

Bullying Behavior and it's Influence on Nurse Interns' Assertiveness

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Abstract

Background: Nurse interns experience some challenges such as occupational stress, workplace violence and bullying while adjusting to their new roles and transitioning to clinical practice, Bullying behavior may be lead to lack of assertiveness and social competence for victims, bullies may attempt to display more extreme, difficulty engaging in cooperative decision-making with their friends, negatively affect on their performance. **Aim of the study:** The present study aimed to assess the influence of bullying behavior on nurse interns' assertiveness. **Research design:** A descriptive correlational design was used to carry out this study. **Setting:** The study was conducted at Ain-Shams University Hospitals. **Subjects:** The study subjects consisted of a purposive sample of 121 nurse interns spending their training in Ain Shams University hospitals. **Tools:** Data for this study were collected by using two tools namely: Negative Act Questionnaire revised (NAQ-R), and Assertiveness Inventory. **Results:** The findings reveal that slightly less than three quarters of nurse interns (74.3%) had a high perception level of negative act behaviors, less than one fifth of them (17%) had low perception level of negative act behaviors. Moreover, less than two thirds of nurse interns (57.3%) had low assertiveness level. **Conclusion:** There was a highly statistically significant positive correlation between bullying behavior and assertiveness among nurse interns. **Recommendations:** Raise awareness of the issue of bullying among the entire community, creating a safe and positive training environment for nurse interns.

Keywords: Bullying, Nurse Interns, Assertiveness.

Introduction:

An internship program aims at providing students with those nursing information, skills and experience that are necessary to qualify them as highly competent nursing specialists. After completing their internship program, intern nurses can develop a number of skills, including practicing the scientific skills they have gained during their study in the nursing program, enhancing their nursing professional skills through practical application (*Ramadan et al., 2020*).

Bullying generally refers to “persistent exposure to interpersonal aggression and mistreatment from colleagues, superiors, or subordinates” The definitions of violence and bullying varied substantially, and other synonyms include hostility, incivility, threats and verbal abuse. Also, can define as a repeated or a single negative behavior involving vertical or horizontal violence. Vertical violence is a

negative behavior that occurs where there is a power imbalance between the victim and the perpetrator, through which the victim feels inferior such as between clinical instructors and students. Horizontal violence on the other hand involves negative behaviors among individuals with equal power such as among peers (*El swerky et al., 2023*).

Bullying can be categorized into four consistent categories identified within the literature include physical, verbal, cyber, and relational bullying. Bullying behavior may be lead to lack of assertiveness and social competence for victims, bullies may attempt to display more extreme, difficulty engaging in cooperative decision-making with their friends, negatively affect on their academic performance for both and overt dominance in their relationships with their victims university must improve nurse interns assertiveness to overcome

bullying behavior occurring in their clinical practice areas and needs to bullying prevention guidelines to eliminate bullying behavior by assertive way (*Modahl, 2021*).

Assertiveness is the skill that enables a person to freely express his feelings and defend his objectives and goals. In terms of affectivity, assertive individuals are able to express and respond to their positive and negative feelings without anxiety and unnecessary anger. Assertive person can create a close relationship with others, prevent others from abusing her or him, and express a wide range of positive and negative thoughts and needs without feeling guilty, stressful, anxious, and violating the rights of others. Assertiveness divided into two major components verbal and nonverbal or behavioral (*Farooq et al., 2024*).

Bullying behavior may lead to a lack of assertiveness and social competence for victims, and bullies may attempt to display more extreme difficulty in engaging in cooperative decision-making with their friends, which negatively affects their performance. In addition, overt dominance in their relationships with their victims' university must improve the assertiveness of nurse interns to overcome the bullying behavior of nursing interns in their clinical practice areas, and bullying prevention guidelines are needed to eliminate bullying behavior in an assertive way (*Palade & Pascal, 2023*).

Significance of the Study

Nurse interns are particularly vulnerable to bullying when entering clinical areas because they are often younger; have less clinical and life experience, fewer acquired coping skills, minimal power in the environment hierarchy and are unfamiliar with the environment and its standards. It has a negative effect on nurse intern performance and may lead to increased errors and decreased quality of nursing care, decrease satisfaction, engagement, psychological disorders such as moral distress. There is a need to develop a deeper understanding of the problem and possible interventions for its' treatment and prevention. So, the present study aimed to

assess the influence of bullying behavior on nurse interns' assertiveness.

The World Health Organization (WHO) stated that "the frequency of bullying was estimated to be 8–30% and may reach 50% in many studies". There is great variation in the prevalence rates of bullying among different countries, but the rate among Arab countries is the highest. The prevalence of bullying in Egypt was 77.8% among adolescents. Among these, the percentage of bullying victims was 57.8%, which can be explained by the likelihood of victims turning into bullies to express their anger. Additionally, another Egyptian study reported that the prevalence of physical violence was the highest, at 69% for victimization and 82.8% for witnessing violence (*Galal et al., 2023*).

Aim of the study:

This study aimed to assess the influence of bullying behavior on nurse interns' assertiveness.

Research hypothesis

There is an influence of bullying behavior on nurse interns' assertiveness.

Subjects and Methods

The aim of this study is to assess the influence of bullying behavior on nurse interns' assertiveness.

The methodology pursued in conducting the study is presented under: technical design, operational design, administrative design, statistical design.

Research design

A descriptive correlational was used to conducting this study.

Setting

This study was conducted at Ain Shams University Hospitals where nurse interns' are having their training, namely; Ain-Shams

University hospital, El-Demerdash hospital, Pediatrics hospital, and Cardiovascular hospital.

The study's subjects

A convenient sample was utilized for conducting this study included all available nurse interns who enrolled in the internship year (2022-2023) in the previously mentioned settings during the data collection period. Their total numbers were 121 nurse interns.

Data collecting tools:

Data for this study were collected using two tools namely: Negative Act Questionnaire Revised (NAQ-R), and Assertiveness Inventory.

First tool: Negative Act Questionnaire Revised (NAQ-R)

This tool was developed by (*Einarsen et al., 2009*) and modified by researcher. It consists of two parts as the following:

Part I: This part was aimed to collect data regarding personal characteristics of the nurse interns including age, gender, marital status, attending bullying prevention work shops and pre-university education.

Part II: This part was aimed to assess perception level regarding types of workplace bullying among nurse interns and included (22) statements were classified into three subscales as follows: work related bullying (7 items), person related bullying (12 items); and physical intimidation bullying (3 items).

Scoring system

The response for questionnaire was measured by (4) point likert scale as follows: 1=never, 2= sometimes and 3= frequently, 4=always for each dimension, The scores of the items were summed-up and the total divided by the number of the items, giving a mean score for each dimension. There were evaluated as follows: (< 60%) indicates low perception level of nurse interns experience bullying, (60- 75%) Indicates moderate perception level and ($\geq 75\%$) indicative

of high perception level of bullying for nurse Interns (*Ali et al., 2021*).

Second tool: Assertiveness inventory

This tool was developed by *Clark & Shea (1979)* and adopted from *Abou Zied (2019)*. It aimed to assess level of assertiveness among nurse interns. It consists of 56 items grouped under five dimensions: verbal and non-verbal style (8 items), active participation (7 items) , work habits (8 items) , control of anxiety and fear (20 items), relating co -worker (13 items).

Scoring system

The response was measured on (3) point likert scale as follows: 1=never, 2=sometimes, 3=always for each domains. For each item, the scores were summed-up and giving a mean score for the item. These scores were converted into a percent score. Nurses interns considered highly assertive if total score was more than 75%, moderately assertive if total score was ranged between 60-75% and low assertive level if total score was less than 60% (*Abou Zied, 2019*).

Operational Design

The operational design included three phases namely: preparatory phase, pilot study and fieldwork.

Preparatory phase

This phases started from July 2022 till August 2022 the researcher reviewed the national and international related literature, the material in the textbooks and scientific journals were used in the study to be acquainted with study subject.

Tool validity

Validity for the preliminary form of the questionnaires was presented to a jury group for face and content validation. The jury group consisted of seven experts (professors and assistant professors) in the field of nursing administration and mental- health nursing

departments affiliated to Ain Shams, Damnhour, and Menoufia Universities. This process involved their opinions about the tools of data collection. Each tool was assessed for clarity, comprehensiveness, simplicity, understanding and applicability. According to the jury opinions some modifications including rephrasing or rearranging for some statements were performed by the researcher

Tools reliability

Reliability of the first data collection tool (Negative Act Questionnaire revised (NAQ-R) was examined through assessing the internal consistency by Cronbach's alpha coefficient was 0.91. while, The Cronbach's α value for the assertiveness inventory was 0.789.

Administrative design

Letters containing the aim of the study were issued from the Dean of the Faculty of Nursing, Ain-Shams University to medical & nursing directors of each hospital where the nurse interns spending their training. Official permission for data collection were obtained. The researcher met the hospital directors of each hospital for explaining the aim of the study and tools to be used for data collection throughout the study phases and to obtain their approval and seek their support during the study.

Ethical considerations

Prior to study conduction, the study protocol was approved by the scientific research ethical committee of the Faculty of nursing, Ain-shams University. After obtaining the permissions from faculty of nursing Ain Shams University and the acceptance of administrative authorities of Ain Shams university hospitals to conduct the study, nurse interns were reassured that any obtained information would be confidential, and used only for the purpose of research also, they were informed about their right to withdraw from the study at any time without giving any reason.

Ethical code :23.10.142

Pilot study

It was carried out after modifying the tools and before starting in data collection .This stage took two weeks of November 2022, a pilot study was conducted on (13) nurse interns who represent 10% of total study sample. The pilot study aimed to examine the applicability, clarity of language, test the feasibility of the tools. It also served to estimate the time needed to fill in the questionnaires by each participant and identify the potential obstacles that may be encountered during the period of data collection. The time consumed for fulfilling the study tools was ranged between 30-40 minutes. Data obtained from the pilot study was analyzed, and no modifications were done. So, the participants in the pilot study were included in the main study sample.

Fieldwork

After securing the official approvals for conducting the study. The investigator met the director of each hospital to obtain their approval and to determine the suitable time to collect data. The field work of the study took three months started at the beginning of December 2022 and was completed February 2023. The investigator met the head nurse of each unit for determining the suitable time to collect the data. The investigator explained the aim and component of the questionnaire sheet to nurse interns in their training area at different time and attended during the filling of the questionnaire to clarify any ambiguity and answer any questions. Data was collected three days per week at the morning and afternoon shift. The researcher met nurse interns and introduced herself to explain the aim of the study and its objectives, ways to fill in the different tools and sought their approval to participate and cooperate in the study. Every nurse intern took about 30-40 minutes to complete questionnaire sheet. The researcher checked each filled questionnaire to ensure its completion.

Statistical Design

Data entry and statistical analysis were performed via the SPSS 20.0 statistical software package. The data are presented as frequencies and percentages for qualitative variables. The

chi-square test was used to compare the qualitative variables, which were also used to examine the relationships between two qualitative variables. Spearman rank correlation was used to assess the interrelationships among the quantitative variables and ranked variables. The Cronbach's alpha coefficient was calculated to assess the reliability of the developed tool through its internal consistency. Statistical significance was set at a p value <0.05. High statistical significance was indicated by a p value <0.001.

Results:

Table (1): Demonstrates that as regard age majority of nurse interns (83.5%) had less than 24 years, more than half of them were females (52.1%), more than three quarters (76%) of them were single, majority of nurse interns (79.3%) didn't attend any bullying Previous workshops before this study, also, majority of nurse interns (81%) were secondary school before entering to nursing faculty.

Figure (1): Shows that more than one third (34.7%) of nurse interns were trained at Ain Shams University Hospital. However, slightly more than one-quarter of the nurse interns (25.6%) spent their training in El demerdash hospital, and less than one-fifth (19.8%) of them spent their training in pediatrics hospitals or Academic Heart Institutes.

Table (2): Illustrates that majority of nurse interns (81.8%) had high perception level to person related bullying. More than one third

(25.6%) have low perception level of physical intimidation related bullying.

Figure (2): Identifies that less than three quarters of nurse interns (74.3%) had high perception level of negative act behaviors, less than one fifth of them (17%) had low perception level of negative act behaviors.

Table (3): Demonstrates that less than three quarters of them (74.4%) had low level to control fear and anxiety dimension. While less than two thirds of them, (57%) had moderate level for active participations dimensions.

Figure (3): Explains that less than two thirds of nurse interns (57.3%) had low level of assertiveness while, less than one third of them (29.7%) had moderate level of assertiveness.

Table (4): Illustrate that there was highly statistically significant relation between total perception of negative act among nurse interns and their gender $p < 0.01$.

Table (5): Indicates that there was highly statistically significant relation between assertiveness among nurse interns with their personal data and their training hospital, gender, previous education, social status, and workshops attendance $p < 0.01$.

Table (6): Indicates that there was highly statistically significant positive correlation between negative act behavior and assertiveness level among nurse interns.

Table (1): Personal characteristics of nurse interns in the study sample (n=121)

Personal data	No.	%
Age:		
< 24 years	101	83.5
≥24 years	20	16.5
Mean± SD		23.80±0.94
Gender		
Male	58	47.9
Female	63	52.1
Marital status:		
Single	92	76
Married	29	24
Attending workshops about bullying Previous :		
Yes	25	20.7
No	96	79.3
Previous education:		
Technical nursing institute	23	19
Secondary school	98	81

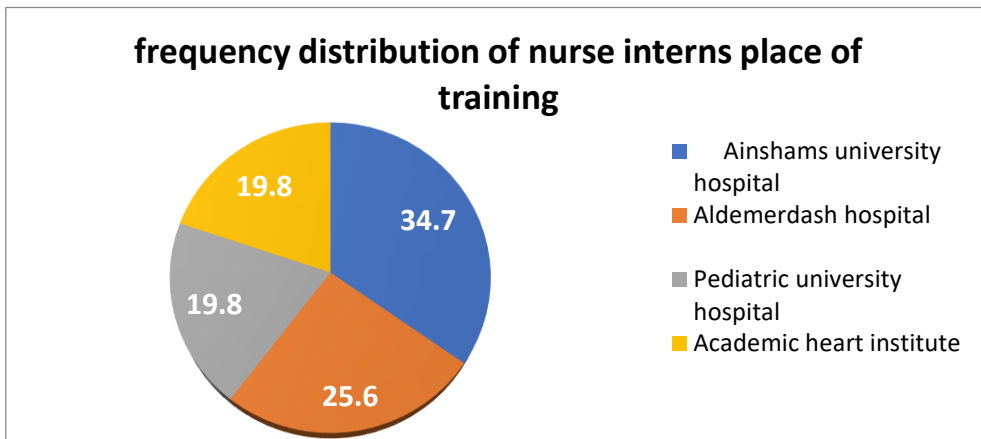


Figure (2): Frequency distribution of regarding place of training

Table (2): Total dimensions of negative act among nurse interns (n=121).

Negative Act dimensions	Low		Moderate		High	
	N	%	N	%	N	%
Work- Related Bullying	14	11.6	11	9.1	96	79.3
Person - Related Bullying	9	7.4	13	10.7	99	81.8
Physically Intimidation Bullying	31	25.6	19	15.7	71	58.7

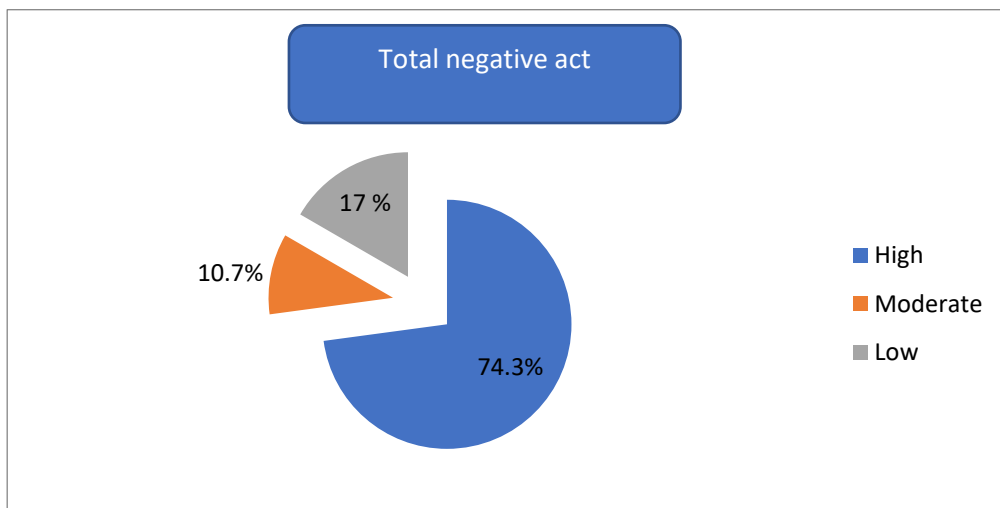


Figure (2): Total Negative Act perception levels among nurse interns (n=121).

Table (3): Total dimensions assertiveness level among nurse interns (n=121).

Assertiveness dimensions	Low		Moderate		High	
	N	%	N	%	N	%
Verbal and non-verbal style	58	47.9	42	34.7	21	17.4
Active participation	29	24	69	57	23	19
Work habits	82	67.8	28	23.1	11	9.1
Control fear and anxiety	90	74.4	18	14.9	14	11.6
Relating co workers	88	72.7	23	19	10	8.3

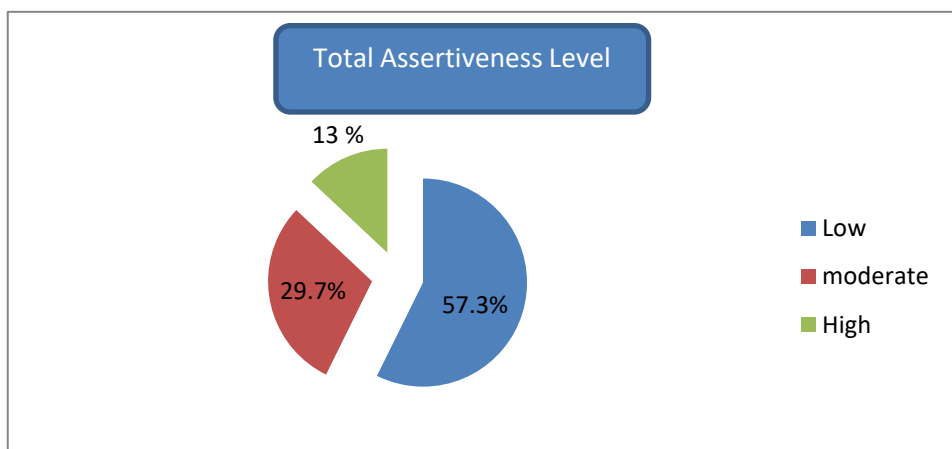


Figure (3): Total assertiveness levels among nurse interns (n=121).

Table (4): Relation between personal characteristics of studied nurse interns and their total negative act

Personal data	Total Negative Act Mean Score			
	Mean	SD	F	P
Training hospital:				
Ain shams university hospital	71.24	26.53	2.33	0.08
Al demerdash hospital	75.94	21.13		
Pediatric university hospital	82.50	18.63		
Academic heart institute	83.17	6.95		
Gender:				
Male	69.41	26.00	16.09	0.00**
Female	84.06	12.32		
Marital status:				
Single	74.85	23.76	4.18	0.04*
Married	84.00	6.57		
Previous education:				
Secondary school	79.39	20.70	0.34	0.56
Technical nursing institute	76.49	21.50		
Attending bullying prevention workshops:				
Yes	75.40	23.40	2.82	0.10
No	83.36	6.87		

(*)statistically significant $p < 0.05$ (**) Highly statistically significant $p < 0.001$

Table (5): Relation between personal characteristics of studied nurse interns and their total assertiveness

Personal data	Total Assertiveness mean score			
	Mean	SD	F	P
Training hospital:				
Ain shams university hospital	130.02	36.51		
Al demerdash hospital	107.77	6.58	24.18	0.00**
Pediatric university hospital	90.79	13.86		
Academic heart institute	84.25	15.80		
Gender:				
Male	124.12	32.55	48.28	0.00**
Female	92.13	15.96		
Marital status:				
Single	114.90	29.47	29.45	0.00**
Married	83.86	15.63		
Previous education:				
Secondary school	159.83	17.23	316.99	0.00**
Technical nursing institute	95.17	15.30		
Attending bullying prevention workshops:				
Yes	113.66	29.62	23.76	0.00**
No	83.68	15.72		

(**) *Highly statistically significant $p < 0.001$*

Table (6):Correlation between nurse interns negative act and assertiveness level (n=121).

Assertiveness level	Pearson Correlation	Negative Act
	R P	.074 0.01**

(**) *Highly statistically significant $p < 0.001$*

Discussion:

Bullying is a serious and wide range problem had a negative consequence on both victims and bullies and must be well documented. In general, bullying victims are at risk of emotional and social consequences that are detrimental to nurse interns who are victims of bullying can lead depressive symptoms, stress and sleep disorder. Nurse interns feel anxious due to lack of their experience in clinical practice area and fewer coping skills all of this items can put nurse interns to be easily target to bullying especially with low assertiveness level (*Qtait, 2023*). So, the present study aimed to assess the influence of bullying behavior on nurse interns' assertiveness.

Regarding negative acts dimensions among nurse interns, the present study revealed that majority of nurse interns had high

perception level regarding person related bullying. While, more than one third have low perception level of physical intimidation related bullying. From researcher point of view, this result might be due to nurses intern exposed frequently to verbal bullying such as practical jokes about their performance from experienced employee in the training place usually due to lack of their experience and fear from induced errors. Also, nurse interns are often burdened with additional tasks and responsibilities, making them particularly vulnerable to becoming victims of workplace bullying, experiencing a workplace culture of silence, working extended hours, lacking of clear anti-bullying policies, and lack of direct judgment regarding any bullying reports.

These findings are generally congruent with the findings of *Gonium et al., (2024)* who

reported that the highest mean score was person related bullying dimension, followed by work - related bullying, while the lowest mean score was physically-intimidating bullying. On disagreement with this, the result of *Al-Garandeau, et al., (2022)*, They reported that the highest mean score for work related bullying.

On dissimilarity with *Ali et al., (2021)*, who conducted a study entitled "The Effect of Workplace Bullying Management Program on Nursing Personnel's Work Engagement" and reported that work related bullying had the highest dimension on the negative act before the program implementation then person related bullying .

Regarding total negative act levels among nurse interns. The current study revealed that slightly less than three quarters of nurse interns exposed to high level of bullying (daily), less than one fifth of them had low level of negative act behaviors. This result may be due to lack of support, fear of punishment, and unaware about hospital policies regarding deal with negative behaviors on the work settings.

On the same line with *Gaffney, et al., (2021)*, who studied the " Effectiveness of school-based programs to reduce bullying perpetration and victimization" and concluded that more than two thirds of participants exposed to high level of bullying. This result is consistent with *Iselin et al., 2020* in a study of " Injustice perceptions, workplace bullying and intention to leave and who asserted that, the majority of staff nurses had high level of overall bullying behavior. On disagreement with, the result of *Elzeblawy et al., (2023)* who conducted their study about Effect of Bullying on Reproductive Health and Psychological Well-being among Pregnant Women, found that the majority of sample had moderate level of bullying.

Regarding nurse interns' total dimensions of assertiveness the result of present study revealed that less than three quarters of nurse interns had low level to control fear and anxiety dimension. While less than two thirds of them, had moderate level for active participations dimensions. From the researcher

point of view present findings due to nurse interns needs to be actively involved and participated in their clinical setting and enter to real life experience with the health care teams all of that improve nurses assertiveness and reduce risk to exposed to bullying.

This result is consistent with those of *Nemati et al. (2022)* who studied evaluating the effect of assertive training program on assertiveness communication and Self-Concept of nurses and found that the highest mean scores for studied sample are "active participation dimension ". Also, congruent with *Immanuel & Muo (2022)* who studied "Marital Status, Religion and Gender as factors in Assertiveness" and found the highest dimensions are " active participation dimension " followed by control fear and anxiety. This result is on disagreement with *Moss & Mace, (2022)* who studied Assertiveness, Self-Esteem, and Relationship Satisfaction and found majority of studied sample had a highest mean for to control of anxiety and fear dimension.

Total assertiveness level among nurse interns, The current study revealed that less than two thirds of nurse interns had low level of assertiveness while, less than one third of them had moderate level of assertiveness. From the researcher point of view present findings due to increased workload, previous experiences of bullying, and shortage of hospital staff which promote and perpetuate oppressive conditions, such as inability to take uninterrupted breaks, inadequate staffing ratios, and limited supplies, in addition to lack experience of nurse interns with fear from the responsibility, these conditions cause more frustration and lack of co-worker support which in turn contribute to the bullying behaviors with nurses intern.

This finding is supported by *El-said, et al., (2022)*, who conducted a study entitled by" Communication Skills Training Program and its Effect on Head Nurses' Assertiveness and Self-Esteem" which showed that the majority of the head nurses working at Ain-Shams University hospitals had low assertiveness level at the before program implementations. Additionally, *Nemati et al., (2022)*, conducted a study entitled" Evaluating effect of assertive training program on assertiveness communication and

self-concept of nurses and reported that the studied sample had low assertiveness level before training program while after training program there was statistically significant improvement in nurse interns assertiveness level were revealed.

Highly statistically significant relation between total negative act among nurse interns with their gender and there was highly statistically significant relation between assertiveness among nurse interns with their personal data and their training hospital, gender, previous education, social status, and workshops attendance. From the investigator's point of view, these results might be due to that nurse interns age, educational qualification and years of experience have an influence on their exposure to bullying behaviors in the work environment because there is an difference found when comparing bullying behaviors among male and female. Female are easily annoyed and easily target of bullying because are more sensitive and shy, when comparing between secondary or technical nursing education, the nurse interns previously working having a coping skills to overcome bullying. These results agreed with a study performed by *Ibrahim et al., (2023)*, who stated that there was a highly statistically significant relation between total negative act and assertiveness level and nurses' demographic characteristics.

There was highly statistically significant positive correlation between bullying behaviour and assertiveness level among nurse interns. From the researcher point of view present findings due to interns with low assertiveness are often more susceptible to bullying, as they may find it challenging to stand up for themselves or communicate their concerns. This vulnerability can lead to increased stress and negative experiences in the workplace. On the other hand, interns who display higher assertiveness are better equipped to address conflicts and set boundaries, which can help mitigate bullying behaviors.. Consistently, (*Soliman & Eldeep, 2021*). Who conducted a study about the Effect of Assertiveness Training Program on bullying behaviour Among Nurses at Operating Room, and declared that, there was a positive correlation between bullying behavior and

assertiveness level. The present results are in agreement with a study by *Modhal, (2021)* who studied a bullying prevention program: Pairing assertiveness training to empower bully victim, and revealed that there was a highly statistically significant positive correlation between bullying behavior and assertiveness level .

Conclusion:

In the light of the present study findings, it can be concluded that the nurse interns had exposed to high level of bullying in their clinical practice area and low assertiveness level. Also, there was a highly statistically significant relation between total bullying and nurse interns assertiveness. These findings this confirmed the research hypothesis which stated that " There is an influence of bullying behavior on nurse interns' assertiveness .

Recommendation:

The following suggestions are put forward considering the study's results:

- Universal application of prevention programs would raise awareness of the issue of bullying among the entire community, creating a safe and positive environment for nurses intern where they can happily learn, grow and reach their full potential.
- Raising awareness and training for nurses in the hospitals where nurse intern are trained about bullying behaviors.
- Allow nurse interns to participate in conferences, workshops, training courses and activities that will increase their level of assertiveness and self-confidence.
- Enhance the policies and rules specific student ethical codes of conduct.

Conduct the orientation for newly enrolled nurses intern should include bullying prevention guidelines and should be reinforced each year.

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