

Effectiveness of self monitoring technique psychology essay



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The term self-esteem comes from a Greek word meaning reverence for self. The self part of self-esteem pertains to the values, beliefs and attitudes that are held about one's own self. Self-esteem refers to the degree of regard or respect that individuals have for themselves and is a measure of worth that they place in their abilities and judgments.

No one is born with a self-image. Self-esteem is a product of two interacting forces often described as nature and nurture. Children's biological strengths and weaknesses (nature) influence the development of self-esteem, so do their interactions with family and the social environment (nurture).

Individuals must achieve a positive self-esteem before they can achieve self actualization (Maslow, 1970). On day to day basis, one's self value is challenged by changes within the environment. With a positive self, individuals are able to adapt successfully to the demands associated with situational and maturational crisis. The ability to adapt to these environmental changes is impaired when individuals hold themselves in low self-esteem.

The antecedent conditions of positive self-esteem are power, significance, virtue, competence and consistently setting limits (Coopersmith, 1981). Parents and others working with children can emphasize the focus areas like sense of competence, unconditional love, sense of survival, realistic goals, sense of responsibility and reality orientation for the growth and development of positive self- esteem (Warren, 1991).

The development of self-esteem progresses throughout the life span.

Erikson's theory of personality development provides a useful framework for
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illustration. Erikson described eight transitional or maturational crises, the resolution of which can have a profound influence on the self-esteem. If a crisis is successfully resolved at one stage, the individual develops healthy coping strategies that he or she can draw on to help fulfill tasks of subsequent stages. When an individual fails to achieve the tasks associated with a developmental stage, emotional growth is inhibited, and he or she is less able to cope with subsequent maturational or situational crises (Erikson, 1963).

Self-esteem is a social process because it is heavily influenced by the way others see and treat them. Young children develop an internal picture of themselves and place a value on it, through experiences and interactions with family members and other people. Children are strongly influenced by their care givers and they will feel inferior, rejected or worthless if looked after by an overly critical and judgmental caregiver (Edelman, 2007).

Children interact most frequently with the parents and there are no people in the world more important to young children than their parents. Therefore, parents play a vital role in helping children to develop a positive self-esteem. Parents exert this influence over children's self-esteem by paying attention to their communication, expressing love and attention, encouraging them to take challenges, fostering independence and encouraging socialization. Supportive parental behavior, including expressing realistic, age-appropriate expectations, encouraging children to try new things, praising their efforts and refraining from comparing a child to siblings or other children are powerful factors in the development of high self-esteem in early childhood.

Children are also affected by the parent's own attitude toward success and <https://assignbuster.com/effectiveness-of-self-monitoring-technique-psychology-essay/>

failure and how the parents feel about themselves. Personality traits, which one inherits from parents or grandparents will play a part in interpreting events or circumstances, thus creating an impact on self-esteem.

Older children's experiences outside the home, both in school and with peers become increasingly important in determining their level of self-esteem. Schools can influence students' self-esteem through the attitudes they foster toward competition and effort, their recognition of achievement in academics, sports, and the arts, and their acceptance of every child as a unique individual. Overindulgence in empty compliments often has a negative effect on self-esteem. Praise and acknowledgement must be genuine and legitimate to be effective.

By middle childhood, friendship would have assumed a pivotal role in a child's life. Studies show that school-age youngsters spend more time with their friends than they spend doing homework, watching television, or playing alone. In addition, the amount of time they interact with their parents is greatly reduced. Pre-teens and teenagers face many issues related to conformity and peer pressure. This age group is pulled between the desire to be seen as an individual and the desire to belong to a group where they feel secure and accepted. At this stage, social acceptance by a peer group plays a major role in developing and maintaining self-esteem.

Furthermore, difficult and stressful early life experiences including childhood illness, sustained hospitalization, household moves, family changes, death in the family and abuse can limit or overwhelm a child's development and affect the evolution of their beliefs and descriptions of themselves. Child's

early relationship and interactions with caregivers, peers and teachers also have a large effect on how they see themselves and cope with challenging situations (Oswalt, 2010).

High self-esteem or liking oneself and feeling confident to solve one's own problems is generally seen as positive self-esteem and disliking one's self-image and feeling that one has no choice and cannot influence their life is generally seen as negative self-esteem.

Self monitoring technique is possibly the single most important mechanism in changing any thought or behavior. Self monitoring is the process of observing one's behavior and evaluating it in relation to goals. Self monitoring can be conscious and deliberate as a student double checks problems on a maths test to ensure accuracy; alternatively it can be subconscious and automatic as a student subconsciously notices whether or not others are paying attention to him in conversation. Individuals who are successful in life tend to know what they need and want, set goals for themselves, make plans to achieve the goals, act in a goal-directed manner, pay attention to their success in achieving goals and make adjustments when goals are not achieved.

Students with behavioral and academic difficulties typically have limited awareness and understanding of their own behavior and its effects on others. Self-monitoring interventions equip students to recognize and keep track of their own behavior. Using these strategies, students can learn to identify and increase positive pro-social behaviors for success in general education settings (Loftin, 2010).

Self monitoring interventions are among the most flexible, useful and effective strategies for children with low self-esteem. Self monitoring is useful for children from preschool to adulthood and can be taught to individuals at various levels of cognitive functioning. Self monitoring interventions foster independent functioning which allows individuals with disabilities to rely less on others.

The ability of a student to self monitor his or her performance is a natural step towards becoming independent, which can only happen when students take responsibility for their own behavior and essentially become “ agents of change”. Self monitoring is a strategy that can be used with students of all ages and disabilities, which is relatively unobtrusive, appeals to students and is inexpensive and relatively quick to implement. Self monitoring technique is an effective tool for generalizing and maintaining skills over time, because students can perform them any time and in any setting without help.

However, students need to be taught to self monitor their activities and behaviors to improve their self-esteem.

NEED FOR THE STUDY

Healthy self-esteem is essential for success in every walk of life. It is one of the most dynamic variables in youth development. The benefits of promoting healthy self-esteem includes mental well-being, assertiveness, resilience and more. Healthy self-esteem helps one to feel good and see oneself as deserving the respect of others.

As per the recent statistics, the child population in India is 446 million which constitutes about 37% of the total population. In 2007, there were 25 million orphans in India which has grown upto 55 million in the year 2010 (UNICEF).

Self-esteem begins to form in early childhood and tends to be high in young children. It has been observed that children experience a decline in self-esteem during adolescence period which is a critical transition period for them and eventually increases with age as individuals identify the skills at which they excel and single out those skills as important for their self-esteem. Girls experience this decline at age 12, whereas in boys the decline generally begins at an age of 14 years (Twenge & Campbell, 2001).

Girls' self-esteem peaks when they are 9 years old and then takes a nose dive. Seventy-five percent of 8 and 9 year olds said that they liked their looks and the figure dropped to 56 percent among girls aged 12 and 13 years. Ten percent reported onset of eating disorders at 10 years or younger and 33 percent at ages 11 to 15 years (National Association for Self Esteem, 2011).

Low self-esteem always forms in childhood, when an individual is developing an initial view of himself and his attributes. Rubino (2010) reported that 85% of the world's population are affected by low self esteem and among them 21% of youngsters aged between 12 to 14 years are reported to have lower levels of self-esteem.

The development of a strong sense of self-esteem during childhood is important if children are to withstand the family stresses, social pressures, and temptations of deviance encountered at earlier ages of life. Low self-

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esteem in children is linked to poor health and deviant social behaviors such as smoking, substance abuse, poor academic achievement, depression, suicide, and pregnancy (Daane, 2003; Shirk, Burwell, & Harter, 2003). Conversely, high self-esteem is linked to increased school performance, optimal health status and productive behaviour (Leary, Schreindorfer, & Haupt, 1995). Such evidence suggests higher levels of self-esteem may lead to more success in life and greater motivation for health maintenance behaviors.

Youth with high self-esteem consider themselves worthy and view themselves as equal to others. Those low in self-esteem generally experience self-rejection, self-dissatisfaction, self-contempt, and self-disparagement. Low self-esteem can be a major risk-factor in mental and emotional health problems such as suicide, depression, anorexia nervosa, delinquency, self-inflicted injuries, alcohol and drug abuse, and violence.

About one-third to one-half of adolescents struggle with low self-esteem in early adolescence (Harter, 1990; Hirsch & DuBois, 1991). Adolescents with low self-esteem are more likely to perform poorly at school. Researchers are not sure if having low self-esteem causes youth to engage in problematic behaviors or the other way around. Research has found that satisfaction with physical appearance is a large component of self-esteem and adolescent girls have greater dissatisfaction with physical appearance than boys (Harter, 1999).

Individuals with high self-esteem in childhood are likely to be adolescents with high self-esteem. Adolescents' self-esteem can fluctuate from

approximately eighth grade onwards and it stabilizes or even increases during middle and late adolescence and into early adulthood (Williams & Demo, 1985; Harter, 1990).

The major eight problems caused by low self-esteem are self-hate, perfectionism, poor body image, feeling worthless, oversensitivity, fear and anxiety, anger and a feeling to please people (Naik, 2008).

Low self-esteem acts as a predisposing and contributory factor in the development of depression, anxiety, eating disorders, alcohol abuse and drug abuse (Yellowlees, 2001). Low self-esteem results in alcohol abuse, drug abuse, and all other obsessive behavior including criminal behavior. It is considered as a true disease that plagues the world (Candito, 1996).

A National report on the state of self-esteem, conducted with girls between 8 and 17 years reported that an alarming number of girls are turning to destructive action when feeling insecure. Girls with low self-esteem are three times more likely to participate in dangerous behaviours including 75 percent of girls engaged in negative and potentially harmful activities, such as disordered eating, bullying, smoking or drinking, 61 percent of teen girls talking inferior about themselves, 25 percent resorting to self injury, and 25 percent of teen girls practice disordered eating such as starving, refusing to eat or over-eating (Real Girls, Real Pressure National Study, 2009).

Low self-esteem among girls and young women has reached a crisis level (Cooke & Ann, 1999). The new report from Dove confirms the importance of healthy self-esteem and the dangerous consequences that can arise when

hang-ups about looks, academics and popularity erode a girl's sense of self-worth and self-acceptance.

The researchers analyzed the data from a multiethnic sample of 872 boys collected over a period of nine years. The results found out that children with very low self-esteem met the criteria for drug dependence 1.6 times greater than other children (Taylor & Lloyd, 2006).

Self-esteem is essential for a student to achieve academic success and they go hand in hand (Holly, 1987). As the level of self-esteem increases, the achievement scores also increase and vice-versa. Furthermore, and perhaps most important, self-esteem can be modified through direct instruction which can lead to achievement gains (Covington, 1989).

The major factors contributing to school dropouts were related to low self-esteem. The children feel that they lack the intelligence or the ability to succeed in school and it is reinforced consciously or unconsciously by parents or teachers (Kite, 1989). Low academic achievement and low self-esteem are the two common characteristics of school dropouts among girls (Earle, 1987).

A descriptive and correlation study investigated the relationship between child rearing styles and students' self-esteem. The findings revealed that self-esteem of the students with confidence overwhelming child rearing patterns is more than the self-esteem of students with authoritarian and negligence patterns of child rearing. The role of parents in providing mental health, academic achievement, self-esteem etc. is far beyond anything that has been fulfilled (GhorbaniAmir & AhmadiGatab, 2011).

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A study of children's self-esteem after parental separation with a sample of 3098 children aged 11 to 13 years revealed that, self-esteem is lower for children who had experienced parental separation (Poussin & Lebrun, 2002).

A descriptive study was conducted to identify the social, emotional and educational adjustment of institutionalized children. The sample for the study comprised 148 children in the age group of 10-16 years residing in four institutions and the results clearly indicated that institutional children have more social, emotional and educational problems which made them socially more aggressive, emotionally unstable and educationally not interested in studies and these characteristics were responsible for unsatisfactory adjustment of institutionalized children (Hunshal & Goankar, 2005).

A comparative study was conducted on the well-being of orphans and non-orphans at Tanzania. 41 orphans were compared with 41 non-orphans from the same neighbourhoods. The results indicated that orphans had increased internalizing problems compared with non-orphans and were significantly less likely to be in school. 34% of the orphans reported they had contemplated suicide in the past year (Makame, Ani & McGregor, 2007).

An epidemiological study was conducted to determine the psychosocial and developmental status of children in orphanages and the findings revealed that the prevalence rate of depression was 21%, anxiety was 45%, low self-esteem was 23% and developmental disorder was 61% among orphanage children. This study concluded that there was high rate of emotional and

developmental disorders among orphanage children and strongly inter-related with socio demographic characteristics (Fawzy & Fouad, 2010).

A study investigated the differences in self-esteem of orphan children and children living with both parents in their homes. The children in orphanages reported lower degree of self-esteem than children living with their parents (Farooqi & Intezar, 2009).

A descriptive study using survey design was conducted in Children homes, Observation homes and Special homes in Tamil Nadu and it was identified that more than 65% of the children suffered with deficiency in positive thinking and they showed clear signs of habitual complaining, blaming and disconsolate pessimism. 54. 4% of the children have very low self-esteem and they have been found berating themselves and lacking in self love. A huge 83. 2% of the children are highly poor in coping with emotions showing an inability to regulate both positive and negative emotions (Priyadarshini, 2008).

The mental health of destitute children is in jeopardy due to markedly increased internalizing problems. Hence there is an urgent need to expand and improve current intervention programmes for the orphans. Since children constitute a major part of the society and are frequently encountered with problems of low self-esteem, necessary interventions should be taken to promote the self-esteem of children.

Self monitoring technique is a method of behaviour therapy which is defined as the practice of observing and recording one's own academic and social behaviours. The ability to self monitor reflects a shift in the reinforcement of <https://assignbuster.com/effectiveness-of-self-monitoring-technique-psychology-essay/>

appropriate behaviour from others to self-reinforcement. Many psychologists believe that self monitoring is the most important of all the different types of behavioural strategies. Research confirms that recording aspects of behavior and progress toward goals is a process that enhances success in making a variety of life changes.

Self monitoring technique has wide applicability and is appropriate for both adults and children with a wide variety of psychopathology including reducing weight, appetitive disorders, depression, anxiety, aggression, alcohol consumption, smoking, marital dysfunction, disruptive classroom behavior, nail biting and even hallucinations. Self monitoring technique has proved to be an effective tool in improving athletic performance, academic achievement and parenting skills. Various researchers have proved that self monitoring is effective in improving the self-esteem of an individual.

Furthermore, self monitoring technique is used both to assess students academic and behavioural functioning and to improve academic or behavioral performance. Self monitoring technique is effective in increasing more appropriate behaviors, increasing on-task behavior in the classroom, boosting completion of homework assignments, improving both academic performance and social skills and reducing disruptive behaviours (Kraus, 2006).

A systematic review evaluated the efficacy of self-monitoring in improving self-esteem among depressed adolescents aged 13 to 18 years and the data suggested that self monitoring may be an effective treatment for increasing global and academic self-esteem (Taylor & Montgomery, 2007).

A correlational study showed that the self-esteem and self-monitoring of students had a meaningful relation with their educational improvement (Ghorbanshiroodi & Khalatbari, 2010).

Hence based on extensive literature review, the various negative effects of self-esteem and the relationship between self-esteem and problems in youth today are significant. It is also evident that programs to foster self-esteem can serve as a “ social vaccine” in reducing the incidence of many problems. Self monitoring technique is an intervention found to increase the self-esteem of an individual. Hence the researcher was interested in testing the effectiveness of self monitoring technique on self- esteem among children at school and destitute home.

STATEMENT OF THE PROBLEM

EFFECTIVENESS OF SELF MONITORING TECHNIQUE ON SELF-ESTEEM AMONG CHILDREN AT SELECTED SCHOOL AND DESTITUTE HOME, COIMBATORE

OBJECTIVES

To assess the level of self-esteem among children.

To administer self monitoring technique to children with low self-esteem.

To assess the level of self-esteem among children after administration of self monitoring technique.

To compare the level of self-esteem among children in school and at destitute home.

1. 4. OPERATIONAL DEFINITION

1. 4. 1. Effectiveness

Effectiveness refers to the productive change in the level of self-esteem after the administration of self monitoring technique and assessed using Rosenberg self-esteem scale.

1. 4. 2. Self monitoring technique

Self monitoring technique refers to a method of behaviour therapy where systematic daily recording by the children of his or her own strengths, achievements, victories and the things they admire about themselves are done after the completion of activities such as expression of self-image, self advertisement about their victories and self-esteem games. The intervention is administered for 45 minutes per day for four weeks.

1. 4. 3. Self-esteem

Self-esteem refers to the degree of regard or respect that children have for themselves and the measure of worth that they place on their abilities and judgements and is measured using Rosenberg self-esteem scale.

1. 4. 4. Children

School going children with low self-esteem assessed using Rosenberg self-esteem scale in the age group of 10-16 years from V. S. Sengottaiah Memorial High School and the destitute home Families for children, Coimbatore.

1. 5. CONCEPTUAL FRAMEWORK

The conceptual framework used for this study is based on helping art of clinical nursing theory proposed in the year 1964 by Ernestine Wiedenbach. The theorist views nursing as an art based on goal-directed care. According to her, nursing practice consists of identifying a patient's need for help, ministering the needed help and validating that the need for help was met. Identification involves viewing the patient as an individual with unique experiences and understanding the patient's perception of the condition. Ministration refers to provision of needed help by providing nursing care and validation refers to a collection of evidence that shows the patient's need have been met and that, the functional ability has been restored as a direct result of the nurse's actions.

The conceptual framework is used in the present study to evaluate the effectiveness of self monitoring technique on self-esteem among children. The three phases used in the present study are identification, ministration and validation.

1. 5. 1. Identification

Identification begins with collecting selected demographic variables such as age, sex, class of education, medium of school education, academic performance, place of domicile and health experiences of the children. The self-esteem scores of the children were assessed using Rosenberg Self-Esteem Scale and children with low self-esteem were selected for the intervention. The procedure and steps for administration of self monitoring technique among children with low self-esteem was planned. Self monitoring involves systematic daily recording by the children of his/her own strengths, <https://assignbuster.com/effectiveness-of-self-monitoring-technique-psychology-essay/>

achievements, victories and the things they admire about themselves after the completion of activities like expression of self-image, self advertisement about their victories and self-esteem games. The intervention is planned for 45 minutes per day for four weeks.

1. 5. 2. Ministration

Ministration phase involves administration of self monitoring technique for children with low self-esteem of age 10-16 years in V. S. Sengottaiah Memorial High School, and Families for children, Coimbatore. The goal of the present study is to improve the level of self-esteem among children with low self-esteem. The children with low self-esteem were administered self monitoring technique in separate groups and each group consists of 11-13 children. The intervention was administered for 45 minutes per day for four weeks.

1. 5. 3 Validation

In this phase, the researcher assesses the level of self-esteem among children after administration of self monitoring technique using Rosenberg Self-Esteem Scale. There will be a significant difference in the level of self-esteem among children after self monitoring technique.

FIG 1. 1. MODIFIED CONCEPTUAL FRAMEWORK BASED ON WEIDENBACH'S HELPING ART OF CLINICAL NURSING THEORY (1964)

Nursing action

Identification

Ministration

Validation

Collection of demographic data including age, sex, class of education, medium of school education, academic performance, place of domicile, and health experiences.

Assessment on level of self-esteem among children with Rosenberg Self-Esteem Scale.

Planning for administration of self monitoring technique.

Framework

V. S. Sengottaiah Memorial High School and Families for Children,
Coimbatore

Agent

Student Researcher

Realities

Means of Activity

Self monitoring technique is administered to children in groups, 45 minutes per day for 4 weeks

Goal

To improve self-esteem among children with low self-esteem

Recipient

Children of age 10-16 years with low self-esteem

Assessment on level of self-esteem after self monitoring technique.

There will be a significant difference in the level of self-esteem among children after the administration of self monitoring technique.

Source: Wesley, R. L. (1994)

1. 6. PROJECTED OUTCOME

Administration of self monitoring technique will improve the self-esteem among children.