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<th><strong>Outcome Measure</strong></th>
<th><strong>Rosenberg Self-Esteem Scale (RSES)</strong></th>
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**Description**

The Rosenberg Self-Esteem Scale (RSES: Rosenberg, 1965) is the most widely used measure of self-esteem for research purposes but it is NOT a diagnostic aid for any psychological issues of states. The scale has been used in more than one hundred research projects.

It is a 10-item Likert scale with items answered on a four point scale - from strongly agree (4) to strongly disagree (1). Total scores range from 10 to 40, with higher scores representing lower self-esteem.

The scale measures state self-esteem by asking the respondents to reflect on their current feelings. Five of the items have positively worded statements and five have negatively worded ones.

The RSES is widely used and has been used with acquired brain injury populations. The scale has been translated into several different languages and used in cross-cultural studies involving 53 different countries.

**Properties**

**ADMINISTRATION**

The RSES consists of ten statements that a respondent could possibly apply to him / herself that s/he must rate on how much s/he agree with each. The items should be answered quickly without over-thinking, respondent’s first inclination is what s/he should put down.

**SCORING:**

To score the items, assign a value to each of the 10 items as follows:

1) For items 1, 2, 4, 6, 7: Strongly Agree = 3, Agree = 2, Disagree = 1, and Strongly Disagree = 0.

2) For items 3, 5, 8, 9, 10 (which are reversed in valence, and noted with the asterisks** below): Strongly Agree = 0, Agree = 1, Disagree = 2, and Strongly Disagree = 3.

The scale ranges from 0 - 30, with 30 indicating the highest score possible.

Other scoring options are possible. For example, one can assign values 1-4 rather than 0-3; then scores will range from 10-40. Some researchers use
5- or 7-point Likert scales, and again, scale ranges would vary based on the addition of "middle" categories of agreement.

**PSYCHOMETRIC PROPERTIES**

The original sample for which the scale was developed in the 1960s consisted of 5,024 high school juniors and seniors from 10 randomly selected schools in New York State and was scored as a Guttman scale.

The scale generally has high reliability: test-retest correlations are typically in the range of .82 to .88, and Cronbach’s alpha for various samples are in the range of .77 to .88 (see Blascovich and Tomaka, 1993 and Rosenberg, 1986 for further detail).

Studies have demonstrated both a unidimensional and a two-factor (self-confidence and self-deprecation) structure to the scale. To obtain norms for a sample similar to your own, you must search the academic literature to find research using similar samples.

**Factor Analysis**

The RSES was investigated using item response theory. Factor analysis identified a single common factor, contrary to some previous studies that extracted separate Self-Confidence and Self-Depreciation factors. A unidimensional model for graded item responses was fit to the data. A model that constrained the 10 items to equal discrimination was contrasted with a model allowing the discrimination to be estimated freely. The test of significance indicated that the unconstrained model better fit the data—that is, the 10 items of the RSES are not equally discriminating and are differentially related to self-esteem.

**Reliability and Validity**

The RSES presented high ratings in reliability areas; internal consistency was 0.77, minimum Coefficient of Reproducibility was at least 0.90 (M. Rosenberg, 1965, and personal communication, April 22, 1987).

A varied selection of independent studies each using such samples as – parents, men over 60, high school students, and civil servants – showed alpha coefficients ranging from 0.72 to 0.87 (all fairly high).

Test-retest reliability for the 2-week interval was calculated at 0.85, the 7-month interval was calculated at 0.63 (Silber & Tippett, 1965, Shorkey & Whiteman, 1978).

The RES is closely connected with the Coopersmith Self-Esteem Inventory.

**Test-retest reliability:**

Ratings of self-esteem were highly correlated over a two week period in an acquired brain injury (ABI) sample ($r=.86, p<.01$) (Cooper-Evans, Alderman, Knight, & Oddy, 2008).
**Internal consistency:**
High internal consistency (Cronbach’s alpha=.89) has been reported in a TBI population (Carroll & Coetzer, 2011).

**Convergent validity:**
RSES scores correlated with depression ($r=.65$) and anxiety ($r=.71$) in an ABI population (Cooper-Evans et al., 2008). Significant negative correlation with positive view of self, measured using the Head Injury Semantic Differential Scale-III, ($r=-.365$) has been reported (Carroll & Coetzer, 2011).

| Advantages | 1) In the public domain;  
2) Quick to administer;  
3) Widely used, including within brain injury populations. |
|---|---|
| Disadvantages | 1) Does not change in response to intervention;  
2) NOT a diagnostic aid for any psychological issues of states;  
3) Since the concept of self-esteem is one most people familiar with, the RSES will probably not tell the respondents anything they do not already know. |
| Other details | This is a global measure of self-concept. |
| Reviewers | Tamara Ownsworth (Adult)  
Vicki Anderson & Cathy Catroppa (Paediatrics) |
References

References with further characteristics or discussion of the scale and its derivatives:


Related References:


Dissertations and Journals:
