Effect of Nurse Educators' Emotional Intelligence on Student-Nurses' Assertiveness at Dakahlia Nursing Secondary Schools

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ABSTRACT

Background: Emotional intelligence skills have a great impact on nurse educators' success. *The present study aimed to* explore the relation between nurse educators' emotional intelligence on student nurses' assertiveness in nursing secondary schools at Dakahlia. *Research design:* a descriptive correlational design was utilized with a sample of 39 nurse educators and their student nurses (397) in nursing secondary schools at Dakahlia. *Tools of data collection:* data were collected by using two questionnaire sheets; the first one was emotional intelligence questionnaire for assessing nurse educators' emotional intelligence, the second one was assertiveness questionnaire for determining the level of student nurses' assertiveness. *Results* revealed that the majority of nurse educators had low level of emotional intelligence and the majority of the student nurses had low level of assertiveness. It was *concluded* that there was a statistically significance relationship between nurse educators' emotional intelligence and student nurses' assertiveness. Therefore, it is *recommended* to develop and implement in-service training program on emotional intelligence as self-awareness and communication skills for nurse educators and integrate assertiveness skills courses into the nursing curriculum to increase student nurses' assertiveness.

Key word: Assertiveness, Emotional intelligence, Nurse educators, Student nurses.

INTRODUCTION

There is no doubt that change is normally continuous (*Marquis and Huston, 2012*), also a lot of changes are surrounding the educational field, including not only designation of curriculums, assessment and evaluation techniques for needs of the learners and society *(OECD*, *2009),* but also nurse educators and student nurses as a result of globalization and increasing of technology diversities in policies which control work places so that all of nurse educators and student nurses must be effectively occupied professionally and psychology with coping strategies to face challenges *(Yoder-Wise & Kowalski, 2012)*. These are needed skills which related to emotional intelligence *(Adilogullari, 2011)*.

 Teaching is much more than a task. Nurse educators need to be fully effective in teaching, capable of adjusting to the evolving needs of learners in the world of rapid social, cultural, economic and technological reflect on their own learning requirements in the contest of their particular school environment, and to take greater responsibility for their own lifelong learning as nears of updating and developing their own knowledge and skills, *(European Union, 2009 and Conway and colleagues, 2009).* Emotional intelligence plays a major role in adapting nurse educators to environmental and global changes *(Burger, 2009 & Yong, 2011).* According to *Bar-On, (2012),* emotional intelligence qualifications are self-regard, interpersonal relationship, impulse control, problem solving, emotional self-awareness, flexibility, reality testing, stress tolerance, empathy and assertiveness.

Assertiveness skill is considered one of social skills of emotional intelligence components which involves the ability of oral and non-oral transfer of feelings, thoughts and emotions without experiences a lot of anxiety or feeling of guilty and without violating others social position and dignity *(Arlin Cuncic 2013)*. Moreover, *Sudha (2005)*, defined assertiveness as the ability to express the person's own point of view while at the same time respecting the rights of others.

 Assertiveness skills enhances the ability of the student nurses to address stress and bullying by giving the power they need to change the situation Furthermore, assertiveness is vital skill in the academic environment, classroom interaction such as

making presentation, asking and responding to question and openly communicating their concerns *(sanders, 2007).*

 Significance of study:

Colleges and schools settings are considered to be distressful workplace which can lead to depression, irritability, nightmares and being introverted, so that individuals (nurse educators and student nurses) in these setting need skills such as emotional intelligence and assertiveness to be able to manage these emotions which may interfere with personal, professional and daily working lives *(Edwards and O'Connell, 2007).* In addition, there is a general academically concern about integrating emotional intelligence and assertiveness skills for educators and students in nursing filed moreover, little studies are involved in nurse educators and student nurses in such concern So, this study aims to explore the relation between nurse-educators` emotional intelligence and nurse-students` assertiveness.

AIM OF THE STUDY:

explore the relation between nurse educators' emotional intelligence on student nurses' assertiveness in nursing secondary schools at Dakahlia.

Research questions:-

1. What is the level of emotional intelligence among nurse educators?
2. What is the level of assertiveness among student nurses?
3. Is there a relation between nurse educators' emotional intelligence and student nurses' assertiveness?

SUBJECTS AND METHOD:

Study design:

A descriptive correlation design was used to achieve the aim of this study.

Study settings:

This study was carried out in nursing secondary schools at Dakahlia Governorate: Five schools were selected from 15 schools, which represented all Dakahlia Governorate nursing secondary schools, by systematic random sample namely: Manzala, Gamalia, Meetsalsel, Menietelnaser and Dekerns.

Study subjects: Include two groups:

1) First group: All nurse educators in the previously mentioned schools with total number 39.

2) Second group: All student nurses in the previously mentioned schools with total number 397.

Tools for data collection:

Data for this study was collected by using two different tools:

Tool I: Emotional intelligence questionnaire: It consists of two parts;

   Part I: includes job and personal characteristics as age, level of education and years of experiences.

   Part II: Emotional intelligence scale:

This part used for assessing emotional intelligence of nurse educators. It was adopted by *Abdel-Aleem, (2013)* based on tool adopted from *Othman* and *Abdul-Samea, (2001) and Mahmud, (2002).* This tool consists of 82 items which grouped under two dimensions: personal competences (50 items) and social competences (32 items).

Scoring System: Emotional intelligence items were scored 1, 2, 3, 4 and 5 for the responses "never, rarely, sometimes, often, and always" respectively, except items number 33, 47, 52, and 63 had reversed score. The emotional intelligence was considered to be high if the percent score was 60% or more, and low if less than 60% *(Abdel-Aleem, 2013).*

Tool II: **Assertiveness questionnaire:** It consists of two parts:

Part (1): it includes items related to personal characteristics of nurse student as student's age, semester, resident area as well as the educational level of their parents.

Part (2): Assertiveness items:

This tool based on students assertiveness scale developed by *Begley and Glacken, (2004)* and translated into Arabic by specialist in English language*.* It aims to assess level of assertive behavior among nurse students, and consists of 28 items which are grouped under three groups namely:

☐ *The ability to deal with criticism.*

☐ *Confronting others*.

☐ *The spontaneous expression of feelings*.

Scoring System:

Assertiveness items were scored 1, 2, 3 and 4 for the responses "never, rarely, often, and always" respectively; except questions number 1, 3, 6, 13, 15, 16, 19, 20, 21, 24,

25, 26 and 28 had reversed score. The assertiveness was considered to be high if the percent score was 58% or more, and low if less than 58% (***Raftopoulous and Theodosopoulou, 2002).***

Validity:

The two tools were ascertained by a jury consisting of five experts in the nursing administration and psychology from different faculties of nursing.

Reliability:

Reliability of emotional intelligence and assertiveness scale were tested by cronbach Alpha coefficient and it was 0.85, 0.89 respectively.

Field work:-

Data had been collected for 6 months; throughout the period from January to June 2014 the field work had been performed in the following sequence. Permission was taken from each school to carry out the study. Also the aim of the study had been clarified to the head master of schools to gain their support and cooperation. The researcher visited the schools two times per week, and introduced herself to the nurse educators and the students and obtained their oral consent to be recruited in the study after explaining the nature of the study aim and the procedure of data collection. Confidentiality and anonymity of their responses were ensured. In each school the researcher took the class that was free from scientific sessions for 20 minutes when questionnaires were not finished the researcher took the same class another time to finish the filling of questionnaire. In each class the students were asked to fill in the designed questionnaire sheet by herself in presence of the researcher to answer any questions that the students might have about the questionnaire. After finishing the school, the researcher took another school, until she finished the determined schools.

Ethical Consideration:

Subjects assent for participation was obtained after explaining the purpose of the study; subjects were informed about the privacy of information obtained from them, nature of the study and right to withdraw.

RESULTS:

Table (1): Shows the personal characteristics of nurse educators. The table reveals that, the highest percent of nurse educators' age (35.9%) was between 30 to 40 years old. While, 2.6% of nurse educators aged between 51 to 60 years old. Also, this table shows that the highest percent of nurse educators (84.6%) were married.

Table (2): Shows that, less than two thirds of nurse educators (64.1%) had a high level of self-regulation. Also, the majority of nurse educators had low level of empathy, self-awareness, motivation and social skills 87.2%, 84.6%, 84.6% & 76.9% respectively. Moreover, slightly less than one quarter (23.1%) of nurse educators had a high level of emotional intelligence.

Table (3): reveals that, the highest percent of students (37.5%) had 17 years old. Also, the majority of them (70.0%) were resided in rural areas. According to the student nurses' educational level more than two fifth of them (39.5%) were in grade 1 and 30.5% and 30% were in grade 2 and 3 respectively. According to educational level of student' fathers and mothers the highest percent (76.3%) & (47.4%) respectively were less than university education. The majority (81.1%) of mothers were housewives.

Table (4): Reveals assertiveness level among student nurses. The table reveals that, the minority of students (5.8%) had the ability to confronting others, about three quarter (75.6%) of students had low level of assertiveness.

Table (5): Shows that there was a statistically significant relationship between spontaneous expression of feelings subscale and total score of assertiveness abilities of students and emotional intelligence skills of nurse educators P=0.002 & P=0.02 respectively.

Table (1): Personal characteristics of nurse educators (n=39)

Personal characteristics	Frequency	
	No.	%
Age (years):		
20-	12	30.8
30-	14	35.8
40-	12	30.8
50-<60	1	2.6
Marital status:		
Single	3	7.7
Married	33	84.6
Divorced	3	7.7
Educational level:		
Diploma	1	2.6
Technical institute	4	10.3
Baccalaureate degree	33	84.5
Master	1	2.6
Selected schools:		
Meniet Elnasr school	8	20.5
Gammalia school	9	23.1
Manzala school	6	15.4
Meetsalseel school	6	15.4
Dekernes school	10	25.6
Duration of teaching experience (years):		
1-	3	7.7
5-	15	38.5
10-	14	35.9
15-	2	5.1
20-<25	5	12.8

Table (2): Emotional intelligence level among the nurse educators (n=39)

Emotional Intelligence Domains	Emotional intelligence			
	Low level <60%		High level >60%	
	No.	%	No.	%
Personal competency Self-awareness	33	84.6	6	15.4
Self-regulation	14	35.9	25	64.1
Motivation	33	84.6	6	15.4
Social competency Empathy	34	87.2	5	12.8
Social skills	30	76.9	9	23.1
Total	*30*	*76.9*	*9*	*23.1*

Table (3): Personal characteristics of student nurses (n=397)

Socio-demographic characteristics	Frequency	
	No.	**%**
Age (years)		
16	126	31.7
17	149	37.5
18	122	30.8
Residence		
Rural	278	70.0
Urban	119	30.0
Educational level		
Grade 1	157	39.5
Grade 2	121	30.5
Grade 3	119	30.0
Selected schools		
Meniet Elnasr school	83	20.9
Gammalia school	81	20.4
Manzala school	77	19.4
Meetsalseel school	87	21.9
Dekernes school	69	17.4
Educational level of father		
Not read not write	46	11.6
Less than university education	303	76.3
University graduate	43	10.8
Postgraduate studies	5	1.3
Educational level of mother		
Not read and not write	168	42.3
Less than university education	188	47.4
University graduate	36	9.0
Postgraduate studies	5	1.3
Job of father		
Farmer	87	21.9
Teacher	22	5.5
Administrative work	35	8.8
Others	253	63.8
Job of mother		
Housewife	322	81.1
Teacher	23	5.8
Nurse	27	6.8
Others	25	6.3

Table (4): Assertiveness level among the studied nurse students (n=397).

Assertiveness Domains	Assertiveness level			
	Low (<58%)		High (>58%)	
	No.	%	No.	%
Ability to deal with criticism	183	46.1	214	53.9
Confronting others	374	94.2	23	5.8
Spontaneous expression of feelings	186	46.9	211	53.1
Total	*300*	*75.6*	*97*	*24.4*

Table (5): Correlation between emotional intelligence of nurse educators and assertiveness level of studied students.

Assertiveness	Emotional intelligence	
	r	P
Ability to deal with criticism	-0.72	0.152
Confronting others	0.054	0.284
Spontaneous expression of feelings	0.157	0.002*
Total	0.117	0.02*

DISCUSSION

Emotional intelligence is an ability to control our emotions in abnormal situations. Now it is widely accepted that emotional intelligence also a key determent for success and also in development in personality. As personality is a sum total of emotions **(Kant, 2014)**, Emotion is fundamental to learning process accordingly emotional intelligence is considered as an important characteristic of nurse educators that can affect the quality of their work including clinical decision-making, critical thinking, evidence and knowledge use in practice (**Barkhordari & Rostambeygi, 2013)**.

The present study findings revealed that, the majority of nurse educators had low level of self-awareness subscale of emotional intelligence. This result may be due to the fact that those nurse educators passed through ineffective in-service training program regarding communication skills and human relations, and fundamentals of psychology, which are needed to prepare a nurse educator to perceive her emotional needs and understand herself properly. This result supported by *El-Sayed, El -Zeiny,*

& Adeyemo (2014) who conduct their study on nursing faculty members found that the majority of nurse educators in faculty of nursing in Zagazig University had low self-awareness. While *Nasir, Mustaffa and Ahmad (2011)* who conduct their study among counseling in kulajaya District, Johor. Their result contradict with the current study result which it showed that the majority of teachers had a moderate level of emotional intelligence. Also, a recent study conducted **by *Thilagavathy** (**2013)*** who conduct study among high school teacher in Tiruvarur District and he found that the majority of teachers had high level of emotional intelligence.

Regarding self-regulation the results of the present study showed that self-regulation was the highest level of emotional intelligence subscale among studied nurse educators, this result may be related to the culture of people which resulted from difficult life, social, economic situations lead to hard life, make persons more rigid, more hard to pear and tolerate stress, pain and crises. This result is congruent with the result of a study conducted by *Mohammed (2011)* who conducted her study among head nurses at Zagazig University Hospital; she reported that self-regulation was the highest component of emotional intelligence. While, *El-Sayed, El -Zeiny, and Adeyemo (2014),* in their study findings were disagreed with the current study which they found that self-regulation was the lowest component of emotional intelligence.

As regard motivation component, the majority of nurse educators had a low level of self-motivation, the result may be related to poor work condition, hard control and rapidly changed polices with weak ability to adjust toward new work requirement, also unfair chances, little many with hard work, lake of spare time to spend with family, care with children or enjoy life. This result is supported by *El-Sayed, El -Zeiny, and Adeyemo (2014),* who found that about half of the nurse educators had low level of self-motivation. The current study findings are in conflict with the findings of *Adilogullari, (2011),* who found that the level of teachers' motivation was moderate**.**

Concerning the empathy, the majority of nurse educators in the present study had a low level of empathy which may be related to lake of time to accurate others understand, manage their emotions, also there are some misunderstand that empathy people are weak, haven't the ability to control themselves and can't operate

communication with others. It is contrarily with the study results of ***Adilogullari, 2011***, who reported that, teachers' empathy level was in a high level.

Regarding social skills, the results of current study indicated that more than two thirds of studied nurse educators had low level of social skills, this result may be related to negative effects of global diversities in social life, difficult political conditions lead to individualization introversion, physical and mental stress resulted to attitude of isolation, at the same line there are many conflicts surrounding the work place, poor management, decrease perusal team work, lake of effective communication, all of these lead to poor interpersonal relationship. The study result of ***El-Sayed, El -Zeiny, and Adeyemo (2014)*** is in the same line with this result, which they found that the majority of nurse educators had low level of social skills. Moreover, ***Otacıoglu, (2009)*** found that, low emotional intelligence individuals, be more unsuccessful in social relationships and cause negative relationships by showing more aggressive behaviours.

The findings of the current study reveal that, the majority of nurse educators experience a low level of emotional intelligence. This may be attributed to the deficient curriculum in this area, which does not adopt emotional intelligence skills as a goal for educational reform, for them, throughout the years of academic study.

The present study findings are in disagreement with ***Edannur (2010),*** who reported that, the majority of teachers had a moderate level of emotional intelligence. Also, ***Nasir, Mustaffa, and Ahmad (2011),*** observed that, the majority of teachers had a moderate level of emotional intelligence.

It is universally acknowledged that assertiveness skills are essential at all levels of the health service and in all roles from student nurse to experienced practitioner. Assertive communication is the ability to speak and interaction in a manner that considers and respects the rights and opinions of others while standing up for one's own rights, needs and personal boundaries. In other words it can strengthen the students' relationships, reducing stress from conflict and providing them with social support when facing difficult times ***(Pipas & Jaradat, 2010)***.

According ability to deal with criticism subscale of assertiveness, the results of current study revealed that, slightly more than half of nursing student nurses had ability to deal with criticism, this results may be due to people don't used to allow others to critique any behaviour of them, everyone must talk the obligate words in order to be gentile person, there is misunderstand that who expresses his bad impact must be rude person. The present result supported by *Begley and Glacken (2004)*, who conducted their study on student nurses in Greece, and they found that, about half of student nurses had ability to deal with criticism.

Regarding confronting others, the most of nurse students had low level of confronting others, this results may be related to some parents, older persons and teachers don't allow young persons to talk about their rights ideas and requests . In the same line, *Begley and Glacken, (2004)* found that three quarters of nursing student nurses had low level of confronting others.

According to spontaneous expression of feelings slightly more than half of them had high level of spontaneous expression of feelings, *Begley and Glacken, (2004)* agree with the result of the current study, they found that about less than two thirds of nursing student nurses had high level of spontaneous expression of feelings.

As results yielded by the present study, it was observed that, about three quarter of student nurses had low level of assertiveness. This can explained through people in traditional Arab societies learn to get along with the attitudes, wishes and expectations of others by ignoring or even hiding their own true feelings, thoughts and attitudes. Moreover Arabic culture has mistaken traditional assumptions about assertiveness such as "it is selfish to put your needs interfere others' needs" and "asking questions reveals your stupidity to others", these fault assumptions inhibit assertiveness and reinforce passivity. This result is in harmony with *Hamoud, El Dayem and Ossman, (2011)* who conducted an assertiveness training program on nurse students at Alexandria University which it revealed that, in the preprogram there was highly tendency from students to be non-assertive. In addition, *Mahmoud, Al Kalaldeh, and Abed El-Rahman (2013)* who studied the effect of assertiveness training program on Jordanian nurse students reported that, the majority of student nurses were non-assertive. On the other hand, *Rezayat, and Nayeri (2014)* found that, more than half

of nursing students had low level of assertiveness. The current study findings are in agreement with ***Nishina, and Tanigaki (2013)*** who found that, assertiveness level among student nurses' was low level.

In contrast, ***Seyedfatemi, Moshirabadi, Borimnejad, and Haghani (2014)*** who found that, the assertiveness among nursing students were moderate. Also, ***Eldeeb, Eid, and Eldosoky (2014)*** conducted a study on nursing students at Menoufyia University they found that, assertiveness level was high among students. In addition, ***Kilkus (2008)*** observed that, the majority of nurse students were assertive. Also***, Moore, Hudson, and Smith (2015)*** who studied the relationship between assertiveness and social anxiety in Huntington Student University, and he found that the assertiveness level was low. In the same line***, Maheshwari, and Gill (2015)*** found that, the level of assertiveness was low. ***Karagozoglu (2008)*** measured the level of assertiveness of last year in Turkish Nursing Students University and found that, the nursing students had the highest scores on assertive behavior

The current study findings are in contrast with ***Taghavi, Sharifi, Aghajani, and Mehran (2010)*** who conducted a study on student nurses, they found that, slightly more than half of the nursing students indicated average assertiveness, while minority of them were exhibited low assertiveness. Besides, in a semi-experimental study conducted by ***Taghavi, Rezayat, Seyed fatemi, andMehran (2013)***, researchers conducted their study on 115 nursing students and they reported that, nearly two thirds of the studied nurse students had an average assertiveness level.

Moreover, ***Deltsidou, (2009)*** observed that, the level of assertiveness achieved by first semester students was high, whereas with advanced semesters student-nurses was high. The minimum re-corded total score was 58 and the maximum 103. Researchers found that, elementary and middle school teachers, as well as teachers at high-risk high schools, viewed assertiveness as an important issue for school success because these skills help students seek assistance or look for educational opportunities ***(Research Collaboration, 2015)***.

The current study results are in disagreement with ***Ibrahim, (2011)*** who conducted a study on 207 student nurses from the faculty of nursing, Port-Said University, Egypt;

the results showed that, the higher percentage of the students were assertive, while in the present study majority of students were non-assertive.

The current study findings showed that, there was correlation between total score of emotional intelligence among nurse educators and the assertiveness scale of student nurses with statistically significance. This result at the same line with ***Adilogullari, (2011),*** who found a positive relationship between emotional intelligence and communication and social skills among teachers.

While, the current study findings are disagreed with ***Drew, (2007)*** who found that, there was no statistically relationship between emotional intelligence and emotional quotient subscales was assertiveness, interpersonal relationships, social responsibility, and flexibility.

Reyes, Bracket, Rivers, White and Salovey, (2012) found a positive correlation between the emotional intelligence among teachers and their abilities which they are sensitive to their students' needs and meet these needs; the relations between the teacher and the students are sincere, compassionate, and harmonious. These teachers take their students' points of view into consideration, avoid unkind and sarcastic disciplinary attitudes, encourage cooperation among the students, and are aware of their students' emotional needs.

Moreover***, Abdolvahabi, Bagheri, HaghighiSh and Karimi, (2012)*** who conducted a study on teachers and they found that there was a positive significance relation between emotional intelligence and assertiveness.

CONCLUSION:

In the light of the main study findings, it was concluded that, the majority of nurse educators had low level of empathy, self-awareness, motivation and social skills. While, the majority of them had a high level of self-regulation. Moreover, slightly less than one quarter of nurse educators had a high level of emotional intelligence*.*

The minority of student nurses had the ability to confronting others, while slightly more than half of them had the ability to deal with criticism and spontaneous expression of feelings respectively. Furthermore, about three quarter of student-nurses had low level of assertiveness.

Moreover, the study revealed that there was a statistically significant relation between nurse educators' emotional intelligence and student nurses' assertiveness at Dakahlia nursing schools.

RECOMMENDATIONS:

- Developing and implementing in-service training program on emotional intelligence skills for nurse educators and developing and implementing training program on self-awareness and communication skills for nurse educators.
- Introduction of specific courses aiming to enhance the acquisition of assertiveness skills.
- Implement further research at different settings including large sample to investigate the effect of assertiveness programs and courses on nursing students and generalizing the findings.

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تأثير الذكاء الوجداني لمدرسات التمريض على توكيد الذات للطالبات بالمدارس الثانوية للتمريض بالدقهلية .

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الـــخـــلاصـــــة

للذكاء الوجدانى تأثير كبير على نجاح مدرسة التمريض فى عملها. تهدف الدراسة الحالية لاكتشاف تأثير الذكاء الوجدانى لمدرسات التمريض على توكيد الذات لطالبات التمريض بالمدارس الثانوية للتمريض بالدقهلية. وهى دراسة وصفية ترابطية أجريت على ٣٩ مدرسة تمريض و٣٩٧ طالبة تمريض. تم استخدام استبيانان لجمع المعلومات الأول لقياس الذكاء الوجدانى لمدرسات التمريض والثانى لقياس توكيد الذات لطالبات التمريض .وقد كشفت النتائج أن غالبية مدرسات التمريض لديهن مستوي منخفض من الذكاء الوجداني كذلك كانت غالبية طالبات التمريض ينقصهن القدره علي توكيد الذات ،ولذلك فان من توصيات البحث تصميم برامج تدريبية لمدرسات التمريض لتحسين مستوي الذكاء الوجداني وزيادة مهاراتهن علي الوعي بالذات والتواصل الفعال وأيضا يجب إدماج مهارات توكيد الذات في المناهج التعليمية لطالبات التمريض.

الكلمات المرشدة : توكيد الذات و الذكاء الوجدانى، مدرسات التمريض و طالبات التمريض