

Assertiveness And Self-Esteem Among Nurses Working At A Teaching Hospital, Bharatpur, Chitwan

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Abstract:

Background: Assertiveness and self-esteem is vital component in nursing profession for effective patient care and therapeutic relationship. Non-assertive behavior and low self-esteem have been found to major problem in the nursing profession. The objective of this study was to find out level of assertiveness and self-esteem among nurses working at a teaching hospital, Bharatpur.

Materials and Methods: A descriptive cross sectional study design was conducted among 188 nurses working at Chitwan Medical College, teaching hospital. Stratified random probability sampling technique was used. Data were collected by using standardized self-administered tool of Simple Rathus assertiveness schedules and Rosenberge self-esteem scale. Data were analyzed by using descriptive (frequency, percentage, median) and inferential (chi-square and correlation) statistics.

Results: The age of the respondents was range from 18-40 years with the median age of 24 years. The finding of this study showed that nearly half (49.9%) of nurses were non-assertive and more than half (62.8%) of respondents have low self-esteem. There is no association between level of assertiveness and self-esteem with socio-demographic and professional variables. There is no relationship between assertiveness and self-esteem ($R=-0.118$, $p\text{-value}=0.108$).

Conclusion: The study concluded that, nearly half of the nurses were non-assertive and majority of nurses have low self-esteem. Thus, hospital management need to plan and implement different educational programme and training related to assertiveness and self-esteem which helps to improves the level of assertiveness and self-esteem among nurses.

Keywords: Assertiveness, Self-esteem, Nurse

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I. Introduction

Assertiveness and Nursing are very closely related to each other. Nursing practice cannot be declared good if a nurse is not assertive. The assertiveness can be visualized in nursing care given by the nurse. Nurse has to be assertive enough in order to preserve rights of nurse as well as for clients who is seeking the nursing care¹. Assertive behavior and self-esteem is very beneficial for nurses in building effective nurse patient relationship. Assertive nurses have high self-esteem and resolve the conflict in time. Consequently, patient care will be improved². This study will provide me awareness regarding the importance of assertive behavior and self-esteem in building therapeutic relationship. The finding of this study will enable the hospital administration to foster an environment of assertiveness which leads to effective nurse patient relationship and increase self-esteem. Although literature supports the lack of assertive behavior and self-esteem in clinical practice of nurses, very little evidence is available in Nepali context. The current study will be a one of the important sources for further study.

II. Material And Methods

Descriptive cross sectional study design was used to assess the level of assertiveness and self-esteem among Nurses

Study Design: descriptive cross-sectional study

Study Location: This research study was conducted in CMC-TH Bharatpur, Nepal. This is a one of the renewed medical college and is affiliated to Tribhuvan University and is a first ISO certified Medical College. This private medical college in Bharatpur is a 750- bed teaching hospital

Study Duration: June 2019 to December 2019.

Sample size: 364 nurses

Sample size calculation: The sample size was estimated on the basis of a Probability Stratified, proportionate random sampling technique. The target population from which we randomly selected our sample was considered 364. The sample size actually obtained for this study was 157 staff nurses, 21 senior staff nurse and 10 nursing officer.

Subjects & selection method: The study population was drawn from those nurses who are registered nurse working in different post (total 364) nurses working in CMCTH.

Inclusion criteria:

All the registered nurses who are working in Chitwan medical college teaching Hospital (CMCTH) at different department in the post Staff nurse (SN), senior staff nurse (SSN) and Nursing officer (NO) are included and those willing to participate and gave consent in the study.

Exclusion criteria:

Matron and deputy matron were excluded in this study as they were in higher administrative position so they are not directly involved in patient care.

Procedure methodology

Self-administered structured questionnaire was used in this study. The research instrument consisted of 3 parts. 1st part consists of Structured questionnaire of 10 item (5 are sociodemographic and 5 are professional). 2nd part consists of Rathus assertiveness schedule with six-point rating scale to assess the level of assertiveness. It contains 30 items out of which 18 are described as negative and 12 of them as positive. 3rd part consists of standardized, short structured, self-report tool to measure self-esteem which contains 10 items with 4 Likert scales.

Statistical analysis

The data was edited, organized, coded and entered SPSS 20 version. The data was analyzed by using descriptive statistics like frequency, percentage, average and measure of relationship (correlation coefficient) as well as inferential statistics (Chi square) to find out the association between selected variables. Analyzed data was presented in tables and interpreted accordingly. The level of significance was set at 0.05.

III. Result

Table 1 shows the socio-demographic information of respondents. Majority (78.7%) of the respondents were below 24 years of age with median age 22 years with (21-24) years. Most of the respondents (85.6%) were unmarried, 50% were Brahmin and 85.6% followed Hindu religion and more than two third (67%) of the respondents had completed PCL nursing.

Table no.1

Respondents' Socio- demographic Characteristics

Variables	Frequency	Percentage
Age (in year)		
≤ 24	148	78.7
25-29	29	15.4
≥ 30	11	5.9
<i>Median Age (Q3-Q1)=22 (24-23) years min=18, max=40</i>		
Marital status		
Unmarried	153	81.4
Married	35	18.6
Ethnicity		
Brahmin	94	50.0
Janajati	54	28.7
Chhetri	35	18.6
Dalit	5	2.7
Religion		
Hindu	161	85.6
Buddhist	21	11.2
Others	6	3.2
Educational status		
PCL	126	67
Bachelor	62	33

Table 2 shows that most of the respondents (83.5%) were working in the post of staff nurse. Nearly half (48.4%) of the respondents had one year of work experience. Most of the respondents (46.3%) were from general ward followed by critical unit (38.3%), OT (9.6) and ER (5.9%). Almost all (99.5 %) respondents have not enrolled in any training and educational programme related to assertiveness and self-esteem.

Table 2
Respondents' Professional Related Characteristics

n=188

Variables	Frequency	Percentage
Professional Designation		
Staff Nurse	157	83.5
Senior Staff Nurse	21	11.2
Nursing Officer	10	5.3
Work Experience (in years)		
<1	91	48.4
1-5	82	43.6
>5	15	8.0
Working Area		
Emergency	11	5.9
OT	18	9.6
Critical Unit	72	38.3
General Ward	87	46.3
Enrollment in training and educational activities		
Yes	1	0.5
No	187	99.5

Table 3 demonstrates that nearly half (51.1%) of the respondents were assertive whereas 48.9% were non-assertive.

Table 3
Respondents' Level of Assertiveness

n=188

Variables	Frequency	Percentage
Assertive (≥ 112)	96	51.1
Non-assertive (< 112)	92	48.9
Total	188	100

Median Score = 112, IQR = Q3-Q1 = 118-105 min = 84 max = 134

Table 4 shows the respondents' level of self-esteem. As it illustrates that more than half (62.8%) of respondents have low self-esteem.

Table 4
Respondents' Level of Self-esteem

n=188

Variables	Frequency	Percentage
High (≥ 15)	70	37.2
Low (< 15)	118	62.8
Total	188	100

Median score = 15, IQR = Q3-Q1 = 16-13 min = 8 max = 23

Table 5 shows there is no association between level of assertiveness and sociodemographic and professional related variables

Table 5
Association between Respondents' Level of Assertiveness and Selected variable

n=188

Variables	Assertiveness		χ^2	p-value
	Assertive No. (%)	Non-assertive (%)		
Age (in year)				
≤ 24	73(49.3)	75(50.7)	3.555	0.169
25-29	19(65.5)	10(34.5)		
≥ 30	4(36.4)	7(63.6)		
Marital Status				
Unmarried	78(51.0)	75(49.0)	0.02	0.962
Married	18(51.4)	17(48.6)		

Ethnicity				
Brahmin	52(45.3)	41(44.1)	1.78	0.410
Janajati	24(45.3)	29(54.7)		
Others*	20(47.6)	22(52.4)		
Religion				
Hindu	86(53.4)	75(46.6)	2.482	0.115
Non-Hindu	10(37.0)	17(63.0)		
Educational status				
PCL	61(48.4)	65(51.6)	1.075	0.300
Bachelor	35(56.5)	27(43.5)		
Professional Designation				
Staff Nurse	76(48.4)	81(51.6)	3.933	0.140
Senior Staff Nurse	15(71.4)	6(28.6)		
Nursing Officer	5(50)	5(50)		
Work Experience (in years)				
<1	42(46.25)	49(53.8)	1.740	0.489
1-5	46(56.1)	36(43.9)		
>5	8(53.3)	7(46.7)		
Working Area				
Emergency	6(54.4)	5(45.5)	1.054	0.788
Critical Unit	37(51.4)	35(48.6)		
OT	11(61.1)	7(38.9)		
General Ward	42(48.3)	45(51.7)		

Significance level at 0.05 Others*: Chhetri, Dalit

Table 6 shows that there was no significant association between levels of self-esteem and socio-demographic and professional related variables.

Table 6
Association between Respondents' Level of Self-esteem and Selected variables
n=188

Variables	Self-esteem		χ^2	p-value
	Low self-esteem No. (%)	High self-esteem No. (%)		
Age (in year)				
<24	91(61.5)	57(38.5)	1.577	0.455
25-29	21(72.4)	8(27.6)		
≥ 30	6(54.5)	5(45.5)		
Marital status				
Unmarried	95(62.1)	58(37.9)	0.160	0.689
Married	23(65.7)	12(34.3)		
Ethnicity				
Brahmin	62(66.7)	31(33.3)	1.480	0.477
Janajati	30(56.6)	23(43.4)		
Others*	26(61.9)	16(38.1)		
Religion				
Hindu	99(61.5)	62(38.5)	0.780	0.377
Non-Hindu	19(70.4)	8(29.6)		
Educational status				
PCL	76(60.3)	50(39.7)	0.980	0.322
Bachelor	42(67.7)	20(32.3)		
Professional Designation				
Staff Nurse	97(61.8)	60(38.2)	0.425	0.808
Senior Staff Nurse	14(66.7)	7(33.3)		
Nursing Officer	7(70)	3(30)		
Work Experience				
<1 years	57(62.6)	34(37.4)	0.110	0.947
1-5 years	51(62.2)	31(37.8)		
>5 years	10(66.7)	5(33.3)		
Working Area				
Emergency	8(72.7)	3(27.3)	2.099	0.552
Critical Unit	41(56.9)	31(43.1)		
OT	11(61.1)	7(38.9)		
General Ward	58(66.7)	29(33.3)		

Significance level at 0.05 Others*: Chhetri, Dalit

Table 7 shows the no statically significant relationship between assertiveness and self-esteem (R=0.118, p-value=0.108).

Table 7
Relationship between Respondents' Assertiveness and Self-esteem
n=188

Variable	R	P-value
Assertiveness vs. self-esteem	-0.118	0.108
<i>Spearman's rho</i>		

IV. Discussion

The finding of this study showed that more than half 51.1% of nurses were assertive. This indicates that nearly half of the nurses were non-assertive. Assertiveness is considered as a valuable behavior in nursing leading to positive results such as increase of self- confidence, avoidance of conflicts, increase personal and professional rights, improving communication. This finding is similar to the study conducted in India by Sabatina, Begum & Joseph,³ shows half of subjects were non-assertive similarly study conducted in Turkey by ⁴ reveals that 69.5% of the nurses were assertive.

Regarding the level of self-esteem, this study revealed that only 37.2% nurses have high self-esteem. It means majority of the nurses have low self-esteem. Those nurses who have low self-esteem may not be able to accomplish the task in confident way. This finding is similar with the study conducted in Nepal by ⁵ shows that about 61.2% of the nurses had low self-esteem. Similarly another finding conducted in India by Sabatina, Begum & Joseph ³ reveals that 57.5% of the subjects were with low self-esteem and 42.5% subjects were with moderate self-Esteem. The probability of being non-assertiveness and having low self-esteem among most of nurses is may be due to lack of educational programme, training related to assertiveness and self-esteem and as Nepal is male dominated countries and almost all nurses were female so this may affects in results due lack of involvement of male nurse.

The finding of this study showed that study that there is no association between level of assertiveness with sociodemographic and professional related variables (age, marital status, ethnicity, religion, educational status, professional designation, work experience, working area). This indicates that these are not important factors to enhance the assertiveness of nurses. This finding is similar to the finding done in India by ³ which shows no significant association found between assertiveness and selected demographic variables. Whereas inconsistent finding found in the study conducted by Maheshwari & Gill ⁶ shows the significant association between age and level of assertiveness with age group of >50 years were more assertive as compared to subjects who were younger (p<.001). In this finding there is no significant association is found this may be due to the age of respondents is only less than 40 years with majority of respondents age is below 24 years. And similar to this finding the finding of Maheshwari & Gill ⁶ shows no significant association between marital status, religion, education and professional designation with level of assertiveness. This may be due to different in sample size, involvement of male nurse, less work experience and different in qualification.

Similarly, the finding of this study shows no significant association between level of self-esteem and selected variables (age, marital status, ethnicity, religion, educational status, professional designation, work experience, working area). This means those sociodemographic and professional related factors are not important to enhanced the self-esteem of nurses. This finding is consistence with the finding done in India by Sabatina, Begum & Joseph ³ which shows no significant association found between level of self-esteem and selected demographic variables. Whereas the study conducted in Nepal Shrestha, Limbu, Twati., & Shrestha ⁸ shows that there is significant correlation between age (p= 0.001), marital status (p= 0.004), educational level (p= 0.000), and work experience (p= 0.012). This may be due to less sample size, and the used tool is different.

The finding of the present study showed that, there is no statistically significant relationship between assertiveness and self-esteem (R=-0.118), (p=0.108). Whereas the finding of Maheshwari & Gill ⁶ showed the moderate positive relationship between assertive behavior and self-esteem (r=0.272), (p=0.01). Similarly in the contrast of this finding the finding of Shrestha ⁷ also shows the positive correlation with assertiveness and self-esteem (at p< .000) (r= 0.412). This may be due to less sample size and the tool was different and self-administered tool may not be fulfilled correctly due to their busy workload. There was lack of awareness about assertiveness and self-esteem among nurses.

V. Conclusion

The findings of the study concluded that nearly half of the respondents were assertive. Similarly more than half of respondents have low self-esteem. There is no relationship between assertiveness and self-esteem.

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