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Selected Polarity Determinants of Self-Esteem among Charges at Youth Detention Centers and Youth Social Therapy Centers

Abstract: The article analyzes the socio-demographic and personality determinants/correlates of self-esteem among charges of Youth Detention Centers (MOW) and Youth Social Therapy Centers (MOS). First, an analysis was performed of the level and the dimensions of self-esteem (general non-specific self-esteem, global specific, partial non-specific: physical, cognitive-intellectual, characterological, socio-moral) of socially maladjusted people using the k-means method, most often used in the taxonomic practice of the grouping method. In the course of the analysis three groups of self-assessment were selected, which are initially defined as: negative "reflected self" ("I am the worst"), positive "defensive self" ("I am the best") and "self undetermined – unstable" ("Who I am"), which differ in terms of the level and the internal arrangement of different types of self-assessment. Then the analysis of differences in selected clusters was conducted determined by place of residence, attitude towards faith, level of religiosity and attitude towards the world, one's own life and other people.

Key words: polarization of self-esteem, social conduct disorder, k-means, socio-demographic and personality determinants of self-polarization.

Introduction

Cognitive psychology is associated with the regulation of human behavior processes in human consciousness. Also in recent years in social rehabilitation the mechanisms of social maladjustment is often combined with *self-concept*, the im-

age of the world and one's own life, which is analyzed in the context of cognitive distortions treated as maladjustment mechanisms (Mudrecka 2015; Opora 2009 and 2011, Wysocka, Ostafińska-Molik 2014). The importance of self-evaluation for psychosocial functioning, i.e. the regulation of human behavior, is still not fully established, since the results obtained are ambiguous in the context of describing and explaining adaptation disorders. Therefore, the author of the article analyzes the polarization of self-esteem among socially maladjusted people¹, using a specific method that reveals homogeneous categories of persons manifesting a certain way of functioning determined by self-concept (k-means method). The disclosed polarizations of self-esteem (three groups of homogeneous individuals, while groups that differ from each other) have already been described, but this article makes an analysis in terms of characteristic features (socio-demographic and personality) of the selected three groups, polarized in terms of self-esteem. According to the authors, it is a small but perhaps important step in the process of building social maladjustment models, covering the various determinants and mechanisms of adaptation disorders.

Self-esteem and its selected determinants – a theoretical analysis and research results

Self-esteem is a relatively constant feature which determines the current state or motives stimulating an individual to act in a given direction (the process of self-regulation), which is done in accordance with their needs and potentially serves their development. This process determines the mechanism of striving to maintain a positive self-concept, positive self-image or self-esteem. The hubristic need (Kozielecki 1987, 1988) is – according to the results of various studies – a dominant need, more important than other needs. The results show that self-esteem or self-image are more important regulators of behavior than physiological, sexual, social or even material needs (Leary, Downs 1995, p. 123–144; Bushman et al. 2011, p. 993–1010), which in post-modern society focused on consumption is of particular importance. Knowledge about oneself (self-knowledge) and the way of evaluating the various elements of “self” define and determine the individual's ability to integrate their beliefs about the world, relationships linking people and the ability to organize their own life according to personal standards and assumed objectives. Experiments with oneself, the experienced emotions, and consequently ways of responding to various life situations (difficult), determine the life activity taken by an individual, which may be pro-developmental, adap-

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¹ The issues of polarization of self-esteem, with a presentation of the k-means method used to identify homogeneous groups in terms of the levels of different types of self-esteem, has been presented in another article: E. Wysocka, B. Ostafińska-Molik (in press).

tive vs anti-developmental, de-adaptive. Self-esteem is undoubtedly an important factor in the regulation of human behavior, however, depending on its “quality” (positive, negative, overvalued, undervalued, adequate and inadequate) the method of regulating behavior is different and may lead to different results (positive adaptation vs maladjustment).

Self-esteem is defined differently but it is always associated with the category of “self”. It can therefore be said that self-esteem is: a) those elements of “self”, which have been distinguished due to content and the adopted time perspective; then it is analyzed in terms of the discrepancy between the “real self” (how I am), the “ideal self” (what I would like to be) and the “should self” (what I should be like); b) a multidimensional self-image; self-esteem refers to the different areas of life and aspects of “self” resulting from experience with oneself and methods of functioning in the world (Huflejt-Lukasik 2010, p. 31-32). As the theoretical basis, this paper assumes the multidimensional understanding of self-esteem, distinguishing: (a) **general self-esteem** (non-specific) – conviction about one’s own value, disclosed in the self-description (open self-esteem), constituting a relatively constant property of the individual (e.g. *I am a valuable person just like others*); (b) **partial self-esteem** (specific) in the areas of: **cognitive-intellectual**, described by adjectives defining skills and the intellectual capacity of the individual; **physical**, described by adjectives defining the features of external appearance and physical fitness; **characterological** and **socio-moral**, described by adjectives defining a set of psychological traits, revealed in actions and behavior towards other people, way of being, disposition; as well as a set of personality traits associated with moral convictions that determine actions focused on oneself and others; (c) **global self-esteem**, which is the sum of partial non-specific self-esteems, including the image of functioning in various spheres.

The thesis about the importance of self-esteem for the adaptation and development process of the individual has been confirmed in many studies. Particularly strongly established in cognitive psychology, the basic premise of which is that the perception and evaluation of oneself determines mainly how to respond to the tasks set before the individual (constructive, task-oriented vs destructive – escaping), but also the quality of interpersonal relations (prosocial behavior vs asocial behavior), sense of agency and control of events, and the perceived effectiveness of one’s own actions. Undoubtedly, this can be a predictor (positive vs negative) of personality development, functioning in assigned social roles, involvement in actions and attitude towards undertaking activity (pro-development vs developmentally destructive). Self-esteem as a regulator of human behavior involves sorting events and motivation to undertake activity, and its function is to maintain or improve self-esteem and avoid situations potentially lowering it (Leary, MacDonald 2003, p. 401–418). Low vs high level of self-esteem, its appropriateness (undervalued vs overvalued self-esteem), and finally the consistency and permanence of self-concept determine the relationship of the individual towards themselves,

the surrounding world and their activity. It is assumed that a positive, adequate, coherent and relatively stable self-esteem determines the correct adaptation and development of an individual, warranting the ability to meet the demands placed on them by the social environment and themselves (see Reykowski 1976, p. 200; Kulas 1986, p. 6; Kupiec 2014, p. 117–134).

The self-esteem of socially maladjusted people has not yet been empirically defined in an unambiguous manner. Most research results known to the authors are the basis for conclusions about the negative correlation between self-esteem and the level of adaptation. It is also indicated that inadequacy is associated with a greater discrepancy between the “real self” and the “ideal self” (lowered self-esteem), and little is known about the relationship between the “real self” and the “should self”. In addition, it was confirmed that a higher level of social maladjustment, indexed by the degree of involvement of the individual in criminal activity, is associated with a more negative image of one’s own “self” and a lower self-esteem (Levy 1997, p. 277–283; cf. Baran, Bielawiec 1994, p. 17–32; Bielawiec 1999; Kupiec 2014; Siemionow 2011, p. 161–162). In previous studies on the content aspects of self-esteem (multidimensional approach) of charges of MOW, the authors of this paper obtained similar results (Wysocka, Ostafińska-Molik 2014, pp. 233–254). A simple differentiation of correctly and incorrectly adjusted persons showed that maladjustment is associated with lower levels of self-esteem in all the selected elements of self-concept: in global, general, cognitive-intellectual, physical, socio-moral, and characterological self-esteem. Statistical analysis confirmed the significance of these differentiations. The size of Cohen’s *d* effect in all comparisons was the mean, and in the scope of global self-esteem it was high, which means that there is a significant relationship between the level of social adaptation and self-esteem. This means that self-concept in socially maladjusted people is more negative than those of normal adaptation.

Some of the study results, especially the later studies, is the basis for challenging this simple relationship between the level of self-esteem and adaptation: the greater the discrepancy between the “real self” and the “ideal self”, the higher the level of maladjustment (Paszkievicz 1974, p. 192–208; Siemionow 2011, p. 56). It can be presumed that e.g. typological differentiation of socially maladjusted people determines here a curvilinear relationship, hence both high and low self-esteem correlates with maladjustment, and their average level determines proper adaptation (Siemionow 2011, p. 57).

Certainly a more important attribute of self-esteem is its appropriateness (overvalued or undervalued self-esteem). The tendency for overvalued self-esteem among MOW charges has been confirmed empirically, who can be described as social misfits (Gaszyńska-Płuciennik 2004, p. 9–14; Kupiec 2014, p. 117–134). However, if we consider adequate self-esteem (compatibility between the “real self” and the “ideal self”), then usually orientation of self-esteem changes to the negative. Comparative studies of the adequacy of self-esteem in

young people with normal and faulty social adaptation, conducted among youth from shelters for juveniles and junior high schools, showed a higher level of convergence of the “real self” (self-concept) and the “ideal self” (self-acceptance) among socially maladjusted youth (Waskowicz 2002 , p. 9–15). This indicates a positive self-concept of socially maladjusted youth (I am the way I want to be), but the intermediary alternative can be self-presentation here (referring to the “ideal self”). Negative self-presentation of socially maladjusted youth, associated with the validation of anti-social behavior (admissibility) usually causes that youth does not see the need for changing their self-concept, which can determine the rise or exaggeration of self-esteem. It seems, however, that it depends on many moderating variables, e.g. type of social maladjustment – which was not checked. Internalizing disorders characteristic of withdrawn, anxious and inhibited people, with excessive control of behavior, are usually defined by low self-esteem. While externalizing disorders, characterizing aggressive people with a deficit of behavior control, can be associated with overestimating their own capabilities, which determines an inflated self-esteem (Berkowitz 1998, p. 49–72; Anderson, Bushman 2002, p. 27–51). This is confirmed by the results of research into the links between aggression (syndrome of externalizing disorders) and self-esteem. Most of the older studies indicated a negative correlation between the two variables (the higher the level of aggression, the lower the self-esteem, which proves the rightness of the frustration-aggression theory, where the frustrating factor is not meeting the need of self-esteem). However, recent studies indicate the opposite relationship, i.e. a positive correlation between aggression and self-esteem (the higher the self-esteem, the higher the level of aggression). This regularity reveals strongest in a situation perceived as threatening to maintaining self-esteem, while frustrating situations may result in the denial of various attributes of the individual: competence, capability, efficiency of agency, control of reinforcements, beauty, etc., of people with “a high self-esteem” (Baumeister, Boden 1998, p. 111–137; Baumeister, Campbell, Krueger, Vohs 2003, p. 1–44; Bushman, Baumeister 1998, p. 219–229; Judge, Bono 2001, p. 80–92; Kubacka-Jasiecka 2006). Paradoxically, the same factor associated with the threat to self-esteem (frustrating factor) may be associated with both low and with high self-esteem. However, there is a subtle difference here: in the case of negative correlation, the frustrating factor is simply “low or undervalued self-esteem”, and in the case of positive correlation it is “the potential threat of having a high or inflated self-esteem”.

The variable moderating self-esteem can also be the level of adaptation disorders, because – as indicated by the research results – young people ill-suited in the early stages of a deviant career are usually characterized by lower self-esteem than their peers who are properly adapted. Identification of the deviant identity is directed by positive self-esteem (high or inflated self-esteem). This is determined by the mechanism of identification with deviant activity, treated as a way of “val-

uing oneself". While such activity is approved in peer groups that have – understandably – features of deviant subcultures (Urban 2000, p. 136–137).

The research results of the paper's authors (Wysocka, Ostafińska-Molik in press) show a clear polarization of self-esteem in socially maladjusted youth, but it should be noted that self-esteem of people correctly and incorrectly adapted in the comparative aspect was not analyzed here. Polarized self-esteem has been conventionally named by the authors: negative "reflected self" (*I am the worst*)², positive "defensive self" (*I am the best*)³, and "self undetermined – unstable" (*Who am I*)⁴. It was therefore an attempt to "unravel the secret" of the polarization of self-esteem by identifying the diversity of individuals belonging to the three groups revealed in the studies – self-esteem clusters (with varying levels and layout of its dimensions), in terms of selected socio-demographic characteristics and specific life attitudes, or beliefs of socially maladjusted people relating to interpersonal relationships ("I towards other people" – aggression, prosocial behavior, "others towards me" – sense of danger, sense of support), attitude towards the world (positive – benevolence, comprehensibility, organization vs negative – adversity, incomprehensibility, disorganization), and attitudes towards one's own life (sense of control, agency vs lack of control, learned helplessness).

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² Cluster 1: NEGATIVE "REFLECTED SELF" – *I am the Worst!* (a clear contradiction between the "real self" and the "ideal self" and the "should self"). These people have a generalized, negative, non-specific (general) and global-specific self-esteem. The triad of the most strongly marked negative, specific self-esteems are, in order: the lowest in the intellectual-cognitive sphere, with the not much different self-esteem in the characterological and socio-moral sphere. The least negative "self" manifests itself in the physical sphere, but it is also significant. This is accompanied by a lack of defensive falsifications of self-concept, i.e. low scores on the scale of falsehood, documenting the lack of tendency to portray oneself in a better light.

³ CLUSTER 2: POSITIVE "DEFENSIVE SELF" – *I am the Best!* ("forced", defensive consistency between the "real self" and the "ideal self"). These people have a generalized, non-specific (general), positive self-esteem and global specific self-esteem, defined by the partial self-esteem. The triad of the most strongly marked positive, specific self-esteems is, in order: the highest in the physical sphere, with the not much lower self-esteem in the characterological and socio-moral sphere. The least positive "self" manifests itself in the intellectual-cognitive sphere, but it is also significant. This is accompanied by small, but nevertheless present defensive falsifications of self-concept, i.e. average scores on the scale of falsehood, documenting a certain, perhaps significant, tendency to portray oneself in a better light (internally motivated by maintaining a positive self-concept in one's own eyes).

⁴ CLUSTER 3: "SELF UNDETERMINED – UNSTABLE" – *Who am I?* (unresolved conflict between the "real self" and the "ideal self" and the "should self"). These people have a generalized – though weakly marked – negative, non-specific (general) and global-specific self-esteem. The triad of the most strongly marked negative, specific self-esteem is, in order: the lowest in the physical, then the characterological and socio-moral sphere, while the positive self-esteem in the intellectual-cognitive sphere is equally poorly marked. This is accompanied by the strongest in all clusters tendency to defensive falsifications of self-concept, i.e. the highest scores on the scale of falsehood, documenting a tendency to portray oneself in a better light. This means, albeit indirectly, that for this group the social mirror is very important, i.e. the assessment of significant others and a desire to meet their expectations, while the assessments of individuals formulated by the different educational environments and concerning different areas of its operation can constitute an important mechanism of disorders.

Methodology of own research and description of the statistical procedure

Respondents. The study included the charges of MOW and MOS⁵ from the Świętokrzyskie province (N = 247) aged 16-19 years old. The research material was collected in the period from September 2012 to January 2013.⁶ The presented research results were based on data obtained from the *Questionnaire of Intrapersonal, Interpersonal Attitudes towards the World and Life* (Kwestionariusz Nastawień Intrapersonalnych, Interpersonalnych, wobec Świata i Życia – KNIIS⁷) by Ewa Wysocka (2011), used to measure: a) the general, non-specific self-esteem and specific self-esteem: cognitive-intellectual, physical, socio-moral, characterological, and global self-esteem, i.e. generalized specific self-esteem, b) image of interpersonal relationships – “others towards me” (threat, support), “I towards others” (prosocial behavior, aggression), c) image of the world – benevolence, organization and meaningfulness, d) image of one’s own life – control and agency, lack of control, learned helplessness⁷.

The subject of the research constitutes selected factors as well as socio-demographic and personality correlates of polarization of self-esteem of socially maladjusted youth.

Aim of the research. The primary aim (cognitive) was an attempt to identify certain correlates and factors relevant to the pre-existing polarization of self-es-

⁵ The study included both types of institutions, as under the current Act, minors aged between 13 and 18 years old are sent there. In this Act, the behavior/social maladjustment disorder is defined as demoralization, but there is no *strict* definition of the term. One can only detect an idiographic description, which considers a demoralized minor a person who “in particular violates the rules of social intercourse, commits offenses, systematically evades compulsory schooling or vocational education, consumes alcohol or other means to enter into a state of intoxication, engages in prostitution, vagrancy or participates in criminal groups” (Act on proceedings in juvenile cases from 1982, art. 4 § 1). Under the Act, the tasks of MOS and MOW include: the elimination of the causes and manifestations of social maladjustment and preparation of charges for life in accordance with social norms and regulations (Regulation of the Ministry of Education of 12 May 2011, § 11, 12). A differential diagnosis of the symptoms of social maladjustment is difficult and based in practice on an unreliable diagnostic workshop, hence the symptoms and the level of disorders of charges in both social rehabilitation facilities may be the same, and even their real occurrence of differences is, in the case of using the “k-means” analysis method, justified and necessary (distinguishing types of internally similar, externally different individuals). The selection of the sample also has statistical justification.

⁶ Earlier research material was analyzed in other respects: the previously indicated polarization of self-esteem (Wysocka, Ostafińska-Molik in press), the results of comparative studies of youth from MOW and MOS, as well as youth properly adapted (the analysis of differentiations of life attitudes – self-concept, the world, one’s own life and interpersonal relationships; Wysocka, Ostafińska-Molik 2014).

⁷ The tool has been tested in psychometric terms (satisfactory accuracy and reliability) and was subjected to the process of normalization (on a group of properly adapted people – junior high school youth).

teem of socially maladjusted youth (tendency to low self-esteem – negative “reflected self”; tendency to inflated self-esteem – positive “defensive self”; “self not specified – uncertain”). The practical aim was to try to create a model of factors polarizing self-esteem, which is the basis for the construction or selection of social rehabilitation and educational programs, depending on the specific factors evoking the problems experienced by socially maladjusted youth in terms of self-concept.

Problems, research questions, variables and hypotheses. By adopting the assumptions: (a) on problems with self-esteem (defensively positive, negatively assigned, instability of self-esteem), (b) that self-esteem is the result of diverse experiences with oneself, resulting both from the social position (social context) and individually determined (personality context, self-esteem it is an element of self-concept and thus personality in terms of the cognitive)⁸, the following **research problem** was put forward:

How and what socio-demographic and personality factors are related to the type of self-esteem (defensively positive, reflected – negative, unstable-undetermined)?

Its development are the following **research questions**:

1. How does the social position (indexed by place of residence) differentiate the emerged types of self-esteem (*defensively positive, reflected – negative, unstable -undetermined*)?
2. How does individual religiosity (indexed by autodeclaration of faith and level of religiosity) differentiate the emerged types of self-esteem (*defensively positive, reflected – negative, unstable -undetermined*)?
3. How does personality (indexed by beliefs/attitudes towards others, the world and one’s own life) differentiate the emerged types of self-esteem (*defensively positive, reflected -negative, unstable -undetermined*)?

The variables adopted for the analysis, the connection of which are analyzed as follows:

1. **dependent variable** (hypothetical)⁹, the level and type of self-esteem: defensively positive self-esteem, negative – reflected self, unstable – undetermined self-esteem;
2. **independent variables** (hypothetical): place of residence, individual religiosity, personality as a system of beliefs: the image of the world, the image of one’s own life, as well as interpersonal relationships.

Due to the diagnostic-exploratory nature of the studies, only a general, undirected **research hypothesis** was put forward:

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⁸ It is assumed that the formation of self-esteem is influenced by both anatomical-physiological and psychosocial factors: the opinions of others, comparing ourselves with others, successes and failures, but also social origin, parents’ education and their socio-economic position (Leśniak 2003 p. 33–34).

⁹ The analysis of differences and correlations are difficult to determine, which variable is dependent and which is independent; therefore, we conclude only the link of variable and differentiation of specific features in different groups. One can therefore only assume hypothetically which variable is affected by others, and which causes these changes.

There are significant heterogeneity among the selected groups of different type of self-esteem (defensively positive, reflected – negative unstable – undetermined) on selected socio-demographic characteristics (place of residence, declaration of personal religiosity) and personality (image of the world, image of one's own life, the image of interpersonal relationships).

Method of analysis. In order to select groups that differ in self-esteem, cluster analysis was applied using the k-means method. It is one of the most widely used grouping methods in taxonomic practice (Hair et al. 2006; Rószkiewicz 2011; Larose 2012; Tabachnick, Fidel 2013). Thanks to its use, three clusters of self-esteem were distinguished¹⁰, which were then analyzed, focusing on the emergence of factors and correlates of grouping (polarization) self-esteems of socially maladjusted youth (differentiating homogeneous groups in terms of self-esteem – defensively positive, negative – reflected and undetermined – unstable).

Description of the statistical procedure. In the first step of analysis five segments (variables) were selected *a priori*, which were further analyzed. We eliminated units from the analysis which clustered, forming so-called outlier points (k-means is sensitive to outlier cases). The quality of each group of clusters was evaluated, analyzing the value of the Celiński-Harabasz index (CH). The CH index reached a satisfactory value in the three clusters, hence the decision to remain with this number of clusters in further analyses. The revealed clusters were analyzed in terms of the variables that differentiate them, using qualitative variables of the chi-square variant test for two variables for the analysis. This made it possible to obtain information about the existence or absence of a link between the analyzed variables (Rycielski, Brzezicka 2007). Another statistical method used was the Kruskal-Wallis test, which corresponds to the one-way analysis of variance. It is recommended to use it when the assumptions of the ANOVA test are broken. Due to the fact that three analyzed groups were not equal in size, the Kruskal-Wallis nonparametric test was used, which helped to identify the differences and similarities of variable results between the three analyzed clusters. Subsequent analyses were used to check the differences of results for each cluster with each. For this purpose, the non-parametric Mann-Whitney U test was used, which is used to test the differences between two independent groups (Francuz,

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¹⁰ The k-mean analysis is a method that allows to assign observations made to different clusters so that they are internally similar and different between the identified clusters as much as possible. Analyses are carried out in several stages. The first stage involves the selection of a set of typological features. It should be noted that it is directly linked to the conceptualization of research. The statistical part consists of: a) the division of objects into k of predetermined clusters (determination of initial k cluster centers); b) the calculation of the distances to cluster centers for each object; c) classification to the nearest cluster; d) the calculation of new cluster centers (centers of gravity of clusters); e) the re-calculation of the distance and classification of objects in order to achieve convergence (stabilization cluster centers); f) the final assignment of objects to clusters.

Mackiewicz 2005). The data were analyzed using the statistical program PS IMA-GO (SPSS 22.0).

Factors and correlates of the polarization of self-esteem of socially maladjusted people – results of own study

1. Socio-demographic correlates of the polarization of problems with self-esteem. Selected socio-demographic variables were analyzed, the data of which were collected during the study: place of residence¹¹, declaration of faith and autodeclaration of the level of individual religiosity¹², juxtaposing them with the identified clusters of self-esteems (cluster 1 – negative self-esteem, cluster 2 – defensively positive self-esteem, cluster 3 – undetermined self-esteem). Table 1 shows the distribution of the place of origin of the surveyed charges (place of residence before staying at MOW, MOS) in the context of the types of polarizations of self-esteem (various problems with self-esteem). The analysis with the χ^2 test showed no significant relationship between assignment to cluster (1, 2, 3) and the place of residence. The result was statistically insignificant, indicating no positive or negative correlation between the size of human clusters (urban, rural) where the respondents come from and the formation of self-esteem.

Table 1. Place of residence and the polarization of self-esteem

Place of residence	Number of observation cluster						Total	
	1 (SN)		2 (SP)		3 (SCh)			
	N	%	n	%	n	%	n	%
Village	12	27.9	14	23.7	27	20.0	53	22.4
Small city	8	18.6	8	13.6	34	25.2	50	21.1

¹¹ In justifying the adoption of the independent variable – place of residence – we indicate that being in a particular social and cultural environment has a significant impact on self-esteem. The human is considered to be a social being, who operates in a given social system, that is the family, peer group, or neighbor group, and these are located in the social structure “in different positions”, which determine the quality of the educational environment and, at the same time, the quality of educational interactions, various developmental possibilities, which can be the basis for forming self-esteem. In addition, it can be assumed that the study was exploratory in nature, so the rarely analyzed variable – place of residence – as a determinant of self-esteem, was associated with obtaining insight into its importance for the formation of self-concept.

¹² Individual religiosity can be recognized as a perpetuated personality trait, but in the sociological sense it is treated as a variable defining the specific features of belonging and identification with a particular community: a proreligious group and irreligious group (division into social groups depending on membership in a particular community). Autodeclaration is associated rather with the determination of belonging than studying the personal quality which is religiosity.

Place of residence	Number of observation cluster						Total	
	1 (SN)		2 (SP)		3 (SCh)			
	N	%	n	%	n	%	n	%
Medium city	16	37.2	18	30.5	35	25.9	69	29.1
Large city	7	16.3	19	32.2	39	28.9	65	27.4
Total	43	100.0	59	100.0	135	100.0	237	100.0

SN – negative self-esteem; SP – positive self-esteem; SCh – unstable self-esteem, undetermined.
 Source: own study [$\chi^2 = 4.725, df = 4, p = 0.317$].

However, there are some visible specific trends (Fig. 1), which could appear stronger in a larger research sample. They are revealed especially clearly and are explicitly focused in cluster 3 (undetermined self-esteem), as the increase of uncertainty of self-concept is visible, depending on the place of residence (the higher the human cluster, the more uncertainty and instability of self-esteem appears). Negative self-esteem, reflected, is more clearly revealed in the countryside and in medium-sized cities, and much less frequently revealed in small and large cities. Defensively positive self-esteem reveals itself significantly stronger in larger urban areas (medium and large cities), although in general, the problems with positive self-esteem (defensively), negative (assigned) and undetermined (unstable) are strongly marked in medium and large cities.

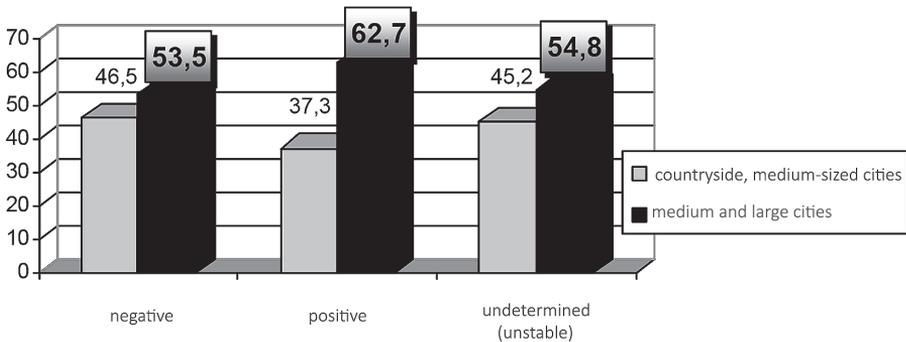


Fig. 1. Polarization of self-esteem and place of residence

It can be concluded, though very cautiously, that larger urban clusters generally create much bigger problems in the formation of adequate self-esteem of socially maladjusted people, but are not essential to the polarization of the emerged problems with self-esteem. Though, also very carefully, one can draw the hypothesis (worth checking in a larger research sample), that in larger urban clusters the tendency to generate defensively positive self-esteem and/or undetermined

unstable self-esteem is more frequently visible, and in smaller places the reflected negative self-esteem. The first may be due to the greater diversification of impact of the social environment in big cities, and therefore also the difficulties associated with the process of self-identification (problems with determining the “ideal, should self”, and thus the difficulty in assessing their convergence vs divergence from the “real self”). The second tendency can however be combined with clearly established in smaller communities standards defining the “ideal self” and the “should self”, and also stronger social control than in larger urban clusters; therefore the process of self-identification is possible towards the negative “real self”, which is the result of reflecting the marked exemptions from the required standards of social assessments.

Another socio-demographic variable, whose importance for the polarization of self-esteem and problems in this respect experienced by socially maladjusted youth was declared religiosity (declaration of faith, autodeclaration of the degree of religiosity). The attitude towards faith (proreligious vs irreligious) did not differentiate significantly individual clusters – the score of the **chi**² test turned out to be statistically significant (Tab. 2), although it was in the range of so-called statistical significant trends, often in the social sciences (pedagogical) defined as significant ($p < 0.1$).

Table 2. Attitude towards faith and the polarization of self-esteem

Attitude towards faith	Number of observation cluster						Total	
	1 (SN)		2 (SP)		3 (SCh)			
	n	%	n	%	n	%	n	%
Believers	23	53.5	43	69.4	82	62.1	148	62.4
Religiously indifferent	10	23.3	13	21.0	39	29.5	62	26.2
Non-believers	10	23.3	6	9.7	11	8.3	27	11.4
Total	43	100.0	62	100.0	132	100.0	237	100.0

Source: own study [$\text{chi}^2 = 7.861$; $\text{df} = 4$, $p = 0.097$].

Based on the distribution of the results it can be assumed that the attitude towards faith is – paradoxically – a factor of “risk of hazard” of problems with self-esteem, which denies the cathartic features attributed to individual religiosity. The declaratively dominant positive attitude towards faith evokes both problems with negative self-esteem (though relatively the least: 53.5%), and problems with its determination (62.1%), while to the greatest degree it is a factor for the formation of a positive self-concept (69.4%). This means that the ideal of self-improvement promoted by religion, faith, may constitute a direct factor in the formation of a negative self-concept (not in accordance with the “ideal self”

and the “should self” indicated by religious principles), the defensive falsification of self-concept in a positive direction (but inadequate, probably “should” and/or “ideal” – as prescribed by religion), which can be attributed to the dominance of a defense mechanism of the positive “self” (real). The significant – as it seems – impact of individual religiosity for the formation of unstable, undetermined self-esteem is probably associated with a sense of failure to meet the required standards and still preserved self-awareness (defensively undistorted) of the “real self”, which does not fulfill them.

In the context of the importance of the religious sphere for the polarization of problems with self-esteem, it was also checked whether the degree of identification with the professed religion (indexed by the autodeclaration of the level of individual religiosity) differentiates persons qualified for individual clusters, depicting different problems with self-esteem (Tab. 3). The analysis showed no significant differences of problems with self-esteem determined by the adopted variable (means of religiosity in three clusters are not significantly different). The observed trends are consistent with the results concerning the problems with self-esteem evoked by the declaration of faith, which seems obvious; but the lack of even a trend of significance differences (more pronounced than in the previous indicator of religiosity) can be explained perhaps by the little awareness in terms of meeting the standards set by the professed religion (it is possible that the respondents performed self-determination here more accidentally).

Table 3. Level of religiosity and the polarization of self-esteem

Degree of religiosity	Number of observation cluster		
	1 (SN)	2 (SP)	3 (SCh)
M	3.05	3.87	3.58
SD	2.32	1.95	2.20

Source: own study [n.i.].

2. Personality correlates of the polarization of problems with self-esteem.

Selected personality traits were analyzed (a system of beliefs about the world, one’s own life and the “I-world” relation)¹³. We are aware that self-esteem is an element of a system of beliefs that make up the personality of an individual (also socially maladjusted); however, distinctions were made here of clusters of problems with self-esteem experienced by socially maladjusted people and analyses of the personality correlates associated with the image of the world, interpersonal re-
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¹³ The cognitive concept of personality adopted is the basis for treating it as – fixed in the learning process in the course of experiences with oneself and contacts with the social environment – a system of beliefs about oneself, the world, one’s own life and the “I-world” relation (Epstein 1985, 1990a, b, 1991a, b, 2003, 2006).

relationships and one's own life, in order to determine their specificity in individual clusters of self-esteem (problems with the formation of an adequate self-esteem). In the next stages of exploration, an analysis was conducted which aimed to determine the specific differences between each group (manifesting various problems with self-esteem). This is important to determine the correlates of various types of self-esteems (defensively positive, negative reflected, undetermined – unstable), indicate which parameters (personality traits) are similar in different clusters, and which differentiate them¹⁴.

As the analyses performed indicate (Tab. 4), in terms of nearly all subscales relating to the possessed personality traits/beliefs, significant differences between clusters are observed (emerged problems with the polarization of self-esteem). An exception here is the scale of aggression, which does not distinguish between the emerged clusters of self-esteem¹⁵.

Table 4. Self-esteem and personality – means and ranks for individual clusters

Personality traits – beliefs	Number of observation cluster						p*
	1 (SN) (n = 46)	2 (SP) (n = 63)	3 (SCh) (n = 140)	1 (SN) (n = 46)	2 (SP) (n = 63)	3 (SCh) (n = 140)	
	M			Ranks			
Sense of support	23.65	32.87	27.98	62.03	188.12	117.29	p < 0.001
Sense of threat	25.33	21.49	23.87	148.85	93.29	131.43	p < 0.001
Others towards me	46.04	61.06	53.46	61.63	184.81	118.91	p < 0.001
Prosocial behavior	25.70	33.02	28.48	71.26	191.75	112.62	p < 0.001
Aggression	24.57	24.78	25.56	119.37	118.00	130.00	n.i
I towards others	48.52	58.08	52.46	74.58	177.56	117.91	p < 0.001
Meaningfulness, organization	20.17	22.68	21.94	97.47	140.19	127.21	p < 0.001
Benevolence of the world	22.09	26.68	24.36	77.29	166.91	121.81	p < 0.001

¹⁴ Adopted qualities: interpersonal functioning – “I towards others” (prosocial behavior, aggression), “others towards me” (sense of support, sense of danger), the image of the world and the image of one's own life.

¹⁵ Besides the essential scales, the score for two so-called “inverted scales” has been shown: no threat and no aggression. The scores of the first scale differentiate all clusters. Persons from cluster 2 received the highest score (they feel the least threatened), while individuals from cluster 1 the lowest score. In the second scale, the lack of aggression differentiates only cluster 1 and 2. Persons from cluster 2 and 3 exhibit a lack of aggression on the same level.

Personality traits – beliefs	Number of observation cluster						p*
	1 (SN) (n = 46)	2 (SP) (n = 63)	3 (SCh) (n = 140)	1 (SN) (n = 46)	2 (SP) (n = 63)	3 (SCh) (n = 140)	
	M			Ranks			
Image of the world	42.27	49.36	46.29	77.60	162.44	123.73	p < 0.001
Sense of efficiency/control	25.74	36.09	30.05	62.52	199.19	112.14	p < 0.001
Sense of helplessness	23.22	16.68	23.89	140.89	58.27	149.81	p < 0.001
Image of life	48.96	52.78	53.94	89.87	125.56	136.29	p < 0.001

Source: own study¹⁶.

The first area of analysis concerned method of functioning in interpersonal relationships, and therefore beliefs/perceived attitudes of others towards “I” (others towards me), and beliefs/declared attitudes towards other people (I towards others).

“Others towards me”: *The sense of support* differentiates each of the selected clusters, i.e. the type of experienced problems with self-esteem. The highest scores relate to cluster 2 – defensively positive self-esteem [(M_{rank}) = 188; M = 32.87], while the lowest to cluster 1 – reflected negative self-esteem [(M_{rank}) = 62; M = 23.65]. The deficit of support is therefore the most important mechanism of negative self-esteem (I don’t deserve help, negative stigma), and the experience of support can generate positive, albeit inadequate self-esteem (because others appreciate me, no negative stigma). In contrast, the *sense of threat* differentiates cluster 1 with cluster 2, and cluster 2 with cluster 3, while those people from cluster 1 and 3 obtained a similar score. This means that the sense of threat may be important for the formation of a negative self-esteem, reflected [(M_{rank}) = 148.85; M = 25.33] and undetermined self-esteem, unstable [(M_{rank}) = 131.43; M = 23.65], where the level is significantly higher. The declared absence (lower level) of the sense of threat is to some extent a protective factor, i.e. determines a positive self-esteem, although defensive, therefore inadequate [(M_{rank}) = 93.29; M = 21.49].

The image of perceived – generalized – attitudes of others towards “self” (positive vs negative) is statistically significantly different in all three clusters: the least positive attitudes of others are perceived by people with a negative reflected self-esteem [(M_{rank}) = 62.63; M = 46.04], and the most positive attitude towards

¹⁶ Due to the large differences in the number of respondents in individual clusters, the nonparametric Kruskal-Wallis test was used. It made it possible to determine differences between groups.

each other is declared by people with a defensively positive self-esteem [$(M_{\text{rank}}) = 184.81$; $M = 61.06$], while the ambivalence of attitudes of others towards “self” is a property of an undetermined self-esteem [$(M_{\text{rank}}) = 118.91$; $M = 53.46$]. Due to the fact that the differentiations are significant for all clusters, it can be concluded that the social mirror, namely the impact of the educational environment (their quality – support vs threat) are an important mechanism of the polarization of problems with self-esteem.

“I towards others”: *Prosocial behavior*, which is a positive attitude towards others, differentiates all the selected groups of polarized self-esteems, while persons from the 2nd cluster obtained the highest scores [$(M_{\text{rank}}) = 191.75$; $M = 33.02$], the lowest in cluster 1 [$(M_{\text{rank}}) = 71.26$; $M = 25.70$], and average in cluster 3 [$(M_{\text{rank}}) = 112.62$; $M = 28.48$]. This is a score that is similar to the sense of obtained support, so it can be thought that these qualities “work” on the principle of “reciprocation”. The sense of support in return generates prosocial behavior, and its perceived deficit can cause self-centeredness as justified by attitudes of others towards “self”. Undetermined self-esteem is associated with a conflictual perception of the support of others and thus relativized (unstable) prosocial behavior. Generally, what is interesting, another quite obvious and theoretically and empirically confirmed mechanism of social perception appears (Aronson, Aronson 2009; Aronson et al. 2012), and hence relatively higher in all clusters (self-esteem) is prosocial behavior (i.e. more positive perception of “self”) than the sense of support felt by respondents (i.e. less positive perception of others). *Aggression* does not differentiate the emerged problems with self-esteem, which means that its level is in all clusters similar and relatively high [cluster 1 ($M_{\text{rank}}) = 119.37$; cluster 2 ($M_{\text{rank}}) = 118.0$; cluster 3 ($M_{\text{rank}}) = 130$]. One can judge, referring to John Dollard and Neal Miller’s concept of frustration-aggression (Dollard et al. 1939) and its modifications (Berkowitz 1989, 1993, 1997, 1998, 2008), that regardless of various frustrating factors (cluster 1 – threat to a positive self-concept; cluster 2 – negative self-concept; cluster 3 – inner conflict, controlled from the outside – associated with the inability to a clear self-definition), aggression can be a negative correlate of self-esteem, probably a consequence of problems with self-esteem, regardless of the direction and quality of its polarization. Although the results are not statistically significant, having “some” determined (positive or negative) self-concept to a lesser extent triggers aggression (“frustrates” less) than the complete lack thereof (undetermined self-esteem).

The image of perceived – generalized – attitudes of “self” towards other people (positive vs. negative) is analogous to the image of attitudes of others towards “self” and also statistically significantly differentiates all clusters: the least positive attitudes towards others are presented by people with a negative reflected self-esteem [$(M_{\text{rank}}) = 74.58$; $M = 48.52$], the most positive to others are people with a defensively positive self-esteem [$(M_{\text{rank}}) = 177.56$; $M = 58.08$], while ambivalent attitudes towards other people are presented by people exhibiting an

undetermined self-esteem [$(M_{\text{rank}}) = 117.91; M = 52.46$]. The significance of differentiation in all clusters also indicates that the manner of operating in the world (its quality – prosocial behavior vs aggression) can reflexively and referentially constitute the basis (mechanism) of the polarization of problems with self-esteem. It is also important to confirm the mechanism of a more positive perception of one's own attitudes and behavior towards others – prosocial behavior, lack of aggression, than the behavior of others towards the evaluating entity – support, no threats (“self” is better than others).

Another area of analyses concerned the perceived image of the world, i.e. beliefs related to its meaningfulness, organization and benevolence towards “self” (or their opposition). The perceived *benevolence of the world* statistically significantly differentiates all clusters of all self-esteem, but the world as the most favorable to them is perceived by those from cluster 2 – defensive positive self-defense [$(M_{\text{rank}}) = 166.91, M = 26.68$], while as the least benevolent by those from cluster 1 – reflected negative self-esteem [$(M_{\text{rank}}) = 77.29, M = 22.09$], the results in cluster 3 of self-esteem (undetermined) assume indirect values [$(M_{\text{rank}}) = 121.81, M = 24.36$]. The result seems obvious, because the perception of the world as favorable vs unfavorable to people is an indicator of teaching experiences, related to functioning in the educational environment (which positively supports, negatively marks or is inconsistent in its interactions), which may translate into making an assessment of oneself (more or less positive). *Meaningfulness and organization of the world* differentiates problems with self-esteem to a smaller degree, for it has a more cognitive and secondary character than the more personally felt benevolence of the world. In addition, it can be assumed that the world, regardless of its sense of reasonableness and organizing can be seen/experienced as more or less favorable. This means that the benevolence of the world is often the result of personal experience and is therefore strongly felt, and the meaningfulness is the result of generalized beliefs which have a *purely* cognitive character. It is possible that it results in bigger importance for the formation of self-esteem of more experienced and emotionally lived benevolence of the world, than the more declarative and perceived of its reasonableness and organizing. *The meaningfulness and organization of the world* differentiates cluster 1-2 and 1-3, which reveals differences in the range of the reflected negative self-esteem [$(M_{\text{range}}) = 97.47, M = 20,17$], as compared with defensively positive self-esteem [$(M_{\text{ranks}}) = 140.19, M = 22.68$] and undetermined, unstable [$(M_{\text{rank}}) = 127.21, M = 21.94$]. Between cluster 2 and 3 the difference is not statistically significant. It can therefore be concluded that a specific mechanism for the formation of problems with negative self-esteem (reflected, assigned) is the perceived level of meaningfulness and organization of the world. In a sense, it is a mechanism paving the way to “nihilism” (the world is worth little, because no “rules of the game” are respected, it is unjust, stigmatic, “badly organized”, but at the same time the individual is subject to its unjust interactions, identifying with the image assigned to oneself).

This variable is less important for the formation of a defensively positive and undetermined self-esteem; however, this does not mean that this type of problems are not generated at all, only that people from cluster 2 and 3 can react to this types of forms of interaction of the world in a more defensive way, by opposition or even by conflict (people from cluster 1 with an imposed negative self-concept identify themselves more strongly).

Generally, however, the image of the world (positive vs negative) – as a general variable differentiates all 3 clusters of self-esteem, so it can be assumed that people who have a defensively positive self-esteem see the world most positively – $[(M_{\text{rank}}) = 162.44, M = 49.36]$ (the largest but positive compliance of the image of the world with self-concept: “I and the world are OK”), while people with a reflected negative self-esteem experience the world most negatively – $[(M_{\text{rank}}) = 77.60, M = 42.27]$ (the largest but negative compliance of the image of the world with self-concept: “I and the world are not OK”). People from cluster 3 – with undetermined self-esteem – $[(M_{\text{rank}}) = 123.73, M = 46.29]$ are experiencing internal conflict here (“I’m OK, the world is not OK” or “I’m not OK, the world is OK” – depending on the experienced situation and probably the kind of frustration)¹⁷.

The last area of analysis concerned the perceived image of one’s own life, i.e. the beliefs associated with a sense of efficiency and control over one’s own lives (or their opposition – a sense of helplessness and lack of control). *The sense of efficiency/control* statistically significantly differentiates all three clusters defining the polarization of self-esteem among socially maladjusted people (the differentiation is the greatest of all the analyzed traits): cluster 1 – negative self-esteem, reflected $[(M_{\text{rank}}) = 62.52, M = 25.74]$; cluster 2 – defensively positive self-esteem $[(M_{\text{rank}}) = 199.19, M = 36.09]$; cluster 3 – undetermined, unstable self-esteem $[(M_{\text{rank}}) = 112.14, M = 30.05]$. The result is interpretively obvious, as there is a compatibility here between the assessment of one’s own resources (even if it is inadequate) and the perception of the results of one’s own actions (positive self-esteem fosters a sense of control over one’s own life, negative explicitly turns off this feeling, while undetermined self-esteem causes inconsistency in the perception of sources of control, depending on the situation experienced). *The sense of helplessness* to a lesser extent differentiates the revealed clusters of self-esteem, because its level is similar (high) among those with a negative self-esteem $[(M_{\text{rank}}) = 140.89, M = 23.22]$ and undetermined self-esteem $[(M_{\text{rank}}) = 149.81, M = 23.89]$; while people with a positive self-esteem, whose sense of helplessness is low are different

¹⁷ This result is consistent with the assumptions of transactional analysis, which distinguishes 4 life attitudes (Harris 1987, p. 52–70, cf. 2009), i.e. the concept of bonding styles – 4 models of emotional ties (Bartholomew, Horowitz 1991, p. 226–244), which overlap each other: “I am not OK – you are OK” – absorbed style; “I am not OK – you are not OK” – avoiding-anxiety style; “I am OK – you are not OK” – rejecting-avoiding style; “I am OK – you are OK” – trusting style (see Gózdź, Wysocka 2013, p. 69–89; Wysocka, Gózdź 2013, p. 95–116).

in this regard [$(M_{\text{rank}}) = 58.27, M = 16.68$]. The inference here is analogous to the sense of effectiveness (lower sense of helplessness is associated with defensively positive self-esteem, higher with negative and undetermined self-esteem), but a clear differentiating tendency revealed, dependent on the direction of the assessment – the meaning of “more cautious” (less decisive) assessment of one’s own deficits is visible, than in the case of assessing one’s effectiveness (this simultaneously determines a smaller differentiation between the polarized self-esteems indicated by the sense of helplessness). Perhaps this is connected with the need to maintain a positive self-concept, which belongs to the dominant (as highlighted earlier).

Thus, a generalized image of life (positive vs. negative) significantly differentiates only cluster 1 – reflected negative self-esteem [$(M_{\text{rank}}) = 89.87, M = 48.96$], in relation to cluster 2 – defensively positive self-esteem [$(M_{\text{rank}}) = 125.56, M = 52.78$], as well as cluster 3 [$(M_{\text{rank}}) = 136.29, M = 53.94$]. People with a reflected negative self-esteem (the world convinces them that “they are not worth much”) have the most negative (low scores) perception of their own capabilities of effective action. Defensively positive and undetermined self-esteem define a more positive perception of one’s own capabilities, perhaps for slightly different reasons. Positive self-esteem directly determines confidence in one’s own capacity to act effectively, while undetermined self-esteem – paradoxically evokes the greatest confidence in one’s own capabilities, which may be linked to their overestimation. This generates an inadequate sense of efficiency determined by the need to control and act effectively, supporting the development of self-esteem, which is unstable, in the positive direction (the need for a positive self-concept). This inference has an unconfirmed status – theoretically and empirically – of a hypothesis, but interesting and worth further exploratory research.

The detailed results of the analysis between clusters are summarized in Table 5, and the model of specific variables for the selected clusters is presented generally in Diagram1.

Table 5. Mann-Whitney differences test between individual clusters

Test of comparisons between groups			
dependent variable	cluster number		significance
Support	1 (SN)	2 (SP)	0.000
		3 (SCh)	0.000
	2 (SP)	3 (SCh)	0.000
Threat	1 (SN)	2 (SP)	0.000
		3 (SCh)	0.164
	2 (SP)	3 (SCh)	0.001

Test of comparisons between groups			
dependent variable	cluster number		significance
Prosocial behavior	1 (SN)	2 (SP)	0.000
		3 (SCh)	0.000
	2 (SP)	3 (SCh)	0.000
Aggression	1 (SN)	2 (SP)	1.000
		3 (SCh)	0.519
	2 (SP)	3 (SCh)	0.691
Meaningfulness	1 (SN)	2 (SP)	0.000
		3 (SCh)	0.006
	2 (SP)	3 (SCh)	0.411
Benevolence	1 (SN)	2 (SP)	0.000
		3 (SCh)	0.001
	2 (SP)	3 (SCh)	0.000
Image of the world	1 (SN)	2 (SP)	0.000
		3 (SCh)	0.000
	2 (SP)	3 (SCh)	0.000
Sense of efficiency	1 (SN)	2 (SP)	0.000
		3 (SCh)	0.000
	2 (SP)	3 (SCh)	0.000
Sense of helplessness	1 (SN)	2 (SP)	0.000
		3 (SCh)	1.000
	2 (SP)	3 (SCh)	0.000
Image of life	1 (SN)	2 (SP)	0.009
		3 (SCh)	0.000
	2 (SP)	3 (SCh)	0.736
Others towards me	1 (SN)	2 (SP)	0.000
		3 (SCh)	0.000
	2 (SP)	3 (SCh)	0.000
I towards others	1 (SN)	2 (SP)	0.000
		3 (SCh)	0.000
	2 (SP)	3 (SCh)	0.000

1 (SN) – negative self-esteem; 2 (SP) – positive self-esteem; 3 (SCh) – undetermined, unstable self-esteem.

Source: own study.

Summary and final reflection

The image of oneself, the world and own relations in it are formed in the course of development, learning, and gaining life experience in a logical and holistic way. The adopted cognitive concept is highlighted by the complexity of convictions, making up personality (mature vs. immature) and their mutual determination. In view of these results, it can be stated that the polarization self-esteems and problems associated with their formation in socially maladjusted people is the logical consequence of the so-called learning experience, and constitutes a logically-related system – albeit distorted – of beliefs about the nature of the world and people, in contacts with which the individual builds self-concept, simultaneously determining beliefs about personal capabilities in the world.

An approximate image of a system of beliefs characteristic of the selected polarizations of self-esteem: reflected negative, defensively positive and undetermined, unstable, is presented in Figure below.

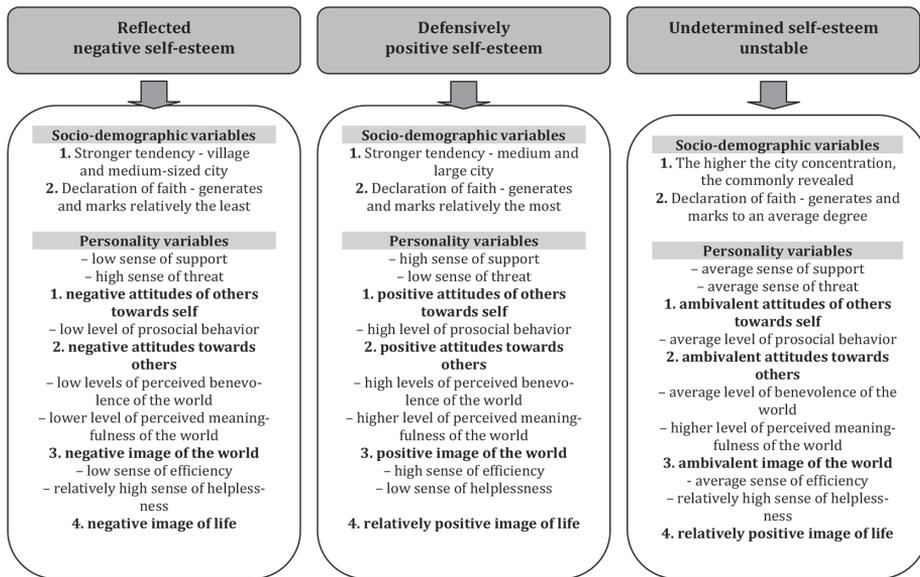


Fig. 1. Model of variables characteristic of the selected clusters of self-esteem

Self-assessment of socially maladjusted people is not homogeneous, which is important from the perspective of ambiguity of empirical decisions in this area. May be inadequate – overvalued and undervalued, as well as unstable, undetermined. The still dominant hypothesis about low and undervalued self-esteem of socially maladjusted people is not confirmed. Self-esteem, like the image of

the world, other people, and one's own life, is probably of procedural character, while the developmental line of shaping the system of interrelated beliefs in socially maladjusted people is associated with their specific experiences: they can therefore proceed from primary self-identification, congruent to reflected negative self-esteem, through the occurrence of ambivalence in terms of forming attitudes towards oneself, the world and one's own lives, to the re-adoption of a defensive attitude, protecting one's own values, which may be related to the autonomisation of the deviant identity. This inference is justified theoretically and empirically, but still inadequate, and furthermore does not take into account the efforts in this area of variable studies, which can determine the polarization of self-esteem, e.g. the level of disorders or internal differentiation of typological disorders. Research in the area of the belief system of maladjusted people, however, is necessary if we are to effectively restructure them. Disclosure of the polarization of self-esteem and its correlates may therefore be an important input for the design of educational and social rehabilitation as well as therapeutic activities, adequately disclosed to cognitive distortions – the wrong self-concept, relationships with other people, the image of the world or the image of one's own life.

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