The Relationship Between Nursing Students' Psychological Empowerment and Assertiveness

Hemşirelik Öğrencilerinin Psikolojik Güçlendirme ve Atılganlık Düzeyleri ile İlişkisinin Belirlenmesi

Sevim Şen [®], Hediye Arslan Özkan [®], Emir Avşar [®]

ABSTRACT

Objectives: Assertiveness is a significant skill for a qualified health service. Psychological empowerment, on the other hand, is an intrinsic motivation providing self-confidence for the individuals to reach their goals sucessfully. The aim of this research is to determine the relationship between nursing students' psychological empowerment and assertiveness.

Methods: In order to collect data, Information Form, Psychological Empowerment Scale and Rathus Assertiveness Scale have been used. Descriptive statistics (frequency, percentage, mean, standard deviation and cronbach alpha etc.), t test, anova test and Kolmogorov-Smirnov test were used in the analysis of the data.

Results: The mean age of the students participating in the research was 20.93±1.26, 91.4% of these students were females. The highest mean point between the psychological empowerment and assertiveness inventory was observed in the Second Grade students. A significant difference was found between the assertiveness level of nursing students and psychological empowerment. **Conclusions**: It is thought that encouragement of psychological empowerment will contribute to increase the assertiveness skills. This study is crucial in determining the relationship between psycological empowerment and assertiveness and in emphasizing the necessity of including this subject in the nursing education curriculum.

Keywords: Nursing education, Psychological empowerment, Assertiveness, Nursing student

ÖZ

Giriş: Atılganlık kaliteli sağlık hizmeti için önemli bir beceridir. Psikolojik güçlendirme ise bireylerin hedeflere başarıyla ulaşma konusunda güven duymalarını sağlayan içsel bir motivasyondur. Bu araştırmanın amacı hemşirelik öğrencilerinin psikolojik güçlendirme ve atılganlık düzeyleri ile ilişkisini belirlemektir.

Yöntem: Veri toplamak için Bilgi Formu, Psikolojik Güçlendirme Ölçeği ve Rathus Atılganlık Ölçeği kullanılmıştır. Verilerin analizinde tanımlayıcı istatistikler (frekans, yüzde, ortalama, standart sapma ve cronbach alfa vb), gruplar arasındaki fark için t testi, anova testi ve Kolmogorov-Smirnov testi kullanılmıştır.

Bulgular: Araştırmaya katılan öğrencilerin yaş ortalaması 20.93±1.26, %91.4'ü kadındır. Psikolojik güçlendirme ve atılganlık envanteri toplam puanları arasında en yüksek ortalama puanın ikinci sınıf öğrencilerinde olduğu tespit edilmiştir. Hemşirelik öğrencilerinin atılganlık düzeyi ile psikolojik güçlendirme arasında anlamlı fark bulunmuştur.

Sonuç ve Öneriler: Psikolojik güçlendirmenin teşvik edilmesi atılganlık becerilerinin arttırılmasına katkı sağlayabileceği düşünülmektedir. Bu çalışma psikolojik güçlendirme ve atılganlık düzeyi ile ilişkisinin belirlenmesinde ve bu konuların hemşirelik eğitim müfredatında yer verilmesi gerekliliğini vurgulamak için önemlidir.

Anahtar kelimeler: Hemşirelik eğitimi, Psikolojik güçlendirme, Atılganlık, Hemşirelik öğrencisi

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Sevim Şen

Yeditepe University, Faculty of Health Sciences, Department of Nursing, Istanbul, Turkey sevim.sen@yeditepe.edu.tr ORCID: 0000-0003-3301-4153

H. Arslan Özkan 0000-0002-9328-8263 Yeditepe University, Faculty of Health Sciences, Department of Nursing, Istanbul, Turkey

E. Avşar 0000-0003-0796-6409 Yeditepe University, Faculty of Health Sciences, Department of Nursing, Istanbul, Turkey

INTRODUCTION

Health professionals are required to renovate and exceed themselves steadily, and act in a way that will increase service quality and efficiency because of the global changes and developments, innovations emerging in treatment methods, and the patients' rising and changing expectations (1). So, psychological empowerment is necessary for the nurses in order to be able to manage the complex medium of the health systems (2). Psychological empowerment is defined as intrinsic task motivation reflecting a sense of self-control in relation to one's work and an active involvement with one's work role. It is composed of four cognitions: meaning, competence, selfdetermination/autonomy and impact (3). Meaning refers to one's giving importance intrinsically to the task given, apart from this, it is the alignment between one's work role and one's own beliefs, values and standards. Competence or self-esteem refers to one's feeling oneself competent on work and believing in his performance capabilities. Autonomy/selfdetermination is an individual's sense of autonomy or control concerning the initiation or regulation of one's actions. Impact expresses the degree of one's being able to make differences forming the required influences during one's working process (2-4).

Assertiveness is defined as the ability to express oneself (5). Namely, it is defined as a means of indirect communication that one is respectful, open and honest to the rights of others as well as his own (6). To possess the ability of assertiveness is very crucial for effective using of the knowledge and skills obtained, reduce the stress level of others and provide a qualified health care service. Apart from this, it is one of the skills that play a role in times of preventing unexpected events/cases in health services and in the management of patient treatment. The related studies have been emphasizing the significance of assertiveness skills for nurses (7,8). Nursing is an extremely expertised profession and to be able to perform a qualified nursing care, nurses are required to improve their skills via training throughout their lives. For the student nurses, it is difficult to constitute a point of view towards their profession and gain a job satisfaction (9). In this context, the aim of nursing education is to raise individuals' sensitivity to any kind of development and change affecting the health of an individual, a family, a group and community and to reflect the needy ones his service and care, to determine the requirements of nursing care in all mediums and have sound and effective interaction and communication with the other members of health team (10). For this reason, assertiveness is one of the significant skills which plays an important role to promote effective communication, to increase job satisfaction, to prevent fatigueness, to resolve the conflicts in workplace, to decrease stress and to increase the quality of patient care and treatment (11). One of the factors playing an important role to increase the skills of assertiveness is psychological empowerment. So, psychological empowerment and assertiveness levels in nursing students will increase their performance in their future profession. In this context, empowerment and assertiveness skills of nursing students discussed separately (6,8,12-14), but the number of studies examining the relationship between the two concepts was found to be limited (4,11)

The aim of this research is to determine the relationship between psychological empowerment and assertiveness in nursing students.

Research Questions;

- 1. What are the psychological empowerment and assertiveness levels of nursing students?
- 2. What are the psychological empowerment and assertiveness levels of nursing students according to their sociodemographic characteristics?
- 3. Is there a significant difference between the psychological empowerment and assertiveness levels of nursing students?

METHODS

Study Design

Research was conducted as a descriptive crosssectional study.

Study Setting

This study was conducted in the Nursing Department of Faculty of Health Sciences in a Foundation University in Istanbul.

Sample

The sampling of the research includes 240 students attending the Nursing Department in 2019-2020 Academic Year. All the data were filled by First, Second, Third and Fourth Grade students. 53 students were excluded from the research due to their not completing the research fully, so this research was realized with 187 students (Table 1).

Instrument

Data were collected using Information Form, Psychological Empowerment Scale and Rathus Assertiveness Inventory.

Information Form: This form was prepared and designed by the researchers in line with the literature, includes eight questions to find out the basic demographic characteristics (age, gender, school etc.) of the students (1,3,4,6,11).

Spreitzer's Psychological Empowerment Scale: Psychological Empowerment Scale (PEI) has been developed by Spreitzer (1995). Its Turkish validation and reliability studies were made by Sürgevil, Tolay and Topayan (2013). Scale, in total, was 12 articles and included 4 sub-dimensions as meaningfulness 3 articles (1-3 art.), competence 3 articles (4-6 art.), autonomy 3 articles (7-9 art.) and impact 3 articles (1012 art.) Scale was designed as Likert Scale of 5 points and the answer choices changed between "definitely agree" (5), "definitely disagree" (1). High points define high psychological empowerment perception. Internal reliability values of the factor dimensions in all structures of the Scale Cronbach alpha value was above 0.70, so the scale was accepted to be reliable (15). In this study, the Cronbach alpha value of the scale was found 0.81.

Rathus Assertiveness Scale: Rathus Assertiveness Scale was developed by Rathus in 1973. The Turkish Validation reliability studies was made by Voltan (1980). The inventory of the Scale is composed of 30 articles and is used, listed from -3 to +3, in 6 forms as Likert. The points to be taken is between -90 and +90 defines the highest degree of shyness, +90 defines the highest degree of assertiveness. Voltan found the alpha coherence coefficiency as r=0,70 and testrepetition reliability as r=0,92 (16). Points +10 and above show assertiveness. The Cronbach alpha value of this scale in this study was found as 0,87.

Data Analysis

Data were analyzed using SPSS 25.0 (SPSS Inc.) package program. In the demographic characteristics of the participants and in the analysis of the points obtained from the scales, descriptive statistics (frequency, percent, mean, standard deviation and cronbach alpha etc), for the difference between the groups, t test, anova test and Kolmogorov-Smirnov test were used. The p value, being 0.05, was accepted statistically meaningful (17).

Data Collection

After the verbal and written explanations of the researchers about the research, the scales and information forms were handed out to the volunteering First, Second, Third and Fourth Grades Nursing students. Volunteer students were informed verbally and written about the aim, target, research team, methodology and data saving. No name or descriptive data was demanded from the students. The participants were also informed that the data would be used only for scientific purposes. Nothing extra was performed during the study period. The handing over and completion of the survey lasted about 20 minutes.

Limitations

This study is limited with the students attending the Nursing Department of Faculty of Health Sciences in a Foundation University in Istanbul in the 2019-2020 Academic Term. Since the sampling of the study is conducted in a relatively small and limited with only one school, the results cannot be generalized for all the nursing students.

Ethical Permissions

Ethics committee permission from the Clinical Research Ethics Committee (Decision No: 1223), institutional permission and "Informed Consent Form" was obtained from the participants participating in the study.

RESULTS

The mean age of the students joining to the research was 20.93±1.26, minimum age 18, maximum age 25. 91.4% of the students were females, 8.6% of them were males. 28.3% of the students were in the First Grade, 28.9% in the Second Grade, 24.1% in the Third Grade and 18.7% in the Fourth Grade, 68.4%



are Anatolian High School graduates, 85.6% grew up in a metropolitan city and 69% lives with a family lives (Table 1).

The total mean score of psychological empowerment of the nursing students participating in the study was 46.32±8.51, sub-dimensions were meaning 12.35±2.23, competence 11.11±2.54, self-determination 11.55±2.37, and impact 11.29±2.41 respectively. No significant difference was found between the sociodemographic characteristics of the students and psychological empowerment (Table 2).

Table 1. Participant characteristics (N: 187)

	N	%
Sex		
Male	16	8.6
Female	171	91.4
Age	20.93±1.26	
Academic years		
First year	53	28.3
Second year	54	28.9
Third year	45	24.1
Fourth year	35	18.7
High School		
Medical Vocational	19	10.2
Anatolian	128	68.4
Science	5	2.7
Other	35	18.7
Living place		
City	160	85.6
Town	27	14.4
University education accommodation		
With the family	129	69
With roommate	23	12.3
Student hostel	14	7.5
Alone at home	14	7.5
Other	7	3.7

It was determined that total points of psychological empowerment and its sub-dimensions, as of meaning, competence and impact were the highest in the Second Grade students. Self-determination sub-dimension was the highest in the First Grade Students. It was observed that Fourth Grade students had the lowest mean point between the psychological empowerment total point and its sub-dimensions. The mean points of the psychological empowerment sub-dimensions of the First Grade students were as follows: 12.36±2.24 for meaning, 11.26±2.54 for competence, 11.77±2.37 for self-determination and 11.47± 2.42 for impact. The same points for the Second Grade students were found as 12.72±2.28 for meaning, 11.46±2.70 for competence, 11.57±2.70 for self-determination and 11.54±2.52 for impact. The same mean points for the Fourth Grade students were found as 11.80±2.47 for meaning, 10.66±2.35 for competence, 11.06±2.03 for self-determination and 10.66±2.33 for impact (Table 3).

It was determined that the total mean score of the assertiveness inventory of the nursing students was 5.81±21.89. A significant difference was found between the total mean scores of the assertiveness inventory of men compared to women (t=2.157; p<.05) (Table 2).

Second Grade Students were found to have the highest mean points between the assertiveness inventory total points. Assertiveness inventory mean points of the participants, according to Academic Years, were observed as 5.83±21.22 for First Grades, 10.04±27.89 for Second Grades, 3.18±18.78 for Third Grades and -3.11±12.27 for Fourth Grades (Table 3). Only the %36.37 of the participants were seen to have assertiveness. When Academic Years are considered %30.19 of the First Grades, %48.15 of the Second Grades, %46.67 of the Third Grades and %14.28 of the Fourth Grades were observed to have assertiveness (Table 4).

A significant difference was found between the total points of assertiveness and psychological empowerment and their sub-dimensions of meaning, competence, autonomy and impact points of the nursing students' participating this study (Table 5).

Table 2. Psychological empowerment and assertiveness levels of nursing students according to their sociodemographic characteristics (N: 187)

Participant characteristics	Meaning	Competence	Self-determination	Impact	Total score of psychological empowerment	Total score of assertiveness
	Mean ± SD	Mean ± SD	Mean ± SD	Mean ± SD	Mean ± SD	Mean ± SD
Total score of Nursing students	12.35±2.23	11.11±2.54	11.55±2.37	11.29±2.41	46.32±8.51	5.81±21.89
Sex						
Male	12.18±2.85	11.37±2.30	11.62±2.72	11.25±2.74	46.43±9.83	17.00±24.21
Female	12.37±2.18	11.08±2.57	11.54±2.34	11.30±2.39	46.31±8.41	4.77±21.44
t*	.318	.431	.121	.085	.055	2.157
р	.751	.667	.904	.932	.957	.032
High School						
Medical	12.52±2.14	11.57±2.691	12.00±2.42	11.84±2.83	47.94±9.02	8.31±22.18
Anatolian	12.38±2.30	11.07±2.60	11.50±2.43	11.20±2.42	46.16±8.70	4.71±23.62
Science	13.00±1.58	11.60±1.94	11.80±1.92	11.40±2.19	47.80±7.25	-1.80±15.12
Other	12.08±2.18	10.91±2.36	11.48±2.22	11.34±2.23	45.82±7.85	9.57±14.79
F**	.347	.349	.270	.390	.331	.731
р	.792.	.792	.847	.760	.803	.535
Living place						
City	12.49±2.14	11.30±2.41	11.65±2.30	11.42±2.32	46.88±8.07	5.98±22.19
Town	11.55±2.63	9.96±3.01	10.96±2.72	10.55±2.81	43.03±10.32	4.85±20.30
t	2.030	2.575	1.405	1.739	2.192	.247
р	.044	.011	.161	.084	.030	.805
Accommodation						
Student hostel	10.85±3.46	10.57±3.08	10.42±2.97	9.85±3.05	41.71±11.93	11.35±24.88
Family	12.42±2.06	11.19±2.31	11.58±2.27	11.38±2.35	46.59±7.89	6.35±21.36
Alone at home	12.64±2.27	10.28±3.09	11.28±2.64	11.00±2.41	45.21±8.90	10.78±28.24
Roommate	12.47±2.33	10.82±3.06	11.65±2.36	11.34±2.28	46.30±9.11	1.39±14.66
Other	13.14±1.21	13.28±1.60	13.42±1.39	13.00±1.41	52.85±5.36	-10.57±27.19
F	1.928	1.948	1.984	2.275	2.205	1.662
р	.108	.104	.099	.063	.070	.161

^{*} Independent t test

Table 3. Psychological empowerment of nursing students' by academic years (N: 187)

Psychological _ empowerment	First year	Second year	Third year	Fourth year	F**
empowerment	Mean ± SD*	Mean ± SD	Mean ± SD	Mean ± SD	р
Manuina	12.36±2.24	12.72±2.28	12.36±2.09	11.80±2.47	1.204
Meaning	12.30±2.24	12./212.28	12.30±2.09	11.8U±2.47	.310
Compotones	11.26±2.54	11.46±2.70	10.87±2.66	10.66±2.35	.916
Competence	11.20±2.54	11.4012.70	10.8/12.00	10.00±2.35	.434
Self-determination	11.77±2.37	11.57±2.70	11.67±2.23	11.06±2.03	.695
Sell-determination	11.//±2.3/	11.5/±2.70	11.0/±2.23	11.00±2.03	.556
Impact	11.47±2.42	11.54±2.52	11.31±2.35	10.66±2.33	1.091
Пірасі	11.4/±2.42	11.54±2.52	11.51±2.55	10.0012.55	.354
Total score of					1.057
psychological	46.87±8.51	47.30±9.05	46.20±8.36	44.17±8.18	
empowerment					.369

^{*}Standard deviation **Anova test

^{**} Anova test



Table 4. Assertiveness of nursing students' by academic years (N: 187)

Assertiveness -	First	t year	Seco	nd year	Thir	d year	Four	th year	F**	Difference
	Mear	ı ± SD*	Mea	n ± SD	Mea	n ± SD	Mea	n ± SD	р	Difference
Total score of assertiveness	5.83:	±21.22	10.04	l±27.89	3.18	±18.78	-3.11	±12.27	F=0.722 P=0.933	No difference
	N	%	N	%	N	%	N	%	Total N	Total %
Assertive	16	30.19	26	48.15	21	46.67	5	14.28	68	36.37
Non assertive	37	69.81	28	51.85	24	53.33	30	85.72	119	63.63

^{*}Standard deviation

Table 5. Relationship between nursing students' psychological empowerment and assertiveness (N: 187)

	Assertive	Non assertive	t	р
Meaning	12.65±2.19	10.92±2.24	2.162	.031*
Competence	11.82±2.61	11.01±2.19	3.285	.001*
Self-determination	11.93±2.16	10.91±2.56	3.514	.000*
Impact	11.55±2.27	10.92±2.57	3.379	.000*
Total score of psychological empowerment	52.85±2.82	44.85±8.91	22.985	.000*

^{*}p < 0,05

DISCUSSION

This study was carried out with the aim of determining the relationship between the psychological empowerment and assertiveness of the nursing students. In this context, psychological empowerment and assertiveness levels of nursing students were examined. Majority of the students receiving the research were Anatolian High School graduates and females aged between 18-25 (Table 1).

Psychological empowerment is an emotional state of individuals supplying them with feeling confidence to reach their goals successfully. There are four dimensions of such an empowerment: meaning, competence, self-determination and impact. These four basic units enhance the individuals to adjust to their work, reflect their values/norm, beliefs and attitudes, meet the business demands and influence the crucial decisions in the workplace. Apart from these, empowerment creates a flexible working medium to reach the targets in business. Studies have shown a negative relationship between psychological empowerment and emotional fatigue (18,19). A lot of studies have shown the influence of the

nurses' access to knowledge, support, opportunity, sources and formal and informal powers on their psychological states (19,20). Psychological empowerment supplies the nurses with a more positive attitude, more confidence, more autonomic rights and thus they highly feel their influence in business (20). İbrahim (2011) put forward in his study that 50% of the students in First. Second and Fourth Grades have been empowered, only more than the two-thirds (70%) of the Third Grade students have been empowered (21). In the studies carried out in different countries, it was reported that the psychological empowerment mean point of the nurses are of medium level (11,13,14). When our findings have been evaluated, ours are similar to the studies being carried out. The psychological empowerment points of the students were seen above medium level (Table 2), but the lowest points were seen above medium level, but the lowest points were in the Fourth Grade students (Table 3). By starting to get the basic courses in the Second Grade, the students learn the diseases and parctice the care and treatment services for these diseases and their equipping with professional awareness and scientific saturation. It is observed that the psychological empowerment perception becomes higher. However, when the

^{**}Anova test

student is in the Fourth Grade, it is thought that due to the heaviness of knowledge accumulation, the fear of not to be able to judge the illnesses and the patients, scarcecity of consultant nurses in the clinics, the refusal of the patients not getting treatment from the students and the anxiety not to be able to show the performance expected from them, their not knowing in which unit they are going to work after graduation, their seeing themselves incompetent or the probability of their being employed other than their expert area, the negative pressure of their family or friends (environmental stress-makers) close to their graduation and all other anxiety factors that affect psychological empowerment perception negatively.

Assertiveness skills are accepted to be significant for all health professionals, at all levels of health services, from student-nurses to the qualified ones, from the patient treatment areas to health strategy improvement skills (22). With the changing World, by avoiding the traditional roles, assertiveness skills are of utmost requirement day by day. In his study, Begley and Glacken (2004) has noted that the more advancement the nursing students do during their education period, the more their assertivenessskills improve (6). According to the results of İbrahim's studies (2011), it was reported that 60.4% of the nursing students are of assertive character (21). As for the results of Azizi's (2020) studies, the assertiveness of average in nursing and mid-wife students is of medium level (11). Karagözoğlu et al., (2008) have reported that nursing and mid-wife students in Turkey have high levels of assertiveness (7). But, in an other study made in Turkey, it was pointed out that more than half of the nursing students are not assertive (23). Still, in an other study carried out in Iran, it was reported that more than half of the nursing students have between medium and low levels of assertiveness (24). They showed similar results with ours (Table 4). When findings were evaluated, it was determined that more than half of the nursing students were not assertive. The reason why the average assertiveness point of the Fourth Grades is the lowest may be the anxiety of uncertainity before graduation, the difficulty of being employed in our country, economic concerns, the increase of fatigueness as the graduation time approaches, and not being able to set the goals. At the same time, in the process of approaching graduation, the students' not clearly having decided fort he career planning goals, all can be thought to be factors for the levels to be the lowest.

When the active roles of the nursing students such as their being sensitive towards the developments and changes that will influence the health individuals, families, groups and communities, their determining the requirements for nursing care services and being in good and effective terms with other health professionals are taken into consideration, it is thought that the insufficiency of assertiveness skills will obstruct education to reach the goals. Psychological empowerment, on the other hand, in different times will increase the job satisfaction of the nurses and decrease their emotional fatigueness to minimum. Related studies have shown that psychological empowerment increases job-satisfaction and organizational dependence and leads to a better professional performance (19,20). When evaluated, in this context, assertiveness and psychological empowerment are interactive concepts. Related studies have found out the relationship between the nursing students' assertiveness and psychological empowerment (4,11,21). Also, using of private coaching that aims to increase the skills of assertiveness have been recommended and the necessity of the scholar's motivating the students to express their individual rights and opinions and to empower them, especially, to increase their autonomy has been emphasized (21). When our findings are evaluated, they fit to literatüre (Table 5). A significant difference between the nursing students' psychological empowerment and assertiveness has been established. But, there are not many studies evaluating the relationship between the psychological empowerment and assertiveness skills of the nursing students. Yet, these two concepts are very crucial for the nursing education to reach the goals. It is observed in our study that assertive individuals feel themselves psychologically empowered.

CONCLUSIONS AND RECOMMENDATION

The conclusion of the research has shown that the assertiveness and psychological empowerment levels of the Fourth Grade students are lower than those of the First, Second and Third Grades. Besides, in the study, a significant difference has been seen between psychological empowerment and assertiveness. As a result, the encouragement of psychological empowerment is thought to contribute to the increase of assertiveness skills. This study is crucial in determining the relationship of psychological empowerment and assertiveness and in emphasizing the necessity of including these subjects in nursing training curriculum.

Upon these results;

- Care should be given to support the psychological empowerment in nursing education. It is recommended that in order to minimize the uncertainty anxiety of the Fourth Grade students before graduation, for obtainig psychological empowerment sub-dimensions, such as meaning, competence autonomy and impact, should be supported.
- Addition of the courses leading to improve the assertiveness skills of the nursing students and usage of the teaching methods and techniques that the students will take much more responsibilityis recommended.
- With longitudinal, qualitative and similar studies, the variables influencing psychological empowerment should be conducted with larger and different groups.

Author contribution

Study conception and design: SŞ, HAÖ, and EA; data collection: SŞ and EA; analysis and interpretation of results: SŞ, HAÖ, and EA; draft manuscript preparation: SŞ, HAÖ, and EA. All authors reviewed the results and approved the final version of the manuscript.

Ethical approval

The study was approved by the Yeditepe University Clinical Research Ethics Committee (Protocol no. 1223/21.05.2020).

Consent

Informed consent was obtained from all participants for being included in the study.

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Conflict of interest

The authors declare that there is no conflict of interest.

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