

**Report and Literature
review into the role of
self-esteem as a barrier
to learning and as an outcome**

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A social vaccine?

There has been an academic preoccupation with self-esteem among psychological researchers, but it is not only in academic circles that such interest exists.

“This academic preoccupation is substantially matched by interest among the public at large, and not just among those people – doctors, teachers, social workers – who might be expected to show a professional interest in the human psyche. In their everyday lives people routinely treat the notion of self-esteem as an intelligible basis for explaining their own difficulties or other’s failings.” (Emler, 2001)

High self-esteem is seen as desirable. We are supposed to want high self-esteem in the same way that we are supposed to desire good physical health or prosperity. High self-esteem is deemed to be good for individuals who have it but also good for society as a whole. This belief is particularly evident in America. In 1986, the state of California set up a task force with a remit to raise the self-esteem of its entire population. Californian policy-makers have come to see self-esteem as a “*social vaccine*” (Davis 2001). The belief is that high self-esteem can inoculate people, especially young people, against vulnerability to a wide range of social ills. People with high self-esteem are deemed to be less likely to abuse drugs, commit crimes, fail to benefit from education, have unwanted pregnancies, perpetrate acts of racism, child abuse or violence, be dependent upon the state long-term and so the list goes on. The chairman of the Self-Esteem Task Force has stated:

“Virtually every social problem we have can be traced to people’s lack of self-love: alcohol and drug abuse, teenage pregnancy, crime, child abuse, chronic welfare, dependency and poor educational performance.” (Davis 2001)

These claims are not restricted to California or to America, but have also struck a chord in Britain. An educational charity, the Self-Esteem Network, has been established in Britain. Though it has failed to attract huge amounts of state funding, it has nevertheless generated interest in self-esteem building work. White, the British representative on the International Council for Self-Esteem stated in the inaugural bulletin of Self-Esteem Network.

“If a problem is not biological in origin, then it will almost always be traceable to poor self-esteem.” (White 2002)

However, Emler (2001), in an overview of the current research on the impact of self-esteem on social and personal problems, found that young people with very low self-esteem are more likely to:

- show symptoms of depression and be more often unhappy;

- become pregnant as teenagers (females);
- have suicidal thoughts and make suicide attempts;
- experience in their twenties longer periods of unemployment and earn less (males);
- suffer from eating disorders (females);
- be victimised;
- fail to respond to social influence;
- have more difficulty forming and sustaining successful close relationships.

Interestingly, Emler has found that young people with low self-esteem are *not* more likely as a result to:

- commit crimes, including violent crimes;
- use or abuse illegal drugs;
- drink alcohol to excess or smoke;
- as parents, physically or sexually abuse their own children;
- fail academically.

Indeed young people with high self-esteem were found, according to Emler, to:

- hold prejudiced views towards ethnic minorities;
- reject social influences;
- engage in physically risky pursuits. (Emler 2001)

Self-esteem is often linked to social problems, but if public monies are to support the raising of self-esteem as a strategy for promoting social inclusion then greater research is required. The evidence would suggest that the impact of raised self esteem on social trends is not clear cut and assumptions cannot be made.

However the debate on the importance of self-esteem has not been without its critics, most notably Seligman (1995). Seligman writes:

“Is it just coincidence that during the era when Americans made feeling good and boosting self-esteem in children a primary aim, the incidence of depression has skyrocketed and feelings of self-esteem have plummeted?”

These concerns are also echoed by Emler (2001) who concludes:

“Because self-esteem is both desirable for society as a whole and the right of every individual, all practices or circumstances that could conceivably damage a persons self-esteem were to be purged from the curriculum of life (and certainly from the precincts of educational establishments). Any reluctance to pursue this agenda could be attacked with all the self-righteous moral certainty of a lynching party. Thus, as one commentator noted, teachers and others working with young people became increasingly reluctant to voice meaningful relative judgements about those in their care. Announcing winners meant others were losers. Genuine criticism was far too risky. Consequently, standards got dumped down and every ego required a merit just for turning up.”

These views are disputed by those in the Self-Esteem Network and the International Council who believe that the definition of high self-esteem proposed by Emler is actually an over-compensating for intrinsically low self-esteem. Promoters of self-esteem such as Alexander (2001) and the International Council believe that high self-esteem is not defined by an uncritical self-regard that is characterised by arrogance, a sense of superiority and failure to heed social, moral or legal rules or conventions. Consequently Alexander (2001) and the International Council prefer to use the term “healthy” self-esteem rather than ‘high’ self-esteem, which perhaps also reflects the inherent good for individuals, communities and society of positive self-esteem.

The study of self-esteem is not clear-cut. Using levels of self-esteem as an indicator of cause and effect of policies or practice is therefore worthy of greater clarification.

Self –esteem and adult learning

There has been for some time recognition that low self-esteem is a barrier to accessing learning for many adults.

- McGivney (1990) in “Educations for Other People” acknowledged that dispositional barriers to learning are characterised by, among other things, an absence of something such as confidence and self-esteem.
- In 2001 in “Fixing or Changing the Pattern” McGivney again examines the learning divide and writes “ *a key process in the early stages of any widening participation intervention is to raise people’s confidence so that they see themselves not as educational failures as so many have done in the past, but as successful learners. Raising learner confidence is therefore a critical issue in widening participation.*”
- Helena Kennedy (1997) in “Learning Works” notes that “*Education is more than a practical and economic necessity; it is also a means to self-esteem and social cohesion.*”
- Programmes aimed to widen participation offer much evidence, for example an evaluation of the “Prescriptions for Learning” (2001) project in Nottingham found that many of project participants had not previously taken up learning because they had not had the confidence to do it.

Despite the fact that low self-esteem is a barrier to participating in learning, once individuals overcome this barrier participation in learning can lead to an increase in self-esteem.

- In “ The Impact of Learning on Health” (1999) Aldridge and Lavender found that 25% of the respondents found increased self-confidence, greater self-esteem and sharper self-awareness was a major unanticipated benefit from their learning.
- Evaluation of a “Prescriptions for Learning” (2002) project in St Austell, Cornwall also showed that increased confidence was an important outcome for many of the project participants. One woman said, “ *I felt my confidence had been sapped by being at home with the children. I felt I couldn’t do anything, but it has given me so much confidence. I feel totally different.*”

- In the “Impact of the Adult and Community Learning Fund” report completed by the Institute of Employment Studies (2002), levels of self-confidence and self-esteem were the highest reported outcomes of participation for project participants and learners. On a scale of 1 to 5 (1 being very negative and 5 being very positive) levels of confidence and self-esteem were rated at a mean score of 4.6. This was the highest rated outcome along with number completing a learning activity.
- In research conducted for the “The Wider Benefits of Learning Research Centre” 10,000 tutors working in FE colleges were asked about their perceptions of the wider social benefits to learning rather than just getting a qualification. Of the 2,729 responses, 92.5% of them agreed or strongly agreed that “through their learning my students on the whole experience improved self-esteem”. (Preston and Hammond 2001)

If we are to fully understand what role self-esteem has in adult learning then it surely requires further investigation.

This report seeks to define our understanding of the role of self-esteem in widening participation in learning by addressing key questions:

- What do we understand by the concept of self-esteem?
- What work currently exists that has looked at the role of self-esteem in participation in learning either as a barrier or as an outcome?
- How relevant is the notion of self-esteem to adult learning practitioners and policy-makers?
- What else do we need to know?

Approaches to raising the self-esteem of adults

Adult educators tend to believe that many learners develop greater confidence and higher levels of self-esteem as a result of their learning. This has led to a number of approaches to tackling low self-esteem.

Many adult educators offer a range of learning opportunities that they hope meet the learning needs of potential learners and which are offered in a way that aim to attract learners. Raised self-esteem is often an outcome of such courses although not necessarily as a primary learning outcome and they have not been marketed necessarily as self-esteem raising courses. Many of the opportunities provided through the Adult and Community Learning Fund fall into this category.

Another approach is recommended by Lawrence (2000). His handbook is for all tutors working with adult learners whatever the context, but in particular for tutors of basic skills courses. He provides a structured approach to raising learners’ levels of self-esteem. There is, he maintains, a positive relationship between how people value themselves and the level of their academic attainment. In short, those who feel confident tend to achieve more, those who lack confidence tend to achieve less. Development of self-esteem here is portrayed as an essential learning support issue. He believes that the development of high self-esteem is as valuable a goal for

educationalists as the development of intellectual skills. Educationalists should organise teaching and learning situations for the enhancement of self-esteem.

Some adult educators have developed curricula that addresses the specific issue of low self-esteem. Self-esteem raising is recognised as the learning need, a course is marketed as having raised self-esteem as a learning outcome and therefore the hook by which to get people into learning. These courses are structured and delivered to ensure the greatest opportunity for raising self-esteem through, for example, recognition of existing skills. An example of this approach is the WEA “Second Chance To Learn” and the Open University “Build On Your Skills” courses.

There are also community based approaches to building self-esteem. These approaches recognise that to ensure the raising of self-esteem in the community all sections of the community must have good self-esteem. For example, teachers cannot ensure the self-esteem of pupils unless they have good self-esteem themselves. Therefore teachers have self-esteem raising sessions as well as children. This approach is used with parents, healthcare staff, police, patients, young offenders, youth workers and many other groups of people. This approach is used by ISECCA (Improving Self Efficacy, Self Esteem and Confidence of Children and Adults) project in Dorset.

Evidence of the effectiveness of these approaches is largely qualitative and anecdotal. Many learners report feeling more confident and happier as a result of their participation in learning. However, without an agreed definition of self-esteem it is hard to know what they are describing and indeed what the effects of raised self-esteem are. We do not fully understand how it relates to learning. Will it result in more participation in learning, greater participation in the life of the community, improved mental health or improved job prospects? How long will the effects of higher self-esteem last? Without further follow up will self-esteem levels drop again?

If we cannot define self-esteem then we will not be able to identify the causes of low self-esteem and what promotes high self-esteem. If we cannot identify what promotes self-esteem then we cannot begin to develop strategies to improve low self-esteem. If we cannot define self-esteem then we cannot measure any changes in levels of self-esteem and we will not be able to judge the effectiveness of the work that is being done.

Literature review

Although, there has been a great deal written on how to achieve high self-esteem, some key writers have helped us to clarify our understanding on the concept.

James (1890) in his “Principles of Psychology” defined self-esteem as being the sum of our successes divided by our pretensions i.e. what we think we ought to achieve. Self-esteem can be increased by achieving great successes and maintained by avoiding failures. Raised self-esteem could, he argued, also be achieved and maintained by adopting less ambitious goals. Self-esteem was therefore defined as being competence-oriented but also open to change.

Rosenberg (1965) also made an important contribution to defining self-esteem by introducing the concept of “worthiness”. “Worthiness” is whether a person judges himself or herself as good or bad and is therefore an evaluative attitude towards oneself. Forming attitudes about oneself is very complicated because it implies some kind of comparison with others, the forming of value judgements and is rooted in a social or cultural base.

Coopersmith (1967) in “The Antecedents of Self-Esteem” defined self-esteem as “the extent to which the individual believes himself to be capable, significant, successful and worthy”. As such it is a bringing together of James’s definition as self-esteem as competence based and Rosenberg’s definition of self-esteem as an evaluation of oneself. Coopersmith added that self-esteem was important to a person’s identity and awareness and that high and low self-esteem would influence behaviour in positive and negative ways.

Another major figure to define self-esteem was Branden in “The Psychology of Self-Esteem” (1969). His definition is a synthesis of earlier interpretations. Branden notes the two strands to self-esteem as being competence and worthiness but emphasises the relationship between the two strands as being another factor in understanding self-esteem. He states that self-esteem “is the conviction that one is competent to live and worthy of living”. The word ‘conviction’ in the sense that Branden implies it is that self-esteem is a fundamental value that is intrinsic to human beings. He felt self-esteem to be a fundamental human need. The power of this conviction about oneself is more than a judgement or a feeling but, he maintained, it is a motivator that inspires behaviour. He wrote:

“It (self-esteem) is directly affected by how we act. Causation flows in both directions. There is a continuous feedback loop between our actions in the world and our self-esteem. The level of our self-esteem influences how we act, and how we act influences the level of our self-esteem.” (Branden 1994)

These ideas are relevant to our thinking of how self-esteem might act as a barrier to accessing learning, and give some indication as to why returning to learning may boost self-esteem. It also has a relevance to wider social issues as researched by Mruk and Emler discussed later in this report.

Alexander (2001), the founder of the Self-Esteem Network in Britain, views self-esteem as a syndrome, as a set of indicators for mental well-being. The core of self-esteem is an “unconditional appreciation of oneself” meaning an appreciation of both our positive and negative potential in its fullest sense. An acceptance of this enables us to take responsibility for ourselves and become accountable for our actions. It also means that we can be more realistic about our achievements and shortcomings. Alexander also distinguishes between ‘trait’ self-esteem which reflects confidence or ability in a particular area, such as work or sport, and ‘global’ self-esteem which is intrinsic worthiness regardless of what particular abilities or qualities we may have. This may be crucial in our understanding of how low self-esteem affects participation in learning and will be looked at later.

Mruk (1999) provides another definition of self-esteem. He wrote:

“Self-esteem is the lived status of one’s competence in dealing with the challenges of living in a worthy way over time.”

The important point here is that self-esteem is a lived phenomena and it is dynamic, it is therefore on-going and open to change. Mruk sees that there are three elements to self-esteem. Firstly, that there is a connection between competence and worthiness. Secondly, that self-esteem is lived on the both cognitive and affective levels, in that it involves such processes as acquiring values, making comparisons on the basis of them, becoming aware of the results of these comparisons and feeling the impact of these conclusions in a personal and meaningful way. Thirdly, self-esteem is a dynamic phenomenon which can fluctuate more than more stable characteristics like personality and intelligence. (Mruk 1999)

In 1994 Branden wrote “The Six Pillars of Self-Esteem” in which he defined self-esteem as:

1. *“Confidence in our ability to think, confidence in our ability to cope with the basic challenges of life and*
2. *Confidence in our right to be successful and happy, the feeling of being worthy, deserving, entitled to assert our needs and wants, achieve our values and enjoy the fruits of our efforts.”* (Brandon 1994)

Branden states that there are six pillars which form the foundations of self-esteem. They are:

- the practice of living consciously;
- the practice of self-acceptance;
- the practice of self-responsibility;
- the practice of self-assertiveness;
- the practice of living purposefully;
- the practice of personal integrity.

The debate about self-esteem has not been without controversy. Seligman (1995) maintains that, in America, the creation of a “feel-good society” at the expense of the “doing-well society” has caused a great deal of damage. “Doing-well”, he maintains, is often the result of overcoming difficulty, frustration, anxiety and failure and that overcoming these difficulties leads to higher self-esteem. Furthermore he maintained that “failure and feeling bad are the necessary building blocks for ultimate success and feeling good” and the necessary skills for children to acquire to build self-esteem is persistence to overcome the difficult and the frustrating. It should be noted that he was talking about children and not adults, and the context in which he was talking was with regard to achievement in a formal situation where staged and managed challenges are part of the process of learning and acquiring skills. He contended that the important skill to learn was that of being optimistic, a feeling that one can succeed with hard work.

The critics of the self-esteem movement have contended that blind self-regard, heedless of reality, can be very damaging to individuals and society. Evidence of this is given in the international tables for mathematical attainment where American children score poorly, but if asked about their perceived ability in mathematics, they score highly. (Parker 2002)

Barber (1997), in his critique of the British education system argues that:

“Schools ought consciously to promote young people’s confidence and self-esteem.”

However, he does not suggest that this is merely done by praise and encouragement. Indeed he argues that this approach alone can be dangerous when a teacher is seen to praise work that is shoddy, because it lowers expectations. High self-esteem and low expectations create complacency according to Barber. He also states that low self-esteem and high expectations create demoralisation and that low self-esteem and low expectations lead to failure. Success is created by high self-esteem and high expectations. Only by meeting this challenge can young people be educated to reason and think, and to cope with the rapid pace of technological, social and economic change in today’s society. There is a clear resonance between this argument and how we need to link self-esteem and raising attainment in adults. How can adult educators raise expectations in informal learning as well as formal learning opportunities?

In writing about the link between learning and health (Hammond 2002) looks at the role of self-efficacy. Self-efficacy is defined as the extent to which people see themselves as being in control of the forces that affect their lives. Individuals perceptions of their ability to be in control of their lives varies throughout their lives and is affected by their situation. In making the case that self-efficacy promotes health and health behaviour, Hammond states that education generates self-efficacy. She maintains:

“Organised learning offers structure, purpose and a socially acceptable identity. These make a tremendous difference in terms of self-efficacy – and also self-esteem – for some groups, and are re-inforcing for all. Organised learning also sets challenges to each individual on the basis that the challenge will both stretch their capabilities and be met.”

Evidence and research is lacking in how self-esteem is linked to adult participation in learning and to raising attainment of adult learners. If public monies are to go into this area then further research is needed.

What work currently exists that has looked at the role of self-esteem in participation in learning either as a barrier or as an outcome?

A trawl of the literature that looks at the role of self-esteem in relation to adult learning shows that there is a dearth of studies on the subject. Here the differences in the use of language and terminology are most obvious. A wider search using words such as “motivation”, “barriers to learning” and “educational self-concept” produced greater results. Use of the terms self-esteem and confidence are used synonymously. It

would seem that the study of self-esteem has run in parallel with the study of adult participation in learning and there is little evidence they touch at any point. No examples were found of psychologists who had studied the effects of self-esteem on adult participation in learning. It would appear that where adult educationalists have written on self-esteem, it has been seen to be a factor in non-participation in learning and as a component part rather than having causal effect. It seems to be one element in explaining non-participation rather than having a relationship to other elements. It is unclear from the writings how far self-esteem is a factor in enabling individuals to overcome barriers to learning. If we agree with Mruk (1999), then we see that self-esteem is a lived experience and will affect the way an individual's feelings of competence in dealing with the challenges facing themselves must affect if and how they access learning.

Miller (1967) was one of the first adult educators to tackle the area of motivation to learn. His theory builds on Maslow's "Hierarchy of Needs" and Lewin's "Force Field Analysis". Miller's view was that socio-economic status and participation in adult education are related. He contended that the higher one's socio-economic status so basic primary needs are met and therefore higher level needs such as self-actualisation come to the fore. Positive and negative forces also came into play such as peer group pressure and cultural acceptance.

Boshier (1973) and Rubenson (1977) developed a congruence theory of participation. Boshier suggested that participation in learning was more likely to occur if there was some congruence between the learners' views of himself/herself and the nature of the learning and the learning environment. Participation and dropout, he maintained, was dictated by the discrepancy between these two factors. Rubenson developed the notions of "expectancy" and "valence". "Expectancy" is an individual's expectation of success in learning, while "valence" refers to the sum of positive and negative values an individual assigns to learning activities. "Expectancy" and "valence" are determined by a person's previous experiences, social environment and personal needs. With these three theorists there is an emphasis on the personal perception in relation to life situation. With Boshier and Rubenson self-esteem is an important factor in an individual's perception and therefore important in participation.

Cross (1981) takes a composite approach combining personal psychological constructs with social impacts on learning. Cross developed a "Chain of Response" model seeing participation more as a process rather than a result of discrete events. This process starts with self-evaluation, attitudes about education, goals and expectancy of achieving of them but is also affected by life transitions, opportunities and barriers and information as being determinant on the likelihood of participation in learning. Cross acknowledges that internal factors such as self-esteem are important starting points but that external factors like access to information also affect participation.

This theoretical framework presented by Cross signals a move away from the narrow psychological approach and allows for an acknowledgement that learning providers also have a responsibility for ensuring participation. Literature from here takes a harder look at how institutions themselves put up barriers to learning and at how they might take them down.

McGivney (1990) goes further in looking at the reasons for non-participation. Using evidence of surveys of public attitudes and perceptions to learning, McGivney introduces a profile of participation as also being oriented in social class and social role. The inference is that class and position in society for example, age and marital status, have an impact on participation due to cultural expectations and social perceptions.

McGivney writes the “recruitment of non-participant groups require substantial intervention by education providers” and sees this as being specific to the target group, and happening at various stages of recruitment. She acknowledges that dispositional barriers to learning are characterised by an absence of something such as confidence and self-esteem, trust in the system, perspectives on the future, awareness of opportunities and educational preparedness. By highlighting the strategies to widen participation she shows the subtlety of approaches that must be employed to deal with the complexities of non-participation. The acceptance of this viewpoint has contributed to the many changes at a strategic and operational level in adult education in the last decade.

Perhaps because there is often a loss of self-esteem among people with mental health difficulties one would expect to find useful writings on self-esteem as a barrier including how this might be overcome. Though while low self-esteem is acknowledged the theoretical standpoint is predominantly on helping people access learning by removing all the institutional barriers that may inhibit their participation.

Foster (1991) talks about “destruction of self-confidence, poor image” as some of the reasons for setting up the Springboard course with the aim, among others of developing students self-confidence and improving self-image.

Hooper (1996) writes of using volunteer support, small class sizes, timing of classes, discrete provision and taster courses run in hospitals as strategies to ease participation. Hooper also writes about emotional barriers but the strategies he suggests are organisational and about how learning providers might address these emotional needs.

Wertheimer (1997) provides a similar approach but she also looks wider at not just the changes within the organisations that need to take place but also the need for partnership working. Inclusion of non-participants depends not just on changing our own structures but also on developing shared vision on participation in learning with other organisations such as health and social services.

Since many people with mental health difficulties have experienced a great deal of prejudice and stigma within society as a whole, it is understandable that practitioners should see this prejudice towards people with mental health difficulties as existing within their own organisation. Seeking to redress this prejudice and to make institutions as welcoming as possible is therefore very appropriate and focussing on the practical barriers to learning is very important. The strategy is to promote equality of access and opportunity and raised self-esteem is an indirect benefit if it happens. Anecdotal evidence from tutors in adult learning indicates that accessing learning frequently helps to raise self-esteem. How organisational responses to low self-esteem might actually help people to raise their self-esteem needs further investigation. We need to be clear about what helps and what doesn't.

It also raises the question as to how far the responsibility for an individual's global sense of self-esteem rests with a learning provider. Is it within the remit of adult education to help individual's feel good about themselves or merely to assist them in feeling good about themselves as learners?

The research carried out by Crowder and Pupynin (1995) reflects another shift in the thinking about why some people do not participate in learning. From a framework that suggests that it is learning providers who need to change, there is a shift to a framework that suggests that it is non-participants perception of learning that prevents them from participating and that learning providers need to help individual's change these perception.

Maxted (1999) identifies three types of barriers to learning – cultural, structural and personal. He cites lack of motivation as a personal barrier and notes that lack of self-confidence and self-esteem have a causal effect on motivation. He makes an interesting distinction between those who feel they “can't” do something and those who “won't” do something. He writes that those who feel they “can't” face a greater barrier than those who “won't” and that the feeling of “can't” is more prevalent in most groups of non-learners and underachievers which is a clear recognition that low self-esteem and confidence are huge barriers to learning. Drawing on the research of Crowder and Pupynin (1995) he links these feelings of “can't” to negative experiences of previous learning and maintains that such learners will never be motivated to learn while they have such negative perceptions of education. The work of Crowder, Pupynin and Maxted shows an acknowledgement to the importance of low trait self-esteem in accessing learning. Individuals who do not see themselves as likely to be successful in learning, are less likely to access learning without providers input into challenging that low self-esteem.

This is not easy to accomplish as these quotes from learners show:

“I often see adverts in the paper for free computing courses and I always said I would but tomorrow, tomorrow but tomorrow never comes. I've been saying that for 2 years.”

“You need confidence to ask for what you are entitled for.”

The fact that things are free makes it worse, it makes me worry that I won't be able to do it and then I will have wasted other people's money.”

(Learner quotes from participants in the Nottingham Prescriptions for Learning Project. James 2001)

There is evidence of a greater understanding of the internal barriers to learning. In summing up the developments in widening adult participation in learning McGivney (2001) in “Fixing or Changing the Pattern” writes:

“It is understandable that there is greater focus on the practical barriers. It is far easier to cite these reasons for not participating than to admit to feelings of apprehension about education or lack of confidence in ones ability to learn. It is also easier for providers to provide solutions to practical problems than to psychological

or cultural ones. But these are the obstacles that have to be addressed if we want to widen participation among those least likely to take advantage of the learning opportunities available.”

How can our understanding of self-esteem be applied to our understanding of participation in adult learning?

Branden (1994) felt that self-esteem was crucial in the education of children. He wrote:

“The fostering of self-esteem must be integrated into school curricula for at least two reasons. One is to support young people in persevering with their studies, staying off drugs, preventing teenage pregnancy, abstaining from vandalism and gaining the education they need. The other is to help prepare them psychologically for a world in which the mind is everyone’s chief capital asset.”

While Branden makes no reference to adult education his definition of self-esteem is about managing change, accepting responsibility, making choices, making decisions and being active and as such it does have an impact on the purpose of adult participation in learning.

Branden’s ideas, along with the work of other theorists, have been formulated by Alexander into a self-esteem theory where we can begin to see a more obvious link to self-esteem as a necessary component in creating a learning society.

In looking at the work of Alexander (2001) it is perhaps easier to understand how self-esteem may affect an individual’s ability to access learning. It could be argued that an individual with high global self-esteem may still have low trait self-esteem with regard to learning, possibly due to age, culture or preconceptions. However, these individuals may be easier to reach rather than those individuals with low global self-esteem. Recognising the differences and developing appropriate strategies may be the key to addressing the issue of self-esteem as a barrier to learning.

Global self-esteem, according to Alexander, can be separated out into a number of elements or dimensions. These are:

- Unconditional self-acceptance. This means trusting and knowing oneself, having a sense of identity and self-concept. It is defined as a willingness to experience and know everything about yourself, even the things you don’t like.
- Sense of capability or efficacy. This is defined as recognising your unique skills, abilities and personal power. Also trusting your ability to deal with anything that happens. Importantly it also means being willing to do or learn anything you set your mind to.
- Sense of purpose. This means knowing what you want to accomplish and why you are doing it. Living purposefully means having goals and using your ability to achieve them. Goals, according to Alexander, give direction and hope.

- Appropriate assertiveness. This means putting our purpose in to practice and being prepared to stand up for ourselves, and our beliefs.
- Experience of flow and fulfilment. This is defined as experiencing total involvement in life and the sense of personal control, achievement and satisfaction that comes from being utterly absorbed in an activity. It includes being stretched by challenging tasks and goals, and completing tasks undertaken.
- Sense of responsibility and accountability. This means accepting the consequences of our actions. Alexander maintains that accepting responsibility strengthens our intrinsic sense of self-worth.
- Sense of safety and security. This is defined as setting and honouring personal boundaries, and recognising our vulnerabilities and needs. This determines our ability to take risks and make mistakes.
- Sense of belonging. This simply means experiencing ourselves as part of a family, a circle of friends, community and society. It includes intimacy and trust in others.
- Sense of integrity. This means that our behaviour is consistent with our values and beliefs.

Alexander states that low self-esteem can often be traced to an imbalance or lack among these nine elements. He also maintains that these nine elements can be used as a diagnostic aid to identify areas that may be underdeveloped in an individual or organisation. By applying this tool before and after an individual has taken some action or experienced a new situation it might be possible to assess how far an individual has progressed. In short to assess “distance travelled”. It may be possible to use this diagnostic tool to enable an individual to set goals and assess outcomes. With respect to adult learning it is possible to see how these nine elements relates to adult learning.

The following table is an example of how I have tried to see how the nine elements might affect learning.

Alexander's Nine elements of self-esteem	Example of low self-esteem as a barrier to participating in learning	Example of how participation in learning might raise self-esteem	Learners Quotes (from participants in Prescriptions for Learning projects in Nottingham or St Austell. James 2001 and 2002)
Unconditional self-acceptance	Self-concept of 'not being able', of 'being thick' and not able to learn. Feeling of not being wanted or acceptable.	Change in sense of identity and self-concept as a result of achievement in accessing learning and success in learning.	<i>"I was taken out of school at age 12 and I never knew what I was capable of, but this is giving me a chance to find out."</i> – learner showing sense of self-acceptance and capability.
Sense of capability or efficacy	Not having faith in ability to learn or achieve therefore being unwilling to want to try. Not knowing what you are capable of.	Opportunities to prove to yourself that you can learn and achieve. Seeing what you are capable of.	<i>"I felt that my confidence had been sapped by being at home with the children. I felt I couldn't do anything, but it has given me so much confidence. I feel totally different."</i>
Sense of purpose	Not knowing what you want to accomplish or what stops you from taking action.	Gives you a goal, something to aim for, achievement to attain, short-term and long-term.	– learner showing self-acceptance and capability, experience of flow and fulfilment.
Appropriate assertiveness	Without the sense of capability or sense of purpose we cannot assert ourselves to act or fulfil goals.	If we know what we are capable of and what we can achieve then we are more likely to stand up for ourselves.	<i>"I get the chance to get out and I take my baby out more. I, mixing with all kinds of people. The benefits are for everything – for my kids, for a job. I don't want to be a burden on anyone."</i>
Experience of flow and fulfilment	Having nothing to stretch or challenge you means there is no sense of satisfaction.	Opportunities for satisfaction, being absorbed in learning, being challenged and stretched.	– learner showing sense of purpose, responsibility and accountability, sense of belonging and perhaps a sense of

Sense of responsibility and accountability	Taking no action, being inert or disowning the situation as not your fault.	Taking responsibility for action created positive self-regard and changes self-concept.	integrity. <i>“I’m beginning to get some control in my life – it’s nice to have somebody (the learning adviser) to lean on though.”</i> - learner showing sense of capability, sense of purpose, sense of responsibility and accountability and sense of safety and security.
Sense of safety and security	No opportunities to determine strengths or develop new skills, therefore more fearful of risks and changes.	Opportunity to address needs, opportunities to know what you can and cannot do.	
Sense of belonging	Closes off opportunities for participation, social networks and friendships.	Opportunities for friendships, networks, bonds created by learning and achieving with people.	<i>“It keeps me busy. It keeps my mind active.”</i> – learner showing experience of flow and fulfilment.
Sense of integrity	If we believe that most people want to achieve, be capable and competent, be social then not participating undermines sense of integrity.	Gives people the opportunity to act authentically- to be what they want to be and to be who they want to be.	<i>“I have been more cheerful and confident towards people. I can have a conversation with people without stumbling over my words.”</i> - learner showing appropriate assertiveness and sense of belonging

Mruk (1999) defines self-esteem as the lived status of our individual competence at dealing with the challenges of living in a worthy way. Mruk maintains that just as we live our cultural backgrounds, developmental histories or identities both consciously and unconsciously, so self-esteem is also embedded in our perceptions and expressed through our feelings and behaviour. Mruk sees self-esteem as dynamic and changing over time. The history of our successes and failures at handling the challenges of life brings us to a basic understanding of who we are as people which he defines as ‘global self-esteem’. Global self-esteem fluctuates and such things as our history, defence and identity work to keep ourselves stable. However, it is flexible and can change temporarily or longer-term depending on circumstances, for example, personal hardship or depression, he maintains, can have a negative effect on self-esteem levels.

The importance of this definition is that in stressing the dynamic and phenomenological dimension to self-esteem allows for a more empathic approach to thinking about the impact of self-esteem on adult learners. Many studies of the impact

of self-esteem have focussed on young people and educational attainment. Further studies need to be done on self-esteem of adult learners. How far does the experience of unemployment, low income, poor housing, ill-health, poor basic skills etc affect the self-esteem of adults. Wilkinson (1999), in examining the impact of stress on people's lives writes:

“Many of the most important sources of stress in our lives are likely to come from the socio-economic environment and will be exacerbated by relatively low incomes.”

Stress is therefore linked to poverty, fear of debt and lack of options in life.

The question is whether stress affects self-esteem, Branden (1999) defines self-esteem as:

*“1. Confidence in our ability to think, confidence in our ability to cope with the basic challenges of life and;
2. confidence in our right to be successful and happy, the feeling of being worthy, deserving, entitled to assert our needs and wants, achieve our values and enjoy the fruits of our efforts.”*

Similarly Mruk (1999) writes:

“Self-esteem is the lived status of one's competence in dealing with the challenge of living in a worthy way over time.”

Both these definitions show that self-esteem is clearly related to how we perceive ourselves to be dealing with our everyday situations. The point being that the more challenges life throws at you the more our ability “to cope with the basic challenges of life” or “in dealing with the challenges of living” is severely tried and tested. This is perhaps more so if our personal ability to cope is undermined by lack of resources through having little money, little access to services, little access to support and limited mobility”.

So if the socio-economic situation of many individuals causes them stress, the questions remains as to whether this stress also affects an individual's ability to cope. Mruk (1999) writes:

“Stress can certainly tax our sense of worthiness as a person, especially if it comes from a negative source and is prolonged.”

This is relevant to the types of adults we want to attract into learning who may have been living with low incomes, unemployment, ill-health or social isolation for many years.

What needs further investigation are the causal relationships between social deprivation and learning of those we are trying to attract into learning. As one learner who was participating in the Nottingham Prescriptions for Learning project reported, when asked why she had not accessed learning before:

“There is so much in life that gets you down it’s hard to know how to go forward.”

Another learner who had been referred to the Nottingham Prescriptions for Learning project summed up his decision to try and return to learning:

“I think the doctor realised how depressed I am, I came to see him about my bad neck but there wasn’t anything they can do about that. I worked for 31 years, had one injury and now it is all over. I need to do something.”

Bringing down the practical barriers to learning is important, but while non-learners still feel that participation is beyond them barriers will always exist, no matter how flexible and responsive provision is. As was discussed earlier self-esteem as defined by Mruk (1999) is a dynamic phenomena, a result of what happens in our life and how we feel about it. Low self-esteem resulting in poor motivation to learn is therefore likely to have wider causes than perceptions of learning. Poor health, abusive relationships, unemployment, unsatisfying employment, poverty, age, stress are but a few factors that may be part of the everyday experience of some adults that may make accessing learning seem like one step too far.

These issues need greater exploration. We know that initial schooling is an indicator of likely participation in adult learning. We also know that initial schooling is an indicator of economic and social status. We also know that poor experience of initial schooling can lead to poor concept of oneself as learner and perhaps low trait self-esteem as a learner. It is also important to understand how far economic and social deprivation may affect self-esteem. We need to understand how far these factors affect an individual’s global sense of self-esteem or trait self-esteem, or both. Are there compounding factors that are experienced over time? This is particularly relevant to adult learners who may have low trait self-esteem as a result of previous experience of learning and whose socio-economic situation may have an effect on their global sense of self-esteem. This may be particularly relevant to the types of adult learners who have traditionally been excluded or missing from adult education.

Methods for raising self-esteem

Mruk, in studying the dynamic structure of self-esteem, has also devised and tested the effectiveness of self-esteem enhancement techniques. He suggests eight techniques. These are listed below with suggestions as to how they might relate to participation in learning.

1. The importance of being accepting and caring.

How we are treated by others can affect the development of self-esteem. Mruk asserts that practitioners tend to understand that acceptance, care and trust builds rapport and that fundamental attitudes of nurturance that accompany acceptance and caring foster the kind of environment and interaction that are conducive to human growth and development. Being accepting and caring and treating a person with respect and compassion can be enormously therapeutic. However, acceptance

means approving of the individual but not all of his or her behaviours and not taking responsibility for how he or she conducts life.

In relation to participation in learning how learners are welcomed in to the learning environment and how they are treated in the learning situation is crucial. One can see why potential learners experiencing low self-esteem may be deterred right at the start by an off-hand receptionist, insensitively handled enrolment procedures or distant and aloof tutors. Yet many learning providers get it right to the obvious pleasure and relief of learners (James 2002), as these testify.

“They are great, so approachable, nothing is too much trouble.”

“They talk to you like you are an equal.”

2. Providing consistent, positive feedback.

Mruk states that the development of the self depends on the feedback from others and although this is more influential in earlier life, it continues in adulthood through family, friends, employers and so on. Feedback is how self-esteem develops in the first place but also drives the self-fulfilling prophecy that maintains self-esteem over time.

Giving feedback is an essential part of the learning process and an accepted role for tutors. The way this is provided varies from ticks and comments in the margins of written work to positive verbal feedback when a learner demonstrates achievement or positive behaviour or attitude.

3. Generating positive self-feedback.

In addition to others providing us with feedback that affects our identity and esteem, we need to provide it to ourselves. Mruk maintains that part of being human involves being aware of the lived status of our worthiness and competence, both in a given situation and in general. How we ‘self-talk’ about that lived status of worthiness and competence will create a feedback loop. In short, the information from ourselves is internalised and affects our perceptions, behaviour and experience and in turn affects the information we feedback to ourselves.

This is perhaps a more developed and skilled role for the tutors which can be facilitated through encouraging learners to self-assess their work and achievements. Tutors need to be skilled enough to be vigilant against negative self-talk that can jeopardise achievement and success in learning.

4. Using natural self-esteem moments.

Self-esteem levels change spontaneously, particularly in periods of transition. Mruk attempts to identify these situations as they are occurring or about to occur in order to intervene therapeutically and turn them into positive self-esteem moments. Mruk maintains that if individuals can become aware of their self-esteem status, they are more likely to see it as a valuable resource which they wish to manage effectively. Positive self-esteem increases an individual’s feelings of

being able and competent and therefore the likelihood of acting upon that feeling with increased likelihood of success.

If we see returning to learning as a period of transition, then acknowledging the role of self-esteem levels in that transition is crucial. An equivalent in the world of adult learning to this self-enhancement technique might be the courses such as “Build on your Skills” that specifically support individuals to be aware of and manage their self-esteem status while they are participating in a learning environment. A key question would be how this could be managed while learners are taking part in general learning opportunities. The role of guidance, mentoring and ‘hand-holding’ may be the answer.

5. Enhancing self-esteem by assertiveness training.

Knowing that one has certain rights as a human being and knowing how to exercise them can be used to enhance self-esteem. People who have assertiveness skills have more chance of getting their needs met. Standing up for yourself can lessen the impact of factors that damage self-esteem.

Courses in assertiveness are provided by some adult learning providers and sometimes they are targeted at people with low self-esteem. However, it would seem that participation in general learning opportunities can also sometimes enable an individual to be more assertive. As learners (James 2001 and 2002) have said:

“There’s a lot of aggravation at work and instead of rising to the bait I stick up for myself more.”

“I speak to more people and ask more questions.”

Perhaps that indicates that raising one element of self-esteem has a beneficial effect on other elements of self-esteem.

6. Increasing self-esteem through modelling.

Mruk quotes earlier self-esteem writers such as James (1890) and Bandura (1977) who recognised that self-esteem is linked to successes and failures, and that individuals develop a sense of self-efficacy. Self-efficacy is an individual’s sense of how he-or she is likely to do in a given situation based on variables such as past performance. Modelling is based on the idea that people can increase their sense of self-efficacy by learning to be more successful which, in turn, increases self-esteem.

In adult learning does modelling happen when new learners are encouraged to do tasters or bite-sized chunks of learning that ensure early success? Do study skills and learning how to learn also increase self-efficacy?

7. **Increasing problem-solving skills.**

Mruk states that teaching people to solve problems in their life effectively can help people to cope more with the challenges of life and live more competently. This is important because knowing how to solve problems increase the chances of being successful in general and frequent successes are an indication of being more competent which raises self-esteem. Opportunities to take responsibility for their own learning and the challenges of **understanding the subject can help to develop problem-solving skills in learners, and is a particularly successful adult learning approach.**

8. **Using individual and group formats.**

Mruk discusses whether people benefit more from working in group situations to enhance self-esteem or more from individual one-to-one work. One-to-one work is more intensive and thought to be beneficial to people with deeply embedded self-esteem problems but it requires more resources in terms of practitioner expertise, time and money. Group learning is more cost-effective and learners can support each other. It is less intensive and therefore less intimidating for some people but individual needs can sometimes go unmet making it less effective for them.

Both these last points are very relevant to self-esteem and participation in learning. Learning providers have tended to respond by providing group learning situations either through courses specifically set up to raise self-esteem or through adult and community provision. One-to one work does take place through guidance workers, mentors, community outreach workers, and although these people do not have a clinical therapeutic relationship with learners, nevertheless the work they do does seem to raise the self-esteem of learners.

Initial guidance, advice and involvement

There is a crucial stage before people access learning opportunities. If the evidence suggests that adults with low self-esteem are less likely to access learning, then how educators engage with them before we access learning is important. This is the crucial role of outreach workers (McGivney (2000), Hooper (1996), Wertheimer (1997)).

Guidance is also an important stage that some adults go through before they access learning and evidence would suggest that self-esteem has an impact on how adults access guidance, but also can be an outcome from guidance. Participants to the “Prescriptions for Learning” projects in Nottingham and St Austell often reported that they had not accessed guidance services before because they had not felt “brave enough”, “thought I was too old and past it” or “couldn’t see how anybody could help me”. Yet it was striking that every participant in the project stated that time spent with the Learning Adviser boosted their confidence and self-esteem.

A model of guidance shows the stages that a guidance worker helps an individual to go through in order to make a decision or to take action. Egan (2002) explains this model of helping as being in three stages:

Stage 1 – “What’s going on?” This stage gives the individual a chance to tell their whole story and to look at blind spots and motivations.

Stage2 – “What solutions make sense for me?” This stage gives the individual a chance to explore options and think about possibilities, to test commitment and to think about change and transition.

Stage3 – “How do I get what I need or want?” This stage allows the individual to try out possible strategies, to try out options and to plan for action.

Feedback from individuals going through the guidance process in the “Prescriptions for Learning” project seemed to indicate that the process and change that individuals were going through echoes those elements of the model of self-esteem laid out by Alexander (2001).

Stage in Guidance Model	Learner Feedback	Related elements of self-esteem
Stage 1 “What’s going on?”	<i>“It was helpful, but I didn’t realise how helpful until I sat down at home without distractions and thought about all we had talked about. The truth came out; it has helped because I had a clearer view of likes and dislikes. I understood myself more.”</i>	- Unconditional self-acceptance

	<i>“He didn’t push me at all, it felt like I was being helped to make my own decisions.”</i>	<ul style="list-style-type: none"> - Appropriate assertiveness - Sense of safety
	<i>“You learn a lot about yourself when you hear yourself describing yourself to somebody else.”</i>	<ul style="list-style-type: none"> - Unconditional self-acceptance
	<i>“Being listened to. In four years since my accident no one has listened to what I want and what I worry about. I thought I was going mad.”</i>	<ul style="list-style-type: none"> - Unconditional self-acceptance - Sense of safety and security
Stage 2 “What solutions make sense for me?”	<i>“I now realise there are more options than sitting in a chair all day.”</i>	<ul style="list-style-type: none"> - Sense of capability or efficacy - Sense of purpose
	<i>“The personal support, someone to help me through the maze. I’ve done courses before and ended up on the wrong one and dropped out, that made me feel bad. I think I am on the right one now.”</i>	<ul style="list-style-type: none"> - Sense of capability or efficacy - Sense of safety and security
	<i>“I’ve thought about learning for a while but just couldn’t see a way in. This helped me a lot.”</i>	<ul style="list-style-type: none"> - Sense of purpose - Sense of capability or efficacy

Stage 3 “How do I get what I need or want?”	<i>“I want to go in to social work but didn’t know how to go about it. He explained it all clearly and told me he best thing to do first.”</i>	<ul style="list-style-type: none"> - Sense of purpose - Sense of safety and security
	<i>“I was a sod at school and didn’t think I’d be wanted back, but after that I felt I could.”</i>	<ul style="list-style-type: none"> - Unconditional self-acceptance - Sense of purpose - Sense of safety and security
	<i>“A light at the end of the tunnel I could aim for. There was some hope. I’ve been suicidal, thinking I’m going nowhere.”</i>	<ul style="list-style-type: none"> - Unconditional self-acceptance - Sense of purpose - Sense of safety and security
	<i>“It’s more the fact that I’m doing something to change my situation rather than the actual learning that makes me feel better. Being active, making decisions, rather than being passive.”</i>	<ul style="list-style-type: none"> - Sense of purpose - Appropriate assertiveness - Sense of responsibility and accountability

If we look back at the work of Mruk (1999) it is possible to see a similarity in the self-esteem enhancement techniques he outlines and in the skills of guidance workers and outreach workers. Mruk talks of being accepting and caring, providing positive feedback and increasing problem-solving skills for example. Egan writes of empathic listening, responding appropriately, challenging mindsets and problem –solving by “helping clients to talk about the past to make sense of the present”. Learners value being listened to and the interest and the care that is shown to them, as these statements testify:

“It’s good to have somebody who believes in you and seems to care whether you can do it.”

“Made me think about things more.”

“Most professionals just don’t have time these days. The fact that he took time was so uplifting and I felt reassured. So much in the system puts you down but he said I could do it. It just felt really good.”

Just as there seems to be a need to further explore the link between self-esteem and participation in learning, so the link between self-esteem and one-to one work with non-participants could benefit from further research. If we are serious about engaging with hard-to-reach learners then intensive and targeted work may be more effective in helping those individuals overcome internal barriers such as low self-esteem. This approach is more expensive but unless sufficient funding for this labour intensive area of work is made available, then hard to reach learners of whom those with low self-esteem are the hardest to reach will continue to be excluded. This might be a far greater cost to society than it would be to include them.

The inter-generational effects of levels of self-esteem

Understanding how experience and situation relates to self-esteem and participation in learning also has an inter-generational aspect. According to Alexander (2001) children spend 85% of their time with parents or carers. If children spend time with parents who do not have the self-esteem to make the most of opportunities around them and are socially excluded, one has to ask what impact this will have on the self-esteem of children in their formative years. As Mruk (1999) writes:

“Parents who face life’s challenge honestly and openly and who attempt to cope with difficulties instead of avoiding them thereby exposing their children to a pro-self-esteem problem-solving strategy very early.”

Children imitate those who are closest and most important to them. By implication, any understanding of self-esteem cannot be defined by the effects on the individuals but on wider effects that self-esteem has on families and communities. Furthermore, unless we pay attention to the self-esteem of adults it may undermine all the efforts that are being put into building up the self-esteem of children and young adults.

Summary and Recommendations

This report has looked at the body of evidence that links self-esteem and adult learning. It has also tried to identify whether a definition of self-esteem exists that relates to adult learning and whether this could assist adult educators in their work.

There is considerable interest in self-esteem (Emler 2001, White 2002). There is also a clear recognition that self-esteem is a barrier to learning (McGivney 1990, McGivney 2001, James 2001). There is also a belief that self-esteem can be an outcome of participation in learning (Aldridge and Lavender 1999, James 2002, Tyers and Aston 2002, Preston and Hammond 2002).

However, what is lacking is a clear definition of what we mean by self-esteem, particularly with regard to adult learning. Practitioners in further education strongly believed that learners gain self-esteem from learning (Preston and Hammond 2002). However, adult learners rarely, if ever, use the phrase ‘self-esteem’ when talking about what prevents them from accessing learning. Instead they use words such as

“stressed out”, “people think they can’t do things”, “too much in the system puts you down”, “thought they would think I was thick” (James 2001, James 2002). Similarly they rarely, if ever, talk about self-esteem as an outcome of learning, instead they use phrases like “confidence”, “more cheerful”, “making decisions”, “understanding myself more” and “acceptance” to describe what they gain from learning (James 2001, James 2002). However, when a definition and framework of self-esteem such as that of Alexander (2001) is used, it begins to become clear how what learners say might fit in to such a framework.

This report has found that there has been little in-depth research and study into how self-esteem in adults affects participation in learning. What difference does low global self-esteem make to participation in learning as opposed to low trait self-esteem? Does low trait self-esteem affect choice of learning opportunity? Does low global self-esteem affect choice of learning and would it affect likelihood of remaining in learning?

Such research would help to facilitate the development of a definition of self-esteem that relates to self-esteem and participation in learning so that we are much clearer in what we mean by the term.

If a clear definition of low self-esteem and adult participation in learning was developed it might enable a more efficient and effective use of strategies to enable adults with low self-esteem to participate in learning and possibly gain more from it. We might then be able to develop a ‘toolkit’ of effective strategies. A definition would also help us to identify the skills and attitudes required of practitioners to build self-esteem.

A definition of self-esteem and adult learning could lead to a framework that might provide a diagnostic tool for assessing levels of self-esteem and therefore measuring whether an individual’s levels of self-esteem are raised as a result of participation in learning.

Lastly, if as we suspect that participation in learning results in self-esteem it would be beneficial to understand more about that effect. For example, how long do raised levels of self-esteem through participation in learning last? What are the benefits of raised self-esteem? Does raised self-esteem result in more learning, more social participation, improved health, improved relationships and other personal and social benefits?

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