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# FAMILY RELATIONSHIPS AND THE SENSE OF SOCIAL SUPPORT AND SELF-ESTEEM OF CHILDREN IN GRADES SEVEN AND EIGHT OF PRIMARY SCHOOL*

**Introduction:** Family relationships have been demonstrated to be a significant indicator of young people's overall functioning and have the capacity to influence perceptions of self and environment. It is valuable to examine the relationship between family relationships and young people's sense of perceived social support as well as their self-esteem.

**Research Aim:** The aim of this paper is to demonstrate the relationships between family relationships, sense of social support and self-esteem in children in grades 7 and 8 of primary school.

**Research Method:** The study procedure consisted of completing the Family Relations Questionnaire KRR-1 My Family by Plopa and Połomski to measure the quality of these relationships, the Short Scale of Social Support for Youth KSWS-18 by Skowroński and Pabich to measure the sense of support of the respondents, and the Self-Assessment Scale SES by M. Rosenberg adapted by Dzwonkowska, Lachowicz-Tabaczek and Łaguna to measure their self-esteem. The study included 103 children from the 7th and 8th grade of primary school.

**Results:** The family relationships of the youth surveyed are related to the sense of social support they experience and their self-esteem. The better the family functions, the higher the students assess their sense of being supported by their parents, peers and teachers. Moreover, the higher the sense of support declared by the respondents, the better they perceive themselves. Regression analysis showed that parental and peer support are significant predictors of self-esteem. The assumed moderating role of peer support for the relationship between the communication dimension and self-esteem was not demonstrated.

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**Conclusion:** Positive family relationships can foster both a sense of social support and elevated self-esteem among youth. It is imperative to prioritise the immediate educational environment of children and extending the social support network for youth as it contributes to enhancing their self-perception and fostering a more accurate self-esteem. The absence of a notable relationship between teacher support and children's self-esteem may signify an essential area for future research, checking whether this support is adequate.

**Keywords:** family relationships, social support, peer support, teacher support, self-esteem

## INTRODUCTION

The family constitutes the primary environment for children, wherein they acquire social interaction skills and their needs are met, facilitating growth. The family is the initial context in which a child experiences intimacy, care and support, which are foundational for their development and the establishment of their sense of self-esteem. Support from his family and, later in life, from his peers and teachers is part of his functioning.

The objective of the present study was to ascertain the correlation between family relationships and the sense of social support, as well as self-esteem, in children in grades seven and eight. The present study will explore the relationship between family relationships and the receipt of support from relatives, peers and teachers, as well as self-esteem.

The term "social support" is sometimes used interchangeably with the terms "relationships", "relations", "ties", "connections", and "social connections". In most cases, the term refers to formal and informal relationships with family members, friends, or to membership of various organisations (Kacperczyk, 2006; Spilsbury & Korbin, 2013). Researchers have identified personality as a significant factor in the reception of social support, with extraversion being particularly salient (Cieślak & Eliasz, 2012). This is related to the extensive reach of the social support network and the frequency of interaction with others. The high level of this correlates with the tendency to look for social support. Extroversion is also associated with increased effectiveness of social support. This reduces the negative impact of critical situations on an individual's well-being. However, it is important to acknowledge that there are concepts related to social support that are based on the individual experiences of a person, including the attachment styles distinguished by Bowlby (Holmes & Holmes, 2014). As demonstrated in the research by Bartholomew et al. (1997), a secure attachment type is formed as a result of the fulfilment of the need for security in early life. This type is characterised by trust and a positive self- and other-image, and it is associated with a high perceived social support and a search for such support.

Neethu et al. (2023) conducted research that demonstrated social support can exert a direct influence on health. It is evident that a paucity of social support

and a state of social isolation are factors in the aetiology of depression and other illnesses. The occurrence of a critical life event, and the simultaneous lack of social support, have been demonstrated to cause the onset of symptoms of depression. Furthermore, people diagnosed with severe depression have been found to comprise a smaller social network (Kacperczyk, 2006). Research has shown that individuals with greater social support seem to have a reduced incidence of depression in response to crisis situations, as compared to those with fewer social support resources (Sęk, 2012). It has also been demonstrated that a paucity of social support and loneliness during illness have deleterious effects on the patient's well-being and are associated with higher mortality (Sęk, 2012). Furthermore, research conducted by Beygi et al. (2023) has demonstrated a positive correlation between social support and happiness. It is clear that people look to their social networks for support in various situations, especially during times of crisis. As Sęk (2012) has suggested, people may look to a variety of sources for support, includingfamily members, friends, neighbours, members of self-help groups, and from specialists and various care and social welfare institutions.

The term "family support" refers to informal assistance given to family members (Kamaryati & Malathum, 2020). From a familial perspective, the provision of material and instrumental support is paramount, whilst also acknowledging the significance of emotional support. Allocating time to children and engaging in open dialogue are also crucial elements of this support. The role of family support in the development of adaptive behaviours has been demonstrated to be a significant factor in the cultivation of positive coping strategies, skills, and self-confidence (Kamaryati & Malathum, 2020). Moreover, the support received can act as a buffer for the negative effects of life stress and critical events in the family (Szluz, 2007). The concept of parental support encompasses actions by parents that demonstrate acceptance, appreciation, and love towards their child, thereby signifying the importance and value they place on their offspring (Jarczyńska, 2005).

The teacher support in question derives from social interactions with other individuals, as well as from the resources that are provided by the educational establishment as an institution. Based on personal relationships and the institutional structure of the school, it is built through direct communication. The aforementioned state has been shown to engender feelings of relief, strengthen faith and courage to act, and instil a sense of security and acceptance (Kocór, 2018). Peer support constitutes a non-professional form of assistance that has been demonstrated to be an effective tool in preventing emotional crises in children and young people (Klimska et al., 2022).

The experience of social support has been demonstrated to exert a positive influence on the development of self-confidence and a sense of importance, which is related to self-esteem. Polish researchers define self-esteem as an individual's effective reaction to themselves (Wojciszke, 2002). Self-esteem is predicated on per-

sonal self-esteem, which in turn is the consequence of perceiving oneself as valuable (Dymkowski, 1993). Szpitalak and Polczyk (2015) posit that the self-esteem is a measure of an individual's ability to perform specific tasks in specific situations. The predominant consensus among researchers is that self-esteem is a form of affective reaction to oneself, characterised by a dual nature. On the one hand, it has characteristics that mean a constant relationship of the individual to themselves. Alternatively, it can be considered a process of continuous self-esteem (Wojciszke, 2019).

There are some theoretical concepts that suggest a relationship between self-esteem and the upbringing and influence of significant others, and that self-esteem is shaped by the influence of social groups (Lachowicz-Tabaczek & Śniecińska, 2008). The origins of the self-esteem can be traced back to familial relationships and experiences acquired within the domestic environment (Grabowiec, 2018). It is an irrefutable fact that, from the very outset, parents have the most significant impact on the development of their child's self-esteem. Parents provide their children with feedback on their behaviour through both verbal and non-verbal channels, thereby fostering their self-awareness (Grabowiec, 2018). The prerequisites for a child's positive self-esteem are unconditional acceptance, respect and clear boundaries, as well as an attitude of respect and tolerance (Coopersmith, 1967). Parents of children with high self-esteem demonstrated a greater level of interest in their children and applied consistent parenting methods, in contrast to parents of children with average or low self-esteem (Grabowiec, 2018). Self-esteem has been demonstrated to be associated with the values recognised by parents. For instance, if education is considered a significant value by parents, it becomes a similarly important value for their children. Consequently, children's academic performance exerts a greater influence on their self-esteem than it does on the self-esteem of children for whom education is not a primary value (Franken, 2005).

The theory of the "Reflected Self" posits that sources of self-esteem can also be found in the broader external environment. As postulated by Szpitalak and Polczyk (2015), individuals form perceptions of themselves through the information they receive from the external environment. This process is reciprocated, with the individual's perception of themselves being influenced by their conception of how they are perceived by their environment.

It has been demonstrated that the self-esteem functions as a protective mechanism against negative experiences, thereby contributing to mental health (Szpitalak & Polczyk, 2015). The importance of self-esteem in fostering a sense of safety has also been highlighted in the research by Łukaszewski and Boguszewska (2012). Furthermore, it has been demonstrated to facilitate prosocial behaviour (Szpitalak & Polczyk, 2015). The act of self-esteem exerts an influence on the assessment of one's own self. It is evident that an individual with a high self-esteem has a positive perception of themselves, which, in turn, promotes optimal functioning (Szpitalak & Polczyk, 2015).

## RESEARCH AIM AND QUESTION

The aim of the research was twofold: firstly, to demonstrate the relationships between family relationships and sense of social support, and secondly, to demonstrate the relationships between family relationships and self-esteem in children in grades 7 and 8 of primary school. Moreover, the analyses conducted examine the relationship between the sense of parental, peer and teacher support and pupils' self-esteem. Additionally, it was examined to what extent social and family support predicted changes in self-esteem and whether peer support played a moderating role in the relationship between the communication dimension and self-esteem. The research verifies the answers to questions about the existence of these relationships.

## RESEARCH METHOD AND SAMPLE CHARACTERISTICS

A total of 103 children participated in the research study, with 55 girls and 48 boys aged between 12 and 15 years old. The selection of respondents was motivated by their age, i.e. their belonging to the group of pupils studying in grades 7 and 8. During the homeroom lessons, the psychologist distributed printed method sheets to the students to fill out. He informed them about the voluntary and anonymous nature of the study. The necessary presence of the class teacher during the study could have influenced the results obtained. The study encompassed four primary schools in the Świętokrzyskie Voivodeship. The necessary consents for the study were obtained from the relevant parties, including school principals, parents, and children.

### The Family Relations Questionnaire – KRR 1 Family Perception by Plopa and Połomski

The Family Relations Questionnaire – KRR 1 Family Perception by Plopa and Połomski is used to investigate how young people perceive the family as a whole. It contains 32 statements that the respondent evaluates on a five-point scale (1 – *yes*, 2 – *rather yes*, 3 – *I don't know*, 4 – *rather no*, 5 – *no*). Family relationships are categorised according to four dimensions: communication, cohesion, autonomy-control and identity. Examples of items: "The members of my family are free to express their true opinions"; "In our family, we look out for each other"; "The members of my family treat people with dignity and respect". The tool shows a reliable measurement. The Cronbach alpha reaches a value of more than 0.8. The questionnaire can be used both in scientific research and in the formulation of individual diagnoses (Plopa & Połomski, 2010).

### The Short Scale of Youth's Social Support Assessment KSWS-18 by Skowroński and Pabich

The Short Scale of Youth's Social Support Assessment is a psychometric tool designed to assess three forms of social support: parental support, teacher support and peer support. It consists of 18 questions. The respondents were invited to indicate their responses on a scale of 5 to 1, where 5 represented a *definitely yes* response and 1 a *definitely no* response. Examples of scale items: "I have a feeling of support and understanding from my parents", "The teachers take care of me", "My classmates are there to support me when I'm feeling down". The Cronbach alpha coefficient for the entire tool is 0.85, and the value of the Cronbach alpha coefficients for each of the subscales exceeds 0.8 (Skowroński & Pabich, 2015).

### The Rosenberg Self-Esteem Scale

The Rosenberg Self-Esteem Scale: Polish adaptation of the scale by Dzwonkowska, Lachowicz-Tabaczek and Łaguna. The scale is a one-dimensional tool to assess the overall level of self-esteem. It consists of 10 statements. Respondents answer on a four-point scale (from 1 – *I strongly agree* to 4 – *I strongly disagree*). The Cronbach alpha coefficient for different age groups ranges from 0.81 to 0.83. This indicates the high reliability of the tool (Dzwonkowska et al., 2008). Examples of items: "I believe that I am a valuable person, at least as much as others"; "In my opinion, I have a lot of positive qualities"; "I like myself".

## STATISTICAL DATA ANALYSIS PROCEDURE

In order to provide responses to the research questions, statistical analyses were conducted using the jamovi package. An analysis of basic descriptive statistics was carried out using the Shapiro–Wilk test. Analyses were performed using Spearman's rho correlation test, hierarchical linear regression analysis and moderation analysis. The significance level was set at $\alpha = 0.05$.

## RESULTS

### Relationship between family perception and social support received

A Spearman's rho correlation test was used to examine the relationships between the dimensions of communication, cohesion, autonomy-control and identity and the support received from parents, peers and teachers. Detailed results are presented in Table 1.

Table 1.

*Spearman's rho correlations between family relationship dimensions and social support scores*

| Variable | The dimension of communication | The dimension of cohesion | The dimension of autonomy and control | The dimension of identity | Parental support | Peer support |
|---|---|---|---|---|---|---|
| The dimension of communication | - | | | | | |
| The dimension of cohesion | 0.708*** | - | | | | |
| The dimension of autonomy and control | 0.614*** | 0.491*** | - | | | |
| The dimension of identity | 0.693*** | 0.769*** | 0.444*** | - | | |
| Parental support | **0.536*** | **0.516*** | **0.393*** | **0.594*** | - | |
| Peer support | 0.273** | 0.330*** | 0.223* | 0.285** | 0.273** | - |
| Teacher support | **0.208* | 0.098 | 0.029 | **0.277** | **0.278** | **0.216* |

*** $p < 0.001$; ** $p < 0.01$; * $p < 0.05$.

Source: Authors' own study.

The communication dimension correlates positively and strongly with parental support (*rho* = 0.536, $p < 0.001$) and weakly but statistically significantly with peer support (*rho* = 0.273, $p < 0.01$) and teacher support (*rho* = 0.208, $p < 0.05$). The cohesion dimension shows a positive, strong relationship with parental support (*rho* = 0.516, $p < 0.001$) and a moderate relationship with peer support (*rho* = 0.330, $p < 0.001$).

The autonomy-control dimension correlates positively, moderately with parental support (*rho* = 0.393, $p < 0.001$) and weakly but statistically significantly with peer support (*rho* = 0.223, $p < 0.05$). The communication dimension correlates positively, strongly with parental support (*rho* = 0.594, $p < 0.001$) and weakly but statistically significantly with peer support (*rho* = 0.285, $p < 0.01$) and teacher support (*rho* = 0.277, $p < 0.01$).

Only in two cases, between teacher support and the dimensions of cohesion and autonomy-control, is there no statistically significant correlation. There is a statistically significant relationship between all the other dimensions.

## Relationship of the feeling of receiving social support to the level of self--esteem

To test the validity of the hypothesis dealing with the existence of a relationship between receiving parental, peer and teacher support and self-esteem, Spearman's rho test was again performed. The results are presented in Table 2.

Table 2.
*Spearman's rho correlations between family relationship dimensions and social support scores*

| Variable | Parental support | Peer support | Teacher support |
|---|---|---|---|
| Parental support | - | | |
| Peer support | 0.273** | - | |
| Teacher support | **0.278**** | **0,216*** | - |
| Self-esteem | **0.454**** | **0.444***** | 0.063 |

\*\*\* *p* < 0.001; \*\* *p* < 0.01; \* *p* < 0.05.
Source: Authors' own study.

The results show a significant correlation for two dimensions. Self-esteem is moderately and positively associated with both parental support (*rho* = 0.454, *p* < 0.01) and peer support (*rho* = 0.444, *p* < 0.001). On the other hand, teacher support does not have a statistically significant correlation with any measure of self-esteem.

**Relationship between the perception of the family and the level of self-esteem**
Another hypothesis suggests the existence of a correlation between the dimensions of the KRR-1 tool, which examines family perceptions, and the level of self-esteem. A Spearman's rho correlation test was carried out to check the validity of the correlation. The results are presented in Table 3.

There is a statistically significant relationship between self-esteem and all dimensions. A positive and moderate correlation can be observed between self-esteem and the dimensions of communication, cohesion and autonomy-control. They are as follows: *rho* = 0.408, *p* < 0.001, *rho* = 0.367, *p* < 0.001, *rho* = 0.307, *p* < 0.01. Only self-esteem and the identity dimension are weakly related, but statistically significant (*rho* = 0.257, *p* < 0.01).

Table 3.

*Spearman's rho correlations between dimensions of family relationships and self-esteem*

| Variable | The dimension of communication | The dimension of cohesion | The dimension of autonomy and control | The dimension of identity |
|---|---|---|---|---|
| The dimension of communication | - | | | |
| The dimension of cohesion | 0.708*** | - | | |
| The dimension of autonomy and control | 0.614*** | 0.491*** | - | |
| The dimension of identity | 0.693*** | 0.769*** | 0.444*** | - |
| Self-esteem | 0.408*** | 0.367*** | 0.307** | 0.257** |

*** $p < 0.001$; ** $p < 0.01$; * $p < 0.05$.

Source: Authors' own study.

## A model predicting self-esteem based on gender, social support, and family relationships

A linear regression analysis was performed for self-esteem to examine the extent to which the variables predicted change in this variable. The model was built hierarchically. In the first step, gender was included in the model as a control, then indicators of social support, and finally the four dimensions of family relationships were added. The results of the analysis are presented in Table 4.

Table 4.

*Results of linear regression analysis for self-esteem based on social support and family relationships while controlling for gender*

| Model | Variables | B | SE | β | t | p |
|---|---|---|---|---|---|---|
| 1 | $F(1, 100) = 2.00$; $p = 0.160$; $R2 = 0.02$ | | | | | |
| | (Constant) | 25.57 | 1.71 | | 14.97 | **<0.001** |
| | Sex | 1.56 | 1.10 | 0.14 | 1.42 | 0.160 |
| 2 | $F(4, 97) = 19.87$; $p < 0.001$; $R2 = 0.45$ | | | | | |
| | $\Delta F(3, 97) = 25.34$; $p < 0.001$; $\Delta R2 = 0.43$ | | | | | |
| | (Constant) | 6.69 | 2.87 | | 2.33 | **0.022** |
| | Sex | 1.11 | 0.86 | 0.10 | 1.29 | 0.199 |
| | Parental support | 0.48 | 0.11 | 0.35 | 4.25 | **<0.001** |
| | Peer support | 0.38 | 0.06 | 0.48 | 5.99 | **<0.001** |
| | Teacher support | -0.14 | 0.09 | -0.12 | -1.53 | 0.129 |

| 3 | $F(8, 93) = 11.41$; $p < 0.001$; $R2 = 0.50$ | | | | | |
|---|---|---|---|---|---|---|
| | $\Delta F(4, 93) = 25.34$; $p = 0.090$; $\Delta R2 = 0.05$ | | | | | |
| | (Constant) | 4.92 | 3.31 | | 1.49 | 0.140 |
| | Sex | 1.47 | 0.86 | 0.13 | 1.71 | 0.090 |
| | Parental support | 0.38 | 0.16 | 0.27 | 2.41 | 0.018 |
| | Peer support | 0.33 | 0.07 | 0.42 | 5.02 | **<0.001** |
| | Teacher support | -0.07 | 0.10 | -0.06 | -0.73 | 0.467 |
| | Communication dimension | 0.16 | 0.16 | 0.15 | 0.97 | 0.336 |
| | The dimension of coherence | 0.25 | 0.15 | 0.26 | 1.67 | 0.099 |
| | Autonomy-control dimension | 0.06 | 0.12 | 0.06 | 0.52 | 0.606 |
| | Identity dimension | -0.35 | 0.17 | -0.31 | -2.06 | **0.043** |

*B* – unstandardized regression coefficient; *SE* – standard error; β – standardized regression coefficient; *t* – Student's *t*-test result; *p* – statistical significance; *F* – ANOVA test result; $R^2$ – explained variance; Δ *F* – change *in F*; Δ *R*2 – change in explained variance. Gender was coded: 1 – women; 2 – men.

Source: Authors' own study.

The first model with gender was statistically insignificant and explained only 2% of the variance. Gender was not a significant predictor.

The second model proved to be a good fit to the data and explained 45% of the variance in self-esteem. Adding social support to the model increased the explained variance by 43% and this was a statistically significant change. Of the added predictors, parental and peer support are significant predictors (positive relationships). As it turns out, teacher support was not significant in this model.

In the third step, family relations were added to the model. The ANOVA result for the model was statistically significant, and the explained variance was 50%. After adding family relations, the explained variance increased by 5%, but this change was not statistically significant. Among the predictors, parental and peer support (positive relations) and the identity dimension in family relations (negative relation) were significant. The remaining predictors did not predict the change in self-esteem. The strongest predictor turned out to be peer support.

## The moderating role of peer support in the relationship between the dimension of communication in family relationships and self-esteem

The interaction of the communication dimension for the area of family relations and peer support for self-esteem was tested. For this purpose, a moderation analy-

sis was performed, treating peer support as a moderator. The results of the analysis are presented in Table 5.

Table 5.

*Results of moderation analysis for the relationship between communication and self-esteem dimensions with peer support as moderator*

| Variables | B | SE | Z | p | 95% CI | |
|---|---|---|---|---|---|---|
| | | | | | LL | UL |
| Communication dimension | 0.33 | 0.10 | 3.36 | **<0.001** | 0.13 | 0.52 |
| Peer support | 0.32 | 0.11 | 3.05 | **0.002** | 0.12 | 0.54 |
| Communication dimension x Peer support | -0.10 | 0.07 | -1.54 | 0.124 | -0.23 | 0.03 |

*B* – unstandardized regression coefficient; *SE* – standard error; *Z* – *Z*-test statistic; *p* – statistical significance; *CI* with *LL* and *UL* – confidence interval for the coefficient estimate with lower and upper bound.

Source: Authors' own study.

The results of the model showed a significant main effect of communication and peer support (positive relationships), which means that with the increase in the intensity of the communication dimension and peer support, the self-esteem of the respondents increases. At the same time, the interaction effect turned out to be statistically insignificant. This means that peer support does not play a moderating role for the relationship between the communication dimension and self-esteem.

## DISCUSSION

The present study was conducted with the primary objective of ascertaining the existence of a relationship between family relationships, social support and self-esteem in children in grades seven and eight of primary school. Six specific hypotheses were proposed. The first one assumed the existence of a relationship between communication in the family and receiving peer, parental and teacher support. It was fully confirmed.

Plopa and Połomski (2010) suggest that positive communication in the family may be understood as a relationship characterised by openness, the discussion of problems, and the sharing of both happy and sad moments. The family environment fosters an atmosphere of authenticity, where mutual understanding and support are valued. Our research suggests that communication within the family influences the support received from peers, parents and teachers. This notion has been further explored by other authors. Research by Koerner and Maki (2004) has shown that communication within the family has an impact on the sense of

receiving social support. In their study, Koerner and Cvancara (2002) showed that when parents emphasise conversation, it means that they focus more on the child in their communication. This in turn leads to greater social support within the family. The positive impact of communication-focused families on children's social support has been demonstrated by Schrodt and Shimkowski (2017). In their study, Tabak et al. (2013) analysed how family meals are associated with an improvement in the quality of family relationships. Researchers have shown that this affects the clarity of communication and the perception of support young people receive from family members. Young people's perceptions of family relationships can have a significant impact on various aspects of their lives, including their overall level of functioning, psychosocial development (Law et al., 2013), school performance (Gwiazdowska-Stańczak & Sękowski, 2018) and coping with difficult situations (Borecka-Biernat, 2006). In their study, Kaleta and Mróz (2013) analysed the structure of relationships in the family of origin and its impact on feelings of support and loneliness. It appears that improved communication within the family environment has the potential to foster a greater sense of support and enhance satisfaction among its members.

The second hypothesis suggested a potential relationship between cohesion and receiving support from peers, parents and teachers. This has been confirmed in the relationship between cohesion and the support of peers and parents. Plopa and Połomski (2010) define family cohesion as strong emotional ties between family members. Family relationships are based on showing each other kindness, interest and support. It is suggested that family members experience a sense of love and the knowledge that they can count on each other. Family cohesion has an impact on feelings of social support, which has also been confirmed in other studies. Kaleta and Mróz's (2013) research showed that greater family cohesion is associated with greater feelings of support. Studies of adolescents in China have shown (Tao et al., 2000) that family cohesion, i.e. close ties between parents and adolescents, could be a particularly important source of social support. This is an important aspect because better perceptions of social support and satisfactory family cohesion are important for harmonious interpersonal relationships, which help individuals maintain high levels of well-being and safeguard them in stressful situations (Meng et al., 2015).

The third hypothesis suggested a potential relationship between autonomy-control and the receipt of support from peers, parents and teachers. This was confirmed in the relationship between autonomy-control and the receipt of peer and parental support. Plopa and Połomski (2010) have a different understanding of the autonomy-control dimension, which they describe as bipolar. In this understanding, autonomy is seen as family system that supports the individual development of each family member. In such a family, the need for privacy is respected for each individual. Children are encouraged to take responsibility for themselves.

Conversely, an excessive degree of control can be seen as a lack of trust and the feeling that family members' privacy and freedom of action are being restricted.

The Napora study (2021), which focused on the relationship with the mother and the psychological resilience of adolescents, showed that restricting adolescents' freedom is associated with a decrease in their psychological resilience. Resilience is a process by which an individual develops the ability to use internal and external sources of positive adaptation and good adjustment. Perceptions of social support can be subsumed under the broad concept of psychological resilience. Our own research has shown that there is a link between autonomy and control and social support. Furthermore, it has been observed that an increased level of parental control in teenagers can influence their relationships withpeers. Research has indicated that they may be more inclined towards possessivenessin their relationships with peers (Tuggle et al., 2014).

Hypothesis four, which postulated a relationship between identity and support from peers, parents and teachers, was fully confirmed. The identity dimension reflects the respondent's strong attachment to his or her family's values. Such a person tends to respect the traditions of the family, not because of imposed norms, but out of his or her own free will and desire to identify with the family as a community (Plopa & Połomski, 2010). Those who align with their family's beliefs may experience enhancedsocial support from both peers and parents, and what is more, teachers. This is an important aspect, as our own research shows.

Hypothesis five, which assumed the existence of a relationship between communication, cohesion, autonomy-control, identity and self-esteem, was also fully confirmed. According to Rosenberg's (1965) theory, individuals have a tendency to evaluate themselves in the same way as they evaluate various objects in their environment. Having a high self-esteem means that you believe that you are competent and valuable enough. Our research suggests a correlation between self-esteem and familyrelationships.This notion is further substantiated by the findings of numerous studies. Krauss et al. (2020) have shown that many environmental variables in the family influence the child's self-esteem. It has been suggested that factors such as parental warmth, monitoring, and the presence of the father may be associated with children's positive self-assessment. Research suggests a strong link between the parent-child relationship and teenagers' self-esteem. Young people who experience a close, supportive and accepting relationship with their parents have higher self-esteem (Demo et al., 1987). Furthermore, there is a clear link between parenting style and teenagers' self-esteem, according to research by Vasudeva (2022). They have shown that high responding parenting leads to higher self-esteem in children.

Hypothesis six assumed the existence of a relationship between the receipt of parental, peer and teacher support and self-esteem. This was confirmed in the relationship between the receipt of support from parents and peers and the self-es-

teem. This finding aligns with the observations made in several other studies. They show that the higher the level of social support teenagers receive, the higher their self-esteem (Ikiz & Cakar, 2010; Liu et al., 2021). It would be beneficial for future research to explore whether this support is sufficient, particularly in relation to the lack of a significant relationship between teacher support and children's self-esteem. The experience of a sense of importance through positive attention and genuine interest in the student on the part of the teacher can help the student build an appropriate self-esteem (Baryła-Matejczuk, 2021).

Hypothesis seven assumed that the variables analyzed were significant predictors of adolescents' self-esteem. Regression analysis confirmed this hypothesis for some variables. It showed that self-esteem was significantly shaped by family and peer support. Peer support turned out to be the strongest predictor. It is possible that the age of the respondents is not without significance here, for whom the attitude of peers towards them takes on greater importance than the attitude of the family. Similarly, in the study by Friedlander et al. (2007), increased social support from friends, but not from family, predicted better adjustment of teenagers.

Hypothesis eight assumed that peer support is a moderator of the relationship between family communication and teenagers' self-esteem. The studies did not confirm the significance of this relationship. Further analyses are needed to verify whether other dimensions of social support play a moderating role between the variables studied. Nevertheless, the analysis confirmed that with the increase in the intensity of the dimension of family communication and peer support, the self-esteem of the respondents increases.

## CONCLUSION

The studies presented provide information on the factors associated with children's sense of social support and self-esteem. Research shows that family relationships are important for people's sense of social support. The involvement of parents in the development of positive family relationships contributes to children's sense of social support and positive self-esteem. Studies have shown that the receipt of social support has been linked to the development of a positive self-image. To help their children, pupils or colleagues develop a positive self-image, it is important that parents, teachers and peers actively express their feelings and provide emotional support. Given the current state of knowledge and the opportunities for the development of teachers, the level of support that is provided is still far from adequate. This is especially true when we consider the specific nature of the present times and the challenges associated with the recent pandemic and the war that is just beyond the borders of our country.

The strength of our own research was that we contacted several schools. This makes the conclusions more objective and representative. Pupils from different schools may have different points of view and different experiences, which will allow for a more complete picture of the issue to be studied. The social support survey is an important aspect. It allows us to identify which sources of support are most important for children and influence their development. Research findings can be useful in the identification of problems in children who are at risk of lack of support and should be a signal for intervention and prevention of difficulties and problem situations. The results of the studies are important for the development of psycho-preventive and therapeutic measures, as well as training and educational programmes for schools. The aim is to support children's development and build their positive self-esteem. The research also highlights the need for teachers to provide social support for pupils.

## STUDY LIMITATIONS

The main limitation of the research conducted is the relatively small sample of subjects and the fact that it took place in primary schools in rural areas. As a next step, it would be advisable to carry out a study on a larger scale among children who live in both rural and urban areas. It would be worth exploring the possibility of using other questionnaires to examine these variables, and of extending the research to include parenting styles and how they affect children's sense of social support and self-esteem. It would also be valuable to create a conceptual model based on verified theories and research.

One difficulty in calculating the research results was the evaluation of teacher support. Questions relating to this dimension were often answered as *difficult to say*, which may explain why hypotheses relating to the relationship between the variables studied and teacher support could not be fully confirmed. The surveys were conducted in schools during homeroom lesson, which means that the children may have felt uncomfortable about being evaluated by their teachers in their presence. It is also possible that they receive minimal assistance from educators, which would be an essential cause for concern. This issue should be given greater scrutiny and is an aspect requiring attention within educational institutions.

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## RELACJE RODZINNE A POCZUCIE WSPARCIA SPOŁECZNEGO I SAMOOCENA DZIECI Z KLASY SIÓDMEJ I ÓSMEJ SZKOŁY PODSTAWOWEJ

**Wprowadzenie:** Relacje rodzinne mogą być wyznacznikiem jakości funkcjonowania młodych ludzi i przyczyniać się do sposobu postrzegania siebie oraz otoczenia. Zasadne staje się sprawdzenie, jak relacje rodzinne wiążą się z poczuciem doświadczanego wsparcia społecznego młodzieży oraz ich samooceną.

**Cel badań:** Wykazanie związków pomiędzy relacjami rodzinnymi a poczuciem wsparcia spo-

łecznego oraz samooceną u dzieci w klasie 7 i 8 szkoły podstawowej.

**Metoda badań**: Procedura badania polegała na wypełnieniu Kwestionariusza Relacji Rodzinnych KRR-1 *Moja Rodzina* Plopy i Połomskiego w celu pomiaru jakości tych relacji, Krótkiej Skali oceny Wsparcia Społecznego młodzieży KSWS-18 Skowrońskiego i Pabich dla zmierzenia poczucia wsparcia badanych oraz Skali Samooceny SES-M. Rosenberga w adaptacji Dzwonkowskiej, Lachowicz-Tabaczek i Łaguny dla zmierzenia ich samooceny. Badaniami objęto 103 dzieci z klasy 7 i 8 szkoły podstawowej.

**Wyniki:** Relacje rodzinne badanej młodzieży wiążą się z poczuciem doświadczanego przez nich wsparcia społecznego oraz ich samooceną. Im lepiej funkcjonuje rodzina, tym wyżej uczniowie oceniają poczucie bycia wspieranymi przez rodziców, rówieśników oraz nauczycieli. Ponadto im wyższe poczucie wsparcia deklarują badani, tym lepiej postrzegają siebie. Analiza regresji pokazała, że wsparcie rodzicielskie i rówieśnicze są istotnymi predyktorami samooceny. Zakładanej moderacyjnej roli wsparcia rówieśniczego dla związku wymiaru komunikacji i samooceny nie wykazano.

**Wnioski:** Dobra jakość relacji rodzinnych może sprzyjać zarówno poczuciu wsparcia społecznego, jak i wyższej samoocenie młodzieży. Istotną kwestią jest zadbanie o najbliższe środowisko wychowawcze dzieci oraz poszerzenie przestrzeni wsparcia społecznego młodzieży, które znacząco przekłada się na lepsze postrzeganie siebie i wyższą samoocenę młodych ludzi. Brak istotności związku między wsparciem nauczycielskim a samooceną dzieci może być ważnym sygnałem do dalszych badań, czy wsparcie to występuje w wystarczającym stopniu.

**Słowa kluczowe:** relacje rodzinne, wsparcie społeczne, wsparcie rówieśnicze, wsparcie nauczycielskie, samoocena