# Conceptual and Theoretical Review of Self-Worth

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This study examined the significance of self-worth as a crucial factor in human mental health and psychosocial development. The study explores self-worth interventions, mental disorders, and available resources. A comprehensive analysis of the conceptual and theoretical aspects of self-worth is undertaken. To begin with, the study offers conceptual justifications drawn from the self-worth literature, elucidating theoretical perspectives on the formation of self-worth in individuals. It elaborates on related concepts and their interconnections with self-worth. Furthermore, the examination extends to the influence of culture on self-worth development and emotions. Theoretical discussions on self-worth are approached through Psychoanalytic theory, Psychosocial development theory, Transactional analysis theory, and Attachment theory. The research scrutinizes the association between various mental disorders and self-worth, investigating how a lack of self-worth may exacerbate or precipitate certain psychopathologies. Previous interventions aimed at enhancing self-worth are outlined, accompanied by an exploration of methods for measuring self-worth. The study emphasizes the pivotal role of self-worth in individuals' mental health, considering the implications of concepts like unconditional self-worth and contingencies of self-worth. Recommendations are provided for individuals, parents, and mental health professionals based on the findings.

Keywords: Self-worth, mental health, mental disorders, psychopathology, contingencies of self-worth

Bu çalışmada insan ruh sağlığı için oldukça önemli bir kaynak olan öz-değer ile psikososyal gelişim, öz-değer kaynakları, ruhsal bozukluklar ve öz-değer müdahaleleri ele alınmış, öz-değer üzerine kavramsal ve kuramsal detaylı bir inceleme yapılmıştır. Çalışmada öncelikle öz-değer üzerine alanyazındaki kavramsal açıklamalara yer verilmiştir. Bireylerde öz-değerin hangi kaynaklardan beslenerek oluştuğuna dair kuramsal açıklamalar sunulmuştur. Öz-değer ile ilişkili olan kavramlar ve bu kavramlarla öz-değer arasındaki ilişkiler açıklanmıştır. Ayrıca, kültürün bireyin öz-değer gelişimine ve duygularına etkisi incelenmiştir. Öz-değer gelişimi kuramsal olarak ele alınmış ve Psikoanalitik kuram, Psikososyal gelişim kuramı, Transaksiyonel analiz ile Bağlanma kuramı açısından açıklanmıştır. Çalışmada ayrıca, öz-değer ile çeşitli ruhsal bozukluklar arasında nasıl bir ilişki olabileceği, öz-değer eksikliğinin kişide hangi psikopatolojileri artırabileceği veyahut sebep olabileceği teorik kapsamda tartışılmıştır. Bunun üzerine, öz-değerin nasıl ölçüldüğü ve artırmak için daha önce yapılan müdahaleler sunulmuştur. Bütün bu bilgiler ışığında öz-değerin bireylerin ruh sağlığı için önemi tartışılmıştır. Ayrıca koşullu öz-değer ve koşulsuz öz-değer kavramlarının ruh sağlığına olası etkileri tartışılmıştır. Bireyler, ebeveynler ve ruh sağlığı uzmanları için önerilerde bulunulmuştur.

Anahtar sözcükler: Öz-değer, ruh sağlığı, ruhsal bozukluklar, psikopatoloji, öz-değer koşulları

# Introduction

In psychology, there are numerous concepts that explain the functionality of individuals, and one of these concepts is self-worth. Having a low level of self-worth is considered as an indicator of pathology in mental health (Rogers 1959). To illustrate, this condition is addressed as a negative self-subscale in the brief symptom inventory (Şahin et al. 2002). On the other hand, a high level of self-worth is regarded as an indicator of positive mental health. For instance, one of the significant dimensions of psychological well-being is the dimension of unconditional self-acceptance, which is closely related to self-worth (Chamberlain and Haaga 2001). Furthermore, self-worth has a developmental nature (King et al. 1993, Webb and Rosenbaum 2019). Moreover, one of the most important goals of psychotherapies is to enhance the self-worth of clients (Mackrill 2010).

A thorough literature review reveals that there is a dearth of conceptual and theoretical investigations regarding self-worth. While research exists on the preservation of self-worth (Thompson 1994) and conditional self-worth (Crocker and Wolfe 2001, Crocker et al. 2006), there are also studies that delve into self-worth as a subdimension of self-esteem (Coopersmith 1967, Crocker 1999, Brown and Marshall 2006). However, a comprehensive exploration of self-worth, encompassing both its developmental and theoretical dimensions, has

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not been encountered within the existing body of literature. A rigorous conceptual and theoretical scrutiny of self-worth, which serves as a pivotal psychological resource, would afford mental health professionals (such as psychiatrists, psychological counselors, psychologists, etc.) a broader and more comprehensive perspective. This, in turn, aims to equip mental health practitioners with an extensive knowledge base to effectively aid clients manifesting symptoms of diminished self-worth, as expressed through statements like "I lack any sense of value," "I am unworthy," or "I feel so worthlessness" during psychological counseling and psychotherapeutic sessions.

The aim of this study is to investigate the relationship between self-worth and various psychopathologies based on theory and empirical findings. Within the existing literature, there are indications that self-worth may be closely associated with various mental disorders. For instance, findings suggest that individuals with eating disorders often exhibit significantly low levels of self-worth (Erbay and Seçkin 2016). In individuals with eating disorders, aspects related to physical appearance, such as beauty, thinness, or muscularity, can become conditions for self-worth (Björk et al. 2012, Lampard et al. 2013, Forrest et al. 2020). Another example pertains to narcissistic individuals who display counterfeit self-confidence and self-worth, while in reality, their selfworth is contingent on external factors and other individuals. It is debated that they experience self-worth feelings in a binary manner (Brown and Bosson 2001, Besser and Priel 2010). It is believed that narcissistic individuals tie their self-worth to the condition of being "better than others" and, in this regard, their narcissistic pathologies and symptoms may increase in order to maintain high self-worth (Zeigler-Hill and Besser 2013).

Depression, a different mental disorder, is also associated with self-worth. Low self-worth can exacerbate depressive symptoms (Burwell and Shirk 2006, Robinson et al. 2017). Suicidal ideation and suicide attempts, closely related to depression, are also thought to be linked to feelings of self-worth. A low sense of self-worth can weaken an individual's sense of life's meaning and increase suicidal thoughts (Pelham and Swann 1989, Harter and Marold 1991, Robinson et al. 2017). On the other hand, individuals with high self-worth have been found to be at lower risk of suicide (Wichstrøm 2000, Lakey et al. 2014, Robinson et al. 2017).

The literature also discusses the possibility that personality disorders and symptoms of personality disorders can develop in individuals due to unhealthy development of self-worth (Zeigler-Hill and Abraham 2006, Ironside et al. 2020). An unhealthy development of self-worth in childhood experiences may be associated with bipolar disorder, narcissistic, antisocial, and borderline personality disorders. For example, individuals with narcissistic and antisocial personality disorders have been observed to exhibit an inflated and unrealistic self-worth structure (Aggarwal 2013). Conditional self-worth, which is contingent on achievement, has been highlighted in bipolar disorder. It has been noted that individuals who fail to achieve their desired success can experience a decrease in self-worth and transition into a depressive mood state. Interventions aimed at enhancing self-worth have been recommended for individuals with bipolar disorder to help balance their emotional transitions (Ironside et al. 2020). In the case of individuals with borderline personality disorder, who exhibit abnormalities in mood transitions, interventions aimed at increasing self-worth have been found to reduce symptoms of the disorder (Krawitz 2012, van der Hout et al. 2023).

In this regard, this study aims to examine the relationship between self-worth and various mental disorders, with the intention of providing valuable findings for therapeutic mental health services. Prior to investigating the relationship between self-worth and mental disorders, the study provides comprehensive theoretical and conceptual explanations of self-worth. It elucidates how self-worth develops in individuals within the context of developmental theories and discusses the influence of culture on the development of self-worth. The study also aims to engage in a theoretical discussion of conditional self-worth and unconditional self-worth concepts. Taking all of these factors into consideration, this research is expected to contribute to the existing literature by providing a multidimensional examination of the concept of self-worth, which holds a prominent place in psychology. It is believed that this study, which explores the relationship between self-worth and mental disorders, will guide interventions aimed at increasing self-worth to reduce symptoms of mental disorders.

# **Defining Concepts Related to Self-Worth**

Self-worth is an important concept on its own, but it is closely related to various other concepts, including self, self-awareness, and self-esteem. In the studies on self-worth that have spanned over a century, it is observed that self-worth is interchangeably used with terms such as self-esteem, self-respect, self-identity, and self-awareness (Yiğit 2021). While some studies may use these terms synonymously (Butler and Gasson 2005), it is emphasized that self-worth, unlike concepts like self-awareness, self-respect, and self-identity, represents the notion of valuing oneself entirely and as a whole individual (Pelham and Swann 1989). To comprehend the

meaning and psychological structure of self-worth, it is necessary to explain the concepts of self, self-awareness, and self-esteem.

The concept of self is addressed in various dimensions in the literature. James (1950, as cited in Aslan-Yılmaz 2016) discussed the self in four sub-dimensions (material self, social self, spiritual self, and pure ego) and also explained the self in two categories: the knowing self (I) and the known self (me). The terms I and me were further elaborated by Brown (1998) as the subjective self and the objective self, respectively. When we say, "I see myself," there is a subjective self, which is the one who sees and knows, and it is the I, the knowing self. The thing being seen is yourself; here, "myself" is in the position of an object, and it is referred to as the objective self. The objective self is the me, the known self (Aslan-Yılmaz 2016). While the subjective self allows us to distinguish ourselves from other objects and people, the objective self provides us with a sense of identity (Brown 1998, as cited in Aslan-Yılmaz 2016). When the self is in an object position, there is also an evaluation involved. Just as other individuals become objects and are subject to evaluations in the eyes of our subjective self (Mead 1934, as cited in Aslan-Yılmaz 2016). Individuals can conclude whether their objective self is "valuable" or "not valuable" based on the criteria set by their subjective self.

Self-awareness is defined as an individual's focused attention on themselves or their self-knowledge (APA 2023). This self-focus of the individual encompasses their emotions, thoughts, desires, and needs, and it is believed to occur when one pays attention to them or possesses knowledge about them. Wiekens (2009) noted that social psychologists describe an individual's self-awareness using the concept of self-awareness, while neuroscientists use the term self-consciousness. In the general psychology literature, the term self-consciousness is used to describe the attribute of being aware of oneself, and the term self-awareness is used to refer to the state of being self-aware (Aslan Yılmaz 2022).

Self-esteem, also known as global self-esteem, is described by some experts as the value an individual assigns to themselves as a person (Crocker and Wolfe 2001). When self-esteem is approached with this explanation, the boundaries between the concepts of self-esteem and self-worth become blurred, and the two concepts can become confused with each other. When global self-esteem is described as the "value a person assigns to themselves" and self-worth as the "momentary feeling of self-esteem," it can lead to the inference that self-worth feelings are fleeting (Brown and Marshall 2006). However, some scholars argue against this view, contending that it is not possible for a person's positive or negative feelings about themselves to change so quickly (Brown and Marshall 2001, 2002, 2006). As a result, there is a need to provide an alternative explanation for what selfesteem is. In this regard, it is noteworthy that self-esteem is explained as a person's decision about whether they are valuable or not according to the criteria of others, rather than objectively evaluating their own abilities and worth (Leary and Baumeister 2000). The concept of self-esteem has long been explained in terms of self-esteem as a trait and momentary self-esteem feelings (some consider it as self-worth). However, it is also believed that self-esteem can be a responsibility imposed on individuals. When referring to individuals with high self-esteem, it is noted that it includes not only those who have a positive self-perception but also narcissists, arrogant, and defensive individuals (Baumeister et al. 2003). Therefore, it is considered highly important to differentiate between the concepts of self-esteem and self-worth.

# **Explaining Self-Worth: Conditional or Unconditional?**

Self-worth was first defined in psychology as the alignment of an individual's achievements with their personal goals (James 1890). According to this definition, if a person's achievements are in line with their self-set personal goals, they experience self-worth. Crocker and colleagues (2006) also define self-worth as a psychological structure that emerges when an individual evaluates their own characteristics, achievements, and failures. According to this definition, a person will feel worthy if they meet their self-set conditions for self-worth. If they achieve their desired goals or come to believe that their personality traits are as they desire, they may have the thought, "I am a worthy person" (Crocker and Wolfe 2001, Crocker 2002). In this context, self-esteem is thought to be the factor that conditions self-worth. As long as an individual meets their own criteria for being a "respectable person," they will experience the feeling of being a "worthy person." This situation creates a self-worth structure that is dependent on achievements and characteristics, in other words, on self-esteem. The conditional nature of self-worth on self-esteem can make it quite complicated for individuals to reach the schema of "I am worthy." This is because the conditions for being valuable can vary depending on a person's emotions, thoughts, and circumstances. When the line between respectability and being worthy becomes blurred and merged, conditional self-worth conditioned by self-esteem emerges.

There are two models that explain the conditional formation of self-worth: the Cognitive Self-Worth Model, also known as the bottom-up self-worth model, and the Emotional Self-Worth Model, also known as the top-down self-worth model. The bottom-up self-worth model explains the journey of self-worth from a cognitive perspective. Initially, individuals receive feedback about their value. Based on this feedback, they engage in self-evaluation. The result of this process is the self-worth experienced at that moment. If the influence of the cognitive evaluation process persists for a long time, it forms the individual's long-term general self-esteem. In this model, self-worth and self-esteem are seen as temporal responses that arise as a result of the cognitive evaluation process. According to the bottom-up self-worth model, whether an individual considers themselves worthy or not depends on certain conditions. For instance, if an individual is intelligent, beautiful/handsome, or wealthy, they are considered valuable and respected (Brown and Marshall 2006). The conditions that follow the "if" statement can vary based on the individual's environment and cognitive schemas (Crocker et al. 2006). Some researchers even have argued that focusing on self-esteem or self-worth might not be as important as concentrating on the underlying psychological structure of self-evaluation (Crocker and Wolfe 2001).

On the other hand, the top-down self-worth model explains self-worth through an emotional approach. According to this model, the feedback individuals receive from their environment about their temperaments and relationships with others during childhood forms their general self-esteem. In later years, the underlying general self-esteem is considered alongside new feedback from the environment, and the resulting emotion is referred to as self-worth (Brown and Marshall 2001, 2002). When self-worth is formed, the feedback from the environment is not considered in isolation. Instead, the general self-esteem developed in early life is also included in the evaluation process. Therefore, it is argued that an individual's self-worth is not solely dependent on feedback since the early-formed general self-esteem is part of the assessment process (Brown and Marshall 2006). This can be explained as follows: A person with high self-esteem during childhood may not immediately lose their self-worth due to a negative feedback received later because their high self-esteem has protected their self-worth against one-time negative feedback. However, even a single negative feedback can significantly impact self-worth for individuals with low self-esteem during childhood, leading them to feel worthless. While individuals with high self-esteem can shield their self-worth from short-term negative experiences, the selfworth of individuals with low self-esteem is at greater risk from negative feedback (Brown and Marshall 2006). This situation grants individuals with high self-esteem the freedom to fail, while for those with low self-esteem, the risk of lowering their self-worth due to failure is quite daunting.

In contrast to conditional self-worth models, Rogers (1959) emphasized the necessity of unconditional selfworth. According to Rogers, individuals are worthy beings who lead their lives by developing their innate abilities. The existence and abilities of an individual (the self) are sufficient to be worthy. This demonstrates the concept of unconditional self-worth. Individuals meet their needs, use their inherent abilities, and develop them in order to fulfill themselves and sustain their lives (Proctor 2017). As individuals progress toward selfactualization, they engage in an organismic evaluation process. They assess their experiences as positive or negative and categorize them accordingly. People tend to positively evaluate experiences that contribute to their personal development while negatively evaluating experiences that do not contribute to their growth as individuals (Joseph and Linley 2004). However, an individual's organismic evaluation process can be influenced by the conditions set by the environment (Proctor 2017). When an individual internalizes another person's conditions for positivity, they may begin to evaluate themselves based on those conditions, thereby losing their orientation toward self-actualization (Joseph and Linley 2004). In this scenario, the individual is no longer authentically and unconditionally worthy; their worth becomes contingent on meeting someone else's conditions. Conditional self-worth, as explained by social psychology models, reflects the psychological structure of an individual who has lost the authentic orientation described by Rogers (1959) and has assimilated into the conditions set by others, resulting in a pathological state.

# **Conditional Sources of Self-Worth**

According to numerous studies and theories in the literature, there are various sources for the development of self-worth in individuals. According to Rogers (1959), who emphasized the importance of unconditional self-worth for individuals' mental health, the source of unconditional self-worth lies in individuals' existence and abilities. According to Rogers' humanistic, person-centered therapy theory, people are inherently good, and their existence as human beings is sufficient for them to be worthy (Proctor 2017). In contrast, according to conditional self-worth models, self-worth has several sources. These sources include the need for approval, physical appearance, the desire to be better than others, competence (academic achievement), love and support

from family, God's love, and moral values. Drawing from Crocker and colleagues' (2003) study, Table 1 summarizes how these sources contribute to the formation of self-esteem.

According to the self-worth motivation theory, self-worth is derived from success and motivation. Individuals must be successful in their goals to experience self-worth (Covington and Beery 1976). An important point here is that success should be in the intended and desired direction, and it is believed that there should be a personal motivation. It is thought that success achieved without personal motivation will have a limited impact on self-worth, whereas failure to achieve a motivated goal may lower self-worth or render it ineffective (Covington and Omelich 1981). Therefore, the formation of self-worth involves the combination of abilities and the effort aimed at, resulting in performance, and the evaluation of the outcome contributes to an individual's self-worth. Especially in childhood, if an individual puts in a lot of effort but their abilities fall short, feelings of humiliation and regret can arise. Therefore, it is emphasized that when setting goals, an individual's abilities should be taken into account (Covington 1984).

Table 1. Conditional sources of self-worth		
Sources of self-worth	How does this source develop self-worth?	Related research
Need for approval	Many individuals feel the need for approval from others. Receiving approval or rejection from others can significantly impact their self- esteem. Particularly, self-esteem is believed to be formed based on how we perceive ourselves in the eyes of others.	Harter (1986), Leary and Baumeister (2000), Shrauger and Schoene- man (1979)
Physical appearance	Particularly in women but also in men, individuals are often evalu- ated by others based on their physical appearance. One's perception of how their physical appearance is judged by others can influence their self-esteem and self-worth. Research suggests that the impact of physical appearance on self-esteem is most pronounced during adolescence.	Fredrickson and Roberts and (1997), Harter (1986, 2000)
Being better than others	For some individuals, there may be a belief that they need to be bet- ter than others in order to feel a sense of self-worth. This mindset is often more prevalent in men.	Cross and Madson (1997), Joseph et al. (1992)
Competence (aca- demic achievement)	The achievement of success and feeling competent plays a signifi- cant role in the formation of self-esteem. Academic achievement, in particular, has been identified as one of the primary sources of self- esteem, especially in children and adolescents.	Covington (1984), Rosen- ber et al. (1995)
Love and support from family	According to attachment theory, feeling valued by family and loved ones and experiencing love and support are factors that contribute to an individual's self-worth. This, in turn, contributes to the devel- opment of secure attachment.	Bowlby (1982), Griffin and Bartholomew (1994)
God's love	For individuals with religious beliefs, adhering to the rules set by God and living a life in accordance with these rules can impact their self-worth. Feeling loved by God can also have a positive effect on self-worth.	Nelson (1989), Spilka et al. (2019)
Moral values	Living a life in accordance with moral values and rules can contrib- ute to an individual's perception of being a good and valuable per- son, serving as a source of self-worth.	Coopersmith (1967), Sol- omon et al. (1991)

# **Self-Worth and Developmental Theories**

How self-worth is formed during the development process after birth of individuals can be discussed with the explanations provided by developmental theories. In this section of the study, self-worth is discussed in terms of various developmental theories, including psychoanalytic theory, object relations theory, psychosocial development theory, attachment theory, and transactional analysis theory.

# **Psychoanalytic Theory**

Psychoanalytic theory divides an individual's psyche into three parts: the id, ego, and superego, which are also referred to as the lower self (id), the self (ego), and the higher self (superego). Unwanted traits and thoughts represent the unfavorable desires and aspects within an individual. On the other hand, the superego functions as the conscience, reflecting the values of parents and society. The superego evaluates the individual's entire self from a moral perspective and arrives at judgments. Thus, the superego can exert pressure on the ego by rejecting immoral desires and traits. The ego strives to control and balance the pressures exerted by both the id and the superego. If the conflict between the id and superego becomes too intense, the ego may experience strong

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pressures (Burger 2016). Internal conflicts can lead to a decrease in self-worth for individuals, especially during adolescence, as the desires of the id intensify, causing conflicts with the realities of the superego and ego (Freud 1946, Moneta et al. 2001). The superego, which rejects and condemns the id's desires, can tell the ego that it is "bad, immoral, useless, lazy," and so on, thereby diminishing the individual's self-worth. The ego uses defense mechanisms to maintain a balance between the id and the superego. While the use of these mechanisms at a certain level is considered normal, excessive reliance on defense mechanisms can harm an individual's mental health and, if continued, may lead to psychological disorders (Freud 1910).

#### **Object Relations Theory**

Object Relations Theory, which is based on psychoanalytic principles, suggests that individuals cognitively encode their self, object, and relationship in three dimensions concerning the objects and people in their environment (Gabbard 1994, Erbaş 2015). In early experiences, an individual's first objects of joy are primarily their mother, followed by their family and close relationships. The relationships that a child has with their family (objects) have a significant impact on their self-structure, resulting in various cognitive encoding. Thus, the child's interactions with their family and the responses they receive regarding their value contribute to the child's self-worth encoding. When low-value responses are encoded during early experiences, it results in the development of an individual with low self-worth. A baby who does not feel valued may come to see themselves as undeserving of any worth (Güvenir and Taş 2008, as cited in Erbaş 2015).

#### **Erikson's Psychosocial Development Theory**

According to Erikson's psychosocial development theory, individuals must accomplish specific tasks unique to each of the eight developmental stages throughout their lives (Erikson 1950). Particularly, the stage of "identity versus role confusion" that corresponds to adolescence is considered crucial for an individual's self-worth (King et al. 1993). In this phase, commonly referred to as the "storm and stress" period by Freud (1910), Erikson highlights the adolescent's need to establish their own identity. Adolescents engage in self-reflection and explore the identities of others. It is believed that a healthy self-worth, which leads to positive self-perceptions, is essential for the development of a healthy and positive identity during this stage (King et al.,1993).

While the importance of self-worth in adolescence is particularly emphasized in Erikson's psychosocial development theory, it is believed to hold its significance across all seven other developmental stages. Throughout life, the strengthening of the ego is encouraged (Erikson and Erikson 1998). To have a strong ego, individuals must establish a solid self-identity. Therefore, the formation of self-worth at an early age and its preservation in subsequent developmental stages are necessary. According to the study conducted under the title of "Sources of Self-Esteem," family support, achievement experiences, motivation, and self-concept are crucial for an individual's self-worth. For these sources to develop healthily, Erikson's life stages such as trust versus mistrust (0-1 year), autonomy versus shame and doubt (1-3 years), initiative versus guilt (3-5 years), industry versus inferiority (5-11 years), identity versus role confusion (12-19 years) are highlighted for self-esteem formation. Additionally, the importance of preserving and enhancing self-worth is emphasized in the stages of intimacy versus isolation (20-30 years), generativity versus stagnation (30-60 years), and integrity versus despair (60+ years). Thus, it is recognized that self-worth development continues throughout an individual's life and should be supported not only during childhood or adolescence but also throughout adulthood.

#### **Attachment Theory**

Every human being is born dependent on others. Basic needs such as food, drink, warmth, and feeling safe require the care of an adult to be met. According to attachment theory, a baby initially forms an attachment relationship with its mother and then with other family members. The baby also has a need to feel love and security from the person who meets their physical needs (Bowlby 1982). In this context, it is crucial for the baby to feel safe and secure with their caregivers to develop a sense of self-worth. Babies who do not receive love and attention regularly from their caregivers can develop unhealthy attachment styles. In such cases, individuals may have low self-worth (Bowlby 1982).

Building upon Bowlby's attachment theory, Ainsworth and her colleagues (1978) proposed three different attachment styles. The child's attachment style is formed based on whether their need for love and security is met in the relationship with the caregiver. These attachment styles are known as secure attachment, anxious-ambivalent attachment, and avoidant attachment (Sümer and Güngör 1999). In their study, Ainsworth and her

colleagues (1978) observed that securely attached children did not experience intense panic when separated from their mothers and sought their mothers without much distress. When reunited with their mothers, they were able to make contact comfortably. On the other hand, children with unhealthy attachment styles, namely anxious-ambivalent and avoidant attachment, displayed different reactions. Anxious-ambivalent children experienced intense anxiety, anger, and tension when separated from their mothers, and after reuniting, they tended to cling to their mothers and had difficulty calming down. Avoidant attachment children, on the other hand, showed little reaction when separated from their mothers but avoided contact with their mothers upon reunion (Sümer and Güngör 1999).

Similar to the reactions observed in Ainsworth and colleagues' (1978) experiment regarding attachment styles, it is believed that similar responses can be exhibited in close relationships established throughout adulthood (Crowell and Waters 1994). Securely attached adults experience lower levels of anxiety in their relationships and have positive experiences. Individuals with anxious-ambivalent attachment tend to be more jealous, obsessive, and emotionally unstable in their relationships. Just as in their relationship with their mothers, anxiously attached adults may struggle to build trust with their partners in new relationships, leading to unmet needs for love, attention, and connection. Avoidantly attached adults, on the other hand, exhibit lower levels of trust in others compared to other attachment styles and tend to avoid being in a relationship (Hazan and Shaver 1987, Sümer and Güngör 1999). Secure attachment with both mothers and fathers is positively related to self-worth (Booth-Laforce et al. 2006). Babies who receive appropriate care and have their needs met develop secure attachment styles and a positive self-worth perception, feeling that they are lovable and worthy individuals (Bretherton 1985). It has been found that individuals with anxious-ambivalent attachment may have irregular and unstable self-esteem (Foster et al. 2007). In a recent study conducted in Turkey, it was observed that adults with anxious-ambivalent attachment styles may attribute high value to others but feel themselves to be of low worth, in other words, having low self-worth. In this study, a positive relationship was found between secure attachment and self-love, while anxious-ambivalent and avoidant attachment styles were negatively correlated with self-love (Deniz and Yıldırım Kurtuluş 2023).

#### **Transactional Analysis Theory**

In transactional analysis theory, individuals' life experiences are rooted in the existential positions they have constructed. These positions frame how individuals perceive the world based on how they view themselves and others. The theory posits four existential positions (Solomon 2003, Nuttall 2006):

- 1. I'm OK, you're OK.
- 2. I'm OK, you're not OK.
- 3. I'm not OK, you're OK.
- 4. I'm not OK, you're not OK.

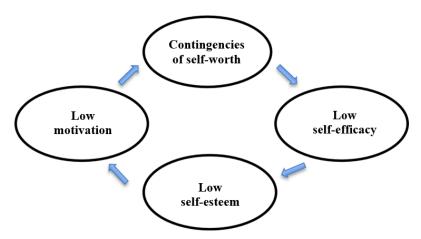
The formation of these perspectives is influenced by an individual's self-worth. Those who believe in their own worth and have high self-worth adopt the "I'm OK" perspective. If they also believe that others deserve to be worthy, they adopt the "You're OK" view. On the other hand, when an individual's self-worth is low, they tend to evaluate themselves as "bad" and "worthless," leading to the "I'm not OK" existential position. If someone with low self-worth believes that others are worthy, it results in the "I'm not OK, you're OK" position. Individuals who have experienced neglect, abuse, or unmet needs during childhood may have low self-worth. Their self-worth is influenced by the neglect and abuse they experienced, leading them to view the world through the "I'm not OK" existential position (Solomon, 2003). The "I'm OK, you're not OK" position can lead to narcissistic or psychotic behaviors (Webb and Rosenbaum 2019). This perspective can also generate intense anger towards others (Solomon 2003). Individuals who consistently believe they are superior to others attempt to prove their value narcissistically (Webb and Rosenbaum 2019). However, this approach, where one attempts to elevate their self-worth by devaluing others, is considered harmful and unhealthy for developing self-worth. Therefore, it is essential for individuals to build their self-worth realistically and recognize the value of each individual.

# **Concepts Associated with Self-Worth**

#### Relationship of Self-Efficacy, Self-Esteem, and Motivation to Conditional Self-Worth

One of the motivating forces behind an individual's behavior is their self-worth conditions. Individuals may adopt certain personal conditions to feel worthy (Crocker et al. 2006). For example, feeling worthy when academically successful indicates that academic achievement is set as a prerequisite for self-worth. Another example is believing that one must lead a luxurious lifestyle and have a high social status to feel worthy, which implies that socio-economic power is established as a prerequisite for self-worth. These conditions serve as sources of motivation for an individual's behaviors and determine their direction (Crocker and Knight 2005, Crocker et al. 2006). In pursuit of feeling self-worth, individuals become motivated to engage in behaviors that fulfill these contingencies of self-worth.

However, the presence of contingencies of self-worth also brings about a win-lose situation. When an individual fulfills the condition, they gain self-worth; if the condition is not met, they lose self-esteem. This situation can also make it difficult for individuals to take action. Rather than taking the risk of potential failure, individuals may choose to protect their self-worth by not taking action (Crocker et al. 2006). This is because individuals who cannot meet their established contingencies of self-worth perceive themselves as inadequate (Crocker 2002). The self-worth of an individual who believes they are inadequate will be significantly negatively affected (Arseven 2016). The result of such a choice is that the individual does not take action toward their goals and does not achieve success (Crocker 2002). Since achieving success is a contingency of self-worth, the feelings of failure and inadequacy persist. Thus, the individual may find themselves trapped in a vicious cycle (see Figure 1).





#### Self-Compassion's Relationship with Self-Worth

Self-compassion, as defined by Neff (2003), involves an individual accepting themselves and showing selfkindness in the face of mistakes and pain. It unfolds in three stages. Firstly, the individual acknowledges their mistakes and pains without ignoring them, observing the emotions they experience in the moment and accepting the feelings that pain or error may evoke (Birni and Eryilmaz 2022a). Instead of harsh self-criticism regarding these acknowledged pains and errors, the individual extends understanding to themselves. Consequently, this approach can provide the motivation needed to rectify or overcome mistakes and pain, enabling the individual to take action for self-improvement (Neff 2003, Allen and Leary 2010).

In the context described above, where contingencies of self-worth and resulting low self-esteem and motivation due to perceived inadequacy are at risk, self-compassion can act as a protective factor. Neff (2011) discusses how many individuals use the logic of "if I'm better than others, I'm successful" to build self-esteem. Instead of viewing self-esteem as a negative concept, she highlights that comparing oneself to others to derive self-worth can potentially lead to various psychological pathologies. According to a humanistic perspective, all individuals inherently deserve value and respect simply because they exist as individuals (May 1976). One does not need to be better than others to be considered worthy (Neff 2011). The formation of self-worth through comparisons with others can make this psychological structure unstable and fragile. This can leave individuals vulnerable to conditions like depression (Kernis 2005). Neff (2011) emphasizes the importance of self-compassion in preserving self-worth, even when individuals do not always have experiences that align with contingencies of self-worth or when they make mistakes. In her critique of contingencies of self-worth structures, Neff suggests that practicing self-compassion in the face of pain and errors can contribute to repairing conditional and unstable self-worth structures, paralleling Rogers' concept of unconditional self-worth.

Neff's assertion is supported by numerous studies in the literature (Neff 2003, Leary et al. 2007, Neff et al. 2008, Neff and Vonk 2009). Researchers recommend practicing self-compassion as a means to preserve and enhance

individuals' self-worth (Shimizu et al. 2016, Stapleton et al. 2017, Zhang et al. 2018). However, according to the examination conducted within the scope of this study, the number of studies investigating self-compassion for the preservation and enhancement of self-worth in the national literature appears to be quite limited. Therefore, it is recommended that experimental and longitudinal research on this topic be conducted at the national level.

# **Self-Worth and Culture**

According to the theory of cross-cultural relations in international relations, self-worth is influenced not only by individual factors but also by group factors. It has been suggested that three factors play an important role in an individual's ability to feel self-worth within their society: Honor, face, and dignity. Friedrichs (2016) bases the foundation of this theory on the need for individuals to feel approved by society in order to experience selfworth within the community. Researchers have argued that individuals inherently possess the need to seek approval from their social environment due to their social structure (Crowne et al. 1964). When examining studies conducted in Turkey, it is observed that the need for social approval is considered a meaningful factor for individuals to have a sense of well-being (Karaşar and Öğütülmüş 2016, Yalçınkaya et al. 2018, Karaşar 2020). Given that the norms and value criteria of societies vary according to culture, it is emphasized that self-worth is influenced by culture along with the need for approval (Friedrichs 2016, Yao et al. 2017).

Friedrichs (2016) pointed out that, as depicted in the findings of Kim, Cohen, and Au's study (2010), honor and dignity concepts in the literature are interpreted differently by individuals according to cultural differences. Therefore, it is believed that an individual's self-worth is influenced by the culture of the society they belong to (Friedrichs 2016). Ateş and Durmaz (2016) examined self-worth beliefs and noticed that their research findings differed from the international literature. They interpreted this as an indication that contingencies of self-worth may vary depending on culture, emphasizing that self-worth beliefs can differ culturally (Ateş and Durmaz 2016). In another study conducted at the national level, similar findings were encountered, leading to the conclusion that contingencies of self-worth change according to the norms of Turkish culture (Ekşi et al. 2017).

International literature has also found that the conditions determining self-worth vary across cultures. Cheng and Kwan (2008) emphasized the cultural differences between individualistic and collectivist societies in this regard. Several other studies have shown that self-worth is influenced by culture, leading to culture-specific examinations of self-worth (De Leon 2002, Uchida 2008, Liao and Wei 2014, Sasaki et al. 2014, Prilier et al. 2021). Liu, Chiu, and Chang (2017) found that Asians tend to feel a greater need for social approval compared to individuals in Western cultures, which can reduce their self-worth and well-being. Based on the review of both national and international literature, it can be concluded that individuals' contingencies of self-worth can vary depending on the culture they belong to or were raised in. Therefore, it is suggested that studies on self-worth take cultural influences into account.

# Self-Worth and Psychopathology

Lack of self-worth and conditioned self-worth structures can cause or exacerbate some mental disorders in individuals. Self-worth is cited in the literature as a crucial psychological building block for overall wellbeing. To close the gap in the literature and offer guidance in the treatment of mental disorders, it is crucial to look at self-worth not just in terms of wellbeing but also in terms of various mental disorders. This section of the study focused on the role of self-worth in personality disorders, eating disorders, narcissism, suicide, depression, and dissociative disorders.

## **Eating Disorders and Self-Worth**

Eating disorders, broadly categorized as anorexia, bulimia, and binge-eating disorder, constitute a group of mental disorders characterized by dissatisfaction with one's body and an intense focus on altering it. Individuals with eating disorders often exhibit low self-worth (Erbay and Seçkin 2016). As mentioned above, one of the sources of self-worth is an individual's physical appearance. While self-worth may have multiple sources, the pressure and significance of physical appearance are particularly pronounced in individuals with eating disorders (Crocker and Knight 2005). Individuals fixated on conditional self-worth related to physical appearance believe that they must possess an attractive appearance and be admired by others to feel valuable (Bardone-Cone et al. 2017, 2020). Studies have found that women with eating disorders often feel the need to be thin to maintain their self-worth (Granek 2007, Lampard et al. 2013, Forrest et al. 2020), while men may feel the need to be lean/fit and muscular (Drummond 2002, Björk et al. 2012). Although recent research suggests that self-worth should not be limited solely to body shape and thinness (Rieger et al. 2021), strong evidence in the literature

indicates that individuals with eating disorders, both women and men, tend to focus their self-worth sources and conditions predominantly on their physical appearance. Based on these findings, it can be considered that an excessive focus on physical appearance and the selection of physical appearance as the primary source of selfworth may contribute to the development of eating disorders. Therefore, it is believed that self-worth should be addressed in both preventive and therapeutic interventions for eating disorders.

#### **Narcissism and Self-Worth**

Another mental disorder associated with self-worth is Narcissism. Narcissistic individuals may have very high self-esteem because they believe they are more valuable and respectable than others. However, they can excessively focus on their self-worth sources and conditions since they constantly compare themselves to others. This excessive focus can bring along tension. According to a comparison between high and low narcissistic individuals, narcissists have been found to set their self-worth conditions at much higher criteria. Additionally, they are seen to be much more influenced by social situations and external sources (Collins and Stukas 2008). As observed in this study, the strong association between an individual's self-worth and external factors can lead to dangerous consequences. For narcissistic individuals, they constantly compare themselves to others and if only they find themselves better than others, they can feel self-worth (Zeigler-Hill and Besser 2013). A narcissistic individual may develop dysfunctional and fake self-esteem to protect their self-worth even if they are not better than others. It is believed that narcissistic traits can jeopardize individuals' self-worth. Individual would constantly need approval from their surroundings to feel self-worth (Besser and Priel 2010). The selfworth of a narcissistic individual dependent on external approval can soar when they receive validation, but it can also plummet when they experience failure and rejection. A narcissistic individual can be in love with themselves, yet simultaneously harbor self-hatred. The conflicting self-love and self-hatred result in an unstable self-worth perception and reinforce narcissistic behaviors (Brown and Bosson 2001). Vulnerable narcissistic individuals emphasize the need for approval as a source of their self-worth conditions. It can be said that a narcissistic individual who does not receive positive feedback and validation from their surroundings will suffer damage to their self-worth. A decrease in self-worth can lead to various forms of psychopathology.

#### **Depression, Suicide and Self-Worth**

Low self-worth can be one of the causes of depression. Children who felt worthless because of their parents during childhood can develop a mental schema that they are indeed worthless. In this way, individuals with low self-worth may experience depression symptoms in adulthood (Kenny and Sirin 2006, Sturman et al. 2009). Another developmental stage, adolescence, has also been found to be a period where adolescents' self-worth conditions predict depression symptoms (Burwell and Shirk 2006). Low self-worth not only leads to depression symptoms but also mediates the relationship between depression symptoms and suicide (Harter and Marold 1991, Robinson et al. 2017). In one study, individuals with high self-worth were found to have both fewer depression symptoms and a lower risk of suicide (Lakey et al. 2014). Unfortunately, suicide remains a significant and taboo topic. According to 2018 data, over 700,000 individuals worldwide lose their lives due to suicide every year (WHO 2022). Between 2018 and 2020, there was a 35% increase in the suicide rate in the United States, making suicide the 12th leading cause of death in the country. It is noted that men are at a higher risk of suicide than women. In 2020, it is estimated that 1.20 million people attempted suicide in the United States (AFSP 2022). The number of individuals who attempted suicide is much higher than the number of those who died by suicide, and the number of individuals with suicidal ideation is even higher than that of suicide attempts (Bırni and Eryılmaz 2022b). Particularly, individuals between the ages of 19-25 are at risk for suicidal thoughts and attempts; suicide is the 4th leading cause of death in individuals aged 19-25 (WHO 2022). Self-worth is a crucial psychological construct related to suicide ideation and attempts. Individuals with very low self-worth, who perceive themselves as worthless, may believe that they do not deserve to live or that life is meaningless. Extremely low self-worth resources (e.g., dissatisfaction with one's appearance, failures, rejection by others, etc.) can lead an individual to think, "I am a worthless person. There is no point in my living." A person who has lost hope in themselves and their self-worth is at a high risk for suicide attempts. There are debates in the literature regarding the stronger role of hopelessness as a suicide trigger compared to depression (Beck et al. 1985, Snyder and Lopez 2001, Birni and Eryilmaz 2022b). Numerous studies have presented the role of low self-worth in increasing suicide attempts and death wishes (Wichstrøm 2000, Lakey et al. 2014, Robinson et al. 2017).

#### **Personality Disorders and Self-Worth**

One of the fundamental issues in individuals with psychological disorders is an underdeveloped self-worth

structure (Brunnhuber 2003). Cognitive-behavioral therapy addresses four factors that contribute to personality disorders: biological factors, self-worth, self-concept, and the emotional balance of the caregiver during infancy (Davidson 2008). From this perspective, the self-worth developed during childhood is considered crucial in preventing the development of personality disorders. For example, in disorders like narcissistic personality disorder, as well as in individuals with antisocial personality disorder, it is observed that self-worth did not develop healthily, leading to an inflated self-worth perception (Aggarwal 2013).

The development of self-worth is also considered highly important for borderline personality disorder (BPD). Borderline personality disorder is believed to be associated with sudden shifts in self-worth (Zeigler-Hill and Abraham 2006). Research indicates that feelings of worthlessness, inferiority, and guilt stemming from past experiences are often observed in individuals with BPD. Particularly, individuals with BPD who exhibit high selfcriticism tend to experience feelings of worthlessness embedded in their core psychological structures during their daily lives and interactions (Kopala-Sibley et al. 2012). Unlike other personality disorders, individuals with BPD, driven by their feelings of worthlessness, often experience intense shame during their daily interactions (Stepp et al. 2012). Core worthlessness schemas and experienced shame can negatively impact the symptoms of self-critical individuals with BPD (Kopala-Sibley et al. 2012). Therapy interventions for individuals with borderline features have been shown to lead to increased self-worth and reduced borderline symptoms (Krawitz 2012, van der Hout et al. 2023).

# **Bipolar Disorder and Self-Worth**

Bipolar disorder is characterized by constant mood changes in which individuals have difficulty maintaining balance in their mood and energy levels. It is thought that biological, genetic, and social/environmental factors play a role in the development of bipolar disorder. Although the effect of the environment on the development of the disorder cannot be clearly defined, it has been observed that it is frequently seen together with adverse childhood experiences and traumas (Kesebir et al., 2013).

Individuals with bipolar disorder are noted to have high expectations of achieving extraordinary success in order to maintain their self-worth. In the literature, achieving extraordinary success is described as a condition for self-worth in individuals with bipolar disorder, as they often strive to excel between their mood transitions. Additionally, it is believed that low self-esteem emerges as a consequence of the self-worth conditions of individuals with bipolar disorder. To preserve self-esteem and balance mood transitions, it is recommended to work on self-worth perception and enhance self-worth (Ironside et al. 2020).

## **Dissociative Disorders and Self-Worth**

Dissociative disorders involve individuals disconnecting from their own identity and forming distinct identities as a defense mechanism to protect their self-identity and ego strength against chronic traumas experienced during early childhood (Öztürk 2020, Öztürk and Derin 2021). This process of separation and re-identification occurs at an unconscious level. Dissociation disorders are believed to be closely linked to an individual's underdeveloped self-worth. Literature reports associations between self-worth and dissociation (Fleming and Resick 2016, Lahav et al. 2016). Beyond ego strength, it has been suggested that individuals may employ dissociation as a defense mechanism to shield their self-worth (Lilly 2011). According to the literature, individuals with dissociation disorders may neglect their psychological and physiological well-being due to their diminished self-worth. This could potentially lead individuals with dissociative symptoms to engage in self-harming behaviors, which may or may not be fatal, including suicide (Batey et al. 2010, Brand et al. 2013). While the literature acknowledges the relationship between dissociation and self-worth, it remains limited. Further research on this topic, using experimental and longitudinal studies, is recommended to better understand and elucidate this relationship.

## **Measurement of Self-Worth**

This section of the study examines the primary scales used globally and in Turkey to measure self-worth. When reviewing the literature, it is observed that self-worth is most commonly assessed using the Rosenberg Self-Esteem Scale and the Contingencies of Self-Worth Scale. In the examination conducted, no scale development study specifically focused on measuring self-worth in our country was identified.

Rosenberg (Global) self-esteem scale, developed by Rosenberg in 1965, is used to measure individuals' selfesteem. The Turkish adaptation of the scale was conducted by Çuhadaroğlu in 1985. This scale assesses how individuals evaluate themselves. Higher scores on the scale indicate higher self-esteem, suggesting that the individual views themselves as valuable and competent (Eryılmaz and Atak 2011). According to the literature review conducted in this study, self-esteem and self-worth are not identical concepts but are related to each other. In numerous national and international studies, the Rosenberg Self-Esteem Scale has been considered as a scale that also reflects an individual's self-worth.

Contingencies of self-worth scale, was developed by Crocker and colleagues in 2003 to measure the conditions individuals set for themselves to feel self-worth. This 35-item scale uses a 7-point Likert structure. The scale consists of 7 subscales: approval, family support, competition, physical appearance, academic competence, God's love, and virtue. High scores on the subscales indicate that the individual views the respective condition as a prerequisite for feeling valuable. The Turkish adaptation of the scale was carried out by Çetin et al. in 2011. In Turkish adaptation, items 6 and 34 were removed from the scale as they did not meet acceptable values. As a result, the Turkish version of the Contingencies of self-worth scale was adapted as a 33-item scale with 7 subscales. The Turkish form has been found to be valid and reliable. "I feel good about myself when I think I look attractive" and "I feel worthy when I outperform others in a task or skill" are two sample items selected from the scale (Çetin et al. 2011).

#### **Interventions for Self-Worth Issues**

Within the scope of this study, various psychological interventions based on different approaches have been identified to enhance self-worth. Intervention studies conducted in this regard have been categorized into preventive and reformative interventions. Preventive interventions aim to prevent low self-worth and promote healthy development. One of the factors hindering the healthy development of self-worth is described as the reinforcement experiences in an individual's childhood being complex and chaotic. It is believed that the lack of consistent reinforcement from parents or teachers for a child's efforts and achievements can make it difficult for the child to predict the outcomes of their efforts, leading to the development of self-sabotaging behaviors that hinder the child from feeling worthy (Berglas and Jones 1978). While it is not claimed that a child's self-worth will necessarily be low due to the absence of appropriate reinforcement after each success or failure, it is emphasized that the opposite can be considered as a protective factor for self-worth (Thompson 1994).

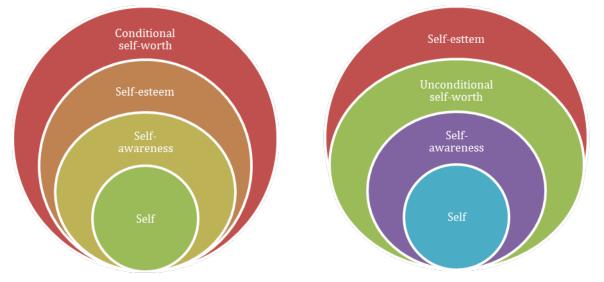
Moreover, it should be emphasized that the idea that success in exams or school performance is linked to one's sense of worth should not be ingrained in school-age children. Every individual is inherently worthy; simply being human is sufficient for one to be considered worthy. Children who are conditioned to equate achievement with self-worth can experience low self-worth when they fail to achieve success throughout their lives (Thompson 1994). This situation can leave individuals vulnerable to various mental disorders, as explained in the section of this study that discusses the relationship between self-worth and psychopathology. Therefore, it is believed that interventions aimed at preventing the formation of self-sabotaging behaviors, which are effective in protecting individuals' self-worth, should be carried out to address the irregular and insufficient reinforcements and misguided conditioning that may have occurred or could occur as a result of reinforcements and conditioning, preventive and reformative interventions should focus on helping individuals recognize that they are inherently worthy.

There are therapeutic intervention programs aimed at increasing self-worth. For example, in a study with women, an 8-module intervention program designed to increase self-worth through physical activity resulted in a significant increase in self-worth in the experimental group (Huberty et al. 2008). The intervention program in the study consisted of sessions focused on self-regulation, self-control, self-assessment, and increasing selfawareness. In another study, a group with non-lethal self-harm behaviors reported reduced pain tolerance and increased self-worth after a music intervention and short-term cognitive-focused intervention (Hooley and St. Germain 2014). In a study with obese children aimed at increasing self-worth through exercise and reducing depression, participants exercised for approximately 75 minutes in a gym under the supervision of researchers. In this intervention, self-worth increased in white children after the intervention, while there was no change observed in black children (Petty et al. 2009). The findings in the study can be explained in terms of the relationship between self-worth conditions and culture. However, in a recent study with similar research variables, exercise was reported to increase self-worth in obese children, 87% of whom were of African American descent (Williams et al. 2019). Another intervention that has been used to increase self-worth and has shown significant improvement is music therapy (Sharma and Sharma 2015). Social skills training and responsibilities (STARS) intervention conducted with adolescents with attention-deficit/hyperactivity disorder (ADHD) was also reported to increase self-worth (Frame et al. 2003). As shown in the findings provided above, various intervention programs conducted with different groups have been found to be effective in increasing self-worth.

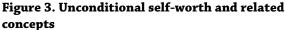
# Discussion

Self-worth is explained through the models of bottom-up self-worth, top-down self-worth, and the concept of conditional self-worth. Conditional self-worth is evident in the case of Gene, a successful law firm president who completed his legal education at Harvard University and had been questioning his own worth throughout his life. In his adult years, while searching for an answer to the question "Am I worthy?", he struggled with anxiety and depression. One day, he ended his life with a suicide note that included the phrase "I am a failure." Despite being seen as a respected and successful individual in the eyes of many, Gene questioned his own worth and ultimately took his own life when the conditions for his self-worth were not met. In other words, the esteemed criteria he possessed had conditioned his self-worth, and when these conditions were not met, the feeling of worthlessness drove Gene to suicide. However, in psychology, the humanistic perspective, as well as philosophical teachings in Buddhism and Islam, emphasize that every individual is inherently worthy simply by virtue of being human. For an individual to possess the belief "I am worthy," there is no need for any conditions or achievements. Respectability and worthiness are not the same thing. Being born as a human is sufficient to be considered valuable. In Gene's case, if he had considered his self-worth to be inherent and independent of success, would he have viewed himself as a failure and worthless, ultimately leading to taking his own life? This scenario illustrates two concepts on a scale: conditional self-worth and unconditional self-worth.

In the literature, three factors are identified as contributing to the formation of conditional self-worth: (1) the positive and negative feelings an individual has about themselves, (2) specific thoughts an individual has about themselves, and (3) how they internalize these thoughts in their minds (Pelham and Swann 1989). In other words, self-worth is indicated to develop based on conditions and self-assessments. Based on this explanation, it can be inferred that self-worth can develop in individuals in various levels and forms depending on certain conditions and self-evaluations. However, when considering perspectives such as Person-Centered Therapy, Islamic philosophy, Buddhist philosophy, and Humanism, it becomes clear that individuals are unconditionally valuable.



# Figure 2. Conditional self-worth and related concepts



Some researchers argue that self-worth is the result of a cognitive assessment dependent on a person's perception and feeling of themselves as a valuable individual, which is related to self-esteem (Crocker and Wolfe 2001, Crocker and Park 2004). On the other hand, some researchers suggest that self-worth is not the result of a cognitive process but rather is based on an individual's emotional process (Brown and Marshall 2001, 2002). As such, experts in social psychology either consider self-worth as a conditional, temporary feeling based on cognitive processes (Crocker and Wolfe 2001) or as a self-evaluation outcome based on emotional processes (Brown and Marshall 2001, 2002). Both explanations indicate the existence of prerequisites for self-worth. However, when considering Person-Centered Therapy, Buddhism, and Islamic philosophy, it becomes evident that every individual is inherently valuable simply by being human, regardless of whether they are seen as respectable. The authentic existence attributed to oneself through one's existence carries intrinsic value. In contrast to explanations of conditional self-worth, where individuals constantly question whether they are valuable under different conditions, unconditional self-worth suggests that one's authentic existence as a human is sufficient for them to be considered worthy.

starting point, which is self and self-awareness. Each individual has an existing self. Recognizing one's self and one's existence also requires having self-awareness. In the case of unconditional self-worth, having a self and awareness of one's existence (i.e., existing and being aware of existence) is sufficient for being considered valuable. This unconditional self-worth inherently makes a person worthy. Building self-esteem is then constructed upon this value (Figure 3). However, in the case of conditional self-worth, simply existing and being aware of one's existence are not enough to be considered worthy. If an individual can build self-esteem, they can have conditional self-worth feelings on top of it. This cognitive structure puts individuals in a race to potentially deserve to be worthy, based on conditions such as being smart, rich, good, or beautiful, while ignoring their unconditional value. Perhaps in today's world, because individuals assess their own and others' values based on conditional terms, we see instances where the rich look down on the poor, whites discriminate against blacks, or A belittles B. On one hand, campaigns like Black Lives Matter and similar movements remind us that lives are unconditionally valuable, and various campaigns remind us that even individuals who commit crimes have basic human rights, and the rights of refugees are debated every day. However, the desired responses are not always achieved. When there is no awareness of unconditional self-worth, individuals subject themselves and others to lifelong internal debates in order to have self-worth and preserve this sense of worth.

Rogers (1959) emphasizes that individuals can progress towards self-actualization in social environments where they feel unconditionally good and valuable, independently of the experiences of others. Furthermore, psychological disorders and stress are stated to arise as a result of conditional values assimilating one's selfidentity. According to the examination conducted in this study, various mental disorders are closely associated with self-worth. Examples include eating disorders, bipolar disorder, narcissistic, and borderline personality disorders, depression, suicide, and dissociation disorders. Research indicates that intervention programs conducted with individuals suffering from mental disorders such as attention deficit hyperactivity disorder (ADHD) and eating disorders have significantly increased their self-worth and brought it to a healthier level. Moreover, a decrease in pathological symptoms has been observed in these studies. Therefore, it is recommended that self-worth intervention programs for mental disorders with a focus on self-worth be developed and implemented. Additionally, examining and enhancing self-worth should be incorporated into counseling and psychotherapy practices for both clinical and non-clinical groups and individuals. Sharing the results of these studies with the literature is considered crucial. Furthermore, preventive interventions with parents should be conducted to enable healthy and unconditional development of self-worth, which is a fundamental resource for mental health. Undertaking preventive and therapeutic efforts related to self-worth can significantly increase awareness at both individual and societal levels, thus contributing to overall mental well-being.

#### Suggestions for Increasing Self-Worth

One of the initial steps in enhancing self-worth is considered to be regulating the perception of "self-worth." In this study, when the concept of self-worth is considered conceptually, differences between conditional selfworth and unconditional self-worth have been discussed. As discussed above, adopting an "unconditional" perspective on one's self-worth can lead to an increase in the sense of self-worth. Rather than comparing oneself to others, recognizing one's own beauty, talents, and potentials (as shown in Figure 3, the dimensions of selfidentity and self-awareness) and attributing self-worth can facilitate the experience of self-worth. In this context, self-compassion practices as an intermediate factor, where individuals accept themselves as they are and work on self-improvement, can enhance self-worth. A study by Bırni and Begüm (2023) conducted to reduce perfectionism through self-compassion practices resulted in participants reporting an increase in their selfworth. This practice is an example of cognitive changes in the perception of self-worth. Another example is the intervention conducted by Huberty et al. (2008) to increase women's self-worth, which included both cognitive regulation and physical activity. The results of this study also showed a significant increase in participants' selfworth. Another study using cognitive regulation activities is the one by Hooley and St. Germain (2014). Researchers applied a cognitive intervention with a focus on increasing self-worth to reduce non-lethal self-harm behaviors and achieved positive and meaningful results. When examining these examples, it can be said that intervening cognitively in self-worth thoughts and creating a positive and accepting, i.e., unconditional, perception of self-worth is a promising practice for increasing individuals' self-worth.

In addition to the studies mentioned above, it has been observed that self-worth increases through music therapy (Sharma and Sharma 2015). The use of positive music may also be an effective method that individuals can use outside of the therapy process. Listening to positive music is among the strategies that can increase an

individual's subjective well-being (Eryılmaz 2017). However, the genre of music listened to can lead to significant variations. A study found that adolescents who compared themselves with music visuals and media had low self-worth (Kistler et al., 2010). In another study, it was found that listening to music at a high volume could stop rumination and increase self-worth because it "satiated" the senses (Batra and Ghoshal, 2017). Considering these results, it is recommended that further research be conducted to examine the effects of listening to positive music on self-worth.

Based on the findings of the interventions conducted, the following elements stand out for enhancing selfworth: (1) engaging in cognitive regulation aimed at self-worth perception, (2) conducting self-awarenessenhancing activities, (3) accepting individual differences, (4) practicing self-compassion, (5) engaging in physical activity, and (6) listening to music containing positive and accepting messages. These activities are methods that individuals can implement as part of self-help. Furthermore, for individuals in the field of psychotherapy or psychological counseling, there are method options that psychiatrists, psychologists, and psychological counselors can apply in counseling sessions to increase self-worth. Cognitive Therapy, Cognitive Behavioral Therapy, and Rational Emotive Behavior Therapy techniques can be used to cognitively regulate irrational or irrational thoughts related to self-worth in clients or patients.

# Conclusion

In this study, the concept of self-worth, which is an essential resource for mental health, has been examined in relation to various topics. The research covers the definitions of conditional and unconditional self-worth, their sources, their relationship with certain concepts, explanations through developmental theories, their association with psychopathology, their connection to culture, measurement methods, and intervention programs.

According to the examination conducted in this research, the structure of conditional self-worth has been discussed as a potentially challenging factor for an individual's mental health. Instead, Rogers' (1959) hypothesis of unconditional self-worth perception, which is theorized to positively nurture and empower an individual's psychology, has been presented. This hypothesis has been supported by current research findings, and furthermore, the study has discussed the literature's findings indicating that unhealthy and low self-worth structures are associated with various psychopathologies. Additionally, this study has explained the developmental formation of self-worth within the framework of various developmental theories, addressed the influence of culture on self-worth, provided insights into self-worth measurement tools, and discussed self-worth enhancement interventions in the literature. Moreover, recommendations have been made for enhancing self-worth within the context of self-help or through psychotherapy and psychological counseling.

As a result of the examination conducted in this research, it has been discussed that there may be a significant relationship between depression, suicide, dissociation, bipolar disorder, narcissism, and borderline personality disorders with self-worth. As indicated in the literature, interventions aimed at enhancing self-worth could be an effective method for reducing and improving the symptoms of various mental disorders. For future research, it is recommended to investigate the relationship between mental disorders and self-worth quantitatively and qualitatively, and to conduct experimental studies on interventions to enhance self-worth in individuals with psychopathology. It is also suggested to examine the impact of self-worth enhancement interventions on reducing pathological symptoms in individuals displaying psychopathological symptoms.

Another suggestion is to investigate the impact of conditional and unconditional self-worth perceptions on mental well-being in individuals. For example, according to studies in the literature, individuals with narcissistic and antisocial personality disorders may have distorted self-worth perceptions, while in bipolar and borderline individuals, the conditional self-worth structure can lead to abnormalities in mood transitions. In this case, intervening in an individual's self-worth perception to transform it into a healthy structure could be an effective method for reducing psychopathology. Having a healthy self-worth structure is considered crucial for healthy adult patterns by many developmental theories such as Psychoanalytic theory, Attachment theory, and Transactional analysis theory. To change self-worth perception and establish a healthy structure in individuals where a healthy self-worth structure did not develop during childhood, techniques from Cognitive Therapy, Cognitive-Behavioral Therapy, and Rational Emotive Behavior Therapy are recommended. Developing self-worth enhancement programs focused on self-worth in therapies such as Cognitive Therapy, and applying these programs to individuals with psychopathology, is crucial. The results obtained can contribute significantly to improving the mental health of individuals. Additionally, conducting studies to accept individual differences and increase social awareness regarding the value attributed to human beings with a humane perspective is

recommended, and these studies should be communicated to relevant official channels and non-governmental organizations. The impact of self-worth enhancement programs on psychopathology symptoms can also provide valuable findings for community mental health and prevention efforts.

#### References

Aggarwal I (2013) The role of antisocial personality disorder and antisocial behavior in crime. Inquiries Journal, 5:1-2.

- Ainsworth MDS, Blehar MC, Waters E, Wall S (1978) Patterns of Attachment: A Psychological Study of the Strange Situation. Hillsdale, NJ, Erlbaum.
- Allen B, Leary MR (2010) Self-compassion, stress, and coping. Soc Personal Psychol Compass, 4:107-118.

American Foundation for Suicide Prevention (2022) Suicide statistics. https://afsp.org/suicide-statistics/ (Accessed 28.12. 2022).

American Psychology Association Dictionary (2023) Self-awareness. https://dictionary.apa.org/self-awareness (Accessed 01.03.2023).

Arseven A (2016) Öz yeterlilik: Bir kavram analizi. Electronic Turkish Studies, 11:63-80.

- Aslan Yılmaz H (2022) Self-awareness and self-consciousness: a review from a social psychology perspective. Psikiyatride Güncel Yaklaşımlar, 14: 437-445.
- Aslan-Yılmaz H (2016) Bir derleme: Benlik kavramına ilişkin bazı yaklaşımlar ve tanımlamalar. Dumlupınar Üniversitesi Sosyal Bilimler Dergisi, 48:79-89.
- Ateş H, Durmaz S (2016) Fen bilgisi öğretmen adaylarının öz-değer inançlarının bazı değişkenler açısından incelenmesi. Ahi Evran Üniversitesi Kırşehir Eğitim Fakültesi Dergisi, 17:517-533.
- Bardone-Cone AM, Lin SL, Butler RM (2017) Perfectionism and contingent self-worth in relation to disordered eating and anxiety. Behav Ther, 48:380-390.

Bardone-Cone AM, Thompson KA, Miller AJ (2020) The self and eating disorders. J Pers, 88:59-75.

- Batey H, May J, Andrade J (2010) Negative intrusive thoughts and dissociation as risk factors for self-harm. Suicide Life Threat Behav, 40:35-49.
- Batra RK, Ghoshal T (2017) Fill up your senses: A theory of self-worth restoration through high-intensity sensory consumption. J Consum Behav, 44:916-938.
- Baumeister RF, Campbell JD, Krueger JI, Vohs KD (2003) Does high self-esteem cause better performance, interpersonal success, happiness, or healthier lifestyles?. Psychol Sci Public Interest, 4:1-44.
- Beck AT, Steer RA, Kovacs M, Garrison B (1985) Hopelessness and eventual suicide: A 10-year prospective study of patients hospitalized with suicidal ideation. Am J Psychiatry, 142:559-563.
- Berglas S, Jones EE (1978) Drug choice as a self-handicapping strategy in response to noncontingent success. J Pers Soc Psychol, 36:405-417.
- Besser A, Priel B (2010) Grandiose narcissism versus vulnerable narcissism in threatening situations: Emotional reactions to achievement failure and interpersonal rejection. J Soc Clin Psychol, 29: 874.
- Birni G, Eryilmaz A (2022a) Enhancing well-being of the married: Investigating marital satisfaction, self-compassion and happiness increasing strategies. Turkish Psychological Counseling and Guidance Journal, 12:650-669.
- Birni G, Eryılmaz A (2022b) Positive psychotherapy perspective on suicide: Investigating suicidal thoughts and suicide probability. Turkish International Journal of Special Education and Guidance & Counselling, 11:135-148.
- Birni G, Satici B (2023) A compassion focused intervention for trait perfectionism in non-clinical settings: A pilot study. Curr Psychol, doi:10.1007/s12144-023-05118-7.
- Björk T, Wallin K, Pettersen G (2012) Male experiences of life after recovery from an eating disorder. Eat Disord, 20:460-468.
- Booth-Laforce C, Oh W, Kim A H, Rubin K H, Rose-Krasnor L, Burgess K (2006) Attachment, self-worth, and peer-group functioning in middle childhood. Attach Hum Dev, 8:309-325.
- Bowlby J (1982) Attachment and loss: retrospect and prospect. Am J Orthopsychiatry, 52:664-678.
- Brand BL, McNary SW, Myrick AC, Classen CC, Lanius R, Loewenstein RJ et al. (2013) A longitudinal naturalistic study of patients with dissociative disorders treated by community clinicians. Psychol Trauma, 5:301-308.
- Bretherton I (1985) Attachment theory: Retrospect and prospect. Monogr Soc Res Child Dev, 50:3-35.
- Brown JD, Marshall MA (2001) Self-esteem and emotion: Some thoughts about feelings. Pers Soc Psychol Bull, 27:575-584.
- Brown JD, Marshall MA (2002) Self-esteem: It's not what you think (Unpublished manuscript). Seattle, University of Washington.
- Brown JD, Marshall MA (2006) The three faces of self-esteem. In Self-Esteem Issues and Answers: A Sourcebook of Current Perspectives (Eds M H Kernis):4-9. London, UK, Psychology Press.
- Brown RP, Bosson JK (2001) Narcissus meets Sisyphus: Self-love, self-loathing, and the never-ending pursuit of self-worth. Psychol Inq, 12:210-213.

Brunnhuber S (2003) Differential-diagnosis of obsessive-compulsive symptoms in the borderline personality disorder. Am J Psychother, 57:460-470.

Burger JM (2016) Kişilik (Çev. İD Erguvan Sarıoğlu). İstanbul, Kaknüs Yayınları.

- Burwell RA, Shirk SR (2006) Self processes in adolescent depression: The role of self-worth contingencies. J Res Adolesc, 16:479-490.
- Butler RJ, Gasson SL (2005) Self esteem/self concept scales for children and adolescents: A review. Child Adolesc Ment Health, 10:190-201.
- Chamberlain JM, Haaga DA (2001) Unconditional self-acceptance and psychological health. J Ration Emot Cogn Behav Ther, 19:163-176.
- Cheng ST, Kwan KW (2008) Attachment dimensions and contingencies of self-worth: The moderating role of culture. Pers Individ Dif, 45:509-514.
- Collins DR, Stukas AA (2008) Narcissism and self-presentation: The moderating effects of accountability and contingencies of self-worth. J Res Pers, 42:1629-1634.
- Coopersmith S (1967) The Antecedents of Self-Esteem. San Francisco, WH Freeman.

Covington M V (1984) The self-worth theory of achievement motivation: Findings and implications. Elem Sch J, 85:5-20.

Covington MV, Beery R (1976) Self-worth and School Learning. New York, Holt Rinehart & Winston.

- Covington MV, Omelich CL (1981) As failures mount: Affective and cognitive consequences of ability demotion in the classroom. J Educ Psychol, 73:796-808.
- Crocker J (1999) Social stigma and self-esteem: Situational construction of self-worth. J Exp Soc Psychol, 35:89-107.
- Crocker J (2002) Contingencies of self-worth: Implications for self-regulation and psychological vulnerability. Self Identity, 1:143-149.
- Crocker J, Knight KM (2005) Contingencies of self-worth. Curr Dir Psychol Sci, 14:200-203.
- Crocker J, Wolfe CT (2001) Contingencies of self-worth. Psychol Rev, 108:593-623.
- Crocker J, Brook AT, Niiya Y, Villacorta M (2006) The pursuit of self-esteem: Contingencies of self-worth and self-regulation. J Pers, 74:1749-1772.
- Crocker J, Luhtanen RK, Cooper ML, Bouvrette A (2003) Contingencies of self-worth in college students: theory and measurement. J Pers Soc Psychol, 85:894-908.
- Cross SE, Madson L (1997) Models of the self: self-construals and gender. Psychol Bull, 122:5-37.
- Crowell JA, Waters E (1994) Bowlby's theory grown up: The role of attachment in adult love relationships. Psychol Inq, 5:31-34.
- Crowne DP, Crowne DP, Marlowe D (1964) The Approval Motive: Studies in Evaluative Dependence. Hoboken, NJ, Wiley.
- Çetin B, Akın A, Eroğlu Y (2011) Koşullu öz-değer ölçeğinin geçerlik ve güvenirliği. Uluslararası İnsan Bilimleri Dergisi, 8:410-426.
- Davidson K M (2008) Cognitive-behavioural therapy for personality disorders. Psychiatry, 7:117-120.
- De Leon L (2002) Multicultural literature: Reading to develop self-worth. Multicultural Education, 10:49-51.
- Deniz ME, Yıldırım Kurtuluş H (2023) Self-efficacy, self-love, and fear of compassion mediate the effect of attachment styles on life satisfaction: A serial mediation analysis. Psychol Rep, doi: 10.1177/00332941231156809.
- Drummond MJ (2002) Men, body image, and eating disorders. Int J Mens Health, 1:89-103.
- Erbaş S (2015) Yeme tutumlarının nesne ilişkileri kuramı çerçevesinde incelenmesi. (Doktora tezi) Ankara, Hacettepe Üniversitesi.
- Erikson EH (1950) Childhood and Society. New York, WW Norton.
- Erikson EH, Erikson JM (1998) The Life Cycle Completed (extended version). New York, WW Norton.
- Eryılmaz A (2017) Yetişkinler için Mutluluğu Artırma Stratejileri ölçeğinin geliştirilmesi. Journal of Mood Disorders, 7:116-126.
- Eryılmaz A, Atak H (2014) Ergen öznel iyi oluşunun, öz saygı ve iyimserlik eğilimi ile ilişkisinin incelenmesi. Elektronik Sosyal Bilimler Dergisi, 10:170-181.
- Fleming CE, Resick PA (2016) Predicting three types of dissociation in female survivors of intimate partner violence. J Trauma Dissociation, 17:267-285.
- Forrest LN, Jones PJ, Ortiz SN, Smith AR (2018) Core psychopathology in anorexia nervosa and bulimia nervosa: A network analysis. Int J Eat Disord, 51:668-679.
- Foster J D, Kernis MH, Goldman B M (2007) Linking adult attachment to self-esteem stability. Self Identity, 6:64-73.
- Frame K, Kelly L, Bayley E (2003) Increasing perceptions of self-worth in preadolescents diagnosed with ADHD. J Nurs Scholarsh, 35:225-229.
- Fredrickson BL, Roberts TA (1997) Objectification theory: Toward understanding women's lived experiences and mental health risks. Psychol Women Q, 21:173-206.
- Freud A (1946) The Ego and the Mechanisms of Defense. Madison, CT, International Universities Press.
- Freud S (1910) Three Contributions to the Theory of Sex. New York, J. of Nerv. and Ment. Disease Publ.

Friedrichs J (2016) An intercultural theory of international relations: How self-worth underlies politics among nations. International Theory, 8:63-96.

Gabbard GO (2014) Psychodynamic Psychiatry in Clinical Practice. Washington DC, American Psychiatric Publishing.

- Granek L (2007) "You're a whole lot of person" Understanding the journey through anorexia to recovery: A qualitative study. Humanist Psychol, 35:363–385.
- Griffin D W, Bartholomew K (1994) Models of the self and other: Fundamental dimensions underlying measures of adult attachment. J Pers Soc Psychol, 67:430-445.
- Guvenir T, Tas, F V (2008) Nesne ilişkileri kuramı. In Çocuk ve Ergen Psikiyatrisi Temel Kitabı (Ed FÇ Çetin):116-122. Ankara, Hekimler Yayın Birliği.
- Harter S (1986) Cognitive-developmental processes in the integration of concepts about emotions and the self. Soc Cogn, 4:119-151.
- Harter S (2000) Is self-esteem only skin-deep? The inextricable link between physical appearance and self-esteem. Reclaiming Children and Youth, 9:133-138.
- Harter S, Marold D B (1991) A model of the determinants and mediational role of self-worth: Implications for adolescent depression and suicidal ideation. In The Self: Interdisciplinary Approaches (Eds J Strauss, GR Goethals):66-92. Cham, Springer.
- Hazan C, Shaver P (1987) Romantic love conceptualized as an attachment process. J Pers Soc Psychol, 52:511–524.
- Hooley JM, St. Germain SA (2014) Nonsuicidal self-injury, pain, and self-criticism: Does changing self-worth change pain endurance in people who engage in self-injury? Clin Psychol Sci, 2:297-305.
- Huberty JL, Vener J, Sidman C, Meendering J, Blissmer B, Schulte L et al. (2008) Women bound to be active: A pilot study to explore the feasibility of an intervention to increase physical activity and self-worth in women. Women Health, 48:83-101.
- Ironside ML, Johnson SL, Carver CS (2020) Identity in bipolar disorder: Self-worth and achievement. J Pers, 88:45-58.

James W (1890) The Principles of Psychology. New York, Henry Holt.

- Joseph S, Linley PA (2004) Positive therapy: A positive psychological theory of therapeutic practice. In Positive Psychology in Practice (Eds PA Linley, S Joseph):354–368). Hoboken, NJ, Wiley.
- Josephs R A, Markus H R, Tafarodi R W (1992) Gender and self-esteem. J Pers Soc Psychol, 63:391-402.
- Karaşar B (2020) Mediator role of the need for social approval in the relationship between perfectionism and codependency: A structural equation modeling study. International Journal of Contemporary Educational Research, 7:40-47.
- Karaşar B, Öğülmüş S (2016) Sosyal onay ihtiyaci ölçeği: Geçerlik ve güvenirlik analizi. Ege Eğitim Dergisi, 17:84-104.
- Kenny ME, Sirin SR (2006) Parental attachment, self-worth, and depressive symptoms among emerging adults. J Couns Dev, 84:61-71.
- Kernis MH (2005) Measuring self-esteem in context: The importance of stability of self-esteem in psychological functioning. J Pers, 73:1569-1605.
- Kesebir S, İnanç L, Bezgin ÇH, Cengiz F (2013) Kadınlarda bipolar bozukluk. Psikiyatride Güncel Yaklaşımlar, 5:220-231.
- Kim YH, Cohen D, Au WT (2010) The jury and abjury of my peers: the self in face and dignity cultures. J Pers Soc Psychol, 98:904-916.
- King CA, Naylor MW, Segal HG, Evans T, Shain BN (1993) Global self-worth, specific self-perceptions of competence, and depression in adolescents. J Am Acad Child Adolesc Psychiatry, 32:745-752.
- Kistler M, Rodgers KB, Power T, Austin EW, Hill LG (2010) Adolescents and music media: Toward an involvementmediational model of consumption and self-concept. J Res Adolesc, 20:616-630.
- Kopala-Sibley DC, Zuroff DC, Russell JJ, Moskowitz DS, Paris J (2012) Understanding heterogeneity in borderline personality disorder: differences in affective reactivity explained by the traits of dependency and self-criticism. J Abnorm Psychol, 121:680-691.
- Krawitz R (2012) Behavioural treatment of severe chronic self-loathing in people with borderline personality disorder. Part 2: Self-compassion and other interventions. Australas Psychiatry, 20:501-506.
- Lahav Y, Bellin ES, Solomon Z (2016) Posttraumatic growth and shattered world assumptions among ex-POWs: the role of dissociation. Psychiatry, 79:418-432.
- Lakey CE, Hirsch JK, Nelson LA, Nsamenang SA (2014) Effects of contingent self-esteem on depressive symptoms and suicidal behavior. Death Stud, 38:563-570.
- Lampard AM, Tasca GA, Balfour L, Bissada H (2013) An evaluation of the transdiagnostic cognitive-behavioural model of eating disorders. Eur Eat Disord Rev, 21:99-107.
- Leary MR, Baumeister RF (2000) The nature and function of self-esteem: Sociometer theory. Adv Exp Soc Psychol, 32:1-62.
- Leary MR, Tate EB, Adams CE, Batts Allen A, Hancock J (2007) Self-compassion and reactions to unpleasant self-relevant events: the implications of treating oneself kindly. J Pers Soc Psychol, 92:887-904.
- Liao KYH, Wei M (2014) Academic stress and positive affect: Asian value and self-worth contingency as moderators among Chinese international students. Cultur Divers Ethnic Minor Psychol, 20:107-115.

- Lilly MM (2011) The contributions of interpersonal trauma exposure and world assumptions to predicting dissociation in undergraduates. J Trauma Dissociation, 12:375-392.
- Liu CH, Chiu YHC, Chang JH (2017) Why do easterners have lower well-being than westerners? The role of others' approval contingencies of self-worth in the cross-cultural differences in subjective well-being. J Cross Cult Psychol, 48:217-224.
- Mackrill T (2010) Goal consensus and collaboration in psychotherapy: An existential rationale. J Humanist Psychol, 50:96-107.
- Moneta GB, Schneider B, Csikszentmihalyi M (2001) A longitudinal study of the self-concept and experiential components of self-worth and affect across adolescence. Appl Dev Sci, 5:125-142.
- Neff, K (2003) Self-compassion: An alternative conceptualization of a healthy attitude toward oneself. Self Identity, 2:85-101.
- Neff KD (2011) Self-compassion, self-esteem, and well-being. Soc Personal Psychol Compass, 5:1-12.
- Neff KD, Vonk R (2009) Self-compassion versus global self-esteem: Two different ways of relating to oneself. J Pers, 77:23-50.
- Neff KD, Pisitsungkagarn K, Hsieh YP (2008) Self-compassion and self-construal in the United States, Thailand, and Taiwan. J Cross Cult Psychol, 39:267-285.
- Nelson P (1989) Ethnic differences in intrinsic/extrinsic religious orientation and depression in the elderly. Arch Psychiatr Nurs, 3:199-204.
- Nuttall J (2006) The existential phenomenology of transactional analysis. Transactional Analysis Journal, 36:214-227.
- Öztürk E (2020) Travma ve Dissosiyasyon: Psikotravmatoloji Temel Kitabı (2. Baskı). İstanbul, Nobel Tıp Kitabevi.
- Öztürk E, Derin G (2021) Dissosiyatif bozukluklarda kendine zarar verme davranışları ve intihar eğilimleri: travma perspektifinden psikoterapötik bir değerlendirme. Aydın İnsan ve Toplum Dergisi, 7:9-31.
- Pelham B W, Swann W B (1989) From self-conceptions to self-worth: on the sources and structure of global self-esteem. J Pers Soc Psychol, 57:672-680.
- Petty KH, Davis CL, Tkacz J, Young-Hyman D, Waller JL (2009) Exercise effects on depressive symptoms and self-worth in overweight children: A randomized controlled trial. J Pediatr Psychol, 34:929-939.
- Prieler M, Choi J, Lee HE (2021) The relationships among self-worth contingency on others' approval, appearance comparisons on Facebook, and adolescent girls' body esteem: A cross-cultural study. Int J Environ Res Public Health, 18:901-913.
- Proctor C (2017) Conditions of worth (Rogers). In Encyclopedia of Personality and Individual Differences (Eds V Zeigler-Hill, TK Shackelford). Cham, Springer.
- Rieger E, Prasetya K, Christensen B K, Shou Y (2021) Identifying the contingencies of self-worth associated with eating disorder symptoms: The use of choice-based conjoint analysis. Int J Eat Disord, 54:2167-2179.
- Robinson S, Kissane DW, Brooker J, Hempton C, Burney S (2017) The relationship between poor quality of life and desire to hasten death: a multiple mediation model examining the contributions of depression, demoralization, loss of control, and low self-worth. J Pain Symptom Manage, 53:243-249.
- Rogers CR (1959) A theory of therapy, personality, and interpersonal relationships as developed in the client-centered framework. In Psychology: A Study of a Science, Formulations of the Person and the Social Context (Ed S Koch):184-256. New York, McGraw-Hill.
- Rosenberg M (1965) Society and the Adolescent Self-Image. Princeton, NJ, Princeton University Press.
- Rosenberg M, Schooler C, Schoenbach C, Rosenberg F (1995) Global self-esteem and specific self-esteem: Different concepts, different outcomes. Am Sociol Rev, 60:141-156.
- Sargent JT, Crocker J, Luhtanen RK (2006) Contingencies of self-worth and depressive symptoms in college students. J Soc Clin Psychol, 25:628-646.
- Sasaki JY, Ko D, Kim HS (2014) Culture and self-worth: Implications for social comparison processes and coping with threats to self-worth. In Communal Functions of Social Comparison (Eds Z Kriazn, FX Gibbons):230-252. Cambridge, UK, Cambridge University Press.
- Sharma M, Sharma A (2015) Disturbed sleep patterns and self worth in youth: A music therapy intervention. Voices of Research, 4:28-32.
- Shimizu M, Niiya Y, Shigemasu E (2016) Achievement goals and improvement following failure: Moderating roles of selfcompassion and contingency of self-worth. Self Identity, 15:107-115.
- Shrauger JS, Schoeneman TJ (1979) Symbolic interactionist view of self-concept: Through the looking glass darkly. Psychol Bull, 86:549-573.
- Snyder CR, Lopez SJ (2001) Handbook of Positive Psychology. Oxford, UK, Oxford University Press.
- Solomon C (2003) Transactional analysis theory: The basics. Transactional Analysis Journal, 33:15-22.
- Solomon S, Greenberg J, Pyszczynski T (1991) A terror management theory of social behavior: the psychological functions of self-esteem and cultural worldviews. Adv Exp Soc Psychol, 24:93-159.
- Spilka B, Shaver PR, Kirkpatrick L A (2019) A general attribution theory for the psychology of religion. In The Psychology of Religion (Eds B Spilka, D McIntosh):153-170. London, UK, Routledge.

- Stapleton P, Crighton GJ, Carter B, Pidgeon A (2017) Self-esteem and body image in females: The mediating role of selfcompassion and appearance contingent self-worth. Humanist Psychol, 45:238-257.
- Stepp SD, Pilkonis PA, Yaggi KE, Morse JQ, Feske U (2009) Interpersonal and emotional experiences of social interactions in borderline personality disorder. J Nerv Ment Dis, 197:484-491.
- Sturman ED, Flett GL, Hewitt PL, Rudolph SG (2009) Dimensions of perfectionism and self-worth contingencies in depression. J Ration Emot Cogn Behav Ther, 27:213-231.
- Sümer N, Güngör D (1999) Yetişkin bağlanma stilleri ölçeklerinin Türk örneklemi üzerinde psikometrik değerlendirmesi ve kültürlerarası bir karşılaştırma. Türk Psikoloji Dergisi, 14:71-106.
- Şahin HN, Batıgün DA, Uğurtaş S (2002) Kısa Semptom Envanteri (KSE): Ergenler için kullanımının geçerlik, güvenilirlik ve faktör yapısı. Turk Psikiyatri Derg, 13:125-135.

Thompson T (1994) Self-worth protection: Review and implications for the classroom. Educ Rev (Birm), 46:259-274.

- Uchida Y (2008) Contingencies of self-worth in Japanese culture: validation of the Japanese contingencies of self-worth scale. Shinrigaku Kenkyu, 79:250-256.
- Valle A, Cabanach RG, Rodríguez S, Núñez JC, González-Pienda JA (2005) Self-worth protection strategies in higher educational students: Exploring a model of predictors and consequences. In New Directions in Higher Education (Ed R Nata):99-126. New York, Nova Science Publishers.
- van der Hout R, Barnasconi F, Noorloos J, de Bruin R, van Slobbe-Maijer K, Legerstee J et al. (2023) Treatment outcomes of dialectical behaviour therapy for adolescents presenting with characteristics of borderline personality disorder: A naturalistic study. Clin Child Psychol Psychiatry, 28:707-720.
- Webb RE, Rosenbaum PJ (2019) The varieties of procrastination: with different existential positions different reasons for it. Integr Psychol Behav Sci, 53:525-540.
- Wichstrøm L (2000) Predictors of adolescent suicide attempts: a nationally representative longitudinal study of Norwegian adolescents. J Am Acad Child Adolesc Psychiatry, 39:603-610.
- Wiekens CJ (2009) Self-awareness: Combining the" hard problem" with an" aggregate of loosely related subtopics" (Doctoral dissertation). Tilburg, Tilburg University.
- Williams CF, Bustamante EE, Waller JL, Davis CL (2019) Exercise effects on quality of life, mood, and self-worth in overweight children: the SMART randomized controlled trial. Transl Behav Med, 9:451-459.

WHO (2022) Suicide. https://www.who.int/news-room/fact-sheets/detail/suicide (Accessed 28.12.2022).

- Yalçınkaya M, Taner M, Demirci E (2019). Ergenlerde sosyal onay ve iyilik hallerinin incelenmesi. Folklor/Edebiyat, 25:716-729.
- Yao J, Ramirez-Marin J, Brett J, Aslani S, Semnani-Azad Z (2017) A measurement model for dignity, face, and honor cultural norms. Manag Organ Rev, 13:713-738.
- Yiğit A (2021) Beliren yetişkinlerde öz-değer koşulları ile fonksiyonel olmayan tutumlar arasındaki ilişkinin incelenmesi (Yüksek lisans tezi). Samsun, Ondokuz Mayıs Üniversitesi.
- Zeigler–Hill V, Abraham J (2006) Borderline personality features: Instability of self–esteem and affect. J Soc Clin Psychol, 25:668-687.
- Zeigler-Hill V, Besser A (2013) A glimpse behind the mask: Facets of narcissism and feelings of self-worth. J Pers Assess, 95:249-260.
- Zhang H, Carr ER, Garcia-Williams AG, Siegelman AE, Berke D, Niles-Carnes LV etal. (2018) Shame and depressive symptoms: Self-compassion and contingent self-worth as mediators?. J Clin Psychol Med Settings, 25:408-419.

Authors Contributions: The author(s) have declared that they have made a significant scientific contribution to the study and have assisted in the preparation or revision of the manuscript

Peer-review: Externally peer-reviewed.

Conflict of Interest: No conflict of interest was declared.

Financial Disclosure: No financial support was declared for this study.