

Self-Concept and Self-Esteem in Adolescents  
with Learning Disabilities


by

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Abstract

Self-concept and self-esteem are two crucial components of our lives. These components can shape how we develop during childhood and affect who we become as adults. During childhood and adolescence, self-concept and self-esteem begin to develop. As such, it is important for adolescents to develop a positive self-concept and high self-esteem in order to better their chances for a happy and satisfying adulthood. Of particular interest are students with learning disabilities (LD); these students encounter a more challenging adolescence than many others. Research shows that students with LD commonly have more negative self-concepts than students without LD. The purpose of this literature review is to examine the differences between self-concept and self-esteem, and their effects during adolescent development. Through this literature review, empirically based intervention strategies to better the self-concept and self-esteem of students with learning disabilities will be examined

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## Chapter 1: Introduction

As a child goes through adolescence, he or she is subjected to many different challenges, stressors, and opportunities. An important factor in handling these challenges is a positive self-concept and high self-esteem. Through adolescence, schools should be preparing students to become a comfortable part of the general population, easily adjusting to their surroundings. A population of students that requires closer attention are students who have been diagnosed with a learning disability. Students with learning disabilities are estimated to represent 2% to 10% of the student population (American Psychiatric Association, 1994). Students with learning disabilities struggle with self-concept and self-esteem, which in turn can lead to adjustment difficulties, substance abuse, depression, and suicide ideation (Saghatoleslami, 2005). As psychological service professionals, it is important to monitor the self-worth of students and help improve their self-concept and self-esteem.

Self-concept is the perception that individuals have of their own worth. This includes a composite of their feelings, a generalized view of their social acceptance, and their personal feelings about themselves (Belmore & Cillessen, 2006). High self-esteem was defined by Walz (1991) as appreciating oneself and acknowledging self-worth, self-control, and competence, with a corresponding positive attitude and high self-evaluation. Opposite to this, Brendgen (2002) defined low self-esteem as having low self-evaluations, self-criticism, and feelings of hopelessness. Both self-concept and self-esteem are fluid through a child's development and can be influenced by positive parental involvement.

Self-concept develops as a result of one's experiences with the environment and one's evaluations of these experiences. Additionally, opinions of significant others, casual attributions, and concrete feedback play a crucial role in the process of self-concept development (Shavelson,

Hubner, & Stanton, 1976). The formative middle-school years of a child's life are an important time for the child to develop a positive self-concept. Self-concept is important because it contributes to many different facets of a person's life, from childhood to adulthood.

Self-esteem can be defined in numerous ways. Most commonly, self-esteem is defined on the basis of two psychological processes: evaluation and affect (Mruk, 2006). Evaluation accentuates the role of cognition, while affect emphasizes the role of feelings as they pertain to self-esteem. As such, Mruk (2006) defines four basic ways that self-esteem is defined: (1) as a certain attitude, (2) based on discrepancy, (3) as a psychological response a person holds toward himself or herself, and (4) as a function of personality. In the attitudinal definition, it involves positive or negative cognitive, behavioral, and emotional reactions. When people base their self-esteem on discrepancy, they are measuring the difference between what they see as their ideal self and their perceived self. The closer these two percepts are, the higher their self-esteem is thought to be. The psychological response a person holds towards himself or herself is described as feeling-based, rather than attitudinal alone. Finally, in the function of personality definition, self-esteem is viewed as part of a system that is concerned with motivation or self-regulation, or both. While there are numerous different definitions for self-esteem, even outside of this spectrum, the listed definitions cover the broadest range of definitions.

Self-concept and self-esteem are two key components to a fulfilling childhood. In particular, knowing how learning disabilities (LD) affect self-concept and self-esteem can vastly improve a child's sense of worth. Just as self-esteem has a range of definitions, self-concept can be measured in varying realms (Shapka & Keating, 2005). Of particular importance are academic self-concepts in the school context. Two key components in academic self-concept are verbal and mathematical self-concept (Marsh, Byrne, & Shavelson, 1988). If students have

difficulty in either of these two facets, their academic self-concept will diminish. These two realms of academic self-concept are also very important for students with LD.

Students with LD have been shown to have lower self-concepts than those of their peers without LD (Möller, Streblow, & Pohlmann, 2009). Furthermore, it has been shown that students with LD in inclusive schools have lower self-concepts than those of their peers in schools for students with special educational needs (Möller et al., 2009). This is due to the social comparisons that students with LD make when attending inclusive schools (Crabtree & Rutland, 2001).

Jarvis and Justice (1992) have shown that students with learning disabilities are significantly less accurate at interpreting social situations than their non-learning disabled peers. The authors also found that students with learning disabilities had significantly lower self-concepts. This correlation shows the importance of properly understanding social situations during adolescence. When a student is unable to fully connect with others, their self-concept and self-esteem suffer. In future studies, remediation efforts should be partially be focused on overcoming social deficits by improving social skills in adolescents. Having a positive self-concept and high self-esteem are important factors in leading a happy and healthy life. When an adolescent with a learning disability does not receive the proper intervention, the problems that they are facing go untreated and lead to equally frustrating issues as an adult with a learning disability. By properly diagnosing students with learning disabilities and providing evidence based interventions, students will have a higher probability of successfully coping with their learning disability as an adult.

One solution to the problem of negative self-concept and low self-esteem is positive and frequent family involvement. Ochoa, Lopez, and Emler (2007) found a link between open

communication between parents and adolescents' positive family self-concept, which in turn related to a positive academic self-concept. Positive family communication is key in helping adolescents maintain a positive self-concept and high self-esteem. By enhancing academic self-concepts, educators will then be more apt to foster learning in schools (Möller et al., 2009). Möller et al. (2009) emphasized the importance of these findings on academic self-concept in relation to learning, when considering students with learning disabilities. Additionally shown was that when students with a learning disability are in an inclusive classroom, they are more apt to set themselves unrealistic goals. This will more often than not result in negative effects on their academic self-concept as well as emotional well-being. The key difference between students with learning disabilities in an inclusive classroom is their academic self-concept (Prout & Prout, 1996).

When schools properly identify students with learning disabilities, appropriate considerations need to be taken to provide those students with the best learning environment possible. An inclusive classroom can be detrimental to the self-concept of a student with LD (Möller et al., 2007). While this is important to consider, it is essential to understand that not all students respond in the same ways. Because every student is unique, a distinct approach needs to be taken when providing intervention strategies. To better understand each student, with and without LD, a school may perform an interpersonal competence profile (Farmer, Rodkin, Pearl, & Acker, 1999). These two profiles include the Interpersonal Competence Scale-Teacher (ICS-T) and the Interpersonal Competence Scale-Self (ICS-S). Using these interpersonal competence scales, the school will gain knowledge about the individuality of each student. When a school knows the specific interpersonal competence profile of a student, the assessment and intervention process can be uniquely honed to best serve that student's learning style (Farmer et al., 1999).



For students with LD to succeed in the classroom, and eventually as adults, these special considerations need to be taken.

It is important for schools and psychological service professionals to clearly delineate between self-concept and self-esteem. When this is done, a better analysis of the student can be made. With this improved analysis, appropriate intervention strategies can be used to enhance their self-concept and raise their self-esteem. As schools begin to better understand the unique learning styles of each student, the academic atmosphere will flourish and students' grades can be improved. With improved grades comes improved self-esteem, and as an adolescent's self-esteem improves, so does his or her overall sense of happiness (Elbaum & Vaughn, 2001).

### **Statement of the Problem**

When students have negative self-concept and a low self-esteem, their emotional welfare suffers. While some research has been directed towards self-concept during adolescence, there is rarely a clear delineation between self-concept and self-esteem. By clearly delineating between these two terms, a higher probability of validity will ensue. Additionally, much of the current research is directed towards the general population of adolescents. It is important to consider the impact that this research has on students with LD, as it is estimated that between 2% and 10% of the student population have LD (American Psychiatric Association, 1994). For many students with LD, it can be frustrating to cope with their disability within the general academic setting. Research has shown that students with LD have a more negative self-concept compared to students without LD. Further research is needed to determine the best intervention strategies for students with LD, in direct correlation to the effect these intervention strategies have on their self-concept.

## **Statement of Purpose**

Much of the research to date lacks a clear delineation between the two constructs of self-concept and self-esteem. Frequently, studies will interchange the terms, without fully examining the key differences between the two. While both concepts have a direct relation to our general well-being, the two are very different. Self-concept pertains to a student's overall sense of worth. Self-esteem concerns students' feelings about themselves, typically involving the extent to which they prize, value, approve or like themselves, including the overall affective evaluation of one's worth, value or importance (Blascovich & Tomaka, 1991).

The purpose of this literature review is to clearly delineate between self-concept and self-esteem and to document the similarities and differences between students with learning disabilities and students in general education, specifically in regards to their self-concept and self-esteem. The main focus of this literature review will be on students with a learning disability, and the effect of self-concept and self-esteem on their quality of life. Additionally, ways to raise self-esteem and promote a positive self-concept in students with learning disabilities will be investigated. In this review, the level of parental involvement and its affect on self-concept and self-esteem will also be explored. Data will be collected through a comprehensive review of literature available during the Fall of 2010.

## **Research Questions**

The following research questions are addressed in this literature review:

1. What is the difference between self-concept and self-esteem, and why are both important?
2. How do students with learning disabilities and students who have not been diagnosed with a learning disability compare in regards to self-concept and self-esteem?

3. Does the level of positive teacher and parental involvement have an affect on a student's self-concept and self-esteem?

### **Definition of Terms**

The following terms occur frequently in the studies used for this literature review.

**Academic self-concept** – A relatively stable set of attitudes and feelings reflecting self-perception, self-evaluation and attitudes concerning performance in basic school-related tasks like reading, writing, spelling, and math (Chapman & Boersma, 1991).

**High self-esteem** – Appreciating oneself and acknowledging self-worth, self-control and competence, with a corresponding positive attitude and high self-evaluation (Walz, 1991).

**Interpersonal Competence Scale-Teacher (ICS-T)** – The ICS-T is an 18-item questionnaire (including two detractor items) consisting of seven-point Likert scales that teachers completed for each participant in their class.

**Interpersonal Competence Scale-Self (ICS-S)** – The ICS-S is a 21-item questionnaire consisting of the same 18 items as the ICS-T plus 3 additional detractor items.

**Low self-esteem** – Low self-evaluations, self-criticism and feelings of hopelessness (Brendgen, 2002).

**Multidimensional Self-Concept Scale (MSCS)** – A self report that assesses the self-concept in individuals between grades 5-12 through 150 test items. (Montgomery, 1994).

**Piers-Harris Children's Self-Concept Scale** – A measure of children's self-concept. This scale can be used on students in grades four through twelve, with students who have a third grade reading level or higher. It is an 80-item scale that has children respond *yes* or *no* to the test statements (Piers, 1984).

**Rosenberg self-esteem scale** – A scale that purports a one-dimensional assessment of global self-esteem (Rosenberg, 1965).

**Self-concept** – An individual's general composite or collective view of him or herself across multidimensional sets of domain specific perceptions, based on self-knowledge and evaluation of value or worth of one's own capabilities formed through experiences with and interpretations of the environment (Eccles, O'Neill, & Wigfield, 2005).

**Self-esteem** – Feelings an individual has about him/herself that affect the way he/she views him/herself, including self observations, perceived feelings of him/herself, and self knowledge (Schwalbe & Staples, 1991). The overall affective evaluation of one's worth, value or importance (Blascovich & Tomaka, 1991).

**Self-Perception Profile for Adolescents** – A self-report instrument used to assess the multidimensional adolescent self-concept. It is used to measure feelings of self-worth in specific domains, as well as global self-worth (Renick & Harter, 1989).

**Self-Perception Profile for Learning Disabled Students** – Assessment that contains subscales that assesses students' social acceptance, athletic competence, behavioral conduct, physical appearance, and global self-worth, in addition to separate subscales measuring the perceptions of intellectual ability and competence at reading, spelling/writing, and math in students with LD (Renick & Harter, 1989).

**Students with learning disabilities (LD)** – According to IDEA, the term describes a disorder in one or more of the basic psychological processes involved in understanding or in using language, spoken or written...that may manifest itself in an imperfect ability to listen, think, speak, read, write, spell, or do mathematical calculations (IDEA, 2004).

**Students without learning disabilities (LD)** – For the purpose of this study, this will be considered as students who have not been diagnosed with a learning disability.

**Systematic Training for Effective Parenting (STEP)** – A nine-week program that provides training to parents on how to respond more affirmatively to their children (Hammett, Omizo, & Loffredo, 1981).

### **Assumptions and Limitations**

All published literature that is referenced in the study is factual, relevant, and up to date. A limitation is that many measures of self-esteem are collected by means of a student's self report. Due to the nature of self-reporting, a student's self report could be affected by a recent positive or negative interaction. As such, this information should be reviewed with caution. Additionally, some researchers do not clearly delineate between self-concept and self-esteem. Due to this, some research that claims to examine self-esteem may have examined self-concept, and vice versa. Finally, as research was primarily in the United States, some cultural differences may be not evident.

## **Chapter II: Literature Review**

### **Introduction**

Throughout this literature review, a key concept is the clear delineation between self-concept and self-esteem. The differences between self-concept and self-esteem will be discussed, as well as the importance of each concept during adolescence. When considering students with learning disabilities (LD), it is important to weigh their self-concept and self-esteem in a different way, understanding different social factors that come into play. There are many facets to self-concept and self-esteem, and coping with a learning disability has an influence on a student's quality of life. For both students with LD and students who have not been diagnosed with LD, positive parental involvement can directly influence a student's self-concept and self-esteem.

### **Self-Concept and Self-Esteem**

While both self-concept and self-esteem refer to an individual's cognitions and feelings about the self, there are key differences between the two that many researchers neglect to identify. Elbaum and Vaughn (2001) exemplified the issue by stating that the terms "self-concept," "self-perceptions," "self-esteem," "self-image," "self-evaluations," "self-worth," and "self-regard" are used interchangeably in their study. Using interchangeable terms deters from the scientific method of a study. By neglecting to operationally define these terms, Elbaum and Vaughn are not only adding a confounding variable into their study, they are bringing into question the validity of their findings. While the results of their study are important, it is critical to consider this variable when interpreting results. A key to advancing the study of the self is to clearly delineate between self-concept and self-esteem.

**Self-Concept.**

Self-concept is defined by Eccles et al. (2005) as people's general composite or collective view of themselves across multidimensional sets of domain specific perceptions. These perceptions are based on self-knowledge and evaluation of value or worth of ones own capabilities formed through experiences with and interpretations of the environment. People's self-concept will address a more factual side of their life, such as knowing what they enjoy or how they tend to think. The importance for researchers to clearly define self-concept cannot be overemphasized. As seen with Elbaum and Vaughn (2001), the convenience of conglomerating the many facets of the self is tempting. Doing so makes explanations easier, but also invalidates some results. When studying self-concept, it is important to acknowledge different facets of the construct. By narrowing the focus to a more concise topic, such as academic self-concept, a researcher has a better chance of measuring what is intended to be measured.

A positive self-concept can lead to a fulfilling adulthood. Many different conditions can affect how students develop their self-concept. Marsh (2005) found that a student's self-concept is partially dependent on his or her surroundings. He describes this as the big-fish-little-pond effect (BFLPE). If the average ability of classmates is high, equally able students most likely will have a more negative academic self-concept. However, if the average ability in a given student's class is low, then he or she is more likely to have a positive academic self-concept. This academic self-concept is very important during a child's middle school years because much of a child's daily interaction is related to school. Once these academic self-concepts have been established, it can be difficult to alter them.

Chapman, Tunmer, and Prochnow (2000) showed in a longitudinal study that when students develop a negative academic self-concept, their academic skills suffer. Specifically,

they found that students with a negative academic self-concept had poorer phonological sensitivity skills and read at lower reading levels than children with typical academic self-concepts. Long-term, these negative self-concepts inhibit students' learning capacity by setting artificial academic ceilings. Negative experiences during these influential years can potentially set a student back for the rest of his or her life. This limitation on self-concept can have a direct influence on the development of a child's self-esteem.

### **Self-Esteem.**

Schwalbe and Staples (1991) properly defined self-esteem as the feelings an individual has about him/herself that affect the way he/she views him/herself. These views include self-observations, perceived feelings of him/herself, and self-knowledge. High self-esteem is dependent on attitudinal factors. This differs from self-concept in that self-esteem addresses feelings and emotions. Additionally, while self-concept tends to be a construct that varies little over time, self-esteem can ebb and flow throughout an individual's lifetime. This change can be influenced by varying circumstances and life events.

It is crucial to understand these differences between self-concept and self-esteem, but it is also important to realize that self-esteem is manufactured through self-concept. When a child has a positive self-concept, high self-esteem falls into place much more easily (Trautwein, Lüdtke, Köller, & Baumert, 2006). Trautwein et al. also found that self-esteem in and of itself is not a strong predictor of academic achievement. They do indicate, however, that academic self-concept is a strong predictor of high self-esteem and future academic achievement. This correlation between self-concept and how it affects self-esteem is important to address in future research.



**Clear delineation between self-concept and self-esteem.**

Some studies do an excellent job addressing self-concept (Shavelson et al., 1976) and others do an excellent job isolating self-esteem (Blascovich & Tomaka, 1991). Additionally, some researchers go to lengths to delineate between the two domains (Dusek & McIntyre, 2003). Both constructs are important within development during adolescence. When adolescents have a strong self-concept, they are able to better position themselves for learning, and this in turn can facilitate a strong academic self-concept (Shavelson et al., 1976) (Trautwein et al., 2006). Having high self-esteem during adolescence increases the likelihood of having a positive adulthood.

When measuring self-concept and self-esteem, researchers should not use these terms interchangeably in their studies. It is important to indicate how each component is measured. Blascovich et al. (1991) reviewed multiple self-esteem measures and found that only two accurately measured self-esteem (such as Fleming & Courtney's, 1984, revision of Janis & Field's, 1959, scale, and Rosenberg's, 1965). With the numerous research articles that examined self-concept and self-esteem, it is interesting to see that so few delineate between the two. A current lack of research demarcating between the two concepts is the root of the issue at hand. In order for research concerning the self to advance, clear definitions need to be followed.

**Students with LD**

Learning disabilities can affect students in many different ways. As these studies indicate, self-concept and self-esteem are two crucial elements during a student's formative years. During this time, students begin to formulate and realize who they will become as adults. The self-concept that is developed during this time carries over into adulthood (Elbaum & Vaughn, 2001). Because of this, it is important to consider the negative effects of LD, especially

during adolescence. Hughes and Baker (1990) indicate that children who have experienced rejection, humiliation, and failure generally have feelings of low self-worth and vulnerability. Many children with LD experience these emotions more often than students without LD. This can have a profound effect on their academic self-concept as well as their overall self-esteem. The importance of this topic is substantial, as the American Psychiatric Association (1994) claims that between 2% and 10% of the population are affected by LD.

### **Self-concept and self-esteem of students with LD.**

Utilizing the *Self-Perception Profile for Adolescents*, Harter, Whitesell, and Junkin (1998) found that high school students with LD reported they felt worse about their general intellectual ability than did students not diagnosed with LD. Furthermore, using the *Piers-Harris Children's Self-Concept Scale*, it has been shown that students with LD scored significantly lower on the subscale of Intellectual and School Status (Gans, Kenny, & Ghany, 2003). This is significant because these students were in separate classes with other students in special education (SPED), including students with emotional disturbances or cognitive impairments. When students are deliberately taken out of the general classroom, it becomes obvious to them that they are different from typically developing students. By separating students, it can have a negative effect on their self-concept. This, in turn, can have a negative effect on their self-esteem and academic achievement (Troutwein et al, 2006).

The answer to this problem is not as easy as moving towards an inclusive system where students with LD learn with typically developing students. In a study conducted by Zeleke (2004), it was shown that the self-concepts of students with learning disabilities attending inclusive schools were lower than those of their classmates without learning disabilities. These findings are all too common, as a meta-analysis done by Chapman (1988) found the same

discrepancy. Due to these social comparisons, many schools have moved away from an integrative classroom. In some circumstances, the self-concepts of students with learning disabilities can be enhanced through tailoring instruction to the needs of individual students (Elbaum & Vaughn, 2001). Creating the best learning environment for each student needs to be a priority within the general school system.

When students with LD compared themselves to others with LD, they reported that they felt better about their performance than children with LD who compared themselves to their peers without LD (Renick & Harter, 1989). This presents conflicting information. When separating students with LD from typical students, it can have a negative effect on their self-concept and self-esteem. On the positive side, however, when students with LD are learning with other students with LD, they may tend to compare themselves to their peers with LD. This results in a more positive self-concept and higher self-esteem in students with LD. Each school is unique in its approach to students with LD, and it is important to consider these studies when deciding whether or not students with LD should be included in the general classroom or placed in a separate learning environment.

Age is an important factor in understanding what the best intervention is for a student with LD. While academic interventions were most consistently effective for elementary students, counseling interventions were the most reliably effective for middle and high school students (Elbaum & Vaughn, 2003). These results have an effect on the academic self-concept for the student, and do not necessarily hold true in other dimensions of self-concept. Elbaum and Vaughn (2003) also pointed out that, overall, counseling and mediated interventions were the only interventions that had a significant effect on general self-concept. These findings complement previous statements regarding the importance of creating an intervention strategy

that is malleable, as well as unique to each student who passes through the intervention plan. To create a unique intervention strategy, it may be useful for a school to use the interpersonal competence profile (Farmer et al, 1999). By using the ICS-T and the ICS-S and comparing the two, a unique strategy can be created for each student that best serves his or her learning style. This tool can be useful to determine if an inclusive or separated intervention strategy would best serve each student with LD.

Finally, an insight provided by Swann (1999):

Because self-knowledge generally emerges from, and is sustained by, our experiences with others, negative self-views have interpersonal as well as personal components. This means that for people to enjoy improvements in their self-views, changes must occur not only in the way they think about themselves, but also in the environments that sustain their self-views. (p. 146)

The value of this quote is substantial. Not only is this positive self-concept extremely important in students with LD, it is also significant for everyone. Our experiences in life and our perception of who we are define what we eventually become.

### **Positive Teacher and Parental Involvement**

It is important for teachers and parents to affect the self-concept and self-esteem of students with LD by remaining positive and encouraging them to succeed. This is evident as Meltzer, Roditi, Houser, and Perlman (1998) showed that there was a discrepancy between self-assessments of students with LD and their teachers' judgments. They found that students perceived themselves to be more capable than their teachers judged them. Furthermore, Möller et al. (2009) indicated that teachers were commonly unaware of students' perceptions of abilities.

For better communication between teachers and students, it may be beneficial for teachers to spend time with students to discuss their perceived strengths and weaknesses.

When parents were positively involved in the lives of their children, the self-concept of their children was affected in a positive way (Elbaum & Vaughn, 2001). One program that was used to positively influence parental/child interaction was *Systematic Training for Effective Parenting (STEP)*. Hammett, Omizo, and Loffredo (1981) used *STEP* to provide parents with training on how to respond more affirmatively to their children. The results showed that parents had a very strong affect on their children's self-concept. Additionally, Hammett et al. (1981) suggested that classroom interventions to augment self-concept might be enhanced by involving parents in a synergistically designed parent program. As previously mentioned, students with LD are more likely to struggle with social competence (Dyson, 2003). Having positive parental involvement in the life of a student with LD helps facilitate improvement in this realm, thus positively influencing a student's self-concept (Dyson, 2003). Intervention strategies for students with LD within the school setting resulted in underwhelming outcomes at times. To better the chances of success, schools may see benefits by involving parents in their intervention strategies.

When parents interacted with their children frequently, positive outcomes generally occurred. As Reese, Bird, and Tripp (2007) found, parent-child conversations regarding positive past events contained the highest amount of emotional talk regarding the child. Additionally, during conflict conversations, a moderate amount of positive talk was found. This positive talk can have a profound affect on the self-concept of a child. The link between conversations regarding past positive events and children's self-esteem was substantial (Reese et al., 2007).

When parents interacted and maintained a positive attitude with their children, a more positive self-concept was developed and self-esteem was raised (Dusek & McIntyre, 2003).

Conversely, when the interaction between parent and child was minimal, or family communication was poor, negative self-concept and low self-esteem resulted. Green (1990) found that children with LD themselves can contribute to a lack of communication between child and parent. In turn, child and parental cognitive/behavioral factors reciprocally amplify one another over time. For parents of high school students with LD, communication was often directly related to the nature of the learning disability (Raviv & Stone, 1991). When a parent and child were unable to communicate wholly due to the child's disability, it adversely affected the relationship. This alone is reason enough for parents of children with LD to explore various options for the betterment of communication with their children. When this lack of communication compounds over time, stress can be built up in the child as well as the parent.

If a parent of a child with LD exhibits stress surrounding their child's disability, that child tends to have problems with social competence as well as display more behavior problems (Dyson, 2003). This presents a direct correlation between parental stress regarding a child's disability and the self-concept and behavior of that child. When parents present a positive environment for their child with LD, it helps to reinforce a sense of positive self-concept and high self-esteem. Children with LD have a strong academic self-concept and high self-esteem when they receive positive feedback from teachers and parents (Dyson, 2003). When children have a strong self-concept, they are less likely to have a low self-esteem (Trautwein et al, 2006).

#### **Other important factors.**

During childhood and adolescence, self-esteem is commonly linked to peer acceptance (Russell-Mayhew, Arthur, & Ewashen, 2007). An area of concern for both parents and teachers

is the well being of a student. During this time, body image and eating behaviors can change, sometimes for the worse. More recent research has found that positive parental involvement in a wellness-based prevention program in schools was a helpful aid in building positive self-concepts in children and adolescents (Russell-Mayhew et al., 2007). Through this workshop, entitled “Building Blocks to a Positive Body Image: A session for parents in the prevention of eating disorders,” parents were able to discuss strategies that promoted a positive body image. When a student was receiving positive teacher support in school, and positive parental support at home, the vast majority of their day was filled with positive support from authority figures. This positive support directly influenced their self-perceptions. By surrounding students with LD with positive and helpful interactions every day, their self-concept remained positive and in turn their self-esteem and academic achievement followed suit (Dyson, 2003, Trautwein et al, 2006).

## **Chapter III: Summary, Critical Analysis, and Recommendations**

### **Introduction**

This chapter presents a summary of the information attained in the literature review. A critical analysis is included regarding the difference between the constructs of self-concept and self-esteem, how these constructs differ between students diagnosed with a learning disability and students who do not have a learning disability, and whether the level of parent involvement affects a student's self-concept and self-esteem. The chapter concludes by mentioning the limitations of the study as well as recommendations for further research.

### **Summary**

Both students with LD and students without LD exhibit varying levels of self-concept and self-esteem. These self-concepts adapt and grow as a student progresses from childhood, through adolescence, and into adulthood (Elbaum & Vaughn, 2001). Students with LD reported that they felt worse about their general intellectual ability than students without LD (Harter et al., 1998). This can result in negative self-concept and low self-esteem. By implementing evidence based interventions, students with LD can develop a positive self-concept and improve their self-esteem. One such intervention includes positive parental involvement (Elbaum & Vaughn, 2001). When parents are involved in the lives of their children in a positive way, the self-concept and self-esteem of their child improves.

A challenge of positive parental involvement pertains to the difficulties of communicating with a child who has LD (Dyson, 2003). Utilizing parental programs to overcome such adversities positively affects the parent/child relationship. Through this positive interaction, adolescents with LD improved academically and emotionally.



## Critical Analysis

There were three main research questions addressed within this literature review. The following is a critical analysis of the original research questions.

1. What is the difference between self-concept and self-esteem?

As the constructs of self-concept and self-esteem share similarities, it is important to delineate the two constructs in order to clearly depict their differences. Self-concept is defined by Eccles et al. (2005) as people's general composite or collective view of themselves across multidimensional sets of domain specific perceptions. These perceptions are based on self-knowledge and evaluation of value or worth of ones own capabilities formed through experiences with and interpretations of the environment. A person's self-concept not only comes from internal individual perceptions, but can also be influenced by individual experiences and external information from others. People's self-concept addresses a more factual side of their life, such as knowing what they enjoy or what they tend to think about themselves.

Self-esteem, as defined by Schwalbe and Staples (1991), is the feeling an individual has about him/herself that affects the way he/she views him/herself. These views include self-observations, perceived feelings of him/herself, and self-knowledge. How the individual feels is addressed within self-esteem, whereas self-concept addresses what the individual thinks or perceives about him/herself. Self-concept is a construct that stays relatively constant over time, while self-esteem can vary throughout an individual's lifetime.

2. How do students with learning disabilities and students who have not been diagnosed with a learning disability compare in regards to self-concept and self-esteem?

Current research suggests that there is a difference in the levels of self-concept and self-esteem between students who have been diagnosed as having learning disabilities and students

who have not been diagnosed as having a learning disability. Harter, Whitesell, and Junkin (1998) found that high school students with LD reported that they felt worse about their general intellectual ability than did students who have not been diagnosed with LD. Students with learning disabilities who were in separate classes with other students in SPED, such as students with emotional disturbances or cognitive impairments, were found to have a lower self-concept on the Intellectual and School Status subscale. This finding suggests that separation of the individual with a learning disability from the general education classroom can have a negative effect on the student's self-concept. Comparatively, Zeleke (2004) showed that students with learning disabilities attending inclusive schools had a lower self-concept than classmates without a learning disability.

Whether students are included within the general education classroom or separated and placed with other students with disabilities, their self-concept was consistently lower than that of students without disabilities. It is important to note within the research that the self-concepts of students with disabilities can be enhanced through tailoring instruction to the needs of individual students (Elbaum & Vaughn, 2001). Renick and Harter (1989) found that when students with LD compared themselves to other peers with LD, they felt better about their performance than did children with LD who compared themselves to their peers without LD. These findings suggested that pairing students within the general classroom on the basis of instructional level and individual needs positively influenced the self-concept and self-esteem of students with learning disabilities.

3. Does the level of positive parental and teacher involvement have an affect on a student's self-concept and self-esteem?

According to the existing research, positive parental and teacher involvement has a

positive effect on student's self-concept and self-esteem. Dyson (2003) found that children with LD have a positive academic self-concept and high self-esteem when they receive positive feedback from teachers and parents. The environment the parent provides, as well as the communication between the parent and the child, are both factors that play a role in the student's development of self-concept and self-esteem. For instance, Dyson (2003) found that if a parent of a child with LD exhibits stress surrounding their child's disability, that child tended to have problems with social competence as well as display more behavior problems. When parents presented a positive environment for their child with LD, it helped to reinforce a positive self-concept and a sense of high self-esteem. Additionally, communication was often related to the nature of the learning disability, especially when the parent and the child were not able to communicate due to the child's disability. This, in turn, adversely affected the relationship between the parent and child (Raviv & Stone, 1991). It was supported that with positive interaction and a parent's positive attitude toward their children, a more positive self-concept was developed and self-esteem was raised within the child (Dusek & McInrtyre, 2003). The emphasis is a positive interaction and support from the parent to positively influence self-concept and self-esteem.

Along with a positive emphasis, there is also an emphasis on collaboration between home and school to support consistency between the two settings. Russell-Mayhew et al. (2007) found that positive parental involvement in a wellness based prevention program in schools was helpful in building positive self-concepts in children and adolescents. Additionally, Hammett et al. (1981) suggested that classroom interventions used to increase self-concept might be enhanced by involving parents. The involvement of parents, or other supportive figures, bettered the chances of success across settings, as there was collaboration and communication occurring

between parents and teachers.

### **Limitations of Research**

A limitation of this literature review is the broadness of the subjects. While there are a variety of types of LD, there was no sub-typing of LD in this review. Furthermore, self-concept and self-esteem were measured on the broad scale, with minor sub-typing of self-concept. Socioeconomic status, ethnicity, gender, and physical attractiveness were not taken into consideration when measuring a student's self-concept or self-esteem. Finally, this literature review is not applicable across cultures. The vast majority of research reviewed was conducted in the United States.

### **Recommendations**

Based on this literature review, it is clear that a more complex measure of self-concept and self-esteem is necessary. In future research, obtaining more data regarding self-concept and self-esteem will make additional subtypes available, both for these two domains, as well as subtypes of LD. Further implementations need to be aimed at supporting students with LD. The focus of future support for students with LD should be not only academic, but have emotional and psychological support as well.

Many interventions are aimed at improving the grades of students with LD. In addition to this, specific attention should be placed on the betterment of their self-concept, as well as the improvement of their self-esteem. Both teachers and parents should be included in future research to promote positive self-concepts and increase self-esteem. Through future research, effective evidence-based solutions will be found.

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