

Assertiveness and Stress among Undergraduate Nursing Students at Menoufyia University

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Abstract

Assertiveness has emerged as an effective moderator of stress for the nursing student population. Being assertive means that you express yourself effectively and stand up for your point of view, while also respecting the rights and beliefs of others. Stress is the emotional and physical response you experience when you perceive an imbalance between demands placed on you and your resources at a time when coping is important. **The aim** of this study was to assess assertiveness and stress levels among second year and fourth nursing students at Meofiya University. **Design:** descriptive comparative research design was used. **Setting:** Study was carried out at Nursing College, Meofiya University. **Subjects** of the study were (176) students from second year and (141) students from fourth year. **Three tools for data collection** were used: (1) questionnaire for socio demographic data. (2) Assertiveness behavior scale (**Clarck and Shea 1979**). (3) Student nurse stress index (SNSI) (**Jones and Johnston, 1999**). **The findings** indicated that second year nursing students have higher mean scores of assertiveness than fourth year students. Highest percentage of both groups reported high level of stress. There was a statistical significant positive correlation between assertiveness and stress levels. **In conclusion** the results of this study revealed that both assertiveness and stress levels were higher among both academic years' students. That indicated a positive correlation between assertiveness and stress levels. **Recommendations:** Introduction of specific courses aiming to enhance the acquisition of assertiveness skills, including stress management and coping strategies in curricula. Role play and role model are important in facing stress and being assertiveness. Future research is needed to large number of students.

Key words: Assertiveness, stress and nursing students

1. Introduction:

Today's nursing students are the nucleus of the professional nurses of tomorrow, who will interact with their colleagues and other health care professionals on a daily basis and provide the care for patients, their families and society in the area of health and education in the future. The acquisition of the assertion skills is considered the key to enhance personal competence and satisfying relationships (**Hamoud, Abd El Dayem and Ossman, 2011**).

Assertiveness has emerged as an effective moderator of stress for both the general female population and the nursing student population (**Tomaka et al., 1999**). Assertiveness can help students to control stress and anger and improve coping skills. Being assertive is a core communication skill. Being assertive means that you express yourself effectively and stand up for your point of view, while also respecting the rights and beliefs of others. Being assertive can also help boost your self-esteem and earn others' respect (**Mayo Clinic Staff, 2012**).

Assertiveness is an important behavior for today's professional nurse. It is necessary for effective nurse/patient communication, and suggested that its development may also aid the confidence of the profession as it develops (**Cabe and Timmins, 2003**).

Assertiveness is an interpersonal behavior that promotes equality in human relationships by assisting an individual give expression to their rights, thoughts and feelings in a manner that neither denies or demeans but recognizes and respects those of others (**Begley and Glacken, 2004**).

There are six main characteristics of assertive communication. These are: eye contact: demonstrates interest, shows sincerity. body posture: congruent body language will improve the significance of the message. gestures: appropriate gestures help to add emphasis. Voice: a level, well modulated tone is more convincing and acceptable, and is not intimidating. timing: use your judgment to maximize receptivity and impact. Content: how, where and when you choose to comment is probably more important than WHAT you say (**Hopkins, 2005**).

There are four styles of communication namely: Passive, aggressive, passive aggressive and assertive communication. Passive communication is a style in which individuals have developed a pattern of avoiding expressing their opinions or feelings, protecting their rights, identifying and meeting their needs. Aggressive communication is a style in which individuals express their feelings and opinions and advocate for their needs in a way that violates the rights of others. Passive-aggressive communication is a style in which individuals appear passive on the surface but are really acting out anger in a subtle, indirect, or behind-the-scenes way (**Benedict, 2012**).

Assertive communication is the straightforward and open expression of your needs, desires, thoughts and feelings. Assertive communication involves advocating for your own needs while still considering and respecting the needs of others, (Arlin Cuncic 2013).

In order to be assertive you must stick to these rules and guidelines: You have the right to have your own values, beliefs, opinions, and emotions. You have the right not to justify or explain your actions to others. You have the right to tell others how you wish to be treated. You have the right to express yourself and to say, "No," "I don't know," "I don't understand," or even "I don't care." You have the right to take the time you need to formulate your ideas before expressing them. You have the right to make mistakes. You have the right to stand up for yourself and for what you want. You have the right to be treated with respect (Radwan, 2011).

To communicate assertively the communicator state needs and wants clearly; express feelings clearly, appropriately, and respectfully; use "I" statements; communicate respect for others; listen well without interrupting; feel in control of self; have good eye contact; speak in a calm and clear tone of voice; have a relaxed body posture; feel connected to others; feel competent and in control; not allow others to abuse or manipulate them; stand up for their rights (Benedict, 2012).

As a method, one can practice assertive behavior in 7 steps: (1) Attention: capture attention in a way that is of interest to listen to each other; (2) Situation: describe the situation briefly. (3) Emotion: Tell yourself what is for the emotional impact of the situation. (4) Reaction: Explain the behavioral response as a result of the emotion you feel. (5) Test: Test your level of concern of the party by offering them a solution that you think or asking his opinion. (6) Involvement: Get involved with the other in finding a method for monitoring the progress of the new behavior; (7) Valorization: Thank the interlocutor for listening and that he is willing to accept the new terms. (Pipas & Jaradat, 2010).

Behaving assertively can help the nurse to: gain self-confidence and self-esteem; understand and recognize your feelings; earn respect from others; improve communication; create win-win situations; improve decision-making skills; create honest relationships; and gain more job satisfaction (Mayo Clinic Staff, 2012).

Lack of assertiveness can lead to depression from anger turned inward, resentment, frustration, anxiety, which leads to avoidance; poor relationships of all kinds, non-assertive people are often unable to express emotions of any kind, Physical complaints such as headaches, ulcers, high blood pressure (Barnette, 2009). Top three ways to improve your assertiveness be confident, not pushy; Listen, don't pretend to hear; Be clear, not confused (Lampert, 2012).

Nursing student experience more stress than students enrolled in other programs. A study comparing the stress levels of various professional students found that nursing students experience higher levels of stress than medical, social work and pharmacy students (American Holistic Nurses Association, 2012).

Stress is the emotional and physical response you experience when you perceive an imbalance between demands placed on you and your resources at a time when coping is important. Stress can be regarded as a psychological threat, in which the individual perceives a situation as a potential threat (Brunero et al., 2006).

Moderate amounts of stress help to motivate students and, at times, increase their performance, while too high levels of stress interferes with academic performance. Stress is the adverse reaction people have to excessive pressure or other types of demand placed on them (Shields, 2002 & Smith 2007) and (The Health and Safety Executive, 2004).

Eustress is a term commonly applied to these more positive responses to stress, whilst the term 'distress' appropriately describes negative aspects. 'Stress', therefore, should be viewed as a continuum along which an individual may pass, from feelings of eustress to those of mild/moderate distress, to those of severe distress. Indicators of distress are recognized but those of mild/moderate distress may not be observed collectively, or may have differing degrees of severity, and so symptoms at this level of distress are likely to vary between individuals. In contrast, severe and prolonged distress culminates in more consistently observed symptoms of emotional 'burnout' and serious physiological disturbance (McVicar, 2003).

Issues that nurses face that often contribute to stress include Anxiety related to demands of the job, Inefficient coping related to the lack of knowledge for job requirements, Spiritual distress related to the inability to find meaning or purpose in professional and personal life, Ineffective leadership ability; ineffective assertiveness training, Inability to motivate staff, Ineffective ability to balance work, family, and personal life and Lack of supervisory support, Poor co-worker relationships (Ward, 2012).

Sources of stress among nursing students include: study-related issues, the emotional demands of nursing, the use of technical equipment, interpersonal interaction, and lack of time for family and personal pursuits (Clarke and Ruffin, 2012).

Nursing students should be alert for symptoms of an elevated stress level. It impairs the student's studies, schoolwork and personal life. Stress can affect sleep patterns. Warning signs include being irritable with other people, continual feelings of anxiety, difficulty concentrating on schoolwork and other things, social withdrawal and a noticeable drop in grades (Nefer, 2012).

Physical symptoms of stress include: a pounding heart, elevated blood pressure, sweaty palms, tightness of chest, aching neck, jaw and back muscles, headache, chest pain, abdominal cramps, nausea, trembling, sleep disturbance, tiredness, susceptibility to minor illness, itching, easily startled, forgetfulness (Murray, 2005).

Strategies for managing stress include: Maintain a balance between work and play, Build and maintain your support networks. Learning to relax, Exercise, Talk about how you are feeling with supportive friends, take time to regularly review and plan. Practice effective time management especially by avoiding overload. Use 'no', 'not now', and delegate, especially when you sense that other people are trying to offload their work onto you. Take meal and other breaks. Learn to recognize your needs and be assertive in stating them. Do not feel pressured into overtime that you know you cannot do or do not want to do (Murray, 2005).

Significance of the study:

Many undergraduate nursing students undergo considerable stress, thus many national and international researches were approached in this field. In order to cope with stress student nurses need to have high level of assertiveness. At Nursing College, Menofiya University, no researches were done in this respect, so depth researches are needed to clarify the level of stress and level of assertiveness among nursing students. Hence the aim of this study is to compare stress and assertiveness levels among second year and fourth year nursing students at nursing college Menofiya University.

Aim:

This study was aimed to assess assertiveness and stress levels among second year and fourth year nursing students at Menoufiya University.

Objectives of this study are to:

- 1- Assess assertiveness level between second year and fourth year nursing students at Menoufiya University.
- 2- Assess stress level between second year and fourth year nursing students at Menoufiya University.
- 3- Explore the relationship between stress and assertiveness levels among second year and fourth year nursing students at Menoufiya University.

Research Questions

1. Is there a difference between second year and fourth year nursing students at Menoufiya University regarding level of assertiveness?
2. Is there a difference between second year and fourth year nursing students at Menoufiya University regarding level of stress?
3. Is there a relationship between level of assertiveness and level of stress among nursing student at Menoufiya University?

2. Subject and methods

2.1. Study design : Descriptive comparative study design was used in this study .

2.2. Setting : The study was carried out at College of Nursing, Menofiya University, Menofiya governorate, Egypt.

2.3. Subjects: All second year and fourth year nursing students, Menofiya University who accepted to participate in the study. Their total number was (317) students (176 students from second year and 141 students from fourth year).

2.4. Tools: Three different tools for data collection are used in the present study:

Tool (I): Questionnaire for Socio-demographic data for students. This tool is developed by the researcher and include; age, student grade of study, marital status, number of children, score in last semester.

Tool (II): An assertiveness behavior scale (Clarck and Shea 1979) the questions were (45) questions and sub grouped under 6 categories, were constructed to collect data:

Category	No. of items
Verbal and non verbal style	7
Control of anxiety and fear	14
Active orientation	4
Work habits	5
Relating to co- workers	9
Negotiating the system	6

Scoring system:

The score response for questions include always (5) usually (4) sometimes (3) seldom (2) and never (1). Total score is (225). Student whose score was Less than (90) = low assertiveness, (90- 135) = moderately assertiveness and Student whose score was More than (135) were assertiveness.

Tool (III):

Student Nursing Stress index (SNSI) developed by (Jones&Johnston, 1999) was used for the assessment of stress level among nursing students. The questionnaire was modified by the researchers. The SNSI is a (19-items) self-report instrument. SNSI covers three areas validated as affecting nursing student self-reported stress levels: 1) Academic load (8 items); 2) Personal problems (4 items); 3) Interface worries (7 items).

Responses were rated on a 5-point Likert scale from 1-Not stressful to 5-Extremely stressful. The scores of the items were summed up and the total divided by the number of items, giving a mean score for the part. These scores were converted into a percent score. Stress level is considered high if the percent score were (>57), moderate (38-≤57) and low stress (38>).

Tools of data collection were translated into Arabic and simplified to be easier for students to complete. Tools are handed to ten experts from college of nursing Menoufyia University to assess the clarity and content validity, criterion related validity, reliability of the questionnaire.

2.5. Administrative design:

Before starting the actual data collection process administrative approval for the research was taken from dean of College of Nursing Menoufyia university. The researcher introduced themselves, explained the objectives of the study to students, and informed them that their information will be confidential and will be used only for the purpose of the research.

2.6. Pilot study:

Before any attempt for data collection a pilot study was carried out in College of Nursing Menoufyia University for the purpose of testing reliability, clarity, applicability and comprehensiveness of the questionnaire. It was done on (10) student nurses who were not excluded from the main study subjects during the actual collection of data. Pilot study aimed also at determining the time needed for filling the questionnaires which takes about (15) minutes.

2.7. Field work:

Data were collected from first of September to first of November (2013).

2.8. Statistical Analysis:

Results were collected, tabulated, statistically analyzed using statistical package SPSS version 17. Two types of statistics were done:

- Descriptive statistics: e.g. percentage (%), mean (\bar{x}) and standard deviation (SD).
- Analytic statistics: e.g. Chi-square test (χ^2): was used to study association between qualitative variables. Independent sample t-test was used to test significant difference of quantitative variables between the two groups of study subjects. p-value < 0.05 was considered statistically significant. Pearson correlation (r) analysis was used for assessment of the inter-relationships among quantitative variables.

3. Results:

Table (1) percentage distribution of study subjects according to marital status and scores of last semester.

Socio-demographic Characteristics.	Second year students (n=176)		Fourth year students (n=141)		Total (n= 317)	
	NO.	%	NO.	%	NO.	%
Age						
< 20	65	36.9	0	0	65	20.4
20 - < 22	111	63	87	61.7	198	62.5
22 ≤	0	0	54	38.3	54	17.1
Mean ± SD	19.9 ± 0.8		21 ± 0.8		20.41 ± .99	
Marital status:						
Single	172	97.7	127	90.1	299	94.3
Married	4	2.3	14	9.9	18	5.7
Score in last semester						
Excellent	17	9.7	23	16.3	40	12.6
Very good	92	52.3	107	75.9	199	62.8
Good	62	35.2	11	16.8	73	23
Fair	4	2.3	1	.7	5	1.6

Table (1) displays distribution of study subjects according to age, marital status and scores of last semester. Concerning age, fourth year nursing students have higher mean age (21 ± 0.8) years than second year nursing students (19.9 ± 0.8 years). Regarding marital status majority of nursing students from both levels were single their respective percent for second year and fourth year students were 97.7% and 90.1%. However, no students from both groups were divorced. Concerning score of last semester majority of students in both groups have very good score.

Figure (1) Comparison Between second and fourth Year Nursing Students Regarding Levels of Assertiveness.

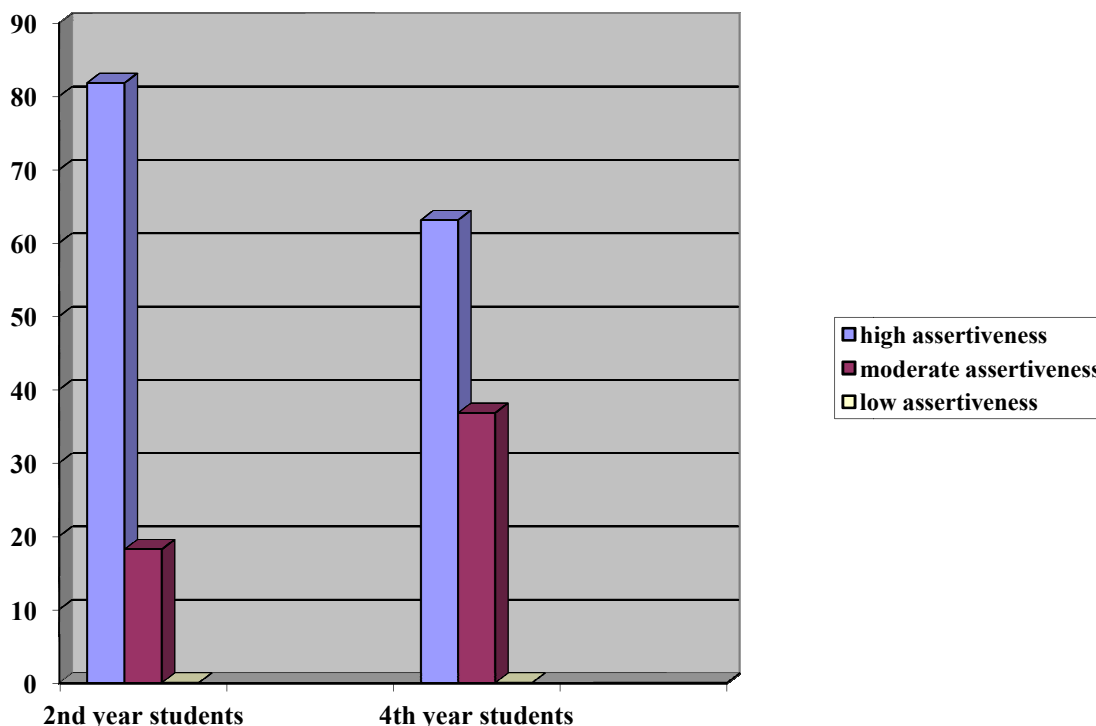


Figure (1) displays comparison between second and fourth year nursing students regarding Levels of assertiveness. The highest percentages of students in both groups have high level of assertiveness. The level of assertiveness is higher among second year students than fourth year students. However, no student from both groups has reported low assertiveness level.

Table (2) Comparison Between second Year Students And fourth Year Nursing Students Regarding Mean Scores of Assertiveness Domains.

Assertiveness Domains	Second Year Nursing Students (n=176)	Fourth Year Nursing Students (n=141)	t-test	P-value
	Mean ± SD	Mean ± SD		
1. Verbal and non verbal style	45.1 ± 10.2	41.7± 8.2	3.1	0.002*
2. Control of anxiety and fear	11.3 ± 2.7	10.4±2.8	2.8	0.005*
3. Active orientation	23.4 ± 6.5	21.6±4.3	2.9	0.004*
4. Work habits	32.2 ± 7.1	32.4±5.2	-.2	0.8
5. Relating to co- workers	20.4 ± 3.9	18.6±3.8	3.8	.000**
6. Negotiating the system	16.8 ± 4.9	17.4±3.3	-1.1	0.2
Total assertiveness scores	148.4±25.8	142 ± 21.4	2.3	.02*

(*) Statistically significant

Table (2) shows comparison between second year students and fourth year nursing students regarding mean scores of assertiveness domains. There were statistical significant differences between second year students and fourth year nursing students in the total assertiveness scores and in all domains of assertiveness except in work habits and negotiating the system domains. Also, second year students have higher mean scores of assertiveness than fourth year students in the total assertiveness scores and in all domains except work habits and negotiating the system domains.

Figure (2) Comparison between second year and fourth Year Nursing Students Regarding Levels of Stress.

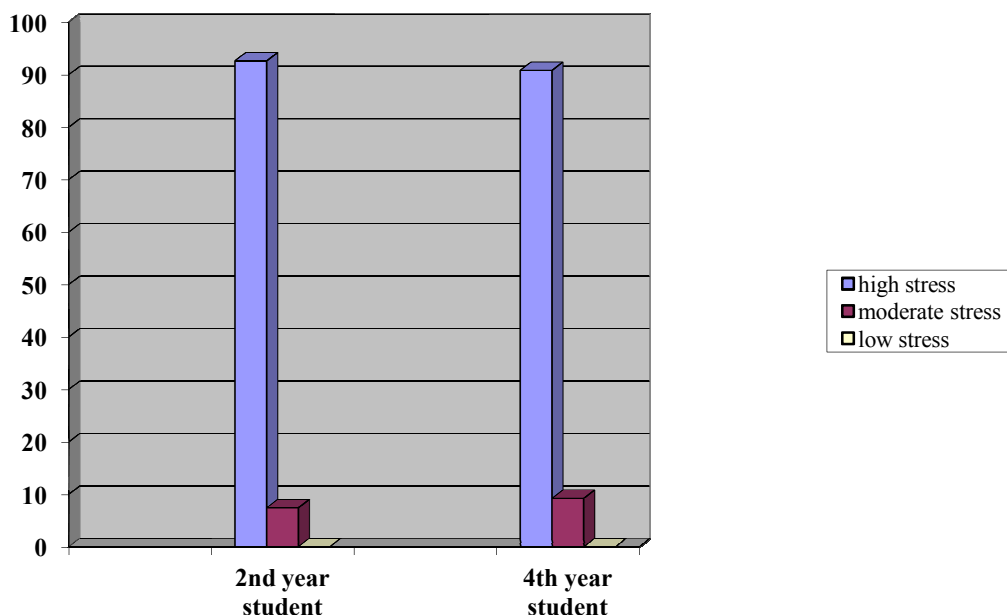


Figure (2) shows comparison between second year and fourth year nursing students regarding levels of stress. Majority of students in both groups have high level of stress. The level of stress is higher among second year nursing students than fourth year nursing students.

Table (3) Comparison Between second Year and fourth Year Nursing Students Regarding Mean Scores of Stress Domains.

Domains of stress	second year nursing Students (n=176)	fourth year nursing students (n=141)	t-TEST	P-VALUE
	Mean ± SD	Mean ± SD		
Academic load	27.3±3.6	26.5±3	1.9	.05
Personal problems	22.1±6.9	18.9±6.5	4.1	.000*
Interface worries	34.2±8.6	33.3±9.1	.9	.3
Total stress score	83.6±15.5	78.8±14.9	2.8	.006

(*) Statistically significant

Table (3) presents comparison between second year and fourth year nursing students regarding mean scores of stress domains. There were no statistical significant differences between second year and fourth year nursing students regarding mean scores of stress domains in the total score of stress and in all domains of stress except in personal problem domain. second year students have higher mean scores of stress in all domains and in the total stress score than fourth level students.

Table (4) Correlation Between Total Stress Score , Total Assertiveness Score, Age, Score Of Last Semester.

		Grades Of The Students In Previous Year	Total Assertiveness Scores	Total Stress Scores	Student Age In Years
Grades Of The Students In Previous Year	r	1	.073	.097	-.137*
	p		.205	.087	.015
Total Assertiveness Scores	r	.073	1	.613**	-.131*
	p	.205		.000	.022
Total Stress Scores	r	.097	.613**	1	-.137*
	p	.087	.000		.014
Student Age In Year	r	-.137*	-.131*	-.137*	1
	p	.015	.022	.014	

*. Correlation is significant at the 0.05 level (2-tailed).

** . Correlation is significant at the 0.01 level (2-tailed).

Table (4) shows correlation between total stress score, total assertiveness score, age, score of last semester. There were statistical significant positive correlation between stress and assertiveness. There were non

significant positive correlation between grades of students in the previous year, stress, and assertiveness. However, there were statistical significant negative correlation between age, stress and assertiveness.

4. Discussion

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 interact in a manner that considers and respects the rights and opinions of others while also standing up for your own rights, needs and personal boundaries. It can strengthen your relationships, reducing stress from conflict and providing you with social support when facing difficult times (**Pipas and Jaradat, 2010**).

Stress is a normal part of life. In small quantities, stress is good; it can motivate you and help you become more productive. However, too much stress, or a strong response to stress can be harmful (**Klinic Community Health Centre, 2010**).

Concerning assertiveness, the findings of the present study demonstrated that second year nursing students have higher mean assertiveness scores than fourth year nursing students. This result is contradicted with (**Begley & Glacken, 2004**) who found that Irish nursing students changing levels of assertiveness during their pre-registration program that students' reported assertiveness levels rose as they approached completion of their three-year education program. Moreover, regarding the level of assertiveness, both groups have high level of assertiveness. This result is in the same line with (**Mabrouk, 2009**) who found on her study of the effect of assertiveness and conflict resolution skills utilized on nursing care productivity in different health care sectors at Menofyia Governorate, Egypt, that the majority of nurses on the study sample was ranged from moderately to highly assertive. More support to this result can be gained from (**Kilkus, 2008**) who has added that the majority of nurses in his study were assertive.

Concerning the correlation between age and assertiveness the results of this study shows statistical significant negative correlation between age of students and assertiveness. This result is in the same line with **Kilkus (2008)** who have concluded that, the oldest group of nurses (60–76 years) was significantly less assertive than any of the younger groups of nurses

Regarding stress level, the results of the present study revealed that there were no statistical significant difference between second year nursing students and fourth year nursing students regarding level of stress. Second year students have higher mean scores of stress than fourth year nursing students. This result is congruent with **Gomaa (2003)** who found that high level of stress among second year nursing students at Suez Canal University, Egypt. An explanation for this result can be that, these students attending college often involves stress derived from establishing new social relationships, and adjusting to the academic demands of class work. Another explanation of this result could be that second nursing students are not familiar with college staff, subjects, policies and rules of the college. Also, students may be worried about their roles, duties, and responsibilities. However, this result is contradicted with **Frassrand (2005)** who found nursing students had a pattern of increasing stress levels as they progressed in the nursing program.

Conclusion:

The results of this study revealed that both assertiveness and stress levels were higher among second year than fourth students. Statistical significant positive correlation was found between assertiveness and stress levels.

Recommendations:

The study recommended:

1. Introduction of specific courses aiming to enhance the acquisition of assertiveness skills.
2. Nurse educators must motivate their students to express their opinions and personal rights. They must enhance students' autonomy.
3. Conducting workshops about stress management and coping strategies to nursing students.
4. The nurse educators should be a role model for her students in managing work stress and being assertive.
5. The nurse educator should help students in facing and managing stress through role playing.
6. Future research is needed for a large sample of students from different Nursing College helping in generalize the finding.

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