Assertiveness Training Program on Self-esteem and Locus of Control among Nursing **Internship Students**

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Abstract

Background "Internship period is very crucial for every intern nursing student as it presents the first contact with reality and helps in shaping and enhancing their clinical skills and experiences. Aims: Evaluated the efficacy of assertiveness training program on self-esteem and locus of control among nursing internship students. Methods: Quazi experimental designed was conducted in south valley, Egypt, involving 60 internes nursing students. The experimental group received assertive techniques including behavioral techniques and cognitive techniques. Tools: Tools 1: It consisted of Part 1: Socio demographic data form: Part 2: General Locus of Control Scale and Tools 2: Rosenberg Self-Esteem Scale (RSES) at baseline and post-intervention. Results: Post-intervention, the experimental group demonstrated a significant increase in locus of control scores and an increase in self-esteem. Greater reduction in post external locus of control among experimental group. A significant positive correlation between locus of control and self-esteem among internship students. The control group showed no significant changes. Conclusion The assertive training program significantly enhanced self-esteem and locus of control, supporting its integration into orientation training of internship period. Recommendation: The assertive program serves as an effective and practical tool for boosting self-esteem and locus of control. Program's effectiveness and cost-efficiency, making it a valuable and accessible approach for fostering assertiveness in interns.

Keywords: Assertiveness, Tnternes nurses, Locus of control & Self-esteem.

Introduction

The internship period is a crucial stage for every nursing student, as it marks their first exposure to real-world practice and plays a key role in honing their clinical skills and gaining practical experience. During this training phase, nursing students with high self-esteem are better prepared to establish meaningful therapeutic relationships with patients and effectively handle challenges (Ahmed & Abdel-Azee, 2022). The internship year is a mandatory training period for all bachelor-level nursing interns. It provides students with opportunities to build professional connections that may lead to future job placements while enhancing their self-esteem, leadership abilities, and communication skills through collaboration with others (O'Reilly, et al., 2020).

Nurse interns embark on their professional careers for the first time, typically transitioning from graduation to the point where they acquire the skills and competencies required by the profession. The internship serves as a unique educational phase, combining academic learning with structured and

supervised work experience. The initial three to six months of the internship year are often the most challenging and stressful period for nurse interns, as this phase plays a pivotal role in determining whether they choose to pursue a long-term career in nursing. Many nurse interns encounter reality shock during this time, realizing that their current skill levels fall short of their expectations regarding the roles and responsibilities of professional practitioners (Ata & Ahmed, 2018).

Assertiveness is an interpersonal skill communication style that helps establish boundaries while allowing individuals in a relationship to express their needs clearly, directly, and in a non-aggressive manner. Assertive behavior involves conveying one's thoughts, emotions, and rights in a way that respects and acknowledges the thoughts, feelings, and rights of others. This approach fosters healthy relationships, resolves interpersonal conflicts, and ensures that personal needs are neither suppressed nor overlooked (Morsi & Prince, 2021).

Assertiveness is a crucial skill for modern professional nurses, as it boosts self-confidence and

87 Print Issn: 2314-8845 Online Issn: 2682-3799

improves interpersonal communication. Nurse interns require assertiveness skills in all settings, as these abilities elevate self-esteem and reduce stress levels. Additionally, assertive communication fosters open dialogue, allowing diverse perspectives, needs, and choices to be respectfully expressed and considered, ultimately leading to mutually beneficial solutions to problems. It strengthens specific personal relationships, alleviates stress caused by conflicts, and offers social support during challenging times. Research has also indicated that assertiveness, a fundamental component of life skills training, contributes to increased self-esteem, greater selfconfidence, enhanced interpersonal skills, a stronger locus of control, and the development of individual character (Markid, et al., 2019).

The literature suggests that such training programs enhance self-concept and foster an internal locus of control, which, in turn, boosts confidence and autonomy in clinical environments. Furthermore, research has demonstrated notable improvements in assertiveness and self-esteem among nursing and medical students who undergo assertiveness training, underscoring its value in professional development. By equipping nursing interns with the ability to express their thoughts and opinions confidently, assertiveness training plays a vital role in supporting their personal and professional growth (Lee, et al., 2023).

Self-esteem refers to personal judgment and evaluation of oneself, which can be either positive or negative. A positive self-assessment fosters high selfesteem, whereas a negative evaluation results in low self-esteem. People with high self-esteem tend to have a favorable perception of themselves and their accomplishments, maintain healthy interpersonal relationships, and take pride in their achievements and career choices. Self-esteem significantly impacts both current and future physical and mental health, as well as health-related behaviors. Research indicates that individuals with high self-esteem exhibit better mental health, inner harmony, confidence. competence, optimism, emotional control, resilience, and problem-solving abilities. On the other hand, low self-esteem is often linked to feelings of hopelessness. inferiority, sadness, depression, and an increased risk of suicidal tendencies (Gad, et al., 2021).

Nursing internship students, as future nursing professionals, require high levels of self-esteem to effectively navigate academic challenges and establish strong therapeutic relationships with patients. This, in turn, enables them to deliver patient-centered care, ultimately contributing to the overall health and well-being of society. Additionally, empirical research has demonstrated a positive and significant correlation between nurses' self-esteem

and factors such as job satisfaction, professional identity, inter- and intra-professional collaboration, as well as the adoption of positive coping strategies. Conversely, self-esteem has been found to have a significant negative association with anxiety, stress, burnout (including emotional exhaustion and depersonalization), and depression (Johnson et al., 2020 & Dancot et al., 2021).

Locus of Control refers to an individual's belief about the factors that influence the events in their life. It reflects whether a person attributes these occurrences to their own efforts and actions or to external forces such as fate or luck. An individual with an internal locus of control perceives that the outcomes in their life are within their control, believing that their personal efforts, behaviors, and skills directly shape results. This perspective leads them to take responsibility for their actions. Conversely, an external locus of control arises when a person attributes events in their life to external causes or forces beyond their control, such as chance or destiny. The concept of locus of control is learned over time; as individuals grow and gain experience, they develop the ability to distinguish between events influenced by their own behavior and those governed by external factors (Patel & Sharma, 2023).

The participation of nurses from various specialties is essential for implementing programs assertiveness training, which aim to boost self-esteem and develop an internal locus of control among nursing interns. Nurses are key contributors to health education, empowering both individuals communities. Psycho-educational programs such as assertiveness training enhance self-confidence, encourage accountability in health-related behaviors, and address emotional and psychological challenges. These initiatives help nursing interns and patients build confidence, reduce social anxiety, and manage stress effectively. Furthermore, nurses themselves gain from assertiveness training by improving communication skills and enhancing their selfesteem, which strengthens their ability to support patients (Morsi & Prince, 2021 & Lazarus, (2019).

Significance of the Study:

Assertiveness training programs in Egypt have proven effective in boosting self-esteem and enhancing the locus of control among nursing interns. Self-esteem, which reflects how individuals perceive themselves, is particularly vital for nursing students who often work in challenging clinical environments. Studies show that these training programs help interns build confidence in their abilities, improve communication with patients and healthcare colleagues, and equip them to handle difficult situations effectively. By fostering assertiveness, these courses enable interns to

set boundaries, express themselves confidently, and reduce anxiety when making decisions. As a result, increased self-esteem not only supports better mental health and professional competence but also contributes to improved patient care outcomes (Rahimi & Bigdeli, 2021).

Studies in Egypt highlight that nursing students often exhibit moderate to low self-esteem, which negatively impacts their clinical performance and patient care. For example, a 2023 study at Helwan University found that most nursing students had low self-esteem, correlating with reduced communication skills (Bamoussa, et al., 2023). Assertiveness training has been shown to significantly improve self-esteem by fostering confidence in decision-making and professional interactions. For instance, a 2021 intervention at Ain Shams University increased self-esteem scores by 14% post-training (Morsi, & Prince, 2021).

Nurse interns in Egypt face high stress levels due to clinical demands, hierarchical workplace dynamics, and limited autonomy. A 2019 study at El-Fayoum University Hospitals demonstrated that assertiveness training reduced perceived stress by 22% among interns by enhancing conflict-resolution skills and reducing anxiety in high-pressure scenarios. This is critical for improving retention and job satisfaction in Egypt's understaffed healthcare system (Ata' & Ahmed, 2018).

Therefore, nurse educators or preceptors should guide nurse interns in managing stress effectively and positively by fostering assertiveness skills. These skills are crucial in boosting self-esteem and promoting a stronger internal locus of control, both of which are essential for successfully achieving the goals of the internship program. Consequently, it is highly important to introduce assertiveness training programs for nurse interns with the aim of improving their self-esteem and strengthening their sense of control.

There is a limited number of Egyptian studies that explore the impact of assertiveness training programs on self-esteem and locus of control among nursing students. Consequently, this study aims to address this gap by examining the effectiveness of assertiveness training programs as suitable interventions for improving self-esteem and locus of control in nursing internship students. It will utilize various assertiveness training techniques to help these students develop alternative strategies to strengthen their locus of control and boost their self-esteem.

Aim of the study

The aim of this study is to investigate the effect of assertiveness training program on development of self-esteem and locus of control for nursing internship students.

Hypotheses

- **H1:** Nursing internship students who undergo an assertiveness training program will have higher self-esteem scores, compared to those in the control group.
- **H2:** Nursing internship students who participate in an assertiveness training program will have higher posttest scores on the locus of control scale compared to intern students in the control group.

Subjects and Methods Research Design

A quasi-experimental pre-and posttest design was used in this study, in which data on the dependent variable is collected over a period before, after the treatment. A pretest-posttest is a quasi-experiment where participants are studied before and after the experimental manipulation. Quasi experimental research design involves the manipulation of independent variables to observe the effect on dependent variables but does not have randomly assigned groups. By using one group pre-posttest design, a single case is observed at two time points. One before the intervention and one after intervention. Changes in the outcome of interest are presumed to be the result of the intervention. No control or comparison group is employed (Christopher, et al., 2020).

Setting:

This study was carried out across various clinical departments at South Valley University Hospitals, where nurse interns underwent training during the 2023–2024 academic years. The training covered areas such as intensive care, cardiothoracic care, pediatric intensive care, operating rooms, and dialysis units. Which are affiliated to south valley university, the hospital consisted of (5) floors, that include (150) beds to provide cost free service.

Sample:

The study employed purposive sampling to select 60 internship students, who were then randomly assigned to either an experimental or control group. A power analysis was conducted to determine the optimal sample size, focusing on mean comparisons between groups (with emphasis on the experimental group). Key statistical parameters included Power 0.8 (80% chance of detecting true effects), Alpha: 0.05 (5% significance threshold) and Confidence interval: 95%. The selection criteria for internship students included the following: (a) students aged between 22 and 26 years, (b) a willingness to engage in research, (c) no prior history of physical disabilities or psychiatric disorders, and (d) no previous experience with assertiveness training or workshops covering similar content. Students were excluded from the study group

if they were unwilling to continue participating or missed two or more sessions.

Tools:

Tools (1): it consisted of two parts:

Part (1): Socio demographic data form:

Including their age, marital status, educational level, residency status, and whether they were employed during their internship year.

Part (2): The General Locus of Control Scale:

Rotter (1966) originally developed the scale in English, and it was later translated into Arabic, validated, and tested for internal reliability by Kafafy (1982). The scale has been widely used with various Egyptian participants. It consists of 29 forced-choice items; however, two items were removed by Hamoud (2008) due to their political nature, which rendered them unsuitable for studies conducted in Egypt. Six out of the remaining 27 items (specifically items 1, 7, 13, 18, 23, and 26) serve as filler questions. These were included to obscure the test's true purpose from the students and are therefore excluded from the scoring process. Each item requires respondents to select between two statements representing internal locus of control (LOC) and external LOC. The scale is scored in the external direction, with specific scoring assigned as follows: 2-a, 3-b, 4-b, 5-b, 6-a, 8a. 9-b. 10-b. 11-b. 12-b. 14-b. 15-a. 16-a. 17-a. 19-a. 20-a, 21-b, 22-a, 24-a, 25-b, and 27-b. The total LOC score is calculated by summing the number of external choices made by a respondent, resulting in a possible score range of 0 to 12. Higher scores indicate a stronger external locus of control, while lower scores reflect a stronger internal LOC (with a cut-off point of 6). The Arabic version of the LOC scale underwent translation and back-translation by researchers and experts in psychiatry and psychiatric nursing. Its content validity was assessed and revised by professionals in these fields.

Tools (2): The Rosenberg Self-Esteem Scale (RSES):

It was originally developed by Rosenberg in 1965, was utilized in its Arabic version to evaluate patients' self-esteem. This scale comprises 10 self-report items designed to measure self-esteem based on satisfaction with oneself and life. It includes five positively worded items and five negatively worded items, with scoring adjusted by reversing the values of either the positive or negative responses. Each item is rated on a four-point Likert scale ranging from "strongly disagree" (1) to "strongly agree" (4). The total score ranges from 1 to 40, with scores below 15 indicating low self-esteem, scores between 15 and 25 falling within the normal range, and higher scores reflecting greater self-esteem. In the current sample, the scale demonstrated good reliability, with a Cronbach's alpha of 0.84.

Assertiveness training Program description:

The researchers developed structured assertiveness training techniques based on a thorough review of relevant literature, including nursing textbooks, journals, and online resources. These techniques were specifically designed and implemented for the study group with the goal of enhancing the locus of control and self-esteem of nursing internship students. A baseline assessment (T1) was conducted for all 60 nursing interns two weeks prior to the intervention at the training hospitals using the identified study tools. Following this, participants were randomly divided into study and control groups, with only the study group received the program sessions.

Validity of the program

The program was evaluated and reviewed by three professors specializing in psychiatric mental health nursing before being shared with the participants, and necessary adjustments to the Arabic language were made according to their suggestions.

Reliability of the Program

Test-retest reliability (Pearson's r) of 0.828, and an internal consistency (Cronbach's alpha) of 0.906.

Overall Goal of the program

To empower individuals to communicate effectively, build healthy relationships, and advocate for themselves in various personal and professional situations.

Objectives of the program: Participants will be able to:

- Define clearly assertiveness, distinguishing it from passive, aggressive, and passive-aggressive behaviors.
- Practice specific verbal assertive techniques, such as: Using "I" statements to express feelings and needs, making clear and direct requests and saying "no" effectively and respectfully.
- Articulate the personal and professional benefits of assertive communication, such as reduced stress, improved relationships, and increased self-esteem.
- Utilize strategies for addressing and resolving conflicts or difficult communication situations assertively.
- Engage in role-play and real-life scenario practice to apply assertive skills in a safe and supportive environment.
- Gain a greater ability to manage their emotions (e.g., anger, frustration, fear) when communicating assertively.

Phases of the program

The program consisted of three phases:

Assessment phase (two sessions)

This phase involved conducting the baseline study assessment (T1) and providing a detailed explanation of the study's purpose, the researchers' roles, and the methods for delivering the program to ensure participants' understanding and collaboration. During

the enrollment visit, both verbal and written instructions were given to facilitate the evaluation of internship students using questionnaire forms.

The researchers dedicated time to working with the internship students to prepare them for participation in the study, build rapport, and introduce them to their peers. They fostered a sense of warmth and ensured a secure environment to encourage openness and willingness to share among the participants. Before the program began, all internship students completed pre-study assessments through individual interviews. The program was structured into twice-weekly sessions, each lasting 45–60 minutes. At the end of each session, 5–10 minutes were allocated for reviewing the session's content and gathering feedback from the students. Each session was designed with a specific title and objectives aligned with its content. The internship students were divided

into three groups, with each group consisting of 10 participants.

Implementation phase (eight sessions)

At this stage, researchers began conducting assertiveness interventions with a study group, starting with simpler, widely accepted content before progressing to more challenging material. The meetings were held twice a week at the same time and location within the unit. Additionally, an orientation session was organized for the internship students to clarify the program's objectives. The program sessions took place twice-weekly for eight weeks, with each session lasting one hour.

The program sessions included different types of activities received by every subject in the group as the following

vitii its t	ontent. The internship students were divided		
Sessions	Contents of the sessions	Activities	Method
First	Introduction to Assertiveness, Locus of Control, and Self-Esteem - Define assertiveness, locus of control, and self-esteem Explain the importance of assertiveness in nursing practice.	 Group discussion. Development of individual assertive plans 	- Group therapy - Assignment
Second	Understanding Assertiveness and Its Impact on Nursing Practice - Differentiate between assertiveness, aggression, passivity, and passive-aggression.	 Role-play common nursing scenarios requiring assertive communication. Group discussion on personal experiences with assertiveness. 	- Group therapy - Counseling - Assignments
Third	Locus of Control and Its Influence on Decision-Making - Explain the concept of locus of control (internal vs. external). - Discuss how it affects nurses' confidence in patient care.	Group discussion Engage in reflective exercises to identify personal control beliefs.	- Group therapy - Counseling - Assignments
Fourth	Building Self-Esteem Through Assertiveness Explore the relationship between self-esteem and assertive communication. Teach positive self-talk and cognitive restructuring techniques.	 Practice self-affirmation exercises. Self-talk technique. Document positive self-talk. 	- Group therapy - Counseling - Assignments
Fifth	Practical Assertiveness Techniques for Nursing Interns - Teach and practice "I" statements, active listening, and setting boundaries. - Conduct simulated nurse-patient and nurse-colleague interactions.	Group discussionSimulations.Peer feedback and refinement of communication skills.	- Group therapy - Counseling - Assignments
Sixth	Managing Workplace Challenges Assertively Discuss common challenges (e.g., dealing with senior staff, patient complaints). Introduce conflict resolution strategies.	- Role-play real-life work scenarios using learned assertiveness techniques.	 Group therapy Counseling Assignments
Seventh	Reflection and Real-Life Application Encourage participants to share experiences applying assertiveness in their practice. Address difficulties and reinforce strategies for sustained behavioral change.	Develop long-term personalized action plans for continued improvement.	

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Conclusion and an overview of all techniques administered

- Discuss key takeaways and encourage ongoing self-improvement.

Group discussion
Obtain participant feedback for future improvements.

- Group therapy

- Counseling

The researchers emphasized the significance of safeguarding confidentiality and respecting individuals' privacy rights. Each session started with a recap of the previous discussions and an outline of the objectives for the upcoming topics. The feedback and teaching reinforcement were tailored to meet the internship students' needs, ensuring their comprehension.

Control intervention

There was minimal engagement between the researchers and participants, as the researchers addressed participants' concerns and needs without direct intervention.

Evaluation Phase: This phase marked the conclusion of the program. The final two sessions were dedicated to wrapping up the program and collecting data for post-program evaluation using study tools. The assessment involved comparing changes in the internship students' levels of locus of control and self-esteem through the same questionnaire administered after the program (post-test). The post-assessment (T2) was conducted simultaneously for all participants to evaluate the effectiveness of the assertiveness training program on their self-esteem and locus of control.

Ethical consideration

The official permission was obtained from the Ethics of Scientific Research Committee at the Faculty of Nursing - South Valley University Qena under number All relevant (SVU-NUR- ADM -16-5-6-2024) directors of interns training hospitals were conducted before beginning of the study. The researchers explained the study purpose to the head nurses at the centers to gain their cooperation and support. Participants were informed of the objectives, the expected outcome of the study, and their right to withdraw from the study at any time without any adverse consequences. Code numbers were generated and used to ensure the anonymity of the participants All students interviewed prior to their enrollment in the program. The study's goal described, and Verbal consent was obtained, followed by written consent just prior to filling in the tools. To gather support and corporations, the study's goal was presented to supervisors and social workers of the training hospitals and sections of all selected internship students. Fixed time and room were evaluated for program sessions. Internship students maintained their regular daily activities in their work, combined with the assertiveness training program. The researchers utilized semi-structured interviews to complete tools for internship students' assessment. This interview lasted for about (45–60) minutes. Researchers answered all the participants' questions.

Procedure:

An official permission was obtained from the director of South Valley University Qena hospitals to conduct the study. Eligible students provided written informed consent, affirming their voluntary participation. All students were informed that their involvement in the research was entirely optional, with anonymity and confidentiality assured through the assignment of unique code numbers to each respondent. Students were also assured that the study posed no risks, and they retained the right to withdraw at any time without repercussions or negative effects on their academic grades.

Statistical analysis

The Statistical Package for the Social Sciences statistical software (SPSS version 21) analyzed the data. Descriptive statistics such as range, standard deviations, means, and frequency were determined for each group on each measure for pre, post- tests. Variance analysis (ANOVA) was used to identify the difference between variables of three categories. Pearson correlation ® was utilized to assess the relationship between continuous variables. The significance level was considered at (<0.05).

Results

Table (1): Sample characteristics before intervention (n=60)

Dangaral above eteristics	Study gr	Study group(n=30)		Control group(n=30)	
Personal characteristics	No.	%	No.	%	
Gender:		-	•		
Female	20	66.7	23	76.7	
Male	10	33.3	7	23.3	
Age:					
22-23	23	76.7	17	56.7	
24-25	7	23.3	13	43.3	
Marital status:					
Single	29	96.7	30	100.0	
Married	1	3.3	0	0.0	
Work during internship:	•			•	
Yes	11	36.7	7	23.3	
No	19	63.3	23	76.7	

The characteristics of the 60 nursing interns who completed the study are presented in Table 1.

Table (2): Effect of assertive training program intervention on locus of control and self -esteem (n=60)

Variables		Study group n=30	Control group n-30	T-test	P
Locus of control	Pre	11.2+2.7	11.7+1.8	0.84	0.40
	Post	16.8+2.9	11.3+2.1	8.41	0.019*
Self-esteem	Pre	26.5+2.3	26.3+4.1	0.26	0.79
	Post	34.1+7.2	25.9+3.8	5.51	0.000*

^{*}Significant at p-value<0.05

Table (3): Correlation matrix between the total mean of the study group regarding improvement in locus of control and self- esteem (n = 30)

Scores	Locus of control		Self esteem	
	r	р	R	P
Locus of control	1			
Self esteem	0.34	0.007*	1	

^{*}Significant at p-value<0.05

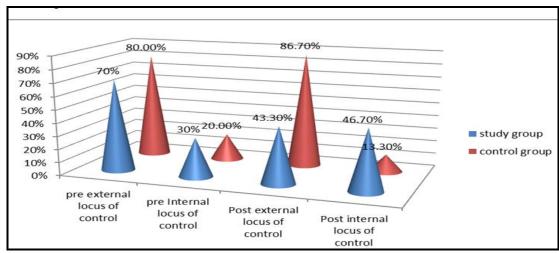


Figure (1): Comparison of dimensions of locus of control levels among internship students in study and control groups (pre-and post-program (n = 60)

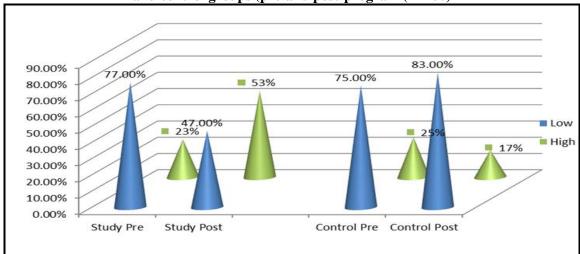


Figure (2): Self-esteem levels among internship students in study and control groups (pre-and post-program (n = 60)

Table (1): Shows that 66.7% of internship students in the study group were female, compared to 76.7% in the control group. Regarding marital status, 96.7% of the study group and 100% of the control group were single. Regarding age, 76.7% of nursing students in the study group and 56.7% of the control group were between 22 and 23years old. Concerning work during internship, 63.3% of internship students did not work during internship and 76.7% of the in control did not work during internship.

Differences between the study and control groups regarding outcome measures are reported in **Table** (2). It shows that, before the intervention, the difference of the mean score of locus of control was not significant in the study group (11.2+2.7) and control groups (11.7+1.8) (P=0.40). Also, before the intervention, the difference of the mean score of self-esteem was not significant in the study group

(26.5+2.3) and control groups (26.3+4.1) (P=0.79). The results indicated that after intervention, the mean of total locus of control score was significant in the intervention (16.8+2.9) and control group (11.3+2.1) (p=0.019). The results indicated that after intervention, the mean of total self-esteem score was significant in the intervention (34.1+7.2) and control group (25.9+3.8) (p=0.000).

Table (3): Reveals a highly significant positive correlation between locus of control and self-esteem among internship students (r = 0.34 and p = 0.007). In general, locus of control was positively affected by self-esteem.

Figure (1): Illustrates that 70% of internship students in the study group had an external locus of control dimension pre-program, 30% of them had internal locus of control dimension. After the program these percentages shifted to 43.3% for external locus of

control and 46.7% for internal locus of control in the post-program. Regarding the control group, the percentage of external locus of control was changed from 80% pre-program to 86.3% in post program. While the percentage of internal locus of control was 20%. After the program the percentages shifted to 13.3%

Figure (2): Illustrates that 77% of internship students in the study group had low self-esteem pre-program, 23% of them had high level of locus of control. After the program these percentages shifted to 47% for low self-esteem and 53% for high self-esteem in the post-program. Concerning the control group, the percentage of low self-esteem was changed from 75% pre-program to 83% in post program. While the percentage of high self-esteem was 25% after the program the percentages shifted to 17%.

Discussion

Today, assertiveness is recognized as a crucial trait for professional facilitating effective nurses, communication with patients, their families, and fellow healthcare professionals. Moreover. assertiveness serves as a cornerstone of nursing practice, empowering nurses to act independently and actively participate in decision-making processes. In the current study, efforts were made to ensure the internship students in both the experimental and control groups were similar in terms of demographic factors-both quantitative and qualitative-such as age, gender, marital status, parental occupations, and employment during the internship period, to minimize confounding variables.

The findings regarding the impact of the assertiveness training program on enhancing self-esteem and locus of control among intern students revealed that, prior to the intervention, there was no significant difference in the mean scores of locus of control and self-esteem between the study and control groups. In other words, both groups were comparable in these aspects before the intervention. However, following the intervention, a significant difference was observed in the total mean scores of locus of control and self-esteem between the study and control groups.

The research demonstrated that assertiveness training significantly contributed to improving the overall well-being of intern students. This type of training proved effective in enhancing self-esteem and strengthening their locus of control, especially when integrated with routine training to help interns cope with prolonged stress and its related challenges, such as workplace demands, psychological difficulties, and interpersonal conflicts. Additionally, the program showed promise in supporting nursing student retention, increasing satisfaction with college life, and promoting greater fulfillment in their chosen career

path. Studies by Kanade (2018) and Parry & Kumar (2022) also highlighted that assertiveness training positively impacts nurses by boosting their self-esteem and locus of control.

The study found that most intern students exhibited an external locus of control before the program in both the study and control groups. After the program, the majority in the control group still maintained an external locus of control. This can be interpreted as a tendency among individuals to increasingly attribute their successes and failures to external factors rather than recognizing them as consequences of their own actions and decisions. This shift towards an external locus of control may be explained by the nature of life skills training itself. Since such training emphasizes how external interventions can improve individuals' lives, students might perceive the training as an external factor influencing their outcomes, thereby reinforcing an external locus of control. Additionally, the limited duration of the training sessions and the condensed delivery of subject matter may have reduced the program's effectiveness in fostering a more internal locus of control.

The findings align with **Okwaraji**, et al., (2018), who reported that 69.9% of individuals exhibited an internal locus of control, while 30.1% displayed an external locus of control. In the current study, more than half of intern students demonstrated high self-esteem following their program, whereas the remainder had low self-esteem. This suggests that students with lower self-esteem may engage in negative self-assessment, self-criticism, and harbor feelings of inferiority, worthlessness, and inadequacy. They may also adopt a pattern of self-blame and perceive themselves as inferior compared to peers or professionals.

This finding aligns with the work of Madu, et al., (2023), who emphasized the importance of high self-esteem and assertiveness in fostering patient-centered care, professional autonomy, clinical decision-making, and effective interpersonal and interprofessional relationships. Consequently, they advocated for programs aimed at enhancing self-esteem and assertive skills to adequately prepare nursing students for their professional roles.

This study revealed a positive and significant relationship between self-esteem and assertiveness, indicating that nursing students with higher self-esteem are more likely to demonstrate assertive behavior, and vice versa. This finding suggests that individuals with elevated levels of self-esteem are driven by a desire for self-enhancement—they seek to improve their social standing and public image, aiming for recognition and appreciation from others, especially for achievements such as earning good grades. These results align with the findings of **Patel**

& Sharma (2023), who reported a significant correlation between self-esteem and locus of control, with a correlation coefficient of r = -0.274 (p < 0.01).

Conclusion

The study found that implementing an assertiveness training program for intern students positively impacts their self-esteem and locus of control. This training plays a vital role in equi-pping interns with the ability to express their needs and opinions clearly and respectfully, which is essential in professional environments where communication with supervisors, colleagues, and clients is key. By fostering assertiveness, the program empowers students to advocate for themselves and their beliefs, enhancing their sense of self-worth and confidence. Assertiveness is a critical workplace skill, as it helps interns gain recognition for their contributions, embrace new challenges, and progress in their careers.

Limitations

- Personal experiences, workplace dynamics, mentorship access, and prior psychological resilience training could influence self-esteem and locus of control. Isolating the assertiveness program's specific impact from these variables remains challenging.
- Participants in both groups may have pursued additional interventions (e.g., therapy, workshops) outside the study, potentially diluting observable differences between the experimental and control groups.
- 3. Adherence to program sessions and practical application of learned skills were not systematically tracked, creating uncertainty about participants' engagement and protocol fidelity.
- 4. Practical skill assessments (e.g., role-playing, self-reporting) may have introduced evaluators or participant biases due to their inherently subjective nature.
- 5. Satisfaction with the program's structure, content, or delivery was not evaluated, limiting insights into its acceptability and perceived value.
- 6. The absence of long-term follow-up (e.g., 6 months post-training or post-internship) leaves the intervention's sustained efficacy unverified.

Recommendations

- Regularly Nurse educators and managers should evaluate intern students' self-confidence and assertiveness abilities.
- Helps this assessment identify those who may need additional support.
- Recommended Implementing frequent training sessions to bolster these crucial skills is highly.

- Develops the role of nurse' educators is pivotal in creating and executing assertiveness training programs for nursing undergraduates.
- Essential these programs are as assertiveness is a key trait for modern professional nurses.
- offer advisable to assertiveness training to all nurses, aiming to boost their self-esteem, internal locus of control, and assertive behaviors.
- Collaborate strong foundation, assertiveness techniques should be incorporated into the core curriculum for undergraduate nursing programs. Help this integration will nurture these vital skills from the early stages of a nurse's education.

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