



EXPLORING THE RELATIONSHIP BETWEEN
SELFEESTEEM AND RESILIENCE IN
PREADOLESCENT INSTITUTIONALIZED YOUTH

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Abstract

This research examines how self-esteem and resilience are connected in a group of institutionalized children aged 11 to 15, a population often exposed to emotional neglect and disrupted social bonds. The study involved 100 children living in Romanian residential care facilities. They completed two validated self-report instruments: the Rosenberg Self-Esteem Scale (RSES) and the Child and Youth Resilience Measure – 12 items (CYRM-12). Data were analyzed using Pearson correlation and linear regression.

The findings revealed a strong, positive correlation between self-esteem and resilience, indicating that children with a more favorable view of themselves were also more likely to adapt effectively to adversity. The regression analysis further showed that self-esteem was a significant predictor of resilience, explaining nearly half of the variance in resilience scores.

These outcomes align with previous psychological frameworks that describe self-esteem as a protective psychological resource (Orth & Robins, 2014; Masten, 2014). The study points to the potential benefit of interventions in residential care that focus on strengthening children's sense of self-worth as a means to foster emotional stability and resilience.

Keywords: *resilience, self-esteem, institutionalized children, psychological adjustment*

1. INTRODUCTION

Resilience is commonly understood as a multifaceted psychological capacity that enables individuals to recover from hardship and maintain functional emotional and behavioral regulation in the face of adversity (Masten, 2014). During preadolescence, a stage often characterized by identity exploration, increasing social awareness, and heightened emotional sensitivity, this capacity becomes particularly crucial. For children living in institutional care, where routine disruptions, limited emotional support, and unstable caregiving are often part of daily life, the development of resilience may be significantly impaired (Johnson et al., 2006).

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While resilience can be shaped by both external and internal protective factors, self-esteem has consistently emerged as one of the most influential internal resources. As defined by Rosenberg (1965), self-esteem refers to the general sense of self-worth and personal value. Research has linked high self-esteem to better emotional regulation, stronger problem-solving strategies, and increased perseverance in stressful contexts (Orth & Robins, 2014). It may also serve as a psychological buffer that reduces vulnerability to emotional distress (Van Breda, 2018).

Despite these associations, there is still limited empirical data on the relationship between self-esteem and resilience among children in institutional settings, particularly during the sensitive window of preadolescence. Previous findings have mostly focused on broader youth populations or family-based environments, often overlooking the distinct socio-emotional dynamics within residential care contexts (Cameron et al., 2013).

To address this gap, the current study investigates the association between self-esteem and resilience in institutionalized children aged 11 to 15. This age group was selected for its developmental relevance, as it marks a formative stage in which psychological traits such as self-concept and coping abilities begin to consolidate. Understanding how these constructs interact in vulnerable populations may offer insights for the design of targeted psychosocial interventions aimed at strengthening adaptive functioning and long-term emotional well-being.

2. OBJECTIVE AND HYPOTHESES

2.1. OBJECTIVE

This study aims to explore how self-esteem contributes to the development of resilience in children aged 11 to 15 living in institutional settings. Both constructs are widely recognized in developmental psychology as essential for adaptive functioning, particularly in contexts marked by limited emotional security and chronic social disruption. Given the heightened vulnerability of children raised without consistent caregiving, understanding this relationship may yield valuable insights for intervention planning.

The research is guided by the following objectives:

1. To evaluate the strength and direction of the association between self-esteem and resilience among institutionalized preadolescents.
2. To investigate whether self-esteem acts as a significant statistical predictor of resilience in this population, using linear regression analysis.

2.2. HYPOTHESES

Based on the theoretical framework and previous research, the study proposes the following hypotheses:

H1: There is a statistically significant positive correlation between self-esteem and resilience among institutionalized children aged 11 to 15.

H2: Self-esteem significantly predicts resilience in institutionalized children, as demonstrated through linear regression analysis.

3. METHOD

3.1 The participants

The study involved a total of 100 children currently residing in residential care institutions across various regions of Romania. Participants ranged in age from 11 to 15 years, with the gender distribution comprising 54 boys and 46 girls. Inclusion criteria required that participants be currently institutionalized, fall within the target age range, and possess the cognitive and emotional capacity to understand and respond to standardized self-report questionnaires.

Recruitment was based on convenience sampling, with collaboration from institutional staff who facilitated access. Prior to data collection, informed consent was obtained from legal guardians or institutional representatives, and assent was secured from each child. All procedures adhered to established ethical guidelines, ensuring the anonymity, confidentiality, and voluntary nature of participation. Institutional approval was granted before the initiation of the study.

3.2 Instruments

To evaluate the psychological variables under investigation, two widely recognized and psychometrically validated self-report instruments were employed:

1. Rosenberg Self-Esteem Scale (RSES): Originally developed by Rosenberg (1965), the RSES is a 10-item scale designed to assess global self-worth. Each item is rated on a 4-point Likert scale, from *strongly disagree (0)* to *strongly agree (3)*. Items 3, 5, 8, 9, and 10 are reverse-coded to control for response bias. The total score ranges from 0 to 30, with higher values indicating stronger self-esteem. This scale has been extensively validated in both clinical and general populations, demonstrating strong internal consistency and construct validity.

2. Child and Youth Resilience Measure – 12 items (CYRM-12): The CYRM-12 is a brief adaptation of the original CYRM developed by Ungar and Liebenberg (2011) to assess multidimensional resilience in young populations. The instrument includes 12 items, each rated on a 3-point Likert scale, with total scores ranging from 12 to 36. Higher scores reflect greater levels of perceived resilience. The CYRM-12 captures aspects of individual capacity, relationships, and contextual support, and has shown reliable cross-cultural applicability in diverse settings.

3.3 Procedure

Data collection was carried out on-site, during prearranged sessions within the participating residential care facilities. Children completed the RSES and CYRM-12 questionnaires in small group formats, each session being facilitated by a licensed psychologist familiar with working with vulnerable youth populations. The average administration time was approximately 20 minutes per group.

To enhance comprehension and ensure accuracy, instructions were read aloud, and participants were encouraged to request clarification for any item they did not understand. All questionnaires were completed anonymously, with no personal identifiers recorded, thereby safeguarding participant confidentiality throughout the process.

Following data collection, responses were entered into SPSS (Statistical Package for the Social Sciences) for analysis. The statistical procedures applied included descriptive statistics, Pearson correlation, and simple linear regression to examine the relationships between the measured variables.

4. RESULTS

4.1 Descriptive statistics were calculated for the main variables of interest: resilience, self-esteem, and age.

Table 1. Descriptive Statistics

	N	Minimum	Maximum	Mean	Std. Deviation
Scor rezilienta	100	10	22	16.23	2.403
Scor stima de sine	100	18	45	32.19	6.610
Varsta	100	11	15	12.77	1.325
Valid N (listwise)	100				

The descriptive analysis indicated that the average self-esteem score among participants was $M = 32.19$, a value that falls within the moderate to moderately high range. This suggests that, despite the challenges associated with institutional living, many children maintain a relatively positive self-image, which may reflect the presence of compensatory psychological resources.

The mean resilience score was $M = 16.23$, pointing to a moderate level of adaptive capacity. While this implies that participants exhibit some degree of psychological flexibility, it also highlights a continued susceptibility to emotional stress, likely linked to the unstable social environments in which they live.

The mean age of the sample, $M = 12.77$, confirms that the study focused on preadolescents, a developmental stage often marked by heightened emotional sensitivity, increased self-awareness, and early identity formation—factors that make psychological resilience particularly relevant.

4.2 To test the relationship between self-esteem and resilience, a Pearson correlation analysis was performed.

The Pearson correlation analysis revealed a statistically significant and strong positive association between self-esteem and resilience ($r = .679$, $p < .001$). This coefficient indicates a substantial effect size, with the squared correlation ($R^2 = .461$) suggesting that approximately 46% of the variance in resilience scores can be explained by variations in self-esteem.

Table 2. Pearson Correlation Between Self-Esteem and Resilience

		1.	2.
1. Scor rezilienta	Pearson Correlation	1	.679**
	Sig. (2-tailed)		.000
	N	100	100
2. Scor stima de sine	Pearson Correlation	.679**	1
	Sig. (2-tailed)	.000	
	N	100	100

** . Correlation is significant at the 0.01 level (2-tailed).

From a psychological perspective, this relationship highlights the central role of self-perception in shaping adaptive responses to adversity. Children who view themselves positively—who feel competent, valued, and capable—appear better equipped to engage in emotional regulation, maintain behavioral control, and interpret challenging experiences in constructive ways.

In institutional care settings, where consistent emotional support is often lacking, self-esteem may serve as a critical internal anchor, offering a sense of stability and personal worth. These findings support the development of interventions that strengthen self-esteem as a pathway to enhancing resilience in vulnerable youth populations.

4.3 To determine whether self-esteem predicts resilience, a simple linear regression analysis was conducted. The Coefficients Table is presented below.

Table 3. Linear Regression Coefficients Predicting Resilience from Self-Esteem

Model		Unstandardized Coefficients		Standardized Coefficients		
		B	Std. Error	Beta	t	Sig.
1	(Constant)	8.285	.886		9.352	.000
	Scor stima de sine	.247	.027	.679	9.154	.000

a. Dependent Variable: Scor rezilienta

The linear regression model revealed that self-esteem significantly predicts resilience in institutionalized children aged 11 to 15. The standardized beta coefficient ($\beta = .679, p < .001$) indicates a strong predictive relationship, while the unstandardized coefficient ($B = 0.247$) suggests that for every one-point increase in self-esteem, the resilience score increases by approximately 0.25 points. The model explained 46.1% of the total variance in resilience ($R^2 = .461$), a proportion considered substantial in behavioral research, reflecting the notable contribution of self-esteem to the adaptive capacity of this population.

From a psychological standpoint, these findings underscore the idea that self-esteem operates as an internal driver of resilience, not merely correlating with it but actively shaping how children respond to stress. Children with a stronger sense of self-worth are more likely to exhibit emotional balance, cognitive flexibility, and effective coping mechanisms in the face of adverse conditions. Within the institutional environment—often marked by instability, emotional neglect, and

fragmented social support—self-esteem appears to serve as a psychological buffer, reinforcing autonomy and reducing vulnerability.

These results point toward the importance of developing strength-based interventions that focus on enhancing children’s self-concept, not only to support immediate psychological functioning but also to foster long-term resilience and adaptive development in at-risk populations.

5. CONCLUSIONS

This study explored the relationship between self-esteem and resilience among institutionalized children aged 11 to 15. The results demonstrated a strong, statistically significant correlation ($r = .679$, $p < .001$) and confirmed that self-esteem is a significant predictor of resilience, accounting for 46.1% of the variance in resilience scores ($R^2 = .461$). These findings suggest that self-esteem functions not only as a correlate of resilience but as a core psychological resource that supports emotional and behavioral adaptation in contexts marked by adversity.

From a developmental and psychological perspective, the findings highlight the value of positive self-perception as a protective factor. Children who perceive themselves as competent and valued are more likely to exhibit emotional regulation, maintain internal equilibrium, and apply effective coping strategies—even when raised in environments lacking consistent familial support. Within institutional care, where opportunities for emotional affirmation may be scarce, self-esteem may serve as a stabilizing internal mechanism, contributing to resilience formation.

Based on these insights, the study recommends the introduction of targeted interventions in residential care settings, focusing on the enhancement of self-worth through structured psychological support, mentorship programs, and identity-building activities. Such efforts could play a vital role in strengthening both the short-term adjustment and long-term resilience of institutionalized children.

Despite its contributions, the study is limited by its cross-sectional design and reliance on self-report instruments, which may introduce bias and restrict causal interpretations. Future research should consider longitudinal approaches and incorporate broader contextual and interpersonal factors to provide a more nuanced understanding of resilience pathways in vulnerable child populations.

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