



Ontario Centre of Excellence  
for Child and Youth  
Mental Health

Centre d'excellence de l'Ontario  
en santé mentale des  
enfants et des adolescents

**Bringing People and Knowledge Together to Strengthen Care.  
Rassembler les gens et les connaissances pour renforcer les soins.**

Evidence In-Sight:

# The evidence on the link between self-esteem and intimate partner violence

Date:

September, 2012

The following Evidence In-Sight report involved a non-systematic search and summary of the research and grey literature. These findings are intended to inform the requesting organization, in a timely fashion, rather than providing an exhaustive search or systematic review. This report reflects the literature and evidence available at the time of writing. As new evidence emerges, knowledge on evidence-informed practices can evolve. It may be useful to re-examine and update the evidence over time and/or as new findings emerge.

Evidence In-Sight primarily presents research findings, along with consultations with experts where feasible and constructive. Since scientific research represents only one type of evidence, we encourage you to combine these findings with the expertise of practitioners and the experiences of children, youth and families to develop the best evidence-informed practices for your setting.

While this report may describe best practices or models of evidence-informed programs, Evidence In-Sight does not include direct recommendations or endorsement of a particular practice or program.

This report was researched and written to address the questions:

- *What is the relationship between self-esteem promotion programs and rates of violence, aggression and, particularly, intimate partner violence in youth?*

We prepared the report given the contextual information provided in our first communications (see Overview of inquiry). We are available at any time to discuss potential next steps.

We appreciate your responding to a brief satisfaction survey that the Centre will e-mail to you within two weeks. We would also like to schedule a brief phone call to assess your satisfaction with the information provided in the report. Please let us know when you would be available to schedule a 15-minute phone conversation.

Thank you for contacting Evidence In-Sight. Please do not hesitate to follow up or contact us at [evidenceinsight@cheo.on.ca](mailto:evidenceinsight@cheo.on.ca) or by phone at 613-737-2297.

## 1. Overview of inquiry

The agency that requested this report provides education to youth in grades 5-12 about various topics including healthy relationships, effective communication, empathy, and self esteem. Of the seven programs they conduct in schools, four are self-esteem based. The youth education programs are funded solely through fund-raising, not direct Ministry support, and they are looking to develop an evidence base to support continuation of the programs. They are collecting data within the programs to inform a program evaluation, and intend to also collect data in schools where the programs are not in place to be able to compare paired settings.

One issue encountered in the schools is aggression and, particularly, intimate partner violence among youth. The organization is looking for information on whether there is a link between self-esteem and dating partner violence/domestic violence. They understand the impact of abusive relationships on self-esteem and have read the literature on this, but want to know if the reverse is also the case: whether one's self-esteem has a direct effect on the nature of one's relationships, particularly intimate relationships. Ultimately, they hope to demonstrate that as self-esteem in participating student's increases, rates of violent acts in the community decrease.

This report by Evidence In-Sight is an initial summary of the available research on whether there is a proven association between self-esteem and intimate partner violence. It is a continuation of a previous Evidence In-Sight report on self-esteem as a general mental health factor, which is available upon request from the Centre.

This report will address the question: What is the relationship between self-esteem promotion programs and rates of violence, aggression and, in particular, intimate partner violence in youth?

## 2. Summary of findings

After a scan of the research literature, we found no clear base of evidence that strongly indicates that interventions or programs to enhance self-esteem in children and youth leads to reduced rates of aggression, particularly intimate partner violence. However, there are indirect ties such as common outcomes and predictors of both low self-esteem and intimate partner violence.

Key findings from this Evidence In-Sight summary include:

- No evidence was found that directly links self-esteem promotion and positive outcomes related to intimate partner violence in either adolescents or adults.
- No clear relationship between low self-esteem in childhood or adolescence and long-term life outcomes, including relationship fulfillment, has been demonstrated. Life outcomes are generally a product of the psychosocial context in which a person develops, rather than predetermined by a single factor such as self-esteem.
- Intimate partner violence is widespread throughout adolescent populations and can range from physical to psychological to sexual violence. Males and females are equally likely to become perpetrators and/or victims, though females report greater degrees of fear and hurt as a result of aggression.
- Direct links between self-esteem and violence have not been established, but outcomes and predictors of low self-esteem and intimate partner violence overlap frequently, for example through depression, substance abuse, attachment and conduct disorders, and other mental health concerns.
- Both low self-esteem and engagement in intimate partner violence either as a perpetrator or a victim have been strongly linked to early childhood abuse, trauma and neglect.

- Low self-esteem has not been established as a strong predictor for intimate partner violence. Studies have shown that victims and perpetrators can have any level of self-esteem upon entering abusive relationships, but that self-esteem can decline while partners are in violent relationships.

### 3. Answer search strategy

A scan of the existing literature pertaining to self-esteem, self-esteem promotion programs and intimate partner violence in youth was conducted using the following sources:

- **Search Tools:** University of Ottawa Scholar's Portal, Google Scholar
- **Search Terms:** self-esteem, promotion, adolescents, dating violence, intimate partner violence

### 4. Findings

There is a wealth of research pertaining to self-esteem and intimate partner violence (IPV) as independent topics, but few studies explore the relationship between the two. Though predictors and outcomes for low self-esteem and IPV overlap, results suggesting causality have been inconsistent, and it has not been established that promoting positive self-esteem reduces levels of IPV in youth (Vezina & Hebert, 2007).

The quality of existing research is poor as studies of self-esteem and IPV require complex and costly long-term follow-up, and rely heavily on qualitative self-reporting. Despite these limitations, information has emerged regarding predictors, outcomes, prevention and support for both low self-esteem and IPV, and evidence-based prevention and promotion programs have achieved positive results.

#### 4.1 Self-esteem

##### *Overview*

Self-esteem has been defined as “the evaluative aspect of self-knowledge that concerns the extent to which people like themselves” (Zeigler-Hill, 2010). Higher self-esteem is associated with stronger coping skills, satisfaction in life achievements, healthy adjustment and decision-making processes, the ability to recover from the negative effects of stressful situations, and many more strengths (Zeigler-Hill, 2010). Conversely, those with lower self-esteem exhibit lower perceived self-worth, poor adjustment skills, poor social functioning, high-risk behaviour and fewer coping mechanisms (Crocker, Park, 2004).

Studies have explored the link between low self-esteem and psychopathology, arguing it can be a significant risk factor in the development of depression, anxiety, eating disorders, schizoaffective disorder, substance abuse and narcissism (Zeigler-Hill, 2010). Though self-esteem can be a powerful predictor for short-term behaviour and decision-making processes, research has demonstrated that lower or higher levels of self-esteem in childhood and adolescence has little to no bearing on long-term life outcomes such as mental health, substance use and relationship and life satisfaction (Boden, Fergusson, Horwood, 2008).

##### *Self-Esteem and Aggression/Violence*

Though there has been no measured link between self-esteem and dating violence, there are suggestions of links between extreme levels of self-esteem, both low and inflated, and aggressive/violent behaviour. In one review, up to 12 of 19 self-esteem studies demonstrated such a link (Walker & Bright, 2009). One study suggests that failure in areas

perceived as validating self-esteem (for example, academics, professional success, looks) can elicit a response of anger in everyday experience. With a healthy, stable level of self-esteem, those who fail in such areas of their lives are better able to cope with the circumstances and restore their pride (Walker, Bright, 2009).

When people are faced with failure in their pursuit of validating self-esteem, those with extremely low or high self-esteem have fewer coping mechanisms to buffer the failure (Zeigler-Hill, 2010) and may react unpredictably. These people may be more prone to defensive, hostile or retaliatory anger at dangerous levels (Crocker & Park, 2004), and perpetrators of violence might feel violence is justified as the failure is perceived as an unfair affront to their pride and esteem (Walker & Bright, 2009).

Crocker and Park (2004) further suggest that those with low self-esteem are vulnerable to high levels of rejection sensitivity or to basing self-worth on others' acceptance of them. They may anxiously expect, perceive and overreact to rejection and react unfavourably to avoid it. In relationships, men may react with hostility, jealousy or attempts to control partners, while women can withdraw from supports and become despondent when faced with the possibility of rejection (Crocker, Park, 2004).

#### *Self-Esteem Promotion*

There are many successful self-esteem promotion programs that contribute to positive youth development, including increasing happiness, academic success, self-efficacy, and resilience (Catalano et al., 2004). In youth, self-esteem promotion is especially important, as many studies have highlighted adolescence as a critical time for identity development (Dubois et al., 2003).

The most successful programs tend to address multiple life domains (for example at school, at home, at work and with family, friends, peers, the wider community), provide opportunities and strategies for independent identity development, cultivate normal and healthy bases for self-worth and are centered on a dynamic strengths-based approach (Catalano et al., 2004; Dubois et al., 2003). Though these programs have not been measured for their effect on aggression or IPV, a promotion-focus can provide youth with a wider variety of coping mechanisms and support systems, and counter some of the attitudes and social stereotypes that can encourage violence in everyday situations (Vezina & Hebert, 2007).

Although positive outcomes may be associated with programs to buttress self-esteem, the causal effect of these programs on adolescent attitude and behaviour is difficult to measure. More effective strategies are needed to determine the long-term outcomes of such programs (Catalano et al., 2004).

## **4.2 Intimate partner violence**

### *Overview*

Intimate partner violence (IPV) is defined as physical, psychological or sexual violence between partners in a relationship. Studies have shown that the prevalence of IPV among youth can range from 8%-20% of relationships, and many instances of violence are unrecognized and/or unreported (Foshee et al., 2004). Despite common assumptions, males and females are almost equally likely to be perpetrators of violence and aggression, as well as victims (Hickman, Jaycox, Aronoff, 2004).

Potential predictors for IPV are numerous, and there is rarely one particular cause. The most significant predictors include intergenerational violence, perceptions of the justifiable use of violence in relationships, drug and alcohol use and experiencing violence in a previous relationship (O'Keefe, 1997). The effects of abusive relationships on adolescents can be severe. Over the short-term, those engaged in violence can experience many outcomes including depression, anxiety, social withdrawal and loss of confidence, in addition to physical and/or sexual harm. In the long-term, youth can continue to engage in cycles of abuse, further exacerbating negative effects (Vezina & Hebert, 2007).

#### *Intimate Partner Violence and Self-Esteem*

Levels of self-esteem have not been identified as a prominent predictor for abusive relationships. One study noted that self-esteem had little to no bearing upon whether subjects entered into violent relationships, and participants with both lower and higher self-esteem were equally susceptible (Zayas & Shoda, 2007). Research has found, however, that self-esteem can be lowered significantly once participants are actively in abusive relationships, as continued psychological, physical and/or sexual aggression contribute to increased feelings of guilt and responsibility for the violence, increased social isolation, and loss of self as victims' attention can be monopolized by gratifying the perpetrator to avoid further violence (Lynch, Graham-Bermann, 2000).

Low self-esteem is a powerful predictor for psychopathology (Zeigler-Hill, 2010), and psychopathology has been identified as a potential predictor for IPV. The internalizing effects of depression such as low perception of personal strength, increased withdrawal and sadness, low feelings of self-efficacy and seeking validation (Vezina & Hebert, 2007) can all contribute to continued participation in dangerous relationships. Other mood disorders and substance abuse can lead to risky choices and unpredictable behaviour (Vezina & Hebert, 2007). Additionally, some youth who suffer from mental health concerns have demonstrated increased engagement in delinquent or anti-social behaviour related to their disorders and may be more likely to choose partners with similar attributes (Vezina & Hebert, 2007).

#### *Intimate Partner Violence Prevention*

The majority of prevention programs offered for youth focus on changing behaviour by improving knowledge and attitudes (Hickman, Jaycox, Aronoff, 2004). Programs often focus on increasing knowledge of warning signs and available resources and supports and on improving attitudes relating to gender stereotypes or justifying the use of violence in a relationship. However, few longitudinal studies have assessed the effectiveness of IPV programs in preventing youth from entering into violent situations (Hickman, Jaycox, Aronoff, 2004). These studies indicate that programs can alter knowledge and attitudes over the short term, but fail to impact longer term behaviour change or prevent youth from entering into violent relationships (Cornelius & Resseguie, 2007; Hickman, Jaycox, Aronoff, 2004).

To improve prevention programs, concrete strategies such as using communication skills training, scripts and role-playing on handling stressful situations, and increasing help-seeking behaviour (Vezina & Hebert, 2007) have been identified as providing more tangible options for behavioural change (Murphy & Smith, 2010). Other studies have examined the inclusion of clinically-proven models for reducing aggression and treating the clinical problems associated with aggression, but further evaluation is needed (Shorey et al., 2012).

## 5. Next steps and other resources

Knowing what works and receiving training on an evidence-informed practice or program is not sufficient to actually achieve the outcomes that previous evaluations indicate are possible. A program that has been shown to improve mental health outcomes for children and youth but that is poorly implemented will not achieve successful outcomes (Fixsen et al, 2005). In order for a program to be evidence-informed, it needs to be applied with fidelity to the design and it needs to be implemented using supportive “drivers” related to staff competency, organizational leadership and organizational capacity. These drivers include assessing and monitoring the outcomes of your practice using evaluation or performance measurement frameworks, which are particularly important when there is insufficient evidence in the literature to guide clinical decisions. Choosing a practice is an initial step toward implementation, but the implementation drivers are essential to ensure that the program reaches appropriate clients, that outcomes are successful and that clinical staff members are successful in their work.

The Ontario Centre of Excellence for Child and Youth Mental Health has a number of resources and services available to support agencies with implementation, evaluation, knowledge mobilization, youth engagement and family engagement. For more information, visit:

<http://www.excellenceforchildandyouth.ca/what-we-do> or check out the Centre’s resource hub at <http://www.excellenceforchildandyouth.ca/resource-hub>.

For general mental health information, including links to resources for families:

<http://www.ementalhealth.ca>

## References

- Black, B., Tolman, R., Callahan, M., Saunders, D., Weisz, A. (2008). When will adolescents tell someone about dating violence victimization? *Violence Against Women, 14*, 741-758.
- Boden, J., Fergusson, L., Horwood, J. (2008). Does adolescent self-esteem predict later life outcomes? A test of the causal role of self-esteem. *Development and Psychopathology, 20*, 319-339.
- Catalano, R., Berglund, L., Ryan, J., Lonczak, H., Hawkins, J. (2004). Positive youth development in the United States: Research findings on evaluations of positive youth development programs. *The Annals of the American Academy of Political and Social Science, 591*, 98-124.
- Cornelius, T., Resseguie, N. (2007). Primary and secondary prevention programs for dating violence: A review of the literature. *Aggression and Violent Behavior, 12*, 364-375.
- Cornelius, T., Sullivan, K., Wyngarden, N., Milliken, J. (2009). Participation in prevention programs for dating violence: Beliefs about relationship violence and intention to participate. *Journal of Interpersonal Violence, 24*, 1057-1078.
- Crocker, J., Park, L. (2004) The costly pursuit of self-esteem. *The Psychological Bulletin, 130*, 392-414.
- Dubois, D., Lockerd, E., Reach, K., Parra, G. (2003). Effective strategies for esteem-enhancement: What do young adolescents have to say? *The Journal of Early Adolescence, 23*, 405-434.
- Fixsen, D. L., Naoom, S.F., Blase, K.A., Friedman, R.M., & Wallace, F. (2005). *Implementation research. A Synthesis of the literature*. Tampa, FL: University of South Florida, Louis de la Parte Florida Mental Health Institute, The National Implementation Research Network (FMHL Publication #231).
- Foshee, V., Benefield, T., Ennett, T., Bauman, K., Suchindran, C. (2004). Longitudinal predictors of serious physical and sexual dating violence victimization during adolescence. *Preventative Medicine, 39*, 1007-1016
- Hickman, L., Jaycox, L., Aronoff, J. (2004). Dating violence among adolescents: Prevalence, gender distribution, and prevention program effectiveness. *Trauma, Violence & Abuse, 5*, 123-142.
- Lynch, S., Graham-Bermann, S. (2000). Woman abuse and self-affirmation: Influences on women's self-esteem. *Violence Against Women, 6*, 178-197.
- Murphy, K., Smith, D. (2010). Before they're victims: Rethinking youth-targeted relationship abuse prevention in Australia. *Australian Psychologist, 45*, 38-49.
- O'Keefe, M. (1997). Predictors of dating violence among high school students. *Journal of Interpersonal Violence, 12*, 546-568.

- Shorey, R., Zucosky, H., Brasfield, H., Febres, J., Cornelius, T., Sage, C., Stuart, G. (2012). Dating violence prevention programming: Directions for future interventions. *Aggression and Violent Behaviour, 17*, 289-296.
- Vezina, J., Hebert, M. (2007). Risk factors for victimization in romantic relationships of young women: A review of empirical studies and implications for prevention. *Trauma, Violence & Abuse, 8*, 33-66.
- Walker, J., Bright, J. (2009). False inflated self-esteem and violence: A systematic review and cognitive model. *The Journal of Forensic Psychiatry & Psychology, 20*, 1-32.
- Zayas, V., Shoda, Y. (2007). Predicting preferences for dating partners from past experiences of psychological abuse: Identifying the psychological ingredients of situations. *Personality and Social Psychology Bulletin, 33*, 123-138.
- Zeigler-Hill, V. (2010) The connections between self-esteem and psychopathy. *Journal of Contemporary Psychotherapy, 41*, 157-164.