paper pencil test with a tool of self esteem, they become attractive as a social psychological construct and grow as influential predictor of achievements and growth of an Individual, from cradle to grave. Every step of growth from academic achievement, happiness, satisfaction towards school, home, parents and when grown up, the society, marriage and relationships, and if negative the criminal behaviour. The research on self esteem is ever growing and is still getting into deeper insights.

Keywords: Self Esteem; Old Age; Adolescence; Childhood; Motivation; Society

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Introduction: **Self-esteem** reflects a person's overall subjective emotional evaluation of his or her own worth, as well as an attitude toward the self. Self-esteem encompasses beliefs about oneself, (for example, "I am competent", "I am worthy"), as well as emotional states, such as triumph, despair, pride, and shame. **Smith and Mackie (2007)** defined it by saying, self-concept is what we think about the self and self-esteem, is the positive or negative evaluations of the self, as in how we feel about it.

![Diagram of Self Esteem](image1)

**Figure: 1**: Self Esteem (as per Morris Rosenberg still stands today): Designed :Prof Dr.C.Karthikeyan

**Figure: 2**: Self Concept as Smith and Mackie (2007): Designed Prof Dr.C.Karthikeyan

![Diagram of Self Concept](image2)
In the mid-1960s, sociologist Morris Rosenberg defined self-esteem as a feeling of self-worth and developed the Rosenberg self-esteem scale (RSES), which became the most-widely used scale to measure self-esteem in the social sciences. When these transition points are age-dependent and normative, they can produce mean-level change in a population. For example, the transition to adolescence entails a drop in self-esteem (e.g., Harter, 1998; Robins et al., 2002), presumably because of conflicting role demands, rapid maturational changes, and increasingly complex peer and romantic relationships that characterize this transition.

Rosenberg self-esteem scale (RSES), which became the most-widely used scale to measure self-esteem in the social sciences in the early 20th century, the behaviorist movement minimized introspective study of mental processes, emotions and feelings, which was replaced by objective study through experiments on behaviors observed in relation with environment. The concept of core self-evaluations as first examined by Judge, Locke, and Durham (1997), has since proven to have the ability to predict several work outcomes, specifically, job satisfaction and job performance. Self-esteem may, in fact, be one of the most essential core self-evaluation dimensions because it is the overall value one feels about oneself as a person.

American psychologist Abraham Maslow included self-esteem in his hierarchy of human needs. He described two different forms of "esteem": the need for respect from others in the form of recognition, success, and admiration, and the need for self-respect in the form of self-love, self-confidence, skill, or aptitude. Carl Rogers (1902-1987), an advocate of humanistic psychology, theorized the origin of many people's problems to be that they despise themselves and consider themselves worthless and incapable of being loved. There are a number of theoretical reasons to expect that self esteem might show systematic developmental changes from childhood to young adulthood to old age. Although self-esteem does not show large normative changes over time, change can occur in response to important transitions or major life events (e.g., Trzesniewski, Robins, Roberts, & Caspi, 2004). Such developmental turning points (Pickles & Rutter, 1991) can modify or redirect life trajectories by altering behavior, affect, cognition, or context. When these transition points are age-dependent and normative, they can produce mean-level change in a population. For example, the transition to adolescence entails a drop in self-esteem (e.g., Harter, 1998; Robins et al., 2002), presumably because of conflicting role demands, rapid
maturational changes, and increasingly complex peer and romantic relationships that characterize this transition. The transition is from **midlife to old age**, which involves high levels of instability, resulting from changes in roles (empty nest, retirement, obsolete work skills), relationships (spousal death, decreased social support), and physical functioning (declining health, memory loss, reduced mobility), as well as a drop in socioeconomic status (Baltes & Mayer, 1999). These changes are likely to contribute to a normative decline in self-esteem.

**In contrast, midlife is** a time of highly stable work, family, and romantic relationships, characterized by peaks in achievement, mastery, and control over self and environment (Erikson, 1968; Levinson, 1978). Over the course of adulthood, individuals increasingly occupy positions of power and status, which might develop positive feelings of self-esteem (e.g., Dannefer, 1984; Gove, Ortega, & Style, 1989; Helson, Mitchell, & Moane, 1984). Crocker and Wolfe (2001) argued that healthy adult development involves learning to look inward for sources of positive self-esteem, rather than requiring constant external reinforcement. Consistent with this reasoning, personality changes that occur during adulthood tend to reflect movement toward higher levels of maturity and adjustment, as indicated by increases in traits such as emotional stability, conscientiousness, and agreeableness (B. W. Roberts, Walton, & Viechtbauer, 2006; Terracciano, McCrae, Brant, & Costa, 2005). Thus, there are strong theoretical reasons to expect self-esteem to rise over the course of adulthood and to decline in old age. Although we predict that self-esteem will drop in old age, several theories of aging suggest an alternative Hypothesis: Older individuals may maintain their self-esteem and well-being because they are buffered against the adverse effects of various life transitions by a host of coping processes (Baltes & Mayer, 1999; Brandststa¨dter & Greve, 1994; Carstensen, Isaacowitz, & Charles, 1999).

Michelangelo a world famous sculptor, began working on what many people believe to be his most important work, the Florentine Pieta`. After working intensely for almost a decade, he entered his studio one day and took a sledge hammer to the sculpture. He broke away the hands and legs and nearly shattered the work before his assistants dragged him away. Why did Michelangelo attempt to destroy one of his greatest creations, a statue that has been described as among the finest works of the Renaissance? Disillusioned and isolated in the last decades of his life, Michelangelo had a heightened sense of perfectionism that was exacerbated by his failure to
live up to the expectations of his father, who viewed being a sculptor as akin to being a manual laborer. Michelangelo, it seems, had self-esteem issues.

**Objectives of the study; Main Objective:** To understand and interpret the importance and nature of self-esteem and changes at different stages of life.

**Sub-Objectives:**
(i) To understand the levels of self-esteem and its dynamics in childhood
(ii) To understand the levels of self-esteem changes from childhood to Adolescence
(iii) To understand the nature of impact on self-esteem from adolescence to adulthood
   (iv) To understand the dynamism of self-esteem from adulthood to old age

**Scope of the study:** This study would highlight to safeguard self-esteem which is the fulcrum of human dynamism from cradle to grave

**Problem taken for the study:** To analyze how the changes in stages of life impacts on the self-esteem of a person— from childhood- adolescence-adulthood to old age.

**Review of Literature; Self-Esteem and Age—childhood**

**Childhood:** Young children have relatively high self-esteem, which gradually declines over the course of childhood. Researchers have speculated that children have high self-esteem because their self-views are unrealistically positive. As children develop cognitively, they begin to base their self-evaluations on external feedback and social comparisons, and thus form a more balanced and accurate appraisal of their academic competence, social skills, attractiveness, and other personal characteristics. For example, as children move from preschool to elementary school they receive more negative feedback from teachers, parents, and peers, and their self-evaluations correspondingly become more negative. Adolescence Self-esteem continues to decline during adolescence. Researchers have attributed the adolescent decline to body image and other problems associated with puberty, the emerging capacity to think abstractly about one’s self and one’s future and therefore to acknowledge missed opportunities and failed
expectations, and the transition from grade school to the more academically challenging and socially complex context of junior high school.

Researchers have studied self-esteem in children as young as 6 years of age. Most of these studies have focused on domain specific self-evaluations (e.g., self-perceived math ability) rather than abstract beliefs about global self-worth. In general, young children rate themselves well above the scale midpoint and substantially higher than they rate other children, suggesting that their views of themselves are positively inflated. However, as children move through elementary school, their self-evaluations tend to decline (Eccles, Wigfield, Harold, & Blumenfeld, 1993; Ruble, Boggiano, Feldman, & Loebl, 1980; Stipek & Tannatt, 1984). The few studies that have assessed global self-esteem in this age group also point to decreases over the course of childhood (Marsh, 1989; Marsh, Barnes, Cairns, & Tidman, 1984; Trowbridge, 1972).

![Figure: 3 : Self Esteem at Childhood Stage Declining : Prof Dr.C.Karthikeyan](image)

**Adolescence**

Most research on self-esteem development has focused on the transition from childhood to adolescence (Demo, 1992). Several studies have found declines in self-esteem during this transition (Eccles et al., 1989; Engel, 1959; Marsh, Parker, & Barnes, 1985; Piers & Harris, 1964; Rosenberg, 1986; Savin-Williams & Demo, 1984; Simmons, Rosenberg, & Rosenberg,
1973). Although this decline is frequently cited in summaries of the research literature (e.g., Brown, 1998; Harter, 1993, 1998), a few studies have failed to replicate this finding (e.g., Blyth, Simmons, & Bush, 1978; Hirsch & Rapkin, 1987; Nottelmann, 1987). Research on self-esteem development following the adolescent transition provides an even more confusing picture. Some studies report a rise in self-esteem during adolescence (Marsh, 1989; McCarthy & Hoge, 1982; Mullis et al., 1992; O’Malley & Bachman, 1983; Prawat, Jones, & Hampton, 1979; Roeser & Eccles, 1998), others report no change (Chubb et al., 1997), and still others report declines (Keltikangas-Jarvinen, 1990; Zimmerman et al., 1997). Some of these inconsistencies may be due to gender differences that are believed to emerge at this age, specifically the tendency for boys to have higher self-esteem than girls (Block & Robins, 1993; Kling, Hyde, Showers, & Buswell, 1999; Major, Barr, Zubek, & Babey, 1999).

![Image of a triangle with sections labeled: High (for Boys), Self Esteem, Decline for Girls, Declining for Girls.](image_url)

**Figure: 4: Self Esteem: Differentiates for Boys and Girls Differently: Prof Dr.C.Karthikeyan**
Adulthood

Self-esteem increases gradually throughout adulthood, peaking sometime around the late 60s. Over the course of adulthood, individuals increasingly occupy positions of power and status, which might promote feelings of self-worth. Many lifespan theorists have suggested that midlife is characterized by peaks in achievement, mastery, and control over self and environment (e.g., Erikson, 1985). Consistent with these theoretical speculations, the personality changes that occur during adulthood tend to reflect increasing levels of maturity and adjustment, as indicated by higher levels of conscientiousness and emotional stability (Trzesniewski, Robins, Roberts, & Caspi, 2004). Compared with the adolescent literature, there are few studies of self-esteem development during adulthood. Generally, these studies show small, gradual increases in global self-esteem (Gove et al., 1989; Helson & Wink, 1992; Jaquish & Ripple, 1981; Lall, Jain, & Johnson, 1996; R. E. Roberts & Bengtson, 1996). However, these studies typically examined age differences across very large intervals of time (e.g., comparing self-esteem levels in samples of young adults, middle-aged adults, and older adults) and thus provide only a very rough map of the shifts in self-esteem that might occur over each decade of adulthood.

Figure 5: Self Esteem Stages in Adulthood: Prof Dr. C. Karthikeyan
Old Age

Only a handful of studies have examined age differences in global self-esteem in old age. Jaquish and Ripple (1981) found that adults report somewhat lower self-esteem in late adulthood (age 61–81 years) than in middle adulthood (age 40–60 years). Tiggemann and Lynch (2001) found that women age 70–85 years had slightly lower self-esteem than women in their 60s. Ranzijn et al. (1998) found that those age 85–103 years had lower self-esteem than those in their 70s. Consistent with these three studies, Ward (1977) found a weak negative correlation ($r = -.14$) between age and self-esteem in a sample of individuals age 60–92 years. In contrast, Gove et al. (1989) found the highest levels of self-esteem in the oldest cohort (age 75 years and older). Moreover, several studies have failed to find significant age differences, including Imakas and Nicolay’s (1974) study of individuals age 66–88 years, Erdwins et al. (1981) study of four cohorts ranging in age from 18 to 75 years, and Ryff’s (1989) study comparing middle aged adults (mean age = 50 years) and older adults (mean age = 75 years). Reflecting the lack of consistency in previous findings, researchers reviewing the literature on self-esteem and aging have failed to reach consensus on whether self-esteem increases, decreases, or remains stable in old age (Bengtson, Reedy, & Gordon, 1985; Brandtstaedter & Greve, 1994; Demo, 1992).

Thus, further research is needed before any strong conclusions can be made about self-esteem change in adulthood and old age. The literature on subjective well-being and aging might provide some insight into the expected trajectory of self-esteem for older adults. Well-being and self-esteem are empirically related, but conceptually distinct, constructs (DeNeve & Cooper, 1998; Robins, Hendin, & Trzesniewski, 2001).

A number of life changes that tend to occur in old age might have a negative impact on well being, including health problems, declining socioeconomic status, spousal loss and bereavement, loss of social support, and a decline in achievement experiences following retirement. However, some researchers have theorized that aging entails improved coping and emotion regulation that may protect against declining feelings of well-being (Baltes & Baltes, 1990; Brandtstaedter & Greve, 1994; Carstensen, Isaacowitz, & Charles, 1999). Consistent with these divergent theoretical views, there appear to be few replicable age differences in well-being for samples over 60 years of age, with some studies showing improvements and others showing declines.
Self-esteem declines in old age. The few studies of self-esteem in old age suggest that self-esteem begins to drop around age 70 (about the age when Michelangelo began working on the Florentine Pieta`). This decline may be due to the dramatic confluence of changes that occur in old age, including changes in Mean level of self-esteem for males and females across the lifespan. Also plotted are year-by-year means, separately for males (open triangles) and females (open circles). From “Global Self-Esteem Across the Lifespan,” by R.W. Robins, K.H. Trzesniewski, J.L. Tracy, S.D. Gosling, and J. Potter, 2002, Psychology and Aging, 17, p. 428. Copyright 2002 by the American Psychological Association. Reprinted with permission. Volume 14—Number 3 159 Richard W. Robins and Kali H. Trzesniewski.
retirement), relationships (e.g., the loss of a spouse), and physical functioning (e.g., health problems), as well as a drop in socioeconomic status. The old-age decline may also reflect a shift toward a more modest, humble, and balanced view of the self in old age (Erikson, 1985). That is, older individuals may maintain a deep-seated sense of their own worth, but their self-esteem scores drop because they are increasingly willing to acknowledge their faults and limitations and have a diminished need to present themselves in a positive light to others. Consistent with this interpretation, narcissism tends to decline with age (Foster, Campbell, & Twenge, 2003). Even gender wise, males and females follow essentially the same trajectory. For both genders, self-esteem is relatively high in childhood, drops during adolescence, rises gradually throughout adulthood, and then declines in old age. Nonetheless, there are some interesting gender divergences. Although boys and girls report similar levels of self-esteem during childhood, a gender gap emerges by adolescence, such that adolescent boys have higher self-esteem than adolescent girls (Kling, Hyde, Showers, & Buswell, 1999; Robins et al., 2002). This gender gap persists throughout adulthood, and then narrows and perhaps even disappears in old age (Kling et al., 1999; Robins et al., 2002).

**Literature review on Self-Esteem Development**

Earlier studies have generally shown small, gradual increases in self-esteem across adulthood. Several cross-sectional studies have shown that young adults have lower self-esteem than do middle-aged adults (Galambos, Barker, & Krahn, 2006; Gove et al., 1989; Jaquish & Ripple, 1981; Lall, Jain, & Johnson, 1996). Two longitudinal studies have also shown increases in self-esteem from age 43 years to age 52 years (Helson & Wink, 1992) and from the college years to the 40s (R. E. Roberts & Bengtson, 1996).

Some research studies that have examined age differences in self-esteem during old age have produced somewhat conflicting findings. Several cross-sectional studies showed that middle-aged adults had higher self-esteem than did older adults (Jaquish & Ripple, 1981; Ranzjin, Keeves, Luszcz, & Feather, 1998; Tiggemann & Lynch, 2001; Ward, 1977). In contrast, Gove et al. (1989) found that their oldest cohort (age 75 and older) had the highest level of self-esteem, and several studies have failed to show any significant age differences (Erdwins, Mellinger, & Tyer, 1981; Ryff, 1989; Trimakas & Nicholay, 1974).
Only two longitudinal studies have examined self-esteem in old age; one reported no change over a 2-year period for individuals aged 58 years to 64 years (Reitzes, Mutran, & Fernandez, 1996), and the other reported a decline from age 65 years to age 75 years (Coleman, Ivani-Chalian, & Robinson, 1993). Reflecting this lack of consistency, reviews of the literature do not agree about whether self-esteem increases, decreases, or remains stable in old age (Bengtson, Reedy, & Gordon, 1985; Brandtsta¨dter & Greve, 1994; Demo, 1992).

In three cross-sectional studies, researchers examined age differences across nearly the entire life span. McMullin and Cairney (2004) used data from a national probability sample of Canadian residents ranging in age from 12 years to 90 years. The analyses showed that a quadratic model captured age differences in self-esteem better than did a linear model. The results suggested that self-esteem declined with increasing age and that the decline was steepest in old age. Using data collected via the Internet on a large sample of individuals aged 9 years to 90 years, Robins et al. (2002) found that self-esteem levels were high in the youngest age group, declined over the course of childhood and adolescence, rose gradually throughout adulthood, and then declined sharply beginning in the mid-60s.

Pullmann, Allik, and Realo (2009) examined data from multiple samples spanning adolescence to old age. The results varied across samples, with two showing increases in self-esteem, one showing decreases, and one showing no change. Together, these studies provide a rough map of the changes in self-esteem that might occur during early, middle, and later adulthood. However, most of these studies were based on small, homogeneous samples, and their findings may not generalize to more diverse populations. Moreover, most previous studies used cross-sectional designs or examined longitudinal changes across relatively short time spans. Analyses of age differences with cross-sectional data are useful because they provide a reasonable starting point for speculating about the developmental trajectory and may raise interesting hypotheses that can be tested in subsequent studies. However, cross-sectional studies do not allow disentangling aging and cohort effects (Baltes, Cornelius, & Nesselroade, 1979).
Literature review on Moderators of Self-Esteem Development

In addition to charting the basic trajectory of self-esteem, with the present research we seek to advance knowledge about self esteem development by examining a set of moderators that might explain individual differences in self-esteem trajectories. Little is known about the specific conditions that promote self-esteem in adulthood and old age. It is plausible that factors in addition to chronological age, such as key social roles and events, define and shape one’s position in the life course and thereby determine the way the personality and the self develop (Caspi & Roberts, 2001; B. W. Roberts et al., 2008). When these factors are not age dependent (e.g., relationship satisfaction) or are non normative (e.g., stressful life events), they will differentially impact people’s life trajectories and produce individual differences in intra individual change. We examine the moderating effects of demographic variables, relationship variables, health experiences, and life events.

Literature review on Demographic Variables

Earlier research suggested that gender moderates the trajectory of self-esteem across the life span. Specifically, the available data suggest that the gender difference is largest in adolescence and young adulthood but that the average trajectories of men and women converge in old age (Kling, Hyde, Showers, & Buswell, 1999; Robins et al., 2002).

Previous research also suggests that ethnicity moderates the self-esteem trajectory. Specifically, the available data suggest that Blacks have higher self-esteem than do Whites at younger ages, but that the trajectories cross at some point in adulthood, with Blacks having a significantly steeper decline in self-esteem in old age than do Whites (Gray-Little & Hafdahl, 2000; Robins et al., 2002; Twenge & Crocker, 2002).

Another possible influence on self-esteem development is socioeconomic status (SES), which is typically measured by indicators such as education, income, and occupational prestige. SES might influence self-esteem because social status and wealth influence the individual’s perception of his or her relational value (Leary & Baumeister, 2000).
A meta-analysis showed that SES accounts for small but significant differences in self-esteem, with $d = .21$ in young adulthood, $d = .25$ at midlife, and $d = .17$ in old age (Twenge & Campbell, 2002). A similar pattern emerged in the study by Robins et al. (2002), who found that the SES effect on self-esteem was small in young adulthood ($d = .14$), largest in the 30s ($d = .31$) and small again in the 50s ($d = .14$) and 60s ($d = .06$).

**Literature on Relationship Variables**

Previous research strongly suggests that interpersonal relationships have an important influence on self-esteem development (Felson, 1989; Harter, 1999; Leary & Baumeister, 2000). For example, according to Murray, Holmes, and Griffin’s (2000) dependency model, feelings about the self are regulated by individuals’ perceptions of their partners’ feelings about them. Thus, a satisfying and supportive marriage or close relationship should promote self-esteem. Several longitudinal studies have supported this idea. For example, Andrews and Brown (1995) found that women who reported a positive change in the closeness of their relationship increased in self-esteem over a 7-year period. Elliott (1996) found that being married predicted increasing self-esteem during early adulthood. In the present research, we therefore examine the effects of relationship satisfaction and marital status on the self-esteem trajectory. For similar reasons, supportive relationships with friends and relatives might also influence self-esteem development. Receiving support from peers has been linked to increasing self-esteem during early adolescence (Fenzel, 2000; Wade, Thompson, Tashakkori, & Valente, 1989). Kinnunen, Feldt, Kinnunen, and Pulkkinen (2008) reported prospective effects of social support on self-esteem over a 6-year period in adulthood. In contrast, Keefe and Berndt (1996) and Seidman, Allen, Aber, Mitchell, and Feinman (1994) failed to find a relation between social support and self-esteem change during early adolescence. Overall, these studies suggested that supportive social relationships might contribute to higher levels of self-esteem, but the findings are not entirely consistent. Thus, the present research also examines social support from friends and relatives as a moderator of self-esteem development.

**Literature review on Health Experiences**

Previous research suggested that physical health might influence the trajectory of self-esteem. For example, Benyamini, Leventhal, and Leventhal (2004) found that self-rated health was cross
sectionally related to self-esteem among older adults. Reitzes and Mutran (2006) found that functional health had longitudinal effects on self-esteem, controlling for prior self-esteem, in a sample of adults. Despite these suggestive results, there is a paucity of research examining the long-term consequences of health experiences for self-esteem development.

**Literature review at Life Events**

Only in a few studies have the effects of life events on self esteem been examined, and their results are inconsistent. One study found that stressful life events predicted subsequent decreases in self-esteem (Joiner, Katz, & Lew, 1999), but other studies did not find significant effects of stressful life events on self-esteem (Murrell, Meeks, & Walker, 1991; Orth, Robins, & Meier, 2009). Thus, more data are needed to evaluate the hypothesis that experiencing stressful life events is related to declining levels of self-esteem.

**What Have We Learned About the Development of Self-Esteem?**

The overall findings from the above suggest several conclusions about the way self-esteem develops from childhood to old age. A consistent trend of relatively high self-esteem in the youngest age group, followed by a gradual decline over the course of childhood. Some researchers have speculated that children have high self-esteem because it is artificially inflated and that the subsequent decline reflects an increasing reliance on more realistic information about the self (Harter, 1998). For example, as children develop cognitively, they begin to base their evaluations of self-worth on external feedback and social comparisons, which may produce more accurate judgments of where they stand in relation to others (Ruble et al., 1980). It is also possible that as children make the transition from preschool to elementary school they experience more negative feedback from teachers, parents, and peers, and their self-evaluations correspondingly become more negative (Eccles et al., 1993).

**Adolescence: Continued decline**; the decline in self-esteem that begins during childhood continues into adolescence, producing a substantial cumulative drop. This drop held for every demographic subgroup and thus appears to be particularly robust. Researchers have attributed the adolescent decline in self-esteem to maturational changes associated with puberty, cognitive changes associated with the emergence of formal operational thinking, and socio-contextual
changes associated with the transition from grade school to junior high school (Harter, 1998; Simmons, Blyth, Van Cleave, & Bush, 1979; Wigfield, Eccles, Mac Iver, Reuman, & Midgley, 1991).

**Adulthood:** Self-esteem levels generally rise throughout adulthood. Most of the demographic subgroups reached a peak in self-esteem sometime during late adulthood. Thus, other than childhood, the mid-60s seem to represent the apex of self-esteem across the life course. These results replicate previous studies of adulthood (e.g., Gove et al., 1989; Helson & Wink, 1992), but the present data clarifies that much of the increase in self-esteem occurs in late rather than early midlife. Although none of the major theories of self-esteem specifically address self-esteem development during adulthood, general theories of adult development may be invoked to explain the trends we observed. Erikson (1968), Jung (1958), Neugarten (1977), Levinson (1978), and others have theorized that midlife is characterized by a focus on activity, achievement, power, and control. For example, Erikson suggested that the maturity and superior functioning associated with midlife is linked to the “generativity” stage, during which individuals tend to be increasingly productive and creative at work, while at the same time promoting and guiding the next generation. Similarly, Mitchell and Helson (1990) described the latter part of midlife as a period characterized by higher levels of psychological maturity and adjustment and noted that during the post parental period “the energy that went to children is redirected to the partner, work, the community, or self-development”.

Role theories of aging suggest that over the course of adulthood individuals increasingly occupy positions of power and status, which might convey a sense of self-worth (Dannefer, 1984; Helson, Mitchell, & Moane, 1984; Hogan & Roberts, in press; Sarbin, 1964). As Gove et al. (1989) noted, During the productive adult years, when persons are engaged in a full set of instrumental and social roles, their sense of self will reflect the fullness and the levels of life satisfaction and self-esteem will also be high.

**Old age:** Old age involves a number of other changes that might contribute to declines in self-esteem, including spousal loss, decreased social support, declining physical health, cognitive impairments, and a downward shift in SES (Baltes & Mayer, 1999). Erikson thus provides an alternative interpretation of the self-esteem drop: It is not that deep-seated feelings of self-worth are declining in old age, but rather that older persons increasingly accept their faults and
limitations and correspondingly have a diminished need for self-promotion and self-aggrandizement, which might artificially boost reports of self-esteem earlier in life. During old age, defense mechanisms such as denial may no longer be used to inflate feelings of self-worth. Thus, the decline in self-esteem might not be part of a larger pattern of deteriorating emotional health in old age but rather a specific shift in self conceptions that contributes to a more modest and balanced view of the self.

**Literature review Limitations;** If individuals with high self-esteem are less likely to survive to old age, then this would produce an apparent drop in self-esteem in the oldest age group, as there is no established link between self-esteem and mortality, and, if there were a link, it seems more likely that individuals with high self-esteem would live longer than those with low self-esteem (Coleman, Ivani-Chalian, & Robinson, 1993). Despite these concerns, the possibility of a substantial decline in self-esteem in old age has important theoretical and practical implications and merits further research. Although elderly individuals who participate in an Internet study may be no more select a sample than elderly individuals who participate in other forms of psychological research, some caution is warranted given the limited information about Internet-based studies (Buchanan & Smith, 1999). In light of these methodological issues, future research should examine age differences in self-esteem using a representative sample of individuals. This would greatly strengthen the generalizability of our conclusions and alleviate concerns about the Internet sample. Finally, by following a representative sample longitudinally, we could tease apart aging and cohort effects and identify the factors that promote or diminish self-esteem across the life course.

**Limitations of rank-order stability of self-esteem;** over the past several decades, researchers have debated the degree to which self-esteem should be thought of as a trait-like construct that remains relatively stable over time or as a state-like process that continually fluctuates in response to environmental and situational stimuli. If self-esteem is more state-like over the long term than other personality characteristics, then it may not be a useful predictor of important real-world outcomes. The findings of a recent meta-analysis support the claim that self-esteem is a stable, trait-like construct (Trzesniewski, Donnellan, & Robins, 2003). The stability of self-esteem across all age groups, as determined by test-retest correlations, is comparable to that of
the major dimensions of personality, including Extraversion, Agreeableness, Conscientiousness, Neuroticism, and Openness to Experience (Roberts & Del Vecchio, 2000). For example, during old age, important life events such as retirement and becoming a grandparent may transform one’s sense of self, producing higher levels of self-esteem in some individuals and lower levels in others. These life events can lead to lower levels of self-esteem stability if they are experienced at different ages (e.g., some people retire earlier than others) or differentially affect individuals (e.g., only some retirees decline in self-esteem). Moreover, Erikson (1985) noted that as individuals grow older they begin to review their lifelong accomplishments and experiences, leading in some cases to more critical self-appraisals (ego despair) and in other cases to increased self-acceptance (ego integrity). Thus, a developmental shift toward greater self reflection in old age may produce increases in self-esteem for some individuals but decreases for others.

**Lasting implications;** the self-esteem literature had been caught in conflicting findings and there was little agreement about the way self-esteem develops, such as when in the lifespan is self-esteem relatively high or low? Is self-esteem more like a state (relatively transitory) or more like a trait (relatively unchanging)? Understanding the trajectory of self-esteem may provide insights into the underlying processes that shape self-esteem development. For example, the fact that self-esteem drops during both adolescence and old age suggests that there might be something common to both periods (e.g., the confluence of multiple social and physical changes) that negatively affect self-esteem. Knowledge about self-esteem development also has implications for the timing of interventions. For example, the normative trajectory of self-esteem across the lifespan suggests that interventions should be timed for pre- or early adolescence because by late adolescence much of the drop in self-esteem has already occurred. Moreover, developmental periods during which rank order stability is relatively low may be ideal targets of intervention programs because self-esteem may be particularly malleable during these times of relative upheaval in the self-concept.

**Conclusive suggestions for future directions;** Greater attention should be paid to measurement issues, including analyses of whether self-esteem scales show different forms of measurement invariance (e.g., does the meaning of self-esteem items vary across age groups?). Sophisticated
statistical models should be used to better understand dynamic, reciprocal causal influences (e.g., is self-esteem a cause or consequence of important life experiences; e.g., Ferrer & McArdle, 2003). Third, research is needed on the mediating mechanisms underlying self-esteem change. Chronological age has no causal force per se. Analysis on what else changes with age that might produce changes in self-esteem at different developmental periods is to be documented, the social-contextual factors associated with chronological age, such as the key social roles and events that define and shape one’s position in the life course. Lifespan research on the self should draw on this experimental work to develop hypotheses about long-term change in self-esteem and explore how self-evaluative processes documented in the lab play out in real-world contexts.

Although previous studies list the possible reasons why self-esteem might drop during adolescence (and why this might be particularly true for girls), there is no integrative model of how the various proposed processes work together to shape self-esteem development. Given the complexity of self-esteem development, such a model would necessarily incorporate biological, social, and psychological factors; account for reciprocal and dynamic causal influences; and include mechanisms of continuity as well as change (e.g., various forms of person–environment interaction). By examining patterns of findings across developmental contexts (childhood to old age) and across life domains (work, relationships, health), the field will move toward an overarching theory of the life-course trajectory of self-esteem.

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