Abstract  Although the importance of operational definitions is obvious while researching new areas of work, taking time to define terms, especially key ones, is also important for mature fields. The study of self-esteem, for instance, is one of the oldest themes in psychology and it is characterized by work based on at least three different definitions of self-esteem. Each one of them has given rise to a school of thought with its own body of supportive research and findings. Such situations often generate confusion in a field, especially when it comes to establishing consensus or integrating material. Thus, this article first presents the two-factor approach to self-esteem in order to demonstrate how defining it as a relationship between competence and worthiness helps to resolve issues that other leading definitions do not, especially the common practice of defining self-esteem simply as a feeling of “worth.” Second, an attempt is made to show how a two-factor approach also better integrates work on the cognitive and affective dimensions of self-esteem.

Keywords: self-esteem, defining self-esteem, two-factor approach, self-esteem and cognition, self-esteem and affect, self-esteem and relationships, Competence and Worthiness Training.

Although virtually every social scientist is taught the importance of using operational definitions, it is surprising to find that researchers often fail to fulfill this basic scientific obligation. Yet, the importance of this fundamental step never changes because like a flashlight in the dark, a definition illuminates what will be seen and simultaneously determines what remains hidden at any given moment. There are at least two types of research conditions in which taking the time to define key terms is especially important. One of them is rather predictable because it occurs when exploring new areas where basic concepts, issues, and methods are still emerging. This type of work is characterized by a state of flux that is made more manageable, in part, by clear working definitions. Although it may seem counterintuitive, however, another situation where it is important to articulate definitions occurs in well-established fields. Mature areas, for example, are often characterized by differing schools of thought and research findings that arise from either emphasizing specific components of a standard definition or from the existence of different definitions. Such a condition often creates difficulties when attempting to establish consensus or to integrate general findings in a field and is clearly the case concerning work on self-esteem.

The problem of defining self-esteem has been recognized for decades. For example, Wells and Marwell (1976) described the situation as a “definitional maze.” Baumeister, Smart, and Boden (1996) termed the result of the difficulties associated with using the term self-esteem in different ways as the “heterogeneity” of self-esteem. This article seeks to examine the major definitions of self-esteem that give rise to this definitional situation and pays particular attention to demonstrating how a two-factor approach (Tafarodi & Swann, Jr., 1995) to defining self-esteem appears to be better equipped to deal with this problem than others. Special attention is given to showing how defining self-esteem in terms of two factors instead of one better enables us to integrate the cognitive and the affective dimensions of self-esteem.

William James (1890/1983) first introduced the topic of self-esteem to psychology over a century ago making this...
area one of the oldest in the entire discipline. Since those early days, several researchers have noted that definitions of self-esteem vary considerably (Mruk, 2013; Smelser, 1989; Wells & Marwell, 1996). Dealing with the problem of multiple definitions is especially important in this field because each major definition of self-esteem has generated a supporting body of findings and conclusions that are often contradictory. One important consequence of such confusion is that self-esteem has been seriously challenged as a valuable psychological construct by both American and European social scientists (Baumeister et al., 1996; Emler, 2001). These difficulties also arise when applying the concept of self-esteem to non-Western cultures (Mruk, 2013). Thus, the psychology of self-esteem would be well-served by examining major definitions to determine whether one approach is superior to the others. We begin this work by examining how different ways of defining self-esteem generates a certain type of ambiguity in the field. Then, we consider how defining self-esteem in terms of competence and worthiness may make it possible to resolve these issues or at least make them more manageable. Along the way, we will also see how this two-factor approach can reduce confusion by integrating the cognitive and affective dimensions of self-esteem.

The problem of defining self-esteem is not new to the field. For example, Wells and Marwell (1976) grappled with this issue decades ago when they attempted to classify the major approaches to defining self-esteem. They noted that it is possible to “distinguish between two main underlying processes—evaluation and affection” (1976, p. 62). On one hand, Wells and Marwell found that evaluative definitions of self-esteem prioritize cognitive processes by focusing on such things as a person’s attitudes or beliefs about the self. On the other, they identified definitions that emphasize the affective dimension of self-esteem which centers upon the emotions or feelings one has about him or herself. However, Wells and Marwell also went on to offer the important observation that making such broad categorical generalizations is difficult because there is always overlap between the cognitive and affective dimensions of self-esteem. More recently, Smelser (1989) returned to the issue of defining self-esteem. To paraphrase, he found that definitions that tend to emphasize cognition appear to involve evaluating the self in terms of such characteristics as “power, confidence, and agency” and measuring one’s merit as a person in comparison to an internal or an ideal standard. The affective approach, by contrast, was characterized as focusing on the emotional dimension of self-esteem and involves a continuum of feelings about the self ranging from high to low or from positive to negative (1989, p. 10).

It has also been well-established that instead of emphasizing cognition or affect, definitions of self-esteem may be organized in regard to the major components they employ (Mruk, 1983, 2013; Smelser, 1989; Wells & Marwell, 1976). For example, William James clearly emphasized the role of success or individual competence as the central component of self-esteem when he introduced it to the field. Self-esteem, he said, is something that “depends entirely on what we back ourselves to be and do. It is determined by the ratio of our actualities to our supposed potentialities” (James, 1890/1983, p. 296). For James, then, self-esteem is based on a certain type of action, namely, competence. Thus, “Self-esteem = Success/Pretensions” (1890/1983, p. 296).

Of course, thinking and feeling are never entirely separate so it is not surprising to find that he also referred to the affective dimension of self-esteem as a “self-feeling.” However, his definition makes it clear that such affect results from two other variables. One concerns an individual’s “pretentions” (aspirations or ideals, in today’s parlance) which are more cognitive than affective in nature. The other involves a person’s actual success in this regard which reflects the individual’s abilities, accomplishments, and achievements in the areas of life that are important for his or her sense of identity. James further clarified the types of behavior that are important to self-esteem in this way by saying that only one set of actions matter, namely, actions or behaviors that “back” the self, which is to say those that manifest competence in these crucial areas. Thus, it is not mere success (or failure) that generates or affects self-esteem. Rather, it is being competent in the domains of life that matter to us in terms of identity, or where we are “staked” to use James’ term (1890/1983, p. 296), that affect self-esteem. In this definition, action is the primary path to self-esteem and affect largely follows.

If James’ definition were to be categorized on the cognition/affect dimension mentioned earlier, it appears to lean toward the cognitive type of approach: After all, understanding self-esteem as a ratio implies a calculative process, one that involves measuring or at least consciously evaluating degrees of success or failure in relation to one’s goals and aspirations. One’s self-esteem, then, is a type of comparative assessment that results in a conclusion which, in turn, stimulates an emotional or affective response. Today, we see this way of defining self-esteem alive in regard to what is called the “discrepancy” approach (Pope, McHale & Craighead, 1988). Here, self-esteem is understood as a function of the difference between one’s “ideal self” (pretentions in James’ model) and one’s “real self” (actual success in domains that are important to one’s sense of identity in his view). In this case, self-esteem is dependent on the size of the gap between one’s self-ideas and his or her ability to reach them, the attainment of which involves competence. A ratio of 1:1, then, would result in very high self-esteem because the real matches the ideal. Similarly, the greater the disparity difference between successes and self-ideas, the lower one’s self-esteem is thought to be even though an individual might perform adequately when compared to others.

The concept of self-efficacy (Bandura, 1997), or one’s beliefs about the likelihood of being successful in a given
area or situation, is another cognitive process characteristic of defining self-esteem primarily in terms of competence. Self-efficacy should be seen as a cognitive process because it involves mental calculations aimed at predicting one’s performance in regard to the demands of a given situation. However, it is a mistake to confuse self-efficacy with self-esteem, as the former is only one process associated with the latter. There are many others to consider when discussing self-esteem, such as actual ability. Thus, those who attempt to finesse the problem of defining self-esteem by focusing on such concepts as self-efficacy commit a serious intellectual and scientific error. After all, just because one believes that one has the capacity to be successful in a certain context does not mean that he or she actually has the skills necessary to be competent in that domain. In addition, since there is always overlap between cognitive and affective processes when considering self-esteem, it is also important to understand the role affect plays in competence-based definitions. As Wells and Marwell said above, there is “overlap” between the two dimensions. Thus, when self-esteem is defined in terms of competence, affect is still important but the self-feelings associated with self-esteem occur largely as a result of other processes, in this case the more cognitive and behavioral ones associated with success or failure.

Finally, James introduced one more important theme to the psychology of self-esteem when he defined it primarily in terms of a ratio that hinges on competence: If self-esteem operates in this fashion, then it should be very possible to change self-esteem. For example, one clear way to increase self-esteem when defined this way would be to first identify the areas of life that are important for a given individual. The next step would be to help the person acquire the skills necessary to be more competent in those domains, as an increase in ability should improve the likelihood of being successful in them. Greater success, in turn, should shift the ratio between success and pretentions in a positive direction. Of course, other methods might include such things as lowering one’s pretensions or changing the domains that hold importance for the self to those in which one is more likely to be successful. Both increasing competence in areas that are important to an individual or helping a person who suffers excessive expectations adopt more realistic ones should improve the self-esteem ratio. Indeed, at least one modern self-esteem enhancement program makes use of both strategies. For example, Pope, McHale, and Craighead (1988) have constructed a step-by-step method based on the discrepancy definition to use with children. Some of them were found to benefit from striving to increase their individual competence in domains of life important for their identity and their sense of self-esteem. Others improved self-esteem by working hard to reduce the cognitive distortions involved in holding unrealistic or even destructive expectations, such as perfectionism.

Defining self-esteem largely in terms of competence (success) dominated the field for several decades earlier in its history and is very much alive today. For example, Adler’s (1927) psychodynamic psychology focused on success as a healthy way of striving for a sense of mastery and self-esteem in regard to the struggle for superiority that was central to his work. Similarly, Erikson’s (1983) stage of Industry versus Inferiority can also be viewed in terms of self-esteem because this time of life is thought to focus on developing a sense of competence or ability. White (1963) even went so far as to differentiate between an ordinary sense of mastery associated with success in the general developmental spheres of life and a special form of mastery he explicitly labeled “effectance” which serves as the developmental foundation of self-esteem. Finally, we have seen that this approach is the basis of more behaviorally and cognitively oriented methods in which treatment focuses on increasing competence or on changing cognitions, depending on the needs of the individual.

Along with strengths, of course, come weaknesses. The disadvantages of defining self-esteem in terms of the cognitive and behavioral processes associated with competence are also well-known. For example, the other side of success is failure. Failures that occur in domains of life that affect one’s identity are psychologically costly, sometimes even damaging. Thus, when defined this way, self-esteem also involves a certain vulnerability of the self that requires the expenditure of considerable psychological resources dedicated to monitoring and protecting self-esteem. Maintaining this type of self-esteem often involves developing various behavioral and cognitive defenses, such as self-handicapping (Brockner, Wiesenfeld, & Raskas, 1993). Further, if these processes require too much effort, then self-esteem may become defensive, fragile, or even unstable (Kernis, 2003; Mruk, 2013). In this case, self-esteem may act more as a liability than an asset and negatively affect such things as performance, relationships, or personality. Indeed, today the negative “pursuit” of self-esteem that may arise from basing it on competence is called “contingent self-esteem” and is sometimes seen as giving rise to such things as overachievement, depression, and eating disorders (Crocker & Park, 2004).

Although James’ approach was the first to appear in psychology, competence-based definitions of self-esteem began to fade in the 1960s and 1970s with the rise of learning theory and its emphasis on the role of the social environment in shaping self-esteem. Morris Rosenberg, one of the major figures in this approach, defined self-esteem as an attitude that “expresses the feeling that one is ‘good enough.’ The individual simply feels that he is a person of worth” (1979, p. 31). Even though Rosenberg described self-esteem as an attitude toward the self, it is one that is clearly based on affect. This approach to self-esteem differs from one grounded in ability, performance, and success or competence in important ways. Chief among them may be...
that understanding self-esteem as a feeling of worth means that self-esteem is more of an internal and affective state rather than cognitive or behavioral phenomenon. This way of defining self-esteem also has an impact on the research methods used to investigate it because feelings are more difficult to observe or to measure than abilities and behaviors.

Social scientists often use surveys and other self-report instruments to assess internal states and the affectively oriented worthiness based definition of self-esteem has given rise to many of them for at least two reasons. First, unlike developing actual experiments or making real-world observations, self-report instruments are relatively easy to design, administer, and evaluate. Second, such survey devices can be used with large samples. Thus, it is not surprising that most of the research done on self-esteem to date is based on this approach. In fact, it was stated that perhaps until recently, nearly a quarter of all the research done on self-esteem was conducted using Rosenberg’s 10-question Self-Esteem Inventory (Tafarodi & Swann, Jr., 1995). This large body of work, already consisting of over 23,000 articles, chapters, and books (Mruk, 2013), has led to many interesting findings concerning self-esteem. For example, self-esteem has been identified as being one of the most valued needs held by individuals across cultures (Sheldon, Elliot, Kim, & Kasser, 2001). Self-esteem was also used to characterize an entire generation of American college students as being more interested in experiences that affirm their sense of worth than sex (Bushman, Scott & Crocker, 2011). Indeed, it has even been reported that after negative affect and gender, self-esteem is the third most frequently studied phenomenon in social and personality psychology (Rodewalt & Tragakis, 2003).

Like its competence based counterpart, defining self-esteem largely in terms of feeling “worthy” involves various cognitive processes, such as “self-evaluation.” However, much of the work using this approach does not appear to make the cognitive dimensions of self-esteem particularly thematic. Instead, self-esteem is often simply defined as a “feeling of worth” with little further elaboration as to its nature. Even so, worthiness based definitions also resulted in the development of a general approach to enhancing self-esteem based on central principles and an accompanying body of research. From this point of view, if self-esteem consists of a positive feeling of worth, then helping people to feel good about themselves makes solid theoretical sense. Further, since being accepted by significant others helps one feel worthwhile as a person, it seems reasonable to design self-esteem enhancement techniques and programs that attempt to foster feeling good about one’s self in these ways. Finally, since parents and teachers act as primary reinforcers in the early years, it should be possible to shape parental and educational practices in this direction. In other words, such things as helping children feel accepted, praising their attempts at doing things regardless of outcome, and deemphasizing the negative feelings associated with criticism, competition, or losing, and so forth, make clear and consistent theoretical and practical sense. Thus, it is not surprising that these principles and practices became the heart of what has been called the “self-esteem movement” of the 1990s and were heavily employed in the educational setting (Leo, 1990; Mruk, 2013).

However, there are also serious limitations to an affectively oriented understanding of self-esteem and increasing it in this way. The chief problem may be that this approach makes it difficult to connect self-esteem to any particular form of behavior. For example, people might report that they feel good about themselves as individuals and may even provide such responses to a survey instrument. However, unless that device has scales that assess such things as defensiveness, self-deception, self-centeredness, or narcissism, it will be difficult to distinguish between the responses given by an individual with healthy, positive, or authentic self-esteem and those offered by people who suffer problems with self-esteem. Examples include someone who is unable to tolerate admitting personal weaknesses by being rigid, a person who avoids experiencing him or herself in negative ways by lacking insight, or an individual who has an exaggerated sense of self-worth, such as a narcissist. Very few self-esteem tests have such scales because they are difficult to create and because they make administration more difficult, time consuming, and expensive. In other words, much of the research supporting a connection between affective definitions of self-esteem and desirable behavior is simply confounded. This situation helps explain the difficulties involved in establishing strong empirical associations between self-esteem and behavior which is the main focus of those who severely criticize work on self-esteem, such as Baumeister, Campbell, Krueger, and Vohs (2003) or Emler (2001). In the worst case, it may even be that so-called “feel good” approaches to enhancing self-esteem actually foster the development of negative outcomes, such as unrealistic expectations and narcissism, as even more severe critics suggest (Damon, 1995).

In short, it seems reasonable to maintain the position that much of the work of self-esteem is based on defining it largely on the basis of either competence or worthiness. Further, it also seems possible to argue that competence based definitions tend to emphasize the cognitive dimension of self-esteem while worthiness based definitions are more affectively oriented, though both types of processes are involved whether self-esteem is defined one way or the other. However, although human behavior may be broken down into its parts in order to make understanding it more manageable, human experience is always greater than their sum. Thus, whether based primarily on competence or largely on worth, the unidimensional approaches to defining self-esteem found in single factor definitions seem to be doomed to failure in principle as well as in practice. Fortunately, a third major definition exists in the field that may prove itself able to overcome such limitations. The two-fac-
tor approach, as it is called, is based on defining self-esteem as a relationship between both competence and worthiness. If so, then this way of defining self-esteem should be better able to integrate its cognitive and affective factors as well.

Although perhaps under-recognized, this approach to self-esteem has been active for some time. Branden may have first identified both competence and worthiness as central components when he said, “Self-esteem has two interrelated aspects: it entails a sense of personal efficacy and a sense of personal worth. It is the integrated sum of self-confidence and self-respect. It is the conviction that one is competent to live and worthy of living (1969, p. 110). However, more empirically oriented researchers such as Gecas (1971) also identified two sets of factors that affect self-esteem, one of which is based on individual ability and the other of which concerns a sense of worth that is often connected to acceptance.

More recently, Tafarodi and Swann, Jr. (1995) used the term “self-competence” for the competence factor and “self-liking” for the worthiness component of self-esteem. In addition, they went on to express the relationship between the two factors through the analogy of a rectangle. This is, by themselves, the unidimensional factors of competence or worthiness alone are like sets of lines on a page that are not connected to each other. As such, they create nothing in particular. However, if one set is identified as height and the other as width, then the two sets of lines form a rectangle. The “semantic space” (Tafarodi & Vue, 1997) within these two sets of lines is what we call self-esteem. I tend to prefer the analogy of a square because that particular type of rectangle describes more about the relationship between the two sets of lines or components: though different, they play equally important roles and act in a way that balances each other (Mruk, 2013). In short, defining self-esteem as a relationship between two factors is a dynamic and balanced approach in which the factors work with each other to create authentic self-esteem.

Others working from this perspective have found connections in the relationship between competence and worthiness that gives self-esteem a high degree of existential as well as general importance. For example, certain experiences may be called “self-esteem moments” and have been studied using quantitative as well as qualitative methods for some time (Epstein, 1979; Jackson, 1984; Kernis, 2003; Mruk, 1983). This type of research often involves investigating how people respond to situations that call their individual competence, personal worth, or both, into question. For instance, Epstein (1979) investigated two such types of experiences and the situations in which they occurred. One involves being successful (or unsuccessful as the case may turn out to be) in a domain of life that is important for a particular individual in terms of his or her identity. Note that these experiences tend to emphasize the competence component of self-esteem as well as its cognitive-behavioral dimension according to the frameworks offered earlier, although affect is involved. The other situation that appears to generate a strong positive (or negative, as the case may be) impact on self-esteem involves being accepted (or rejected) by significant others. This type of self-esteem experience prioritizes the affective dimension of self-esteem more than its cognitive counterpart because acceptance or approval from another makes one feel good, though once again cognition is involved too. Still others (Jackson, 1984; Mruk, 1983) examined more existential situations where individuals are faced with dilemmas that force them to face their own limitations in order to maintain or to achieve a sense of competence and worth as a person, or suffer losing some of it. A prototypical example would be dealing with a moral conflict in which one must stand up for what one believes to be “right” in a situation that requires facing fear, such as when confronting a boss or some other powerful person.

Another important line of work on self-esteem that brings both components (competence and worthiness) and both dimensions (cognition and affective) together in a two-factor fashion is found in the development of the well-known Multidimensional Self-Esteem Inventory (MSEI) by O’Brian and Epstein (1988). In addition to having scales for global self-esteem and for defensiveness, this instrument also assesses eight specific domains of self-esteem. Interestingly enough, four scales evaluate areas that are clearly related to competence; namely, Personal Power, Competence, Self-Control, and Bodily Functioning, all of which also emphasize the cognitive more than affective processes of self-esteem. The other four, Lovability, Likability, Moral Self-Approval, and Body Appearance, are more clearly connected to feelings of worth or worthiness and, therefore, to the affective dimension of self-esteem.

Not only does the MSEI reflect the two factors and the two dimensions of self-esteem in a balanced fashion, but it has also been used by many others to research self-esteem in literally hundreds of clinically and nonclinically oriented research projects and settings, as indicated in the appendix to the manual for administering and scoring the test (O’Brien & Epstein, 1988). For example, I designed a form of positive therapy called Competence and Worthiness Training or CWT (Mruk, 2008, 2013) that has been found to increase self-esteem by helping people to become more competent and/or more worthy in the particular domains of life that are important to them for their individual identity and self-esteem. This 5-step program has been evaluated by studies that examined its effectiveness with various clinical and non-clinical adult populations (Bartolletti, 2008; Hakim-Larson & Mruk, 1997). In each case, CWT was found to be demonstrably effective in increasing self-esteem based on pre- and posttesting treatment designs that used the MSEI to measure changes in self-esteem.

It was mentioned that in the two-factor model, the relationship between competence and worthiness does more than just create self-esteem. These two factors also provide...
a dynamic balance to each other. This relational condition has the effect of making the approach less vulnerable to the limitations seen with unidimensional alternatives. In other words, not only does authentic self-esteem involve both factors, but they also act upon each other so as to create a set of boundaries that allow self-esteem to stand as a unique psychological phenomenon with its own set of characteristics and rules. For example, according to this approach the only type of competence that matters in a positive fashion for self-esteem involves being successful in ways that are worthy of a fully functioning person. In other words, the worthiness component of self-esteem balances the tendency to overvalue success or to pursue it in negative ways, such as those associated with contingent self-esteem. In this sense, being good at bad things, such as taking advantage of or harming others, would not have a positive impact on self-esteem. Similarly, the dangers associated with simply feeling good about one’s self without earning such affect are also avoided by the two-factor approach. In this case, feeling good about one’s self must be balanced by doing good things with the self, a condition that clearly differentiates self-esteem from such negative things as a sense of entitlement or narcissism. Thus, according to the two-factor approach, people with an antisocial or a narcissistic personality disorder would not have authentic self-esteem, though they could be very competent in some areas of life or feel very good about themselves.

Finally, the two-factor approach integrates the cognitive and affective dimensions of self-esteem better than unidimensional approaches in at least two ways. First and foremost, defining self-esteem in this fashion brings both dimensions together in principle. That is, when self-esteem is seen as the result of a dynamic balance between competence and worthiness, their respective cognitive and affective dimensions are automatically brought into the picture from the onset. Hence, is it impossible to categorize the two-factor approach as either primarily cognitive or as largely affective in ways that Wells and Marwell (1976) or Smelser (1989) suggested. Instead, the two-factor definition makes it necessary to pay attention to both processes, although they may differ in terms of which dimension is most thematic in a given situation or experience. For example, developing a strategy to be successful in a domain of life that involves a skill or activity, such as achieving a goal that matters in terms of one’s identity, may begin with emphasizing competence and its accompanying cognitive processes. However, the affective dimension is still alive in regard to such things as the motivation to reach the goal and in the experience that comes with actualizing it.

Similarly, when one finds one’s self being valued as a worthy person by others, such as that which occurs in love or in a friendship, affect plays first fiddle, so-to-speak, and cognition the second. However, both are necessary to complete the experiential orchestra associated with such experiences. The cognitive and affective dimensions of self-esteem, then, are more like figure and ground than separate processes in the two-factor approach: One may stand out more than the other, but both are always present and even give rise to each other in the first place. Thus, rather than developing positions that favor one dimension over the other, research on self-esteem based on a two-factor definition begins with the awareness that cognition and affect are always present when discussing self-esteem in the same ways that competence is met with worthiness and vice versa.

Second but not least, research on how self-esteem works at both the personal and interpersonal levels reveals that cognition and affect are intertwined in just this way. For example, the two major functions of self-esteem that receive the most attention in the literature on self-esteem are self-protection and self-expansion (Epstein, 1985; Gagne, Khan, Lydon, & To, 2008; Marigold, Holmes, & Ross, 2007; Mruk, 2013). People with low self-esteem have been found to concentrate more on avoiding the affect associated with losing self-esteem than they do in regard to taking the risks necessary to increase self-esteem. Often, the mechanism used to protect the self in this way is cognitive in nature, such as in the use of self-handicapping strategies (Brockner, Wiesenfeld, & Raskas, 1993). Likewise, people with low self-esteem are reported to prefer protecting themselves from the threat of a loss in a relationship by distancing themselves emotionally from it rather than taking the risks necessary to deal with the problem more directly (Gagne, Khan, Lydon, & To, 2008; Marigold, Holmes, & Ross, 2007). Once again, it is clear that while one dimension may dominate the other at times, both cognition and affect work hand-in-hand to determine one’s responses and behaviors.

It is not accidental that the same patterns of interaction between the two factors and the two dimensions can be seen in research concerning high self-esteem. For example, Kernis (2003) found that self-esteem helps individuals take the risks necessary for actualizing their intrinsic values and to expand the self in those directions. Similarly, when a relationship is threatened, people with higher self-esteem appear to focus their attention on developing effective ways of solving the problem or on dealing with the issue more proactively (Aron, Ketay, Riela & Aron, 2008; Sciangula & Morry, 2009). In either case, it may be said that people with higher levels of self-esteem appear to be confident in their ability (competence) but also have a larger emotional buffer (worth) that allows them to better tolerate taking the risks associated with growth, as well as deal with threats to self-esteem more effectively. Indeed, even the strongest critics of the field recognize this “buffering effect” of self-esteem (Baumeister et al., 2003).

Finally, the two-factor approach integrates both components and both dimensions of self-esteem at the practical or applied level as well. For example, CWT (2008, 2013) is based on the two-factor definition of self-esteem. Thus, this program incorporates all four properties in its selection of
the therapeutic activities it offers to increase authentic self-esteem. On one hand, CWT includes structured activities designed to help participants develop competence, such as increasing problem-solving ability. Although this technique is primarily cognitive in nature, it often leads to feeling good about one’s abilities and one’s self when a problem is solved. On the other hand, the program also includes activities aimed at discovering and affirming one’s value or worth as a person through such things as tracking positive self-esteem moments in journal form and sharing these positive self-esteem moments with others. While largely designed to help people experience themselves in more positive ways affectively, such activities also involve cognitive processes including reflection, insight, and awareness.

At this point it should be clear that solid reasoning and relevant research findings support the claim that the two-factor approach to defining self-esteem appears to be superior to others in a number of ways. First, this definition is based on a relationship between the same factors upon which unidimensional definitions are based. Integrating them this way makes the two-factor approach more comprehensive. Second, another limitation of unidimensional definitions of self-esteem was found to be that they tend to emphasize either the cognitive or the affective dimension of self-esteem. However, the two-factor approach always places both dimensions of self-esteem in dynamic relationship to each other. Next, this definition seems to be more capable of integrating both factors (competence and worthiness) and both dimensions (cognitive and affective) of self-esteem in regard to the basic functions of self-esteem. That is, they all work together to help protect or to expand the self, sometimes even simultaneously. Finally, the two-factor approach creates a clear, consistent, and congruent path from theory through research and to practice in ways that provide clinicians and clients with effective ways of dealing with both factors and both dimensions of self-esteem.

References


