# Self Esteem in Moroccan Women

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| Abstract | Original Research Article |
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*Aim*: This cross-sectional study aimed to explore the level of self-esteem in Moroccan women, identify factors influencing self-esteem, and examine the developmental trajectory of self-esteem across different age groups. *Material and Methods*: A questionnaire was administered to 394 Moroccan women, utilizing the Rosenberg self-esteem scale and socio-demographic questions. Participants were recruited online through social media platforms. Data were analyzed using descriptive and inferential statistics. *Results*: The study found that self-esteem levels varied across age groups, with peaks in adolescence, around the age of 40-50, and at age 70. Most participants were from urban areas and had high educational levels, yet self-esteem levels were generally low. Factors such as the loss of a loved one during childhood and a history of cardiovascular disorders were significantly associated with lower self-esteem. Income, family situations, and traumatic childhood experiences also played a role in self-esteem levels. *Discussion*: The study's findings suggest that self-esteem development in Moroccan women follows a unique trajectory, influenced by cultural, social, and individual factors. The observed peaks and drops in self-esteem at different life stages provide insights into the complexity of self-esteem development. Additionally, factors like income, health issues, and childhood experiences can impact self-esteem. These results emphasize the need for culturally sensitive interventions to promote self-esteem and mental well-being in Moroccan women.
**Keywords:** Self-Esteem, Moroccan Women, Mental Health.

## INTRODUCTION

Self-esteem, characterized as an individual's positive or negative assessment of their overall self-worth, stands as a pivotal construct that pervades the daily lives of all individuals. It serves as a fundamental human trait intertwined with self-awareness, emotions, cognitive processes, behavior, lifestyle choices, general health, and socio-economic variables. Furthermore, it stands out as one of the most prominent indicators of mental well- being. Maintaining sound mental health hinges, in part, on possessing a positive self-perception to some degree.

Throughout an individual's life, self-esteem undergoes dynamic changes, exerting a profound impact on one's holistic well-being and self-efficacy. Moreover, it exhibits variations in accordance with age, gender, and cultural influences. Yet, the majority of extant research has been confined to the realms of developed and affluent nations, thereby hindering its applicability on a global scale.

While a limited number of investigations have delved into self-esteem across the entire lifespan, a plethora of studies have traced its developmental trajectory during specific life stages, with particular emphasis on late adolescence and early adulthood.

Traditionally, it has been posited that, on average, women tend to manifest lower self-esteem levels than men. Recent empirical evidence, however, challenges this assumption by revealing that although it generally holds true, the gender-based disparity in self-esteem is most pronounced in developed, affluent societies. In contrast, emerging data suggest that women in developing nations often exhibit higher confidence levels compared to their male counterparts [1].

Cultural background, undeniably, exerts a formidable and pervasive influence on an individual's environment. It shapes the expression, sources, and conceivably the development of self-esteem. In light of these considerations, we have undertaken an examination of self-esteem in Moroccan women,

recognizing Morocco's status as a developing country, marked by its distinctive cultural nuances.

# MATERIELS ET METHODES

This is a descriptive cross-sectional study aimed at exploring the level of self-esteem in Moroccan women using a questionnaire consisting of two parts: the first part is the Rosenberg scale, and the second part is dedicated to identifying the presence of certain factors that may influence self-esteem.

Opportunity sampling was employed to conduct this research. It was chosen to provide equal opportunities for individuals to participate in the study. The research sample comprised females aged eighteen and above. Consequently, no females under the age of eighteen were included in the study. All participants volunteered and were recruited online through various social media platforms.

An overarching questionnaire was created by the research team to collect the necessary data for this study while preserving anonymity. Initially, the questionnaire was developed using Microsoft Word and subsequently transferred to Google Forms within Google Drive. Once this was completed, the comprehensive questionnaire was ready to be shared with prospective participants.

The online questionnaire was constructed using Google Forms and included an information sheet that provided participants with all the necessary details about the study before they decided to participate. Following this, a consent form was presented to participants for their agreement to take part in the study. The entire questionnaire was then submitted to the supervisor for review, ensuring the absence of errors and verifying that no crucial details were omitted. Ethical considerations were carefully examined by the supervisor. Once these steps were successfully completed, the questionnaire was made available for participants to fill out.

The questionnaire consists of two parts: the first part incorporates the Rosenberg self-esteem scale (Rosenberg, 1965), which was employed to investigate how participants perceive themselves in terms of self-worth and its correlation with self-esteem. This section comprises ten statements that participants had to rate using the options: Strongly Agree, Agree, Disagree, and Strongly Disagree. It employed a four-point Likert scale, where 4 indicates 'strongly agree' and 1 indicates 'strongly disagree.' Reverse scoring was applied to items phrased negatively, meaning that 1 represents 'strongly agree' and 4 represents 'strongly disagree.' The second part of the questionnaire delved into socio-demographic factors such as family situation, living conditions, academic degree, income, specific health conditions, and traumatic childhood experiences that may influence self-esteem.

The questionnaire was shared online across various social media platforms, including Facebook, Instagram, and WhatsApp, via a link. The accompanying post with the link provided a brief summary of the questionnaire's requirements, specifying that participants needed to be female and above the age of eighteen to participate. Interested participants could click the link to access and complete the questionnaire.

Upon the submission of all questionnaires by participants, the collected information was uploaded to Google Documents, secured with a password, and accessible exclusively to the researcher. Data collection was conducted within a one-month timeframe.

# RESULTS

This study included 394 participants that were all women, most of them were middle-aged and single, living in urban areas, that formed a diverse group and included numerous professions and geographic areas. Many of them were involved in the human service field.

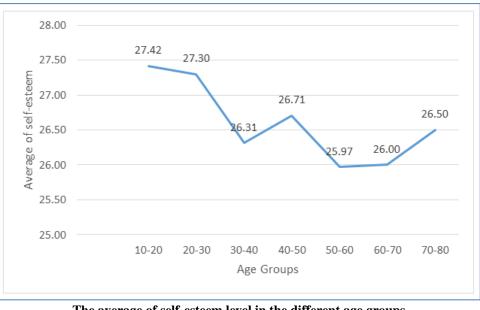### *Descriptive Statistics*
### Sociodemographic Characteristics

A total of 394 participants, all of whom were women, took part in this study. Most of them were middle-aged and single, living in urban areas, forming a diverse group that included numerous professions and geographic areas. Many of them were involved in the human service field.

The average age of the participants was 29 years old, with an age range between eighteen and forty. The majority of them were single (51.6%), and 43.3% were married.

We observed variations in self-esteem across different age groups. The average self-esteem level in this study ranged from low to very low, with three distinct peaks. The first peak was observed during adolescence, the second occurred between the ages of forty and fifty, followed by a decline in self-esteem with advancing age. Another peak was noted at the age of 70.

The majority of the participants resided in urban areas (95.9%) and had a high level of education. About 67.1% of the participants held a university degree. However, despite their high educational background, self-esteem levels were predominantly low. Specifically, 34.7% of them had low self-esteem, and 7.6% had very low self-esteem.

The average income of the women who participated in our study was 6,736 MAD per month (equivalent to 614 Dollars per month). Surprisingly, only 6.8% of them reported having high self-esteem, while a mere 1.7% reported having very high self-

esteem. Regarding family, most of our participants had siblings, with an average of three siblings per participant. Among the participants with siblings, 62.18% had low self-esteem. Furthermore, 59.4% of women in our study with low self-esteem reported experiencing a traumatic incident in their childhood, while 17% experienced favoritism, and 11.16% had lost a loved one. A small percentage (4%) of our participants were divorced, 12.9% reported experiencing verbal abuse, and 8.8% reported experiencing physical abuse. All of these participants had low self-esteem. Additionally, 21.5% expressed doubts about their own capacities, and 2.53% reported cardiovascular issues, all of whom had low self-esteem as well.



**The average of self-esteem level in the different age groups**
**(According to Rosenberg scale)**

*Analytics Statistics:*

The comparison between the four groups defined by Rosenberg scale ( very low self-esteem, low self-esteem, high self-esteem and a very high self-esteem), using Chi-square test or Fisher's exact test, showed that the existence of a significative statiscal difference with a $P<0.05$ for cardiovascular disorder's history and the loss of a loved one during childhood.

| Frequency Factors | Total=394 | Very low self-esteem | Low self-esteem | Hight self-esteem | Very hight self-esteem | P |
|---|---|---|---|---|---|---|
| Academic level : | | | | | | 0.715 |
| ->Bac+5 : | 185 | 30 | 137 | 15 | 3 | |
| -Bac+5 | 80 | 16 | 52 | 8 | 4 | |
| -Bac+3 | 53 | 10 | 35 | 7 | 1 | |
| -Bac+2 | 52 | 14 | 30 | 6 | 2 | |
| -Senior year | 15 | 3 | 9 | 3 | 0 | |
| -Middle school | 9 | 2 | 6 | 0 | 1 | |
| -Primary school | 1 | 0 | 1 | 0 | 0 | |
| Only child : | | | | | | 0.359 |
| -Yes | 31 | 3 | 25 | 3 | 0 | |
| -No | 364 | 75 | 245 | 36 | 11 | |
| Monthly income : | | | | | | 0.617 |
| - < 2800 DH | 60 | 14 | 40 | 3 | 3 | |
| - Between 2088 DH and 6736 DH | 76 | 15 | 51 | 9 | 1 | |
| - > 6736 DH | 259 | 46 | 179 | 27 | 7 | |
| Traumatised childhood | | | | | | 0.856 |
| -Yes | 341 | 65 | 234 | 33 | 9 | |
| -No | 53 | 10 | 35 | 6 | 2 | |
| Favourisme | | | | | | 0.156 |
| -Yes | 106 | 19 | 67 | 16 | 4 | |
| -No | 289 | 56 | 203 | 23 | 7 | |

| Frequency Factors | Total=394 | Very low self-esteem | Low self-esteem | Hight self-esteem | Very hight self-esteem | P |
|---|---|---|---|---|---|---|
| Loss of a loved one<br>-Yes<br>-No | <br>53<br>342 | <br>5<br>70 | <br>44<br>226 | <br>2<br>37 | <br>2<br>9 | 0.046 |
| Divorce:<br>-Yes<br>-No | <br>18<br>377 | <br>1<br>74 | <br>16<br>254 | <br>1<br>38 | <br>0<br>11 | 0.396 |
| Verbal abuse:<br>-Yes<br>-No | <br>82<br>313 | <br>15<br>60 | <br>51<br>219 | <br>12<br>27 | <br>4<br>7 | 0.179 |
| Physical abuse<br>-Yes<br>-NO | <br>49<br>346 | <br>7<br>68 | <br>35<br>235 | <br>5<br>34 | <br>2<br>9 | 0.784 |
| Doubts in own capacities<br>-Yes<br>-No | <br>127<br>268 | <br>23<br>52 | <br>85<br>185 | <br>13<br>26 | <br>6<br>5 | 0.458 |
| Cardiovascular disorder<br>-Yes<br>-No | <br>17<br>378 | <br>1<br>74 | <br>10<br>260 | <br>6<br>33 | <br>0<br>11 | 0.014 |

**Frequency of the level of self-esteem according to each factor**

# DISCUSSION

In this study, our primary objective was to assess the level of self-esteem among Moroccan women and gain insights into the developmental trajectory of self-esteem, along with its influential determinants.

The exploration of the developmental trajectory of self-esteem across the lifespan holds considerable significance for multiple reasons. Firstly, it is paramount to unveil the impact of fundamental demographic variables on self-esteem, with age being one of the extensively examined demographic parameters.

Secondly, a comprehensive examination of the developmental patterns throughout an individual's lifetime contributes significantly to comprehending how self-esteem evolves, remains stable, or undergoes transformations in response to alterations in one's inherent capacities and the surrounding milieu. A longstanding debate centers around the influence of age on self-esteem. A substantial body of literature suggests a robust correlation between age and self-esteem, with adolescence being a particularly pertinent phase in this context.

Some studies conducted in the United States have indicated that self-esteem attains its zenith during one's 50s or 60s, followed by a marked decline in advanced age [2, 3]. This distinctive pattern necessitates elucidating the precise age at which self-esteem peaks over a lifetime.

This decline is posited to be primarily driven by two key factors [2]. The first factor is the loss of elements that significantly contribute to one's self-appraisal, including the erosion of socioeconomic roles upon retirement, the loss of close relationships (e.g., spouse or romantic partner), and a diminishing of one's physical and cognitive capabilities. The second factor pertains to shifts in self-perception. Older individuals tend to embrace their limitations and imperfections, leading to a more modest, humble, and balanced outlook on themselves [2].

Furthermore, additional studies, such as those conducted by Orth and Robins [4], Robins and Trzensniewski [5], and Robins *et al.,* [6], have meticulously investigated age-related variances in self-esteem within a diverse population spanning from 9 to 90 years of age in the United States. These studies have illuminated that self- esteem tends to be high during childhood, diminishes during adolescence, and subsequently experiences an upswing during adulthood. It reaches its zenith around the mid-60s but subsequently exhibits a decline. Moreover, Orth *et al.,* [7], delved into the developmental trajectory of self-esteem, encompassing young adults aged 25 to elderly individuals aged 104, by scrutinizing longitudinal data from the U.S. They uncovered that self-esteem shows an upward trajectory from young adulthood through middle age but experiences a downturn around the age of 60. Additionally, Orth *et al.,* [8], explored the life-span development of self-esteem, spanning from adolescents aged 16 to the elderly aged 97, by analyzing longitudinal data from the U.S. Their findings suggested that self-esteem ascends from adolescence through middle adulthood, culminating at approximately age 50 before declining in old age.

Notably, a study conducted in Japan scrutinized age disparities in self-esteem, encompassing elementary school students aged 10 through individuals in their 60s, by evaluating cross-sectional data from a large, representative, and diverse sample in Japan [9].

This study revealed that self-esteem levels were notably elevated among elementary school students, experienced a decline during middle and high school years, and then displayed a gradual resurgence among adults. This trend aligned with patterns observed in European American cultures [10, 11].

However, it is essential to acknowledge that the bulk of research in this domain has predominantly emanated from the Western world. This raises pertinent questions regarding whether the observed negative correlation between adolescence and self-esteem is intrinsically linked to adolescence as a developmental phase, as conventionally assumed, or whether it may be influenced by Western youth culture. Consequently, it is imperative to recognize that many academic suppositions may not necessarily hold true in the developing world, where research has been considerably scarcer [12].

In the context of our study, conducted in Morocco, we observed two distinct peaks in self-esteem levels. The first peak emerged during adolescence, followed by a secondary peak between the ages of forty and fifty. Subsequently, self-esteem levels exhibited a declining trend with advancing age, experiencing yet another upswing at the age of 70. Moreover, our study brought to light the association between the loss of a loved one during childhood and lower self-esteem levels among women.

The study conducted by Pickles & Rutter (1991) corroborates the idea that individuals undergo developmental turning points during various life stages, potentially modifying or redirecting life trajectories through alterations in behavior, emotions, cognition, or environmental factors [13]. When these age-specific turning points are universally applicable, they contribute to the observed cross-cultural similarities in age-related variations in self- esteem.

For instance, during early and middle adulthood, individuals across diverse cultures increasingly immerse themselves in instrumental and social roles, such as professionals, spouses, parents, or political party members. Successfully mastering these novel roles, coupled with the socio-emotional feedback linked to these roles, can impart a sense of self-worth and lead to an augmentation of self-esteem [14]. The extant literature on self-esteem suggests the existence of various contributory factors to the lower self-esteem levels observed in women [15].

Income, for instance, may wield a substantial influence on the development of self-esteem. It can shape an individual's perception of their relational value and subsequently impact their self-esteem [16]. Currently, there is a paucity of systematic studies exploring the relationship between income and self-esteem. A study by McMullin and Cairney (2004),

which employed cross-sectional data from a large sample, revealed that income exerted significant effects during midlife and old age but did not exhibit significant associations in adolescence and young adulthood. Additional evidence emerges from research on the correlation between self-esteem and socioeconomic status (SES), of which income is a key indicator. A meta-analysis underscored that SES accounts for small yet significant variances in self-esteem during young adulthood [17].

It is noteworthy that the average income of the women who participated in our study stood at 6,736 MAD per month or 615 dollars per month, it is striking that only 6.8% of participants reported having high self-esteem, with merely 1.7% indicating very high self-esteem.

Furthermore, our study illuminated the role of health-related issues, whether experienced during childhood or adulthood, in contributing to lower self-esteem levels. Previous research has hinted at an association between self-esteem and improved physical health [18]. Notably, only one longitudinal study has examined whether health predicts self-esteem, with Reitzes and Mutran (2006) identifying a reciprocal prospective relationship between health and self-esteem. It is plausible that individuals with high self-esteem experience greater social inclusion, receive heightened social support, and encounter reduced stress, thereby bolstering their overall health. However, it is equally plausible that healthy individuals exercise greater control over their lives and demonstrate greater success in education, career, and relationships, thereby reinforcing their self-esteem.

Our study unveiled that 2.5% of women who participated in the study simultaneously reported cardiovascular issues and low self-esteem. Furthermore, it is pertinent to underscore that low self-esteem appears to exert a detrimental impact on women's mental health. Dickerson (2004) discerned that contemporary women confront significant pressures to align with specific life expectations, encompassing successful careers, fulfilling personal lives, and financial stability [15].

## LIMITATIONS
While the results of this study and subsequent informal observations are intriguing, it is imperative to acknowledge the study's limitations. The sample size of 394 women, while substantial, cannot be indiscriminately generalized to encompass the entirety of Morocco's population.

Furthermore, the age distribution among the participants ranged from 20 to 40 years; however, the distribution across these age groups was uneven.

The utilization of self-report scales may have introduced limitations to this study. Self-report

questionnaires do not consistently guarantee precise results, as participants may misinterpret questions or inadvertently select incorrect response options, potentially impacting the accuracy of the recorded results.

**MAJOR STRENGTHS**

One of the principal strengths of this study resides in its robust sample size, with 394 participants actively engaging in the research. This significant participation facilitated a broad representation of results across a diverse demographic spectrum. The inclusion of a wide age range, spanning from 12 to 71 years, was instrumental in the comprehensive testing of our hypotheses, particularly those related to age-related variations.

The format of an online questionnaire conferred a degree of flexibility upon participants, allowing them to complete it at their convenience, in the privacy of their choosing. This approach obviated the need for face-to- face interactions with researchers, promoting greater participant comfort and honesty. Ethical considerations were diligently upheld throughout the study, ensuring a stress-free environment for participants. Moreover, the participants voluntarily and autonomously chose to partake in the study, further enhancing the credibility and authenticity of the results.

# CONCLUSION

In conclusion, this research has substantially contributed to our comprehension of self-esteem among Moroccan women and has shed light on the determinants influencing it. Our study disclosed that self-esteem levels among Moroccan women predominantly ranged from low to very low. This diminished self-esteem was associated with various influential factors, including the experience of losing a loved one among some participants. Additionally, a notable proportion of women with low self-esteem reported concurrent cardiovascular issues.

This research underscores the multifaceted nature of self-esteem, revealing its intricate interplay with age, health, income, and past experiences. By elucidating the complex web of factors that impact self-esteem, this study advances our understanding of the psychological well-being of Moroccan women.

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