The Effect of Assertiveness Behavior on Nursing Professional Behaviors among Nursing Staff

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Abstract

Background: Assertiveness is a communication style, which is the key to successful relationships with clients, the family, the nurses, and colleagues. Assertiveness is a key attribute for nurses without which true autonomy, professional status or empowerment cannot be achieved. Nursing involves fulfilling several roles, including interacting with clients, peers, and other health professionals. The current study aimed to assess the effect of assertiveness behavior on nursing professional behaviors among nursing staff. Research design: A descriptive correlational research design was used to achieve the aim of the current Study. Setting: The study was conducted in the critical areas at Health Insurance Hospital in Minia city, Egypt. Sample all nursing staff who working in critical areas at health insurance hospital during the period of data collection. Their total numbers were 85 nurses. Data Collection Tools. Tool (I): It was included two parts: Part 1: Personal data. Part 2: Assertiveness behavior questionnaire. Tool (II): Nursing professional behaviors observational sheet. Results: Most of the studied sample had high level in assertiveness behaviors and total nursing professional behaviors and, there are strong correlation between total nursing professional behaviors of the studied nursing staff and their nursing professional behaviors and communication skills, conflict, self-conflict factors and total assertiveness behaviors. Conclusion: Strong correlation between assertiveness behavior of nursing staff and their nursing professional behaviors and communication skills. Recommendations: conduct assertiveness training program is recommended for all nurses to improve and enhance their self-esteem and assertiveness and maintain periodical meetings for nurses from different hospitals by seeking their opinions and exchanging their experiences during the different situations.

Keywords: Assertiveness Behaviors, Nursing Professional Behaviors, Nursing Staff

Introduction:

Assertiveness is a communication style, which is the key to successful relationships with clients, the family, the nurses and colleagues. Eventually, a form of peer pressure can emerge that reshapes others and results in an assertive colleague. Assertiveness is an interpersonal behavior that promotes equality in humans by assisting an individual to give expression to their rights, thoughts and feelings in a manner that neither denies or demeans but recognizes and respects those of others (Krstić & Kekuš, 2023).

Assertiveness in the ability to be honest, direct and appropriate expression of opinions, feeling, attitudes and rights, without undue anxiety, in a way that does not infringe on the rights of other. To develop successful communication with patients, families, and colleagues. Assertiveness is considered as an important hall mark for being a professional nurse. Furthermore, assertiveness is the essence of nursing activities, enabling them to be more independent and make decisions more appropriately (Ahmed .E. et al., 2021).

Assertiveness is a state of mind, an attitude, a way of thinking. It is about how to interact with others to be a better manager, colleague, or team member. It enables to use behaviors that and other people value. Assertiveness is the art of being confident, and consistently having clear and honest communication while respecting others' rights and taking responsibility for one's actions (Wehabe.M. et al., 2018).

Assertiveness is a behavioral response that strives to maintain a balance between passive and aggressive response patterns with a focus on equality and fairness in interpersonal interaction, which is a result of a positive sense of self-respect for others. Assertive behavior requires a high level of differentiation and solid self (Ahmed.E. et al., 2021).

Assertiveness is a key attribute for nurses without which true autonomy, professional status or empowerment cannot be achieved. Equates being assertive with being a good communicator appositive correlation of assertive behavior exists with role clarity, job and career satisfaction. Nursing involves fulfilling several roles, including interacting with clients, peers and other health professionals. These roles are enhanced and carried out with greater effectiveness when nurses are equipped with good communication skills and assertive behavior (**Bannur, 2023**).

Every day within a clinical environment, nursing witnesses the pain, sorrow and sadness of other people. Special situations in hospitals such as patients' moans and sighs, their sickness and death, sleeplessness, misgivings and interpersonal relationship disorders in all levels lead to an increase in nurses' stress and anxiety. This stress and anxiety also affect other nurses thus overshadowing the overall performance, care procedure and quality of the whole system. Factors such as the role of culture, seniority, personality factors, organization management the importance and the effects of this issue on nurses' mental health and patient care, the uncertainty in assertiveness (Ahmed.E. et al., 2021).

Moreover, assertiveness is consider as valuable behavior in nursing since it involves positive results, such as enhancing leadership skills, increasing job satisfaction, achieving real independence, professional accomplishment, power and determination, avoiding negligence and overlook during the care giving, decrease job stress, and increased efficiency during the changes in condition. The ability of

giving proper assertive response to critical or potentially risky situations is a vital and life-saving skill. Through an assertiveness behavior, it is possible to develop appropriate communication and support patients' rights (**Rezayat & Nayeri, 2020**).

Assertive nurses are able to give direct suggestions in a comfortable way, give and take criticism, assessing the rights and responsibilities in a nursing situation, and working in the hospital in a thoughtful problem-solving way. Nurses are the largest part of the occupational health system .also, Nursing is a dynamic profession that requires a wide range of behavioral, functional, and clinical skills, including Professional nursing behavior, in addition to applying knowledge, experience and professional, legal and ethical, standards (Hanson et al., 2020).

Professional behaviors that contribute to nursing professionalism are considered an essential component of nursing leadership within a global context. The importance of developing global knowledge has been recognized in nursing, and because many healthcare issues cross international borders, the need for a global exchange of knowledge and evidence is greater than ever. Nursing professionalism has been demonstrated by attitudes, knowledge, and behaviors that reflect a multifaceted approach to the regulations, principles, and standards underlying successful clinical practices (Ageiz et al., 2021).

As nurses work in different situations, they must be assertive in order tourgical departments, orthopedic department, medical meet the challenge and to win cooperation from others. Assertiveness idepartment, pediatric department, ophthalmology department, very important to find the best possible solution for all people, increase aboratory department, radiology department, post catheter the chance of nurses' needs being met, allow the nurses to remain innit and stroke unit recently opened at the end of 2022. The control, bring greater self-confidence and reduce stress among nursestotal hospital capacity of beds is 171 beds, with a total number Leaders often suffer stress and need to be assertive to resist and to copof nurses' number 280 nurses.

successfully. Assertiveness is a great tool that makes nurses a leader in any area of life. Assertiveness also means that the leader will speak ou**Subjects** in a tone that lets people know leaders are serious about what they have **A** to say (Li & Dylan, 2020) working

Significance of the Study

Assertive behavior is very beneficial for nurses, its importance for building therapeutic relationship. Assertive nurses have high self-confidence, increases self-worth, decrease helplessness, hopelessness, resolve the conflict timing, improve nursing professional behaviors and patient care will be improved (Hopkins, 2016).

Through my work in the health insurance hospital, it was found that most nurses lack of assertiveness behavior that led to depression from anger turned inward, resentment, frustration, anxiety, poor relationships of all kinds, unable to express emotions of any kind, isolated and stressed. All these issues may be affected negatively on care of patients and nurses' professional behaviors. So, the researcher introducing this study to assess the effect of assertiveness behavior on nursing professional behaviors among nursing staff. There were no previous studies which linked those two interrelated variables together, but Maheshwari & Gill, (2015) studied the relationship of assertiveness and self-esteem among Nurses, and found that there was a moderated positive correlation between assertive behavior and self-esteem. Moreover, (Michiko et al., 2015) studied that An International Comparison of Professional Behaviors among Nurse Leaders in the U.S.A. and Japan it found that mean total score of 6 professionalism was significantly high in the U.S.A. than Japan.

Aim of the Study

The aim of the current study is to assess the effect of assertiveness behavior on nursing professional behaviors among nursing staff.

Research Questions

- 1. What is the level of assertiveness behavior among nursing staff?
- 2. What is the level of nursing professional behaviors among nursing staff?
- 3. Is there a relation between assertiveness behavior and nursing professional behaviors among nursing staff?
- 4. Are there a relation between personal data, assertiveness behavior and nursing professional behavior among nursing staff?

Subject and method Research design

A descriptive correlational research design was used to achieve the aim of the current Study.

Setting

The study was conducted at the health insurance hospital in Minia governorate, Egypt. It consists of one building that contain eight floors, The hospital departments are emergency department. Intensive care unit, cardiac care unit, neonatal intensive care unit, oncology department,

A Convenient sample included all nursing staff who working in critical areas at health insurance hospital during the period of data collection. Their total numbers were 85 nurses and are classify as the following:

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Department	Total Staff nurse			
Intensive care unit	21			
Cardiac care unit	22			
Neonatal intensive care	16			
Oncology department	26			
Total	85			

Data collection tools

Data was collected by using two tools as following: **Tool (I): Assertiveness behavior questionnaire** It was included two parts:

Part 1: Personal data: It was used to collect data about nursing staff and encompass item such as age, sex, education level, years of experience, and residence.

Part 2: Assertiveness behavior questionnaire: It developed by **Restoke**, (2012) to assess Assertive Behavior. It consists of 56 items ,were grouped under four factors as follows: Communication skills factor (16 questions), Personal / Professional rights and responsibilities factor (12 questions), Conflict factor (14 questions) and Self –confidence factor (14 questions)

Scoring system: With a 5–point Likert scale. These questions were scored 1, 2, 3, 4 and 5 for the responses Never (1), Rarely(2), Neutral(3), Often(4), and Always(5), respectively. The scoring system divided into 2 levels low assertive Less than 60% and high assertive \geq 60% as follows:

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Items	No. of items	min- max	Low assertive	High assertive
Communication skills factor	16	1-80	1-47	48-80
Personal / Professional rights and responsibilities factor	12	1-60	1-35	36-60
Conflict factor	14	1-70	1-41	42-70
Self-confidence factor	14	1-70	1-41	42-70
Assertiveness behavior	56	1- 280	1-167	168-280

Tool (II): Nursing professional behaviors observational sheet:

This tool developed by Watson et al., (2002): Go& Geckil, (2010) and modified by the researcher to assess nursing professional behaviors among nursing staff by the researcher observation during nurses' work in morning, evening and night shifts for three time and take the mean of them. It consisted of 28 items which were grouped under five factors as follows: General appearance and behavior(4 items),Documentation inside medical file(6 items),nursing practice(8items),cooperate with others and documentation(4 items)and following infection control standard precautions(6 items) with three Likert scale ranged as: (not applicable = 0, not done = 1, done = 2).

The scoring system was ranged from (0 to 56), and it divided into three levels, low level <33%, moderate level 33-< 66%, and high level of nursing professional behaviors \geq 66% as follows:

Items	No. of item s	min - max	Low profession al behavior	Moderate profession al behavior	High profession al behavior
General appearance and behavior (4)	4	0-8	0 - 2.26	2.27 – 5.27	5.3 - 8
Documentatio n inside medical file (6)	6	0- 12	0 - 4	4.1 -< 8	8-12
Nursing practice (8)	8	0-16	0 - 5.3	5.4 -10.5	10.6 - 16
Cooperate with others and development (4)	4	0-8	0 - 2.26	2.27 - 5.27	5.3 - 8
Following infection control standard precautions (6)	6	0-12	0 - 4	4.1 -< 8	8-12
Total Nursing professional behaviors (28)	28	0-56	0-18.6	18.7 - <37	37 - 56

Ethical Consideration:

- An official letter was granted from the research ethics committee of the Faculty of Nursing, Minia University.
- Approval to conduct the study was obtained from the Dean of the Faculty of Nursing Minia University.
- Permission and consent were obtained from the director of the hospital and nursing directors.
- Permission and consent were obtained from the head of the department and the head nurse.
- Before the conduction of the pilot study and the actual study, oral consent was obtained from the participants who were willing to participate in the

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study after explaining the nature and purpose of the study.

- The study subject has the right to refuse to participate or withdraw from the study without any rationale at any time.
- Study subject privacy was considered during the collection of data. Participants were assured that all their data were highly confidential; anonymity was also assured by assigning a number for each nurse instead of names to protect their privacy

Validity and Reliability of Tools: Validity:

The tool was tested for the content validity by a jury of five experts in the field of nursing administration and education; the jury was composed of two professor of nursing administration from faculty of nursing – Assuit University and three Assist professor of nursing administration from faculty of nursing – Minia University, each of the expert panel asked to examine the tool for content coverage, clarity-warding, length, format, and overall appearance and necessary modifications was done.

Reliability:

The tool was tested for internal reliability by using Cronbach' alpha test which assertiveness behavior tool was 0.817 and nursing professional behaviors tool was 0.912 which indicated good reliable tools.

Pilot Study:

A pilot study was carried out before starting data collection on 10% of staff nurses (9 nurses) from the health insurance hospital. The aim of this pilot study is to test the clarity, comprehensiveness, accessibility, and applicability of the tools and to estimate the appropriate time require filling the questionnaire and observation sheet. The pilot study sample was included in this study.

Data collection procedure

An official letter was granted from the dean of faculty of nursing. This letter was including a brief explanation of the objectives of the study. Written approval was obtained from director of the health insurance hospital. The tools were adopted and translated into Arabic by the researcher, then approved by the jury before utilizing to collect data for the study. Staff nurses was interviewed on group basis to explain the nature and purpose of the study. The time required for observation was estimated after conducting the pilot study.

The researcher distributed self-administered assertiveness behavior tool to the participants during the morning and evening shifts .Participants were given 20 to 25 minutes to answer the tool. They were allowed to discuss any item that needed more clarification with the researcher.

The nursing professional behaviors were observed three times in different shifts (morning, evening, and night shifts for each of the studied nurses) according to observational checklist then calculated average observations for each item. The researcher collected data two days / week for six months, from September 2022 to the end of February 2023.

Data statistical analysis

Upon completion of data collection, the data was scored, tabulated, and analyzed through data entry and analysis by computer using the "Statistical Package for Social Science" (SPSS) (IBM 28). Data were presented using descriptive statistics in percentages, frequency mean, and standard deviation. Inferential statistical significance tests, such as the chi test, Fisher exact test and Pearson correlation, were used to identify group differences and the relationship among the study variables. The p-value > 0.05 indicates a

non-significant result, while the P -value ≤ 0.05 is significant, and the p-value ≤ 0.01 is highly significant. One-way ANOVA and T- test was used to detect the differences between three observation and relation between personal data of the nursing staff and total assertive behaviors in addition with nursing professional behaviors and its domain. Correlation is used to test the nature and strength of the relation between the personal data of the staff nurse, assertive behaviors and nursing professional behaviors and its domain

Results

Table (1): Distribution of the studied nursing staff according to their personal data in critical areas at health insurance
hospital in Minia governorate, 2023 (n= 85).

Personal data	Nursing st	aff (n= 85)		
	No.	%		
Department				
NICU	16	18.8		
CCU	22	25.9		
ICU	21	24.7		
Oncology	26	30.6		
Age/ years		•		
22-25	50	58.8		
26 - 29	25	29.4		
30 - 33	7	8.3		
34 - 37	3	3.5		
Mean \pm SD	25.8	± 2.9		
Gender				
Female	79	92.9		
Male	6	7.1		
Marital status				
Single	32	37.6		
Married	53	62.4		
Education level				
Nursing technician	69	81.2		
BSC	16	18.8		
Years of experience				
1-5	58	68.2		
6-10	23	27.0		
11-15	2	2.4		
16-20	2	2.4		
Mean \pm SD	4.9 =	4.9 ± 3.6		
Residence				
Urban	56	65.9		
Rural	29	34.1		

Table (1): shows that 30.6% of the studied nursing staff worked in oncology department, 58.8% ages between 22 - 25 years with mean age 25.8 ± 2.9 , and 92.9% is female. Concerning marital status, 62.4% are married, 81.2% has nursing diploma, 68.2% their years of experience between 1- 5 years and 65.9% lives in the urban area.

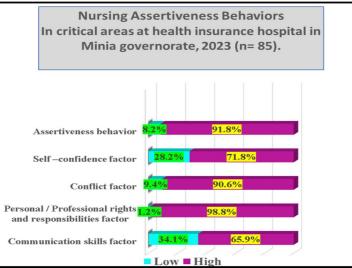


Figure (1) Distribution of the total assertiveness behaviors Level and its Domains among the nursing staff in critical areas at health insurance hospital in Minia governorate, 2023 (n= 85).

Figure (1): illustrates that 98.8% of the studied have been high level in personal / professional rights and responsibilities factor, 90.6% have been high level in conflict factors, and 91.8% have been high level in assertiveness behaviors.

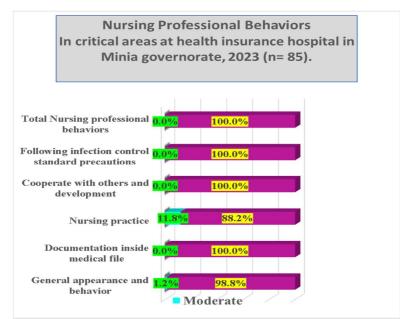


Figure (2) Distribution of the total Nurses professional behaviors mean observational Level and its Domains among nurses in critical areas at health insurance hospital in Minia governorate, 2023 (n= 85).

Figure (2): presents that most of the studied nursing staff have high level regarding general appearance and behavior, documentation inside medical file, nursing practice, cooperate with others and development, following infection control standard precautions, and total nursing professional behaviors during three observations (98.8%, 100.0%, 88.2%, 100.0%, 100.0%, 100.0%, respectively).

Table (2): Relation between personal data of the nursing staff and their assertiveness behavior score in critical areas at health
insurance hospital in Minia governorate, 2023 (n= 85).

	Nursing staff (n= 85)	Total assertiveness behavior	Test of significance	
Personal data	No.	Mean ± SD	t/f test	P – Value
Departments				
NICU	16	223.2 ± 11.4	0.840	0.476
CCU	22	221.6 ± 8.8		
ICU	21	218.0 ± 19.7		
Oncology	26	224.6 ± 14.9		
Gender				
Female	79	221.7 ± 14.9	0.627	0.532
Male	6	225.5 ± 4.1		
Marital status				
Single	32	221.1 ± 12.7	0.429	0.669
Married	53	222.5 ± 15.4		
Education level				
Nursing technician	69	222.2 ± 15.3	0.381	0.704
BSC	16	220.7 ± 10.2		
Residence				
Urban	56	220.9 ± 14.3	0.937	0.352
Rural	29	224.0 ± 14.6		

Table (2): shows that, there is no statistically significance differences personal data of the nursing staff and their assertiveness behavior score.

Table (3): Relation between personal data of the nursing staff and their their professional behavior in critical areas at health
insurance hospital in Minia governorate, 2023 (n= 85).

	Nursing staff (n= 85)	Total professional behavior	Test of significance	
Personal data	No.	Mean ± SD	t/f test	P – Value
Departments				
NICU	16	48.0 ± 1.9		
CCU	22	52.0 ± 2.3	9.474	0.001**
ICU	21	50.4 ± 3.0		
Oncology	26	49.3 ± 2.5		
Gender				
Female	79	49.9 ± 2.8	1.206	0.231
Male	6	51.3 ± 2.9		

	Nursing staff (n= 85)	Total professional behavior	Test of	significance
Personal data	No.	Mean ± SD	t/f test	P – Value
Marital status				
Single	32	50.1 ± 3.0	0.316	0.753
Married	53	49.9 ± 2.7		
Education level				
Nursing technician	69	49.7 ± 2.6	1.797	0.076
BSC	16	51.1 ± 3.3		
Residence				
Urban	56	49.8 ± 3.0	0.729	0.468
Rural	29	50.3 ± 2.5		

** significant at the 0.01 level

Table (3): shows that, there is no statistically significance differences between personal data of the nursing staff and their professional behavior except nursing staff working in CCU have high mean scores regarding professional behavior than other departments with P value < 0.001.

Table (4): Correlation between nursing staff nursing total assertive behaviors with their nursing professional behaviors and
its domain in critical areas at health insurance hospital in Minia governorate, 2023 (n= 85)

		Nursing staff (n= 85)				
		Communication	Personal /	Conflict	Self-	Total
Items		skills factor	Professional rights	factor	confidence	Assertivene
			and		factor	ss behavior
			responsibilities			
			factor			
General appearance and	r	0.173-	0.159-	0.019	0.082	0.068-
behavior	P - Value	0.112	0.145	0.866	0.458	0.537
Documentation inside	r	0.005	0.060	0.009-	0.027-	0.004
medical file	P - Value	0.966	0.586	0.932	0.805	0.975
Nursing practice	r	0.033	0.175-	0.021	0.047-	0.046-
	P - Value	0.766	0.109	0.847	0.666	0.678
Cooperate with others and	r	0.031	0.035-	0.074	0.000	0.031
development	P - Value	0.780	0.751	0.501	0.999	0.775
Following infection control	r	0.111	0.018-	0.041	0.143-	0.004-
standard precautions	P - Value	0.313	0.873	0.708	0.192	0.972
Total Nursing	r	0.874	0.206	0.678	0.618	0.753
professional behaviors	P - Value	0.017*	0.138	0.046*	0.05*	0.035*

*Correlation is significant at the 0.05 level **Correlation is significant at the 0.01 level

Table (4): shows strong correlation between total nursing professional behaviors of the studied nursing staff and their nursing professional behaviors and communication skills, conflict, self conflict factors and total assertiveness behaviors (r= 0.874, P - value < 0.017; r= 0.678, P - value < 0.046; r= 0.618, P - value < 0.05; r= 0.753, P - value < 0.035 respectively)

Discussion

Assertiveness is one style of communication that reflects nurses' expression of their genuine feelings, standing up for their legitimate rights, and refusing unreasonable requests. Assertive nurses resist undue social influences, disregard arbitrary authority figures, and refuse to conform to arbitrary group standards **Hargie**, (2021). Assertiveness can help individuals demonstrate constructive social behaviors and suitable social interactions with others and improve their problem-solving ability and self-awareness (**Hadavi & Nejad**, 2018).

Regarding the nursing staff assertiveness behavior and domain level, the current study results illustrated that most of the studies had been high level in personal/professional rights and responsibilities factors, the vast majority have been high level in conflict factors and high level in assertiveness behaviors.

The current finding was consistent with our study by **Moustafa and Mohamed (2018)** about the relationship between assertiveness and job satisfaction among nursing personnel at Benha University, which showed that the majority of nursing personnel were highly assertive.

The current study results disagreed with the study by **Hussien et al. (2017).** Factors affecting assertive behavior among head nurses. Over half of the studied nurses have low assertiveness in personal/ professional rights, responsibility, and conflict. Also, over one-fourth of them had low

assertiveness regarding self-confidence. This discrepancy may be due to a lack of educational and training programs for the nursing staff's assertiveness.

On the other hand, the current study results disagreed with the study by **Hadavi & Nejad (2018)** about assertive behaviors among nursing staff in a local hospital in Iran cleared that the minority of head nurses as well as nurses had assertive behaviors.

This finding might be due to the studied nurses consistently cooperate with others to find solutions to problems, face challenges head-on, make sound decisions, and maintain a high level of self-confidence despite the inherent difficulty of their work, as well as the fact that they always communicate clearly so that others can understand their point of view concerning an issue.

Regarding nursing staff regarding total professional behavior levels, the present study findings presented that most of the studied nursing staff have a high level of general appearance and behavior, documentation inside the medical files, nursing practice, cooperation with others and development, following infection control standard precautions, and total nursing professional behaviors during three observations.

The current study results were supported by **Tomas et al. (2021),** who studied undergraduate nursing students' self-reported professional behavior at the University of Namibia, cleared that nursing students scored relatively high mean

scores (> 4.0) in all aspects of self-reported professional behavior; protecting health, safety, and rights of the patients had a high mean score of (4.28 ± 0.55) , the nursing students' collaboration with other healthcare professionals and the community was rated high with a mean score of 4.16 ± 0.42 . Also, the study by **Huang et al. (2020)** about self-reported confidence in patient safety competencies among Chinese nursing students, A multi-site cross-sectional survey, cleared that nursing students felt confident about their clinical safety skills.

On the other hand, the current study results were contradicted by the study by **Oxelmark et al. (2017)**, students' understanding of teamwork and professional roles after interprofessional simulation - A qualitative analysis,' Advances in Simulation cleared that; nursing students reported being insecure in collaborating with medical students, lacked confidence and understanding of team.

This finding might be because the nurses in the study recognized the value of professional behavior in fostering accountability, enhancing team communication, establishing a pleasant working atmosphere in the clinic, and advancing their own professional and personal growth. It's crucial to the healthcare field's mission of preserving its core values and expertise.

Regarding the relation between the personal data of the nursing staff and their assertiveness behavior level, the study results show no statistically significant differences between the personal data of the nursing staff and assertiveness behavior level; the current study results were supported with **Hadavi & Nejad (2018)**, who studied assertive behaviors among nursing staff in a local hospital in Iran. Cleared that there were no statistically significant relationships between nurses' assertiveness with their gender, marital status, nursing degree, or organization correlation between ICU nursing staff assertiveness and their personal characteristics.

Also, Ata & Ahmed (2018), who studied the effect of the assertiveness training program on nurse interns' selfesteem and stress at El-Fayoum University Hospitals, showed that no statistically significant relations between nurse interns' personal characteristics as regards their assertiveness, selfesteem, and stress scores, where p-value > 0.05.

On the other hand, this finding contradicted our study results; **Ilyas et al. (2018)** found the highest assertiveness mean scores presented by the baccalaureate nurses, followed by associate degrees, while the lowest mean scores were present in diploma school degrees.

This result might be due to differences in the sample culture, size, and inclusion criteria of the different studies.

Concerning the relation between the personal data of the nursing staff and their professional behavior, the study findings showed no statistically significant differences between the personal data of the nursing staff and their professional behavior, except nursing staff working in CCUs have higher mean scores regarding professional behavior than other departments. The current study findings were consistent with the study by **Tomas et al. (2021)**, who studied Undergraduate nursing students' self-reported professional behavior at the University of Namibia and found no statistical significance difference between these demographic characteristics and professional behavior.

On the other hand, the current study results were contrary to the study by **Alshahrani et al. (2021)**, who studied the determination of professional behaviors among nurses working at selected Teaching Hospital in India, cleared that age, gender, educational status, years, and area of experience, as well as the nurses' role in the health care settings, have a significant association with their professional behaviors.

Regarding the correlation between selective nursing staff personal data with their nursing assertive behaviors and domain, the current study results showed no correlation between the studied nursing staff's age, years of experience, and their nursing assertive behaviors and domain.

This study's results contradicted the study by **Maheshwari & Gill (2015)**, who studied the correlation of assertive behavior with communication satisfaction among nurses and revealed that there was a statistically significant correlation between nursing staff assertiveness and their age, gender, years of experience, and level of education. There was a statistically significant correlation between nursing staff's position, gender, years of experience, and workplace assertiveness behavior.

The current study results showed a strong correlation between the total nursing professional behaviors of the studied nursing staff and their professional nursing behaviors and communication skills, conflict, self-conflict factors, and total assertiveness behaviors. The results of the current study were consistent with the study by **Bloom (2019)** about Horizontal violence among nurses: Experiences, responses, and job performance indicated that the type of communication between nurses can affect their performance, and inadequate and insufficient communication between them and nurse managers is one of the important barriers to effective practical and professional behavior of nurses.

In addition, **Pun et al. (2018)** studied health professional-patient communication practices in East Asia: An integrative review of an emerging field of research and practice 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 the patient.

Also, **Omura et al. (2016)** concluded that students with low assertiveness and self-esteem may display negative professional behaviors when they become registered nurses and recommended that their assertiveness training begin in undergraduate education.

Conclusion

Based on the findings of the present study, it can be concluded that most studied nursing staff had been high level in assertiveness behaviors and nursing professional behaviors. There was strong correlation between total assertiveness behaviors of the studied nursing staff and their nursing professional behaviors and communication skills

Recommendations

Based on the findings of the present study, the following recommendations are established:

- Use of assertiveness training program is recommended for all nurses to improve and enhance their self-esteem and assertiveness.
- Maintain periodical meetings for nurses from different hospitals by seeking their opinions, and exchanging their experiences during the different situations.
- Provide adequate supplies and equipment facilities for nurses to facilitate ability to being assertive.
- Empower nursing staff to update their knowledge and

their profession behavior based on scientific research.

For further research:

- Relationship between professional behavior and flexible work among nurses.
- Relationship between assertiveness and burnout among nurses

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