EFFECT OF SELF ESTEEM ON PSYCHOLOGICAL WELLNESS AMONG ADOLESCENT STUDENTS IN NAIROBI: A CASE OF HILLCREST INTERNATIONAL SCHOOL

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DECLARATION

I declare that this thesis and the research that it describes are my original work and that they have not been presented to any other university for academic work.

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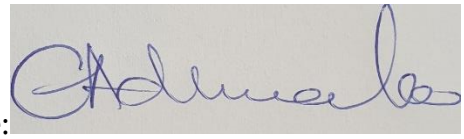
Signature:  Date……..

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DEDICATION

This research thesis is dedicated to my husband (Edward Karanja), who has been my constant source of inspiration and encouraged me when I felt like giving up. He has continually provided their moral and financial support. I am forever grateful.

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ABSTRACT

Developing high self-esteem and avoiding low self-esteem are commonly seen as critical social goals, especially among adolescents. Despite this, institutions are yet to develop and implement psychological wellness programs that promote adolescent students' well-being. Therefore, this study sought to examine the effect of self-esteem on psychological wellness among adolescent students in a case study of Hillcrest international school, in Nairobi, Kenya. The study was guided by objectives that sought to evaluate the effect of high, moderate and low self-esteem on the psychological wellness of adolescent students in Hillcrest international school in Nairobi, Kenya. Self-determination and Sociometer theories guided the study. A descriptive cross-sectional study approach was employed in the research. The targeted population was 570 adolescent high school students in Hillcrest international school in Nairobi, Kenya. The researcher sampled 235 high school students through the random sampling method. Data was gathered through the use of questionnaires and interviews. To measure the level of self-esteem of the respondents, the researcher utilized the Rosenberg self-esteem scale, to measure the psychological wellness of the participants, the study used Ryff's PWB scale. Pearson's correlation coefficient was used to find the relationship between self-esteem and psychological wellness. The findings indicated a significant positive correlation ($r = 0.169$ $p = 0.831$) between high self-esteem and psychological wellness, indicating a positive relationship. Consequently, a significant positive correlation ($r = 0.973$, $p = 0.027$) was established between moderate self-esteem and psychological wellness, indicating a positive relationship. On the relationship between low-self esteem and psychological wellness, the findings ($r = -0.457$ $p = 0.543$) indicated a significant negative correlation between low-esteem and psychological wellness. Themes established from the interviews were consistent with the quantitative findings. Therefore, the findings of the study established that there is a significant relationship between the different levels of self-esteem and psychological wellness, with high and moderate self-esteem impacting the psychological wellbeing of the respondents positively and low self-esteem impacting the psychological wellbeing of the respondents negatively. Heads of learning institutions and the Ministry of Education may benefit from the findings of this study to propose methods to improve the psychological well-being of adolescent students.

DEFINITION OF TERMS

Adolescent: The World Health Organization defines an adolescent as someone aged 10 to 19 (WHO, 2000;2004). The study adopted this definition.

Adolescent stages: In this study, adolescent stages were referred to age groups of adolescents; young adolescents between 13 to 14 years of age, middle adolescents between 15 and 16 years of age; and late adolescents between 17 to 18 years of age.

Adolescent Students: This term is used in the study to refer to high school teenage students participating in the study.

Psychological wellness: According to Ryff's scale (Ryff et al., 2007), psychological well-being consists of autonomy, environmental mastery, personal growth, positive relations with others, purpose in life, and self-acceptance. The study adopted this definition.

Self-esteem: According to the APA Dictionary of psychology (2015), self-esteem is the extent to which the traits and attributes in one's self-concept are judged to be positive. It represents a person's physical self-image, perception of their accomplishments and talents, values and effectiveness in keeping up to them, and how others perceive and react to that person.

High self-esteem: According to the APA Dictionary of Psychology (2015)**,** a person's judgement that the features and attributes in their self-concept are mostly positive is referred to as having high self-esteem. Individuals who have high self-esteem have a favourable opinion of their physical self-image, accomplishments, talents, values, and ability to adhere to these values. They

are more likely to have a positive self-image and to believe in their talents, which contributes to a positive overall self-image.

Moderate Self-esteem: Moderate self-esteem is defined as a balanced and healthy state in which people perceive a mixture of good and negative features in their self-concept (APA, 2015). This level of self-esteem is seen as an important component of mental health, implying that people with moderate self-esteem have a realistic and adaptive view of themselves. They may recognise places for growth, but they generally have a positive and realistic view of their abilities and worth**.**

Low self-esteem: Low self-esteem is defined as a person's perception that the features and attributes in their self-concept are primarily negative (APA, 2015). Individuals with low self-esteem may harbour feelings of inadequacy and judge themselves harshly. This might emerge as a low sense of self-worth, a negative perception of their physical self-image, and questions about their achievements and talents. Low self-esteem is frequently related to depressive symptoms and can have a detrimental impact on overall mental health.

ABBREVIATIONS AND ACRONYMS

APA:	American Psychological Association
CBD:	Central Business District
EQ-I:	Emotional Quotient Inventory
HRQL:	Health-Related Quality of Life
NACOSTI:	National Commission for Science, Innovation, and Technology
PASA:	Psychological Association of South Africa
PWBS:	Psychological Wellbeing Scale
SDT:	Self-Determination Theory
SPSS:	Statistical Package for Social Science
WHO:	World Health Organization

CHAPTER ONE
INTRODUCTION

1.1. Introduction

The chapter describes the study's background, the problem statement, the goal of the study, the objectives of the study, the research questions, the importance of the investigation, the study's delimitation, constraints, and assumptions as well as the theoretical and conceptual frameworks.

1.2. Background of the Study

According to WHO (2017), wellness is not only the absence of disease but also physical, mental, and social well-being. Wellness can also be related to Health-Related Quality of Life (HRQL). In wellness, individuals are fully aware of their choices toward fulfilling a healthy life (Meiselman, 2016). Several factors influence an individual's level of wellness, including socio-economic factors, diets, poverty level, support structures, war, and civil strife (Yi, Landais, Koladooz, & Sharma, 2015). Wellness is often considered limited to physical well-being, combining many factors, encompassing social interactions, mental and psychological well-being, and environmental enjoyment (Oliver, Datta, & Baldwin, 2017).

Psychological well-being is the condition of being in which one's life is going well (Hoffman, Davey, & Larson, 2016). It implies a balance between feeling happy and doing well. It is jeopardized by intense or persistent negative emotions that interfere with daily functioning (Kong & Zhao, 2015). Psychological well-being entails more than just being stress-free and devoid of various psychological issues. It includes the following indicators: good self-perception and self-esteem, positive interpersonal relationships, environmental mastery, autonomy, and life purpose (Mei, Yau, Chai, & Guo, 2016).

According to Bleidon, Arslan, & Denissen (2016), self-esteem is the emotional judgment of oneself that is expressed in the form of praise or disapproval. Self-esteem measures how much people feel they are capable, relevant, successful, and worthwhile. Self-esteem is an important component of teenagers' knowledge of themselves, and it is likely to change due to internal and external events during adolescence and youth (Coelho, Marchante, & Jierson, 2016). In today's society, one of the significant drives considered sustainable is improving the extent of psychological wellness among people in the world in dealing with self-esteem (Rosenberg, Schooler & Schoenbach, 1995). Various efforts have been implemented to reduce the risks that threaten wellness among individuals (Hoffman, Davey, & Larson, 2016). Self-esteem is associated with the development of psychological issues that limit adolescent students' life satisfaction in the school setting (Kong & Zhao, 2015).

According to Poudel (2020), puberty or adolescence is a time of change from childhood into adulthood. It is set apart by various physical and mental changes that contribute to the psychological wellness of adolescents. Unlike youngsters, adolescents experience numerous unpleasant circumstances, possibly compromising or testing their self-esteem (Poudel, Gurung, & Khanal, 2020). During this period, immaturity changes in the manner in which they connect with their family and their agemates. The adolescents start to request more prominent independence and an adjusted relationship with their guardians. Simultaneously, their peers assume a critical part in young people's self-esteem. Parents' influence remains important throughout adolescence, and this positive relationship upgrades self-esteem among young people (LaRue & Herman, 2008). Many literary works have reliably shown that adolescents require social help from various sources (e.g.,

parents/family, peers/colleagues, family members, & educators). Social support from each source is instrumental in maintaining self-esteem (Allen & Finkelstein, 2003). Social help can be in various forms, such as instrumental, monetary, or instructive (Reevy & Maslach, 2001).

Globally, self-esteem issues are more common among adolescent students and have significantly been linked to an increasing level of depression, culture, and ethnicity (Shah et al., 2020). According to a study conducted in China among 1552 adolescents, at least 77.8% of the students were affected by issues related to self-esteem, which caused health-related concerns, affected their level of well-being, and inhibited their self-control ability (Mei et al., 2016). Additionally, self-esteem is associated with reduced interaction, self-worth, and weaker ethnic identity and school belonging (Gummadam, Pittman, & Loffe, 2016).

Globally, most studies have focused on the relationship between social support and psychological wellness, providing evidence of the connection between social support and mental prosperity. Studies by Cohen & Willis (1985) have demonstrated the significance of perceived social support on the mental health of adolescent students, as it assists a person with lessening how much pressure is experienced and goes about as a cradle for individuals confronting unpleasant life circumstances. Positive support from relatives has been connected with expanding psychological well-being (Chen et al., 2017). Suldo & Schaffer (2008) studied mental prosperity among youth. They found that friend support is associated with different marks of assimilating psychopathology in teenagers and co-happens with mental health among young people. These studies show that social support impacts the

psychological wellness of adolescent students; however, they don't explain how self-esteem affects their psychological well-being, hence the need for this study.

In Africa, there are studies on the psychological wellness of adolescent students concerning drug and substance abuse (Routledge, 2007). A study was done on detecting patterns of substance misuse among South African teenagers and investigating the link between psychological well-being and substance abuse (Visser & Routledge, 2007). Substance abuse increased with age, and males abused substances nearly twice as much as girls (Visser & Routledge, 2007). Another study conducted among 500 students in Sudan revealed that at least 31% of these students were likely to utilize substances like tobacco, cannabis, alcohol, and amphetamines due to low levels of self-esteem (Osman, Victor, Abdulmoneim, & Mohammed, 2016). Most studies in the African context show how drug and substance abuse impacts the psychological wellness of adolescent students; however, they don't explain the effect of self-esteem on psychological wellness, hence the need for this study.

In Kenya, a study conducted by Kobia (2016) revealed a positive relationship between the type of secondary school and the level of self-esteem in school institutions. The study also noted that school labelling was significant in the increased level of stereotyping due to school fame or prestige significantly influencing the level of self-esteem of the students. Another study also notes a significant relationship between the school climate and the level of self-esteem and well-being of the students (Mucherah, Finch, White, & Thomas, 2018). Nyagah, Stephen, & Mwania (2015) researched the impact of social networking sites on teenagers' self-esteem in secondary schools in Embu

County, Kenya. According to the study, social networking impacts secondary school students' self-esteem and psychological well-being (Nyagah, Stephen & Mwania, 2015).

Gitonga (2017) in a study published in the African Journal of Food, Agriculture, Nutrition and Development 2017 examines the relationship between body image, self-esteem, and eating behavior among female university students in Kenya. The study utilized a cross-sectional design and a convenience sampling method to recruit 257 female university students. The study found that there was a significant correlation between body image and self-esteem, and between self-esteem and eating behavior among female university students.

The study's findings suggest that female university students who have poor body image tend to have lower self-esteem, which may lead to negative eating behaviours. The study also revealed that most female university students in Kenya had a negative perception of their body image, with about 80% of the participants reporting dissatisfaction with their body shape and weight. Overall, the article provides important insights into the relationship between body image, self-esteem, and eating behavior among female university students in Kenya. However, the study's findings are limited by its small sample size and its focus on only female university students in Kenya. Future research should aim to investigate these relationships in larger and more diverse samples, including male participants and individuals from different age groups and backgrounds.

Abuga (2019) in an article published in the Journal of Child and Adolescent Psychiatric Nursing in 2019, explores the factors influencing self-esteem among Kenyan adolescents. The study utilized a cross-sectional design and a convenience sampling method to recruit 593 secondary school students in Kenya. The study found that parental

bonding, peer attachment, and gender were significant predictors of self-esteem among Kenyan adolescents. Specifically, adolescents who reported higher levels of parental bonding and peer attachment had higher self-esteem scores, while female adolescents had lower self-esteem scores compared to male adolescents.

The study's findings suggest that parental bonding and peer attachment play crucial roles in promoting positive self-esteem among Kenyan adolescents. Additionally, the study highlights the importance of considering gender differences when developing interventions to improve self-esteem among adolescents in Kenya. The article provides valuable insights into the factors influencing self-esteem among Kenyan adolescents. However, the study's limitations include its cross-sectional design, which does not allow for causal inference, and its focus on a convenience sample of secondary school students in Kenya. Future research should aim to investigate these relationships in larger and more diverse samples, including adolescents from different regions in Kenya and those who are out of school.

Despite the stated global studies on the relationship between social support and psychological wellness of adolescent students, regional studies on the relationship between drugs and substance abuse on self-esteem and psychological well-being, and local studies on the relationship of the nature of secondary schools, use of social networking sites and self-esteem and psychological wellness of the students, there was an apparent gap in the literature on the impact of self-esteem on the psychological wellness of adolescent students. Therefore, this study explored the impact of self-esteem on psychological wellness among high school adolescent students in Nairobi, a case of Hillcrest International School.

1.3. Problem Statement

The underlying problem that warranted this study is that institutions have yet to develop and implement psychological wellness programs that promote adolescent students' well-being (Hoffman et al., 2016). According to Banspach, Zaza, & Dittus (2017), 42 million adolescents between the ages of 10-19 are characterized by physical, intellectual, emotional, and psychological issues and risky behaviours that can last a lifetime. Adolescents are the most vulnerable in society concerning wellness due to factors like bullying, depression, and self-esteem. This is primarily attributed to the fact that most teenagers strive to be in certain social classes deemed acceptable among the majority (Banspach et al., 2017). Research has shown that self-esteem issues can have negative effects on the mental health of adolescens in various ways (Donnellan, Trzesniewski & Robins, 2014). For example, adolescents with low self-esteem may be more prone to depression, anxiety, and other mental health issues. They may also be more likely to engage in risky behaviours such as drug use, sexual activity, and delinquency. Additionally, low self-esteem can impact academic performance and hinder the development of healthy relationships with peers and family members (Donnellan, Trzesniewski & Robins, 2014).

These realities, therefore, raise a concern to investigate the effect of self-esteem on psychological wellness among adolescent students. Failure to carry out such studies to ascertain the underlying issues regarding the psychological wellness of adolescent students will ultimately result in more mental health issues among them. A gap exists regarding developing and implementing psychological wellness programs that promote adolescent students' self-esteem. Therefore, this study sought to adress this gap by evaluating self-esteem's effect on psychological wellness among adolescents students in Nairobi, by

exploring the effects of high, moderate and low self-esteem. This may assist the leadership, both in the government and other institutions to develop strategies that would ensure an improved state of psychological wellness for the students.

1.4. Purpose of the Study

The purpose of this study was to examine the effect of self-esteem on psychological wellness among adolescent student. The findings of this study could be used to develop interventions and strategies aimed at promoting healthy self-esteem and improving psychological wellness among adolescent students in Nairobi, Kenya.

1.5. Objectives of the Study

This study was guided by a general objective and four specific objectives.

1.5.1 General Objective

The general objective was to examine the effect of self-esteem on the psychological wellness among adolescent students in Nairobi.

1.5.2 Specific Objectives

The specific objectives of the study were:

i. To evaluate the effect of high self-esteem on the psychological wellness among adolescent students in Hillcrest International School.

ii. To assess the effect of moderate self-esteem on the psychological wellness among adolescent students in Hillcrest International School.

iii. To determine the influence of low self-esteem on the psychological wellness among adolescent students in Hillcrest International School.

1.6. Research Questions

The research questions of the study were:

i. How does high self-esteem affect psychological wellness among adolescent students in Hillcrest International School?

ii. To what extent does moderate self-esteem affect psychological wellness among adolescent students in Hillcrest International School?

iii. How does low self-esteem affect psychological wellness among adolescent students in Hillcrest International School?

1.7. Significance of the Study

The study's findings addressed a gap in understanding the impact of self-esteem on psychological wellness among high school adolescent students in Nairobi, Kenya. The relevant stakeholders may use the findings of this study to propose methods to improve the psychological well-being of high school adolescent students. The depth of the data from the research can assist the relevant schools in developing tactics that influence high self-esteem hence good psychological wellness. Additionally, it would also be essential in the reduction of poor states of wellness among students in high school institutions.

The findings may help the Kenyan government, the Ministry of Education, the Teachers Service Commission as well and the Kenya Institute of Curriculum Development understand the current trend of varying self-esteem levels, in Kenyan high schools. This might allow them to devise practical solutions for tackling the underlying causes contributing to low self-esteem among adolescent high school students in Nairobi and throughout the country. This study might be of help to counselling psychologists, particularly those who work with adolescents, select which approaches to use while dealing with adolescent behaviour and wellness issues. The study might also benefit researchers in

the field of psychology by adding into the existing body of knowledge on the effect of self-esteem on psychological wellness.

1.8. Scope of the Study

The study focused primarily on Hillcrest International School. The school choice is motivated by its proximity to the Central Business District in Nairobi. A descriptive cross-sectional study approach was employed in the study. The study content scope included background information supporting the need to carry out the study, a literature review of the relevant theories and literature based on the themes from the objectives of the study, and the research methodology detailing how the study was to be carried out. The study mainly focused on evaluating the effects of different levels of self-esteem; low, moderate and high on psychological wellness. The targeted population were the students in Hillcrest International School, between the ages of 13 and 18, in grades 9 to 13.

1.9. Limitations and Delimitations of the Study

During this research, the following limitations were considered; the study undertaken was limited to adolescent students from Nairobi, hence the results may not apply to all schools in Kenya and other countries. The sample population may not accurately represent the country's diverse adolescent students. To mitigate these limitations, the study employed a variety of data collection methods, to provide a more comprehensive understanding of the population and clear and concise instructions for each step of the data collection process.

In the delimitations, the research only included adolescent students from Hillcrest International School. Several participants were randomly sampled for the study. The research was restricted to adolescent students between 13 and 18 years. The study's

timeframe was limited to three months during the second term of the academic year. The study only utilized questionnaires and interview schedules as the data collection tools.

1.10. Assumptions of the Study

The study assumed that the different levels of self-esteem impact the psychological wellness of adolescent students differently. The study assumed that high self-esteem impacts the psychological wellness of adolescent students positively as well as moderate self-esteem. In contrast, low self-esteem impacts the psychological wellness of adolescent students negatively. Similarly, the study assumed a significant relationship between adolescent students' self-esteem and psychological wellness.

1.11. Theoretical Framework

Theories are conceptual lenses through which scholars, researchers, or policymakers observe and understand their surroundings, make decisions, and, most crucially, govern themselves (Hofferth & Moon, 2011). This research was led by two theories: Ryan and Deci's (1980) Self-Determination Theory and Leary's (2012) Sociometer Theory.

1.11.1 Self-Determination Theory

According to SDT everyone is born with an inbuilt need to explore, absorb, and master their environment, and truly high self-esteem is observed when the key psychological nutrients, or needs, of life (relatedness, competency, and autonomy) are balanced (Ryan & Deci, 2000). Personal growth, vitality, and well-being are strengthened when societal conditions give support and a chance to meet these basic requirements. The theory was established by Edward L. Deci and Richard Ryan in 1980. Ryan and Deci (2004) expanded the idea to account for people's natural propensity to generate meaning

and connect with others through internalizing cultural practices and beliefs (Deci & Ryan, 2004).

The Self-determination theory is relevant to this study in that the psychological needs of autonomy, competence, and relatedness required for human well-being and health are also crucial in sustaining the self-esteem of adolescent students (Moller, Friedman & Deci, 2006). Veronneau, Koestner & Abela (2005) argue that during adolescence, teenagers seek autonomy, control, mastery of their experiences, and the desire to interact with others, which are the building blocks of the Self-determination theory. Therefore, these psychological needs are essential in maintaining adolescent students' psychological wellness.

The Self Determination Theory (SDT) guided this by helping to identify the factors that influence a person's psychological well-being. It suggests that three basic psychological needs must be met for a person to be motivated and to pursue their goals: autonomy, relatedness, and competence. Autonomy refers to the desire for people to have a sense of choice and control over their actions and decisions, which is especially important for teenagers as they negotiate their emerging sense of identity and independence. Relatedness refers to the need for meaningful connections, social interactions, and a sense of belonging, all of which are necessary for adolescents' emotional well-being and the development of healthy relationships. Competence involves the desire to feel capable, effective, and successful in one's endeavours, which helps teenagers develop a sense of mastery, confidence, and determination to complete their objectives and duties (Hardy et al., 2022).

Therefore, a study guided by SDT would focus on understanding how these needs are met or unmet in different contexts, and how that affects a person's motivation and goal pursuit. The study examined how various environmental and interpersonal factors impact adolescents' ability to fulfill their psychological needs and how this, in turn, influences their behavior. Ultimately, the goal of an SDT-guided study would be to understand how best to foster intrinsic motivation and goal attainment in different contexts. Self-Determination Theory (SDT) offers insightful information about intrinsic motivation and goal pursuit, but it may not consider the impact of external social factors on an individual's self-esteem and overall well-being. In contrast, Sociometer Theory enhances SDT by highlighting the significance of social feedback and acceptance in determining an individual's psychological wellness and self-esteem, providing a more thorough understanding of the interaction between internal motivations and external social influences.

1.11.2 Sociometer Theory

Leary (2012) developed the Sociometer hypothesis, which states that self-esteem is a psychological indicator of how much people believe they are relationally valued and socially accepted by others. Sociometer theory differs from most other self-esteem theories in that it contends that individuals do not require self-esteem and are not motivated to achieve it for its own sake by understanding it as the output of a system that monitors and responds to interpersonal acceptance and rejection. According to the concept, when people do behaviours that appear to be intended to preserve or increase their self-esteem, their goal is typically to safeguard and develop their relationship worth, improving the probability of interpersonal acceptance (Fernandez et al., 2020).

Approval and disapproval impact state self-esteem, state self-esteem is related to perceived social acceptance, and trait self-esteem represents people's judgments of their overall desirability or interpersonal worth. The sociometer theory is relevant to this study in that it perceives self-esteem in three levels, high, moderate, and low self-esteem, as a psychological gauge of how adolescent students perceive their relational value and social acceptance by their peers (Magro et al., 2019). The Sociometer theory guided this study by providing a framework for examining the psychological effects of different types of social interactions.

The Sociometer theory offers a framework for comprehending how social interactions, power dynamics, status, and communication styles affect adolescents' self-esteem and overall psychological wellness in the context of the study. However, the theory is not without its shortcomings as by emphasizing social acceptance and relational value above all other factors as determinants, it may oversimplify the complex nature of self-esteem and potentially ignore intrinsic factors and individual differences that contribute to the development of self-esteem.

1.12. Conceptual Framework

Conceptual framework depicts the relationships between the independent, dependent, and intervening factors (Van der Waldt, 2020). The independent variables in this study are self-esteem levels (high, moderate, and low). The intervening variables include age, gender and grade of the respondents. The dependent variable, on the other hand, is psychological well-being, which includes features such as self-acceptance, environmental mastery, positive relationships, autonomy, and personal progress. Self-esteem levels, categorized as high, moderate, and low, serve as predictors of psychological well-being, influencing factors such as self-acceptance, environmental mastery, positive relationships, autonomy, and personal progress. The intervening variables of age, gender, and grade play a role in moderating these relationships, as they may impact how individuals perceive and experience self-esteem and its effects on psychological well-being.

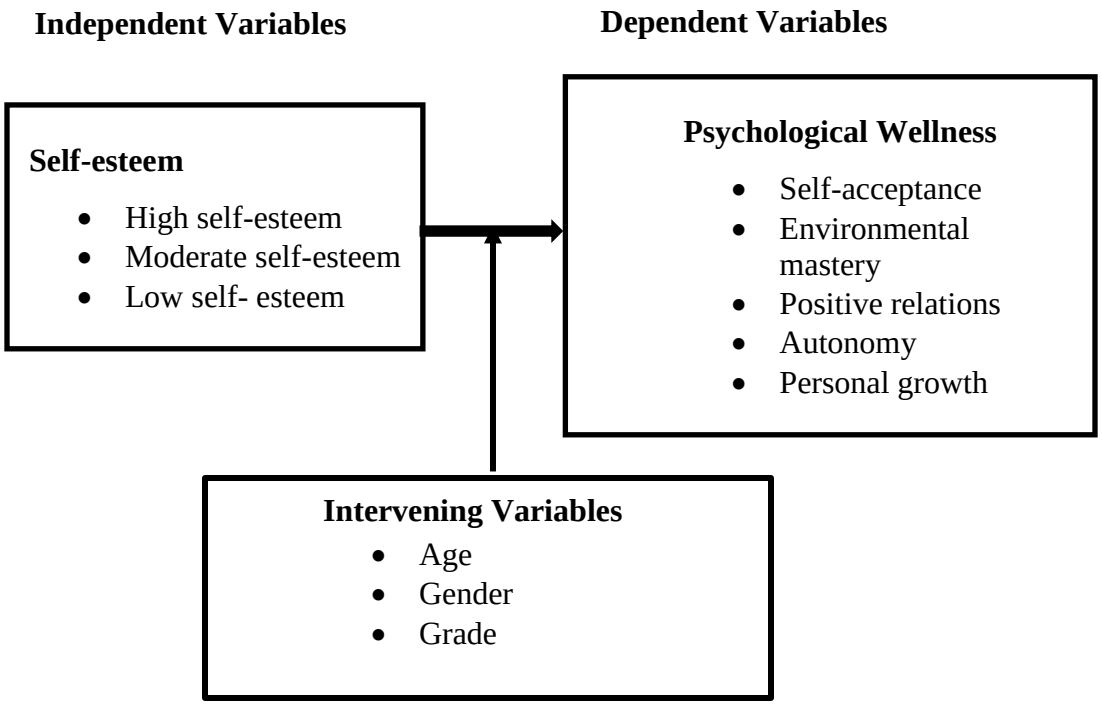

Figure 1 Conceptual Framework

CHAPTER TWO

LITERATURE REVIEW

2.1 Introduction

This chapter presents an empirical literature review based on themes derived from the study's objectives while evaluating the literature on different categories of self-esteem and psychological wellness.

2.2 Theoretical Literature Review

2.2.1 Self-Esteem

The notion of self-esteem is pervasive in modern society. People often believe high self-esteem is necessary for success in schools, jobs, athletic competitions, and even music concerts (Orth & Robins, 2014). Indeed, developing self-esteem and avoiding low self-esteem are commonly seen as critical social goals deserving of extensive intervention to increase self-esteem levels in the community. Despite this, the scholarly research gave a limited understanding of the formation and growth of self until recently. A significant number of observational research have considerably improved the area in recent years (Orth & Robins, 2014).

Self-esteem is a person's psychological evaluation of their worth as a human being (Donnellan, Trzesniewski, & Robins, 2011; MacDonald & Leary, 2012). Importantly, self-esteem does not necessarily reflect a person's characteristics and talents, or how others view them. Furthermore, while self-esteem is sometimes characterized as the "sense that one is 'good enough,'" persons with high self-esteem may not always believe they are entitled to more than others (Rosenberg, 1965). Thus, self-esteem comprises feelings of

acceptance and respect for oneself, as opposed to a person's dominating self and ego (Ackerman et al., 2011).

Self-esteem is founded on a person's opinion of their own deserving, which is influenced by self-perceptions and perceptions of input from important individuals (Rosenberg, 1979). A high level of self-esteem is usually connected with psychological wellness and pleasure (Rosenberg et al., 1995). Several studies have found a statistically substantial favourable connection between various social support and self-esteem agents in teenagers (Ikiz & Cakar, 2010). Likewise, peer support promotes self-esteem in adolescents, particularly during adolescence (Fabes et al., 1999). Social support and self-esteem moderate the link between parental bonding and satisfaction with life (Chen et al., 2017). By assisting at this growth stage, parents may enhance self-esteem in adolescents and prevent psychological anguish (Boudreault-Bouchad et al., 2013).

Furthermore, adolescents who get vital parental care outperform adolescents who experience inadequate parental support (Kokkinos & Hatzinikolaou, 2011; Siyez, 2008). Moreover, it has been observed that self-esteem plays a significant role in mediating the relationship between social support and internalizing signs in teenagers (Gaylord-Harden et al., 2007). In a study of Chinese teenagers, it was found that global self-esteem mediated relationships between peer and teacher assistance with school well-being in middle adolescents and relationships between teachers' and parents' assistance with school well-being in early adolescents (Tian et al., 2013).

An individual's level of self-esteem can impact an individual's life and significantly affect their overall well-being. Self-esteem can be defined as an individual's overall perception of oneself or their value and self-worth (Bleidorn, Arslan, & Denissen, 2016).

According to Anusic & Schimmack (2016), self-esteem is an individual's value of oneself or can also be considered the extent to which an individual approves, values, or appreciates oneself. According to Mei, Yau, Chai, & Guo (2016), several factors are associated with Self-esteem among high school students, including age, gender, year of study social and environmental surroundings. Another study also notes that a particular student's self-esteem level is critical in determining the extent to which a particular student performs and their overall quality of life (Hebert, Cenat, & Blais, 2016).

High Self-Esteem.

People with high self-esteem believe they are superior to others and have no reservations about underestimating others. This degree of self-esteem is considered harmful since it stops individuals from forming caring and healthy relationships. Their competition is constant, and they constantly want to win (Anusic & Schimmack, 2016). Happiness is found for these people in gaining achievement, but they do not achieve happiness with this mindset. People with elevated self-esteem have a difficult time listening to others and criticizing themselves (Coelho et al., 2016). They are incapable of repairing their mistakes and, as a result, are continually blaming others. Furthermore, they tend to undervalue people and act hostile against them. It is difficult for these people to form good connections with others. Everyone is viewed as a competitor by them (Cooke, Melchert, & Connor, 2016).

Moderate Self-Esteem.

Individuals who have this level of self-esteem accept and appreciate themselves. Self-esteem is regarded to be beneficial since it allows a person to be content with their life. This is not to say that there will be no obstacles, but having faith in oneself and the

fortitude to tackle any challenges that may come makes things much more manageable (Anusic & Schimmack, 2016). People with low self-esteem are not motivated to be better than others; they do not want to establish their worth by comparing themselves to others (Fukuzawa & Yamaguchi, 2013).

Low Self-Esteem.

People with low self-esteem are opposed to those with great self-esteem. They do not respect themselves and do not believe in their abilities, and the uneasiness they may experience pervades practically every circumstance. People with poor self-esteem are plagued by fear of failure (Yi et al., 2015). They are the poster children for sad people. People with low self-esteem experience exhilaration when things go well, but when things go wrong, their self-esteem plummets swiftly (Stamp, Crust, Swann, Perry, & Clough, 2015). They are sensitive individuals who are easily swayed and have a tendency to express their opinions without defending themselves. Some persons have poor self-esteem that is less volatile; their issue is indecision (Oliver et al., 2017). They have little faith in themselves, undervalue themselves, and are so afraid of making mistakes that they always assume they do not measure up to the situation (Dogan, Totan, & Sapmaz, 2013).

2.2.2 Psychological Wellness

The idea of psychological wellness seems to be somewhat broad. Frequently, the phrase has been used alternatively with "mental health." Previously, it appears that mental health was seen as an independent idea. Thus, mental health was defined as "the lack of sickness or disease." The lack of anything does not indicate what could be existent; hence the phrase was pretty ambiguous for many years. However, the World Health Organization (WHO) defined mental health as "a full condition of physiological, psychological, and

societal well-being" rather than simply the absence of sickness 1948. Whereas physical health may be easily assessed by obtaining health condition assessments of the physical body, the psychological and societal aspects of health are far more challenging to determine. This might be because mental health and psychological wellness are multifaceted phenomena with both actual and perceived elements. The personal aspect results from inner sensations that are emotional, making it hard to describe and measure.

According to the Random House Dictionary of the English Language (1967), well-being is "a desirable or pleasant state of living, marked by health, pleasure, and affluence." According to the functional definition of psychological well-being, the phrase refers to "ardent contentment." It is defined as the distinction between an individual's stance on two autonomous perspectives, either positive or negative impact (Mangen & Peterson, 1982). However, like most others, these definitions are not phrased in prescriptive words. So, if the definition refers to emotions of joy, the "joy" is not further specified because the word implies various meanings to diverse individuals. These local definitions of well-being, which sought to emphasize brief emotional wellness at the detriment of long-term impacts, have lately been superseded by definitions that consider both short-term and long-term metrics (Ryff, 1989). In principle, psychological wellness appears to be connected with several categories, including life fulfilment, joy, adaptation, emotion, confidence, and subjective well-being (Ryff, 1989).

In a paper for the Psychological Association of South Africa (PASA) in 1989, the entire psychological status of a person was more adequately characterised. The study appears to have characterised mental health more comprehensively, considering the individual's situation. Mental health was defined as "those societal conditions that lead to

a predicament in which people, in their abilities (regardless of years old, sex, or appearance), and engagement with each other as participants of gatherings and societies, are capable of living existences of value in all situations of their survival, where the opportunities for actualizing their prospects are prevalent" (p. 5). With this notion in perspective, psychological well-being is significantly more than the lack of disease. This is unquestionably a much more comprehensive view of psychological wellness.

Psychological well-being is a potentially useful orienting notion that draws attention to a group of genotypically united phenomena of interest. It contains behavioural criteria (having successful interpersonal interactions, mastering age- and ability-appropriate activities) as well as psychological markers (having a feeling of belonging and purpose, having influence over one's fate, and being satisfied with one's life and oneself) (Besser & Zeigler, 2014). Bleidon, Arslan, & Denissen (2016) defined psychological well-being as the general belief held by individuals that events or situations will have a favourable outcome.

For this study, psychological wellness was approached holistically. Even so, it was analyzed in various facets of living that undoubtedly influence a person's wellness (PASA, 1989). These aspects include physiological aspects that foster human bodily wellness and psychological aspects that lead to an adolescent's personal view of life in terms of cognitive, perceptual, and mental ability, as well as their ability to self-evaluate and self-esteem. Furthermore, the description did not dismiss the relevance of a person's social aspect, which encompasses their actual surroundings, the desire for genuine interactions, participation in a collaborative setting, and the society from which they originate. Thus, this more comprehensive perspective of psychological wellness is strongly impacted by

elements such as one's level and standard of life, the economic and political dynamics of the period, as well as the person's family of descent and socioeconomic status.

Several psychologists (including Maslow, Rogers, Jung, Erikson, Buhler, Neugarten, & Jahoda) have attempted to define and describe psychological well-being (Ryff, 1989). Significant research has been focused on psychological well-being (Pavot & Diener, 1993). To evaluate the expressive component of psychological well-being, tools such as the Affectometer (Kammann & Flett, 1983) and the Positive and Negative Affect Schedule (Watson et al., 1988) have been frequently used. However, Ryff's (1989) and Bar-On's (1988, 1997, 2000) sculptures appear to be two of the most fascinating current pieces.

Model of Psychological Wellness According to Bar-On (1988, 1997, 2000).

Aside from conceptual variations, several fundamental aspects of psychological wellness appear to have been established among all scholars. Bar-On (2000) presently describes his Model of Psychological wellness as a set of qualities and talents associated with psychological and societal understanding that impact our total ability to conform to external challenges. This model encompasses; the capacity to recognise, comprehend, articulate self, and connect with other people; the capacity to cope with powerful feelings and manage one's urges; and the capability to adjust to circumstances and resolve individual or societal issues.

The model's five major areas are intrapersonal abilities, relational skill sets, adaptation, managing stress, and overall attitude (Bar-On, 1997). Bar-(1988) On's study aimed to discover and investigate the character variables that most correctly represent psychological wellness. Bar-On defined character variables as the many manners in which

individuals perceive, react, and behave in most circumstances and on many occasions. As a result, he argued that these character traits were a dependable way to measure psychological wellness. He found character traits connected with wellness from all current psychological theories. He created a questionnaire to test these traits. He discovered the primary components involved in psychological wellness using factor analysis and developed his framework around these components (Bar-On, 1988).

The EQ-I, developed by Bar-On to assess the model, is a self-report assessment that explicitly examines emotional and competent society conduct, estimating a person's sentimental and societal intellect rather than standard character characteristics or intellectual aptitude (Bar-On, 2000). According to Bar-On (1997), psychological wellness is a complicated and evolving interplay of psychological and behavioural elements and physiological and societal causes. As a result, a person's psychological wellness will fluctuate depending on the setting and conditions.

Adolescent Psychological Wellness: A Biopsychosocial Approach

The longevity of problematic behaviour in puberty over generations and the extent of present difficulties show that being a teenager carries an intrinsic danger. Consequently, it is critical to pay close regard to teenagers' psychological wellness to avert incidents and enhance both psychological and physiological health throughout their lives. Plato defined teenagers as "confrontational and highly aroused," whereas Aristotle described them as "spontaneous, inclined to excesses and hyperbolical, and without self-control."

Adolescence has thus been regarded as a dangerous and rather challenging stage for many years (Dryfoos, 1990). This might be because there are various pressures in an adolescent's life, such as school transfers, pubescent growth, and family disturbance, to

mention a handful. According to recent studies, accumulating various stressors may be especially harmful to teenage psychological wellness (Forehand, 1990). Simmons, Burgeson, Carlton-Ford, and Blyth (1987), for example, discovered that teenage self-esteem decreased as the stress frequency grew. According to research, most mental and addiction illnesses emerge throughout adolescence. Psychological problems are widespread among adolescents, with an aggregate frequency of up to 15%. (Roberts, Attkisson & Rosenblatt, 1998). Adolescents aged 15-24 years have a higher risk of various problems and drug misuse than any other age group. Data shows that teenagers who consume drugs are more likely to develop additional psychiatric illnesses than their adult colleagues (Beitman et al., 2001). Adolescents experience a high prevalence of interaction between drug use problems and mental problems.

Model of Psychological Wellness According to Ryff (1989).

Psychological well-being, according to Ryff's Model (1989), consists of six components: self-acceptance, good relationships with others, autonomy, environmental mastery, life purpose, and personal advancement. She feels that one of the most important aspects of psychological well-being is the idea that gives one's life purpose and value. Furthermore, she says that having clear life objectives, goals, and a feeling of purpose all contribute to the perception that life is important. The Meaning in Existence Index was Ryff's psychological well-being metric. The scale was created with significant mental health and lifelong growth ideals in mind (Ryff & Keyes, 1995).

As a result, this concept of psychological well-being refers to a mental resource known as dispositional optimism. According to Coelho, Marchante, and Jierson (2016), positive functioning includes six elements of psychological wellness: self-acceptance,

positive interactions with others, personal growth, life purpose, environmental mastery, and autonomy. Given the many definitions and theories, psychological well-being appears to be multidimensional, with optimal functioning happening when these aspects are in balance. Thus, psychological well-being operates in a complex system that varies with time and place and combines several variables (Gummadam et al., 2016). Several factors are discovered that, according to their definitions, may be characteristics of psychological well-being. Mei et al. (2016) define them as self-actualization, locus of control, feeling of coherence, and emotional intelligence.

Self-Acceptance.

The most common feature of psychological well-being is self-acceptance. It is an essential component of mental health and healthy functioning (Fukuzawa & Yamaguchi, 2013). A good attitude and increased life satisfaction result from healthy levels of self-acceptance. Positive feedback from others is important in preserving self-confidence and belief (Kim, Kendall, & Webb, 2015). Moderate levels of confidence lead to more astounding success and acceptance. Self-acceptance is essential for self-actualization, improved psychological functioning, and growth. Accepting the past and present while retaining future orientation is required (Moksnes & Espnes, 2012).

Environmental Mastery.

Environmental mastery is defined as the ability to choose and control one's immediate and imagined surroundings via physical and mental acts (Perez, 2012). A high degree of environmental mastery indicates control over one's context, whereas a low level indicates an incapacity to successfully govern one's surroundings (Sarkova, Bacikova-Sleskova, & Madarasova, 2014). A mature person can typically interact and relate to

different individuals in different settings and adapt to different environments on demand. Controlling one's physiological and cognitive arousal can help one gain control and knowledge of their surroundings and relationships with others. Imagery improves self-awareness as well as situational and environmental comprehension (Stamp et al., 2015). Controlling complicated environmental and living conditions and grasping chances that present themselves are examples of environmental mastery. When attempting to achieve peak athletic performance, it is frequently necessary to move beyond one's 'comfort zone' (Sarkova et al., 2014).

Positive Relations.

Having positive ties with people is vital for creating trusted and durable relationships as well as belonging to a communication and support network (Malinauskas & Dumciene, 2016). A calm and comfortable demeanour demonstrates maturity and leads to better relationships and regard for others. While strong relationships lead to better knowledge of others, bad relationships can lead to irritation (Nwankwo, Okechi, & Nweke, 2015). One crucial element of mental health is the ability to have healthy human interactions, with disease being defined by impairment in social functioning). Communication is an essential component of team relationships. Positive relationships with individuals in group/team contexts frequently result in enhanced knowledge, empowerment, and improved sports performance (Hebert et al., 2016).

Purpose in Life.

The perceived meaning of one's existence is referred to as one's purpose in life, and it entails creating and achieving objectives, which contribute to one's appreciation of life (Cooke et al., 2016). Mental health includes being conscious of one's broader objective and

purpose in life. Purpose in life provides direction, which eliminates despair. Goals are an important aspect of achieving success. Maturity entails having a strong feeling of intention (Coelho et al., 2016). When people maintain focus, attention, and concentration, make realistic objectives, and strive to be more holistic, they seek a higher goal for themselves and frequently help others. Goal setting and achievement may be inspiring and motivating (Cooke et al., 2016).

Autonomy.

Autonomy is the ability to govern one's actions through an internal centre of control. A fully functioning individual has a high degree of internal evaluation, judging oneself on personal criteria and accomplishments rather than relying on the standards of others (Cooke et al., 2016). They do not seek approval from others, are focused on their own opinions, and are less persuaded by the thoughts of others. A high degree of autonomy indicates independence, whereas a low level indicates self-consciousness (Bleidon et al., 2016). Athletes require autonomy, personal knowledge, and objectivity to maintain self-confidence and belief, and an internal centre of control is an important component of motivation. In sports, autonomy is also connected to self-determined motivation (Cella & Stone, 2015).

Personal Growth.

Personal development is the ability to develop and extend oneself, become a fully functional individual, and self-actualize and achieve goals. To attain peak psychological functioning, it is necessary to continue to improve oneself via growth in all aspects of life (Dogan et al., 2013). This necessitates constantly growing and addressing issues, as well as broadening one's capabilities and abilities. A high degree of personal growth indicates

continuing progress, whereas a low level indicates a lack of growth. Students with a development mindset understand that hard work pays off. A development attitude necessitates being open to new and different experiences (Bleidon et al., 2016). Students who are modest yet confident strive for personal improvement and holistic development at all times; they typically use good and bad performance, as well as goals attained, to boost personal progress. Personal development may be the psychological well-being quality most closely related to eudemonia (Besser & Zeigler, 2014).

2.2.2.1 Relationship between Self-Esteem and Psychological Wellness

Self-esteem is a psychological term that represents a person's perception of their worth and value. Self-esteem is an important component of psychological well-being since it is related to mental health advantages such as reduced stress, anxiety, and depression. 2008 (Orth, Robins, & Roberts). Low self-esteem, on the other hand, has been connected to several negative outcomes, including poor academic performance, poor physical health outcomes, and increased drug misuse. 2003; Trzesniewski, Donnellan, & Robins).

Self-esteem is favourably linked with various beneficial psychological outcomes on a global scale. Self-esteem was found to be substantially correlated with life contentment, positive affect, and pleasure in research by Orth, Robins, and Roberts (2008). Similar findings were reported by Sinha and Singh (2018) in another study, who discovered that better self-esteem was linked to greater subjective well-being and reduced levels of anxiety and sadness.

On the other hand, it has been discovered that low self-esteem is associated with several detrimental psychiatric effects. Low self-esteem was connected to more significant amounts of depression, anxiety, and stress in research by Trzesniewski, Donnellan, &

Robins (2003). Similar findings were made by Baumeister, Campbell, Krueger, & Vohs (2003), who discovered that low self-esteem was associated with several unfavourable outcomes, including subpar scholastic achievement, weaker physical health, and greater levels of drug abuse.

Self-esteem and psychological health have a complicated connection that many different things affect. For instance, how self-esteem is assessed and how it pertains to psychological wellness may be influenced by societal differences. While self-esteem was associated with reduced emotional and behavioural issues in Chinese and American teenagers, the connection was stronger for American adolescents than for Chinese adolescents, according to research by Yang, Ollendick, & Dong (2013). This indicates that societal variables may impact the link between psychological health and self-esteem.

Age is another variable that may impact the link between psychic health and self-esteem. Self-esteem rose from childhood to early adulthood but fell from this age to midlife, according to research by Trzesniewski, Donnellan, Moffitt, Robins, Poulton, and Caspi (2006). The study also discovered that the association between self-esteem and psychiatric results differed across age groups, with the connection being stronger in puberty than in maturity.

Overall, the research analyzed in this literature survey points to the importance of self-esteem in psychological health. While low self-esteem is linked to unfavourable outcomes like more significant levels of depression, anxiety, and tension, high self-esteem is linked to higher levels of contentment, life fulfilment, and subjective well-being. Age and cultural variables may also impact the link between psychic health and self-esteem.

These results imply that attempts to increase psychological health may benefit significantly from treatments designed to foster positive self-esteem.

Regionally, there is a minimal actual study on the connection between the psychological region and self-esteem. However, some research has looked into the matter and provided insight into the relationship in this situation. Self-esteem and psychological well-being among Nigerian university students were found to be significantly correlated in one research by Odukoya, Aderibigbe, & Ogunwale (2013) performed in that country. According to the research, greater self-esteem was linked to reduced levels of anxiety and depression as well as greater levels of life happiness. The authors contend that psychologically healthy university students in Nigeria may benefit from treatments that seek to increase self-esteem.

Abebe, Tesfaye, & Mulat (2018) discovered that among Ethiopian high school pupils, low self-esteem was negatively correlated with depressive symptoms. Since poor self-esteem is a significant indicator of depressive symptoms, treatments to boost self-esteem may be crucial in avoiding depression in Ethiopian high school students. Govender & Seedat (2011) researched South Africa to investigate the connection between suicidal ideation and self-esteem among university students. The study's findings showed a significant correlation between poor self-esteem and greater suicidal thoughts, underscoring the significance of self-esteem in averting suicide in this group. While these studies shed some light on the connection between psychological well-being and self-esteem in Africa, more study is required to comprehend this connection in this setting fully. Societal variables may also influence the evaluation of self-esteem and its relationship to

psychological wellness in Africa, indicating the need for culturally sensitive study in this field.

Studies conducted locally in Kenya have looked at similar concepts that could help explain this connection in this situation. For instance, Ndetei et al.'s (2008) research examined the relationship between psychological suffering and self-stigma among Kenyan psychiatric patients. According to the study, more significant psychological distress was linked to greater degrees of self-stigma. According to the writers, self-stigma may factor in poor self-esteem and inadequate self-perception, which may be factored into psychological suffering.

According to Khasakhala et al. (2016), they looked at the connection between teenage Kenyans' self-esteem, sadness, and anxiety. The research revealed the possible significance of self-esteem in fostering psychological wellness among Kenyan adolescents by showing that greater levels of self-esteem were linked to reduced levels of depression and anxiety. The connection between resilience and mental health among Kenyan university students was the subject of research by Kamunge et al. (2014). According to the study, strength was related to improved mental health outcomes, such as greater self-esteem and reduced levels of depression and anxiety. The research offers evidence for the significance of perseverance in fostering mental health among Kenyan university students, even though it did not explicitly investigate the connection between self-esteem and psychological well-being.

Even though there is little empirical research that specifically examines the connection between self-esteem and psychological wellness, the literature review above

suggests that self-esteem may be crucial in promoting psychological wellness among adolescent students, which is why this study is necessary to fill the gap in the literature.

2.2.3 Adolescence

According to the World Health Organization, adolescence is the transition phase from childhood to adulthood. Adolescents account for one out of every five individuals (WHO, 2000-2004). Adolescents are often regarded as healthy because they have previously overcome juvenile ailments, and the health concerns linked with ageing are still several years away (WHO, 2000-2004). Nonetheless, many teenagers die throughout these adolescent years. According to WHO, approximately 1.7 million teenagers die each year, most of whom die due to accidents, suicide, violence, pregnancy-related difficulties, substance misuse, and high-risk behaviours or illnesses that are either avoidable or curable.

The concept of adolescence by Lawson & Lawson (1992) as a period of abrupt and extensive living transformations and adjustments exposes itself to the likelihood of multiple stresses preceding the ensuing transformations. These pressures frequently result from major bodily, mental, and interpersonal growth transformations that occur throughout this time. However, it should be highlighted that the initial psychoanalysis ideas of puberty as a time unavoidably marked by pressure and turbulence, as presented by G. Stanley Halls and many other authors, are outdated. Their beliefs that this upheaval is beneficial and essential for growth have unintended repercussions, such as disregarding severe issues that emerge through this and responding inappropriately to minor growth issues, inevitably generating conscience theories that result in development suppression through the constraint of autonomy (Micucci, 1998).

Several studies have found that the aggregation of various stresses might be especially harmful to teenage psychological well-being (Forehand, in MacMahon & Peters, 1990). Whereas teenagers may be able to operate effectively amid one or two challenges, when these stress factors accumulate, productivity and psychological well-being may drastically decline (Forehand, in MacMahon & Peters, 1990). To properly comprehend the influence of these stresses on teenagers, it is necessary to go through them in further depth.

2.2.4.1 Physiological and Psychological changes in adolescents.

Puberty has been linked with a period of dramatic physiological transformations, including the teenage development phase, during which the size and structure of the body become noticeably distinctive, and the distinctions between males and females become progressively more pronounced (Rice, 1975). All of these changes in girls and boys are natural stages of growth. If teenagers are unaware of such changes, they may find themselves in a highly stressful and uncomfortable situation.

During adolescence, there are significant mental transformations. Forming an integrated and internalised sense of identity is perhaps the most fundamental shift (Edmonds & Wilcocks, 2000). In some ways, this entails growing away from older family members, forming more intimate interactions with contemporaries, and making more critical choices. Antagonism becomes an effort on the part of the teenager to demonstrate to their families and the rest of the world that they have thoughts of their own. Similarly, cognition tends to become more creative, intellectual, and future-oriented throughout this period.

According to Mussen, Canger, Kagan, & Huston (1984), teenage mental capacities continue to grow numerically and subjectively. Such behavioural developments are vital

in assisting teenagers in dealing with the more complicated requirements they experience. The teenager is in a period of transformation. Until adolescents receive the counsel and social support required throughout this critical period, stresses may accumulate and negatively impact their performance. Consequently, puberty is frequently characterized by heightened psychological unpredictability, mood changes, and temper tantrums. These emotional responses are significant since they influence one's behaviour concerning others. Under ideal conditions, physiological and mental transformations occur at the exact moment when they do not occur concurrently, as frequently, teenagers must deal with imbalances and increased stress.

Puberty is when youngsters begin to build more intensive interactions with contemporaries and grownups in their settings, transcending their ties with their parents and families. Stages of approval and denial frequently define these interactions, hence their self-esteem, which exacerbates the psychological problems which are already present (Binger, 1994). Adolescence is also when people transition from participation with groupings of the same gender to diverse groupings and the prospect of sexual partnerships (Edmonds & Wilcocks, 2000). This introduces adolescents to different impacts, encounters, and stresses to try new habits, most frequently labelled as hazardous behaviours.

2.2.4.2 Relationship Between Adolescence and Self-Esteem

Adolescence is crucial for self-esteem growth because it is a time of significant bodily, emotional, and social changes. According to Harter (2015), self-esteem is an individual's assessment of their worth or value. Several variables influence it, such as societal comparisons, input from others, and instances of competence and mastery. Several

studies have looked into the connection between puberty and self-esteem. For example, Orth et al. (2018) investigated the growth paths of self-esteem from childhood to early adulthood in longitudinal research. While self-esteem generally improved during this time, there were individual differences in the pace and trajectory of change, according to the study. According to the writers, societal support, identity development, and coping techniques may all play a role in moulding self-esteem growth during this time.

Harter & Whitesell (2017) investigated the impact of perceived competence and social support on self-esteem in early teens. According to the findings, perceived competence in different areas (e.g., academics, athletics, social skills) and social help from parents and friends were favourably related to self-esteem. According to the writers, interventions targeted at boosting perceived ability and social support may successfully promote self-esteem among early teens.

Furthermore, Diener & Diener (2018) examined the connection between self-esteem and well-being in adolescents. The research discovered that self-esteem was linked with life happiness, good mood, and psychological well-being, but not with sadness or anxiety. The writers contend that interventions targeted at increasing self-esteem may benefit adolescent well-being. Trzesniewski et al. (2006) investigated self-esteem's impact on predicting adolescent academic success. The research discovered that self-esteem predicted academic success more than intelligence or previous ability. According to the authors, promoting self-esteem may be a helpful approach to enhancing academic results in adolescents. These studies indicate that puberty is crucial for self-esteem development and that social support, perceived ability, and well-being may play significant roles in moulding self-esteem. These findings also emphasize the possible benefits of promoting

self-esteem among adolescents, such as better educational success and psychological well-being.

Regionally, Oladipo & Onasoga (2019) investigated the link between self-esteem, academic success, and social support in Nigerian adolescents. According to the research, self-esteem is favourably linked to academic success, and social support is a significant predictor of self-esteem. The writers contend that interventions to increase social support may improve adolescent self-esteem and educational success. Ojedokun & Idemudia (2013) investigated the relationship between self-esteem and psychological well-being among adolescents in research performed in Nigeria. The study discovered that self-esteem was related to psychological well-being favourably, including more significant levels of life satisfaction, positive affect, and reduced levels of negative affect and depression. According to the authors, interventions targeted at boosting self-esteem may successfully support psychological well-being among African adolescents. Odimegwu et al. (2017) investigated the link between self-esteem and risky sexual behavior among Nigerian teenagers. Lower levels of self-esteem were found to be linked with higher levels of risky sexual behaviour, such as early sexual début, numerous sexual partners, and irregular contraceptive use, according to the research. According to the writers, interventions targeted at boosting self-esteem may successfully reduce risky sexual behaviour among African teenagers.

Locally, Gachuno & Sifuna (2016) performed research in Kenya that looked at the link between self-esteem and teenage pregnancy among Kenyan teens. Adolescent pregnancy was found to be adversely linked with self-esteem, and reduced self-esteem was a predictor of adolescent pregnancy. According to the writers, interventions targeted at

boosting self-esteem may successfully lower the adolescent pregnancy rate in Kenya. Mwania & Ndambuki (2018) investigated the relationship between self-esteem and academic achievement among Kenyan secondary school pupils. The research discovered a positive relationship between self-esteem and academic success, with greater levels of self-esteem linked with improved academic performance. The authors contend that initiatives to boost self-esteem may improve educational achievement among Kenyan teenagers. Kinyanda et al. (2019) investigated the link between self-esteem and depression among teenagers in Kenya. The research discovered that reduced self-esteem was linked to greater levels of melancholy and that this connection was more significant in female teenagers. According to the writers, interventions targeted at boosting self-esteem may successfully lower the prevalence of depression among teenagers.

Khasakhala et al. (2016) investigated the link between self-esteem and substance use among Kenyan teenagers in their research. Lower levels of self-esteem were linked to greater levels of drug use, including alcohol, cigarettes, and marijuana, according to the study. According to the authors, interventions targeted at increasing self-esteem may be successful in decreasing substance use among Kenyan teenagers. Ndege et al. (2019) investigated the link between self-esteem and risky sexual behaviour among Kenyan teenagers. Lower levels of self-esteem were found to be linked with higher levels of risky sexual behaviour, such as early sexual début, numerous sexual partners, and irregular contraceptive use, according to the research. According to the writers, interventions targeted at increasing self-esteem may be successful in decreasing risky sexual behaviour among Kenyan Adolescents. These studies indicate that the connection between adolescence and self-esteem is a significant problem in Kenya and that self-esteem may be

linked to various outcomes such as educational success, depression, drug use, and risky sexual behaviour. Self-esteem interventions may help encourage good outcomes among Kenyan adolescents.

2.3 Empirical Literature Review

2.3.1 Effects of High Self-esteem on the Psychological Wellness of Adolescent Students

Positive self-esteem has been associated with higher resilience, stronger coping methods, and a lower risk of mental health issues (Orth, 2018). Empirical research has been conducted worldwide to investigate the association between high self-esteem and psychological well-being in a variety of demographics, including adolescents, college students, and adults. Nyer (2020) investigated the association between high self-esteem and psychological well-being in a sample of college students in one research. Higher levels of self-esteem were shown to be strongly connected with higher levels of emotional well-being, life satisfaction, and overall psychological well-being by the researchers. Furthermore, the researchers discovered that self-esteem moderated the association between social support and psychological well-being.

Another study by Orth (2019) investigated the longitudinal relationship between self-esteem and depression in a sample of adults. The study found that higher levels of self-esteem were protective against the onset of depression, even after controlling for demographic factors and baseline depression symptoms. The researchers suggest that improving self-esteem may be an effective strategy for preventing and treating depression. In a study of adolescents, Ciarrochi (2019) found that self-compassion, a construct related to self-esteem, was a significant predictor of mental health and well-being, including lower

levels of anxiety and depression. The study suggests that cultivating self-compassion may be a useful intervention for promoting positive psychological outcomes in adolescents.

A study by Zhang (2018) examined the relationship between self-esteem and job satisfaction in a sample of Chinese nurses. The study found that higher levels of self-esteem were significantly associated with greater job satisfaction, even after controlling for demographic factors and job stress. These studies suggest that high self-esteem is positively associated with psychological wellness in a variety of populations, including college students, adults, adolescents, and healthcare professionals. Improving self-esteem may be a useful intervention for promoting mental health and preventing or treating mental health disorders.

There have been few studies in Africa on the influence of high self-esteem on psychological well-being. However, a few research on similar themes have been undertaken. Akinbo, Adegboyega, & Oluwole (2020), for example, explored the link between self-esteem, anxiety, and academic performance among secondary school students in Nigeria. Students with high self-esteem were less worried and did better academically than those with low self-esteem, according to the study. Similarly, Oladipo, Jegede, & Aina (2019) investigated the association between self-esteem and academic success among university students in Nigeria. According to the findings, there is a considerable positive association between self-esteem and academic accomplishment.

Another study done in Ethiopia by Alemu & Alemu (2019) investigated the association between self-esteem and depression among university students. According to the study, pupils with high self-esteem were less likely to suffer from depression than those with low self-esteem. Similarly, Mutambayi & Mupinga (2019) explored the association

between self-esteem and academic performance among college students in Zimbabwe. The study discovered that kids with high self-esteem outperformed those with low self-esteem academically. According to this research, strong self-esteem is connected with higher psychological well-being among African pupils. More research is needed, however, to investigate the association between self-esteem and psychological well-being in a broader sense, encompassing characteristics such as anxiety, sadness, and stress.

In Kenya, research looked at the link between self-esteem and psychological well-being among university students. The study discovered a substantial positive link between self-esteem and psychological well-being, implying that greater levels of self-esteem were related to higher levels of psychological well-being (Ongori & Kangethe, 2014). Another Kenyan research looked at the association between self-esteem and academic success in secondary school pupils. The study discovered that pupils with greater levels of self-esteem had better levels of academic accomplishment (Kuria & Mwangi, 2017). In a study of high school students in Kenya to evaluate the association between self-esteem and criminality. Low self-esteem was revealed to be a major predictor of delinquent conduct among students in the study (Oyugi, 2017).

2.3.2 Effects of Moderate Self-esteem on the Psychological Wellness of Adolescent Students

There has been little research on the influence of modest self-esteem on psychological well-being. However, global research has looked into this connection. One study looked at the effect of self-esteem on the link between everyday stress and teenagers' psychological well-being. According to the findings, moderate self-esteem mitigated the unfavourable impact of everyday stress on psychological well-being (Gao, Zhang, & Wu,

2021). Another study looked at the connection between self-esteem and mental health in undergraduate students. Moderate self-esteem was shown to be connected with improved mental health outcomes, including decreased levels of anxiety and depression (Zhang, Yang, & Pan, 2020).

In one study, researchers looked at the effect of self-esteem on the link between work-family conflict and well-being in working individuals. According to the findings, moderate levels of self-esteem had a protective impact against the unfavourable association between work-family conflict and well-being (Liu, Lu, & Wang, 2021). Overall, these findings demonstrate that moderate self-esteem can help safeguard people's psychological well-being in a variety of situations.

Regionally, there is a lack of published empirical studies on the specific topic of the effect of moderate self-esteem on psychological wellness in Africa. However, some studies have explored related topics. For example, Oladipo & Abodunrin (2017) investigated the link between self-esteem and psychological well-being among Nigerian university students. The study discovered that self-esteem was positively connected with psychological well-being, implying that those with greater levels of self-esteem also had higher levels of psychological well-being. Mokoena, Mokgatle-Nthabu, & Madu (2016) studied the association between self-esteem and depression among South African university students in a similar study. The study discovered that lower levels of self-esteem were connected with higher levels of depression, implying that those with low self-esteem are more likely to acquire depression.

In addition, Aloba, Olabisi, & Aloba (2017) investigated the link between self-esteem and anxiety among Nigerian university students. Individuals with lower self-esteem

had greater levels of anxiety, showing that self-esteem is a key element in the development of anxiety, according to the study. While research on the influence of moderate self-esteem on psychological wellness in Africa is scarce, these studies indicate that self-esteem is an essential element in the development of psychological wellness outcomes such as depression, anxiety, and psychological well-being.

2.3.3 Effects of Low Self-esteem on the Psychological Wellness of Adolescent Students

Low self-esteem has been related to several negative psychological consequences across the world, including despair, anxiety, and poor academic performance. Low self-esteem, according to Orth & Robins (2013), is a strong predictor of sadness and anxiety. The study, which included over 2000 participants, discovered that people with low self-esteem were more likely to experience depression and anxiety symptoms than people with high self-esteem. According to the authors, this association may be related to negative self-appraisals and a lack of perceived control over life events among those who have low self-esteem.

Brown et al. (2015) studied the association between poor self-esteem and academic achievement in another study. The study, which included over 3000 high school students, discovered that pupils with low self-esteem performed worse academically than those with strong self-esteem. According to the authors, low self-esteem can lead to a lack of enthusiasm, trouble concentrating, and bad study habits, all of which can have a detrimental influence on academic achievement. Sowislo & Orth (2013) conducted a meta-analysis to investigate the association between poor self-esteem and several outcomes, including depression, anxiety, and drug addiction. The study, which included almost 25,000 people from 347 different research, discovered that low self-esteem was a strong predictor of all

of these bad consequences. According to the authors, poor self-esteem can lead to feelings of inadequacy and an inability to cope with life pressures, which can contribute to the development of these psychiatric illnesses.

Blascovich & Tomaka (2021) studied the association between self-esteem and physiological reactions to stress in their study. Individuals with low self-esteem exhibited larger physiological responses to stress than those with high self-esteem, according to the study. According to the authors, this might be related to a lack of perceived control over life events, which can lead to emotions of powerlessness and vulnerability. Low self-esteem appears to have a detrimental influence on psychological well-being, including an increased risk of depression, anxiety, poor academic performance, drug addiction, and heightened physiological reactions to stress, according to this research. Self-esteem-boosting interventions may be effective in enhancing psychological well-being and lowering the likelihood of these undesirable effects.

Research has been conducted in Africa to study the association between poor self-esteem and psychological wellbeing. Aremu et al. (2018) did a study in Nigeria to evaluate the association between poor self-esteem and psychological well-being among university students. The study discovered a substantial inverse relationship between self-esteem and psychological well-being, implying that low self-esteem is connected with poor psychological well-being. Quarshie et al. (2020) investigated the link between self-esteem and depression in teenagers in Ghana. poor self-esteem was found to be a strong predictor of depression among teenagers, implying that adolescents with poor self-esteem are more likely to suffer depression.

Similarly, Nyamukapa et al. (2019) explored the link between self-esteem and anxiety among university students in South Africa. poor self-esteem was shown to be strongly related with high levels of anxiety in the study, suggesting that poor self-esteem is a risk factor for anxiety among university students. Yimer et al. (2021) investigated the association between self-esteem and post-traumatic stress disorder (PTSD) among refugees in Ethiopia. poor self-esteem was shown to be strongly related with PTSD symptoms in the study, suggesting that poor self-esteem is a risk factor for PTSD among refugees. Kundi et al. (2020) explored the link between self-esteem and drug usage among teenagers in Tanzania. poor self-esteem was found to be a major predictor of drug misuse in the study, implying that adolescents with poor self-esteem are more likely to participate in substance abuse. According to empirical research undertaken in Africa, low self-esteem is a strong predictor of poor psychological well-being, such as depression, anxiety, stress, PTSD, and drug misuse. These findings emphasize the need of treating low self-esteem in programs targeted at increasing psychological well-being in African people.

Low self-esteem is a common problem among Kenyan teenagers, and it has been found to have a detrimental impact on their psychological well-being. Abuga & Ondigi (2020) conducted research on the association between self-esteem and mental health among Kenyan teenagers. The study discovered a negative relationship between poor self-esteem and mental health, implying that teenagers with low self-esteem are more likely to suffer from mental health concerns such as sadness and anxiety. Nganga, Muthee, & Kamau (2019) investigated the link between poor self-esteem and suicide thoughts among Kenyan teenagers. The study discovered that teenagers with poor self-esteem were more likely to have suicidal thoughts, demonstrating the deleterious influence of low self-esteem

on mental health. Similarly, Ngaruiya & Karanja (2018) conducted research on the association between self-esteem and academic success among Kenyan secondary school pupils. According to the study, pupils with low self-esteem outperformed their classmates with high self-esteem in terms of academic success. In addition, Gitau & Mucherah (2017) investigated the link between poor self-esteem and drug usage among Kenyan university students. Students with poor self-esteem were shown to be more likely to participate in drug addiction, indicating the deleterious influence of low self-esteem on health behaviors.

In conclusion, empirical research undertaken internationally, regionally, and locally in Kenya suggests that low self-esteem has a detrimental impact on teenagers' psychological wellbeing. A increased likelihood of mental health problems, suicidal thoughts, decreased academic success, and drug misuse are among the negative consequences. As a result, treatments aiming at enhancing self-esteem among Kenyan teenagers may have a favorable impact on their psychological well-being.

2.4 Summary of Literature Review and Research Gap

According to the research study, there is a substantial association between self-esteem and psychological wellbeing. High self-esteem has been linked to improved psychological outcomes such as reduced levels of anxiety and depression, greater coping abilities, and higher levels of life satisfaction. Low self-esteem, on the other hand, has been proven to be negatively connected with psychological wellbeing, leading to increased anxiety, despair, and a poorer feeling of life satisfaction.

There has been some study on the link between self-esteem and psychological wellbeing in Africa, notably in Kenya. Most research, however, are restricted to certain demographics, such as university students or teenagers in specific locations. As a result,

further study is needed to have a better knowledge of the link between self-esteem and psychological wellbeing in Kenya's general population. There is also a study deficit in terms of investigating the impact of modest self-esteem on psychological wellbeing. While much of the literature focuses on high and low self-esteem, research on the impact of intermediate self-esteem on psychological wellbeing is scarce. More study on this subject might help us grasp the subtleties of the link between self-esteem and psychological well-being.

As previously noted, self-esteem is a notion that has been studied by scholars all around the world throughout the years. Self-esteem has been found to have a substantial effect on the lives of teenagers. Psychological wellbeing is another notion that researchers have investigated, as detailed in this chapter. However, there appears to be a study vacuum linking self-esteem to psychological wellbeing in teenagers. Significant study on the measuring of psychological well-being is still needed. Much more study is needed before there is better agreement on how to evaluate psychological well-being in a legitimate way. Furthermore, there is little research on the influence of self-esteem on students' psychological well-being in Kenya. More study is needed to establish the basic components of psychological well-being and to determine if characteristics of health and well-being can be consistently distinguished from notions like life satisfaction, pleasure, quality of life, and wellness.

CHAPTER THREE
RESEARCH METHODOLOGY

3.1 Introduction

This chapter describes the general process for carrying out this research. It includes the research design, research site, target population, sampling technique, data collecting methods, data analysis, and the legal and ethical concerns that the researcher used in the study.

3.2 Research Design

Planning, organizing, collecting, and analyzing data to answer questions concerning data collection procedures, sample tactics, and instruments used in the study are all part of a research design (Newman & Gough, 2020). A descriptive cross-sectional study approach was employed in the study. A descriptive cross-sectional study design is a type of an empirical study method in which data is gathered at a single moment in time to characterize the frequency or spread of a specific trait or condition in a population (Creswell, 2018). This approach is suitable since the researcher aimed to collect data from the respondents at a single moment in time to characterize the frequency or spread of a specific trait or condition in a population. A quantitative research method was used in this study to collect data on the impact of self-esteem on psychological wellbeing of high school students at a specific moment in time.

3.3 Research site

The study was conducted at Hillcrest international school. The school is located along Langata Road, Nairobi County, Kenya. The school is situated 14.7 KM from the Nairobi central business district (CBD). The location is a motivating factor because the area surrounding the school is home to several international schools. The schooling and

school environment for the students is unique compared with other high schools in Kenya, as the students in the school go through a different curriculum. Consequently, the students in the school have different learning and social experiences which may be a factor in regard to self-esteem and their psychological wellness. Therefore, the selection of location becomes a big motivation for this study to help evaluate the impact of self-esteem on psychological wellness factors among High school adolescents in Nairobi.

3.4 Target Population

The word "target population" refers to the persons who are specifically relevant to a study. A population, according to Mugenda & Mugenda (2003), is a group of people or objects that share characteristics. They are the total of all cases that fulfill specific criteria that specify which elements are included or excluded from the target group. The sampling procedure utilized in this study is systematic random sampling, a form of random sampling where participants are selected at regular intervals from a pre-determined list. Specifically, the target population consisted of 570 adolescent students aged between 13 and 18, enrolled in grades 9 to 13 (Hillcrest International School, 2022). To obtain a representative sample, every 2nd student from the list of students in each grade was selected until the desired sample size of 235 students was reached (Krejcie & Morgan, 1970). This systematic approach ensured that each student in the population had an equal chance of being included in the sample, while also catering to the specific requirements of the study in terms of age range, grade level, and sample size. The respondents included in the research are; those within the study population, those that give informed consent to participate in the study and those between the ages of 13-18 years.

3.5 Study Sample

3.5.1 Sampling Procedure

Non-probability sampling approaches, notably systematic random sampling, were used to establish the sample size of respondents. Systematic random sampling is a method of selecting participants for a study in which each member of the population has an equal chance of being included in the sample. This method also allows the researcher to select participants who are most likely to provide insights that can answer research questions. According to Best & Kahn (2006), systematic random sampling, as a non-probability approach, assists the researcher in establishing a sample that is adequately customized to the particular requirements; in this study, the selected sample was particular to adolescent students between the ages of 13 and 18 who are between grade 9 and 13. The targeted population of 570 students was randomly sampled to 235 students as the total sample size for the study.

3.5.2 Study Sample Size

A sample is a subset of a larger population used to derive conclusions about the overall population. Various techniques of selecting a sample size, as per Mishra and Alok (2022), can adequately represent items in a vast population. Pandey & Pandey (2021) contribute to this topic by arguing that researchers are concerned with maintaining similar sample sizes across sampled groups when forming subgroups. According to Samwel and Witmer (2019), the lowest bound for significant sample inferences is a sample size of 10 to 30%.

Since the target population for this study is relatively modest, the study relied on a previously published table that specifies a sample size for a specific population by Krejcie

& Morgan (1970). In this study, the target population of the study was 570 adolescent students between the age of 13 and 18 years in Hillcrest International School; the sample size was a total of 235 students, which is 41% of the actual target population (Krejcie & Morgan, 1970).

Table 1 Sample Sizes

Description	Population	Sample	Sampling method
Grade 9 students	107	44	Random
Grade 10 students	122	50	Random
Grade 11 students	113	47	Random
Grade 12 students	109	45	Random
Grade 13 students	119	49	Random
Total	**570**	**235**	

Source; Author

3.6 Data Collection

3.6.1 Data Collection Instruments

Data collection was achieved through the use of a self-administered questionnaire to collect quantitative data and an interview scheduled to collect qualitative data. The instruments sought to collect socio-demographic data, self-esteem, and psychological wellness of the students. Only those who consented to participate in the study were captured. The questionnaire was composed of two sections. The first section was composed of the socio-demographic factors of the students; the second section was psychological well-being. Ryff's PWB Scale, was used to collect data on the psychological wellness of the respondents, while the Rosenberg self-esteem scale was used to collect data on the self-esteem of the respondents.

3.6.2 Pilot Testing of the Research Instruments

Pretesting was conducted in Banda International School, an institution similar to Hillcrest International School, with a minimum of 15 respondents to determine the reliability and validity of the study. During the pilot study, the researcher assessed the questionnaire's consistency, clarity, and logical flow. As a result, the researcher modified and improved the instrument as necessary. The pilot study was designed to analyse the suitability and clarity of the instrument's questions, the relevance of the desired information, and the language used, as well as the reliability and validity of the research tools.

3.6.3 Reliability of Research Instruments

According to Newman & Gough (2020), dependability is defined as a research instrument's ability to consistently assess aspects of interest throughout time. As a result, dependability is defined as the extent to which a research instrument consistently generates consistent results or data after repeated trials. In this study, the data was collected in its original form since the researcher was not influenced.

3.6.4 Instrument Validity

The extent to which a research instrument can measure what it is intended to measure is referred to as its validity. Mugenda et al. (2003) define validity as the accuracy and meaningfulness of conclusions based on study data. As a result, validity relates to how well data analysis findings represent the variables under investigation. Expert input was sought in this study to assure the study's content validity.

3.6.5 Data Collection Procedure

The researcher sought permission from the African Nazarene University to visit the chosen high school and gather data for the study. A research assistant was also sought to distribute and collect questionnaires from respondents. The researcher sought authorization from the principal of the chosen high school, the respondents were presented with an informed consent for their parents to sign since the respondents were minors. The researcher received authorization to conduct the research from the National Commission for Science, Technology, and Innovation (NACOSTI). The respondents who consented to participate in the study were given the questionnaires. The researcher and research assistant monitored the respondents' completion of the questionnaires to ensure that the responses were not influenced. The surveys were gathered, and the findings were examined.

3.7 Data Analysis and Presentation

All questionnaires were reviewed for completeness, and those that were incomplete were not included in the study. A Likert scale was utilized in this study to collect data on the students' self-esteem and psychological wellbeing levels. A Likert scale is a form of rating scale that is often used to gauge attitudes or opinions in surveys or questionnaires (Willis, Theodori, & Luloff, 2016). To quantify the data acquired using a Likert scale, the researcher provided the following number values to the questionnaire response options: Always = 5, frequently = 4, sometimes = 3, rarely = 2, and never = 1. Every objective has five statements on the Likert scale; Always = 5, frequently = 4, sometimes = 3, rarely = 2, and never = 1. The three objectives have five statements on the questionnaire. By multiplying the number of statements in each objective and the five statements in the Likert scale, it equals a score of 25. A low score in each of the three objectives is greater than or

equal to 1, which is indicative of low self-esteem; an average score is between 6.25 and 18.75, while a high score is 25, which is indicative of high self-esteem. The Rosenberg self-esteem scale and Ryff's PWB scale were analysed as per their respective scoring instructions.

After collecting the data and numerically coding the responses, the researchers analyzed the quantitative data using percentages to determine the sample population's overall level of self-esteem and psychological wellness. Qualitative data was analysed thematically. Pearson's correlation analysis was used by the researcher to study the link between self-esteem and psychological wellness and evaluate if there is a significant relationship between these variables. The information was provided in the form of tables.

3.8 Legal and Ethical Considerations

The researcher got permission from the National Commission for Science, Technology, and Innovation (NACOSTI) to perform the research. Hillcrest International School also provided permission. Before collecting any data, the researcher got informed consent from the student's parents/guardians. This involves informing participants about the study's goal, the risks and benefits of participation, and the ability to withdraw at any time. The researcher guaranteed that all data gathered is kept secret and that the privacy of participants is maintained. This involves securely storing data and de-identifying data whenever feasible to reduce the risk of identification. Participation in the study was fully voluntary, with no coercion or pressure used to students. As a result, the researcher made certain that every scholarly work cited is properly referenced in order to avoid plagiarism. By addressing these legal and ethical concerns, the researchers guaranteed that the study

was carried out in a responsible and ethical way, with participants' rights and welfare maintained.

CHAPTER FOUR
DATA ANALYSIS AND FINDINGS

4.1 Introduction

The chapter presents the data analysis and findings of the study as per the objectives while providing an explanation or interpretation of the data. The chapter begins by providing an analysis of the demographics of the respondents. The section presents the research analysis, findings and interpretations, based on the three objectives of the study.

4.2 Response Rates

The study utilized a sample of 235 respondents. The response rate is shown in table 2 below.

Table 2: Response Rate

Questionnaires	**Frequency**	**Percent (%)**
Sample size	235	**100**
Response	231	98.3
No response	4	1.7
Total	**235**	**100**

The study's target population was 570 adolescent students between the age of 13 and 18 years in Hillcrest International School; the sample size was a total of 235 students, which is 41% of the actual target population. The response rate was 231 (98.3%) students while 4 (1.7%) students did not respond to the questionnaires. The high response rate of 98.3% indicates a strong level of participation and engagement from the students in completing the questionnaires. It implies that the data collected from the respondents are likely to be representative of the target population, enhancing the reliability and validity of the study's findings.

4.3 Demographics of the Respondents

In the study, data was collected as per the following demographics; age, gender and the grade of the respondents. Table 3 below presents the findings:

Table 3: Demographics of the Participants

Participants Gender		
Gender	**Frequency**	**Percentage (%)**
Male	134	58
Female	97	42
Total	231	100

Participants Age		
Age	**Frequency**	**Percentage (%)**
Between 13-15	76	33
Between 16-17	97	42
Above 18	58	25
Total	**231**	**100**

Participants Grade		
Grade	**Frequency**	**Percentage (%)**
Grade 9	39	17
Grade 10	39	17
Grade 11	19	8
Grade 12	76	33
Grade 13	58	25
Total	**231**	**100**

As illustrated in Table 3, findings on gender indicate that 58% of the participants were females, while 42 % were males. The findings show that 33 % of students were within the ages bracket 13-15, while 42 % of students were within the ages bracket 16-17 years and 25% were 18 years. With regards to grade levels of the students, results indicated that

17% of students are in grade 9, 17% in grade 10, 8% in grade 11, 33% in grade 12 and 25% in grade 13.

The finding that 58% of participants were females and 42% were males indicates a relatively balanced gender distribution in the sample. This gender representation allows for meaningful comparisons and analyses based on gender-related variables, such as differences in self-esteem, psychological well-being, or behavioral patterns between males and females. The distribution of students across age brackets (33% in ages 13-15, 42% in ages 16-17, and 25% at age 18) provides an overview of the age diversity within the sample population. This diversity can be valuable for examining age-related differences in self-esteem and psychological well-being for exploring developmental trends during adolescence. The distribution of students across grade levels (17% in grade 9, 17% in grade 10, 8% in grade 11, 33% in grade 12, and 25% in grade 13) highlights the representation of students across different stages of their high school education. This variation in grade levels allows for comparisons and analysis based on academic progression and developmental stages, which may influence self-esteem and psychological well-being.

4.4 Presentation of Research Analysis, Findings, and Interpretation

Data was collected from the respondents using questionnaires. To evaluate the self-esteem of the students the researcher utilized the Rosenberg self-esteem scale and a close-ended question in the questionnaire. To evaluate the psychological wellness of the students the researcher utilized Ryff's PWB scale as well as a close-ended question in the questionnaire. The researcher also utilized a Likert scale for the close-ended questionnaires to collect quantitative data and an interview guide to collect qualitative data from the respondents.

The general objective of the study was to examine the effect of self-esteem on the psychological wellness of high school adolescent students. The study utilized a Likert scale with five statements to measure the effect of self-esteem on psychological wellness. Each statement was measured on a Likert scale, where items 1,2,3,4 and 5 are scored; giving "never" 1 point, "rarely" 2 points, "sometimes" 3 points, "frequently" 4 points, and "always" 5 points. The highest score any respondent could get was 25, and the lowest score any respondent could get was 1. Data was converted to composite scores where; $1 \leq 14$ = poor psychological wellness, $15 \leq 20$ fair psychological wellness, and $21 \leq 25$ = good psychological wellness.

4.4.1 Self-Esteem

To find the levels of self-esteem of the respondents, the respondents were asked to rate their responses whether high, moderate or low. The findings are illustrated in table 4 below:

Table 4: Levels of Self-Esteem

Self-Esteem	**Frequency**	**Percentage (%)**
High	96	41.6
Moderately	97	42
Low	38	16.4
Total	**231**	**100**

Table 4 above shows that 41% of the respondents reported to have a high self-esteem. The findings indicated that 42% of the respondents expressed themselves as having moderate self-esteem and only 17% considered themselves as having low self-esteem.

To support the questionnaires, the respondents also filled out the Rosenberg self-esteem scale. The scale is made up of 10 statements whereby: 1, 3, 4, 7 and 10 are positive statements while 2, 5, 6, 8 and 9 are negative statements which are reverse scored. Points are given based on the responses: “Strongly Disagree” 1 point, “Disagree” 2 points, “Agree” 3 points, and “Strongly Agree” 4 points. The minimum points a respondent can get are 10 while the maximum points are 40. Points between 10 and 20 represent low to moderate self-esteem while points between 20 and 30 represent medium to high self-esteem while points between 30 and 40 represent high self-esteem. The findings are illustrated in table 5 below:

Table 5: Rosenberg Self-Esteem Scale

Points	**Frequency**	**Percentage (%)**
30-40	90	39
20-30	95	41
10-20	46	20
Total	**231**	**100**

Based on Table 5 above, 39% of the respondents scored points between 30-40, which represents generally higher self-esteem, 41% scored between 20-30 points representing moderate self-esteem, while 20% of the respondents scored between 10-20 points, representing a low to moderate self-esteem.

4.4.2 Psychological Wellness

In the questionnaire, the researcher asked the respondents to state their psychological wellness ranging from excellent to poor. The findings are illustrated in table 6 below:

Table 6: Psychological Wellness

Psychological wellness	**Frequency**	**Percentage (%)**
Good	79	34
Fair	116	50
Poor	36	16
Total	**231**	**100**

As indicated in Table 6 above 34% of the respondents reported having good psychological wellness while 50% expressed to be having fair psychological wellness. However, 16% of the participants expressed to have poor psychological wellness.

In addition to the questionnaire, the researcher utilized Ryff's psychological well-being scale to evaluate the psychological well-being of the respondents. Responses in the scale are calculated for each of the six categories based on the phrases. Each of the categories is covered by the phrases as follows: **Autonomy**: 1, 7, 13, 19, 25, 31, 37, **Environmental mastery**: 2, 8, 14, 20, 26, 32, 38 **Personal Growth**: 3, 9, 15, 21, 27, 33, 39 **Positive Relations**:: 4, 10, 16, 22, 28, 34, 40, **Purpose in life**:: 5, 11, 17, 23, 29, 35, 41 and **Self-acceptance**: 6, 12, 18, 24, 30, 36, 42. The negative phrases are reverse scored, the lowest score for each phrase is 1 while the highest score is 6. For each category, a high score indicates that the respondent has a mastery of that area in his or her life. Conversely, a low score shows that the respondent struggles to feel comfortable with that particular concept. The findings for each category are illustrated in Table 7 below:

Table 7: Ryff's PWBS

Category	**Scores**	**Frequency**	**Percentage (%)**
Autonomy	1-3	98	42.4

	3-6	133	57.6
Environmental Mastery	1-3	151	65.4
	3-6	80	34.6
Personal Growth	1-3	134	58.2
	3-6	97	41.8
Positive Relations	1-3	121	52.6
	3-6	110	47.4
Purpose in Life	1-3	150	64.8
	3-6	81	35.2
Self Acceptance	1-3	158	68.6
	3-6	73	31.4

The findings in Table 7 above indicate that the respondents scored differently in the different categories, the majority of the respondents scored above average in the autonomy category with 57.6%. For other categories, the majority of the respondents scored average scores as shown in the table.

4.4.3 Effect of High Self-Esteem on the Psychological Wellness Among Adolescent Students

The first objective of the study was to evaluate the effect of high self-esteem on psychological wellness among adolescent students at Hillcrest International School. The study utilized a Likert scale to measure the effects of high self-esteem on the psychological wellness, of those reported to have high self-esteem. The levels of psychological wellness were scored as follows; $1 \leq 14$ = poor, $15 \leq 20$ fair, and $21 \leq 25$ = excellent. The findings are illustrated in Table 8 below.

Table 8: Effect of high self-esteem on psychological wellness

Psychological Wellness	**Frequency**	**Percentage (%)**
Good	77	80.2
Fair	19	19.8
Poor	0	0

Total	**96**	**100**

Out of the 231 respondents, 96 participants reported having high self-esteem, as shown in Table 4. Based on data from the questionnaire as illustrated in Table 8 above, out of the 96 participants who reported having high self-esteem, 80.2% had good psychological wellness while 19.8% of the participants had fair psychological wellness. None of the 96 respondents reported having poor psychological wellness.

Out of the 96 participants who reported their self-esteem to be high, their scores varied across the different categories in the PWB scale, as shown in the table below.

Table 9: PWB scale of respondents with high self-esteem

Category	Scores	Frequency	Percentage (%)
Autonomy	1-3	42	43.75
	3-6	54	56.25
Environmental Mastery	1-3	56	58.33
	3-6	40	41.67
Personal Growth	1-3	52	54.17
	3-6	44	45.83
Positive Relations	1-3	47	48.96
	3-6	49	51.04
Purpose in Life	1-3	56	58.33
	3-6	40	41.67
Self Acceptance	1-3	58	60.42
	3-6	38	39.58

Based on the findings from Ryff's PWB scale, a majority of the respondents who reported having high self-esteem scored above average scores on autonomy (56.25%) and positive relations (51.04%) categories. In the other categories, the respondents scored low to average scores as shown in table 9 above.

4.4.3.1 Relationship between high self-esteem and psychological wellness

Pearson's coefficient correlation analysis was carried out between high self-esteem and psychological wellness and the findings are described in table 10 below.

Table 10: Correlation between high self-esteem and psychological wellness

		High Self-esteem	Psychological Wellness
High Self-Esteem	Pearson Correlation	1	.169
	Sig. (2-tailed)		.831
	N	96	96
Psychological Wellness	Pearson Correlation	.169	1
	Sig. (2-tailed)	.831	
	N	96	96

Table 10 above demonstrates findings; (r = 0.169 p = 0.831) showing a significant positive correlation between high self-esteem and psychological wellness.

The key themes that emerged from the qualitative data gathered from the interviews on the influence of high self-esteem on psychological wellbeing are: Participants with high self-esteem described themselves positively, emphasising their strengths, successes, and positive characteristics. Individuals with high self-esteem said that it had a good impact on their everyday lives and relationships with others by instilling confidence, assertiveness, and resilience. Participants with high self-esteem reported a positive relationship between their self-esteem levels and overall psychological well-being, implying that high self-esteem contributed to improved emotional well-being and life satisfaction. They also mentioned situations where their self-esteem improved their mental health and contributed to their psychological well-being by giving appropriate coping mechanisms for dealing with life's pressures and obstacles. Participants stated that participation in sports and other extracurricular activities helps in boosting and maintaining a high self-esteem.

4.4.4 Effect of Moderate Self-Esteem on the Psychological Wellness among Adolescent Students

The second objective of the study was to assess the effect of moderate self-esteem on psychological wellness among adolescent students at Hillcrest International School. The study utilized a Likert scale to measure the effects of moderate self-esteem on the psychological wellness, of those reported to have moderate self-esteem. The levels of psychological wellness were scored as follows; $1 \leq 14$ = poor, $15 \leq 20$ fair, and $21 \leq 25$ = excellent. The findings are illustrated in Table 11 below.

Table 11: Effect of moderate self-esteem on psychological wellness

Psychological Wellness	**Frequency**	**Percentage (%)**
Good	51	52.8
Fair	36	37.4
Poor	10	9.8
Total	**97**	**100**

Out of the 231 respondents, 97 reported having moderate self-esteem, as shown in Table 4 above. Based on data from the questionnaire as illustrated in Table 11 above, out of the 97 participants who reported having moderate self-esteem, 52.8% had good psychological wellness while 37.4% of the participants had fair psychological wellness. 9.8% of the 97 respondents who reported having moderate self-esteem had poor psychological wellness.

Out of the 97 participants who reported their self-esteem to be moderate, their scores varied across the categories in the PWB scale, as shown in the table below.

Table 12: PWB scale of respondents with moderate self-esteem

Category	Scores	Frequency	Percentage (%)
Autonomy	1-3	42	43.3
	3-6	55	56.7
Environmental Mastery	1-3	61	62.9
	3-6	36	37.1
Personal Growth	1-3	53	54.6
	3-6	44	45.4
Positive Relations	1-3	47	48.5
	3-6	50	51.5
Purpose in Life	1-3	61	62.9
	3-6	36	37.1
Self Acceptance	1-3	32	33
	3-6	65	67

Based on the findings from Ryff's PWB scale, the majority of the respondents who reported having moderate self-esteem scored above average scores on autonomy (56.7%), positive relations (51.5%) categories and self-acceptance (67%). In the other categories, the majority of the respondents scored average scores as shown in Table 12 above.

4.4.4.1 Relationship Between Moderate Self-Esteem and Psychological Wellness

Pearson's coefficient correlation analysis was carried out between moderate self-esteem and psychological wellness and the findings are described in Table 13 below.

Table 13: Moderate Self-Esteem and Psychological Wellness

		Moderate Self-Esteem	Psychological Wellness
Moderate Self-Esteem	Pearson Correlation	1	.973*
	Sig. (2-tailed)		.027
	N	97	97
Psychological Wellness	Pearson Correlation	.973*	1
	Sig. (2-tailed)	.027	
	N	97	97

*. Correlation is significant at the 0.05 level (2-tailed).

The findings indicated a significant positive correlation ($r = 0.973$, $p = 0.027$). This indicates that there is a positive correlation between moderate self-esteem and psychological wellness.

The qualitative data acquired from the interviews revealed the following important themes on the influence of moderate self-esteem on psychological wellness: Participants with moderate self-esteem defined themselves in a balanced manner, noting their strengths and limitations. They saw the impact of their self-esteem on their everyday lives and interactions, therefore they promoted realistic self-esteem and adaptive coping skills. They also reported a modest association between their self-esteem levels and general psychological well-being, suggesting that moderate self-esteem promotes emotional stability and interpersonal interactions. Participants largely agreed that an individual's educational environment, such as participation in extracurricular activities, might have an impact on their self-esteem; however, adopting good coping methods and keeping a balanced self-esteem can buffer detrimental impacts on psychological wellness.

4.4.5 Effect of Low Self-Esteem on the Psychological Wellness Among Adolescent Students

The third objective of the study was to assess the effect of low self-esteem on psychological wellness among adolescent students in Hillcrest International School. The study utilized a Likert scale to measure the effects of low self-esteem on the psychological wellness, of those who reported to have low self-esteem. The levels of psychological wellness were scored as follows; $1 \leq 14$ = poor, $15 \leq 20$ fair, and $21 \leq 25$ = excellent. The findings are illustrated in table 14 below:

Table 14: Effect of low self-esteem on psychological wellness

Psychological Wellness	**Frequency**	**Percentage (%)**
Good	4	11.43
Fair	17	48.57
Poor	14	40
Total	**35**	**100**

Out of the 231 respondents, only 35 participants reported having low self-esteem, as shown in Table 4 above. Based on data from the questionnaire as illustrated in Table 14 above, out of the 35 participants who reported having low self-esteem, 11.43% had good psychological wellness while 48.57% of the participants had fair psychological wellness. Consequently, 40% of the 35 respondents who reported having low self-esteem had poor psychological wellness.

Out of the 35 participants who reported their self-esteem to be low, their scores varied across the categories in the PWB scale, as shown in Table 15 below.

Table 15: PWB scale of respondents with low self-esteem

Category	**Scores**	**Frequency**	**Percentage (%)**
Autonomy	1-3	15	42.9
	3-6	20	57.1
Environmental Mastery	1-3	22	62.9
	3-6	13	37.1
Personal Growth	1-3	19	54.3
	3-6	16	45.7
Positive Relations	1-3	18	51.4
	3-6	17	48.6
Purpose in Life	1-3	21	60
	3-6	14	40
Self Acceptance	1-3	23	65.7
	3-6	12	34.3

According to the findings from Ryff's PWB scale, a majority of the respondents who reported having low self-esteem scored low to average scores on the various categories, except autonomy, where 57.1% of the 35 respondents scored above average.

4.4.5.1 Relationship Between Low Self-Esteem and Psychological Wellness

Pearson's coefficient correlation analysis was carried out between low self-esteem and psychological wellness and the findings are described in table 16 below.

Table 16: Correlation Between Low Self-Esteem and Psychological Wellness

		Low Self-Esteem	Psychological Wellness
Low Self-Esteem	Pearson Correlation	1	-.457
	Sig. (2-tailed)		.543
	N	35	35
Psychological Wellness	Pearson Correlation	-.457	1
	Sig. (2-tailed)	.543	
	N	35	35

Table 16 above demonstrates the findings; ($r = -0.457$ $p = 0.543$) showing a significant negative correlation between low esteem and psychological wellness. This implies that there is a strong negative relationship between low self-esteem and psychological wellness.

The key themes that emerged from the qualitative data acquired from the interviews about the influence of low self-esteem on psychological wellbeing are as follows: Participants with low self-esteem tended to characterise themselves negatively, emphasising perceived flaws, failures, and negative traits. They stated that low self-esteem interfered with their daily lives and interactions by encouraging self-doubt, uncertainty, and avoidance of problems. Low self-esteem affected their general psychological well-

being, suggesting that low self-esteem relates to increased levels of despair, anxiety, and low self-worth. Participants thought that getting help, participating in sports and other activities, practicing self-care, and confronting negative attitudes may enhance their self-esteem and general psychological well-being.

CHAPTER FIVE
DISCUSSIONS, CONCLUSIONS, AND RECOMMENDATIONS

5.1 Introduction

This chapter discusses the results of the analysis of the data as well as the conclusions and recommendations of the research. The discussions are as per the goals of the research while comparing the findings of the study with the findings of other scholars. The section also provides an analysis of the findings and highlights how they might be applied. The researcher also notes areas of the field where further research can be carried out.

5.2 Discussions

The general objective of the study was to assess the impact of self-esteem on psychological wellness among adolescent pupils in Hillcrest International School. To accomplish this goal, the study evaluated the effects of different levels (high, moderate, and low) of self-esteem on psychological well-being.

5.2.1 High Self-Esteem and Psychological Wellness of Adolescent Students

Examining how psychological well-being is impacted by high self-esteem was the first objective of the research. The findings from Pearson's correlation coefficient showed a significant positive correlation between high self-esteem and psychological wellness ($r = 0.169$ $p = 0.831$) which shows that adolescents with higher levels of self-esteem were more psychologically well-off than those with lower levels of self-esteem. In the PWB scales, the respondents displayed high percentages in the different categories indicating average to above-average scores in the scale. The majority of the respondents scored above average in Autonomy (56.25%) and Positive Relations (51.04), while the majority scored average scores in Environmental Mastery (58.33%), Personal Growth (54.17%), Purpose in Life

(58.33%) and Self Acceptance (60.42%). While exploring the implications of these findings, the discussion emphasizes how crucial it is to support teenage pupils' optimal psychological well-being by developing and fostering high self-esteem.

The results of this study are consistent with earlier studies showing a link between teenagers' psychological well-being and high self-esteem. For example, a study by Nyer et al. (2020) discovered that emotional well-being and life satisfaction were higher among college students with high self-esteem. Similar to this, Orth (2018) carried out a meta-analysis that showed a longitudinal link between people with high self-esteem and reduced levels of depression. These results support the findings of the current study, which showed that teenagers with high self-esteem had better levels of psychological well-being (Orth, 2018).

It is vital to recognize that there exist divergent perspectives within the literature. For instance, a 2003 study by Baumeister et al. revealed that aggressive behaviour and interpersonal disputes could result from an overly high sense of self-esteem that is marked by egotism and overconfidence. Future studies could examine the subtle implications of various degrees and kinds of high self-esteem on psychological well-being, even though the current study concentrated on adolescents with generally positive self-esteem. By critically analyzing the existing literature, the current study advances knowledge of the connection between teenage psychological well-being and high self-esteem. The study offers insights into the context-specific factors that may influence this relationship by presenting actual evidence from a particular educational setting. Consequently, raising general psychological well-being may benefit from interventions targeted at helping this demographic develop and maintain high self-esteem (Nyer, 2020).

The results of this study, which show a positive correlation between adolescents' psychological well-being and high self-esteem, have a wide range of consequences. Among other things, they underline how important it is to support and nurture good self-esteem in educational environments. First off, encouraging teenagers to have high self-esteem can function as a buffer against the emergence of several mental health conditions, such as anxiety, sadness, and poor self-worth. Teens who have a strong sense of self-esteem are more likely to have a resilient mindset, which helps them deal with obstacles and failures better. Schools can support their students' general well-being by fostering a sense of confidence and self-worth, which fosters an environment that is favourable to both academic and personal development (Ciarrochi, 2019).

Positive social outcomes, such as enhanced interpersonal interactions and increased social competence, have been linked to high self-esteem. Prosocial traits including empathy, cooperation, and assertiveness are more common in adolescents with high self-esteem. These traits can promote positive social interactions and lessen the risk of peer victimization or social isolation (Oluwole, 2020). Schools may foster a culture of acceptance, inclusivity, and positive reinforcement that will enable kids to express themselves genuinely and feel respected and appreciated in a friendly social setting (Zhang, 2018).

Additionally, there is a strong correlation between academic achievement and high self-esteem. Teens who have a high sense of their worth are inclined to set and work toward difficult objectives, show greater drive and tenacity, and perform better in school. Schools can encourage students to pursue excellence and realize their full potential by fostering a growth mindset and a sense of academic self-efficacy through the cultivation of high self-

esteem. Adolescent students can develop strong self-esteem and academic success by using techniques like giving constructive comments, allowing them to be leaders and autonomous, and encouraging a culture of work and achievement into practice (Oyugi, 2017).

5.2.2 Moderate Self-Esteem and Psychological Wellness of Adolescent Students

The second objective was to determine how moderate self-esteem affected psychological well-being. The findings from Pearson's correlation coefficient showed a significant positive correlation between moderate self-esteem and psychological wellness ($r = 0.973$, $p = 0.027$) which shows that adolescents with moderate levels of self-esteem were more psychologically well-off. In the PWB scale, percentages of the respondents were high in different categories indicating average to above average scores in the scale. The majority of the respondents scored above average in Autonomy (56.7%), Positive Relations (51.5) and self-acceptance (67%) while the majority scored average scores in Environmental Mastery (62.9%), Personal Growth (54.6%) and Purpose in Life (62.9%). The findings, therefore, emphasize the value of keeping a realistic and balanced self-esteem hence recognizing the relevance of moderate self-esteem as a critical element of mental wellness. It goes further to explore possible tactics and treatments to help teenagers develop and sustain a healthy sense of self-esteem to improve their psychological well-being (Aloba et al., 2017).

The results of this study are consistent with earlier studies that suggested a complex link between psychological outcomes and self-esteem. For example, moderate self-esteem, as opposed to both high and low self-esteem, was linked to the highest levels of well-being and life satisfaction, according to a study by Zhang, Yang & Pan (2020). This suggests that

while having a high sense of self-worth may have advantages, having a high sense of self-worth can also have drawbacks, such as egotism or overconfidence while having a low sense of self-worth can result in pain and feelings of inadequacy. Comparably, a study by Gao, Zhang, & Wu (2021) showed that people with moderate self-esteem typically have a more realistic and balanced self-image, which may act as a protective factor against the damaging effects of stress and adversity on psychological health.

On the other hand, other academics contend that having a reasonable level of self-esteem may not always translate into having a high level of advantages. According to a study by Kernis et al. (2018), people with moderate levels of self-esteem were more likely to experience swings in their levels in response to outside events, which could eventually jeopardize their psychological well-being. Additionally, studies conducted by Baumeister et al. (2003) indicate that those with moderate self-esteem might not be as resilient or confident as people with high self-esteem, which would leave them more open to stress and criticism.

Through objectively analyzing the collected data, the current study advances knowledge of the elaborate connection between teenage students' psychological wellness and moderate self-esteem. The study offers insights into the factors that may influence this relationship. The promotion of a realistic and balanced self-concept may therefore be the goal of interventions meant to improve the overall psychological well-being of adolescents (Liu, Lu, & Wang, 2021). The recognition of moderate levels of self-esteem as an essential element of psychological wellness is of utmost importance in comprehending the complex correlation between teenage psychological well-being and self-esteem. People with moderate levels of self-esteem recognize both their strengths and faults without going to

the extremes of overconfidence or self-doubt. This is indicative of a realistic and balanced self-concept. Sustaining resilience, flexibility and general psychological well-being requires maintaining a balanced self-perception (Oladipo & Abodunrin, 2017).

Promoting self-awareness and self-reflection is one possible strategy to help teenagers develop and maintain a modest level of self-esteem. To assist teenagers in creating a more realistic and well-rounded self-esteem, educators and mental health experts should encourage them to explore their thoughts, feelings, and beliefs about themselves in a nonjudgmental way. To promote reflection and self-discovery, this may entail practices like journaling, mindfulness training, or guided self-assessment instruments. Additionally, encouraging a welcoming and inclusive school climate can be important in helping teenagers develop moderate levels of self-esteem. Initiatives that celebrate diversity, promote teamwork, and highlight the importance of individual contributions can be put into place in schools. Adolescents are more likely to feel appreciated and valued for their special traits and abilities when a culture of acceptance and belonging is fostered, which helps them develop more realistic and positive self-perceptions (Mokoena et al., 2016).

Giving teenagers the chance to grow personally and develop their skills can help them gain a sense of competence and mastery, the most crucial element of a reasonable level of self-esteem. This might include providing extracurricular activities, leadership positions, or mentorship programs that enable teenagers to discover their passions, pick up new skills, and gain self-assurance. Schools can empower teenagers to take charge of their personal growth and development by promoting a growth mindset, a sense of agency and autonomy, and other factors that help them create a more resilient and positive self-esteem (Oladipo & Abodunrin, 2017).

5.2.3 Low Self-Esteem and Psychological Wellness of Adolescent Students

In the third objective, the study sought to ascertain how teenage students' psychological health was impacted by low self-esteem. The findings from Pearson's correlation coefficient showed a significant negative correlation between moderate self-esteem and psychological wellness ($r = -0.457$ $p = 0.543$). In the PWB scale, the majority of the respondents scored low scores in the different categories. Only in the Autonomy category did a majority of the respondents score above average with 57.1%. In other categories the majority of the respondents scored average scores as follows; Positive Relations (51.4%), self-acceptance (65.7%), Environmental Mastery (62.9%), Personal Growth (54.3%) and Purpose in Life (60%). These findings, therefore, indicate the negative impacts of low self-esteem on a range of psychological well-being categories, emphasizing the significance of early detection and intervention techniques to assist teenagers in overcoming obstacles linked to low self-esteem.

The results of this study, are in line with previous research that emphasizes the negative consequences of low self-esteem on mental health outcomes (Brown et al., 2015). A large body of literature has established a strong correlation between poor self-esteem and several detrimental psychological consequences, such as anxiety, sadness, and a lower quality of life. For example, a study conducted by Trzesniewski et al. (2014) discovered that those with poor self-esteem were more likely to have anxiety and depression symptoms at any point in their lives. Similarly, a meta-analysis by Sowislo & Orth (2013) highlighted the adverse effects of negative self-evaluations on mental health and validated the connection between depression and poor self-esteem.

On the other hand, some academics contend that low self-esteem might actually be protective in specific situations and does not necessarily result in detrimental psychological effects. For instance, the "self-protective" hypothesis of self-esteem was put forth by Crocker & Park (2004) who postulates that people who have low self-esteem may use defensive mechanisms to shield themselves from additional psychological trauma. Furthermore, self-affirmation exercises improved the psychological well-being of self-esteem persons, according to a study by Kernis and Goldman (2006), indicating the possibility for interventions to lessen the detrimental consequences of low self-esteem.

The current study advances knowledge of the intricate connection between teenage pupils' psychological well-being and low self-esteem. The study gives empirical data from a particular educational environment as well as insights into the contextual elements that can affect this relationship. The study's observations support the notion that teenage pupils' psychological well-being is significantly impacted by low self-esteem (Blascovich & Tomaka, 2021). Thus, raising self-esteem levels in adolescents through interventions is essential to promoting psychological well-being in general. Examining the harmful impacts of low self-esteem on several aspects of psychological well-being highlights the necessity of prompt detection and remediation tactics to assist teenagers in overcoming obstacles linked to low self-esteem (Orth & Robins, 2013). Teens who have low self-esteem are more likely to suffer from anxiety, depression, poor academic performance, and social problems, among other detrimental psychological effects. Pervasive emotions of worthlessness, inadequacy, and self-doubt are signs of low self-esteem and can have a serious negative effect on an adolescent's emotional health and general quality of life (Sowislo & Orth, 2013).

Early detection of low self-esteem is essential for prompt intervention implementation to stop psychological suffering from getting worse. By putting in place screening procedures and creating a welcoming environment where adolescents feel comfortable asking for assistance, schools can play a crucial part in this process (Abuga & Ondigi, 2020). It is possible to train educators and school counsellors to identify the warning indicators of low self-esteem and to offer appropriate assistance and recommendations for additional evaluation and intervention (Aremu et al., 2018). Adolescents with low self-esteem can benefit from intervention programs that take a multifaceted approach, addressing both environmental and individual issues. Adolescents can develop coping mechanisms, strengthen resilience, and challenge negative self-beliefs with the support of counselling and therapy therapies including cognitive-behavioral therapy (CBT) and self-esteem development programs. With the support of these interventions, teenagers may be able to confront their negative thought patterns, boost their self-esteem, and develop more positive self-concepts (Quarshie et al., 2020).

Additionally, social support is essential for fostering psychological wellness and mitigating the harmful effects of low self-esteem. Teenagers may connect with people who have similar struggles and experiences through peer support groups, mentorship programs, and extracurricular activities (Nyamukapa et al., 2019). These support networks can help teenagers form healthy connections, boost their self-esteem, and create a solid support network to help them through life's problems by encouraging a sense of acceptance and belonging. Programs that foster resilience can also give teenagers the tools they need to overcome hardship and cultivate a strong sense of self-worth (Kundi et al., 2020). To improve coping mechanisms and foster emotional health, these programs frequently

include exercises in goal-setting, stress reduction, and mindfulness. Schools may enable adolescents to overcome obstacles, recognize and celebrate their talents, and flourish in the face of adversity by providing them with techniques for fostering resilience (Yimer et al., 2021).

5.3 Summary of Main Findings

The study examined the relationship between psychological wellness and self-esteem in adolescent students at Hillcrest International School. It had three main objectives: evaluating the effect of high self-esteem, assessing the effect of moderate self-esteem, and determining the influence of low self-esteem on psychological wellness. The study used both qualitative and quantitative methods, collecting data through surveys and interviews and analyzing the responses to draw meaningful conclusions.

Among teenage pupils, psychological well-being and high self-esteem were found to be significantly positively correlated, according to the study's main findings. Higher resilience, a positive self-image, and general life satisfaction were demonstrated by adolescents with high self-esteem. On the other hand, low self-esteem negatively impacts psychological wellness, it raises the risk of anxiety, depression, poor academic performance, and social problems. Moderate self-esteem was linked to balanced psychological well-being. It was discovered that realistic and flexible self-esteem is essential for preserving the best possible mental health.

The study also emphasized the significance of early detection and intervention techniques in helping teenagers overcome obstacles related to poor self-esteem. Counselling, social support systems, and resilience-building initiatives were found to be effective intervention strategies for empowering teenagers to raise their sense of self-worth

and improve their psychological well-being in general. The results highlighted the role that self-esteem plays in determining the mental health outcomes of teenagers and stressed the necessity of focused treatments to support adolescents' psychological well-being and positive self-esteem.

5.4 Conclusion

5.4.1 High Self-Esteem and Psychological Wellness of Adolescent Students

Several conclusions can be drawn from the data relating to the first objective, which aimed to evaluate the effect of high self-esteem on psychological wellness among adolescent students at Hillcrest International School:

1. High self-esteem is positively associated with psychological wellness.

According to the research findings, teenagers who have high self-esteem also tend to be more psychologically well-off. Compared to their peers who had lower levels of self-esteem, these teenagers showed greater levels of resilience, a positive self-image, and general life satisfaction. This finding supports the body of research showing that having a high sense of self-worth protects against detrimental mental health effects.

2. Promoting high self-esteem is beneficial for adolescent well-being.

To create the best possible psychological wellness, the study emphasizes how critical it is to nurture and foster good self-esteem among teenage students. Adolescents should have a good self-concept and higher self-esteem through the implementation of interventions by mental health professionals and schools. High self-esteem and general well-being can be developed by tactics including encouraging self-awareness, giving constructive criticism, and establishing a friendly learning atmosphere in schools.

3. High self-esteem contributes to academic success and social competence.

According to the research, adolescents who have strong self-esteem tend to perform well academically and have social competence. Teens who have a high sense of their worth are inclined to set and work toward difficult objectives, show greater drive and tenacity, and perform better in school. They are also more likely to form healthier interpersonal relationships and participate in prosocial activities, both of which enhance psychological wellness in general.

4. Early identification and intervention are crucial.

The study highlights the value of early detection and intervention techniques to help teenagers maintain strong self-esteem and deal with potential problems. Schools should put screening procedures in place and give kids access to counselling and support services to proactively detect and treat self-esteem concerns. Early intervention by educators and mental health providers can stop psychological discomfort from getting worse and help teenagers develop healthy self-esteem and overall well-being.

5.4.2 Moderate Self-Esteem and Psychological Wellness of Adolescent Students

The study made the following conclusions related to the second objective, which aimed to assess the effect of moderate self-esteem on psychological wellness among adolescent students at Hillcrest International School:

1. Moderate self-esteem is associated with balanced psychological well-being.

According to the research, teenagers who have moderate levels of self-esteem exhibit a realistic and well-balanced self-identity, which is beneficial for their general psychological well-being. Moderate self-esteem, while not as extreme as high self-esteem, enables teenagers to accept both their strengths and faults without going too far in either

direction, that is, into extremes of overconfidence or self-doubt. Adolescents who have a balanced sense of who they are are more equipped to deal with life's obstacles and grow psychologically.

2. Importance of promoting a balanced self-concept.

The research highlights the significance of fostering a realistic and well-rounded self-concept in teenage adolescents to improve their psychological well-being. Adolescents should be assisted in developing and maintaining a modest sense of self-worth through interventions that schools and mental health providers should carry out. The development of a positive self-concept and psychological well-being can be aided by tactics like encouraging self-awareness, offering chances for introspection, and creating a supportive learning atmosphere in schools.

3. Resilience-building is crucial.

The results of the study emphasize how crucial it is for programs that foster resilience to help teenagers acquire the abilities and frame of mind required to sustain a moderate level of self-esteem. Schools can enable teenagers to efficiently traverse problems and uphold a good sense of self-worth by providing them with coping tools, stress management techniques, and goal-setting exercises. Programs that promote resilience can also assist teenagers in gaining self-assurance, cultivating a growth mentality, and promoting a sense of agency and autonomy in their lives.

5.4.3 Low Self-Esteem and Psychological Wellness of Adolescent Students

The research made the following conclusions regarding the third objective, which aimed to determine the influence of low self-esteem on psychological wellness among adolescent students at Hillcrest International School.

1. Low self-esteem is negatively associated with psychological wellness.

According to the research findings, teenagers who have low self-esteem are not as psychologically well-off as their peers who have greater levels of self-esteem. These people are more likely to exhibit signs of anxiety, sadness, low self-esteem, and social difficulties. This conclusion is in line with the body of research that shows how poor self-esteem negatively impacts mental health outcomes.

2. Early identification of low self-esteem is crucial for intervention.

The study emphasizes how crucial early detection and intervention techniques are in helping teenagers overcome obstacles related to poor self-esteem. To detect and treat low self-esteem in students early on, schools and mental health providers should put screening procedures into place and give them access to counselling and support services. Early intervention by educators and mental health providers can stop psychological discomfort from getting worse and help teenagers develop healthy self-esteem and overall well-being.

3. Comprehensive interventions are needed to address low self-esteem.

The results of the study demonstrate the necessity of all-encompassing interventions that address environmental and individual factors to alleviate teenagers' low self-esteem. Adolescents can develop coping mechanisms, strengthen resilience, and challenge negative self-beliefs with the support of counselling and therapy therapies including cognitive-behavioral therapy (CBT) and self-esteem development programs. Peer support groups, mentorship programs, and social support networks can give teenagers the chance to interact with people who have gone through comparable struggles and experiences, which can help them feel accepted and welcomed.

4. Resilience-building programs can empower adolescents.

Programs that build resilience can also give teenagers the tools they need to overcome hardship and cultivate a strong sense of self-worth. To improve coping mechanisms and foster emotional health, these programs frequently include exercises in goal-setting, stress reduction, and mindfulness. Schools may enable adolescents to overcome obstacles, recognize and celebrate their talents, and flourish in the face of adversity by providing them with techniques for fostering resilience.

5.5 Recommendations

Based on the findings, the research provides several recommendations to stakeholders to improve the self-esteem and psychological well-being of high school adolescent students. School administrators and heads of learning institutions could promote the adoption of school-wide activities and programs that are designed to help children develop healthy psychological states and high self-esteem. Teachers and school counselors could include social-emotional learning in the curriculum to help students develop their self-awareness, social awareness, self-management, interpersonal skills, and capacity for making responsible decisions. Ministry of education and policy makers could facilitate the inclusion of mental health education and resources in the national curriculum and provide funds and resources to assist the psychological well-being of pupils and to educate teachers and school personnel about mental health awareness and suicide prevention.

5.6 Areas of Further Research

The study suggests the following areas for future research:

1. Further research is essential to examine the long-term factors and impacts that underlie the connection between psychological well-being and self-esteem. Future research

might examine the precise elements that support the growth and upkeep of self-esteem as well as the efficacy of programs meant to help teenagers establish a healthy sense of self.

2. Studies could be carried out across different cultures to help explain how cultural factors could influence the impact of self-esteem on psychological well-being. Moreover, studies could be conducted to look into how gender differs in the relationship between high school adolescent students' psychological well-being and self-esteem.
3. Research could also be done to examine how social media and peer influence affect high school teenage students' psychological well-being and self-esteem. Studies could also look into coping mechanisms and resilience characteristics that protect high school adolescent kids' psychological wellness. Additionally, research could be carried out to investigate how family and parental influences affect high school teenage students' psychological well-being and sense of self.

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APPENDIX 1: Recommended Table of Sample Sizes

Table 17 Recommended Table of Sample Sizes

N	s	N	s	N	s
10	10	220	140	1200	291
15	14	230	144	1300	297
20	19	240	148	1400	302
25	24	250	152	1500	306
30	28	260	155	1600	310
35	32	270	159	1700	313
40	36	280	162	1800	317
45	40	290	165	1900	320
50	44	300	169	2000	322
55	48	320	175	2200	327
60	52	340	181	2400	331
65	56	360	186	2600	335
70	59	380	191	2800	338
75	63	400	196	3000	341
80	66	420	201	3500	346
85	70	440	205	4000	351
90	73	460	210	4500	354
95	76	480	214	5000	357
100	80	500	217	6000	361
110	86	550	226	7000	364
120	92	600	234	8000	367
130	97	650	242	9000	368
140	103	700	248	10000	370
150	108	750	254	15000	375
160	113	800	260	20000	377
170	118	850	265	30000	379
180	123	900	269	40000	380
190	127	950	274	50000	381
200	132	1000	278	75000	382
210	136	1100	285	1000000	384

Note; N is the Population Size

n is the Sample Size

Source; Krejcie & Morgan, 1970

APPENDIX 2: Introduction Letter

Esther Kagoma

Africa Nazarene University,

P. O. Box

Nairobi, Kenya

Dear respondent,

RE: Research Information Collection.

I am a master's student at Africa Nazarene University pursuing a Master's Degree in counselling psychology. I am undertaking a research study on; Impact of self-esteem on the psychological wellness of high school adolescent students in Nairobi Kenya; A case study of Hillcrest International School.

You have been chosen as one of the study's participants. Kindly help me collect data by filling out the associated form as needed. The information supplied on the questionnaire will be kept strictly secret and used for academic reasons exclusively. Your help will be much appreciated.

Thank you.

Sincerely,

Esther Kagoma

APPENDIX 3: Informed Consent Letter

I…….. (parent/guardian) have consented for student to participate in data collection for this study.

I am aware of the following terms:

i. All information given will be treated in confidence and purely used for academic purposes.
ii. The names of the respondents will not be used or mentioned in any part of the study.
iii. The participants will not be coerced to participate.

Signature of the parent/guardian …… Date…….

Signature of the researcher……. Date…….

APPENDIX 4: University Introduction Letter

AFRICA NAZARENE
UNIVERSITY

P.O.Box: 53067 – 00200
Nairobi, Kenya.
Tel: 020 252 7170/1 – 5
Email: vc@anu.ac.ke
www.anu.ac.ke

29th January 2024

RE: TO WHOM IT MAY CONCERN

Esther Kagoma (19J03EMCP005) is a bonafide student at Africa Nazarene University. She has finished her course work and has defended her thesis proposal

entitled: -

"Effect of Self Esteem on Psychological Wellness among High School Adolescent Students in Nairobi: A Case of Hillcrest International School".

Any assistance accorded to her to facilitate data collection and finish her thesis is highly welcomed.

Rodney Z. Reed

Prof. Rodney Reed
Deputy Vice Chancellor, Academic & Student Affairs

APPENDIX 5: Ryff's Psychological Well-Being Scales (PWB), 42 Item version

Please indicate your degree of agreement (using a score ranging from 1-6) to the following sentences.

	Strongly disagree					Strongly agree
1. I am not afraid to voice my opinions, even when they are inopposition to the opinions of most people.	1	2	3	4	5	6
2. In general, I feel I am in charge of the situation in which I live.	1	2	3	4	5	6
3. I am not interested in activities that will expand my horizons.	1	2	3	4	5	6
4. Most people see me as loving and affectionate.	1	2	3	4	5	6
5. I live life one day at a time and don't really think about thefuture.	1	2	3	4	5	6
6. When I look at the story of my life, I am pleased with howthings have turned out.	1	2	3	4	5	6
7. My decisions are not usually influenced by what everyone elseis doing.	1	2	3	4	5	6
8. The demands of everyday life often get me down.	1	2	3	4	5	6
9. I think it is important to have new experiences that challengehow you think about yourself and the world.	1	2	3	4	5	6
10. Maintaining close relationships has been difficult and frustratingfor me.	1	2	3	4	5	6
11. I have a sense of direction and purpose in life.	1	2	3	4	5	6
12. In general, I feel confident and positive about myself.	1	2	3	4	5	6
13. I tend to worry about what other people think of me.	1	2	3	4	5	6
14. I do not fit very well with the people and the community aroundme.	1	2	3	4	5	6
15. When I think about it, I haven't really improved much as aperson over the years.	1	2	3	4	5	6
16. I often feel lonely because I have few close friends with whomto share my concerns.	1	2	3	4	5	6
17. My daily activities often seem trivial and unimportant to me.	1	2	3	4	5	6
18. I feel like many of the people I know have gotten more out oflife than I have.	1	2	3	4	5	6
19. I tend to be influenced by people with strong opinions.	1	2	3	4	5	6
20. I am quite good at managing the many responsibilities of mydaily life.	1	2	3	4	5	6
21. I have the sense that I have developed a lot as a person overtime.	1	2	3	4	5	6
22. I enjoy personal and mutual conversations with family membersor friends.	1	2	3	4	5	6
23. I don't have a good sense of what it is I'm trying to accomplishin life.	1	2	3	4	5	6
24. I like most aspects of my personality.	1	2	3	4	5	6
25. I have confidence in my opinions, even if they are contrary tothe general consensus.	1	2	3	4	5	6
26. I often feel overwhelmed by my responsibilities	1	2	3	4	5	6
27. I do not enjoy being in new situations that require me to changemy old familiar ways of doing things.	1	2	3	4	5	6

	Strongly disagree					Strongly agree
28. People would describe me as a giving person, willing to shares my time with others.	1	2	3	4	5	6
29. I enjoy making plans for the future and working to make them a reality.	1	2	3	4	5	6
30. In many ways, I feel disappointed about my achievements in life.	1	2	3	4	5	6
31. It's difficult for me to voice my own opinions on controversial matters.	1	2	3	4	5	6
32. I have difficulty arranging my life in a way that is satisfying to me.	1	2	3	4	5	6
33. For me, life has been a continuous process of learning, changing, and growth.	1	2	3	4	5	6
34. I have not experienced many warm and trusting relationships with others.	1	2	3	4	5	6
35. Some people wander aimlessly through life, but I am not one of them	1	2	3	4	5	6
36. My attitude about myself is probably not as positive as most people feel about themselves.	1	2	3	4	5	6
37. I judge myself by what I think is important, not by the values of what others think is important.	1	2	3	4	5	6
38. I have been able to build a home and a lifestyle for myself that is much to my liking.	1	2	3	4	5	6
39. I gave up trying to make big improvements or changes in my life a long time ago.	1	2	3	4	5	6
40. I know that I can trust my friends, and they know they can trust me.	1	2	3	4	5	6
41. I sometimes feel as if I've done all there is to do in life.						
42. When I compare myself to friends and acquaintances, it makes me feel good about who I am.	1	2	3	4	5	6

Scoring Instruction:

1) Recode negative phrased items: # 3, 5, 10, 13,14,15,16,17,18,19, 23, 26, 27, 30,31,32, 34, 36, 39, 41. (i.e., if the scored is 6 in one of these items, the adjusted score is 1; if 5, the adjusted score is 2 and so on…)

2) Add together the final degree of agreement in the 6 dimensions:

   a. **Autonomy:** items 1,7,13,19,25, 31, 37

   b. **Environmental mastery**: items 2,8,14,20,26,32,38

   c. **Personal Growth**: items 3,9,15,21,27,33,39

   d. **Positive Relations**: items: 4,10,16,22,28,34,40

   e. **Purpose in life**: items: 5,11,17,23,29,35,41

   f. **Self-acceptance**: items 6,12,18,24,30,36,42

APPENDIX 6: Rosenberg Self-Esteem Scale

Instructions

Below is a list of statements dealing with your general feelings about yourself. Please indicate how strongly you agree or disagree with each statement.

1. On the whole, I am satisfied with myself.

Strongly Agree ☐ Agree ☐ Disagree ☐ Strongly Disagree ☐

2. At times I think I am no good at all.

Strongly Agree ☐ Agree ☐ Disagree ☐ Strongly Disagree ☐

3. I feel that I have a number of good qualities.

Strongly Agree ☐ Agree ☐ Disagree ☐ Strongly Disagree ☐

4. I am able to do things as well as most other people.

Strongly Agree ☐ Agree ☐ Disagree ☐ Strongly Disagree ☐

5. I feel I do not have much to be proud of.

Strongly Agree ☐ Agree ☐ Disagree ☐ Strongly Disagree ☐

6. I certainly feel useless at times.

Strongly Agree ☐ Agree ☐ Disagree ☐ Strongly Disagree ☐

7. I feel that I'm a person of worth, at least on an equal plane with others.

Strongly Agree ☐ Agree ☐ Disagree ☐ Strongly Disagree ☐

8. I wish I could have more respect for myself.

Strongly Agree ☐ Agree ☐ Disagree ☐ Strongly Disagree ☐

9. All in all, I am inclined to feel that I am a failure.

Strongly Agree ☐ Agree ☐ Disagree ☐ Strongly Disagree ☐

10. I take a positive attitude toward myself.

Strongly Agree ☐ Agree ☐ Disagree ☐ Strongly Disagree ☐

Scoring

Items 2, 5, 6, 8, 9 are reverse scored. Give “Strongly Disagree” 1 point, “Disagree” 2 points, “Agree” 3 points, and “Strongly Agree” 4 points. Sum scores for all ten items. Keep scores on a continuous scale. Higher scores indicate higher self-esteem.

APPENDIX 7: Research Instruments

Please tick on the appropriate box of your choice

Section 1: Demographic Information

1. Gender:
   Male ☐
   Female ☐
2. How old are you?
   Between 13-15 ☐
   Between 16-17. ☐
   Between 18-19 ☐
3. In which grade are you?
   Grade 9 ☐
   Grade 10 ☐
   Grade 11 ☐
   Grade 12 ☐
   Grade 13 ☐

Section 2: Questionnaires

This section contains the questionnaires based on the study's objectives. Please tick on the appropriate box of your choice.

1. How would you rate your overall psychological wellness?
    a. Excellent ☐
    b. Good ☐
    c. Fair ☐
    d. Poor ☐
2. Do you feel comfortable expressing yourself to others?
    a. Not at all ☐
    b. Rarely ☐
    c. Sometimes ☐
    d. Often ☐
    e. Always ☐
3. How confident are you in your ability to achieve your goals?
    a. Not at all ☐
    b. Somewhat ☐
    c. Moderately ☐
    d. Very ☐
    e. Extremely ☐
4. How often do you experience anxiety or worry?
    a. Always ☐
    b. Very often ☐
    c. Often ☐
    d. Occasionally ☐
    e. Rarely ☐
5. How would you rate your overall well-being?
    a. Very poor ☐
    b. Poor ☐
    c. Fair ☐
    d. Good ☐
    e. Excellent ☐
6. How would you rate your overall self esteem
    a. High ☐
    b. Moderate ☐
    c. Low ☐

If you chose high self-esteem in question 6 above, please tick the box of your choice on the table below appropriately

i. Impact of high self-esteem on psychological wellness

Always = 5, frequently = 4, sometimes = 3, rarely = 2, and never = 1.

No.	**Statements**	**Response Choices (Tick appropriately)**				
		1	2	3	4	5
i.	How often do you feel confident in your abilities?					
ii.	How often do you feel good about yourself?					
iii.	How often do you feel that you are worthy of respect from others?					
iv.	How often do you feel that you are capable of achieving your goals?					
v.	How often do you feel that you are able to cope with the stresses and challenges in your life?					

If you chose moderate self-esteem in question 6 above, please tick the box of your choice on table below appropriately

ii. Impact of moderate self-esteem on psychological wellness

Always = 5, frequently = 4, sometimes = 3, rarely = 2, and never = 1.

No.	**Statements**	**Response Choices (Tick appropriately)**				
		1	2	3	4	5
i.	How often do you feel confident in your abilities?					
ii.	How often do you feel good about yourself?					
iii.	How often do you feel that you are worthy of respect from others?					
iv.	How often do you feel that you are capable of achieving your goals?					
v.	How often do you feel that you are able to cope with the stresses and challenges in your life?					

If you chose low self-esteem in question 6 above, please tick the box of your choice on table below appropriately

iii. Impact of low self-esteem on psychological wellness

Always = 5, frequently = 4, sometimes = 3, rarely = 2, and never = 1.

No.	**Statements**	**Response Choices (Tick appropriately)**				
		1	2	3	4	5
i.	How often do you feel confident in your abilities?					
ii.	How often do you feel good about yourself?					
iii.	How often do you feel that you are worthy of respect from others?					
iv.	How often do you feel that you are capable of achieving your goals?					
v.	How often do you feel that you are able to cope with the stresses and challenges in your life?					

Interview Schedule

1. Can you describe how you perceive your own self-esteem?
2. In what ways do you think your self-esteem influences your daily life and interactions with others?
3. Have you noticed any correlation between your self-esteem levels and your overall psychological well-being?
4. Can you recall a specific instance where your self-esteem positively affected your mental health or contributed to your psychological wellness?
5. Conversely, have you experienced a situation where low self-esteem negatively impacted your psychological well-being?
6. How do you believe self-esteem contributes to coping with life stressors or challenges?
7. In your opinion, to what extent does societal or cultural factors influence one's self-esteem and, consequently, their psychological wellness?
8. Are there specific strategies or practices you engage in to boost or maintain a healthy level of self-esteem?
9. How do you think the education system or workplace environment can impact an individual's self-esteem and, subsequently, their psychological wellness?
10. From your perspective, what role does self-reflection play in understanding and improving one's self-esteem and overall psychological wellness?

APPENDIX 8: NACOSTI Research License

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Date of Issue: **06/February/2024**

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See overleaf for conditions

APPENDIX 9: Map of Study Site

Hillcrest is located in Langata Constituency, Nairobi County, Kenya.

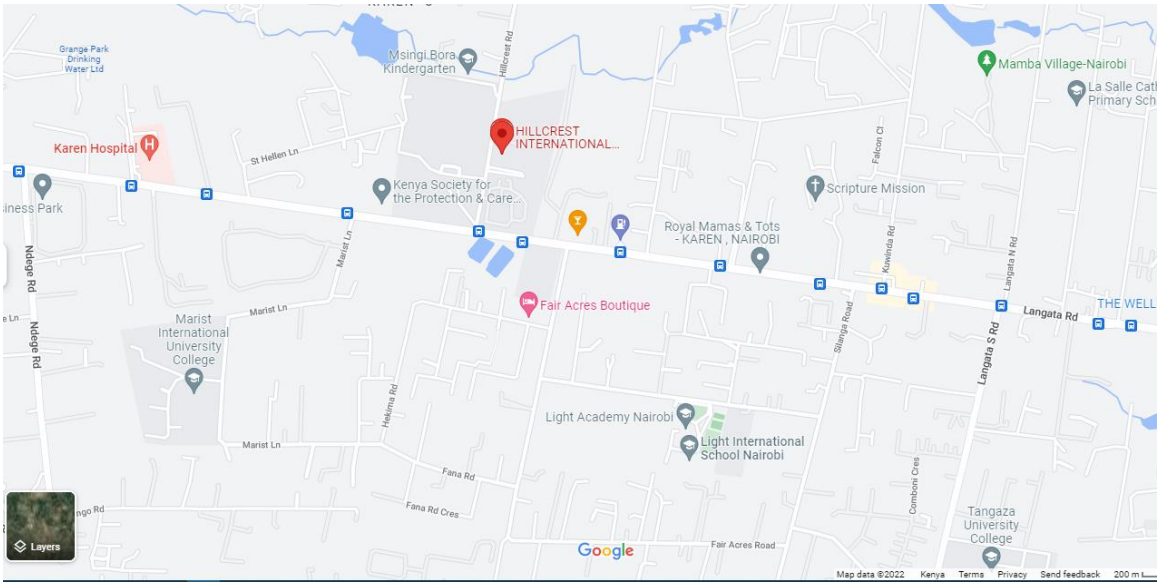

Figure 2 Map of Study Site