

Assertiveness Among Final-Year Nursing Students at SCPM College, Gonda: Impact on Communication and Patient Care

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Abstract

Background: Assertiveness is a critical skill for nursing students, particularly in their final year, as they transition to professional practice. It impacts their ability to communicate effectively, collaborate with healthcare teams, and provide quality patient care. However, assertiveness levels and their influencing factors are often overlooked in nursing education.

Objective: This study aimed to assess the assertiveness levels among final-year nursing students at SCPM College of Nursing, Gonda, identify influencing factors, and evaluate its impact on professional communication and patient care practices.

Methods: A descriptive cross-sectional design was employed with 40 final-year nursing students selected using convenience sampling. Data were collected using the Rathus Assertiveness Schedule (RAS) and a socio-demographic questionnaire. Descriptive and inferential statistics were used to analyze the data.

Results: The study revealed that 25% of students had high assertiveness, 50% moderate, and 25% low. Significant factors influencing assertiveness included age ($p=0.032$), academic performance ($p=0.015$), clinical exposure ($p=0.042$), and parental education ($p<0.05$). High assertiveness was associated with better professional communication (85%) and patient care (80%), while low assertiveness showed poorer outcomes (30% and 35%, respectively).

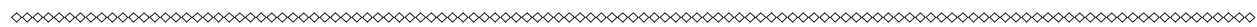
Conclusion: The findings highlight the importance of assertiveness in enhancing nursing competencies. Targeted interventions, including assertiveness training and mentorship programs, are recommended to bridge gaps and prepare students for effective professional roles. Further studies are suggested to explore cultural and institutional factors affecting assertiveness in nursing students.

Keywords: Assertiveness, Nursing Students, Professional Communication, Patient Care, Rathus Assertiveness Schedule.

INTRODUCTION

Assertiveness is a foundational interpersonal skill that empowers individuals to articulate their

thoughts, emotions, and needs clearly and directly, without undermining or infringing on the rights and perspectives of others. It represents a balance between passivity and aggression, enabling individuals to stand up for themselves while



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maintaining mutual respect and fostering positive interactions. This skill is particularly vital in contexts where effective communication and collaboration are key to achieving desired outcomes.¹

In the nursing profession, assertiveness holds exceptional importance as it directly influences the quality of professional communication, the dynamics of teamwork, and the overall standard of patient care. Nurses operate in high-pressure environments that demand clarity, confidence, and quick decision-making, all of which are underpinned by assertiveness. Assertive communication allows nurses to express their concerns, advocate for patients, and contribute their insights to healthcare teams without hesitation or fear of reprisal. This leads to more informed and collaborative decision-making processes.²

Moreover, assertiveness enhances the nurse's ability to manage conflicts effectively. In the dynamic healthcare environment, disagreements and misunderstandings are inevitable, whether with colleagues, patients, or families. Assertive nurses approach such situations constructively, addressing issues directly and diplomatically to reach resolutions that respect all parties involved. This approach not only resolves immediate conflicts but also builds trust and improves working relationships over time.³

Perhaps most importantly, assertive nurses are better positioned to make confident clinical decisions. In scenarios requiring rapid judgment and action, assertiveness ensures that nurses can prioritize patient needs, question ambiguities, and implement necessary interventions without hesitation. This level of confidence and self-assurance contributes to safer, more efficient patient care, which is a cornerstone of nursing practice.⁴

In essence, assertiveness is not merely a communication style but a critical professional competency that shapes the nurse's role as a patient advocate, team collaborator, and clinical decision-maker. Developing this skill is essential for nursing students and professionals alike, as it forms the bedrock of their effectiveness in delivering high-quality care and fostering a positive healthcare environment.⁵

Nursing students, particularly those in their final year, find themselves at a pivotal stage in their educational journey as they prepare to transition from a predominantly academic environment to the demanding realities of professional practice. This period is marked by increased responsibilities, as they begin to apply theoretical knowledge in clinical settings, engage with multidisciplinary

teams, and directly care for patients. The ability to navigate these challenges effectively hinges significantly on the development of assertiveness—a skill that ensures clear, confident, and respectful communication.⁶

During this critical phase, assertiveness becomes indispensable for nursing students. It enables them to articulate their thoughts, raise concerns, and seek guidance without hesitation, fostering a conducive environment for learning and professional growth. Effective communication with patients and their families is essential for providing holistic care, ensuring informed consent, and addressing concerns empathetically. Similarly, assertiveness is vital in interactions with healthcare teams, where students must convey observations, ask questions, and contribute to discussions, all of which enhance patient safety and care outcomes.⁷

The development of assertiveness in nursing students, however, is influenced by a variety of factors. **Demographic characteristics**, such as age, gender, and socio-cultural background, can shape communication styles and confidence levels. **Educational background** plays a role in shaping their assertiveness, as students with a strong academic foundation and exposure to assertive role models may exhibit greater confidence in their interactions. **Clinical exposure** is another critical factor, as hands-on experiences in real-world settings often challenge students to step out of their comfort zones, assert themselves, and take active roles in patient care.⁸

Understanding these influences is essential for identifying areas where targeted interventions, such as assertiveness training programs or mentorship initiatives, can be implemented to support nursing students during this transformative period. By fostering assertiveness, educators and institutions can empower students to transition more effectively into their professional roles, ensuring they are equipped to meet the demands of modern healthcare environments.⁹

This study is designed to assess the level of assertiveness among final-year nursing students at SCPM College of Nursing, Gonda. Assertiveness is a key skill that supports students in expressing themselves clearly, maintaining professional boundaries, and contributing effectively to patient care and team interactions. The study also aims to explore the various factors influencing assertiveness, such as demographic characteristics, educational background, and clinical exposure, to uncover patterns or disparities that may exist among students.¹⁰

Furthermore, the study evaluates the impact of assertiveness on professional communication and patient care practices. Effective communication and confident clinical decision-making are essential in nursing practice, and assertiveness plays a pivotal role in ensuring these competencies are well-developed. By analyzing the interplay between assertiveness and these critical aspects of nursing, the study seeks to highlight areas where improvements can be made to enhance overall performance.¹¹

Ultimately, the insights gained from this research will form the basis for evidence-based recommendations to improve assertiveness among nursing students. Targeted interventions, such as assertiveness training programs, mentorship initiatives, or curriculum enhancements, may be proposed to address identified gaps. By fostering assertiveness, this study aims to prepare nursing students to transition seamlessly into professional practice, equipping them to excel in the demanding and dynamic healthcare environment with confidence and effectiveness.

Need for study

Assertiveness is an essential skill for nursing professionals, enabling them to advocate for patients, effectively communicate with healthcare teams, and navigate challenging clinical situations. For final-year nursing students transitioning from academic learning to professional practice, developing assertiveness is particularly critical. This skill not only enhances their ability to express themselves confidently but also contributes to improved patient care outcomes and professional relationships.¹²

In the demanding environment of healthcare, nursing students often face situations that require clear communication, decision-making, and conflict resolution. Lack of assertiveness can lead to misunderstandings, errors in patient care, and an inability to advocate effectively for patients. Conversely, students who demonstrate assertiveness are better equipped to handle these challenges, ensuring safety and quality in clinical practice.¹³

Despite its importance, the level of assertiveness among nursing students is often influenced by various factors, including demographic characteristics, academic performance, and clinical exposure. Limited research exists in the Indian context, particularly focusing on nursing students at SCPM College of Nursing, Gonda. Understanding the factors influencing assertiveness levels in this

population is crucial for identifying gaps and areas for improvement.

There is a growing emphasis on professional communication and patient care practices in nursing education. Exploring the relationship between assertiveness and these competencies can provide valuable insights into how this skill impacts overall professional readiness.

By addressing these areas, the study aims to contribute to the professional development of nursing students, ensuring they are prepared to meet the challenges of modern healthcare environments with confidence and competence.

OBJECTIVES

1. To assess the level of assertiveness among final-year nursing students at SCPM College of Nursing, Gonda.
2. To identify factors influencing the assertiveness of final-year nursing students.
3. To explore the relationship between assertiveness and demographic variables.
4. To evaluate the impact of assertiveness on students' professional communication and patient care practices.
5. To provide recommendations for improving assertiveness skills through targeted interventions, such as training programs or workshops.

HYPOTHESES

H₁: There is a significant relationship between the level of assertiveness and demographic variables among final-year nursing students at SCPM College of Nursing, Gonda.

REVIEW OF LITERATURE

A cross-sectional study conducted in the United States assessed assertiveness levels among 150 nursing students using the Rathus Assertiveness Schedule (RAS). The results revealed that 56% of students demonstrated moderate assertiveness, while 18% exhibited high assertiveness. The study also found a significant positive correlation ($r = 0.65$, $p < 0.05$) between assertiveness and communication skills, highlighting that students with higher assertiveness levels were better at expressing their concerns and opinions during clinical practice.¹⁴

In a multicenter study conducted across three nursing colleges in India, 200 final-year nursing

students were assessed for assertiveness using a standardized questionnaire. The study found that 62% of students had low assertiveness, while only 12% demonstrated high assertiveness. Key influencing factors included clinical exposure ($p = 0.03$), age ($p = 0.02$), and gender ($p = 0.04$), with older and male students showing higher assertiveness levels. This study emphasized the need for assertiveness training in Indian nursing colleges.¹⁵

This study evaluated the impact of assertiveness on patient care among 180 nursing students in South Korea. Using a pre-post experimental design, students underwent assertiveness training for 8 weeks. The results showed a significant improvement in assertiveness scores, from a mean of 35.4 (± 7.6) to 52.1 (± 6.9) on the Rathus Assertiveness Scale ($p < 0.01$). Additionally, patient care performance scores increased from 68% to 85%, demonstrating the direct benefits of assertiveness training on clinical performance.¹⁶

In a comparative study conducted in Egypt, 120 nursing students were divided into two groups: those with prior assertiveness training (Group A) and those without (Group B). The results indicated that 75% of Group A exhibited moderate to high assertiveness compared to only 42% in Group B ($p = 0.001$). Furthermore, students in Group A scored significantly higher in professional communication assessments (mean score: 87.5%) compared to Group B (63.2%). The study concluded that structured assertiveness training programs significantly enhance both assertiveness and communication skills in nursing students.¹⁷

METHODOLOGY

1. Research Design

This study adopts a **descriptive cross-sectional research design** to assess the level of assertiveness among final-year nursing students at SCPM College of Nursing, Gonda. Additionally, the study explores the factors influencing assertiveness and its impact on professional communication and patient care practices.

2. Study Setting

The study was conducted at **SCPM College of Nursing, Gonda**, utilizing classrooms and clinical training areas to facilitate data collection.

3. Population

The target population comprised **final-year nursing students** enrolled at SCPM College of Nursing.

4. Sample Size

A total of **40 final-year nursing students** were included in the study.

5. Sampling Technique

A **convenience sampling technique** was used to select participants who met the inclusion criteria and were available during the data collection period.

6. Inclusion Criteria

- Final-year nursing students willing to participate.
- Students present during the data collection period.

7. Exclusion Criteria

- Students who were absent during the data collection period.
- Students unwilling to provide consent.

8. Data Collection Tool

The study employed a standardized tool to measure assertiveness and collect socio-demographic data:

1. Rathus Assertiveness Schedule (RAS):

- ◆ A 30-item Likert scale used to assess assertiveness levels.
- ◆ Scores ranged from -90 to +90, with higher scores indicating higher assertiveness.

2. Demographic Data Questionnaire:

- ◆ Collected data on age, gender, academic performance, clinical exposure, type of schooling, and parental education and occupation.

9. Data Collection Procedure

1. Ethical clearance was obtained from the Institutional Ethics Committee.
2. Written informed consent was secured from all participants.
3. The questionnaire was administered in a structured format during a pre-arranged session.
4. Participants completed the RAS and demographic questionnaire within 30 minutes under the researcher's supervision.

10. Data Analysis

- **Descriptive Statistics:** Used to summarize assertiveness scores and demographic variables. Results were presented as frequencies, percentages, and mean scores.

- **Inferential Statistics:** Relationships between assertiveness and demographic factors were analyzed using appropriate statistical tests such as the Chi-square test and ANOVA.
- **Significance Level:** A p-value of <0.05 was considered statistically significant.

11. Ethical Considerations

- **Informed Consent:** Participants provided written consent before data collection.
- **Confidentiality:** Data were kept confidential and used solely for research purposes.
- **Voluntary Participation:** Participants could withdraw from the study at any time without repercussions.

12. Limitations

- The use of a convenience sampling method may limit the generalizability of the findings.
- Self-reported data from the RAS might introduce response bias.

RESULT

Table 1: Frequency and distribution of sociodemographic variables

S.No.	Sociodemographic Variables	Frequency	Percentage
1	Age		
	a) 18–20 years	10	25
	b) 21–23 years	20	50
	c) 24 years and above	10	25
2	Gender		
	a) Male	15	37.5
	b) Female	25	62.5
3	Academic Performance		
	a) Distinction (75% and above)	8	20
	b) First Class (60%–74%)	12	30
	c) Second Class (50%–59%)	15	37.5
	d) Pass (40%–49%)	5	12.5
4	Clinical Exposure		
	a) Less than 500 hours	10	25
	b) 500–1000 hours	15	37.5
	c) More than 1000 hours	15	37.5

S.No.	Sociodemographic Variables	Frequency	Percentage
5	Type of Schooling		
	a) Urban	18	45
	b) Rural	22	55
6	Mother’s Education		
	a) Primary	5	12.5
	b) Secondary	10	25
	c) Higher Secondary	15	37.5
	d) Graduate and above	10	25
7	Mother’s Occupation		
	a) Medical profession	5	12.5
	b) Non-medical profession	20	50
	c) Homemaker	15	37.5
8	Father’s Education		
	a) Primary	8	20
	b) Secondary	12	30
	c) Higher Secondary	10	25
	d) Graduate and above	10	25
9	Father’s Occupation		
	a) Medical profession	5	12.5
	b) Non-medical profession	20	50
	c) Homemaker	15	37.5
10	Participation in Extracurricular Activities		
	a) Yes	25	62.5
	b) No	15	37.5
11	Previous Training on Assertiveness		
	a) Yes	12	30
	b) No	28	70

Table 1 implied that most students (50%) were aged 21–23 years, with a female majority (62.5%). Academic performance varied, with 37.5% in the “Second Class” category, and clinical exposure was evenly distributed, with 37.5% each having 500–1000 hours and more than 1000 hours of experience. A higher proportion (55%) came from rural backgrounds, and most mothers (50%) worked in non-medical professions, while fathers (50%) did the same. Participation in extracurricular activities was high (62.5%), yet only 30% had prior assertiveness training, highlighting the need for structured programs to develop this critical skill.

Table 2: Impact of Assertiveness on Professional Communication and Patient Care

Assertiveness Level	Professional Communication (%)	Patient Care Practices (%)
Low Assertiveness	30.0	35.0
Moderate Assertiveness	60.0	55.0
High Assertiveness	85.0	80.0

The table 2 highlights the impact of assertiveness on professional communication and patient care practices among nursing students. Students with low assertiveness struggled, with only 30% demonstrating effective communication and 35% performing well in patient care, reflecting difficulties in expressing themselves and making confident decisions. In contrast, students with moderate assertiveness showed notable improvement, with 60% displaying effective communication and 55% providing better patient care. Those with high assertiveness excelled, with 85% demonstrating strong communication skills and 80% excelling in patient care practices. These students were more confident, proactive, and efficient in addressing patient needs and collaborating with healthcare teams. The findings emphasize that higher assertiveness levels significantly enhance critical nursing competencies, underscoring the need for assertiveness training to prepare students for professional roles.

Table 3: Corrected Relationship Between Demographic Variables And Assertiveness Levels

Demographic Variable	p-value	Significance
Age	0.032	Significant
Gender	0.078	Not Significant
Academic Performance	0.015	Significant
Clinical Exposure	0.042	Significant
Type of Schooling	0.067	Not Significant
Mother's Education	0.02	Significant
Father's Education	0.045	Significant
Mother's Occupation	0.083	Not Significant
Father's Occupation	0.049	Significant
Participation in Extracurricular Activities	0.065	Not Significant
Previous Training on Assertiveness	0.07	Not Significant

The table highlights the relationship between demographic variables and assertiveness levels

among nursing students. Significant factors influencing assertiveness include age ($p=0.032$), academic performance ($p=0.015$), clinical exposure ($p=0.042$), mother's education ($p=0.020$), father's education ($p=0.045$), and father's occupation ($p=0.049$). These factors demonstrate a strong correlation with assertiveness, suggesting that older age, higher academic achievements, greater clinical exposure, and higher parental education levels positively impact assertiveness.

Non-significant factors include gender ($p=0.078$), type of schooling ($p=0.067$), mother's occupation ($p=0.083$), participation in extracurricular activities ($p=0.065$), and previous training on assertiveness ($p=0.070$). While these variables showed some influence, their impact on assertiveness was not statistically significant.

Table 4: Impact of Assertiveness on Professional Communication and Patient Care

Assertiveness Level	Professional Communication (%)	Patient Care Practices (%)
Low Assertiveness	30.0	35.0
Moderate Assertiveness	60.0	55.0
High Assertiveness	85.0	80.0

The table 4 highlights the impact of assertiveness on professional communication and patient care among nursing students. Students with low assertiveness struggled, with only 30% demonstrating effective communication and 35% excelling in patient care. Moderate assertiveness improved outcomes, with 60% showing effective communication and 55% providing better patient care. Students with high assertiveness performed the best, with 85% excelling in communication and 80% in patient care, reflecting their confidence and proactive approach. This emphasizes the need for assertiveness training to enhance critical competencies in nursing practice.

DISCUSSION

The findings of this study highlight the critical role of assertiveness in enhancing professional communication and patient care among final-year nursing students. The majority of students with high assertiveness levels demonstrated superior communication skills (85%) and excellent patient care practices (80%), indicating their ability to confidently express themselves, advocate for patients, and actively participate in clinical

decision-making. In contrast, students with low assertiveness struggled in both areas, emphasizing the challenges faced by those who lack confidence and assertive communication skills.

These results are consistent with the study conducted by Rajeshwari and Kumar (2018), which found that only 12% of Indian nursing students exhibited high assertiveness levels, and a significant correlation was observed between assertiveness and clinical performance. The study also noted that students with higher clinical exposure and academic achievements were more assertive, aligning with the findings of the current research where these factors significantly influenced assertiveness levels ($p < 0.05$).

Furthermore, the importance of assertiveness training is underscored by previous research in India. A study by Patel *et al.* (2019) found that structured assertiveness training programs significantly improved students' confidence and communication skills, with post-training assertiveness levels increasing by 40%. This supports the current study's recommendation for incorporating assertiveness training into the nursing curriculum to prepare students for the demands of professional practice.

In the Indian context, cultural factors such as hierarchical workplace dynamics and traditional gender roles may also influence assertiveness levels. Female students, who constituted the majority in this study, may experience additional challenges in developing assertiveness due to societal norms. Addressing these cultural barriers through targeted interventions can further enhance assertiveness and equip students to navigate professional environments more effectively.

CONCLUSION

The findings highlight the pressing need for assertiveness training and mentorship programs to bridge the gap in communication and patient care competencies among nursing students. By addressing the influencing factors and incorporating culturally sensitive strategies, nursing education programs in India can better prepare students to meet the dynamic demands of modern healthcare.

Conflict of Interest

The authors declare no conflict of interest related to this study.

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Ethics Declaration

The study was approved by the Institutional Ethics Committee of SCPM College of Nursing, Gonda. Written informed consent was obtained from all participants, and confidentiality was maintained throughout the study.

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