Area Specific Self-Esteem, Values, and Adolescent Sexual Behavior

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ABSTRACT

This study examined area-specific self-esteem scores by sexual behavior relative to adolescents’ values concerning participation in sexual intercourse as an unmarried teenager. The sample consisted of 332 students in grades 7–12 from a Southern rural school district. Students were asked if they had ever had sexual intercourse (yes/no) and if they had participated in sexual intercourse in the last month (yes/no). Respondents also indicated on a 4-point scale their response to the statement “It is against my values to have sex as an unmarried teenager.” Data were analyzed using a 2 x 4 (behavior x values) analysis of variance for each of the three area-specific self-esteem scores (peer, school, and home). Results indicated that students who had participated in sexual intercourse had significantly lower scores in school and home self-esteem than those who had not participated. In addition, those who “strongly agreed” with the values statement and indicated they had not had intercourse had the highest school and home self-esteem scores. Those who strongly agreed with the values statement but indicated they had participated in sexual intercourse had the lowest school and home self-esteem scores. This behavior x values interaction was significant for sexual intercourse–ever, and for school self-esteem and sexual intercourse in the last month. No difference was seen in peer self-esteem scores by behavior nor were there behavior x values interactions.

The purpose of this study was to examine the relationship between self-esteem, values, and the sexual behavior of a sample of adolescent public school students. Enhancing self-esteem has been seen as a means of assisting young people to postpone sexual involvement and make wise decisions about their sexuality. Although this thinking has been widely accepted, the subject of how self-esteem affects sexual decision-making has been addressed by few researchers. Early sexual involvement has been linked to at least some aspects of self-esteem (Miller, Christensen, & Olsen, 1987; Spencer, Zimet, Aalsma, & Orr, 2002; Young, 1989; Young, Denny, & Spear, 2000). This relationship may or may not be true for all aspects of self-esteem.

Although it has been widely acknowledged that individual values are a predictor of adolescent sexual behavior, less is known about how sexual behavior affects specific areas of self-esteem.
areas of self-esteem according to the values held by adolescents. Values may be implicated both as a predictor of sexual behavior in adolescents and as a determinant of self-esteem after sexual behavior has been initiated. For example, Miller and coworkers (1987) found that self-esteem was positively related to sexual intercourse for adolescents who believed that intercourse was always right, but negatively related for those who believed it was wrong. In this study we hoped to find evidence that would enrich the understanding of how particular areas of self-esteem and sexual behavior interact, and how personal values related to sex might mediate their relationship.

SELF-ESTEEM: DEFINITION AND MEASUREMENT

Many studies have conceptualized self-esteem or provided some sort of definition of self-esteem. There has, however, been no consensus among these researchers as to what self-esteem actually is. Few researchers who have examined the relationship between self-esteem and sexual behaviors have offered a concrete operational definition for self-esteem. Wells (1976) analyzed the situation relative to self-esteem as follows: Because self-esteem seems to many an intuitive or common sense idea, there has been no need to spell out its nature or the processes by which it operates. Though this comment was made nearly 30 years ago, it continues to be true today. Rosenberg (1965) provided one of the broadest and most frequently cited definitions of self-esteem within psychology, describing it as a favorable or unfavorable attitude toward the self. Although the term self-esteem usually refers to a global sense of self-worth, narrower concepts such as self-confidence or body-esteem are often used to describe a more specific area of self-esteem. Self-esteem is considered the evaluative component of self-concept, which more broadly includes cognitive and behavioral aspects of the self as well as evaluative or affective ones (Blascovitch & Tomaka, 1991). Research has found that self-esteem significantly affects general health behavior for adolescents of all ages (Rivas Torres & Fernandez Fernandez, 1995).

Most research investigating self-esteem and adolescent behavior relative to such activities as sexual activity and drug use have used a generalized, or global, self-esteem scale to determine participants’ self-esteem (Cole & Slocumb, 1995; Hally & Pollack, 1993; Hollar & Snizek, 1996; Orr, Wilbrandt, Brack, Rauch, & Ingersoll, 1989; Pearlman, 1974; Robinson & Frank, 1994; Stratton & Spitzer, 1967; Walsh, 1991). Several researchers have used area-specific self-esteem scales (Emery, McDermott, Holcomb & Marty, 1993; Young, 1989; Young, Denny & Spear, 2000) that measure self-esteem in specific arenas of participants’ lives. In this study, self-esteem was defined as one’s self-evaluation within the context of three particular areas of experience—peers, family, and school.

FINDINGS RELATIVE TO SELF-ESTEEM AND ADOLESCENT SEXUAL BEHAVIOR

Studies have shown sometimes contradictory results when assessing the relationship between self-esteem and sexual behavior. Most of the research has utilized a global measure of self-esteem, although a few studies have used area-specific measures of self-esteem. This review of findings focuses on studies that have involved high school or middle/junior high school students.

Miller and colleagues (1987) used the Rosenberg self-esteem scale and found that in a sample of 2,423 high school students across the West, self-esteem was negatively correlated with sexual attitudes and behavior. A recent study (Spencer et al., 2002) also used the Rosenberg scale to examine the role of self-esteem in predicting coitus initiation in a population of early adolescents. Data collected longitudinally while participants were in seventh and ninth grades found that boys with higher self-esteem rating in seventh grade were more likely to initiate intercourse by ninth grade. An opposite relationship was seen in girls, with those starting out with higher self-esteem more likely to remain virgins than girls with lower self-esteem. These results highlight the need to examine gender as a factor in the relationship between self-esteem and sexual behavior.

Several studies contradict the results above, finding no difference in self-esteem between sexually active or inactive adolescents, or between virgins and nonvirgins. Robinson and Frank (1994), using the Coopersmith self-esteem scale, found no significant differences in self-esteem between sexually active males and sexually inactive males, or between sexually active females or sexually inactive females. Nor did they find significant self-esteem differences between virgins and nonvirgins of either sex. In a study of junior high students from blue collar homes Orr and his coworkers (1989) found no overall statistical difference in self-esteem (apparently a global measure) of sexually experienced and virgin adolescents. However, they did find that the self-esteem of sexually active girls was significantly lower than that of virgin girls (perhaps reflecting the continued existence of a double standard). Benson and Torpy (1995) examined the relationship of self-esteem and other variables in self-reported virginity loss among junior high students. They found that when considered in the context of a logistic regression analysis, self-esteem was not associated with age at first sexual intercourse.

Some studies have used area-specific measures of self-esteem. Young (1989) found that among early adolescents virgins displayed higher school self-esteem than nonvirgins. Home self-esteem and peer self-esteem were not related to participation in sexual intercourse. Young and colleagues (2000) used the Kelley short form of the Hare Self-Esteem scale (an area-specific scale) to study the relationship of self-esteem to sexual behavior among 1,659 junior and senior high school students in rural Arkansas. Results indicated that higher peer self-esteem was significantly associated with increased likelihood of past participation in sexual intercourse (both ever and recent participation) and greater intent to participate in the future. Higher home and school
self-esteem were significantly associated with decreased likelihood of past participation (both ever and recent) and less intent to participate in the future.

**FINDINGS RELATIVE TO VALUES AND ADOLESCENT SEXUAL BEHAVIOR**

Although self-esteem might be considered an individual adolescent characteristic that acts as a predictor variable for sexual behavior, family characteristics such as parental values and attitudes toward sexual behavior also need to be considered (Miller & Fox, 1987; Werner-Wilson, 1998). Miller (2002) recently found that parent–child closeness and parental supervision in combination with parents’ values against teen sexual intercourse decreased the risk of adolescent pregnancy. A sample of 697 abstinent adolescents in Missouri revealed three factors in common contributing toward their abstinence. These were labeled by researchers “fear-based postponement,” “emotionality and confusion,” and “conservative values” (Blinn-Pike, 1999), which can be assumed to be at least in part reflective of conservative family values. Miller, McCoy, Olson, and Wallace (1986) found that sexual permissiveness and intercourse experience were highest among adolescents who viewed their parents as not being strict at all or not having any rules. Parental strictness and discipline can be viewed as an enactment or expression of parental values.

Values and attitudes about sex have been shown to be related to behavior (Glass, 1972; Miller et al., 1987; Miller & Olsen, 1988; Thomson, 1982). Identification with a church or synagogue and religious identification in general have been seen to be protective factors against early sexual behavior (Brown, 1985; Glass, 1972). This again at least points to the idea of personal values. Indeed, sexual behavior that contradicts personal values is associated with emotional distress and lower self-esteem. These values likely correspond to social norms (Miller et al., 1987), which necessarily implicate gender and ethnicity as variables.

Both gender and ethnicity affect the risk of first sexual intercourse through differences in sexual norms, attitudes, and values (Upchurch, Levy-Storms, Sucoff, & Aneshensel, 1998). In a sample of 877 ethnically diverse youths in Los Angeles County, the median age at first sex was found to differ by gender and ethnicity group. Socioeconomic conditions were thought to account for ethnic differences among girls in the age at first sex, whereas cultural influences may have contributed to the differences between Hispanic boys and girls. The social and cultural meanings of sexual behavior, as well as the norms of when first sex should occur, seem to vary according to adolescents’ gender and ethnicity (Upchurch et al., 1998). Liebowitz, Castellano, and Cuellar (1999) used a multiple regression model to predict the absence of sexual activity among young Mexican American adolescents. They found that among the predictors of absence of sexual activity the most important was the child’s perception of the congruency of parent–child sexual values. Whether this finding is valid across ethnic groups remains to be studied.

Values of adolescents regarding sexual behavior have been seen to differ greatly by gender. Girls have indicated greater commitment to abstinence and less permissive sexual attitudes than boys in general (DeGaston & Weed, 1996). Miller (1986) and Gilligan (1982) suggested that the culture into which most girls are socialized perceives values, and interprets sex quite differently than it is seen and valued in the dominant masculine culture of our society. Sex roles and sexual identity seem to be major factors in the development and maintenance of sexual attitudes (DeGaston & Weed, 1996).

These values are implicated both as predictors of sexual behavior in adolescents of both genders and varying ethnicities and as a determinant of self-esteem after sexual behavior has been initiated. In this study the interaction of values and behaviors on specific areas of self-esteem was explored in a sample of adolescents attending a public school in the rural south. We hypothesized that students who reported sexual behavior consistent with their stated values regarding sex before marriage (i.e., strongly agreed that it was against their personal values to have sex before marriage and had not yet experienced sexual intercourse) would score higher on measures of self-esteem than students who reported behavior that was inconsistent with their stated values (i.e., strongly agreed that it was against personal values to have sex before marriage but had experienced sexual intercourse).

**METHODS**

**Subjects**

Subjects for the study were 332 students in the 7th–12th grade attending a single public school in the rural South. The school district had approached the researchers requesting that they conduct a student health issues survey. The results of the survey were to be used as a rationale for curriculum development in health education.

**Testing Instrument**

The testing instrument was a questionnaire that included items designed to elicit information regarding self-esteem, as well as sexual knowledge, attitudes, behavior, and intended behavior. Self-esteem was measured using Kelley’s short version of the Hare Self-Esteem Scale (Kelley, Denny & Young, 1997).

The Hare Self-Esteem Scale (Shoemaker, 1980) is a 30-item scale that includes 10 item subscales for the areas of peer, school, and home. Kelley’s short form reduces the Hare scale to 18 items, 6 items in each of the 3 subscales, while maintaining the integrity of the original scale. In the present study the internal consistency of each subscale (coefficient alpha) was calculated for the sample (n=332) with the following results: Home=.60, Peer=.77, School=.73. Sample items are as follows.

1. **Peer**—I have at least as many friends as other people my age. People my age often pick on me.

2. **Home**—My parents are proud of the kind of person I am. My parents believe that I will be a success in the future.

3. **School**—I am usually proud of my...
items were assessed for the current sample.

**Procedure**

Students voluntarily and with written parental permission completed the questionnaire in a regular classroom setting. This included 332 students for a 91% participation rate. Data were analyzed using SAS programs (Proc GLM) to perform 2-way (behavior \times values) analysis of variance (ANOVA).

**RESULTS**

In this study we examined area-specific self-esteem scores by sexual behavior relative to the students' own values concerning participation in sexual intercourse as an unmarried teenager. We asked students whether they had ever had sexual intercourse (yes, no) and whether they had participated in sexual intercourse in the last month (yes, no). Respondents also indicated on a 4-point scale, from strongly agree to strongly disagree, their response to the statement, “It is against my personal values to have sex as an unmarried teenager.”

Responses were obtained from 332 students, including 169 boys (50.9%) and 163 girls (49.1%). The mean age was 14.88 years (SD = 1.46). The youngest participants were 13. The oldest were 17. The majority of the students were Caucasian (86.9%). Native Americans (6%) and Hispanics (3.5%) were also represented. Less than 1% of the sample was African American or Asian/Pacific Islander. Not all students responded to the sexual behavior questions. Of the 313 students who responded to the question, 150 (48%) indicated that they had participated in sexual intercourse ever, and 98 (31.6%) indicated that they had participated in sexual intercourse in the last month.

Data were analyzed using SAS Program Proc GLM, to perform a $2 \times 2$ (behavior \times values) ANOVA for each of the three area-specific self-esteem scores (peer, school, and home) and for both sexual intercourse ever and sexual intercourse in the last month yielded no statistically significant behavior \times gender interaction effects. Mean scores for area-specific self-esteem by sexual intercourse ever and values are shown in Table 1. Mean scores for area-specific self-esteem by sexual intercourse in the last month and values are shown in Table 2.

**Sexual Intercourse—Ever**

There was no difference in peer self-esteem scores by behavior, by values, or behavior \times values interaction. However, there was a difference in both school and home self-esteem scores by behavior and behavior \times values interaction. Students who had participated in sexual intercourse had significantly lower school and home self-esteem scores than those who had not participated. In addition, those who "strongly agreed" with the values statement and indicated they had not had intercourse had the highest school and home self-esteem scores. Those who strongly agreed with the values statement but indicated they had participated in sexual intercourse had the lowest school and home self-esteem scores. Thus, for the behavior “sexual intercourse—ever” our hypothesis, that students who reported sexual behavior consistent with their stated values regarding sex before marriage would score higher on measures of self-esteem than students who reported behavior that was inconsistent with their stated values, was supported for school and home self-esteem but not for peer self-esteem.

**Sexual Intercourse—Last Month**

There was no difference in peer self-esteem scores by behavior, by values, or behavior \times values interaction. However, there was a difference in school self-esteem scores by behavior and behavior \times values interaction. There was a difference in home self-esteem scores by behavior, but the behavior \times values interaction effect was not statistically significant ($P = .073$). Students who had participated in sexual intercourse...
in the last month had significantly lower school and home self-esteem scores than those who had not participated. In addition, those who “strongly agreed” with the values statement, and indicated they had not had intercourse in the last month had the highest school and home self-esteem scores. Those who strongly agreed with the values statement but indicated they had participated in sexual intercourse had the lowest school and home self-esteem scores (but the values for home self-esteem were not statistically significant). Thus, for the behavior “sexual intercourse—last month” our hypothesis, that students who reported sexual behavior consistent with their stated values regarding sex before marriage would score higher on measures of self-esteem than students who reported behavior that was inconsistent with their stated values, was again supported for school self-esteem, but not for home and peer self-esteem.

**DISCUSSION**

Peer self-esteem appears to be the area least affected by sexual behavior. This could be due to higher acceptance among peers for sexual behavior and for boys, especially, an increased sense of status or regard from peers resulting from sexual behavior. Studies that analyze and collect data by gender should be conducted to determine whether there are significant differences in peer self-esteem for girls and boys, and whether the existence of a “double standard” regarding sexual behavior can be seen.

Participants who reported sexual behavior had lower home and school self-esteem scores than those who had not participated in sexual intercourse. These areas of self-esteem were also affected by how students responded to the values statement, “It is against my values to have sex as an unmarried teenager.” Students who strongly agreed with the values statement but indicated they had participated in sexual intercourse had the lowest self-esteem scores for home and school self-esteem. Participants who “strongly agreed” with the values statement and had not had sex, not surprisingly, had the highest self-esteem scores. These results may reflect the conflict between values espoused by the family and the school and the act of adolescent sexual intercourse, which is discouraged and negatively judged by those institutions. Feelings of guilt or of disappointing one’s role models may occur

| Table 1. Mean Self-Esteem Scores By Values and Behavior (Sexual Intercourse—Ever) |
|--------------------------------------|-------|-------|-------|-------|
| Sexual Intercourse—Ever Peer Self-Esteem | Strongly Agree | Agree | Disagree | Strongly Disagree |
| Yes | n=142 | M=16.75 | 17.30 | 16.74 | 16.89 | 16.74 | 2.32 | 2.56 | 3.32 |
| No | n=155 | M=17.53 | 16.02 | 16.20 | 15.40 | 3.25 | 2.05 | 2.94 | 2.82 |

| School Self-Esteem | Strongly Agree | Agree | Disagree | Strongly Disagree |
| Yes | n=142 | M=12.87 | 16.30 | 16.53 | 14.84 | 16.74 | 3.46 | 4.40 |
| No | n=155 | M=19.14 | 17.02 | 16.72 | 15.67 | 3.07 | 2.62 | 3.02 | 3.90 |

| Home Self-Esteem | Strongly Agree | Agree | Disagree | Strongly Disagree |
| Yes | n=145 | M=15.75 | 19.45 | 19.21 | 19.35 | 3.62 | 3.07 | 3.84 | 4.60 |
| No | n=155 | M=21.23 | 19.58 | 18.94 | 19.80 | 2.62 | 2.85 | 3.65 | 3.86 |

*Overall F(7, 297)=1.80, prob=.087, eta squared=.075; main effects behavior F(1, 297)=2.21, prob=.138, eta squared=.0007; main effects values F(3, 297)=.74, prob=.529, eta squared=.0007; interaction F(3, 297)=1.10, prob=.350, eta squared=.011. |

*Overall F(7, 296)=7.92, prob<.001, eta squared=.016; main effects behavior F(1, 296)=15.54, prob<.001, eta squared=.045; main effects values F(3, 296)=1.92, prob=.0167, eta squared=.0005; interaction F(3, 296)=5.82, prob=.001, eta squared=.051. |

*Overall F(7, 299)=3.41, prob<.001, eta squared=.0075; main effects behavior F(1,299)=7.45, prob=.007, eta squared=.024; main effects values F(3,299)=.71, prob=.549, eta squared=.0006; interaction F(3,299)=4.83, prob=.003, eta squared=.046. |
in adolescents who have sexual intercourse. In many cases secrecy and lies are necessary, leading to a sense of shame, which may affect one’s self-esteem in those areas that have to do with adult expectations and moral values. This may be particularly true for home self-esteem, which implicates the parents and larger family.

School self-esteem may be affected negatively by adolescent sexual behavior for several reasons. Adolescents who become sexually active face not only many health risks such as unplanned pregnancy and sexually transmitted diseases, they also face emotional consequences. Sexual relationship entails greater risks in terms of betrayal and fidelity and creates strong attachments whether the relationship is a positive one or not. This may also vary greatly according to gender and requires further exploration. Adolescents may experience stronger vulnerability associated with sexual activity and suffer more from the termination or ending of sexual relationships. They may experience anxiety about pregnancy, contracting a sexually transmitted disease, or about issues of fidelity. These undue anxieties can directly affect an adolescent’s performance and interest in school. Because they likely cannot speak freely about the matter to parents or teachers, the effects can be exacerbated. Isolation from the crucial support network can occur.

Results from this study showed a strong relationship between one’s values and how sexual behavior affects one’s self-esteem. It may not be sexual behavior per se that affects self-esteem but what sexual behavior means to the individual who participates or does not participate. More research needs to be conducted on specific subpopulations to determine how values–behavior interactions differ according to such variables as gender, ethnicity, socioeconomic status, age, and cultural values. Because values are influenced by all these variables, it may follow that area-specific self-esteem results will also differ based on the interaction of sexual behavior with particular cultural values about sexual behavior.

Readers should recognize that these results are from a one-time, self-report survey. Self-report of a sensitive topic may result in socially desirable responses from some adolescents. The sample was one of convenience; the participants were not randomly selected from a larger pool of potential subjects. The study examines the relationship of values, self-esteem, and participation in sexual intercourse among an adolescent population, but the values

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<th>Table 2. Mean Self-Esteem Scores By Values and Behavior (Sexual Intercourse—Last Month)</th>
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<td>Sexual Intercourse—Last Month</td>
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⁴Overall F(7,294)=1.97, prob=.059, eta squared=0.046; main effects behavior F(1,294)=0.04, prob=.840, eta squared=0.00001; main effects values F(3,294)=0.09, prob=.964, eta squared=0.00009; interaction F(3,294)=1.71, prob=.165, eta squared=0.017.

⁵Overall F(7,293)=10.73, prob<.001, eta squared=0.00001; main effects behavior F(1,293)=33.87, prob<.001, eta squared=0.0094; main effects values F(3,293)=3.93, prob<.001, eta squared=0.033; interaction F(3,293)=8.44, prob<.001, eta squared=0.070.

⁶Overall F(7,296)=2.55, prob=.015, eta squared=0.0058; main effects behavior F(1,296)=9.53, prob=.002, eta squared=0.031; main effects values F(3,296)=0.49, prob=.690, eta squared=0.00005; interaction F(3,296)=2.35, prob=.073, eta squared=0.023.
measure consists of a single item dealing with “sex as an unmarried teenager.” Future research should include a more comprehensive measure of personal values, including other aspects of sexual behavior. In addition, the fact that participants were from one Southern rural school district and that the vast majority of participants were Caucasian does limit the generalizability of these findings. Finally, the sample size may have limited the power of the study. Nevertheless, these findings are important in that they provide a more complete picture of how self-esteem relates to sexual behavior. Understanding the factors that cause an adolescent with values that are “strongly against” teen sex to engage in sexual behaviors is crucial to preventing adolescent sexual behaviors and teen pregnancy. Programs meant to enhance self-esteem as a protective factor against adolescent sexual behavior need to take into account how specific areas of self-esteem are negatively impacted by those behaviors. Program developers should consider these findings as they address the topic of self-esteem and sexual involvement.

REFERENCES


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