EFFECT OF ASSERTIVENESS TRAINING ON NURSE INTERNS LEVEL OF ASSERTIVENESS AND SELF-ESTEEM IN ENUGU NIGERIA; A QUASI EXPERIMENTAL STUDY

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ABSTRACT

Nurses make up the largest proportion of the health workforce and their ability to be assertive with high self-esteem is the key to reducing major medical errors and observing early signs of unsafe condition in care delivery. The aim of this study was to investigate the effect of assertiveness training on assertive behaviour and self-esteem of nurse interns in tertiary hospitals in Enugu. The study adopted a quasi-experimental design using two instruments: Rathus assertiveness scale and Rosenberg self esteem scale. A total population of ninety-nine (99) nurse interns participated in the study. Reliability test of the instruments showed (r) of 0.86 for Rosenberg self-esteem Scale, and (r) of 0.92 for Rathus assertiveness scale. Post-test data were collected one week and six (6) weeks after the assertiveness training from the intervention groups. Data were analysed using descriptive and inferential statistics. The findings revealed that the level of assertiveness of the nurse interns was low (Control (C) =22.5, Intervention (I) =19.6), while the level of self-esteem of the nurse interns was moderate (C= 45.5, I=41.1. There was a significant increase in the assertive behaviour and self-esteem of the nurse interns six weeks after the intervention (t = 2.35, P = 0.02 at P < 0.05); (t = 2.35, P = 0.02 at P < 0.05) respectively. The level of self-esteem was significantly higher for nurse interns who were assertive than for those who were non-assertive (P-value = .000). Nurse interns in Nigeria currently have relative low level of assertiveness, however their level of self esteem is moderately high.

Keywords: Training, assertiveness, self-esteem, nurse interns, Enugu

INTRODUCTION

Assertive behaviour and low self-esteem have been found to be major problems in the nursing profession. Literature has shown that nurses have low self esteem and their level of assertiveness is also quite low (Bulut, 2018). Globally and in Africa, many studies have shown that nurses level of self-esteem is low (Eldeeb, et. al., 2014; Galanakis, 2016). A meta analysis conducted by Okuyama, et. al., (2014) revealed that during the 1970s and 1980s, research demonstrated that nurses are submissive helpers and were less assertive. The study in 1990s demonstrated that at least one population of nurses was assertive and studies after 2000 suggested that nurses behave in a passive way, conforming to the stereotype of a 'nice' nurse, and were less likely to disagree with others.

Nurse interns today are the backbone of professional nurses of tomorrow; and since nurses are being trained to move away from their traditional roles, it is being increasingly recognized that they need to behave in an assertive manner in the various situations they encounter in the workplace. In order to ensure competent and safe practice, it is necessary for them to be individuals with high assertive skills and self-esteem. High level of self-esteem is considered important both in managing the demands placed on nurse interns during the hospital training and in developing a strong and therapeutic relationship with patients. Similarly, it influences how interns think, feel, motivate, and act which undoubtedly affects the care patients receive (Abed et.al, 2015). Nurse interns in hospitals need to be people with high level of self-esteem and assertiveness to be able to communicate comfortably and use their professional knowledge and skills more effectively as well as, reduce the rate of stress experienced (Katz, 2013). It is one of the objectives of nursing education to develop highly self-worth, self-respect, and self-confident

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nursing professionals who are able to demonstrate assertive interpersonal behaviours (Begley and Glacken, 2004; Küçük, et. al., 2008; Kashani and Bayat, 2010). While assertiveness is necessary for effective nurse/patient communication, a study found that some nursing students lacked confidence, while others lacked basic communication skills during their study (Gilmartin, 2000).

Assertive training programme is a psychological intervention that helps participants learn to integrate assertive behavioural skills into their everyday lives (Reece, 2012).). Studies have shown that both assertiveness and self-esteem are influenced by education (Bal, 2003; Yılmaz, 2000). It can be seen as a systemic approach to more assertive self-expression, based on a balance between achieving nurse interns' goals and respecting the other individuals' needs.

Literature supports that assertive behaviour can be learnt and its use in clinical practice cannot be over emphasized; it is significantly important to implement assertiveness training programme for nurse interns with the hope of increasing their assertive skills and self-esteem. Hence the objective of this study is to determine the effect of assertiveness training on nurse interns level of assertive behaviour and self-esteem in the study area.

MATERIALS AND METHODS

A Quasi-experimental design (non-equivalent pretest-posttest) was adopted for this study among nurse interns in tertiary institutions in Enugu. Quasi experimental studies are often carried out to evaluate the effectiveness of a treatment like an educational intervention or a therapy (Price, et. al, 2017). The study population were all the nurse interns working in the study area within the period of the study. A total population of ninety-nine nurse interns; fifty-two (52) interns in UNTH and forty seven (47) in FNPHE. Random sampling was done to select one out of the two hospitals used for this study to serve as intervention group while the other served as the control group. The interns in the intervention group who indicated interest in the study were given the consent form to sign and recruited into the study.

The programme was made of two main parts; the first theoretical part covered knowledge about introduction to the program, definition and importance, types, and components of assertiveness, types and categories of assertive responses, assertive behaviours, how to ask for request, conflict management skills, unassertive thoughts and ways used to challenge thoughts, how to handle anger and reduce physical tension, how to say no, how to deal with criticism and disappointment, and how to give and accept compliment. However, the second part which is the practical part was applied in the form of giving activities and situations for nurse interns about assertiveness skills and the technique of assertive communication was exposed using a video documentary. This was usually followed by a question and answer session. A detailed protocol was written for the interns' home study at the end of the training. The researcher used various teaching methods; lecture, demonstration, group discussions and assignment to attract interns' attention and motivate them to participate. A WhatsApp group was formed for the intervention group to discuss daily encounters, expressing ideas without being aggressive, to serve as reminders on how to talk and relate to others on a daily basis.

Two standardized instruments and one researcher developed socio-demographic questionnaire were used for the study; Rathus Assertiveness Schedule a 30 item schedule for measuring assertiveness developed by Rathus Spencer. It is a standardized, short structured, self-administered six point rating scale. Seventeen (17) of the items are described as negative/ passive and 13 of them as positive. The six points rating has its scoring range from very uncharacteristic of me (-3) to (+3) very characteristic of me. Scores range between -90 to +90. Higher positive scores indicate that subjects perceived themselves as being high assertive in their relationships with other people. In other words, their assertive behaviour is positive. Rosenberg Self-Esteem scale – is a 10 item questionnaire completed by an individual with each answer scored on scale of 0 to 3 which consist of positive and negative questions designed to measure the level of Self-Esteem. In this questions 1,3,4,7, and 10 have positive scores

and the questions 2, 5, 6, 8 and 9 have negative scores. The responses to self-esteem items were measured on four-point Likert scale ranging from strongly agree (4) to strongly disagree (1); while negative items will be scored in reverse order. For each domain of self-esteem item, the scores of the items will be summed-up and the total divided by the number of the items. It was adapted to include nursing specific items. The total items came to 20 questions.

Before conducting the study, a brief self-introduction and explanation regarding the nature and purpose of the intervention was given to the interns. Written consent was obtained from the respondents. Pre-test was conducted using Rathus assertiveness schedule and Rosenberg Self-Esteem scale to assess the level of assertive behaviour and self-esteem among the interns on day 1. This was given to both the experimental and control groups. The assertiveness training package was provided to the subjects in the intervention group for four (4) consecutive weeks. Subsequently, the second data was collected from the intervention group one week after the educational programme, the third data was collected from intervention group six (6) weeks post intervention while second data (for control group) was also collected 6 weeks post

intervention. Data collection lasted for three months.

Method of Data Analysis

Descriptive statistics of frequency, percentages and means were used to compute the socio-demographic characteristics of the respondents. Inferential statistics of Chi-square test was used to analyze hypothesis one to determine the effect of assertiveness training on self-esteem and assertiveness in both groups. Pearson Product Moment Correlation (r) was used to determine the relationship between the nurse interns' level of assertiveness and self-esteem with socio-demographic variables and t-test of significance was used to test the hypothesis to determine whether the relationships were statistically significant. A p-value < 0.05 was considered statistically significant.

RESULTS

Findings indicate that the mean age of the respondents was 27 (SD $\pm$ 2.8) years. A greater proportion of the participants were females (70.3) while males were 29.6%. More than eighty percent were single while just 15% of the nurse interns were married. A little above half (50.5%) were from UNTH while the rest were from FNPHE (49.5%) (see table 1).

Table 1: Socio-demographic Characteristics of the Participants (n = 91)

Variables	Options	Frequency (f)	Percentage (%)
Age	22 – 24 years	7	7.7
	25 – 27 years	48	48.9
	28 years and above	36	40.0
	27 ± 2.8years		
Mean (±SD) age			
	Male	27	29.6
Gender	Female	64	70.3
	Single	77	84.6
Marital status	Married	14	15.4
	UNTH	46	50.5
Institution	FNPHE	45	49.5

Findings indicate that the aggregate level of assertiveness for nurse interns in the control and experimental group before the intervention was 22.5 (out of a possible 90) and 19.6 (out of a possible 90) respectively. These findings show

that the level of assertiveness of the nurse interns was low in both groups. However, it was observed to be lower for those in the experimental group than for those in the control group. See table 2

Table 2: Perceived Level of Assertiveness of Nurse Interns before the Intervention (n = 91)

Item	Pretest (control group)							Pre-test (experimental group)						
	VML	RL	SL	SU	RU	VMU	Mean ± SD	VML	RL	SL	SU	RU	VMU	Mean ± SD
Most people seem to be more aggressive and assertive than I am	16	8	6	2	3	10	1.2 ± 0.8	12	10	5	4	2	12	0.8 ± 1.0
I hesitate to make or accept dates because of 'shyness'	8	16	4	2	6	9	0.6 ± 0.9	6	13	8	3	4	11	0.7 ± 1.0
When the food served at a restaurant is not done to my satisfaction, I complain about it to the waiter	13	9	7	4	8	4	0.4 ± 1.0	14	4	10	7	4	6	1.0 ± 0.9
I am careful to avoid hurting other people's feelings, even when I feel that I have been injured	20	10	9	1	2	3	1.7 ± 0.9	20	11	5	1	4	4	0.1 ± 0.8
I have a difficult time to say 'no' to a salesperson who has gone to considerable trouble to show me m erchandise that is not suitable	15	9	6	5	5	5	0.8 ± 0.5	8	8	7	7	3	12	0.6 ± 0.7
When I am asked to do something, I insist upon knowing why	19	12	5	4	4	1	1.3 ± 1.1	9	3	9	12	7	5	0.7 ± 1.0
There are times when I look for a good, vigorous argument	14	13	7	3	3	5	1.2 ± 1.1	8	5	4	4	16	8	1.0 ± 0.7
I strive to get ahead as well as most people in my position	24	8	10	1	2	0	1.9 ± 0.9	18	9	11	5	2	0	0.5 ± 0.6
To be honest, people often take advantage of me	3	9	10	5	6	12	0.04 ± 0.8	15	8	10	1	8	3	-0.2 ± 1.0
I enjoy start ing conversations with new acquaintances and strangers	14	11	11	3	3	3	1.2 ± 0.5	13	4	7	6	12	3	0.8 ± 1.0
I often don't know what to say to people I find attractive	9	8	14	4	3	7	0.8 ± 0.9	6	7	13	5	6	8	0.8 ± 0.9
I hesitate to make phone calls or answer calls of people I do not know	6	12	10	10	4	3	0.5 ± 1.1	14	7	8	5	6	5	1.5 ± 1.0
I would rather apply for a job or admission by writing a letter than going through personal interviews	7	10	8	3	6	11	0.3 ± 1.0	15	15	2	2	11	0	0.5 ± 0.8
I find it hard to return merchandise	11	9	7	6	3	9	0.8 ± 1.0	8	8	11	1	8	9	0.5 ± 0.7
If a close or respected relative was annoying me, I would hide my feelings rather than express my annoyance	10	6	13	3	7	6	0.4 ± 0.8	10	9	5	9	4	8	0.6 ± 1.0

VML (3) – very much like me; RL (2) – rather like me; SL (1) – slightly like me; SU (-1) – slightly unlike me; RU (-2) – rather unlike me; VMU (-3) – very much unlike me

Item	Pre-test (control group)							Pre-test (experimental group)						
	VML	RL	SL	SU	RU	VMU	Mean ± SD	VML	RL	SL	SU	RU	VMU	Mean ± SD
I have avoided asking questions for fear of sounding stupid	13	10	8	1	4	9	1.0 ± 0.8	11	10	1	5	9	9	1.2 ± 1.0
During an argument, I am sometimes afraid that I will get upset	10	15	4	1	5	10	0.8 ± 1.0	12	6	4	5	9	9	0.3 ± 0.5
If a famed and respected lecturer makes a comment which I think is incorrect, I will have the audience hear my point of view as well	13	13	6	2	6	5	0.8 ± 1.1	5	7	1	12	9	11	-0.1 ± 1.0
I avoid arguing over prices with clerks and sales people	11	8	5	6	8	7	0.2 ± 1.0	11	11	11	1	4	7	1.1 ± 0.9
When I have done something important or worthwhile, I manage to let others know about it	13	4	12	5	7	4	0.4 ± 1.0	14	10	6	2	9	4	0.9 ± 0.8
I am open and frank about my feelings	21	6	8	4	5	1	1.2 ± 0.5	17	11	2	2	7	6	0.6 ± 1.0
If someone has been spreading false and bad stories about me, I see him or her as soon as possible and 'have a talk about it	16	6	8	9	1	5	1.2 ± 0.6	7	9	3	6	6	14	0.8 ± 1.1
I often have a hard time saying 'no'	7	8	10	4	8	8	0.1 ± 1.0	17	6	3	9	2	8	0.6 ± 0.6
I tend to bottle up my emotions rather than mak e a scene	19	10	5	5	4	2	1.2 ± 0.9	14	14	3	4	6	4	1.0 ± 0.5
I complain about poor service in a restaurant and elsewhere	7	6	5	12	10	5	-0.5 ± 1.0	9	8	8	3	9	8	1.0 ± 0.7
When I am given a compliment, I sometimes just don't know what to say	12	7	6	2	8	10	0.3 ± 1.1	9	10	4	12	6	4	0.7 ± 0.6
If people near me at a lecture were conversing rather loudly, I would ask them to be quiet or to take their conversation elsewhere	12	7	8	5	8	5	0.3 ± 0.6	13	8	3	2	12	7	-0.1 ± 0.7
Anyone attempting to push ahead of me in a line is in for a good battle	11	8	7	6	9	4	0.3 ± 0.8	7	10	4	7	9	8	0.02 ± 0.5
I am quick to express an opinion	14	11	6	3	6	5	0.1 ± 0.6	7	6	8	5	12	7	0.3 ± 0.6
There are times when I just can't say anything	21	5	6	3	3	7	0.8 ± 1.0	12	12	8	3	8	2	1.3 ± 0.9
Aggregate level of assertiveness							22.5							19.6

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Findings indicate that the aggregate level of self-esteem for nurse interns in the control and experimental group before the intervention was 45.5 (out of a possible 80) and 41.1 (out of a possible 80) respectively. These findings show that the level of self-esteem of the nurse interns was low. However, it was lower for nurse interns in the experimental group than for those in the control group. See table 3

Table 3: Perceived Level of Self-Esteem of Nurse Interns before the Intervention (n = 91)

Item	Pre-test (control group)					Pre-test (experimental group)				
	SA	A	D	SD	Mean ± SD	SA	A	D	SD	Me
On the whole, I am satisfied with myself	5	16	9	16	2.2 ± 0.7	10	11	12	12	2.2
At times I think I am no good at all	6	8	18	14	2.1 ± 0.6	9	13	13	10	2.2
I feel that I have a number of good qualities	12	12	10	12	2.5 ± 0.9	3	14	13	15	1.8
I am able to do things as well as most other people	11	15	8	12	2.5 ± 0.7	15	12	10	8	2.5
I feel I do not have much to be proud of	5	9	20	12	2.2 ± 0.9	17	12	6	10	2.7
I certainly feel useless at times	5	6	13	22	1.9 ± 0.7	1	0	15	29	1.1
I feel that I'm a person of worth, at least on an equal plane with others	13	7	11	15	2.4 ± 0.8	15	0	1	29	2.0
I wish I could have more respect for myself	2	10	12	22	1.8 ± 0.4	14	11	10	10	2.4
All in all, I am inclined to feel that I am a failure	5	4	16	21	1.8 ± 0.6	11	3	19	12	1.9
I take a positive attitude toward myself	14	16	13	3	2.9 ± 0.6	10	15	10	10	2.3
I am not comfortable telling people that I am a nurse	3	8	10	25	1.8 ± 0.9	5	17	14	9	2.1
I don't like wearing uniform outside the hospital	6	9	19	12	2.2 ± 0.6	5	3	19	18	1.5
I feel self-conscious if somebody watches me while I am at work	5	10	17	14	2.1 ± 0.6	9	14	3	19	2.2
I lack confidence in my nursing judgment	13	11	6	16	2.5 ± 0.7	11	1	21	12	1.8
I express my frustration and anger inappropriately	10	17	13	6	2.7 ± 0.4	5	1	30	9	1.4
I feel worried about people confonting me	6	12	17	11	2.3 ± 0.7	13	12	8	12	2.4
I allow others make decisions on my behalf	2	14	9	21	1.9 ± 0.9	5	13	13	14	1.9
The society appreciates me and my profession	5	13	10	18	2.1 ± 0.9	10	13	15	7	2.2
I verbally agree with others despite my real feelings	7	19	11	9	2.5 ± 0.9	8	19	16	2	2.4
I avoid eye contact or keep voice low	17	16	9	4	3.0 ± 0.9	11	10	11	13	2.2
Aggregate level of self-esteem					*45.5*					*41.*

Findings indicate that the aggregate level of assertiveness for nurse interns during the post-test a week after the intervention was 23.0 (out of a possible 90) while it was 29.1 (out of a possible 90) six weeks after the intervention. These findings show that the level of assertiveness of the nurse interns increased after the intervention. However, it was observed to be higher in the post-test six weeks after the intervention than in the post test a week after the intervention. See table 4

Table 4: Perceived Level of Assertiveness of Nurse Interns after the Intervention (n = 45)

Item	Post-test 1							Post-test 2						
	VML	RL	SL	SU	RU	VMU	Mean ± SD	VML	RL	SL	SU	RU	VMU	Mean ± S
Most people seem to be more aggressive and assertive than I am	16	8	6	2	3	10	1.2 ± 1.0	22	12	0	5	4	2	1.4 ± 0.9
I hesitate to make or accept dates because of 'shyness'	8	16	4	2	6	9	0.6 ± 0.9	13	18	1	6	3	4	1.2 ± 0.6
When the food served at a restaurant is not done to my satisfaction, I complain about it to the waiter	13	9	7	4	8	4	0.4 ± 0.7	19	10	2	6	4	4	1.2 ± 0.8
I am careful to avoid hurting other people's feelings, even when I feel that I have been injured	20	10	9	1	2	3	1.7 ± 1.1	20	11	5	1	4	4	1.5 ± 1.0
I have a difficult time to say 'no' to a salesperson who has gone to considerable trouble to show me merchandise that is not suitable	15	9	6	5	5	5	0.9 ± 1.2	12	16	0	7	7	3	0.6 ± 0.9
When I am asked to do something, I insist upon knowing why	19	12	5	4	4	1	1.4 ± 0.5	12	17	1	7	5	3	0.9 ± 0.7
There are times when I look for a good, vigorous argument	14	13	7	3	3	5	1.3 ± 0.8	16	10	6	5	4	4	1.1 ± 0.8
I strive to get ahead as well as most people in my position	24	8	10	1	2	0	1.3 ± 0.9	18	16	4	5	2	0	1.7 ± 1.0
To be honest, people often take advantage of me	3	9	10	5	6	12	1.9 ± 1.0	20	5	8	1	8	3	0.8 ± 1.0
I enjoy starting conversations with new acquaintances and strangers	14	11	11	3	3	3	0.04 ± 1.0	20	7	7	6	4	3	1.2 ± 1.0
I often don't know what to say to people I find attractive	9	8	14	4	3	7	1.3 ± 0.9	14	8	7	5	5	6	0.8 ± 0.7
I hesitate to make phone calls or answer calls of people I do not know	6	12	10	10	4	3	0.8 ± 1.0	14	8	7	6	5	5	0.8 ± 1.0
I would rather apply for a job or admission by writing a letter than going through personal interviews	7	10	8	3	6	11	0.5 ± 0.8	20	15	6	2	2	0	1.9 ± 0.6
I find it hard to return merchandise	11	9	7	6	3	9	0.4 ± 1.1	20	2	6	8	8	1	0.5 ± 0.8
If a close or respected relative was annoying me, I would hide my feelings rather than express my annoyance	10	6	13	3	7	6	1.0 ± 0.8	15	5	8	8	5	4	0.7 ± 1.0

Item	Post-test 1						Mean ± SD	Post-test 2					
	VML	RL	SL	SU	RU	VMU		VML	RL	SL	SU	RU	VMU
I have avoided asking questions for fear of sounding stupid	13	10	8	1	4	9	0.8 ± 1.0	11	10	9	9	5	1
During an argument, I am sometimes afraid that I will get upset	10	15	4	1	5	10	0.9 ± 1.1	12	9	9	6	5	4
If a famed and respected lecturer makes a comment which I think is incorrect, I will have the audience hear my point of view as well	13	13	6	2	6	5	0.2 ± 1.0	19	4	9	5	7	1
I avoid arguing over prices with clerks and sales people	11	8	5	6	8	7	0.4 ± 1.2	11	11	11	7	4	1
When I have done something important or worthwhile, I manage to let others know about it	13	4	12	5	7	4	1.2 ± 0.7	14	10	9	4	6	2
I am open and frank about my feelings	21	6	8	4	5	1	1.2 ± 0.3	17	11	2	2	7	6
If someone has been spreading false and bad stories about me, I see him or her as soon as possible and 'have a talk' about it	16	6	8	9	1	5	1.2 ± 0.8	14	9	7	6	6	3
I often have a hard time saying 'no'	7	8	10	4	8	8	0.1 ± 0.6	17	9	8	6	3	2
I tend to bottle up my emotions rather than make a scene	19	10	5	5	4	2	1.3 ± 0.9	14	14	6	3	4	4
I complain about poor service in a restaurant and elsewhere	7	6	5	12	10	5	-0.5 ± 0.8	18	9	8	4	3	3
When I am given a compliment, I sometimes just don't know what to say	12	7	6	2	8	10	0.3 ± 0.8	12	10	9	6	4	4
If people near me at a lecture were conversing rather loudly, I would ask them to be quiet or to take their conversation elsewhere	12	7	8	5	8	5	0.3 ± 0.9	13	12	8	7	3	2
Anyone attempting to push ahead of me in a line is in for a good battle	11	8	7	6	9	4	0.1 ± 0.7	10	9	8	7	7	4
I am quick to express an opinion	14	11	6	3	6	5	0.8 ± 0.5	12	8	7	7	5	6
There are times when I just can't say anything	21	5	6	3	3	7	1.4 ± 1.1	12	12	8	8	3	2
Aggregate level of assertiveness							23.0						

Findings indicate that the aggregate level of self-esteem for nurse interns during the post-test a week after the intervention was 45.3 (out of a possible 80) while it was 50.2 (out of a possible 80) six weeks after the intervention. These findings suggest that the level of self-esteem of the nurse interns increased after the intervention. However, the increase in the level of self-esteem of the participants was observed to be higher during the post-test six weeks after the intervention than in the post test a week after the intervention. See table 5.

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Table 5: Perceived Level of Self-Esteem of Nurse Interns after the Intervention (n = 45)

Item	Post-test 1					Post-test 2				
	SA	A	D	SD	Mean ± SD	SA	A	D	SD	Mean ± SD
On the whole, I am satisfied with myself	15	15	6	9	2.7 ± 1.0	20	10	6	9	2.8 ± 0.1
At times I think I am no good at all	9	13	13	10	2.2 ± 0.9	13	21	6	5	2.8 ± 0.9
I feel that I have a number of good qualities	15	13	8	9	2.6 ± 0.5	26	10	5	4	3.2 ± 1.1
I am able to do things as well as most other people	15	17	5	8	2.8 ± 0.5	21	17	2	5	3.2 ± 0.8
I feel I do not have much to be proud of	22	12	6	5	3.0 ± 0.5	22	12	6	5	3.0 ± 0.5
I certainly feel useless at times	11	0	15	19	1.7 ± 0.7	11	0	15	19	1.7 ± 0.9
I feel that I'm a person of worth, at least on an equal plane with others	15	10	1	19	2.4 ± 0.8	25	17	3	0	3.4 ± 0.5
I wish I could have more respect for myself	14	11	10	10	2.4 ± 0.8	14	11	10	10	2.4 ± 0.8
All in all, I am inclined to feel that I am a failure	16	3	14	12	2.2 ± 0.8	16	3	14	12	2.2 ± 0.8
I take a positive attitude toward myself	20	10	10	5	2.8 ± 0.7	30	10	5	0	3.4 ± 0.9
I am not comfortable telling people that I am a nurse	5	17	14	9	2.1 ± 0.9	10	15	11	9	2.3 ± 1.0
I don't like wearing uniform outside the hospital	5	3	19	18	1.5 ± 0.9	5	3	19	18	1.5 ± 0.6
I feel self-conscious if somebody watches me while I am at work	9	14	3	19	2.2 ± 0.6	11	12	3	19	2.3 ± 0.6
I lack confidence in my nursing judgment	11	1	21	12	1.8 ± 0.7	11	1	21	12	1.8 ± 0.7
I express my frustration and anger inappropriately	6	10	20	9	2.8 ± 0.9	12	8	18	7	2.2 ± 0.9
I feel worried about people confronting me	13	12	8	12	2.4 ± 0.4	13	12	8	12	2.4 ± 0.7
I allow others make decisions on my behalf	5	13	13	14	1.9 ± 0.6	5	13	13	14	1.9 ± 0.8
The society appreciates me and my profession	10	13	15	7	2.2 ± 0.8	30	8	4	3	3.4 ± 0.9
I verbally agree with others despite my real feelings	8	19	16	2	2.4 ± 0.8	11	11	11	12	2.2 ± 0.7
I avoid eye contact or keep voice low	11	10	11	13	2.2 ± 0.6	11	10	11	13	2.2 ± 0.6
Aggregate level of selfesteem					45.3					50.2

* SA – strongly agree (4); A – agree (3); D – disagree (2); SD – strongly disagree

Table 6 revealed that the level of self-esteem was significantly higher for nurse interns who were assertive than for those who were non-assertive (P-value = .000). Also, it indicates that nurse interns who were non-assertive were about 0.46 times less likely to have a high self-esteem (AOR = 0.46; 95% CI 0.312 – 0.691).These findings indicate that there was significant association between the level of assertiveness of nurse interns and their level of self-esteem (χ2 = 11.356, P< 0.01). see table 6

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Table 6: Association between Level of Assertiveness of Nurse Interns and their Level of Self Esteem (n = 45)

		Assertiveness		X^2	P-value	AOR	95% C. I.
		Assertive N (%)	Non-assertive N (%)				
Self esteem	High	15 (53.6)	13 (46.4)	11.356	0.001[a]	0.46	0.312*
	Low	0 (0.0)	17 (100.0)				0.691**

*Chi-square test at P < 0.01; [a] – Fishers correction factor; AOR – Odds Ratio (Assertive/non-assertive); * - lower bound; ** - upper bound*

DISCUSSION

Nursing is a caring and relationship profession and the attitude of nurses towards their patients and relatives have a role in the outcome of care. Findings from this study revealed that the level of assertiveness of nurse interns was quite low. This result agrees with other studies done in Africa, Asia, and United Kingdom (Bulut, et.al (2018); Eom and Choi (2010); Murray et.al (2006); *Timmins and McCabe, 2016*). This low level of assertiveness is a source of concern for the nursing profession considering the fact that it is a problem both in developing and developed countries. Part of the reason for poor assertiveness among nurses in developing countries may be the socio-cultural angle which supports gender inequality, considering the fact that nursing profession is predominantly populated by the female gender. Another reason could be the way nursing care is structured. Majority of the nursing tasks are procedural, with the added regimented pattern of training which does not allow them to speak up to the seniors or correct them when they are wrong. They are trained to obey orders of senior colleagues and other members of the health care team, thus this does not allow the intelligent nurse to be creative and think outside the box on better and more effective ways to render care.

The result also revealed that some of the specific items which showed very low assertiveness actually categorized some interns as passive. For example the item 'to be honest, people take advantage of me' showed that most of the participants were passive. Passive individuals are the opposite of assertive people on one hand and aggressive persons on the other hand. These passive individuals do not know how to communicate their feelings and tend to fear conflict so much that they hide their emotions in order to keep peace. In other words, they let their needs go unmet and this indirectly leads to either aggressive or passive-aggressive behaviour.

This finding of low assertiveness has a lot of negative impact on the healthcare system generally and the nursing profession specifically. Assertiveness has been seen as an essential skill that enhance nurses ability to be independent, capable of intelligent decision making and prudent to avoid breaching other peoples' rights (Hunt-Slamow, 2007) Being assertive involves being able to identify when others are trying to manipulate one (e.g. by making you feel guilty) and not allowing them to do so. Not being assertive makes it difficult to be respected as an individual or even group and this gives room for disrespect and by extension low self worth.

Many studies have revealed that assertiveness is necessary for effective nurse/patient communication and a major factor in reducing medical errors, patients risk and more importantly improving the quality of nursing care rendered to patients. (Gilmartin, 2000; McVanel and Morris, 2010). Being assertive is essential to building and maintaining healthy boundaries and self-respect. In addition, there is currently no curriculum significantly addressing behavioural aspect of care for the nursing students. Addressing this concern should be the starting point in improving the level of assertiveness of the nursing students. Nurse educators and curriculum developers are likely to assist in this regard. It is also important that assertiveness culture is developed among nurses because the

young graduates may be a weak link in the chain of litigation which is gradually becoming the norm in Nigeria's health sector. It is important to note that many countries with high level of litigation have emphasized assertiveness training for nurses (Shrestha, 2019; Maheshwari and Gill, 2015).

Interestingly, there was overall improvement in the assertiveness scores of the nurse interns six weeks after the intervention. Studies have shown that improved assertiveness increased the cooperation and commitment of the nurses with the other team members, their job satisfaction, professionalism and quality of patient care while reducing their job stress (Timmis and Mccabe, 2005; Taghavilarijani et.al. 2010). This situation was also reported to reduce the job dissatisfaction, burnout, job stress which can occur in nursing that is an intense and stressful profession while increasing the self-confidence of the individual (Koçak et al. 2014). This shows that if assertiveness education is inculcated in the educational curriculum of nurses, the profession will be rewarded with highly assertive graduates. One wonders that in this 21ˢᵗ century when nursing education is being moved into the university; that nurse graduates should be individuals who are highly assertive with high level of self-esteem. Okuyama et al. (2014) in their study revealed that despite the increase in number of graduate nurses, their assertiveness level still remains low. It therefore, becomes imperative that nurse interns in Nigeria need to balance politeness without compromising their level of self esteem and assertiveness. Nurses also need to develop interpersonal and inter professional relationship as a way of addressing the challenge of low assertiveness.

As a measure of assessment of self worth, high level of self esteem is an essential quality expected from young healthcare professionals including the nurses. The level of self esteem has impact on the quality of care patients receive and ability of nurses to cope with the demands of the job. It has been shown that high level of self-esteem is considered necessary in coping with the demands placed on nurse interns during the hospital training and in developing a strong and therapeutic relationship with patients. Similarly, it influences how interns think, feel, motivate, and act which undoubtedly affect the care their patients receive (Abed et.al. 2015). The result of

this study revealed that the nurse interns have moderate self esteem(C = 45.5, I = 41.1). This moderate level of self-esteem is not unexpected because majority of undergraduate nurses are of above average intelligence to gain admission into tertiary institutions and pass all their qualifying exams. In addition, they are young and beautiful so socially their self-esteem is expected to be relatively high. Presently, nursing is also a very lucrative profession especially in developed world, so, majority of those entering the profession target their practise abroad, so this may also be a source of morale boost for those graduating from the profession. This is in line with the study by Shrestha (2019) on assertiveness and self-esteem among nursing students of Manipal College of Medical Science of Pokhara, Nepal, which revealed moderate level of self-esteem. In addition, the study by Ibrahim (2015) and Fawzy et. al., (2020) revealed moderate to low level of self-esteem among nursing students in Iraq and Egypt respectively. One wonders if this level of self-esteem cuts across continents could it be as a result of how nurses are trained or does it come from activities inherent in the health care industry? It is worthy to note that even though there is moderate level of self esteem; specific items relating to nursing scored low. Majority of the interns were not comfortable discussing their profession with people. This may be because of the fact that the society does not place value on the profession. Even in the hospitals, when a patient is sick, the relations will not mention their worries to the nurse who is with them rather they will ask the nurse about the doctor.

There was a marginal increase in the level of self-esteem post intervention among the interns and although it was still within the moderate range it was statistically significant. This shows that the intervention programme raised awareness and had a positive impact on nurse interns' self-esteem. The present finding is in line with the results of Hamoud, et.al. (2011) which revealed that assertive behaviour and self-esteem can be learned and that students can benefit greatly from training programs on self-assertion to increase the skills of assertive behaviour and self-esteem. In another study by Bola and Akin (2014), in Nigeria, to investigate the effect of mentoring and assertive training on

adolescents' self-esteem, they found that there was improvement in the self-esteem of participant after the intervention though there was no significant difference in gender. Also, this result is in disagreement with those of previous studies, the one conducted in Iran by Akbari et al. (2012), who determined the efficacy of assertiveness training on increasing self-esteem and general self-efficacy and the other carried out by Mohamed et al. (2016) and they found that there were significant differences of self-esteem mean scores before and after the implementation. Some people might make the mistake of teaching self-esteem without also putting measures to enhance assertiveness. This emphasizes that there is need to take both self esteem and assertiveness skills as important aspects of nursing training if the impact of their professional practice will be felt both by other members of the healthcare team in general and the patients in particular.

Assertiveness which is the expression of self-esteem affecting the individuals professionally and socially is among the skills which the nurse interns are supposed to acquire. Moreover, assertiveness allows nurses to use their independent functions effectively. The COVID-19 pandemic which has taken hold of the entire world demonstrates clearly the potency of the nursing profession and the importance of nursing education. Being the frontline health workers, nurses need the acquisition of assertiveness skills that will ensure a fast adaptation to extraordinary situations. The nurses who have low-level self-esteem and are unassertive can exhibit negative professional attitudes and behaviours. These skills are necessary for nurses to transfer their professional knowledge and skills to the care they offer, increase the quality of care, be effective in communication with the patient and the healthcare team, and increase professional satisfaction.

CONCLUSION

The level of assertiveness and self-esteem of the nurse interns were low and moderate respectively. There was a significant improvement in the assertive behaviour of the nurse interns after the intervention. However, it was observed to be higher in the post-test six weeks after the intervention than in the post test a week after the intervention. Similarly, there was a significant

increase in the level of self-esteem of the nurse interns after the intervention. This inevitably reveals that the concepts of assertiveness and self-esteem should constitute an integral part of the basic undergraduate nursing courses.

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