

Assertiveness, Grit, and Prosocial Behaviour among Nursing Students

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ABSTRACT

The current study sets out to measure the Assertiveness, Grit and Prosocial Behaviour among Nursing Students. The study was carried out the nursing colleges in Ernakulam, Kerala. There were 200 nursing students in the sample, with age ranging from 18 to 25. The measures used included the, Rathus Assertiveness Scale (RAS), Short Grit Scale (SGC) and the Prosocialness Scale for Adults (PSA). The findings revealed that there is there is a weak positive correlation between grit and prosocial behaviour. However, assertiveness and grit were not correlated. Moreover, no correlation was found between prosocial behaviour and assertiveness. There was no difference on assertiveness with respect to nursing category and there was no difference on grit with respect to nursing category. Although, there was a difference on prosocial behaviour with respect to the nursing category and the scores indicated that B.Sc. nursing students were having more prosocialness than general nursing students.

Keywords: *Assertiveness, Grit, Prosocial Behaviour*

A nursing student is anyone who is formally enrolled in the College of Nursing to pursue a graduate degree, including distance learners, special students, anyone pursuing postgraduate studies alone or in conjunction with another degree, and regardless of where the student is physically located. A nursing career can be extremely rewarding, but it is not for everyone. Simply becoming a registered nurse is a journey in and of itself because it requires a lifestyle and mental shift (Kluwer, 2017). The study of nursing is challenging, and the field of nursing sciences is rigorous and complex. Students are taught theory and practice in actual circumstances throughout the course to assess, diagnose, organize, implement, and evaluate treatment using nursing and related sciences and evidence-based practice (Ganapathy et al., 2020). The student is required to study pure sciences such as anatomy, physiology, biochemistry, and microbiology, as well as behavioural sciences such as psychology and sociology, as well as research, statistics, administration and management, basic economics, and all medical sciences in depth, including genetics, pharmacology, dietetics, and medicine. However, becoming a professional nurse is an honourable and noble profession that provides great satisfaction to

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Assertiveness, Grit, and Prosocial Behaviour among Nursing Students

its members. Patients look up to them for hope and understanding, and they admire and rely on their abilities. Indian students frequently choose nursing after being persuaded by someone, usually their parents or relatives, who believe that after completing their education, they will be able to find work immediately. Under pressure, this inexperienced beginner undergoes changes in order to learn the knowledge, skills, and attitudes required to become a professional nurse.

"Nurses receive rigorous professional training before entering the field of health care professionals"). It is a difficult task for an uninformed and unprepared novice nurse to go through this rigorous training. As nurses move away from traditional respectful roles and perceived stereotypes; it is becoming increasingly clear that they must be assertive. One's capacity to express and support ideas, interests, and feelings with ease, respectfully, and without concern is referred to as assertiveness. Assertiveness is required for effective nurse/patient communication, and its development may also help the profession's confidence as it grows. Educational methods can help to promote assertive behaviour. It is preferable for nurses to receive this educational preparation while still in their undergraduate programmes. Effective communication skills are now identified as a crucial component of health-care quality and safety, as well as a professional qualification criterion in nursing. The idea of assertiveness, with its components of balancing relationships, boosting happiness, and promoting understanding, is a talent that has emerged with a rise in communication-based malpractices in nursing services. This circumstance requires nurses to be forceful in their working life.. Individuals' treatment and recovery processes, communication skills, conflict avoidance, and work satisfaction all advance along with an increase in assertiveness. Nurses can work under difficult conditions and make critical clinical decisions. This dedication is frequently described as resilient. A deeper reason why nurses perform well in disasters is because they have the personality trait known as grit. Grit is a non-cognitive quality and a drive that sustains a person's focus on a challenging activity for an extended period of time. Grit can help to explain why two people with similar levels of ability are seen to perform or achieve results that are very different from one another. Grit drives them to persevere in the face of adversity and achieve long-term success. Passion and perseverance are essential grit characteristics. Cultivating grit among nurse leaders and clinical nurses is critical to maintaining interest in emergency preparedness and ensuring patients' and caregivers' needs are met in the event of a disaster. Grit is a personality trait that may be present in nurses and contribute to this type of performance. Grit is a non-cognitive personality trait that drives a person to achieve goals and objectives in the face of adversity. Gritty nurses are not necessarily gritty about a specific task in nursing, but they have a gritty personality that makes them passionate about nursing. Grit is distinct from other traits associated with success, such as intelligence, creativity, charisma, or vigour. Individuals with grit may not be as intelligent as others, but they are more successful. Motivation is the underlying difference in this temperament. Nurses are highly motivated to care for others, and having grit allows them to continuously improve their care competency over time.

Prosocial behaviours have been linked to improved health care performance and quality of care delivery. Prosocial organizational behaviours are defined as behaviours that are intended to benefit other individuals, work groups, or organizations and can be in-role or extra-role behaviours that improve organizational functioning. Nurses who exhibit more prosocial organizational behaviours toward their co-workers can have a significant impact on unit performance, increasing the quality of care delivered on the unit by collaborating to provide care . Prosocial behaviours are actions that are perceived to be advantageous to others and to have positive social consequences. These consist of helping others in need,

Assertiveness, Grit, and Prosocial Behaviour among Nursing Students

responding to emergencies, working together, sharing, volunteering, making sacrifices, and similar acts. Second, prosocial behaviour like assisting has the potential to promote or enhance the wellbeing of another person. The goal of the helper is in question as opposed to hostility. Helping can happen even if the one doing it has no intention of doing so. Helping behaviour may also entail selfish or egoistic intentions because the helper themselves may gain from their actions. Altruism is another form of prosocial behaviour. Altruism is the act of assisting someone else without expecting anything in return.

METHODOLOGY

Aim

The study intends to investigate the Assertiveness, Grit and Prosocial Behaviour among Nursing Students.

Specific Objectives

The objectives of the study are as follows:

- To assess the relationship between assertiveness and grit among nursing students.
- To assess the relationship between grit and prosocial behavior among nursing students.
- To assess the relationship between prosocial behavior and assertiveness among nursing students.
- To compare assertiveness among Bsc nursing students and general nursing students.
- To compare on grit among Bsc nursing students and general nursing students.
- To compare on prosocial behavior among Bsc nursing students and general nursing students.

Hypotheses

To meet the objectives of the study the following hypotheses has been put forward:

- H0: 1. There is no significant relationship between assertiveness and grit among nursing students.
- H0: 2. There is no significant relationship between grit and Prosocial behaviour among nursing students.
- H0: 3. There is no significant relationship between prosocial behaviour and assertiveness among nursing students.
- H0: 4. There is no difference on assertiveness among Bsc nursing and general nursing students.
- H0: 5. There is no difference on grit among Bsc nursing and general nursing students.
- H0: 6. There is no difference on prosocial behaviour among Bsc nursing and general nursing students.

Variables

- **Independent variable:** Assertiveness, Grit
- **Dependent Variable:** Prosocial Behaviour

Sample

The study was carried out in Kerala. There were 200 nursing students in the sample, between the ages of 18 and 25. Participants from both sexes were included in the sample. The samples for the investigation were chosen using the purposive sampling technique. It was based on the characteristics of the population and the purpose of the study. When a

researcher has to swiftly reach a specific sample while also saving time and money, this sort of sampling is quite useful. Only those participants who were willing to participate in the study were included in the sample, in accordance with the ethics of conducting research. The subjects suffered no damage of any kind while the data was being collected. The data's confidentiality has been guaranteed so that the participants won't be reluctant to provide true, truthful, and patient responses. The questionnaire was distributed through direct visits in various nursing colleges with clear instructions. In the questionnaire, personal information such as name, age, gender, year of study, place of residence, socioeconomic status, and was obtained.

Instruments

Three measures were used in this study

Scale-1: The Prosocialness Scale for Adults (PSA) - Caprara et al., (2005)

The Prosocialness Scale for Adults was developed by Gian Vittorio Caprara and his colleagues in 2005. This is a 16-item scale that measures an individual's prosocial behaviour. For each Prosocialness item, participants indicate on a five-point likert scale whether the statement was never/almost never true (coded as 1), occasionally true (coded as 2), sometimes true (coded as 3), often true (coded as 4), and almost always/always true (coded as 5). Scores were assigned for each question based on the response from the participants. Score of the participant was added. Scoring was done as per the norms in the manual. Score from 16-32 is considered as very low, 33-48 is considered as low, 49-64 is considered as high and 65-80 is considered as very high.

Scale-2: Rathus Assertiveness scale (RAS)-Rathus (1973)

This instrument was designed to measure assertiveness, or what the author called social boldness. Rathus Assertiveness Scale developed by Spencer A. Rathus (1973). The scale consists of 30 item instrument is used to measure assertiveness. Items are rated from +3 to -3 and 17 items, indicated by an asterisk on this scale are reverse scored. Scores are determined by summing up, that can range from -90 to +90. Negative scores indicate non assertiveness and positive scores indicate assertiveness. The RAS has evidence of good internal consistency and stability. Split-half reliability was .77. Test-retest reliability over an eight-week period was .78. The RAS has good concurrent validity. Scores on the instrument have been shown to correlate with measures of boldness, outspokenness, assertiveness, aggressiveness, and confidence. Strong concurrent validity also is seen in the correlation between RAS scores and trained raters' rankings of assertiveness. Also, the RAS has been shown to possess construct validity

Scale-3: Short Grit Scale (SGC)-Duckworth (2007)

The Short Grit scale was developed by Angela Duckworth (2007) measures the extent to which individuals are able to maintain focus and interest, and persevere in obtaining longterm goals. The Grit-S (Duckworth et al., 2007) consists of eight items: four representing the Consistency of interest (CI) subscale and four representing the Perseverance of effort (PE) subscale. The scale ranges from 1 to 5. The maximum score on this scale is 5 (extremely gritty), and the lowest score on this scale is 1 (not at all gritty). Former studies report acceptable to good reliability for the Grit-S, with Cronbach's alpha values ranging from .73 to .83. Cronbach's alpha values for the CI subscale were slightly better than the ones for the PE subscale (alpha values ranging from .73 to .79 and .60 to .78 respectively). Moreover, Short Grit scale was also proven to be valid.

Procedure

For the purpose of the data collection the nursing students from the private and public sector were selected. As per the ethics of conduction of research only those participants who were willing to be part of the study were included in the sample. The inclusion and exclusion criteria of the research were considered through the convenient sampling method. Confidentiality of the data was assured so that the participants do not feel hesitant to respond sincerely and patiently. The questionnaires administered were through the direct visit and, which included instructions such as the sociodemographic details such as name, gender, educational qualification. For participants who found it difficult to follow the questionnaire, the researcher had given assistance.

RESULTS AND DISCUSSION

The findings of the current study were presented in this chapter. Mann Whitney U test and Spearman’s rank order correlation test were the statistical tests used along with descriptive statistics. The chapter begins with the socio-demographic description of the sample, followed by descriptive statistics and then the results of the hypotheses were tested.

Table 4.1 Profile of the participants

Variable	Categories	Frequency	Percentage
Nursing category	Bsc nursing	100	50
	General nursing	100	50
Year of study	First year	60	30.0
	Second year	21	10.5
	Third year	52	26.0
	Fourth year	67	33.5
Domicile	Urban	62	31.0
	Semi-urban	80	40.0
Socioeconomic status	Rural	58	29.0
	Lower	4	2.0
	Middle	192	96.0
Marital status	Upper	4	2.0
	Single	199	99.5
	Married	1	.5

Out of the total sample size of 200, 50% are Bsc nursing students (n=100) and 50% are general nursing students (n=100). 30.0% of them were first year students (n=60), 10.5% of them were second year students (n=21), 26.0 % of them were third year students(n=52) and 33.5%of them were fourth year students(n=67). 31.0% of the students reside in urban (n=62), 40.0% of the students reside in semi-urban(n=80) and 29.0% of the students reside in rural(n=58).2.0% of them were from a lower socioeconomic status (n=4),96% of them were from middle socioeconomic status(n=192) and 2.0% of them were from upper socioeconomic status (n=4). 99.5% of them were single (n=199) and .5% was married (n=1).

Table 4.2 Kolmogorov-Smirnov test of Normality test of assertiveness, grit and prosocial behaviour

Variable	Statistic	df	p
Assertiveness	.046	200	.200*
Grit	.083	200	.002
Prosocial behaviour	.210	200	.000

Assertiveness, Grit, and Prosocial Behaviour among Nursing Students

From the table 4.2 it can be inferred that the Kolmogorov-Smirnov test of normality test of the assertiveness, grit and prosocial behaviour among nursing students are not normally distributed in the sample.

Table 4.3 Correlations of Assertiveness, Grit and Prosocial behaviour

Variable	1	2	3
1. Assertiveness	-	-.005	.852
2. Grit	-.005	-	.154*
3. Prosocial behaviour	.852	.154*	-

Note: *significant at 0 .05 level

Table 4.3 shows the correlation using Spearman's Rank Correlation between assertiveness, grit and prosocial behaviour among nursing students. The findings indicate that there is no significant correlation between assertiveness and grit, no correlation between prosocial behaviour and assertiveness. The results showed a weak positive correlation between grit and prosocial behaviour at 0.05 level.

Table 4.4 Difference in assertiveness of groups with Bsc and general nursing students (N=200)

Groups	N	Mean Rank	Sum of Ranks	U	P
Bsc nursing	100	95.07	9506.50	4456.500	.184
General nursing	100	105.94	10593.50		

Table 4.4 shows the Mann-Whitney U test for assertiveness of groups with Bsc and general nursing. The result shows that there is no significant difference in assertiveness between Bsc and general nursing. Hence the hypothesis is retained.

Table 4.5 Difference in grit of groups with B.Sc. and general nursing students (N=200)

Groups	N	Mean Rank	Sum of Ranks	U	P
Bsc nursing	100	104.04	10403.50	4646.500	.368
General nursing	100	96.97	9696.50		

Table 4.5 shows the Mann-Whitney U test for grit of groups with Bsc and general nursing. The result shows that there is no significant difference in grit between Bsc and general nursing. Hence the hypothesis is retained.

Table 4.6 Difference in prosocial behaviour of groups with Bsc and general nursing students (N=200)

Groups	N	Mean Rank	Sum of Ranks	U	P
Bsc nursing	100	112.13	11213.00	3837.000	.004
General nursing	100	88.87	8887.00		

Table 4.6 shows the Mann-Whitney U test for prosocial behaviour of groups with Bsc and general nursing. The result shows that there is a significant difference in prosocial behaviour between Bsc and general nursing as the p-value obtained was less than 0.05 (p=0.004). Hence the hypothesis is rejected.

SUMMARY AND CONCLUSION

Implications of the study

Provide assertiveness training as assertiveness is one of the most important skills for future nurses in the workplace, which reduces their interpersonal skills, build effective team relationships and to provide sufficient nursing care. Provide ways for the academic institutions to be more student-oriented so as to promote academic achievement and thereby reducing stress and increasing the ability to sustain in long term goals. Provide measures for controlling any risk of emotional and behavioural problems among nursing student.

Limitations of the Study

Social desirability can be a limitation. Respondents may or may not lie in order to present a positive image themselves. There is a lack of previous studies in this research area. Data was only collected from a single district which may not provide the complete representation of the sample.

Scope for Future Research

The present study can be extended to other populations too. This study can not only conduct among nursing student population but also among university students, individuals with different age groups such as adolescents. Other than the survey, the interview method can be adopted for detailed information. Selection of a much larger sample would help understand the variables better.

CONCLUSION

Assertiveness has its importance in a nursing student's career and many of them lack this, therefore can affect their academics as well as nursing as a profession. Especially, nursing students experience difficulties throughout their academic years. The lack of knowledge about personal or professional rights, concern about what others will think about their behaviour, and anxiety due to lack of confidence and poor self-esteem, aggression, fear of other people's hostility, afraid of anger or negative responses, and demand correct and fair treatment are the possible barriers to assertiveness in a nursing profession. Being more stressed and unable to cope up with these stressful situations may exacerbate the problem. Despite several barriers the perseverance to achieve the goal is most important. Moreover, being assertive and gritty along with helping behaviours in the right amount must be inculcated in this profession that can have both an emotional and behavioural benefit for the student in future. The study concluded that there is a weak positive correlation between grit and prosocial behaviour. However, assertiveness and grit and prosocial behaviour and assertiveness were not correlated. Also, there was a difference on prosocial behaviour with respect to the nursing category and the scores indicated that Bsc nursing students were having more Prosocialness than general nursing students. Moreover, there was no difference on assertiveness with respect to nursing category and there was no difference on grit with respect to nursing category.

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Assertiveness, Grit, and Prosocial Behaviour among Nursing Students

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Assertiveness, Grit, and Prosocial Behaviour among Nursing Students

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Conflict of Interest

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