EVALUATE THE EFFECTIVENESS OF ASSERTIVENESS TRAINING MODULE ON ASSERTIVE BEHAVIOUR, SELF ESTEEM AND INTERPERSONAL COMMUNICATION SATISFACTION AMONG NURSES WORKING IN SELECTED HOSPITALS: A PILOT STUDY

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DOI: <http://doi.org/10.47211/trr.2021.v07i01.009>

ABSTRACT

Assertiveness is not something that is inherited. Assertiveness is a skill that anyone could learn if he decided to, lack of assertiveness is only rooted to the way of dealing with others you got used to, this way may be letting go of your rights or fear of standing up for yourself. Being assertive requires only thing, your decision. The research design used for this study was quasi-experimental, pre-test post-test control group design. Total 60 Nurses who met inclusive sampling criteria were selected and allocated 30 to experimental group and 30 control group by using non-probability, convenient sampling technique. The data was collected by using socio-demographic data, Rathus Assertiveness Schedule for assertiveness, Rosenberg Self Esteem Scale for self-esteem and interpersonal communication satisfaction inventory for interpersonal communication satisfaction respectively. The Participants of the experimental group were administered Assertiveness training module in 7 sessions, each day one session and outcome variables were measured at three points in time; before intervention, 7th day after intervention and one month after intervention. The data was collected from November 2019. The effect of intervention was analyzed by repeated- measures ANOVA. The calculated student independent 't' test value of ($t = 6.484$, $P = 4.45$) for assertiveness, ($t = 5.440$, $P = 2.65$) for self-esteem and ($t = 7.119$, $P = 5.427$) for interpersonal communication satisfaction at the post intervention 2 shows that there was significant improvement in nurses' level of assertiveness, self-esteem and interpersonal communication satisfaction after the administration of assertiveness training in experimental group than in control group. Assertive behaviour and self-esteem had weak negative correlation in both groups experimental group & control group at post intervention 2. Assertive behaviour and interpersonal communication satisfaction also had a weak negative correlation in both experimental group & control group at post intervention 2. There was significant association of assertive behavior with socio demographic variables in both experimental group and control group. There was also a significant association of interpersonal communication satisfaction with socio demographic variables in control group. The study result shows that assertiveness training intervention had positive impact on assertiveness, self-esteem, and interpersonal communication satisfaction among nurses.

Key words: Assertiveness Training Module, Assertive Behaviour, Self Esteem, Interpersonal Communication Satisfaction, Nurses.

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INTRODUCTION

Nursing in hospitals involves negotiating complex interpersonal relationships and working in overcome a social and political context within constraints of resources, while balancing a multiplicity of tasks and roles. Nurses are providing care and comfort to those suffering from illness and injury. Nurses communicate with each other, with patients and with members of the health team during delivery of health care, both verbally and nonverbally and transmit their thoughts, feelings and messages.² Nursing research literatures call the nurses to become more assertive.³ Assertiveness has great importance in nursing practice, but that it is complex and requires time and practice to make it effective.⁴

Assertive individuals stand up for their own rights while protecting the rights of others. They assume responsibility for their own choices and allow others to choose for themselves. They communicate tactfully, using lots of "I" statements. They are self-confident and experience satisfactory and pleasurable relationships with others. Individuals who are non-assertive seek to please others at the expense of denying their own basic human rights. They seldom let their true feelings show and often feel hurt and anxious because they allow others to choose for them. They seldom achieve their own desired goals. They come across as being very apologetic and tend to be self-deprecating. Their voices are hesitant, weak, and expressed in a monotone. Their eyes are usually downcast. They feel uncomfortable in interpersonal interactions. All they want is to please and to be liked by others. Their behaviour helps them to avoid unpleasant situations and confrontations with others; however, they often harbour anger and resentment.⁵

Assertiveness is an important behavior for today's professional nurse. As nurses move away from traditional subservient roles and perceived stereotypes it is increasingly being recognized that a nurse needs to behave in an assertive manner. Assertiveness is necessary for effective nurse-patient communication and it is suggested that its development may also aid the confidence of the profession as it develops. Assertive behavior is encouraged through educational methods. It is preferable that nurses receive this educational preparation during undergraduate programmes.⁴

OBJECTIVES OF THE STUDY

1. To assess the Pre-intervention level of Assertive behavior, Self-esteem and Interpersonal Communication Satisfaction among nurses in experimental and control group
2. To administer Assertiveness Training Module on Assertive behaviour, Self esteem and Interpersonal Communication Satisfaction among nurses in experimental group
3. To assess the Post-intervention level Assertive behavior, Self esteem and Interpersonal Communication Satisfaction among nurses in experimental and control group
4. To evaluate the effectiveness of Assertiveness Training Module on Assertive Behaviour, Self-esteem and Interpersonal Communication Satisfaction among nurses in experimental group and control group
5. To find the significant correlation between Assertive behavior with Self esteem among nurses in experimental and control group
6. To find the significant correlation between Assertive behavior with Interpersonal Communication Satisfaction among nurses in experimental and control group
7. To find significant association between Assertive behavior scores with selected socio-demographic variables among nurses in experimental and control group
8. To find significant association between Self esteem scores with selected socio-demographic variables among nurses in experimental and control group
9. To find significant association between Interpersonal communication satisfaction scores with selected socio-demographic variables among nurses in experimental and control group

HYPOTHESES

Hypotheses will test at 0.05 level of significance.

H₁: There will be a statistically significant improvement in assertive behavior score in experimental group nurses compared to control group nurses as assessed by Rathus Assertiveness Schedule.

H₂: There will be statistically significant improvement in self esteem score in experimental group nurses compared to control group nurses as assessed by Rosenberg Self Esteem Scale.

H₃: There will be statistically significant improvement in interpersonal communication satisfaction score in experimental group nurses compared to control group nurses as assessed by Interpersonal Communication Satisfaction Inventory.

H₄: There will be a statistically significant correlation between assertive behavior with self esteem among nurses in experimental and control group.

H₅: There will be a statistically significant correlation between assertive behavior with interpersonal communication satisfaction among nurses in experimental and control group.

H₆: There will be statistically significant association between pre-intervention level of assertive behavior scores with selected socio-demographic variables among nurses in experimental and control group.

H₇: There will be statistically significant association between pre interventional level of self esteem scores with selected socio-demographic variables among nurses in experimental and control group.

H₈: There will be statistically significant association between pre interventional level of interpersonal communication satisfaction scores with selected socio-demographic variables among nurses in experimental and control group.

MATERIALS AND METHODS

The research design used for this study was quasi-experimental, pre-test post-test control group design. Total 60 Nurses who met inclusive sampling criteria were selected and allocated 30 to experimental group and 30 control group by using non-probability, convenient sampling technique. The data was collected by using socio-demographic data, Rathus Assertiveness Schedule for assertiveness, Rosenberg Self Esteem Scale for self esteem and interpersonal communication satisfaction inventory for interpersonal communication satisfaction respectively. The Participants of the experimental group were administered Assertiveness training module in 7 sessions, each day one session and outcome variables were measured at three points in time; before intervention, 7th day after intervention and one month after intervention. The data was collected from November 2019. The effect of intervention was analyzed by repeated- measures ANOVA.

RESULT:

Section I: Socio-demographic characteristics

Table 1: Frequency and percentage distribution of Socio-demographic variables of nurses in experimental and control group

Demographic Variables	Experimental Group		Control Group	
	No.	%	No.	%
Age (in years)				
21 – 30	12	40.0	13	43.3
31 – 40	10	33.3	10	33.3
41 – 50	6	20.0	6	20.0
>50	2	6.7	1	3.3
Gender				
Male	5	16.7	10	33.3
Female	25	83.3	20	66.7
Religion				
Hindu	7	23.3	9	30.0
Christian	18	60.0	16	53.3
Muslim	3	10.0	3	10.0
Others	2	6.7	2	6.7
Marital status				
Married	16	53.3	20	66.7
Unmarried	9	30.0	7	23.3
Divorced/Single	4	13.3	2	6.7
Widow/Separated	1	3.3	1	3.3

N = 60(30+30)

Demographic Variables	Experimental Group		Control Group	
	No.	%	No.	%
Type of family				
Nuclear family	20	66.7	16	53.3
Joint family	9	30.0	14	46.7
Extended family	1	3.3	-	-
Place of residence				
Urban	21	70.0	24	80.0
Rural	9	30.0	6	20.0
Qualification				
GNM	16	53.3	16	53.3
B.Sc. Nursing	5	16.7	3	10.0
P.B.B.Sc. Nursing	6	20.0	8	26.7
PG or above (in nursing)	3	10.0	3	10.0
Monthly Self Income (Rs.)				
Less than 10,000	2	6.7	8	26.7
10,001 – 20,000	8	26.7	10	33.3
20,001 – 30,000	14	46.7	6	20.0
Above 30000	6	20.0	6	20.0
Experience in Nursing (yrs.)				
<1 year	5	16.7	5	16.7
1 – 5 years	13	43.3	13	43.3
6 – 10 years	9	30.0	9	30.0
>10 years	3	10.0	3	10.0
Designation				
Staff nurse	21	70.0	22	73.3
Nurse educator / Supervisor	2	6.7	-	-
Ward In charge	7	23.3	8	26.7
Nature of job				
Regular	13	43.3	17	56.7
Irregular (contractual)	17	56.7	13	43.3
Type of hospital				
Govt.	12	40.0	12	40.0
Private	18	60.0	18	60.0
Area of work (ward)				
General ward	17	56.7	17	56.7
Intensive ward	9	30.0	9	30.0
OPD	4	13.3	4	13.3
Joined nursing as professional career				
Voluntarily	25	83.3	19	63.3
By force of parents / friends	5	16.7	11	36.7

Section II: To assess the Pre-intervention level of Assertive behavior, Self-esteem and Interpersonal Communication Satisfaction among nurses in experimental and control group

Table 2: Frequency and percentage distribution of pre-intervention level of assertive behaviour among nurses in experimental and control group

N = 60(30+30)

Assertive Behaviour	Experimental Group		Control Group	
	No.	%	No.	%
Probably Aggressive (+41 to +90)	1	3.3	1	3.3
Assertive (+21 to +40)	2	6.7	0	0
Somewhat Assertive (0 to 20)	4	13.3	6	20.0
Situationally Non – Assertive (-20 to -1)	12	40.0	11	36.7
Very Non- Assertive (-90 to -21)	11	36.7	12	40.0

Table 3: Frequency and percentage distribution of pre-intervention level of self-esteem among nurses in experimental and control group

N = 60(30+30)

Self-Esteem	Experimental Group		Control Group	
	No.	%	No.	%
Poor Self-Esteem (10– 20)	24	80.0	27	90.0
Moderate Self-Esteem (21– 30)	6	20.0	3	10.0
High Self-Esteem (31– 40)	0	0	0	0

Table 4: Frequency and percentage distribution of pre-intervention level of Interpersonal Communication Satisfaction among nurses in experimental and control group

N = 60(30+30)

Interpersonal Communication Satisfaction	Experimental Group		Control Group	
	No.	%	No.	%
Low interpersonal communication satisfaction (19 – 57)	23	76.7	23	76.7
Moderate interpersonal communication satisfaction (58 – 96)	7	23.3	7	23.3
High interpersonal communication satisfaction (97 – 133)	0	0	0	0

Section III: To assess the post-intervention level Assertive behavior, Self-esteem and Interpersonal Communication Satisfaction among nurses in experimental and control group

Table 5: Frequency and percentage distribution of post intervention 1 level of assertive behaviour among nurses in experimental and control group

N = 60(30+30)

Assertive Behaviour	Experimental Group		Control Group	
	No.	%	No.	%
Probably Aggressive (+41 to +90)	0	0	1	3.3
Assertive (+21 to +40)	19	63.3	0	0
Somewhat Assertive (0 to 20)	9	30.0	5	16.7
Situationally Non – Assertive (-20 to -1)	2	6.7	15	50.0
Very Non- Assertive (-90 to -21)	0	0	9	30.0

***p<0.05, S–Significant

Table 6: Frequency and percentage distribution of post intervention 2 level of assertive behaviour among nurses in experimental and control group

N = 60(30+30)

Assertive Behaviour	Experimental Group		Control Group	
	No.	%	No.	%
Probably Aggressive (+41 to +90)	0	0	1	3.3
Assertive (+21 to +40)	20	66.7	3	10.0
Somewhat Assertive (0 to 20)	8	26.7	5	16.7
Situationally Non – Assertive (-20 to -1)	2	6.7	14	46.7
Very Non- Assertive (-90 to -21)	0	0	7	23.3

***p<0.05, S –Significant

Table 7: Frequency and percentage distribution of post intervention 1 level of self-esteem among nurses in experimental and control group

N = 60(30+30)

Self-Esteem	Experimental Group		Control Group	
	No.	%	No.	%
Poor Self-Esteem (10 – 20)	5	16.7	23	76.7
Moderate Self-Esteem (21 – 30)	21	70.0	6	20.0
High Self-Esteem (31 – 40)	4	13.3	1	3.3

***p<0.05, S –Significant

Table 8: Frequency and percentage distribution of post intervention 2 level of self-esteem among nurses in experimental and control group

N = 60(30+30)

Self-Esteem	Experimental Group		Control Group	
	No.	%	No.	%
Poor Self-Esteem (10 – 20)	1	3.3	23	76.7
Moderate Self-Esteem (21 – 30)	22	73.3	6	20.0
High Self-Esteem (31 – 40)	7	23.3	1	3.3

***p<0.05, S –Significant

Table 9: Frequency and percentage distribution of post intervention 1 level of Interpersonal Communication Satisfaction among nurses in experimental and control group

N = 60(30+30)

Interpersonal Communication Satisfaction	Experimental Group		Control Group	
	No.	%	No.	%
Low interpersonal communication satisfaction (19 – 57)	2	6.7	21	70.0
Moderate interpersonal communication satisfaction (58 – 96)	16	53.3	9	30.0
High interpersonal communication satisfaction (97 – 133)	12	40.0	0	0

***p<0.05, S –Significant

Table 10: Frequency and percentage distribution of post intervention 2 level of Interpersonal Communication Satisfaction among nurses in experimental and control group

N = 60(30+30)

Interpersonal Communication Satisfaction	Experimental Group		Control Group	
	No.	%	No.	%
Low interpersonal communication satisfaction (19 – 57)	0	0	22	73.3
Moderate interpersonal communication satisfaction (58 – 96)	16	53.3	8	26.7
High interpersonal communication satisfaction (97 – 133)	14	46.7	0	0

***p<0.05, S – Significant

Figure 1: Percentage distribution of pre intervention, post intervention 1 and post intervention 2 level of assertiveness among nurses in experimental and control group

Figure 2: Percentage distribution of pre intervention, post intervention 1 and post intervention 2 level of self esteem among nurses in experimental and control group

Figure 3: Percentage distribution of pre intervention, post intervention 1 and post intervention 2 level of interpersonal communication satisfaction among nurses in experimental and control group

Section IV: To evaluate the effectiveness of Assertiveness Training Module on Assertive Behaviour, Self-esteem and Interpersonal Communication Satisfaction among nurses in experimental group and control group

Table 11: Comparison of post intervention level of assertive behaviour among nurses between the experimental and control group

N = 60(30+30)					
Assertive Behaviour	Experimental Group		Control Group		Mean Diff. Score
	Mean	S. D	Mean	S. D	
Post Intervention 2	20.62	17.64	-9.16	17.64	11.46
					Student Independent 't' test
					t = 6.484 P = 4.45

***p<0.05, S – Significant, N.S – Not Significant

The mean assertive score of nurses in experimental group (20.62) was significantly higher than mean assertive score of nurses in control group (-9.16) at post intervention 2.

The calculated student independent 't' test value of (t = 6.484, P = 4.45) in the post intervention 2 shows that there was significant improvement in nurses' level of assertiveness after the administration of assertiveness training in experimental group than in control group.

Table 12: Comparison of post intervention level of self-esteem among nurses between the experimental and control group

N = 60(30+30)					
Self-Esteem	Experimental Group		Control Group		Mean Diff. Score
	Mean	S. D	Mean	S. D	
Post Intervention 2	25.1	5.02	18.0	5.02	7.1
					Student Independent 't' test
					t = 5.440 P = 2.65

***p<0.05, S – Significant, N.S – Not Significant

The mean self esteem score of nurses in experimental group (25.1) was significantly higher than mean self esteem score of nurses in control group (18.0) at post intervention 2.

The calculated student independent 't' test value of ($t = 5.440$, $P = 2.65$) at post intervention 2 shows that there was significant improvement in nurses' level of self esteem in experimental group than in control group.

Table 13: Comparison of post intervention level of Interpersonal Communication Satisfaction among nurses between the experimental and control group

Interpersonal Communication Satisfaction	Experimental Group		Control Group		Mean Diff. Score	Student Independent 't' test
	Mean	S. D	Mean	S. D		
Post Intervention 2	86.8	16.22	56.96	16.22	29.84	$t = 7.119$ $P = 5.427$

*** $p < 0.005$, S – Significant, N.S – Not Significant

The mean interpersonal communication satisfaction score of nurses in experimental group (86.8) was significantly higher than mean interpersonal communication satisfaction score of nurses in control group (56.96) at post intervention 2.

The calculated student independent 't' test value of ($t = 7.119$, $P = 5.427$) at post intervention 2 shows that there was significant improvement in nurses' level of interpersonal communication satisfaction in experimental group than in control group. Hence, it can be concluded that assertiveness training intervention had positive impact on assertiveness, self-esteem, and interpersonal communication satisfaction.

With respect to hypothesis H_1 , H_2 , and H_3 , subjects who underwent assertive training intervention showed significant improvement in assertive behavior, self-esteem and interpersonal communication satisfaction in experimental group.

Therefore, null hypothesis H_{01} , H_{02} , and H_{03} , was rejected and research hypothesis H_1 , H_2 , and H_3 was accepted.

Section V: To find the significant correlation between Assertive behaviour with Self esteem among nurses in experimental and control group

Table 14: Correlation between post intervention level of assertive behaviour and self-esteem among nurses in the experimental group

N = 30

Variables	Assertive Behaviour		Self Esteem		Karl Pearson's Correlation Value
	Mean	S. D	Mean	S. D	
Post Intervention 2	21.73	20.10	28.09	5.41	$r = -0.026$ $P = 0.891$

*** $p < 0.05$

Assertive behaviour and self-esteem had weak negative correlation ($r = -0.026$, $P = 0.891$) at post intervention 2 in the experimental group.

Table 15: Correlation between post intervention level of assertive behaviour and self-esteem among nurses in the control group

N = 30

Variables	Assertive Behaviour		Self Esteem		Karl Pearson's Correlation Value
	Mean	S. D	Mean	S. D	
Post Intervention 2	-8.69	23.33	17.25	5.76	$r = -0.054$ $P = 0.776$

* $p < 0.05$

Assertive behaviour and self-esteem had weak negative correlation ($r = -0.054$, $P = 0.776$) at post intervention 2 in the control group.

With respect to hypothesis H_4 , it was found that that assertive behaviour and self-esteem had weak negative correlation at post intervention 2 in the experimental group & in control group.

Therefore, null hypothesis H_{04} was rejected and research hypothesis H_4 was accepted.

Section VI: To find the significant correlation between Assertive behavior with Interpersonal Communication Satisfaction among nurses in experimental and control group

Table 16: Correlation between post intervention level of assertive behaviour and Interpersonal Communication Satisfaction among nurses in the experimental group

N = 30

Variables	Assertive Behaviour		Interpersonal Communication Satisfaction		Karl Pearson's Correlation Value
	Mean	S. D	Mean	S. D	
Post Intervention 2	21.73	20.10	85.96	21.31	$r = -0.102$ $P = 0.591$

*** $p < 0.05$, N.S – Not Significant

Assertive behaviour and interpersonal communication satisfaction had a weak negative correlation ($r = -0.102$, $P = 0.591$) at post intervention 2 in the experimental group.

Table 17: Correlation between post intervention level of assertive behaviour and Interpersonal Communication Satisfaction among nurses in the control group

N = 30

Variables	Assertive Behaviour		Interpersonal Communication Satisfaction		Karl Pearson's Correlation Value
	Mean	S. D	Mean	S. D	
Post Intervention 2	-8.68	23.33	56.58	16.39	$r = -0.076$ $P = 0.689$

*** $p < 0.05$, N.S – Not Significant

Assertive behavior and interpersonal communication satisfaction had a weak negative correlation ($r = -0.076$, $P = 0.689$) at post intervention 2 in the control group.

With respect to hypothesis H_5 , it was found that assertive behaviour and interpersonal communication satisfaction had a weak negative correlation at post intervention 2 in the experimental group & in control group

Therefore, null hypothesis H_{05} was rejected and research hypothesis H_5 was accepted.

Section VII: To find significant association between Assertive behavior scores with selected socio-demographic variables among nurses in experimental and control group

There was significant association of assertive behaviour with religion ($\chi^2 = 25.577 > \text{table value} = 21.026$ at $p < 0.05$ level in experimental group.

There was significant association of assertive behaviour with religion ($\chi^2 = 20.579 > \text{table value} = 16.919$) at $p < 0.05$ level in control group.

With regard to hypothesis H_6 it was found that religion had significant association with pretest assertive behaviour scores in both experimental group & in control group.

Hence null hypothesis H_{06} was rejected and research hypothesis H_6 was accepted.

Section VIII: To find significant association between self esteem scores with selected socio-demographic variables among nurses in experimental and control group

There was no significant association of self-esteem with any of socio-demographical variables in experimental group and control group.

With regard to hypothesis H_7 it was found that there was no significant association of self-esteem with any of socio-demographical variables in experimental group and control group.

Hence null hypothesis H_{07} was accepted and research hypothesis H_7 was rejected.

Section IX: To find significant association between Interpersonal communication satisfaction scores with selected socio-demographic variables among nurses in experimental and control group

There was no significant association of interpersonal communication satisfaction with any of socio-demographical variables in experimental group.

There was significant association of interpersonal communication satisfaction with type of family ($\chi^2=3.846$ > table value **3.841**) at $p<0.05$ in control group.

With regard to hypothesis H_8 it was found that type of family had significant association with pretest interpersonal communication satisfaction scores in control group.

Hence null hypothesis H_{08} was rejected and research hypothesis H_8 was accepted.

DISCUSSION

Section I: To evaluate the effectiveness of Assertiveness Training Module on Assertive Behaviour, Self-esteem and Interpersonal Communication Satisfaction among nurses in experimental group and control group

In the present study, the mean assertive score of nurses in experimental group (20.62) significantly increased than mean assertive score of nurses in control group (-9.16) at post intervention 2. The calculated student independent 't' test value of ($t = 6.484$, $P = 4.45$) in the post intervention 2 shows that there was significant improvement in nurses' level of assertiveness.

The present study findings are supported by a study to examine the effects of web-based assertion training programmes for Japanese hospital nurses based on their assertion knowledge, attitude and behaviour, job stress and depression. The results showed that assertion knowledge and voluntary behaviour in assertive behaviour had increased at post-training and remained higher a month later. With regard to job stress, mental workload decreased.⁶

In the present study, the mean self esteem score of nurses in experimental group (25.1) significantly increased than mean self esteem score of nurses in control group (18.0) at post intervention 2. The calculated student independent 't' test value of ($t = 5.440$, $P = 2.65$) at post intervention 2 shows that there was significant improvement in nurses' level of self esteem in experimental group than in control group.

The present study findings are supported by a study assess the effect of assertiveness training program on nurses' self-esteem. The study was conducted at selected Hospitals of the Pune city on 60 nurses (30 in control groups and 30 in experimental groups). The Results showed a significant change was found in self-esteem of nurses after the training program. Researcher concluded that Implementation of assertiveness training program had positive effect on their self-esteem. There is need to implement assertiveness training program for nurse⁷.

In the present study, the mean interpersonal communication satisfaction score of nurses in experimental group (86.8) significantly increased than mean interpersonal communication satisfaction score of nurses in control group (56.96) at post intervention 2. The calculated student independent 't' test value of ($t = 7.119$, $P = 5.427$) at post intervention 2 shows that there was significant improvement in nurses' level of interpersonal communication satisfaction in experimental group than in control group.

The present study findings are supported by a quasi-experimental study to assess the effects of assertive communication in interpersonal relations and social behaviors. The result shows that there were greater significant increases in scores of interpersonal relations and content of communication in the experimental group than the control group⁸.

Section II: To find the significant correlation between Assertive behaviour with Self esteem among nurses in experimental and control group

In the present study, Assertive behaviour and self-esteem had weak negative correlation ($r = -0.026$, $P = 0.891$) at post intervention 2 in the experimental group.

The present study findings are supported by a study conducted to develop and evaluate the effectiveness of assertiveness training module on assertive behaviour, self-esteem, interpersonal communication satisfaction and stress among nurses working in selected hospitals of Punjab. The result shows that assertive behavior and self-esteem had weak positive correlation ($r = 0.272$), indicating that as the assertive behavior increased, self-esteem increased⁹.

Section III: To find the significant correlation between Assertive behavior with Interpersonal Communication Satisfaction among nurses in experimental and control group

In the present study, Assertive behaviour and interpersonal communication satisfaction had a weak negative correlation ($r = -0.102$, $P = 0.591$) at post intervention 2 in the experimental group.

The present study findings are supported by a study conducted to develop and evaluate the effectiveness of assertiveness training module on assertive behaviour, self-esteem, interpersonal communication satisfaction and stress among nurses working in selected hospitals of Punjab. The result shows that assertive behavior had moderate positive correlation ($r = 0.505$) with interpersonal communication satisfaction, indicating that as the assertive behavior increased, interpersonal communication satisfaction increased.⁹

Section IV: To find significant association between Assertive behavior scores with selected socio-demographic variables among nurses in experimental and control group

In the present study, there was significant association of assertive behaviour with religion ($\chi^2 = 25.577 > \text{Table value} = 21.026$). Hence, it can be concluded that religion had significant association with pretest assertive behaviour scores at $p < 0.05$ level in experimental group. There was significant association of assertive behaviour with religion ($\chi^2 = 20.579 > \text{Table value} = 16.919$). Hence, it can be concluded that religion had significant association with pretest assertive behaviour scores at $p < 0.05$ level in control group.

The present study findings are supported by a study conducted to develop and evaluate the effectiveness of assertiveness training module on assertive behaviour, self-esteem, interpersonal communication satisfaction and stress among nurses working in selected hospitals of Punjab. The result shows that there was significant association of assertive behaviour with age ($F = 15.8$, $p = 0.001$), number of siblings ($t = -2.02$, $p = 0.044$), family per capita monthly income ($F = 8.33$, $p = 0.001$), type of nursing schools/colleges ($t = 4.27$, $p = 0.001$), nature of job ($t = 6.54$, $p = 0.001$) and place of work ($t = 6.98$, $p = 0.001$). Hence, it can be concluded that age, number of siblings, monthly per capita family income, type of nursing schools/colleges, nature of job and type of working hospital had significant association with assertive behaviour.⁹

Section V: To find significant association between Interpersonal communication satisfaction scores with selected socio-demographic variables among nurses in experimental and control group

In the present study, there was significant association of interpersonal communication satisfaction with type of family ($\chi^2 = 3.846 > \text{table value} = 3.841$) at $p < 0.05$. Hence, it can be concluded that type of family had significant association with pretest interpersonal communication satisfaction scores in control group.

The present study findings are supported by a study conducted to develop and evaluate the effectiveness of assertiveness training module on assertive behaviour, self-esteem, interpersonal communication satisfaction and stress among nurses working in selected hospitals of Punjab. The result shows that there was significant association of interpersonal communication satisfaction with age ($F = 5.23$, $p = 0.002$), family per capita monthly income ($F = 3.73$, $p = 0.025$), type of nursing college studied ($t = 2.18$, $p = 0.03$) and designation ($F = 3.06$, $p = 0.049$). Hence, it can be concluded that age, monthly per capita family income, type of nursing schools/colleges studied and designation had significant association with interpersonal communication satisfaction.⁹

CONCLUSION

The study result shows that assertiveness training intervention had positive impact on assertiveness, self-esteem, and interpersonal communication satisfaction among nurses. Assertive behaviour and self-esteem had weak negative correlation in both groups experimental group & control group at post intervention. Assertive behaviour and interpersonal communication satisfaction also had a weak negative correlation in both experimental group & control group at post intervention. There was significant association of assertive behavior with socio demographic variables in both experimental group and control group. There was also a significant association of interpersonal communication satisfaction with socio demographic variables in control group.

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