



WORKBOOK

Strengthen your self-esteem

*15 notes on where the image
you have of yourself comes from*



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ZEN BOOKS



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15 notes on where the image you have of yourself comes from

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Before you start

This is a short workbook, not a treatise. I have written it so that you can read it in one afternoon and start using something that same evening.

A word about how it is written. When something has research behind it, I say so and give the source at the end so that you can go and check it. When it is a reasonable practice without trials to back it up, I say that too. You will find both kinds here, and it seems more useful to me to present them separately than to sell you everything with the same enthusiasm.

And one more warning, the important one. Low self-esteem goes hand in hand with many conditions that workbook exercises do not fix. If what you notice is persistent, if it has lasted months, if it is stopping you from working, sleeping or relating to people, this is no substitute for a professional. At the end of the text there is a page devoted to that boundary.

HOW TO USE THIS WORKBOOK

1. Read it whole. It takes one afternoon.
2. Choose two tools from chapter two. Just two, and ones you actually feel like trying.
3. Keep them up for four weeks with the calendar in figure 5.

Somewhere to keep reading

I write almost daily in ZEN, Refugio del Alma Sensible, a Telegram channel in Spanish. Short reflections for people who feel deeply and want to understand themselves. Three minutes to read, no noise, and nothing for sale.

The link is in the code below, or at christianduarte.com.



ZEN, Refugio del Alma Sensible

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Why the image you have of yourself matters

If you have opened this, something brought you here. Sometimes it is a sentence someone said to you that kept circling. Sometimes it is that feeling that everyone else walks around with a confidence you cannot find anywhere.

It is worth starting with what self-esteem is and what it is not. It is not thinking you are wonderful. It is not telling yourself you can handle anything. It is, in a much more boring way, the overall valuation you make of yourself: the background judgement, almost always silent, that shows up when you get something wrong in front of someone or when you have to ask for something you need.

That judgement is not an ornament. In 2013, Sowislo and Orth reviewed the available longitudinal studies, the ones that follow the same people over years, and found that low self-esteem predicts later depressive symptoms more strongly than the other way round. In other words, it is not just that feeling bad makes you see yourself worse. Seeing yourself worse also pushes you towards feeling bad.

That makes this something worth attending to. Not an emergency, but something worth giving an afternoon to.

What I am not going to do is promise you a transformation. Self-esteem moves slowly, changes with age along a fairly well studied curve, and responds more to what you do in a sustained way than to what you say to yourself in front of the mirror. In fact, as you will see in chapter two, saying things to yourself in front of the mirror can backfire precisely in the people who see themselves worst.

Let us start with what is known.

Chapter 1. What is known, and what is not

What shows up in the brain

Self-esteem does not live in one particular spot in the brain. There is no region you can point to. What has been described is a relationship between how stable someone's valuation of themselves is and the connectivity between the medial prefrontal cortex and the ventral striatum, two areas involved in judging oneself and in processing reward. Chavez and Heatherton published it in 2015, combining several imaging techniques.

That finding should be read for what it is. It is a correlation in a group of people, not a mechanism that explains your case, nor a marker that can be measured in a consulting room. When you see a headline saying that self-esteem sits in such-and-such part of the brain, you are looking at a simplification.

And a warning about an argument that circulates a lot: saying that a practice works because it strengthens neural connections is not an explanation, it is a way of sounding scientific. Anything you repeat changes neural connections, including the ones that do you no good. The figure that matters is not that one, but whether the practice produces the effect attributed to it when someone measures it.

What shows up in the psychology studies

Here the ground is firmer, because there are decades of repeated measurements on the same people.

First, how it is measured. The reference tool is still the scale Morris Rosenberg published in 1965: ten statements, agree-or-disagree answers, five minutes. It has been translated and validated in dozens of countries and almost every serious study in the field uses it. You will find it in the next chapter.

Second, the direction of the effect. The 2013 meta-analysis by Sowislo and Orth reviewed the published longitudinal studies and found that low self-esteem predicts later depression consistently, with a larger effect than the reverse direction. With anxiety the relationship exists but is more symmetrical.

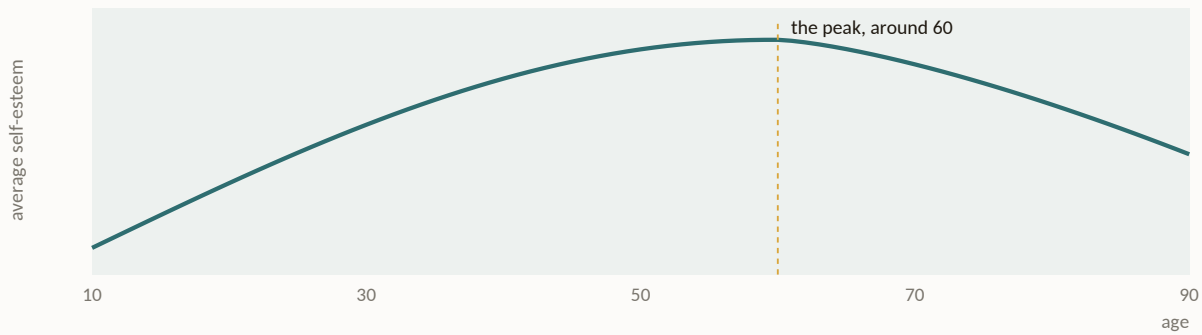
Third, what moves with age. Self-esteem tends to rise from adolescence to the early sixties and to decline afterwards. If you are in your twenties and compare yourself with someone of fifty, you are not comparing two people, you are comparing two points on a curve.

And one that is worth saying even though it is uncomfortable. Maslow's pyramid, which appears in every course and in half the books on this shelf, has never had solid empirical support as a hierarchy. The needs he described matter; the order he put them in does not hold up. I mention it because in the previous edition of this text I took it as good myself.

THE ESSENTIALS OF THIS CHAPTER

Self-esteem is measurable, it moves slowly, and its relationship with distress runs in both directions, though more strongly in one. That is what there is. The rest of what you will read out there, about frequencies, energies or reprogramming the subconscious, has nothing behind it.

FIGURE 1



Average trajectory of self-esteem across life, from the meta-analysis of longitudinal studies by Orth, Erol and Luciano (2018). It is the average of many people, not your curve. It serves the same purpose as a growth chart: to place yourself, not to judge yourself.

Chapter 2. Fifteen tools

They are ordered from what helps you look to what helps you move. You do not need all fifteen. Choose two and keep them up for a month.

1. The Rosenberg scale

Instead of an invented questionnaire, use the one the studies use. Ten statements. Score each from 1 to 4, where 1 is strongly disagree and 4 strongly agree.

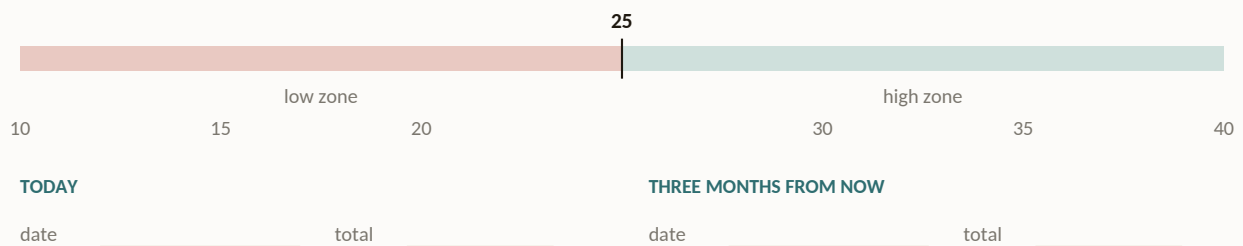
THE TEN STATEMENTS

1. On the whole, I am satisfied with myself.
2. At times I think I am no good at all.
3. I feel that I have a number of good qualities.
4. I am able to do things as well as most other people.
5. I feel I do not have much to be proud of.
6. I certainly feel useless at times.
7. I feel that I am a person of worth, at least on an equal plane with others.
8. I wish I could have more respect for myself.
9. All in all, I am inclined to feel that I am a failure.
10. I take a positive attitude toward myself.

Statements 2, 5, 6, 8 and 9 are scored in reverse: a 4 counts as 1, a 3 as 2, and so on. Add it up. The range runs from 10 to 40. Below 25 is usually considered low self-esteem, although the cut-off varies between populations and no figure diagnoses anything.

What is genuinely useful is repeating it. Write down the date and the number, put it away, and take it again in three months without looking at the previous result. The comparison between two snapshots of you says far more than a single one.

FIGURE 2



Write down the total and the date. Come back in three months without looking at the previous result.

2. Four questions for looking at yourself straight on

This one carries no evidence; it is an exercise in putting things in order. Write the answers by hand, which forces you to go slower.

What am I good at that I find hard to acknowledge out loud. In which concrete situations do I shrink. What would I say to a friend who told me exactly what I tell myself. What would I change if I stopped waiting for someone's permission.

3. The achievements log

One line a day, at night, with something you did that cost you effort. It does not need to be big; it needs to be yours.

It works for a concrete reason: we remember what went wrong more easily, and without an external record, memory does the accounting its own way. The log does not cheer you up, it corrects the bias.

4. The letters

Three letters, at three different sittings. One to who you were ten years ago. One to who you are now. One to who you will be in ten years.

Writing about oneself has research behind it, above all the kind that centres on difficult experiences, and the measured effects are modest but real. What is not advisable is writing in the heat of the moment about an open wound with no closure; there, writing can stir up more than it sorts out.

5. Affirmations, with a serious warning

This is where this text has changed most from its previous edition.

CAREFUL

The common idea says that repeating positive phrases to yourself improves how you see yourself. In 2009, Wood, Perunovic and Lee put it to the test and published the result in *Psychological Science*. For people with high self-esteem, repeating "I am a likeable person" made them feel somewhat better. For people with low self-esteem, the ones who in theory need it most, it made them feel worse: they ended up in a lower mood than those who repeated nothing.

The explanation they propose is simple. If the phrase sits very far from what you believe, repeating it does not convince you, it reminds you of the distance.

What does have support is something else, called values self-affirmation. It does not consist of telling yourself you are wonderful, but of writing a few lines about something that genuinely matters to you, your family, your craft, the way you treat people, and why it matters. Cohen and Sherman reviewed that literature in 2014. The effects are small but they hold, and they do not turn against you.

So if you are going to write something on the wall, write what you value, not what you are supposed to feel.

6. The three-step stop

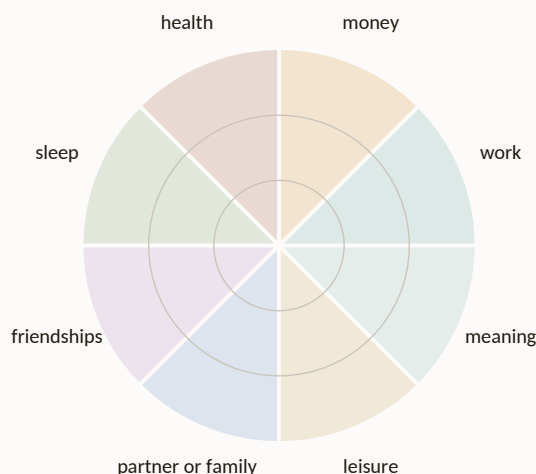
When you notice the usual thought starting up, stop and do three things. Name the thought, under your breath if you are alone: "there it is again, the one about being worthless". Ask yourself what evidence you have for and against, and write it down if you can. And decide what you do next, even if the thought is still there.

It is a home version of what is done in cognitive therapy. It does not replace it.

7. The wheel

Draw a circle and divide it into eight: work, money, health, sleep, friendships, partner or family, leisure, meaning. Colour each slice according to how satisfied you are, from the centre outwards.

FIGURE 3



Colour each slice from the centre outwards: a full slice is an area you are satisfied with.

Almost nobody has low self-esteem across the board. There are usually two empty slices dragging the rest down. The wheel is for seeing that, not for fixing it.

8. The box

A physical box with things that prove something about you. A note, a photo, a ticket, an exam. It gets opened on the bad days, not the good ones.

I know of no studies backing it. I include it because it costs little and because the effect it aims at, having material proof when memory fails you, is the same as the achievements log.

9. Gratitude, at its real size

Three things you are grateful for, once a week, written down.

Gratitude is one of the most studied practices in this field and also one of the most inflated. The meta-analysis by Davis and his team, from 2016, found small effects on wellbeing compared with doing nothing, and even smaller ones when compared with any other writing activity. It helps, but it is not what the covers of the books that sell it promise.

A practical note: daily wears out. Weekly holds.

10. The mirror

The previous edition of this text asked you to look at yourself in the mirror every morning and say good things to yourself. I have removed that, for the reasons you read under point five.

What remains is more modest and does not backfire: look at yourself for a second and say nothing. If there is a sentence, let it be descriptive, not aspirational. "I slept badly today" works. "Today I am going to take on the world" does not.

11. The strengths inventory

A list of things you know how to do, with a piece of evidence next to each one. The evidence is the point: "I am organised" does not count, "I kept the March project going without anything falling over" does.

Without the evidence, the list is a positive affirmation in disguise, and you already know how those end.

12. Attention on the breath

Ten minutes, seated, following the breath and coming back every time you drift. Coming back is the exercise, not a failure.

Slow, voluntary breathing has measured effects on heart rate variability, with meta-analyses behind it. On self-esteem specifically the evidence is much weaker. I include it because it lowers the noise in which everything else gets done.

13. Four weeks, not twenty-one days

The twenty-one days are a myth. They come from an observation by a plastic surgeon in the nineteen sixties about his patients, not from a study of habit.

THE FIGURE

The reference work is by Lally and her team, from 2010: a median of sixty-six days for a new behaviour to become automatic, with a range running from eighteen to two hundred and fifty-four depending on the person and the behaviour. In other words, it depends so much that giving one general figure is misleading.

What does work is deciding in advance when, where and how. The meta-analysis by Gollwitzer and Sheeran on implementation intentions is one of the most solid results in the field. Writing "on Tuesdays and Thursdays, on leaving work, I walk for twenty minutes" delivers more than resolving to walk more.

So the challenge in this workbook does not last twenty-one days. It lasts four weeks and comes in one piece at a time.

14. The map

A board with images of what you want. I keep it, with one important correction: visualising the result, on its own, tends to relax rather than mobilise. What helps is visualising the process, the Tuesday evening with the materials in front of you, not the opening night.

If you make the board, fill it with scenes of the work, not photos of the finish line.

15. The thought record

Five columns: situation, automatic thought, emotion and how much it weighs from 0 to 10, alternative thought, emotion afterwards.

It is the central tool of cognitive therapy, the one with the longest track record of everything in this chapter. Done at home, unaided, it serves to see the pattern. Done with a professional, it serves to change it.

FIGURE 4

Situation	Automatic thought	Emotion and weight 0-10	Alternative thought	Emotion afterwards

One row per episode. The fourth column is the one that costs, and the one that works.

Chapter 3. What holds up day to day

The tools of the previous chapter are used for a while. The ones in this chapter get installed.

Self-compassion, which is not self-indulgence

Treating yourself in the bad moments the way you would treat a friend who is having a hard time. That is all. It does not consist of letting yourself off everything or of no longer demanding anything of yourself; it consists of not adding a beating on top of the mistake.

It is among the best supported things here. Neff reviewed the whole field in 2023, and Phillips and Hine published a meta-analysis in 2021 finding a relationship between self-compassion and better health behaviours. Besides, unlike affirmations, it does not depend on you believing anything: it depends on how you speak to yourself when you are already low.

A concrete exercise for a bad day: write two sentences about what happened, as you would write them to someone you love. No ornaments and no punishment.

People

Isolation is not a soft issue. The 2010 meta-analysis by Holt-Lunstad and her team found that solid social relationships are associated with a higher probability of survival across the follow-up years, with an effect size comparable to other risk factors we do take seriously.

The applicable part is not surrounding yourself with positive people, which usually ends in telling whoever speaks the truth to keep quiet. It is simpler: keep two or three relationships where you can show up unfiltered, and do not let the diary eat them.

Sleep

Sleeping badly wears down the next day's mood, and the next day's mood wears down how you see yourself. If you have been sleeping badly for months, the best supported treatment is not a pill: it is cognitive behavioural therapy for insomnia, which is what the 2021 guideline of the American Academy of Sleep Medicine recommends as first line.

Getting outside

Time spent in green spaces is associated with better health indicators in a broad systematic review from 2018. The studies are mostly observational and the effect is not a cure, but it is cheap and has no contraindications.

Half an hour walking, no headphones and no goal, counts.

Slow breathing

When the body is running fast, the head does not reason well about itself. Breathing slowly, lengthening the out-breath, measurably changes heart rate variability, according to the 2022 meta-analysis by Laborde and his team.

It will not change your life. It will lower your pulse enough for the rest to become possible.

One thing each week

Four weeks, one new entry per week, without dropping the previous one.

Week one: the Rosenberg scale, with the date written down. Nothing else. Week two: ten minutes of walking after the main meal, three days. Week three: the achievements log, one line a day. Week four: the two self-compassion sentences on the day that goes wrong.

If a week falls, it is not made up. You carry on with the next one.

FIGURE 5

Week 1. The Rosenberg scale, with the date written down

Week 2. Ten minutes of walking, three days

Week 3. The achievements log, one line a day

Week 4. The two self-compassion sentences

M	T	W	T	F	S	S
☐	☐	☐	☐	☐	☐	☐
☐	☐	☐	☐	☐	☐	☐
☐	☐	☐	☐	☐	☐	☐
☐	☐	☐	☐	☐	☐	☐

A week that falls is not made up. You carry on with the next one.

Chapter 4. What wears it down

Comparing yourself

It is the most efficient mechanism in existence for wrecking a reasonable valuation of yourself, and social media has industrialised it. You compare your complete process, doubts included, against someone else's edited result.

There is no way to stop comparing; it is automatic. What you can do is choose the material: fewer accounts that leave you worse, more people you know in person.

Perfectionism

It is not a virtue in disguise. It is a system with only two possible outcomes, perfect or failure, and the first one never arrives.

The useful question is not whether you did it well, it is whether it is good enough for what it was for.

Asking permission

Giving other people's opinion a weight it is not entitled to. It usually comes from constantly asking for an approval which, when it arrives, does not soothe either.

Not setting limits

Saying yes when you want to say no has a double cost: the thing you do, and the message you send yourself by doing it.

Keeping only the negative

The brain stores what went wrong better. That is not a defect of yours, it is how memory works. That is why the written records in this workbook insist so much: they are not optimism, they are accounting.

Self-demand without a ceiling

Demanding a lot of yourself is not the problem. The problem is never having a point at which something can be called finished.

Dodging what scares you

Every time you avoid something that frightens you, the immediate relief reinforces the avoidance. In the long run the world gets smaller, and the image you have of yourself adjusts to that size.

Staying in what already happened

Going over what you did wrong ten years ago is not learning if it changes nothing about what you will do tomorrow.

When this is not enough

There is a point at which putting the reading down and asking for help is the sensible decision. These are the signs, and none of them is workbook material.

That you have gone more than two weeks unable to enjoy anything you used to like. That sleep or appetite have broken and do not come back. That you are avoiding work, your studies or people. That you are using alcohol or something else to get through the day. That thoughts appear of harming yourself, or that it would be better not to be here.

IF THIS APPEARS, DO NOT WAIT

If you recognise yourself in the last one, that is not something to consult a workbook about or to postpone. In Spain you can call 024, the suicide-prevention line, free and available at any hour, or 112. If you are elsewhere, call your country's crisis line or your local emergency number.

For the rest, the usual route is your family doctor, who is the one who refers. And if you can choose, cognitive behavioural therapy is the approach with the most accumulated support for what this workbook deals with.

Asking for help is not the end of this work. It is the part of the work that cannot be done alone.

To finish

If you take away one thing, let it be this: the image you have of yourself moves more through what you do in a sustained way than through what you say to yourself. The phrases in front of the mirror can even turn against you. Four weeks of something small and repeated cannot.

And if what you notice has been settled in for months, the previous page matters more than the fifteen tools put together.

Christian

Sources

Each reference comes with its identifier so that you can go to the original work. Type doi.org followed by the code and you will get there, even if the journal changes website.

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This workbook is popular science and does not replace a consultation. Nothing in it diagnoses anything or serves to decide on a treatment.

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