



A QUASI EXPERIMENTAL STUDY TO ASSESS THE EFFECTIVENESS OF ASSERTIVENESS PROGRAM ON SELF ESTEEM AND ASSERTIVE BEHAVIOUR OF HOUSEWIVES OF RURAL COMMUNITY OF DISTRICT GAUTAM BUDDAH NAGAR, DANKAUR, GREATER NOIDA.

**SUBMITTED TOWARDS PARTIAL FULFILLMENT OF
BACHELOR OF SCIENCE, NURSING**

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ABSTRACT

For life pleasure and happiness Self-esteem is most powerful predictor. After reading this research document you will understand how effective a nurse-led assertiveness training is at enhancing self-esteem and assertiveness among housewives in a rural community in Greater Noida. In order to recruit 40 housewives in each experimental and control group, purposive sampling was used.

The standardized Rosenberg self-esteem measure [r=0.94] and the Rathus assertiveness scale [r=732] were used to collect data, as well as socio-demographic information. A post-test of 15 days is

recommended after 5 days of assertiveness training.

BACKGROUND:

In contrast to other age groups, the health of housewives has been an increasingly important concern for governments, charities, and behavioural academics. In the last few decades, the mortality and morbidity rates for those aged 23 to 25 have risen. Because today's housewives will be tomorrow's leaders, their behaviour should be moulded.

Self-esteem is the most significant predictor of happiness and life satisfaction, however up to half of adolescents are considered to have low self-esteem, and research has shown that housewives' self-esteem drops between the ages of 23 and 25. Housewives may benefit from assertive training, which is a systematic technique and psychological intervention that aims to increase assertive self-expression.

AIM:

Our study is on housewives in rural community which Aim to tell the effectiveness of assertiveness training on assertive behavior and self-esteem.

METHODS:

Based on Nola Pander's Health Promotion Model, the investigator created a conceptual framework. This study has a vast and quantitative approach and a quasi-experimental design has been taken. The study took place in the rural community of Dankaur, Greater Noida. Purposive sampling was utilized to collect 40 housewives in each of the experimental and control groups. Data was gathered utilizing socio-demographic characteristics as well as the standardized Rosenberg self-esteem measure ($r=0.94$) and the Rathus assertiveness scale ($r=0.732$). Five days of assertiveness training were given, followed by a 15-day posttest-1. The same intervention was then given to the control group on the waiting list. After two months of intervention, the experimental group was given a posttest-2.

RESULTS:

The self-esteem score of (control group's) mean post-test 1 was 13.76 [SD 2.275], While our self-esteem score of (experimental group's) was 20.75 [SD 3.526]. The average difference was 7.235. [15.724] for mean post-test assertive behaviour (control group). As per the both result the mean difference is 25.70. It can be clearly seen assertive behaviour and self-esteem both have increased.

CONCLUSION:

From above findings it is concluded that the assertiveness training is effective in building the level of self-esteem as well as improving the assertive behavior among housewives and the findings also reveal that the self-esteem and assertive behavior achieved by the housewives through training programme exists as it is with little improvement while time progress.

KEYWORDS:

Self-esteem, rural self-esteem, assertiveness training, behavior, assertive behavior.

CHAPTER - I

INTRODUCTION

SELF ESTEEM AND ASSERTIVENESS



Assertive behaviour is expressed in many behaviour that positively reflect the personality of assertive people, housewives lack assertiveness skills in daily life, do not express their thoughts and feelings, and does not claim his rights.

The housewife must not be helpless in the face of conflicts she encounters within and outside the family, but must intervene to resolve them, because if she neglects or does not face it, it can open expand and grow and can reverse accumulation in the family and prevent the family from achieving its goals or the cooperation of its members to achieve them.

Housewives, who can effectively resolve conflicts inside and outside the family can make family members very cooperative and motivate them to do their best work.

Braden N (1969) succinctly defined self-esteem as the experience of being competent enough to meet of life's basic challenges and to be well-deserved. Harter (1990) defined self-esteem as the degree to which a person likes, accepts and respects himself as a whole as a person.

(Rosenberg, 1985) correlated low self-esteem with life satisfaction low living, loneliness, anxiety, resentment, irritability and depression.

As per Alberti, An assertive behaviour is a behaviour which allows to a person to act in their personal interest and defence, without any anxiety. There are four behavioural response patterns; indecisive, assertive, aggressive, and passive-aggressive. Assertiveness is the ability to define his/her feelings without any aggressiveness and without violating other person rights. Indecisive people try their best to avoid rejection by being too nice to win friends, but in the end, they lose faith in themselves.

Assertiveness isn't about showing people that they can scream or scare them, it's somewhere between aggressive and passive. Assertive is the act of asking for what they want confidently, without harming anyone but at the same time preserving their rights. Assertiveness ranges from aggressive to indecisive.

Aggression includes love, feelings, curious thoughts, while assertiveness tries to find solutions. Indecisive behaviour is indirect and passive. In indecisive behaviour a person disrespect someone for self need.

Assertiveness Training (AT) was introduced by Andrew Salter (1961) and was popularized by Joseph Wolpe.

This is an area of research with a long history in the field of behavioural therapy. Salter (1949) and Wolpe (1958) pioneered this field. They recognize that some individuals in society have particular problems asserting their rights and expressing themselves appropriately. To help these people function more effectively in their daily lives, assertiveness skills have been introduced in therapies. assertiveness training is an effective, drug-free and effective method to reduce study anxiety and can also improve academic performance and boost self-confidence. To assert means to assert something strongly and precisely. The goals of our assertiveness practice are 4044 mentioned below

- Help by developing rules and guidelines for aggressive manner.
- Developing teens and aware about their and other emotions and behaviour. They must know how to deal with a person.
- Develop your ability to convey your message effectively while understanding other people's feelings.

JUSTIFICATION

In Indian culture today the stereotypes about the gender has changed. It is because of women's movement and men's movement. Especially for women, the role of women as housewives and mothers was considered harmful, limiting self-esteem.

The Women's Movement takes pride in being a housewife by joining the workforce for women to perform their individual duties, joining the ranks of working women, or putting pressure on them to resist change. I am. Explain and emphasize that the home is the ultimate personal opportunity for growth. Therefore, adult women, especially young and educated middle-class housewives, face the challenge of justifying their husbands and others in their role choices.

For women who choose to enter the workforce in search of self-fulfillment, the women's movement promotes the development of certain personality traits needed to survive in a male-dominated market. One of these qualities is the ability to express self-assertion, rights and emotions. To help women become more confident, a behavioral process called assertiveness coaching has been developed. This training is specifically aimed at helping men and women develop proper expressions of rights and emotions and reduce their fear of interpersonal relationships. Not only do some theorists see assertiveness training as a way to help women practice interpersonal skills, but they can also improve. (Osborne and Harris, 1975). If these theorists that assertiveness training can improve self-esteem are correct, it will be a technique to help women embark on a path of self-development. In present there were few studies which support assertiveness practice and self-esteem which was claim by Osborn and Harris. But others disagree (Williams, 1976; Pachmanetal).

PROBLEM STATEMENT

The main purpose of the research is to evaluate nature of the relationship inbetween two individual, and to evaluate Level of Self-esteem and assertiveness. This research stury was done on mothers/womens or housewife of Dankaur village.

Definition of Terms

Traditional Wife A traditional wife (short for traditional wife) is a neologism that refers to a woman who prefers to play a traditional or ultra-traditional role in a marriage, including the belief that a woman's position Women in the family are at home and that wives should be the same. under the protection of a husband.

Assertiveness is nothing just social boldness.

METHODOLOGICAL ASSUMPTIONS

1. Measured by a self-response instrument.
2. Measured by a self-response instrument.

3. Respondent must answer positively as they apply to her.

THEORETICAL FRAMEWORK

The hypotheses of this study are based on the conceptual framework of symbolic interaction. This makes several assumptions about women and behavior. First, human social active life is different from that of animals. Second, they argue that people live in a symbolic world of meanings and that they react to objects and events in the world according to the meanings they have assigned to them. Third, they argue that environmental understanding depends on language and that understanding the environment cannot take place until some kind of language has developed. Fourth, it is believed that people define situation as symbols. For the symbolic interactionist, the ego arises when the child collects and internalizes the evaluations they receive from important people in their environment, especially those of their father. mom.

As a person ages, the process of self-rating based on what they perceive to be the judgments of significant others in the social group to which they belong continues, and despite the resistance to change, but self-concept is constantly changing based on new perceptions.

He divided the "me" into the physical "me", the social "me", and the spiritual "me". James considers matter to be "me" including his physical body, clothes and all other material possessions. He views the mental 'me' as a higher level of the object self, perhaps a conscious inner self that remains when all other aspects of the object self are taken as possessions. Outside. Pretty much unanimous opinion classifies the different identities a man can be "appropriated and possessed", and the different consequential orders of his self-esteem, he said. hierarchical ladder, with different physical, mental, physical, and social bases. yourself in the middle.

The assumptions of this study are based on the conceptual framework of symbolic interaction. Second, they argue that people live in a symbolic world of meanings and that they react to objects and events in the world according to the meanings they have assigned to them. Third, they argue that environmental understanding depends on language and that understanding the environment cannot take place until some kind of language has developed. For the symbolic interactor, the ego arises when the child collects and internalizes the evaluations they receive from important people in their environment, especially that of their father. mom.

As a person ages, the process of self-rating based on what they perceive to be the judgments of significant others in the social group to which they belong continues, and despite the resistance to change, but self-concept is constantly changing based on new perceptions.

Therefore, when investigating a person's self-esteem, it is important to find out how that person sees the world from their unique perspective of what attitudes are valued and whose judgments are valuable. meaningful. Rosenberg says: "•• ~ all other important people ~ are equally important, and the more

important have a greater influence over us (Rosenberg, 1979, p. 83). with high self-esteem maintain a conceptual buffer they use to evaluate and filter these negative reviews from others He argues that a person with low self-esteem does not have this buffering concept and thus That's prone to negative reviews from almost everyone else. any attribute.

Four general principal as per Rosenberg are mentioned below.

- (1) reflect the self-esteem assessment. self-esteem. others,
- (2) comparative society,
- (3) selfish center and
- (4) psychological center.

Reflective judgments about others, or how a person perceives others when evaluating them for an attribute or person, affects self-esteem whether the attribute is valid or not, and judgments that is considered important.

Social comparison, or how we judge ourselves or groups with others, affects a person's self-esteem.

Self-esteem, or its appreciation

RATIONALE AND HYPOTHESES

Two things, then, make the Traditional women of Dankaur interesting subjects to study:

- (1) The culture where these women lives believe in woens traditional roles.
- (2) They espouse a value system in which a higher judge, Based upon the possibility that for the Traditional women self-esteem would be less positively correlated with assertiveness due to their beliefs and advocacy of the traditional woman`s sexrole, the following hypotheses were proposed:

(1) It doesn't mean Mormon women would be significantly lower than the mean scores for the sample of non-Mormon women as measured by the Rathus

Assertiveness Schedule;

(2)) It doesn't mean scores for the sample of Traditional women would not be significantly different from the mean scores for the sample of non-Mormon women as measured by the Rosenberg Self Esteem Scale; and

(3) That the correlation between assertiveness and self-esteem would be significantly higher for the non-traditional women sample than for the traditional sample. For statistical purposes,

1. **Hypothesis1:** There is no significant difference between the mean scores for the sample of Schedule (expected result would be higher for the non-Mormon sample)

2. **Hypothesis 2:** The mean Rosenberg self-esteem scale is not significantly different between the traditional female sample and the non-traditional female sample (the expected result is to accept the null hypothesis).

STATEMENT OF THE PROBLEM

A study to Assess effectiveness of Nurse led Assertiveness Program on self-esteem and Assertive behaviour of housewives of Rural community of Dankaur, Gautam Buddha Nagar, Greater Noida

OPERATIONAL DEFINITION

Self-esteem: Refers to a general assessment or an assessment of one's worth, as measured by the Rosenberg Self-esteem Scale.

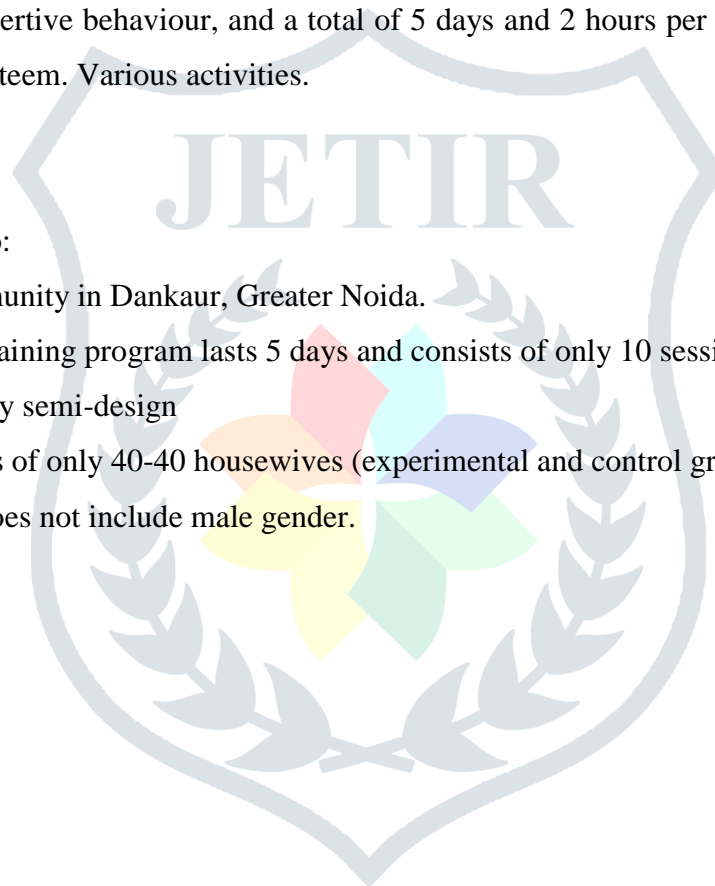
Refers to the action to be taken. Of the others, it can be measured using the Rathus enforcement scheme.

Assertive Training: This is a training module systematically planned and developed for housewives aimed at promoting assertive behaviour, and a total of 5 days and 2 hours per day plan. It refers to the strengthening of self-esteem. Various activities.

DELIMITATIONS

The survey is limited to:

- a) Selected rural community in Dankaur, Greater Noida.
- b) The self-assertion training program lasts 5 days and consists of only 10 sessions in total.
- c) Studies performed by semi-design
- d) Sample size consists of only 40-40 housewives (experimental and control group)
- e) The study sample does not include male gender.



CHAPTER – II

REVIEW OF LITERATURE



REVIEW OF LITERATURE

This section covers the planning of our literature review. The literature was reviewed which is related to

1. self-esteem.
2. assertive behaviour.
3. Effectiveness of assertiveness

1. REVIEW OF LITERATURE RELATED TO SELF-ESTEEM

Jennifer AO (2013) In Sydney, Australia, researchers conducted a longitudinal study on adolescent females' self-concept, self-esteem, and body weight. Over the course of three years, 80 girls aged 12.8 completed self-concept, depression, and anxiety scales, as well as having their height and weight measured. A substantial weight can have a negative impact on several areas of a young housewife's self-image.

Helseth S, Misvaer N (2010) did a qualitative study to learn more about and characterise how adolescents view their own quality of life. In-depth interviews with 31 healthy adolescents (14-15 years) in the school health service were utilised as the technique of investigation. According to the findings, quality of life is defined by feeling good, being satisfied with oneself, and having a generally optimistic attitude. As a result, when these elements are negative, the quality of life of adolescents is jeopardised. Understanding teenagers' perspectives on quality of life emphasises the importance of their peer relationships in promoting and maintaining their quality of life, according to the researcher.

Nagar S, Sharma S, Chopra G (2007) conducted a qualitative study to learn more about and characterise how adolescents view their own quality of life. At-depth interviews with 31 healthy adolescents (14-15 years) in the school health service were utilised as the approach. According to the findings, quality of life is defined by feeling good, being satisfied with oneself, and having a generally optimistic attitude. As a result, when these characteristics are negative, teenage quality of life is jeopardised. Understanding teenagers' perspectives on quality of life emphasises the importance of their peer relationships in promoting and maintaining their quality of life, according to the researcher.

Eskinn (2007) did a study to see if sadness, self-esteem, and assertiveness play a role in adolescent suicidal behaviour in youth in Turkey's southwest. In the previous 12 months or over their lifetime, 23% of participants said they had considered suicide. A total of 2.5 percent of students admitted to attempting suicide. Suicidal thoughts was more common in girls than in boys during the course of their lives or in the previous 12 months, but suicidal attempts were equally common in both. Girls outperformed boys on despair, the Suicide Probability Scale (SPS), assertiveness, and perceived social support.

Lovegrove E, Rumsey N (2005) conducted a study to look into the levels of appearance-related anxiety in a typical adolescent group. The changing faces psychosocial strategies for dealing with appearance-related abusive behaviour were further developed using action research methodology to help adolescents develop a questionnaire that elicited peer views on appearance (Part 1) and to further develop the changing faces psychosocial strategies for dealing with appearance-related bullying (Part 2). The project's third component was an intervention that included information about the significance of appearance in human interactions. The findings revealed that 75% of the 11–13-year-olds polled said that mocking or bullying regarding their appearance caused them significant discomfort. At six months after the intervention, perceived levels of bullying had dropped by about two-thirds, and global self-esteem, confidence in dealing with teasing and bullying, and confidence in dealing with deformity issues had all improved significantly

2. REVIEW OF LITERATURE RELATED TO ASSERTIVE BEHAVIOUR

Sarkova (2013)) done a study which explore about behaviour and self-esteem. The sample consisted of few 2 factors of Rosenberg self-esteem (+ve and -ve self-esteem) were used. Data were analysed using hierarchical linear regression.

Arlsan E, Akca NK, Baser M (2013) led a clear report on degree of confidence and companion strain of nursing understudies (n=154) in Bozok University in Yozgat, Turkey. Rathus decisiveness stock (RAI) and peer pressure scale (PPS) and a socio-segment survey were utilized. The aftereffect of the review was seen that 69.5% of the understudies was confident and mean scores for confidence of the male understudies (19.4 ± 17.9) were higher than that of the female understudies (29.0 ± 14.1). In any case, mean scores for peer strain of male understudies (56.6 ± 12.4) were higher than that of female understudies (44.0 ± 8.8). it was reasoned that male understudies were more emphatic than female understudies and male understudies experienced peer pressure more than female understudies.

Dr. Mohamedunni AM, Noushad PP (2010) With 590 samples, a descriptive study was undertaken to examine the level of assertiveness among secondary school students in Kerala, India. The sample was generated using a stratified sampling procedure that took into account factors such as gender and the school's management style. Pupils who struggle with communication and self-expression are 55 percent less likely to assert their rights than other students.

Aghajani M, Larijani TT, Baheiraei A, Neiestanak NS (2010) conducted a cross-sectional study to examine the level of assertiveness, self-confidence, and anxiety in adolescents' academic performance. According to the findings, 59.5 percent of pupils were moderately assertive and 34% were self-confident. In addition, 36.4 percent of them were anxious. Given the link between assertiveness and anxiety, low confidence, and its effects on mental health, educational, and occupational performance, students should be taught the necessary skills for positive interpersonal interactions.

Kenkyu S (2009) conducted research on the link between four aspects of assertiveness (open expression, emotion management, consideration for others, and self-direction) and mental health. The examination of 13 high school students' interviews in Study 1 revealed that several components had no beneficial link with mental health. In Study 2, 176 high school students discovered that a high score on the "concern for others" scale was linked to mental illness. This component most likely has a maximum level that is required to preserve mental wellness.

Deltsidous A (2009) conducted a study to determine the level of assertiveness among Greek undergraduate nursing students. The study participants were nursing students from various seasons at one university in Central Greece (n=298) who volunteered to fill out a questionnaire on "assertiveness level assessment." ANOVA was used to compare mean assertiveness scores between semesters, and Pearson's chi square was used to compare responses from first semester students to replies from advanced semester students. The study's key conclusion was that students' assertiveness levels improve modestly in advanced semesters compared to first-semester assertiveness levels.

Menderes A, Ames DR (2008) did a study to explain varied levels of assertiveness in interpersonal conflict and negotiations with assertiveness expectancies, distinctive predictions people make about the social and instrumental implications of assertive behaviour. The findings explain the shape of assertiveness expectations, namely that most people believe that growing assertiveness can generate favourable social and instrumental gains up to a point, after which the benefits diminish. Individual differences in expectancies have been linked to assertiveness in four studies, including self-reported assertiveness, rated behavioural preferences in various interpersonal conflict scenarios, partner ratings of participants' behaviour in a face-to-face dyadic negotiation, and work colleague ratings of participants' assertiveness in the workplace.

Chang SB, Lee SK, Kim YR (2003) did a quasi-experimental study to establish a relevant sexual assertiveness training curriculum for high school females. 174 high school females took part in the study. Two questionnaires were used: one with 23 questions about self efficacy and the other with 22 questions about sexual aggressiveness. The data was analysed using the SPSS 10.0 programme. Groups 1 and 2 underwent a 3-hour and a 6-hour programme on sexual assertiveness, respectively. There was no significant rise in self efficacy levels in experimental group 1 compared to the control group, however there was a significant increase in sexual assertiveness values in experimental group 1 compared to the control group. According to the researcher, a 3-hour programme was just as successful as a 6-hour one for sexual assertiveness.

Hughes JN, Rawles R (2006) A quasi-experimental study was carried out in order to evaluate the impact of assertive communication in interpersonal relationships and social behaviours. The sample consisted of 44 nursing students from Korea. As a result, the study indicated that assertive communication increases communication content while minimizing interpersonal conflicts.

Deluty RH (2004) conducted a study to evaluate used behaviour observations in naturalistic situations to assess a self-report measure of aggressiveness, assertiveness, and submissiveness. 45 third- through fifth-grade students were watched in a range of school activities over an 8-month period. According to the survey, boys are more assertive (78.28 percent) than girls.

3. REVIEW OF TO EFFECTIVENESS OF ASSERTIVENESS TRAINING PROGRAMME

Kaur S (2014) A quasi-experimental study was done to evaluate the effects of assertiveness training on self-concept. The sample size was 150 housewives drawn from various schools in the Jalandhar district using a suitable sampling technique. The intervention was a 6-session programme with 45-minute sessions. According to the findings, assertiveness training was successful in increasing self-concept among housewives.

Makinde BO & Akinteye AJ (2013) did a study to explore the impact of Mentoring and Assertiveness Training on the self-esteem of adolescents in Lagos State secondary schools. The final sample consisted of 96 adolescents (48 males and 48 females) recruited at random from three public schools in three Education Districts in Lagos State. This study's dependent variables were self-esteem and gender. The Adolescents' Personal Data Questionnaire (APDQ) and the Rosenberg Self-Esteem Scale were two instruments utilised to collect data for the study (RSE). To guide the investigation, two research questions were posed and two related hypotheses were developed. At 0.05 levels of significance, the two hypotheses were tested using one-way Analysis of covariance (ANCOVA).

Bahman A, Jamshid M, Soraya S (2012) completed a look at in Islamic Azad University, Iran, to sorting out viability of confidence training on developing vanity and general self adequacy women's understudies. Concentrate on approach become test organizations and oversee association with Pretest and posttest. forty people had been settled on that they've decline rankings on confidence and self viability and had been done in organizations of 20 people in training programs, emphaticness schooling in ninety mins to eight classes of association rehearses. The discoveries of the look at found that emphaticness schooling become strong in developing self-viability and self-esteem. Agbakwuru C, Stella U (2012) did an inspect to assess the effect of decisiveness training among early juvenile. The elements of this look at become to break down the effect of self-assured training on early juvenile 'improvement of resilience. The schooling Consist of 10 discussion of fifty mins. Pre-investigate post-investigate test and oversee association design become utilized with a couple of explanation moreover made. Randomization challenge become used to draw in the 14, eight male and six young lady undergrads to trial and 10 understudies oversee organizations. An investigate retest become employed at c program language period of weeks to check for dependability coefficient of the instrument; spearman's item second relationship approach become used to check the final product. The corresponded coefficient of early juvenile's resilience scale = 0.84. The emphaticness instruction affirmed more prominent advancement on resilience of the women than that of the kid final product shows that each the male and young lady become impacted in basically the same manner through the decisiveness training. There had been exceptional rankings from the exploratory association and for that we trademark to the reality of self-assured instruction on them.

Tannous, Adel G, Alkhaldeh, Mohammad K (2011) did a study to see how assertiveness training affected bullying victims' self-esteem and adjustment. The sample size was 24, and the

participants were from Amman Second Educational District's Ail Reda Rekabi school, who volunteered to participate in the study and had the highest score on the bullying victimisation scale. Before and after the training programme, the participants in the two groups completed an adjustment scale and a self-esteem scale. The results demonstrated significant differences in self-esteem and adjustment level in favour of the experimental group.

Solaf A, Hamoud, Samia A, Ei D, Iaila H, Ossman (2011) led a review to decide the impact of an emphaticness preparing program on confidence and decisiveness abilities of understudies at the Faculty of Nursing, Alexandria University. The examples made out of "80" nursing understudies, they were partitioned haphazardly to "40" understudies for concentrate on gathering and "40" for control bunch. The information were gathering by utilizing confidence scale and confidence scale. A negative genuinely critical relationship was demonstrated between confidence abilities and confidence, that is as understudies' decisiveness abilities score increments (turns out to be better), understudies' confidence score diminishes (turns out to be better). Likewise, a measurable massive distinction was viewed as between both of emphaticness abilities and confidence mean scores of study and control bunches quickly post and one month after program. The review inferred that confident way of behaving and confidence can be learned and that understudies learned at staff of nursing can essentially profit from a decisiveness preparing project to build their emphaticness abilities and confidence.

Jeludar S, Ahmadi G, Shayan T, Shabani N (2011) undertook a study to see if assertiveness training could help students with depression. This study used a quasi-experimental technique with pre- and post-tests, and the Depression Inventory was used as the tool, with data analysed using SPSS software. The study's findings suggest that assertiveness training is beneficial in lowering depression, and that an increase in assertiveness leads to a decrease in depression.

Makhija M, Promila S (2010) Using a pre-post control group approach, researchers investigated the impact of an assertiveness training programme on adolescent self-esteem and academic accomplishment. Participants were 80 boys and 80 girls from classes 10th and 11th in schools in the Rajnandgaon town region of Chhattisgarh. Data was collected using the "Self-esteem Inventory," and academic success pre-test score results from the students' last two annual examinations were requested. A total of eight two-hour sessions were held. ANCOVA was used to analyse the study's findings. The findings demonstrate that assertiveness training is superior in improving individuals' self-esteem, but no possible benefits on adolescents' academic achievement have been discovered.

Kashani PA, Bayat M (2010) did a quasi-experimental study on the effects of assertiveness training on female students' assertiveness and self-esteem. The student's self-expression was measured using Gambrel and Rich's inventory, while self-esteem was measured using Coppersmith's inventory. SPSS software was used to examine the data.

Prabhu M (2010) did a study to see if an assertiveness training programme may improve assertiveness in physically challenged teenagers in special schools. Rosenstock's health belief model

served as the conceptual basis for this study. A self-structured questionnaire was administered to 40 physically challenged adolescents who were chosen using a convenient sample technique. The intervention took place over two sessions. The results demonstrate that after the assertiveness training programme, samples' assertiveness improved.

Rezan A, Ero C, Zengel M (2009) did a quasi-experimental study to see if an assertiveness training programme could improve teenagers' assertiveness. The ANCOVA analysis results have shown that assertiveness training programme was effective on adolescents' assertiveness level.

Paezy M, Shahraray M, Beheshteh (2009) They found an increase in assertiveness level in the post-test of an investigation into the impact of assertiveness training on assertiveness, subjective well-being, and academic accomplishment of Iranian female secondary students.

Lin YR, Wu MH, Yang CI, Chen TH, Hsu CC, Chang YC et.al (2008) undertook a study to see if an assertiveness training programme could improve the assertiveness, self-esteem, and social anxiety of psychiatric patients. For four weeks, training was offered twice a week for two hours each. Assertiveness, self-esteem, and social anxiety inventories were used to collect data from both groups at the same time.

Kang MJ, Lee H (2004) A study was done to determine the effects of assertive training on communication-related parameters and the rate of employee turnover among hospital nurses. This study used a non-equivalent control group pretest-posttest design. The experimental and control groups, each with 39 nurses, were assigned to the nurses. and a 'Assertiveness Training Program,' which included five practise sessions based on ABCDE principles. ANCOVA was used to do the analysis. The assertiveness training was beneficial in increasing the nurses' assertiveness behaviours, but not in improving interpersonal interactions, reducing communication disputes, modifying the conflict management style, or lowering their personnel turnover rate, according to the study.

Sert GA (2003) Ankara University Development Foundation Primary School provided the study's samples. The study enlisted the participation of 24 students. The experimental design was utilised, in which two groups were compared on pre-test and post-test using the Assertive inventory and coppersmith self-esteem inventory observations. According to the findings, there was a substantial difference in assertiveness scores between the two groups, and assertive training was beneficial in increasing self-esteem among the youngsters.

CHAPTER – III

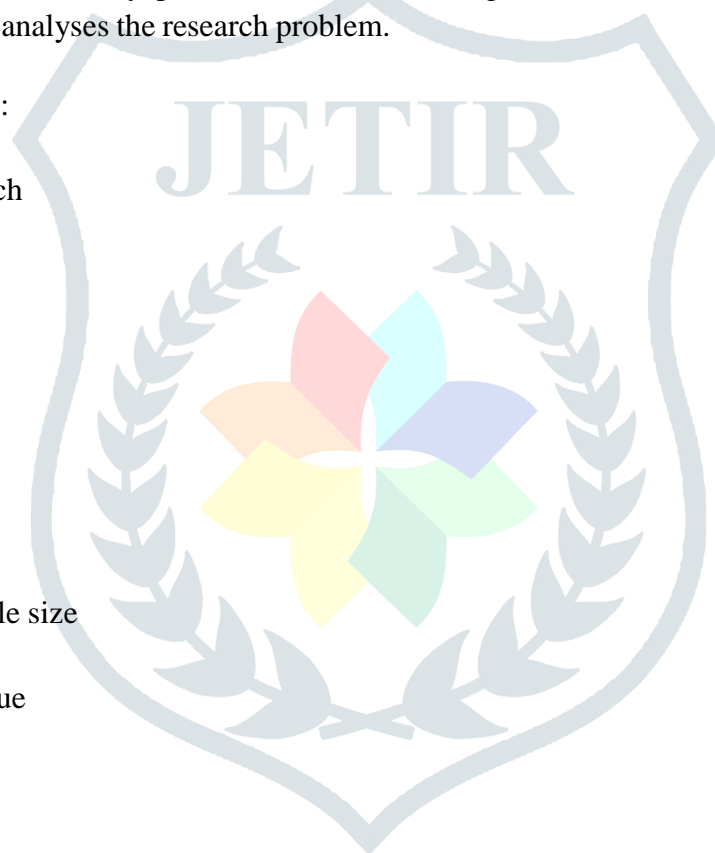
METHODOLOGY

RESEARCH METHODOLOGY

Methodology is a systematic way to solve the research problem undertaken. Methodology for the study is defined as the way pertinent information is gathered in order to answer the research questions to analyse the research problem.

This chapter includes:

- ❖ Research Approach
- ❖ Research Design
- ❖ Variables
- ❖ Research setting
- ❖ Population
- ❖ Sample and sample size
- ❖ Sampling technique
- ❖ Sampling criteria
- ❖ Description of tool
- ❖ Validity of tool and content
- ❖ Reliability of tool
- ❖ Ethical consideration
- ❖ Pilot study
- ❖ Procedure of collection
- ❖ Data analysis and Interpretation



RESEARCH APPROACH

The research approach is the basic procedure for collecting data in a particular research situation and tells the researcher as what data to collect and how to analyze. Research approach is an overall plan or blueprint chosen to carry out the study. Selection of an appropriate research approach that involves a general set of orderly, disciplined procedures to acquire information is of utmost importance in a research study.

RESEARCH DESIGN

The Research Design is a blue print for conducting a research study that specifies the methods and procedure for gathering and analysing the required data.

The researcher used a quasi-experimental design (nonequivalent control group pre test-posttest design) in this study, keeping the hypothesis and objectives in mind. In this design, experimental and control groups are selected without randomization, and dependent variables are observed in both experimental and control groups before the intervention. After that, the experimental group receives therapy, and both groups undergo post-test observation of dependent variables to determine the effect of treatment on the experimental group.

Research design on notation

Experimental Group	O₁	X	O₃	O₅
Wait-list Control Group	O₂	----	O₄	X

O₁: experimental group.

O₂: comparative group.

X: Administration of intervention (Assertiveness Training Module).

O₃: Post-test-1 on experimental group

O₄: Post-test on comparative group.

O₅: Post-test-2 on experimental group.

RESEARCH VARIABLES

According to **Polit F** In quantitative studies, concepts are usually referred to as variables which are the central building blocks of the study". The variables included in the study were:

- **Independent variables:** These variable influence the variable which are dependent.
- In the present study Assertiveness training is independent variable.
- **Dependent variables:** These varable caused by another variables.
- **Associated variables:** Pre-existing characteristics of the study participants, which the researcher simply observes or measures.

In this study, associated variables are age, religion, husband's educational status, mother's educational status, husband's occupation, mother's occupation, family income per month, place of domicile, type of family, and previous exposure to assertiveness training programme.

RESEARCH SETTING

According to Polit and Settings are the most specific places where data collection occurs based on nature of research questions and the type of information needed to address it.

The setting selected for the present study were rural community of Dankaur, Greater Noida

POPULATION

- **Target population:** It refers to the population under study and the population to which the researcher wants to generalize the research findings.
- **Accessible population:** It refers to the part of population that is available to the researcher.

The accessible population in the study were the housewives of rural community of Dankaur, Greater Noida

SAMPLE

A sample is the portion of the population that has been selected to represent the population of interest. Thus, it is a subset of population element.

The sample of the present study, were housewives of rural community of Dankaur, Greater Noida

SAMPLE SIZE

Sample size is exact number of elements involved in research. In our Research of 50 experimental and 50 control group total 100 samples. Power analysis was carried out to compute the sample size for the present study. The investigator calculated and finalized the sample size by doing power analysis in finite population.

SAMPLING TECHNIQUES

“Sampling is the process of selecting a portion of the population to represent the entire population”. Sampling is necessary because it is more economical and efficient to work with a small group.

We use Purposive Sampling Technique in our research.

SAMPLING CRITERIA

The researcher specifies the characteristics of the population under study by detailing inclusion and exclusion criteria in the study.

1) Inclusion criteria:

- Housewives in their 20's
- Housewives who are available at the setting during the time of study.
- The Housewives who can read, speak, and understand Hindi and English.

2) Exclusion criteria:

- Housewives who are not willing to participate.
- Housewives who are not completing the training programme.

DESCRIPTION OF THE TOOL

The tool used in the study were standardized tool to assess the self-esteem and assertive behavior.

The tool will be consisting of three sections:

- **Tool 1: Socio Demographic Variables**

This part of tool consists of 10 items pertaining to socio demographic profile of housewives such as age, religion, husband's educational status, husband's occupation, family income per month, place of domicile, type of family, previous exposure to assertiveness training programme.

- **Tool 2: Rosenberg's Self-esteem Scale**

It is a standardized tool for assessing the self-esteem. It contains 10 items of seeking to know the self-esteem in which 5 positive and 5 negative statements are distributed randomly. On a 4-point scale the item was measured. Each item has a maximum of score 3 and a minimum of score 0. Higher the score the greater will be the self-esteem.

Scoring Criteria: There are equal number of positive and negative items distributed randomly. The positive item is question number- **1,3,4,7,10** which scored as SA (strongly agree) =3, A (agree)=2, D (disagree)=1 and SD (strongly disagree) =0.

The negative item is question number- **2,5,6,8,9** which scored as SA (strongly agree) =0, A (agree)=1, D (disagree)=2 and SD (strongly disagree) =3.

Criterion Measure in the Scale is as follows: -

Table 1: - Self-esteem score in %

Level	Score	Percentage
Good	20-30	67-100%
Average	10-19	34% -66%
Below average	0-9	< 33%

- **Tool 3: Rathus assertiveness schedule**

It consists of 30 items to know the assertive behavior among housewives. The item was measured on a 6-point rating scale ranging from "Always" to "Never".

Maximum score is 3 and minimum is -3
90 to -90

Criterion measures used in the scale is as follows:

Table 2: - Score Level of Assertive Behaviors

Level of Assertive Behavior	Score
Very non-assertive	-90 to -21
Situationally non-assertive	- 20 to -1
Somewhat assertive	0 to +20
Assertive	+21 to +40
Probably aggressive	+41 to +90

VALIDITY OF THE TOOL AND CONTENT

Content validity: Items measuring the background factors and assertiveness training module was validated by experts from various fields, such as Nursing, psychiatry, psychology, psychiatric social work, and by assertiveness therapy trainer and senior secondary school principals. Content validity index- item and content validity index- scale was calculated based on response from experts. There was more than 70% of agreement regarding items and their suggestions were considered and modification of tool and module was done according to the opinion of experts.

Language validity: The language validity was obtained from concerned language experts from Hindi and English.

RELIABILITY OF THE TOOL

The reliability was computed for present setting by Split half (odd-even) method for both the tools by administering it to 8 housewives (4 experimental and 4 control) of selected school. Karl Pearson's correlation co-efficient formulawas used. The reliability quotient of the first ($r= 0.89$) tool is found highly reliable, and for the Rathus assertiveness schedule reliability quotient ($r=0.792$).Hence both tools were reliable.

ETHICAL CONSIDERATIONS

1. Written permission was taken from Dean school of nursing, Galgotias university.
2. Written permission was taken from ethical clearance committee of Dean school of nursing, Galgotias university.
3. Written permission was taken from concerned authorities chairman of Dankaur.
4. Written informed assent was taken from the housewives who participated in the studyand consent from their parents.
5. Confidentiality and anonymity of the samples had maintained throughout the study.

PILOT STUDY

Polit & Hungler (2004) According to the definition, a pilot study is a small-scale version or trial run that is intended to evaluate methodologies that will be utilized in a larger, more rigorous investigation. The goal of a pilot research is to avoid a costly disaster—that is, a large-scale study that is both expensive and flawed. These studies are also known as feasibility studies.

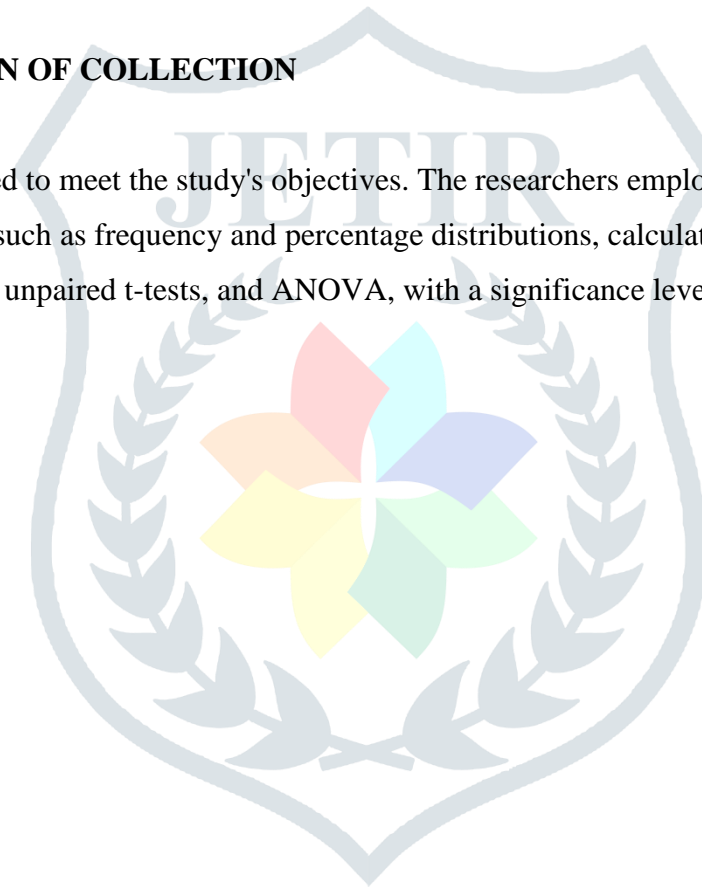
It was tested on 8 housewives to ensure that the instrument was reliable and that the study was feasible. Four people from the control group and four from the experimental group made up the sample. Each respondent spent an average of 25-30 minutes filling out the questionnaire. The study was found to be feasible in terms of sample availability and housewife cooperation.

PROCEDURE OF COLLECTION

The present study was conducted in rural community of Dankaur, Greater Noida data were collected for a period of 11 weeks. Permission for sample collection was taken. A total of 80 housewives (40 experimental and 40 control group) were recruited in the study based on sample selection criteria. Standardized tools were used to collect data pretest started on 27th february,2022. Before collecting any data we introduce everyone and tell what we are doing and the purpose. Written assent was taken from the housewives. The researcher administer interventionto the wait list control group on 1st April, 2022 then the researcher again went for a second post-test to the experimental group on 11 may 2022 for consolidating the effectiveness of assertiveness training program. Then the tool was edited for completion.

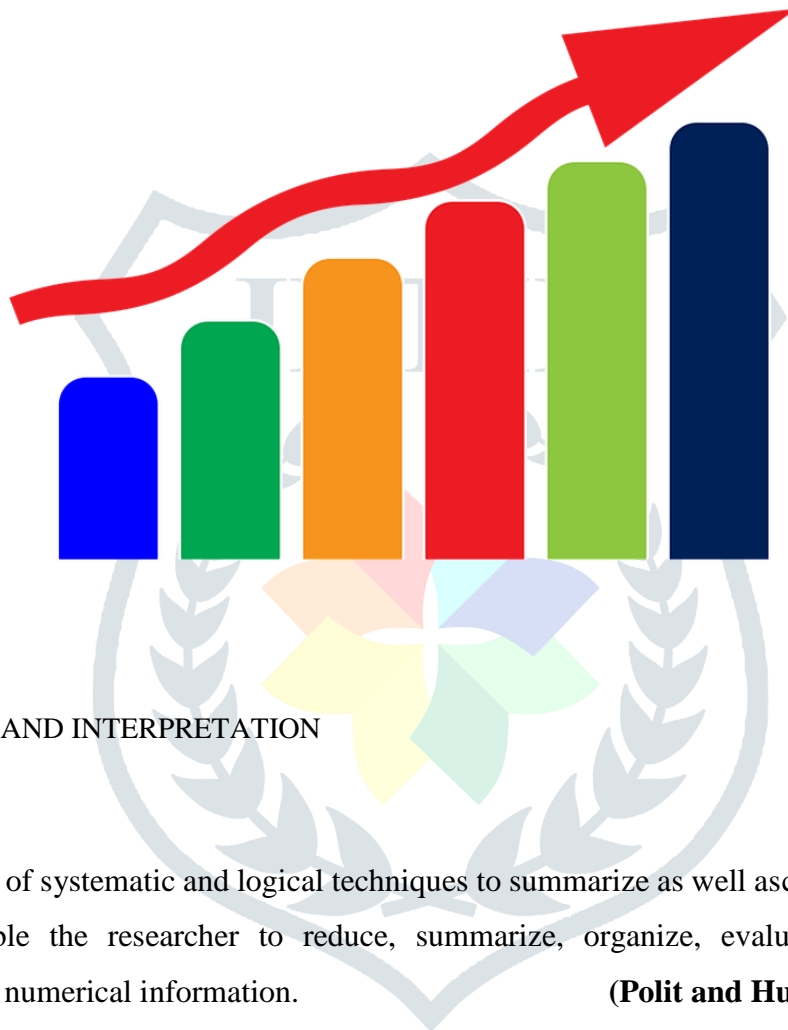
INTERPRETATION OF COLLECTION

The data was analyzed to meet the study's objectives. The researchers employed descriptive and inferential statistics, such as frequency and percentage distributions, calculating mean and standard deviation, paired and unpaired t-tests, and ANOVA, with a significance level of $p>0.05$.



CHAPTER – IV

ANALYSIS AND INTERPRETATION



DATA ANALYSIS AND INTERPRETATION

It is a process of systematic and logical techniques to summarize as well as compare data. Data analysis enable the researcher to reduce, summarize, organize, evaluate, interpret and communicate numerical information. **(Polit and Hungler, 1995)**

The self-esteem and assertive behavior of each housewives assessed by pretest with standardized tools before implementing assertiveness training module and post-test was assessed by same tool after 15 days of intervention and again one more post-test assessed after 2 months of intervention only in experimental group.

AIM

Aim of this study was to know self-esteem and assertive behaviour of housewife.

Analysis

Analysis and interpretation were done in accordance with the objectives laid down for the

study. The collected data were edited, tabulated, analyzed and the findings were presented in the form of tables and diagrams under the following sections:

Section I: Description of study participants.

Section II: Testing of hypotheses.



SECTION-I: DESCRIPTION OF STUDY PARTICIPANTS

Table: -3 Distribution

(N=80)

S. No	Sample Characteristics	Experimental group		Control group		Chi value
		n	%	n	%	
1.	Age (Years)					
	a) 20-25 years	5	12.5	15	37.5	8.004
	b) 25-30years	26	65	15	37.5	
	c) 30-35 years.	09	22.5	10	25	
2.	Religion					
	a) Hindu	39	97.5	39	97.5	.000
	b) Sikh	0	0	0	0	
	c) Muslim	1	2.5	1	2.5	
	d) Christian	0	0	0	0	
	e) Others.	0	0	0	0	
3.	Husband's Educational Status					
	a) Non- literate	7	17.5	9	22.5	5.309
	b) Primary Education	7	17.5	7	17.5	
	c) Secondary Education	14	35	20	50	
	d) Higher Secondary	12	30	4	10	
	e) Diploma	0	0	0	0	
	f) Graduate and above	0	0	0	0	
4.	Husband's Occupation	5	12.5	11	27.5	
	a) Unemployed	17	42.5	15	37.5	7.412
	b) Self Employed	13	32.5	14	35	
	c) Private	5	12.5	0	0	
	d) Government.					
5.	Family Income Per Month					

	a) 3000-80,000 / Month	26	65	37	87.5	8.020
	b) 80,001-12,000/ Month	08	20	5	12.5	
	c) 12000-20,000/ Month	5	12.5	0	0	
	d) Above 20,000	1	2.5	0	0	
6.	Place of Domicile					
	a) Urban.	4	10	1	2.5	1.920
	b) Rural	36	90	39	97.5	
7.	Type of Family					
	a) Nuclear	25	62.5	26	65	2.353
	b) Joint	15	37.5	12	30	
	c) Extended	0	0	2	5	
8.	Did you Attended Previous a Similar training programme.					
	a) Yes	0	0	0	0	-
	b) No	40	100	40	100	

Table 3 and Fig. 4 to 12, depicts that, in the **Experimental group majority and minority** of housewives, were in the age group 23-25 years 26 (65%) and 25-30 years 5(12.5%) respectively according to age, were Hindus 39 (97.5%) and Muslim 1 (2.5%) respectively according to religion, were having secondary education 14 (35%) and having both non-literate and primary education 7 (17.5%) respectively according to husband's educational status, were having secondary education 14 (35%) and having higher secondary education 5(12.5%) , were self-employed 17 (42.5%) and both unemployed and govt. employees 5 (12.5%) respectively according to husband's occupation, were housewives 38 (95%), were having Rs.5000-10000/month 26 (65%) and above Rs.20,000/month 1 (2.5%) respectively according to Family income per month, were reducing in rural area 36(90%) and reducing in urban area 4 (10%) respectively according to place of domicile, were coming from nuclear family 25 (62.5%) and coming from joint family 15 (37.5%) respectively according to type of family, 40(100%) were not attended any programme respectively according to previous exposure to assertiveness training programme.

Where as in **Control Group majority and minority** of samples, were both in the age group 13 -14 and 15-16 years 15 (37.5%) and 17-19 years 10 (25%) respectively according to age, were Hindus 39(97.5%) and Muslim 1(2.5%) respectively according to religion, were having secondary education 20 (50%) and having higher secondary education 4 (10%) respectively according to husband's educational status, were non-literate 22 (55%) and having higher secondary education 2 (5%) respectively according to mother's educational status, were self-employed 15 (37.5%) and unemployed 11 (27.5%) respectively according to

husband's occupation, were housewife 37 (92.5%) and having govt. job 1 (2.5%) respectively according to mother's occupation, were having 5000-1000/month 35 (87.5%) and above 10,001- 15000/month 5 (12.5%) respectively according to family income per month, were residing in rural area 39 (97.5%) and residing in urban area 1 (2.5%) respectively according to place of domicile, were coming from nuclear family 26 (65%) and coming from extended family 2 (5%) respectively according to type of family, 40 (100%) were not attended any programme respectively according to previous exposure to assertiveness training programme.

Homogeneity in terms of their socio-demographic characteristics the descriptive analysis revealed that the parameters were homogenous in terms of religion, mother's occupation, place of domicile, type of family and previous exposure to training whereas age, husband's educational status, husband's occupation and family income was having significant differ



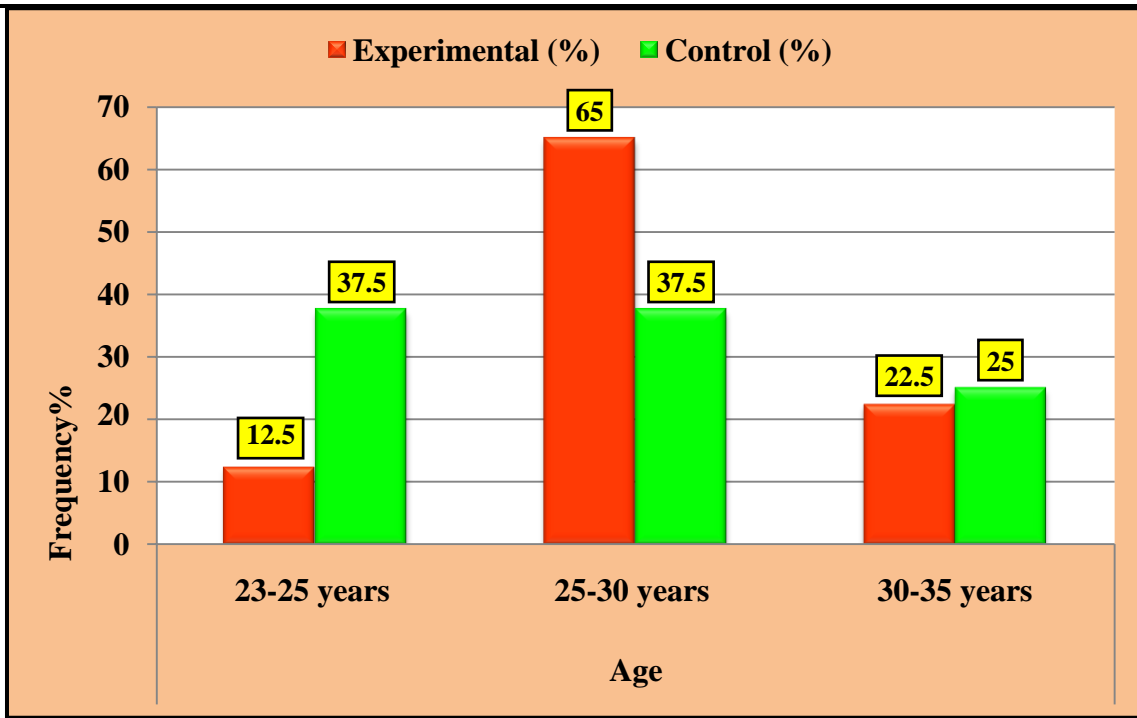


Fig.-1 Distribution of Housewife data

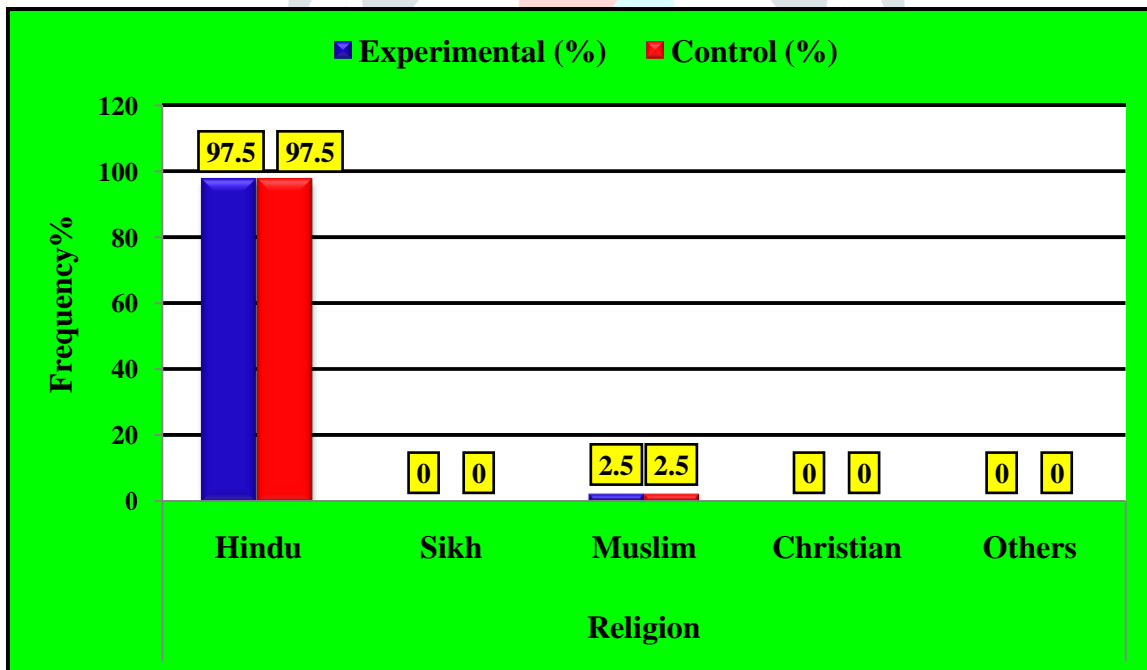


Fig.-2 Frequency percentage distribution of housewives regarding religion.

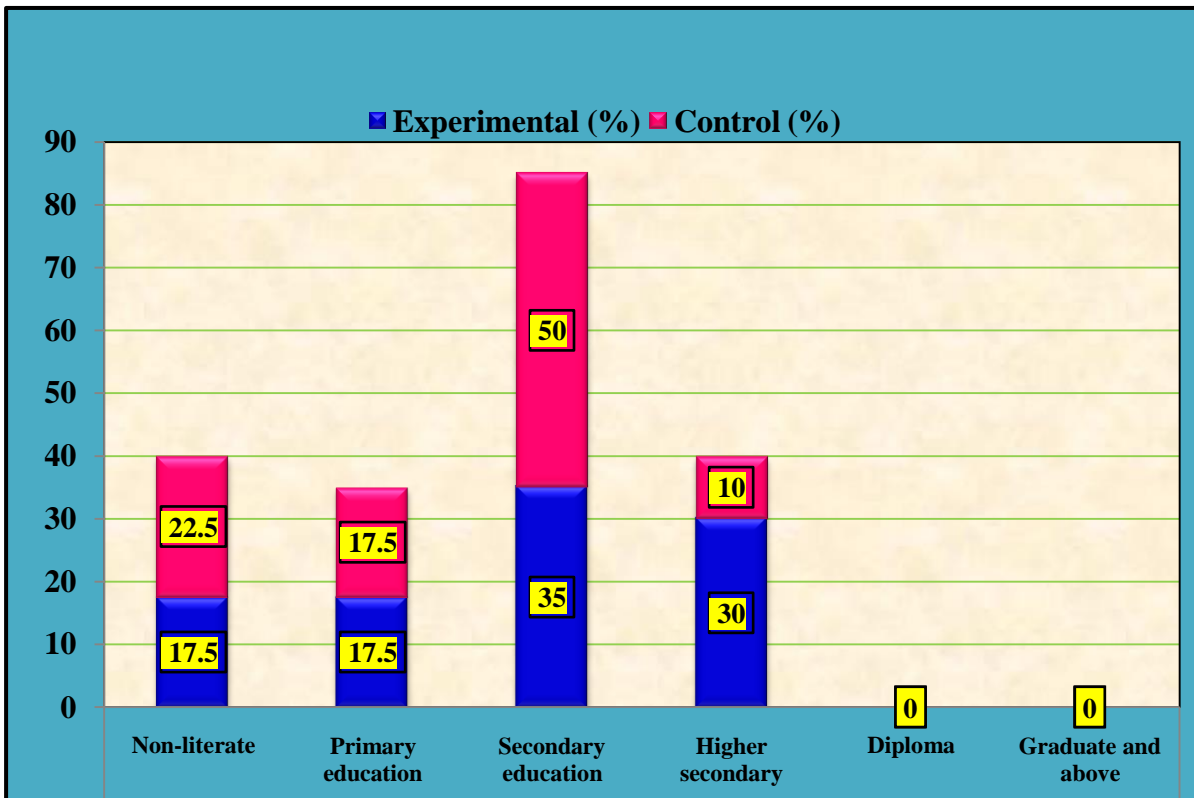


Fig.-3

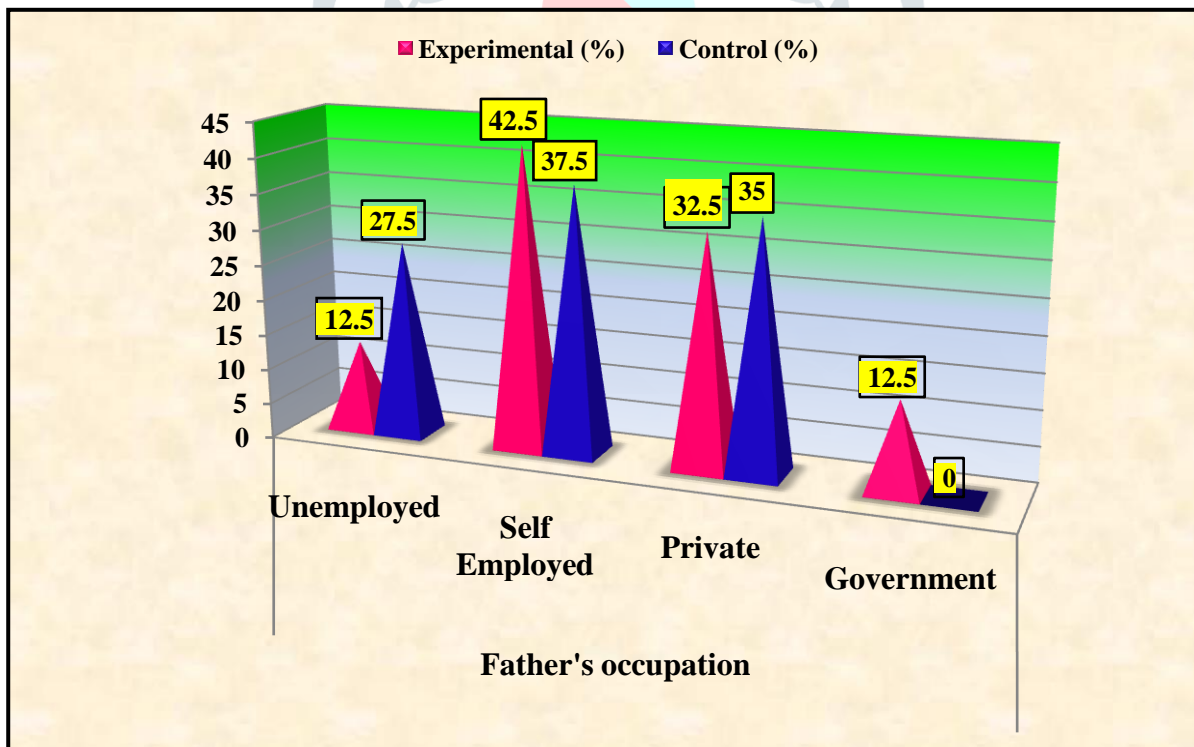


Fig.-4 Frequency percentage distribution of housewives regarding husband's occupation.

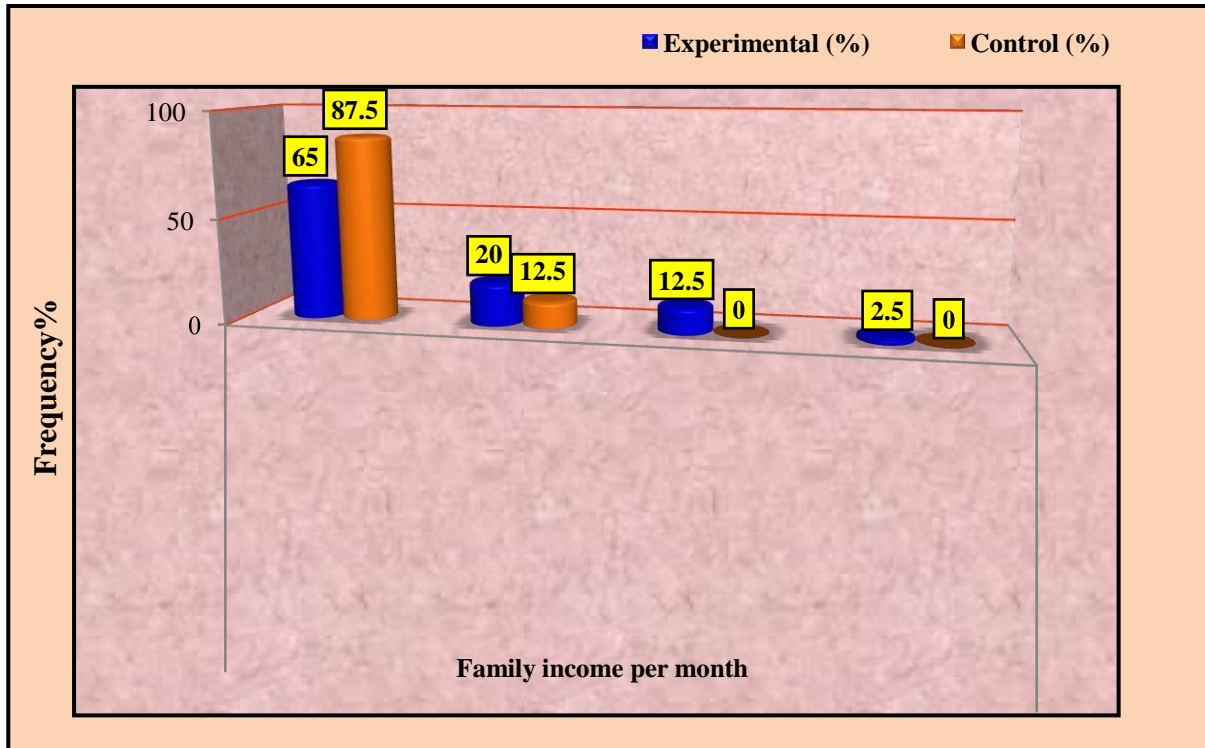


fig.-5 regarding family income.

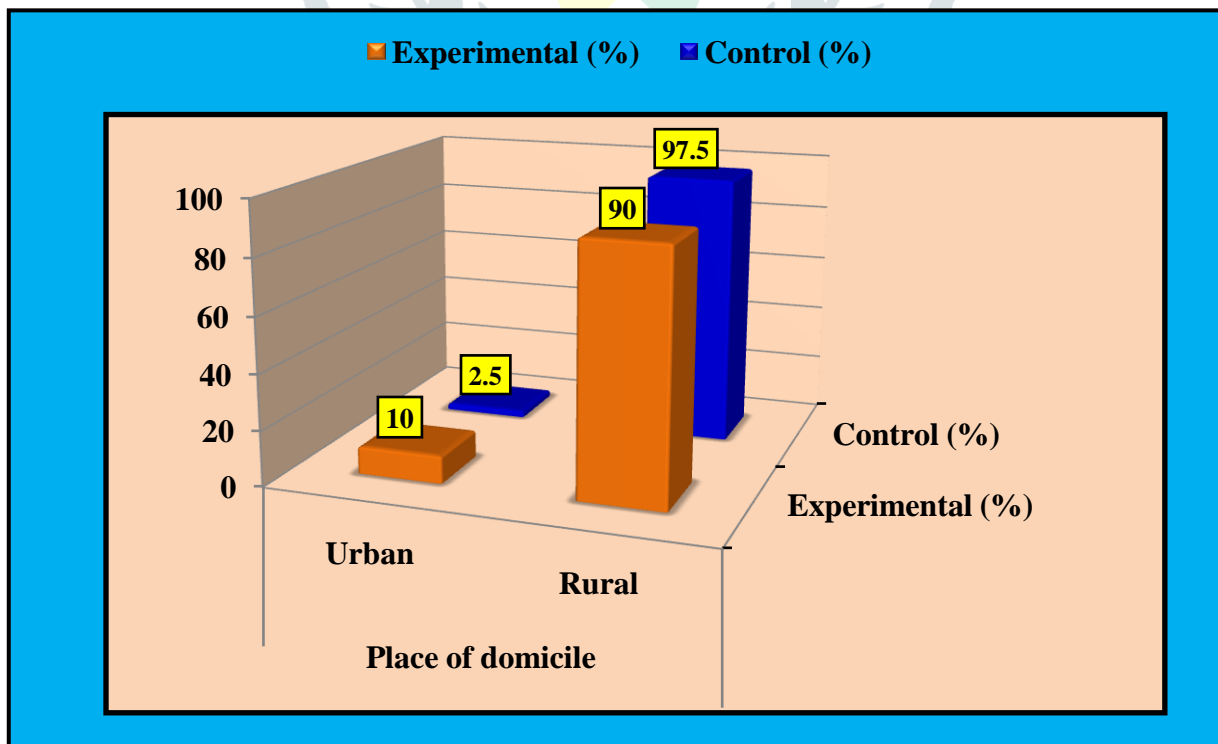


Fig.6 housewives regarding place of domicile.

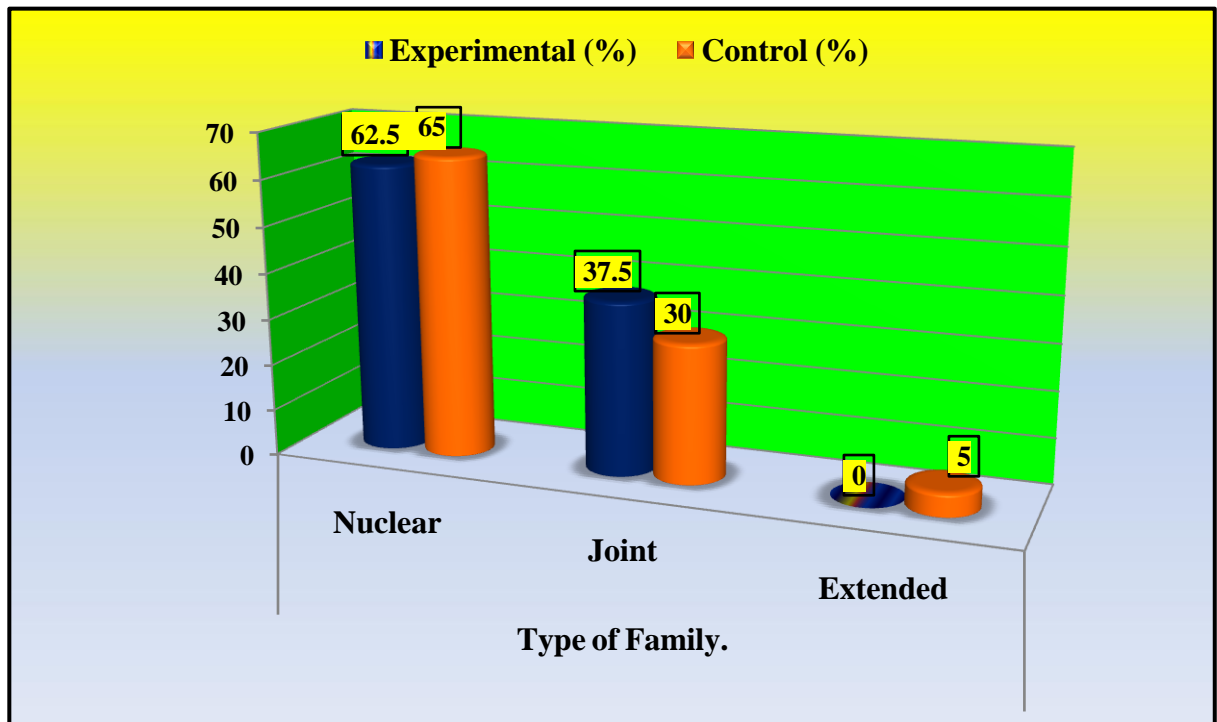


fig. 7: regarding types of family

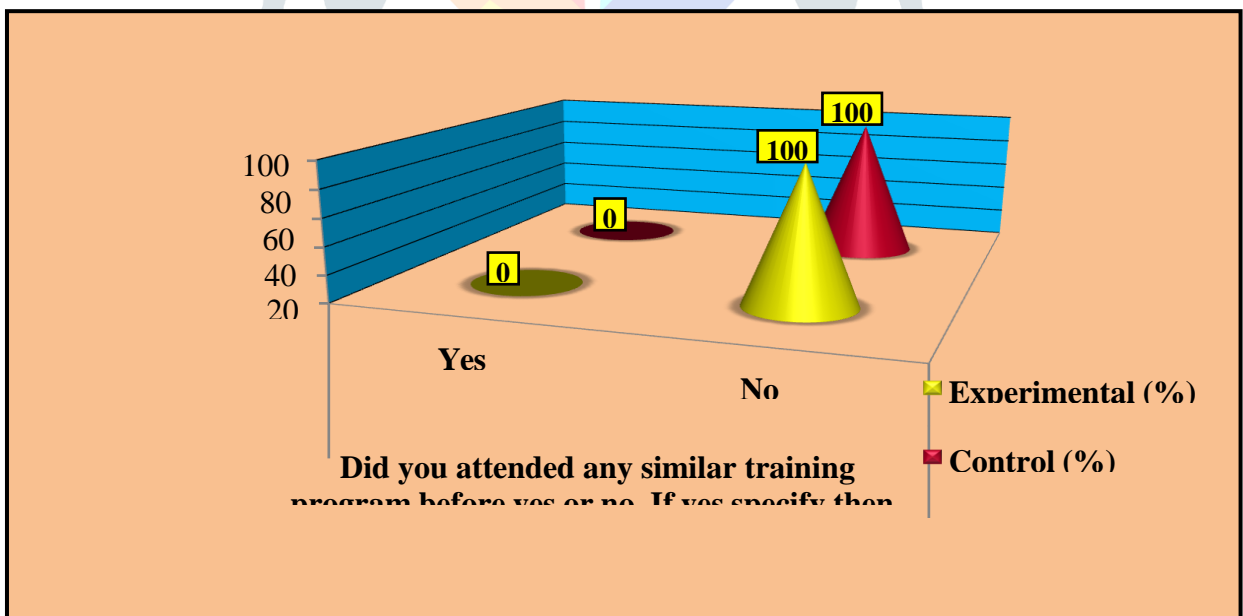


Fig.8: Frequency percentage distribution of housewives regarding previous exposure to training program

SECTION II - TESTING OF HYPOTHESES

Table: -4 Frequency and percentage distribution of pretest level of self-esteem among housewives in experimental and control group.

(N=80)

S.NO	Level of self-esteem	Score	Experimental Group		Control Group	
			Frequency (n)	Percentage (%)	Frequency (n)	Percentage (%)
1.	GOOD	20-30 (67%-100%)	0	0	0	0
2.	AVERAGE	10-19 (34%-66%)	39	97.5	34	85
3.	POOR	0-9 (<33%)	1	2.5	6	15

Maximum score: 30

Minimum score: 0

The above tables reveal that in pretest experimental group, majority of the housewives 39 (97.5%) were having average level of self-esteem whereas minority 1 (2.5%) were having low level of self-esteem. No housewives fall in the category of good level of self-esteem.

In pretest control group, maximum housewives 34 (85%) were having average level of self-esteem whereas least number of housewives 6 (15%) were having low level of self-esteem. Here in control group also no housewives were categorized in good level of self-esteem.

Table: -5 Frequency and percentage distribution of post-test level of self-esteem amonghousewives in experimental and control group.

(N=80)

S.NO	Level of self-esteem	Score	Experimental Group		Control Group	
			Frequency (n)	Percentage (%)	Frequency (n)	Percentage (%)
1.	GOOD	20-30 (67%-100%)	24	60	0	0
2.	AVERAGE	10-19 (34%-66%)	16	40	39	97.5
3.	POOR	0-9 (<33%)	0	0	1	2.5

Maximum score: 30

Minimum score: 0

Table 5 and Fig. 15, shows that in post-test experimental group, maximum number of the housewives 24(60%) were having good level of self-esteem as compared to 16 (40%) of adolescent having average level of self-esteem. After assertiveness training programme there was no housewives falls in the category of low level of self-esteem.

In post-test control group, majority of the housewives 39 (97.5%) were having average level of self-esteem whereas minority of 1(2.5%) housewives has low level of self-esteem.

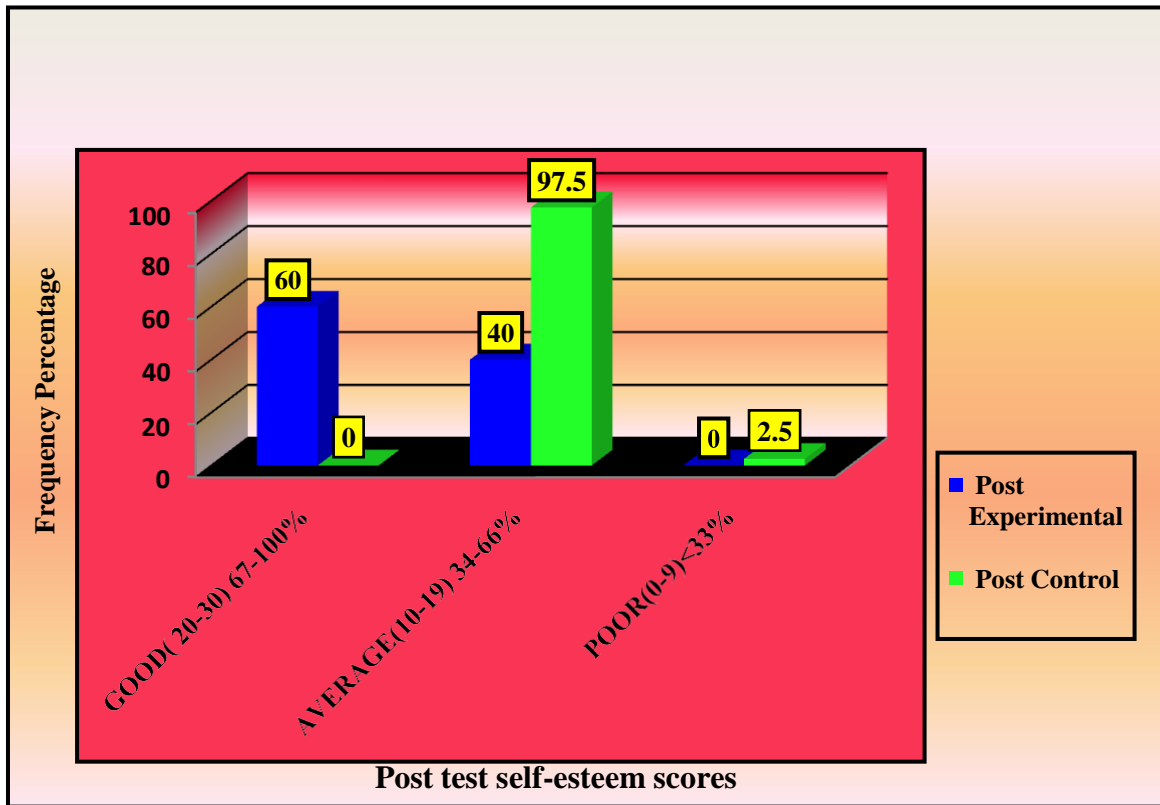


Fig 9: % self-esteem scores in both the groups.

Objective 2: To assess the assertive and training program.

Table: - 6 Pre-test and assertive frequency distribution.

(N=80)

S.NO	Level of assertive behaviour	Score	Experimental Group		Control Group	
			Frequency (n)	Percentage (%)	Frequency (n)	Percentage (%)
1	Probably Aggressive	+41 to +90	0	0	0	0
2	Assertive	+21 to +40	0	0	1	2.5
3	Somewhat Assertive	0 to 20	11	27.5	18	45
4	Situationally Non-Assertive	-20 to -1	22	55	12	30

5	Very Non-Assertive	-90 to -21	7	17.5	9	22.5
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Maximum score: +90

Minimum score: -90

Table 6, experimental group

In pretest control group, maximum housewives 18(45%) were Somewhat assertive followed by 12(30%) and 9(22.5%) housewives having Situationally nonassertive and verynonassertive respectively. It is interestingly to infirmed that,1(2.5%) housewives was having assertive behaviour and no one falls in the probably aggressive category.

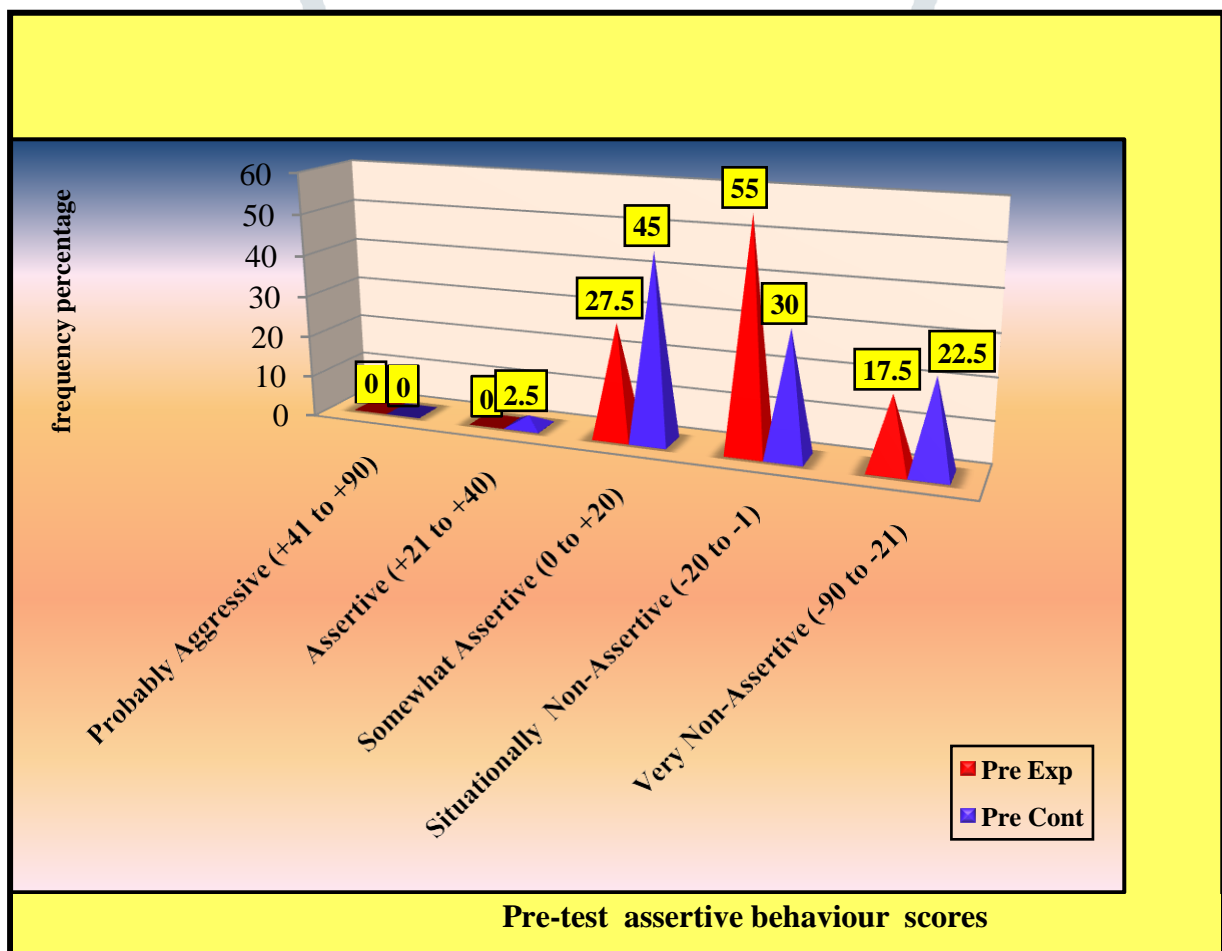


Fig. 10: assertive behaviour scores in both the groups.

Table: - 7 Distribution of dankaur housewife.

(N=80)

S.NO	Level	Score	Experimental Group		Control Group	
			Frequency (n)	Percentage (%)	Frequency (n)	Percentage (%)
1	Probably Aggressive	+41 to +90	0	0	0	0
2	Assertive	+21 to +40	28	70	1	2.5
3	Somewhat Assertive	0 to 20	12	30	19	47.5
4	Situationally Non –Assertive	-20 to -1	0	0	12	30
5	Very Non-Assertive	-90 to -21	0	0	8	20

Maximum score: +90**Minimum score: -90**

Table 7 shows that in post-test experimental group, after assertiveness training programme majority of the housewives 28 (70%) were Assertive and 12 (30%) housewives were somewhat assertive. No housewives were probably aggressive as well as no adolescent girl were situationally non-assertive and very non-assertive.

In post-test control group, the greater number of housewives 19 (47.5%) were Somewhat assertive. No housewives were showing probably aggressiveness. Aggressive behaviour remain same.

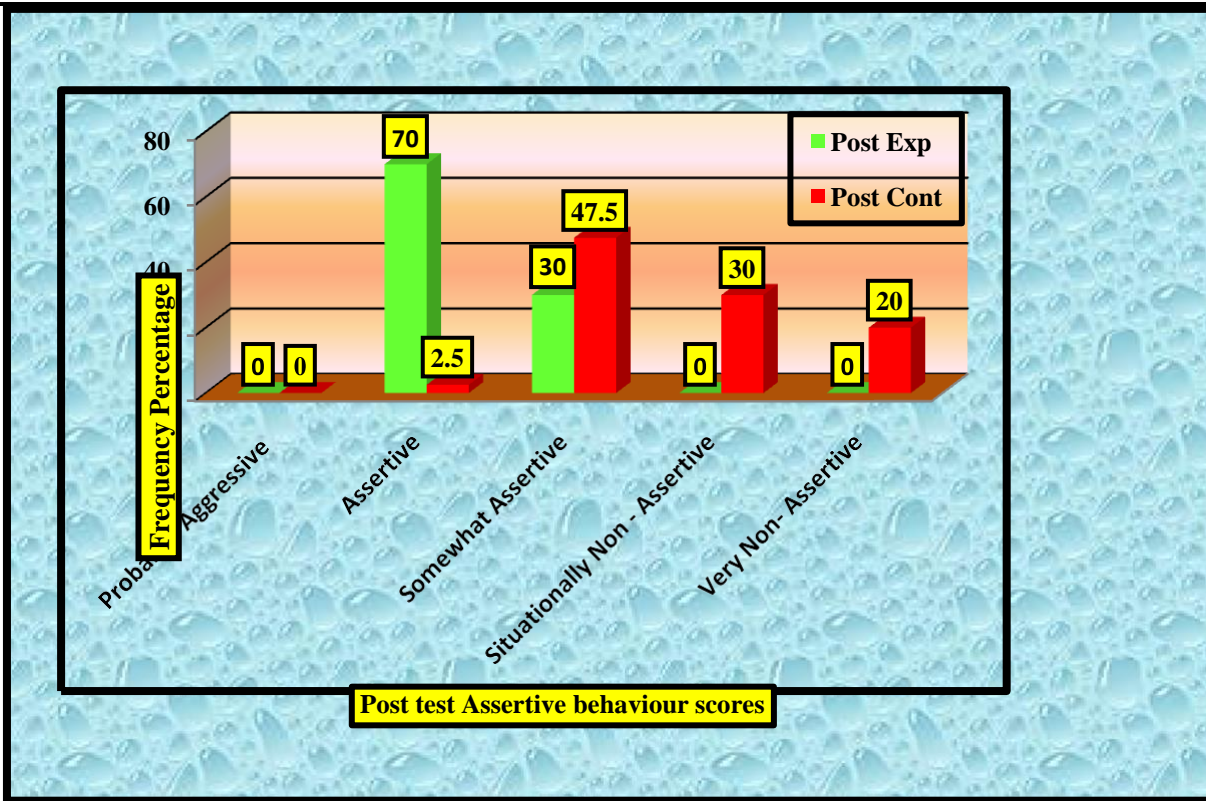


Fig.11: Frequency percentage distribution of post-test level of assertive behaviour score in both the groups.

Table:-8 Comparison of the post-test mean level of self-esteem scores among

(N=80)

GROUPS	EXPERIMENTAL GROUP	CONTROL GROUP
	Post-test-1	Post-test
t TEST		
MEAN SCORE	20.75	13.76
SD	3.526	2.275
MEDIAN SCORE	20.75	13.7
RANGE OF POSSIBLE SCORE	30	30
RANGE OF OBTAINED SCORE	15	9
MAXIMUM OBTAINED SCORE	30	18
MINIMUM POSSIBLE SCORE	0	0

MINIMUM OBTAINED SCORE	15	9
MAXIMUM POSSIBLE SCORE	30	30
MEAN PERCENTAGE (%)	69.25	45.17
MAXIMUM POSSIBLE GAIN (%)	30.75	54.83
NUMBER	40	40
SCORED	831	542
TOTAL SCORE	1200	1200

MEAN % DIFFERENCE	25.2
MEAN DIFFERENCE	7.235
t TEST VALUE	10.888
P VALUE	0.0000
TABLE VALUE AT 0.05	1.99
RESULT	Significant

$p < 0.05$

Table 8, Experimental group, 20.75(S.D. = 3.526)

Control group 13.76 (S.D= 2.275)

Table: - 9 Comparison of the pos-test mean level of Assertive Behaviour scores among housewives in experimental and control group.

(N=80)

GROUPS	EXPERIMENTAL GROUP	CONTROL GROUP
	Post-test 1	Post-test
t TEST		
MEAN SCORE	23.28	-4.23
SD	6.653	15.724
MEDIAN SCORE	23.5	-0.5
RANGE OF POSSIBLE SCORE	180	180
RANGE OF OBTAINED SCORE	27	62
MAXIMUM OBTAINED SCORE	38	29
MINIMUM POSSIBLE SCORE	-90	-90
MINIMUM OBTAINED SCORE	11	-33
MAXIMUM POSSIBLE SCORE	90	90
MEAN PERCENTAGE (%)	25.86	-4.69
MAXIMUM POSSIBLE GAIN (%)	74.14	104.69
NUMBER	40	40
SCORED	931	-169
TOTAL SCORE	3600	3600

MEAN % DIFFERENCE	30.6
MEAN DIFFERENCE	27.500
t TEST VALUE	10.187
P VALUE	0.0000
TABLE VALUE AT 0.05	1.99
RESULT	Significant

P<0.05

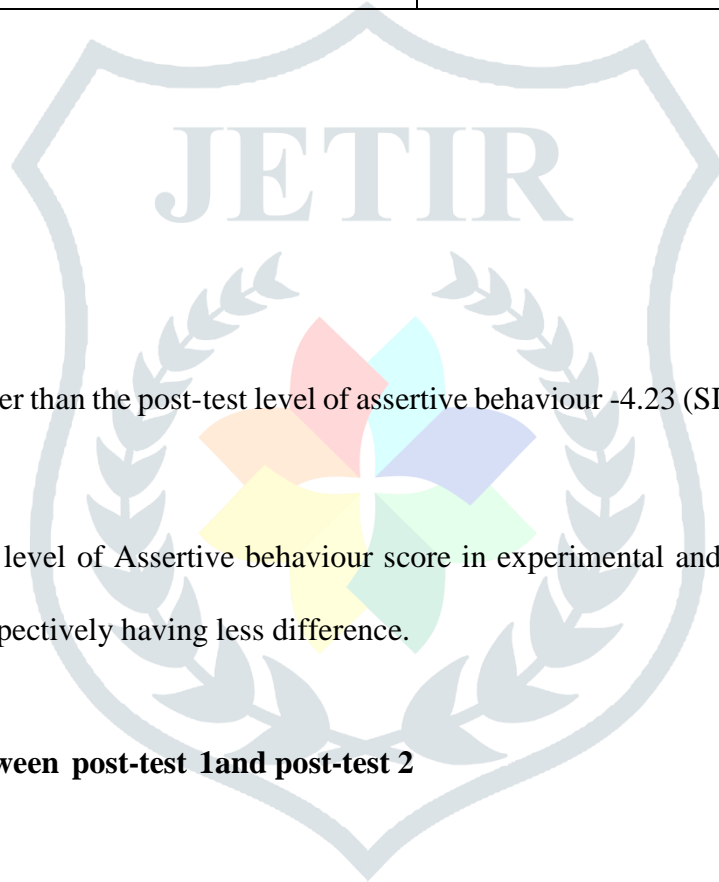


Table 9,

(SD=6.653) is higher than the post-test level of assertive behaviour -4.23 (SD=15.724) in control group.

The mean pre-test level of Assertive behaviour score in experimental and control group was -7.80 and -5.45 respectively having less difference.

Table:- 10 between post-test 1 and post-test 2

(N=80)

GROUPS	EXPERIMENTAL GROUP	
	Post-test 1	Post-test 2
t TEST		
MEAN SCORE	20.75	21.20

SD	3.526	3.797
MEDIAN SCORE	20.5	20
RANGE OF POSSIBLE SCORE	30	30
RANGE OF OBTAINED SCORE	15	17
MAXIMUM OBTAINED SCORE	30	30
MINIMUM POSSIBLE SCORE	0	0
MINIMUM OBTAINED SCORE	15	15
MAXIMUM POSSIBLE SCORE	30	30
MEAN PERCENTAGE (%)	69.25	70.67
MAXIMUM POSSIBLE GAIN (%)	30.75	29.33
NUMBER	40	40
SCORED	831	848
TOTAL SCORE	1200	1200

MEAN % DIFFERENCE	1.4
MEAN DIFFERENCE	0.425
t TEST VALUE	1.681
P VALUE	0.1009
TABLE VALUE AT 0.05	2.02
RESULT	Not Significant

P<0.05

Table 10, shows the comparison of the mean level of self-esteem score between post-test 1 and post-test 2 among girls in experimental group.

The mean level of self-esteem score and standard deviation in both post-test 1 and post-test 2 are 20.78 (S.D = 3.526) and 21.20 (SD= 3.797) respectively. The mean difference is 0.425 and the obtained 't' value is 1.681(p=1.1009). It is found statically not significant at 5% level of significance.

Even though the result is not significant, a slight increase of mean level of self-esteem score in post-test 2 as compared with post-test 1 shows the gradual building up of self-esteem even after 2 months of intervention.

Table: -11 Comparison of the mean level of Assertive Behaviour scores between post-test-1 and post-test 2 among housewives in experimental group.

(N=80)

GROUPS	EXPERIMENTAL GROUP	
	Post-test 1	Post-test 2
t TEST		
MEAN SCORE	23.28	23.98
SD	6.653	6.241
MEDIAN SCORE	23.5	24
RANGE OF POSSIBLE SCORE	180	180
RANGE OF OBTAINED SCORE	27	26
MAXIMUM OBTAINED SCORE	38	38
MINIMUM POSSIBLE SCORE	-90	-90
MINIMUM OBTAINED SCORE	11	12

MAXIMUM POSSIBLE SCORE	90	90
MEAN PERCENTAGE (%)	25.86	26.64
MAXIMUM POSSIBLE GAIN (%)	74.14	73.36
NUMBER	40	40
SCORED	931	959
TOTAL SCORE	3600	3600

MEAN % DIFFERENCE	0.8
MEAN DIFFERENCE	0.700
t TEST VALUE	2.014
P VALUE	0.0509
TABLE VALUE AT 0.05	2.02
RESULT	Not Significant

P<0.05

Table 11, reveals the comparison of the mean level of assertive behaviour score between post-test 1 and post-test 2 among housewives in experimental group.

The mean level of assertive behaviour score and the standard deviation in both post-test 1 and post 2 are 23.28 (S.D = 6.653) and 23.98 (SD= 6.241) respectively. The mean difference is 0.700 and the obtained 't' value is 2.014 ($p=0.0509$). It is found statically not significant at 5% level of significance.

However, the result is not significant, a small increase of mean level of assertive behaviour score in post-test 2 according to post-test 1 shows that the assertive behaviour among housewives is consolidating while time progress.

Objective 4: - Mean difference of assertive and self-esteem**Table: 12 Association of pretest level of self-esteem score with selected socio demographic variables among housewives in experimental group.**

(N=80)

S.NO.	Sample Characteristics	n	Mean	SD	DF	P Value	F/T Test
1.	Age (in years)						
	a) 23-25 years	5	11.80	2.59	2/37	0.530	0.646 ^{NS}
	b) 25-30 years	26	12.65	2.02			
	c) 30-35 years	9	12.00	1.22			
2.	Religion						
	a) Hindu	39	12.44	1.94	38	0.470	0.730 ^{NS}
	b) Sikh	0	-	-			
	c) Muslim	1	11.00	-			
	d) Christian	0	-	-			
	e) Others	0	-	-			
3.	Husband's Educational status						
	a) Non literate	7	12.57	1.72	3/46	0.293	1.278 ^{NS}
	b) Primary	7	13.29	2.81			
	c) Secondary	14	12.57	1.91			
	d) Higher Secondary	12	11.58	1.31			
	e) Diploma	0	-	-			
	f) Graduate and above	0	-	-			
4.	Husband's Occupation status						
	a) Unemployed	5	13.20	1.30	3/46	0.006	4.708*
	b) Self-employed	7	12.06	1.75			
	c) Private	13	11.62	1.04			
	d) Government	5	14.80	2.95			

5.	Family Income per Month						
	a) 5000-10000	26	12.23	1.63			
	b) 10001-15000	8	11.63	1.06			
	c) 15001- 20000	5	14.80	2.95	3/46	0.015	3.871*
	d) Above 20000	1	11.00	-			
6.	Place of Domicile						
	a) Urban	4	12.20	1.63	38	0.668	0.432 ^{NS}
	b) Rural	36	12.44	1.98			

*- Significant at 0.05 level

NS- Not Significant at 0.05 level

NA- Not Applicable.

Table 12, illustrate the association of pretest level of self-esteem score with selected socio demographic variables among housewives in experimental group.

In pretest regarding the selected socio-demographic variables like age, religion, husband's educational status, place of domicile, type of family, the 't' value is 0.646, 0.730, 1.278, 0.695, 0.432, 0.926 respectively which were found **statistically not significant** at 0.05 level of significance, whereas the other selected socio demographic variables husband's occupation, family income per month the 't' value is 4.708, 6.425, 3.871 respectively. Hence, **statistically significant** at 0.05.

Table:13 Association of pretest level of self-esteem score with selected socio demographic variables among housewives in control group.

(N=80)

S.NO.	Sample Characteristics	N	Mean	SD	DF	P Value	F/T Test
1.	Age (in years)						
	a) 23-25 years	15	15.60	2.59			
	b) 25-30 years	15	13.20	2.83	2/37	0.000	12.165*

	c) 30-35 years	10	10.60	1.65			
2.	Religion						
	a) Hindu	39	13.59	3.04			
	b) Sikh	0	-	-			
	c) Muslim	1	8.00	-	38	0.077	1.818 ^{NS}
	d) Christian	0	-	-			
	e) Others	0	-	-			
3.	Husband's Educational status						
	a) Non literate	9	11.89	3.02			
	b) School level	7	14.14	2.91			
	c) Secondary level	20	13.25	2.97			
	d) Higher secondary level	4	16.75	2.63	3/46	0.062	2.620 ^{NS}
	e) Diploma	0	-	-			
	f) Graduate and above	0	-	-			
4.	Husband's Occupation status						
	a) Unemployed	11	10.64	1.75			
	b) Self-employed	15	14.93	2.74	3/46	0.001	6.425 [*]
	c) Private	14	14.07	3.05			
	d) Government	0	-	-			
5.	Family Income per Month						
	a) 3000-80000	35	13.34	3.07			
	b) 80001-12000	5	14.20	3.83			
	c) 12001- 18000	0	-	-	3/46	0.573	0.673 ^{NS}
	d) Above 18000	0	-	-			
6.	Place of Domicile						
	a) Urban	1	10.00	-	38	0.270	1.119 ^{NS}
	b) Rural	39	13.54	3.12			
7.	Type of Family						

	a) Nuclear family	26	13.12	3.01			
	b) Joint family	12	13.67	3.42	38	0.332	0.983 ^{NS}
	c) Other	2	16.50	2.12			
8.	Previous exposure of Assertiveness training module						
	a) yes	0	-	-			
	b) No	40	13.45	3.13	38	-	NA

*- Significant at 0.05 Level

NS- Not Significant at 0.05 Level

NA-Not Applicable.

Table 13, depicts the association of pretest level of self-esteem score with selected socio demographic variables among housewives in control group.

In pretest regarding the selected socio demographic variables like religion, husband’s educational status, , family income per month, place of domicile, type of family, the 't' value is 1.818, 2.620, 1.299, 0.329, 0.673,

1.119 and 0.983 respectively found **statistically not significant** at 5% level of significance, whereas the other selected socio demographic variables age, husband’s occupation the 't' value is 12.165,6.425 respectively which were found **statistically significant** at same 0.05 level of significance.

Table:14 Association of pretest level of assertive behaviour score with selected socio demographic variables among housewives in experimental group.

(N=80)

S.NO.	Sample Characteristics	N	Mean	SD	DF	P Value	F/T Test
1.	Age (in years)						
	a) 23-25 years	5	-2.00	13.00			
	b) 25-30 years	26	-10.58	13.96	2/37	0.336	1.123 ^{NS}
	c) 30-35 years	9	-4.67	9.94			
2.	Religion						
	a) Hindu	39	-7.10	12.48			
	b) Sikh	0	-	-			
	c) Muslim	1	-35.00	-	38	0.033	2.213*
	d) Christian	0	-	-			
	e) Others	0	-	-			

3. Husband's Educational status							
a) Non literate	7	-11.00	17.77				
b) Primary	7	-16.71	13.28				
c) Secondary	14	-3.21	11.35				
d) Higher Secondary	12	-6.08	9.99	3/46	0.130	1.981 ^{NS}	
e) Diploma	0	-	-				
f) Graduate and above	0	-	-				
4. Husband's Occupation status							
a) Unemployed	5	-6.60	12.66				
b) Self-employed	7	-9.82	13.50	3/46	0.879	0.224 ^{NS}	
c) Private	13	-6.38	14.69				
d) Government	5	-5.80	10.11				
5. Family Income per Month							
a) 5000-10000	26	-7.92	14.00				
b) 10001-15000	8	-11.13	11.17				
c) 15001- 20000	5	-5.80	10.11	3/46	0.416	0.968 ^{NS}	
d) Above 20000	1	12.00	-				
6. Place of Domicile							
a) Urban	4	13.25	1.71	38	0.387	0.875 ^{NS}	
b) Rural	36	-7.19	13.67				
7. Type of Family							
a) Nuclear	25	-9.48	13.50				
b) Joint	15	-5.00	12.29	2/37	0.301	1.240 ^{NS}	
c) Extended	0	-	-				
8. Previous exposure of Assertiveness training module							
a) yes	0	-	-				
b) No	40	-7.80	13.09	38	-	NA	

*- Significant at 0.05 level

NS- Non-Significant at 0.05 level

NA-Not Applicable.

Table 14, depicts the association of pretest.

In pretest regarding the selected socio demographic variables like age, husband's educational status, husband's occupation, family income per month, place of domicile, type of family, the 't' value is 1.123, 1.981, 1.119, 0.224, 0.665, 0.968, 0.875, and 1.240 respectively found **statistically not significant** at 5% level of significance, where as the only selected socio-demographic variable religion have the 't' value 2.213 respectively and was found **statistically significant** at same 5% level of significance.

Table:15 Association of pretest level of assertive

(N=80)

S.NO.	Sample Characteristics	n	Mean	SD	DF	P Value	F/T Test
1.	Age (in years)						
	a) 23-25 years	15	-7.00	17.34	2/37	0.897	0.109 ^{NS}
	b) 25-30 years	15	-4.27	15.28			
	c) 30-35 years	10	-4.90	17.28			
2.	Religion						
	a) Hindu	39	-5.74	16.30	38	0.481	0.712 ^{NS}
	b) Sikh	0	-	-			
	c) Muslim	1	6.00	-			
	d) Christian	0	-	-			
	e) Others	0	-	-			
3.	Husband's Educational status						
	a) Non literate	9	-4.56	20.12	3/46	0.976	0.069 ^{NS}
	b) Primary	7	-8.00	14.82			
	c) Secondary	20	-5.15	16.69			
	d) Higher Secondary	4	-4.50	10.34			
	e) Diploma	0	-	-			
	f) Graduate and above	0	-	-			
4.	Husband's Occupation status						
	a) Unemployed	11	-6.36	19.15			

	b) Self-employed	15	-3.80	13.86	3/46	0.888	0.211 ^{NS}
	c) Private	14	-6.50	17.10			
	d) Government	0	-	-			
5.	Family Income per Month						
	a) 3000-8000	35	-5.17	16.46			
	b) 8001-12000	5	-7.40	51.76			
	c) 12001- 18000	0	-	-	3/46	0.778	0.366 ^{NS}
	d) Above 18000	0	-	-			
6.	Place of Domicile						
	a) Urban	1	8.00	-	38	0.407	0.838 ^{NS}
	b) Rural	39	-5.79	16.25			
7.	Type of Family						
	a) Nuclear	26	-5.50	16.32			
	b) Joint	12	-7.50	16.94	38	0.491	0.695 ^{NS}
	c) Extended	2	7.50	4.95			
8.	Previous exposure of Assertiveness training module						
	a) yes	0	-	-			
	b) No	40	-5.45	16.19	38	-	NA

*- Significant at 0.05 Level

NS- Not Significant at 0.05 Level

NA- Not Applicable.

Table 15, assertive behaviour score with selected socio demographic in control group.

In pretest control group all the selected socio demographic variables like age, religion, husband's educational status, husband's occupation, family income per month, place of domicile, type of family, the 't' value is 0.109, 0.712, 0.069, 0.533, 0.211, 0.435, 0.366, 0.838 and 0.695 respectively found **statistically not significant** at 5% level of significance.

CHAPTER – V

DISCUSSION



DISCUSSION

This chapter connects the current study's findings to previous research. The investigator interprets the study's findings in this section. The researcher ties up loose ends of the study during the discussion. The findings of this study have been examined in relation to the research objectives. The study examined the impact of assertiveness training on self-esteem and assertive behaviour in the rural community of Dankaur, Greater Noida, Uttar Pradesh, using 80 participants. The following are the study's aims and the findings that resulted from them: -

Objective 1: - Self-esteem before and after

In pre-test self-esteem score of experimental group majority of housewives 39(97.5%) were having average level of self-esteem score whereas minority 1 (2.5%) were having low level self-esteem however, no girls were having good level of self-esteem where as in pre=test self-esteem score of control group, majority 34 (85%) were having average level of self-esteem score where as minority 6 (15%) were having low level of self-esteem.

In post-test self-esteem score of experimental group maximum of housewives 24 (60%) were having good level of self-esteem score as compared to 16 (40%) were having average level self-esteem. while discussing about post-test of control group, majority of the samples 39 (97.5%) were having average level of self-esteem where as minority of them 1 (2.5%) were having low level of self-esteem. Here in control group no housewives fall in category of good level of self-esteem.

It is interesting to discuss that before intervention majority of housewives were having average level of self-esteem and less number were having low level of self-esteem in both experimental and control group, whereas after training programme self-esteem improved in experimental group as compared to control group.

Objective 2:- Assessment of self-assertion behavior before and after self-assertion training program in experimental and control housewives

In pre-test assertive behavior score of experimental group majority of housewives 22 (55%) were situationally nonassertive as compared with 11 (27.5%) and 7 (17.5%) were with somewhat assertive and very nonassertive respectively. No housewives were having assertive behaviour and probably aggressive, where as in pre-test assertive behavior score of control group maximum housewives 18(45%) were somewhat assertive followed by 12 (30%) and 9 (22.5%) adolescents having situationally non-assertive and very non-assertive respectively.

In post-test assertive behavior score of experimental groups, after intervention majority of samples 28 (70%) were assertive and 12 (30%) were somewhat assertive. No housewives were probably aggressive as well situationally non-assertive and very non-assertive, where as in post-test assertive behavior score of control group maximum 19 (47.5%) were somewhat assertive followed by 12 (30%) and 1 (2.5%) sample were situationally non-assertive and very non-assertive respectively.

While considering assertive behavior before intervention majority of housewives were situationally non-assertive followed by somewhat assertive and very non-assertive in experimental and control group, but after intervention there was improvement in assertive behavior of housewives in experimental as compared to control group.

Objective 3: - To compare the post test level of self-esteem and level of assertive behaviour among Housewives in between experimental and control group.

While comparing the post-test 1 and post-test 2 values of self-esteem and assertive behaviour among housewives, the result shows statically not significant but post-test 2 scores of both self-esteem and assertive behaviour improved. The post-test 1 was conducted after 15 days of intervention, whereas the post-test 2 was conducted after 2 months of intervention and the values remains almost same which indicates the effectiveness of assertiveness training programme among housewives.

Objective 4: - To find out the association between mean difference of the level of self-esteem

and assertive behaviour among housewives with their selected socio demographic variables in experimental and control group.

Regarding association between the pre-test level of self-esteem score with the selected socio-demographic variables in experimental group, age, religion, husband's educational status, place of domicile, type of family, were found **statistically not significant** at 0.05 level of significance, where as the husband's occupation, family income per month were found **statistically significant** at 0.05 level of significance.

Regarding association between the pre-test level of self-esteem score with the selected socio-demographic variables in control group religion, husband's educational status, mother's educational status, mother's occupational status, family income per month, place of domicile, type of family, were **found statistically not significant** at 0.05 level of significance, where as the age, husband's occupation were found **statistically significant** at 0.05 level of significance.

While associating the pretest level of assertive behavior with their selected socio demographic variables in experimental group majority of the variables found statistically **not significant** except religion which was **significant**, where as in control group all the selected socio demographic variables found statistically **not significant**.

The results of this study indicated the self-esteem a significant positive effect. When considered self-esteem and assertive behavior in both experimental and control groups the research hypotheses were accepted as expected direction. This is consistent with the previous findings that indicated assertiveness training programme had a significant effect on experimental groups.

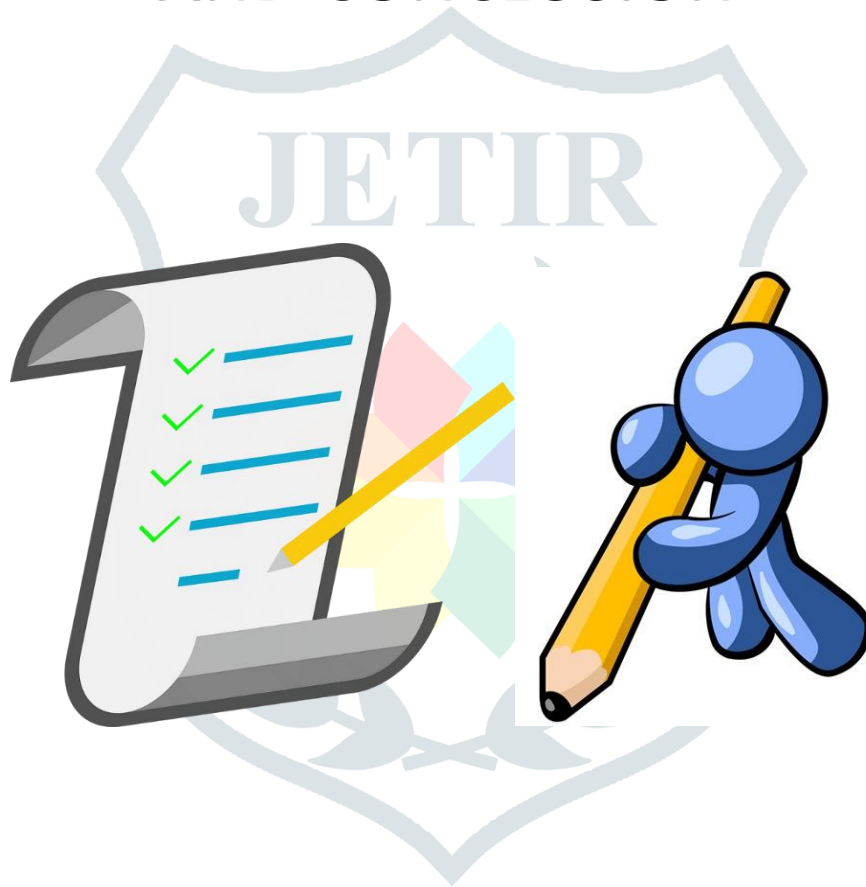
In conclusion of discussion, the above study is strongly consistent with previous findings that indicated the assertiveness training programme had a significant effect on experimental group, which is supported by the studies of **Culha (1987), Englander-golden (1984), Huey (1988), Lee, Hallberg (1985), Neilly M and Yorke (1990), Pentz (1980), Rotheram, Armstrong(1980), Voltan (1980), Yatagan (2005).**⁴⁹

CHAPTER – VI

SUMMARY, IMPLICATIONS,

LIMITATIONS, RECOMMENDATIONS

AND CONCLUSION



SUMMARY, MAJOR FINDINGS, IMPLICATIONS, LIMITATIONS, RECOMMENDATIONS & CONCLUSION

This chapter provide study of nursing practices, education and administration. The chapter ends with conclusion drawn from its major findings.

Summary

The Review of literature enabled the investigator to develop the conceptual framework, tool and methodology. Literature reviews was organized as follows:

1. self-esteem.
2. assertive behavior.
3. effectiveness of assertiveness training

The conceptual framework for this study is based on Health Promotion Model (HPM) which is a systematic framework for program evaluation. Using a quantitative research approach the research design adopted for the study was quasi-experimental research design (Nonequivalent pretest- post-test control group). Independent variable in the study was planned assertiveness training programme and dependent variable were self-esteem and assertive behavior. Associate variables were age, religion, husband's educational status, husband's occupation, family income per month, place of domicile, type of family, previous exposure of assertiveness training programme to housewives. The tool used in this study was standardized tools, Rosenberg self-esteem scale to assess the self-esteem and Rathus assertive schedule to assess the assertive behaviour. The content validity of the tool and planned assertiveness training module was established with the help of experts from nursing and medical fields. Reliability of the tool was done by split half method. Both the tool was found to be highly reliable.

The pilot study was conducted among 8 housewives of rural community of Dankaur in the month of February, 2021 and study was found feasible in terms of time, money, material, and conduction.

The main study was conducted at rural community of Dankaur. A total of 80 samples were selected in the study, using purposive sampling technique. The objectives and purposes of the study was explained and confidentiality was maintained. Informed assent was taken and pretest was done with standardized tool for both experimental and control group. Then assertive training programme were taught to the experimental group for 5 days and then after 15 days from the ending of intervention, post-test was conducted for both experimental and control group. The researcher administer intervention to the wait list control group on 1st April 2021 then the researcher again went for a second post-test to the experimental group on 11 may 2021, after 2 months of intervention for consolidating

the effectiveness of assertiveness training program. The data gathered was edited and tabulated as well as analyzed and interpreted statistics. A probability of less than 0.05 was considered to be significant.

MAJOR FINDINGS OF THE STUDY:

The frequency and percentage distributions of sample characteristics showed as follows:

- In experimental group, majority of the housewives were, in the age group of 23-25 years of age and were Hindus, husbands were having secondary education and were self-employed, were non-literate and were house wife, having a family income between 5000-10000 Rs. per month, residing at rural area, living in nuclear family and not having any previous exposure to assertiveness training programme.
- In control group, majority of the housewives were, in the age group 23-25 years and 25-30 years of age respectively, hindus, husbands were having secondary education and were self-employed, were non-literate and house wife, having a family income between 5000-10000/ month, residing at rural area, living in nuclear family and not having any previous exposure to assertiveness training programme.
- It is inferred that, before intervention majority of adolescents girls were having average level of self-esteem both in experimental and control group, whereas after assertiveness training programme. Majority of the samples in experimental group boosted and fall in the category of good level of self-esteem but in control groups remain same in average self-esteem level. The findings reveals the effectiveness of assertiveness training programme.
- While comparing between the post-test 1 and post-test 2 mean level of self-esteem and assertive behaviour score in experimental group, even though the result was not significant but a slight increase in post-test 2 mean level self-esteem and assertive behaviour score as compared with the post-test 1 shows the gradual building up of self-esteem and assertive behaviour while time progress.
- Regarding association between the pre-test level of self-esteem score with the selected socio demographic variables in experimental group, age, religion, husband's educational status, , place of domicile, type of family, were **found statistically not significant** at 0.05 level of significance, where as the husband's occupation, family income per month was found **statistically significant** at 0.05 level of significance.

- Regarding association between the pre-test level of self-esteem score with the selected socio-demographic variables in control group, religion, husband's educational status, family income per month, place of domicile, type of family, were **found statistically not significant** at 0.05 level of significance, where as the age and husband's occupation training programme were found **statistically significant** at 0.05 level of significance.

- While associating the pretest level of assertive behavior with their selected socio demographic variables in experimental group majority of the variables found statistically **not significant** except religion which was **significant**, where as in control group all the selected socio demographic variables found statistically **not significant**, while associating between the pretest assertive behaviour score with their sample characteristics. Hence it is inferred that the above mentioned significant selected socio demographic variables were independently influenced the level of self-esteem and assertive behaviour accordingly.

NURSING IMPLICATIONS

The implication means the utilization of the findings generated from the study in the nursing profession. The findings of the study can be used to generate new programs, teaching aids and other useful material for the nursing. The implications can be done in different fields of nursing as under:

Nursing Practice

- Community mental health nurse can actively conduct assertiveness training programme in community areas and can contact the women's welfare organizations and can conduct training program on assertive behavioral techniques. There should be additional facilities, administrative support and adequate funds for conducting these programs.

- Nurse should assume the responsibility and accountability to promote the assertive behavior as one of the important behavior strategies in all about promotion of mental health and build self-esteem.

Nursing Education

- Nursing is a science which deals with human beings in all aspect. Nursing students need to realize the importance of promotion of assertive behavior and self-esteem in their lives and in-cooperating their knowledge in theory to promote total wellbeing.

- Nurse educator can play a pivotal role in educating the students about the importance of assertive

behavior therapy; therefore, the future of the country will be having sufficient knowledge regarding promotion of their assertive behavior and can work as a productive member of the society.

- Nursing curriculum should be revised to improve the knowledge of students regarding assertiveness training programme in improving self-esteem and strengthening assertive behavior.
- Conduct seminar, workshop and conference in nursing institutions to help the students to improve and apply this as one of their behavioral components.

Nursing Administration

- Nurse administrator has needed to encourage their staff member to apply this as a behavioral technique to reduce unnecessary work stress and balance their right with others.
- Nurses Administrator can supervise various training session related to the improvement of self-esteem and assertive behavior.

Nursing Research

- Nursing research should be conducted to prepare various educational material for mass awareness programme.
- Nursing research should also be conducted on lifestyle behavior aspect of housewives.

LIMITATIONS

- The study was limited to housewives in selected rural community, Dankaur Greater Noida.
- Find difficulty in the month of march because of busy schedule at the end of academic session.

RECOMMENDATIONS

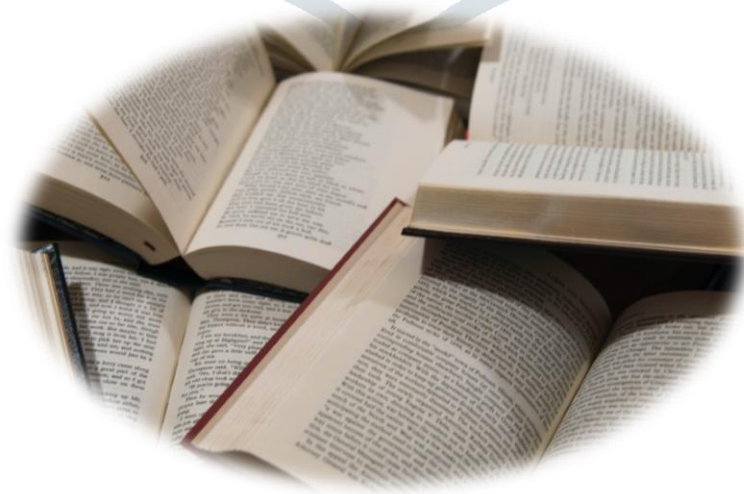
- ✓ The study can be replicated on large samples to validate the findings and make generalizations.
- ✓ Study can be initiated through a long-term time series research design.
- ✓ Assertiveness training programme can be applied on different samples, different community and different age groups.
- ✓ Further studies are necessary to determine which variables contributed enhanced assertive behaviour.

CONCLUSION

The following conclusions were drawn from the findings of the study:

- ❖ Level of self-esteem of housewives was improved and also there was strengthening in level of assertive behavior after assertiveness training programme therefore intervention was effective.
- ❖ A slight increase of mean level of self-esteem score in post-test 2 as compared with post-test 1 shows the gradual building up of self-esteem even after 2 months of intervention.
- ❖ A small increase of mean level of assertive behaviour score in post-test 2 according to post-test 1 shows that the assertive behavior among housewives is consolidating while time progress.
- ❖ With mean pretest level of self-esteem score, husband's occupation, mother's occupation, family income per month were significantly associated in experimental group where as incontrol group age, husband's occupation was found significantly associated.

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APPENDICES



Letter seeking permission from dean to conduct the study

From

B.sc nursing
4th year
Galgotias school of Nursing,
Galgotias University

To

The Dean
Galgotias school of nursing
Galgotias University
Greater Noida

Respected Madam,

Sub: letter seeking permission for conduct the study

We intended to to begin a research study in partial fulfillment of B.sc nursing titled as **"A study to Assess effectiveness of Nurse lead Assertiveness Program on self esteem and Assertive behaviour of housewives of Rural community , Dankaur, Greater Noida "** under the supervision of guide Ms. Sonia rani (Assistant professor, Galgotias University).

I request your kind permission to carry out the study.

Thanking You,

Yours faithfully

Kartik

Eksha jadaun

CHIME NKEMKA JENNIFER

B.Sc nursing 4th year

Dean
Galgotias School of Nursing
Galgotias University
Gautam Budh Nagar
Uttarpradesh



Letter seeking permission from chairman to conduct the study

From

B.Sc Nursing students
4th year
Galgotias school of nursing
Galgotias University

To

The chairman
Dankaur , Greater Noida

Subject- letter seeking permission to conduct the study

Respected sir/ma'am

We intended to to begin a research study in partial fulfillment if B.sc nursing titled as **"A study to Assess effectiveness of Nurse lead Assertiveness Program on self esteem and Assertive behaviour of housewives of Rural community , Dankaur, Greater Noida "**

under the supervision of guide Ms. Sonia rani.

I request your kind permission to carry out the study.

Thanking You,

Yours faithfully

Kartik

Ekshajadaun

CHIME NKEMKA JENNIFER

B.Sc nursing 4th year


नगर पंचायत दापौर
जनपद- गीता नुनगर

ASSENT FORM

I am voluntarily willing to participate in the study conducted by Mr. Kartik¹, Ms. Eksha², Ms. Chime Nkemka Jennifer³ on “**A QUASI EXPERIMENTAL STUDY TO ASSESS THE EFFECTIVENESS OF ASSERTIVENESS TRAINING ON SELF ESTEEM AND ASSERTIVE BEHAVIOUR AMONG HOUSEWIVES IN DANKUR VILLAGE GREATER NOIDA**”.

I understand that there is no known risk associated with this study and also I am eligible to participate in study as I can read, write and speak both Hindi and English used in study. I realize that the knowledge gained from this study may help me to develop my self-esteem and assertive behavior. Consent has been taken from the parents.

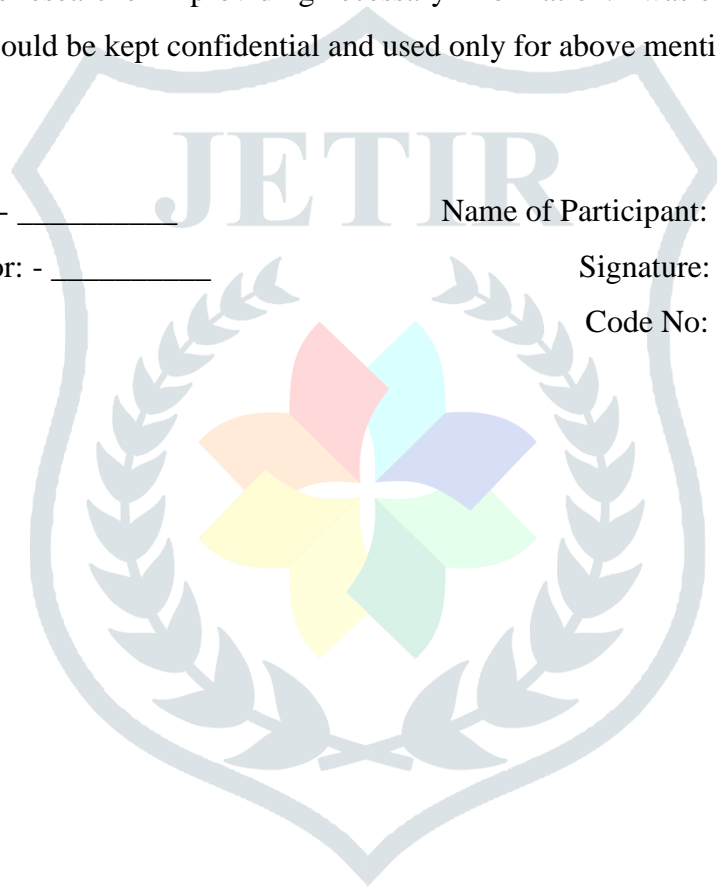
I will cooperate with the researcher in providing necessary information. I was explained that the information provided would be kept confidential and used only for above mentioned study purpose.

Signature of Guardian: - _____ Name of Participant: - _____

Signature of Investigator: - _____ Signature: - _____

Date: - _____ Code No: - _____

Age: - _____



APPENDIX – I SECTION A

Socio demographic

Variables

Code No.

INSTRUCTIONS: This section seeks information regarding the selected factors related to you. Kindly read each questions and put a tick (√) mark in the appropriate choice which is acceptable to you.

1. Age

- a) 15- 25 years
- b) 25- 35 years
- c) 35-45 years
- d) 45 above

2. Religion.....

- a) Hindu
- b) Sikh
- c) Muslim
- d) Christian
- e) Others

3. Education.....

- a) Illiterate
- b) Primary education

- c) Secondary education
- d) Higher secondary
- e) Diploma
- f) Graduate and above

4.Marriage.....

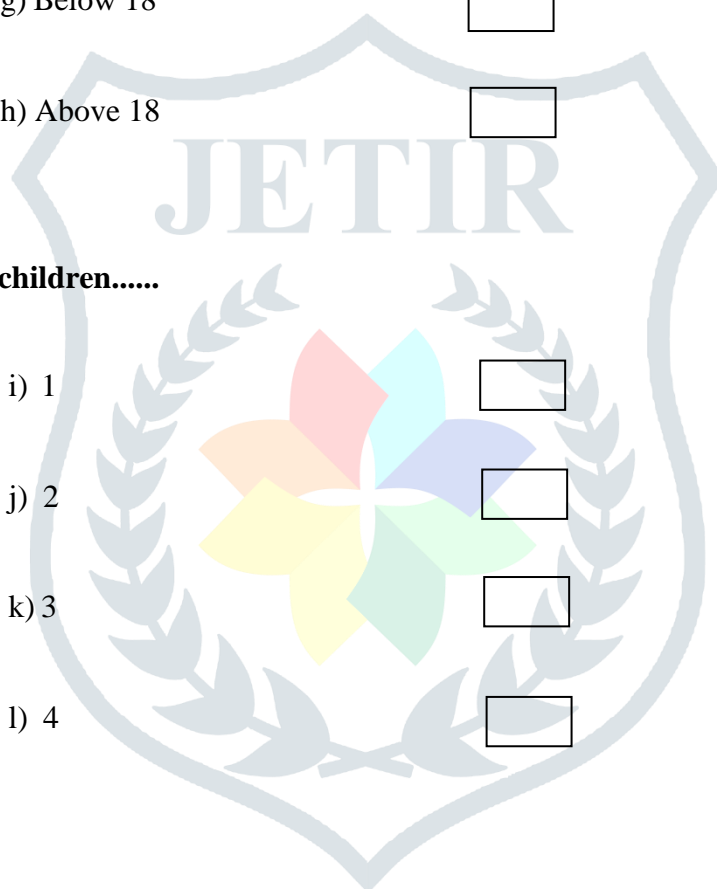
- g) Below 18
- h) Above 18

5.Number of children.....

- i) 1
- j) 2
- k) 3
- l) 4

6.Husband's occupation.....

- m) Farmer
- n) Businessman
- o) Private Job
- p) Government Employee



7.Types of Delivery.....

a) Normal

b) Cesarian

8.Place of first delivery.....

a) Hospital

b) Clinic

c) Home

9.Are you aware about your husband’s occupation.....?

q) Yes

r) No

10.Are you suffering from any disease.....?

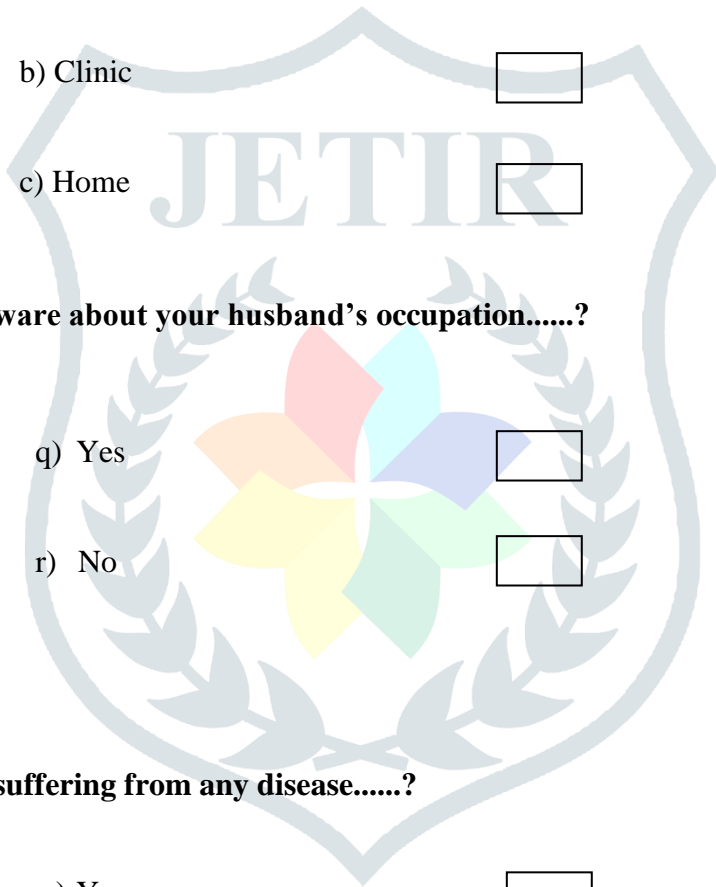
s) Yes

t) No

11.Did you attend any similar training program before yes or no.

u) Yes

v) No



SECTION -B**Rosenberg Self-Esteem Scale (Rosenberg, 1965)**

Instructions: : Here's a list of comments describing how you feel about yourself in general.

Circle SA if you firmly agree. Circle A if you agree with the statement. Circle D if you disagree. SD should be circled if you strongly disagree.

1. **I believe I am a person of value, at the very least on an equal footing with others..** SA A D SD
2. **I believe I possess a number of positive characteristics.** SA A D SD
3. **I have a tendency to believe that I am a failure.** SA A D SD
4. **I am capable of performing tasks on par with the majority of individuals.** SA A D SD
5. **I don't have anything to brag about.** SA A D SD
6. **I have a good outlook about myself.** SA A D SD
7. **Overall, I am pleased with myself.** SA A D SD
8. **There are times when I feel completely useless.** SA A D SD
9. **I wish I had more self-respect.** SA A D SD
10. **There are times when I believe I am completely useless.** SA A D SD

SECTION-C

RATHUS ASSERTVENESS SCHEDULE

DIRECTIONS: Indicate how characteristic or descriptive each of the following statements is of you by using the code given below:

Always

Once in a great while

Usually

Rarely

Sometimes

Never

Code no.

STATEMENTS	Always	Usually	Some times	Once in a great while	Rarely	Never
1. Most individuals appear to be more assertive and aggressive than I am						
2. When I am complimented, I am often at a loss for words.						
3. I often have a hard time saying "No".						
4. People frequently take advantage of me, to be honest.						
5. I enjoyed striking up talks with strangers and new acquaintances						
6. There are times when I look for good, vigorous arguments.						
7. I'm scared that during an argument, I'll become so agitated that I'll start shaking.						
8. I am open and frank about my feelings.						
9. I try to avoid disputing with clerks and salespeople over prices.						
10. I have hesitated to make or accept dates						

because of "shyness"

एक खंड बेसलाइन प्रो फॉर्म

निर्देश: यह खंड आपसे संबंधित चयनित कारकों के बारे में जानकारी चाहता है। कृपया प्रत्येक प्रश्न को पढ़ें और उचित विकल्प में (✓) का निशान लगाएं जो आपको स्वीकार्य है।

1. वास्तव में वर्षों में आयु (.....)

- 15- 25 वर्ष
- 25- 35 वर्ष
- 35- 45 वर्ष
- 45 और ऊपर

2. धर्म

- हिंदू
- मुसलमान
- सिख
- ईसाई

4. शिक्षा

- 8
- 10 वीं
- 12 वीं
- स्नातक की पढ़ाई

5. विवाह (.....)

- 18 से नीचे
- 18 से ऊपर

6. बच्चों की संख्या

- 1
- 2
- 3
- 4



7. पति का व्यवसाय

- a. किसान
- b. बिजनेस मैन
- c. निजी नौकरी
- d. सरकारी कर्मचारी

8. पहली डिलीवरी का प्रकार(.....)

- a. सामान्य
- b. सीजेरियन

8. पहली डिलीवरी का स्थान

- a. अस्पताल
- b. क्लिनिक
- c. होम

9. क्या आप अपने पति के व्यवसाय के बारे में जानती हैं

- a. हाँ
- b. नहीं

10. क्या आप किसी बीमारी से पीड़ित हैं

- a. हाँ
- b. नहीं

11 क्या आपने इसी तरह के किसी प्रशिक्षण कार्यक्रम में भाग लिया है

- a. हाँ
- b. नहीं

**धारा-बी****रोसेनबर्ग आत्म-सम्मान स्केल**

निर्देश: नीचे आपके बारे में आपकी सामान्य भावनाओं से संबंधित बयानों की एक सूची है।

1. मुझे लगता है कि मैं एक योग्य व्यक्ति हूँ, कम से कम दूसरों के साथ समान स्तर पर।

दृढ़तापूर्वक सहमत सहमत असहमत दृढ़तापूर्वक असहमत

2. मुझे लगता है कि मुझमें कई अच्छे गुण हैं।

दृढ़तापूर्वक सहमत सहमत असहमत दृढ़तापूर्वक असहमत

3. मैं यह महसूस करने के लिए इच्छुक हूँ कि मैं असफल हूँ।

दृढ़तापूर्वक सहमत सहमत असहमत दृढ़तापूर्वक असहमत

4. मैं अन्य लोगों की तरह चीजों को भी करने में सक्षम हूँ।

दृढ़तापूर्वक सहमत सहमत असहमत दृढ़तापूर्वक असहमत

5. मेरे पास गर्व करने के लिए बहुत कुछ नहीं है।

दृढ़तापूर्वक सहमत सहमत असहमत दृढ़तापूर्वक असहमत

6. मैं अपने प्रति सकारात्मक दृष्टिकोण रखता हूँ।

दृढ़तापूर्वक सहमत सहमत असहमत दृढ़तापूर्वक असहमत

7. कुल मिलाकर मैं खुद से संतुष्ट हूँ।

दृढ़तापूर्वक सहमत सहमत असहमत दृढ़तापूर्वक असहमत

8. मैं निश्चित रूप से कई बार बेकार महसूस करता हूँ।

दृढ़तापूर्वक सहमत सहमत असहमत दृढ़तापूर्वक असहमत

9. काश मेरे मन में अपने लिए अधिक सम्मान होता।

दृढ़तापूर्वक सहमत सहमत असहमत दृढ़तापूर्वक असहमत

10. कभी-कभी मुझे लगता है कि मैं बिल्कुल भी अच्छा नहीं हूँ।

दृढ़तापूर्वक सहमत सहमत असहमत दृढ़तापूर्वक असहमत

धारा - सी

राथस आत्म-सम्मान स्केल

निर्देश: इंगित करें कि निम्नलिखित में से प्रत्येक कथन आपके लिए कितना विशिष्ट या वर्णनात्मक है नीचे दिए गए कोड का उपयोग करना

हमेशा	एक बार महान समय में
आमतौर पर	शायद ही कभी
कभी-कभी	कभी नहीं

कोड नं - { }

बयान	हमेशा	आम तौर पर	कभी-कभी	एक बार महान समय में	शायद ही कभी	कभी नहीं
1. जब मुझे तारीफ दी जाती है, तो मैं कभी-कभी बस पता नहीं होता ,क्या कहना है।						
2. मुझे अक्सर "नहीं" कहने में कठिनाई होती है।						
3. सच कहूं तो लोग अक्सर लेते हैं मेरा फायदा।						
4. मुझे नए परिचित और अजनबी के साथ बातचीत शुरू करने में अच्छा लगता है।						
5. एक तर्क के दौरान, मैं कभी-कभी डर जाती हूं कि मैं इतना परेशान हो जाऊंगी कि मैं कांपने लगती हूं						
6. मैं अपने बारे में खुली और स्पष्ट भावनाएं रखती हूं						
7. मैं मोलभाव पर बहस करने से बचती हूं						
8. कई बार मैं कुछ कह नहीं पाती						
9. मुझे अपनी राय व्यक्त करने की जल्दी रहती है						
10. मुझे माल वापस करना शर्मनाक लगता है						

Scoring:-

Self esteem scoring criteria:-

Scoring criteria	Positive items (1,3,4,7,10)	Negative items (2,5,6,8,9)
Strongly agree(SA)	3	0
Agree(A)	2	1
Disagree(D)	1	2
Strongly disagree(SA)	0	3

Self-esteem score with its percentage:-

Level of self esteem	score	Percentage
Good	20-30	67-100%
Average	10-19	34% -66%
Below average	0-9	< 33%

Assertive behaviour scoring criteria:-

CODE	Always	Usually	Sometimes	Once in a great while	Rarely	Never
SCORE	+3	+2	+1	-1	-2	-3

Assertive behaviour score

Level of Assertive Behavior	Score
Very non-assertive	-90 to -21
Situationally non-assertive	- 20 to -1
Somewhat assertive	0 to +20
Assertive	+21 to +40
Probably aggressive	+41 to +90

APPENDIX – XI

MASTER DATA SHEETS

DATA SHEET OF SOCIO DEMOGRAPHIC VARIABLES EXPERIMENTAL GROUP																																														
S.NO.	SAMPLE CHARACTERISTICS	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	Total				
1	Age (in years)																																													
	a)15 -25 Year	√		√			√	√	√			√	√	√	√	√		√	√		√									√			√										√	18		
	b) 25-35 Years		√		√	√				√	√			√			√			√			√	√	√							√		√				√	√	√				16		
	c) 35 -45 Years																					√					√	√	√		√			√	√									8		
2	Religion																																													
	a) Hindu	√	√	√	√		√	√	√	√	√	√	√	√	√	√	√	√	√	√	√	√	√	√	√	√	√	√	√	√	√	√	√	√	√	√	√	√	√	√	√	√	√	√	33	
	b) Sikh																																													
	c) Muslim					√										√			√			√				√		√						√											7	
	d) Christian																																													
	e) Others																																													
3	Husband's Educational status																																													
	a) Non- Literate				√																			√				√									√								4	
	Primary Education					√		√		√						√					√			√		√	√																			7
	c) Senior Secondary Education		√				√		√		√	√					√				√		√							√		√		√			√		√	√	√	√				16
	d) Higher Secondary	√					√					√	√																	√			√		√							√				8
	e) Diploma																				√																			√					2	
	f) Graduate & Above			√										√				√									√			√																5
4	Husband's Occupational Status																																													

DATA SHEET OF SOCIO DEMOGRAPHIC VARIABLES CONTROL GROUP																																														
S.NO.	SAMPLE CHARACTERISTICS	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	Total				
1	Age (in years)																																													
	a) 15-25 Year	√		√			√	√	√			√	√	√	√	√		√	√	√	√			√																					15	
	b) 25-35 Years		√		√	√				√	√						√						√		√	√						√	√	√					√	√	√			15		
	c) 35 -45 Years																					√					√	√	√	√	√				√	√	√					√		10		
2	Religion																																													
	a) Hindu	√	√	√	√	√	√	√	√	√	√	√	√	√	√	√	√	√	√	√	√	√	√	√	√	√	√	√	√	√	√	√	√	√	√	√	√	√	√	√	√	√	√	√	39	
	b) Sikh																																													
	c) Muslim																√																												1	
	d) Christian																																													
	e) Others																																													
3	Husband's Educational status																																													
	a) Non- Literate				√									√			√							√			√	√			√				√										8	
	Primary Education				√			√		√						√						√			√	√																			7	
	c) Senior Secondary Education		√			√			√		√	√					√		√	√		√							√	√		√	√	√		√	√	√	√	√	√	√	√	√	√	20
	d) Higher Secondary	√					√						√	√																																4
	e) Diploma																																													
	f) Graduate & Above			√																																									1	
4	Husband's Occupational Status																																													
	a) Unemployed																							√	√	√	√	√	√	√						√	√		√				√	11		
	b) Self Employed	√	√			√	√		√	√	√			√	√			√			√										√						√		√	√					15	
	c) Private			√	√			√				√	√		√	√		√	√		√	√								√	√		√	√											14	
	d) Government																																													

MASTER DATA SHEET OF PRETEST SELF ESTEEM SCORE
(EXPERIMENTAL GROUP)

Pre test	SECTION -B Rosenberg Self-Esteem Scale (Rosenberg, 1965)										
Subject s	Qno.1	Qno.2	Qno.3	Qno.4	Qno.5	Qno.6	Qno.7	Qno.8	Qno.9	Qno.10	TOTAL
Exp1	1	1	2	2	1	2	2	0	2	2	15
Exp2	1	1	1	2	2	2	2	0	2	2	15
Exp3	1	1	1	2	1	0	2	0	2	2	12
Exp4	1	1	1	2	1	0	2	0	2	2	12
Exp5	1	1	2	2	1	0	1	1	1	2	12
Exp6	1	1	2	2	1	0	2	0	1	2	12
Exp7	1	1	1	2	1	0	2	1	1	2	12
Exp8	1	1	1	2	1	1	2	1	1	2	13
Exp9	1	1	1	2	1	1	2	0	1	2	12
Exp10	1	1	1	2	1	1	1	0	1	2	11
Exp11	1	1	2	2	1	1	1	0	1	1	11
Exp12	1	1	1	2	1	0	2	0	1	2	11
Exp13	1	1	1	2	1	0	2	0	1	2	11
Exp14	1	1	1	2	2	0	2	0	3	2	14
Exp15	1	0	1	2	1	0	1	0	3	2	11
Exp16	1	0	1	2	1	0	1	0	3	2	11
Exp17	1	2	1	2	2	2	1	2	3	2	18
Exp18	1	0	1	2	1	0	1	1	1	2	10
Exp19	1	0	1	2	2	0	2	1	1	2	12
Exp20	1	1	0	1	1	0	1	0	2	2	9
Exp21	1	1	0	1	2	1	1	2	1	2	12
Exp22	2	1	1	2	2	1	2	2	1	2	16
Exp23	1	1	1	2	1	0	1	1	2	2	12
Exp24	1	1	1	2	1	2	1	2	2	2	15
Exp25	1	1	1	2	1	0	2	2	2	2	14
Exp26	1	1	1	2	1	0	2	0	1	2	11
Exp27	1	1	1	2	1	0	2	0	1	2	11
Exp28	1	2	1	1	1	2	1	3	2	2	16
Exp29	1	2	1	1	0	2	1	1	2	2	13
Exp30	1	2	1	1	2	2	1	1	1	2	14
Exp31	1	0	1	1	1	1	1	1	1	2	10
Exp32	1	0	1	1	1	1	1	1	1	2	10
Exp33	1	2	1	1	1	2	2	2	1	2	15
Exp34	1	1	1	1	1	1	1	1	1	2	11

Exp35	1	1	1	1	1	1	1	1	2	2	12
Exp36	1	1	1	1	2	1	1	0	1	2	11
Exp37	1	1	1	1	1	1	2	0	1	2	11
Exp38	1	1	1	2	1	2	2	0	1	2	13
Exp39	1	1	1	2	2	0	2	0	2	2	13
Exp40	1	1	1	2	1	1	2	0	1	2	12

**MASTER DATA SHEET OF PRETEST ASSERTIVE BEHAVIOUR SCORE
(EXPERIMENTAL GROUP)**

Pre test	Section – C Assertiveness											
	Subjects	Qno.1	Qno.2	Qno.3	Qno.4	Qno.5	Qno.6	Qno.7	Qno.8	Qno.9	Qno.10	TOTAL
Exp1	2	-3	2	2	2	2	2	-2	-2	-2	-1	0
Exp2	2	-2	2	2	2	1	-2	-2	-3	1		-4
Exp3	2	-3	2	2	1	-2	-2	2	1	2		13
Exp4	2	-3	2	-2	1	-2	1	1	1	1		15
Exp5	1	1	-2	-2	1	-3	-2	-2	-2	1		-1
Exp6	1	1	1	-2	1	1	-2	2	-2	-2		-17
Exp7	1	1	1	-2	2	1	-2	1	1	-2		-4
Exp8	1	1	1	-3	2	1	-2	1	1	-2		-3
Exp9	2	1	-2	-2	1	1	1	1	1	1		0
Exp10	2	1	1	-2	2	1	1	-2	1	1		-6
Exp11	2	1	1	-2	2	1	1	-2	1	1		12
Exp12	2	1	2	-2	2	1	-2	-2	1	1		5
Exp13	2	1	1	-3	2	2	-2	-2	1	-3		-4
Exp14	2	1	-3	-3	-2	-2	-3	-2	1	-3		-31
Exp15	2	1	-3	-3	-2	-2	-2	-2	1	-3		-35
Exp16	2	1	-3	-3	-2	-2	-2	-2	1	-3		-37
Exp17	2	2	-2	-3	-2	1	-2	-2	2	-3		-21
Exp18	2	1	-3	-3	-2	1	-2	-2	1	1		-14
Exp19	1	2	1	-3	-3	-2	-3	1	1	-3		-22
Exp20	1	-2	-1	2	1	1	-2	-1	2	1		-1
Exp21	1	2	2	1	1	1	-2	-2	1	-2		-5
Exp22	1	2	-2	1	1	-2	1	-2	1	-2		-11
Exp23	1	1	-2	-2	1	-3	1	-2	1	-2		-13
Exp24	1	1	1	1	1	1	1	-2	1	-3		7
Exp25	1	1	1	1	-3	-3	-3	1	1	1		-11
Exp26	1	1	1	1	2	1	-2	-2	1	-2		-8
Exp27	1	1	-2	-2	2	1	-2	-2	1	-2		-18
Exp28	1	1	-2	1	2	-1	-2	1	-2	1		-8
Exp29	1	1	2	2	1	1	-2	1	-2	1		6
Exp30	1	1	1	2	1	1	-2	1	-2	1		10
Exp31	1	-2	1	1	1	1	-2	-2	-2	1		-6
Exp32	1	1	1	1	1	1	-2	-2	-2	1		-2
Exp33	2	-2	1	2	1	1	1	-2	1	-2		6

Exp34	2	-2	-2	2	1	1	1	-2	1	-2	5
Exp35	1	1	1	-3	2	-3	1	-2	1	-3	-15
Exp36	1	1	-2	-3	3	-1	1	-2	-2	-3	-16
Exp37	2	1	-2	-3	-2	-2	1	2	-2	-3	-26
Exp38	1	2	-2	-2	-2	-2	-2	2	-2	-2	-30
Exp39	1	-2	-2	-2	1	-3	1	1	1	-2	-8
Exp40	1	-2	-2	-2	1	1	-2	-2	2	-2	-14

**MASTER DATA SHEET OF PRETEST SELF-ESTEEM SCORE
(CONTROL GROUP)**

Pre test	SECTION -B Rosenberg Self-Esteem Scale (Rosenberg, 1965)										TOTAL
	Qno.1	Qno.2	Qno.3	Qno.4	Qno.5	Qno.6	Qno.7	Qno.8	Qno.9	Qno.10	
Control1	1	1	1	2	0	2	2	2	2	0	13
Control2	1	1	1	2	2	2	2	2	1	2	16
Control3	1	1	1	2	2	1	2	2	1	2	15
Control4	1	1	2	2	2	2	2	1	1	2	16
Control5	1	1	1	2	2	2	1	1	1	2	14
Control6	2	2	2	2	1	2	2	1	1	2	17
Control7	2	1	2	1	1	2	2	3	2	2	18
Control8	2	1	2	1	2	2	2	3	2	2	19
Control9	2	2	1	1	2	2	2	1	2	1	16
Control10	2	2	1	1	2	2	2	1	2	1	16
Control11	1	3	0	2	1	2	3	1	1	1	15
Control12	2	1	1	2	2	2	2	2	1	2	17
Control13	2	1	1	2	2	2	2	2	1	2	17
Control14	2	1	1	2	2	2	2	1	1	1	15
Control15	2	2	1	1	2	2	2	2	3	2	19
Control16	2	1	2	0	3	1	2	1	1	2	15
Control17	2	1	2	2	3	1	2	1	1	1	16
Control18	2	1	1	1	2	1	2	0	1	2	13
Control19	2	1	1	1	2	2	2	0	2	2	15
Control20	2	1	2	2	2	2	1	0	2	2	16
Control21	1	2	2	2	1	1	2	0	0	2	13
Control22	0	0	2	2	0	0	2	0	0	2	8
Control23	1	2	2	1	1	0	0	0	0	2	9
Control24	1	0	1	1	0	1	2	1	1	2	10
Control25	1	2	1	2	1	0	3	0	0	2	12

Control26	1	0	1	1	0	1	2	0	1	1	8
Control27	1	0	2	2	3	0	2	0	0	2	12
Control28	1	0	2	2	2	0	2	0	1	2	12
Control29	1	0	1	2	0	1	0	2	0	2	9
Control30	1	0	1	2	1	1	0	0	1	2	9
Control31	1	0	1	2	1	2	0	1	1	2	11
Control32	0	0	2	2	1	0	2	0	0	2	9
Control33	1	0	2	2	2	1	2	0	0	2	12
Control34	2	0	1	2	0	1	1	0	2	1	10
Control35	1	2	2	2	1	0	1	0	0	2	11
Control36	1	0	1	2	1	0	1	1	1	2	10
Control37	1	0	1	2	1	2	2	1	0	3	13
Control38	1	0	1	2	1	2	2	1	0	3	13
Control39	3	2	3	2	1	2	1	0	1	2	17
Control40	3	2	0	2	3	0	0	0	0	2	12

**MASTER DATA SHEET OF PRETEST ASSERTIVE BEHAVIOUR SCORE
(CONTROL GROUP)**

Pre test	Section -C Assertiveness										
	Subjects	Qno.1	Qno.2	Qno.3	Qno.4	Qno.5	Qno.6	Qno.7	Qno.8	Qno.9	Qno.10
Control1	-2	-3	-2	-2	2	-3	-2	-2	1	1	4
Control2	1	-3	-2	-1	2	-3	-3	-3	-2	2	-14
Control3	2	-3	-3	1	-2	-3	-2	-3	2	2	-7
Control4	2	-3	-2	1	2	-2	-2	-2	1	-2	6
Control5	2	-2	-2	1	2	-2	-3	-2	1	-2	6
Control6	-2	1	2	-1	1	2	-1	-2	1	-2	-2
Control7	2	3	2	1	2	-3	-2	-2	1	-2	4
Control8	-2	3	-3	1	2	-3	-2	-2	1	1	-21
Control9	2	1	2	-2	2	1	-2	-2	1	1	19
Control10	2	1	-2	1	2	2	-2	-3	1	-2	-1
Control11	-2	-3	-3	-3	-2	2	-2	2	3	1	11
Control12	2	1	2	-2	2	1	-2	-2	1	1	5
Control13	-2	1	2	-2	-2	-3	-2	-2	1	-2	-17
Control14	2	1	-2	1	2	-3	-2	-2	1	-2	4
Control15	2	3	2	1	2	-3	-3	-2	2	1	-9
Control16	-2	1	-2	1	2	-3	-2	-2	-3	1	-30
Control17	2	-2	-2	1	-2	-3	-3	2	-3	1	-33
Control18	1	1	2	1	2	1	2	-3	1	2	11
Control19	1	1	2	1	2	1	2	-3	1	2	15
Control20	2	-2	-2	-2	-2	-3	-2	-2	1	-3	-34
Control21	-2	1	-2	-2	3	-2	1	1	2	1	0

Control22	1	-3	2	1	-2	-3	1	-3	-2	1	6
Control23	1	2	-3	-3	-2	-3	-3	-3	-2	-3	-36
Control24	1	1	-2	-2	-2	1	-2	-2	2	1	8
Control25	1	1	-2	-2	-2	-2	-2	1	1	1	-18
Control26	-2	2	-2	-3	-3	1	-3	-3	-3	-3	-36
Control27	-2	2	2	-3	2	2	2	2	2	1	21
Control28	1	2	-1	-3	2	-1	-2	2	2	-2	-5
Control29	1	1	-2	-3	-2	-3	-2	-2	1	1	0
Control30	1	1	-2	-2	-3	-2	-2	-2	1	1	-11
Control31	1	1	-2	-2	-2	-2	-1	-2	-2	-2	-6
Control32	1	-2	-2	-2	2	-2	1	-3	-2	1	-25
Control33	1	1	1	1	2	-2	1	-3	-2	1	4
Control34	1	2	1	-2	2	-3	1	-2	1	1	7
Control35	1	1	1	1	-3	-2	-2	-3	1	1	9
Control36	1	2	-3	-3	-2	-2	1	-3	1	-3	-30
Control37	-2	-2	1	-2	2	-2	-2	-2	-2	1	-22
Control38	1	1	1	1	2	-2	2	-1	-2	1	16
Control39	1	-3	-2	1	-2	-2	-2	1	-2	-2	-13
Control40	1	1	2	1	2	1	-3	-2	2	1	-4

**MASTER DATA SHEET OF POSTTEST SELF-ESTEEM SCORE
(EXPERIMENTAL GROUP)**

Post test	SECTION -B Rosenberg Self-Esteem Scale (Rosenberg, 1965)										
Subjects	Qno.1	Qno.2	Qno.3	Qno.4	Qno.5	Qno.6	Qno.7	Qno.8	Qno.9	Qno.10	TOTAL
Exp1	2	3	3	2	2	2	1	1	0	3	19
Exp2	2	2	2	3	2	2	2	1	2	3	21
Exp3	2	3	2	3	2	2	2	1	2	3	22
Exp4	2	3	2	3	2	1	3	1	2	3	22
Exp5	2	2	2	2	2	1	2	1	1	2	17
Exp6	2	2	3	3	2	1	3	1	2	3	22
Exp7	2	2	2	2	2	1	2	1	1	3	18
Exp8	2	3	3	2	2	1	2	1	1	2	19
Exp9	2	3	3	2	2	1	2	1	1	3	20
Exp10	2	2	2	2	1	2	1	1	1	2	16
Exp11	2	2	2	2	1	1	2	1	1	2	16
Exp12	2	2	2	2	2	1	2	1	2	3	19
Exp13	2	2	2	2	2	1	2	1	1	2	17
Exp14	2	2	3	3	2	1	2	1	1	3	20
Exp15	2	2	3	3	2	1	2	1	1	3	20
Exp16	2	2	3	3	2	1	2	1	3	3	22

Exp17	2	1	2	2	2	2	1	2	2	1	17
Exp18	2	3	2	3	2	1	2	1	2	3	21
Exp19	2	2	2	2	1	1	1	1	2	1	15
Exp20	3	2	1	1	2	2	2	2	2	1	18
Exp21	2	2	3	2	2	2	2	3	2	2	22
Exp22	2	2	3	2	2	3	2	2	2	2	22
Exp23	3	2	3	2	1	2	2	2	2	2	21
Exp24	2	2	3	3	2	2	3	2	2	3	24
Exp25	3	3	3	2	3	2	3	3	3	2	27
Exp26	3	2	3	3	2	2	3	2	2	3	25
Exp27	3	2	2	2	2	3	3	1	3	2	23
Exp28	2	2	3	1	1	2	3	3	3	3	23
Exp29	2	1	2	2	1	2	1	1	3	2	17
Exp30	3	2	2	3	2	2	3	3	3	2	25
Exp31	1	1	2	3	2	2	3	1	2	2	19
Exp32	1	1	2	1	2	2	1	2	2	2	16
Exp33	1	1	2	3	2	2	1	1	2	3	18
Exp34	1	1	2	3	2	2	3	1	2	3	20
Exp35	1	2	2	2	2	2	2	2	2	2	19
Exp36	3	2	2	2	2	2	2	2	2	2	21
Exp37	3	3	3	3	2	2	3	3	3	3	28
Exp38	3	2	2	3	3	3	3	3	2	3	27
Exp39	3	3	3	3	3	3	3	3	3	3	30
Exp40	3	1	2	2	3	3	2	3	2	2	23

**MASTER DATA SHEET OF POSTTEST ASSERTIVE BEHAVIOUR SCORE
(EXPERIMENTAL GROUP)**

Pre test	Section – C Assertiveness										
	Qno.1	Qno.2	Qno.3	Qno.4	Qno.5	Qno.6	Qno.7	Qno.8	Qno.9	Qno.10	TOTAL
Exp1	3	-3	1	-3	-3	1	-2	-2	-3	3	17
Exp2	3	2	1	-2	-3	1	1	-3	-2	1	12
Exp3	2	2	1	2	2	1	2	-2	-2	2	30
Exp4	2	-2	2	2	-2	1	2	-2	3	2	38
Exp5	1	1	1	-2	-2	2	2	-2	1	1	15
Exp6	2	2	1	1	2	-2	1	-2	2	-2	13
Exp7	1	2	2	3	2	-2	2	2	-2	2	24
Exp8	2	1	1	3	-2	2	-2	3	1	-2	21
Exp9	1	1	2	1	1	-2	2	1	2	1	25
Exp10	2	1	2	-2	1	2	1	2	-2	1	28
Exp11	1	1	1	-2	2	2	2	2	1	2	30

Exp12	1	2	2	-2	-2	2	2	-2	2	2	37
Exp13	2	1	1	-2	-2	1	-2	-2	1	2	11
Exp14	1	-2	1	3	2	-3	2	-3	3	-3	22
Exp15	2	2	1	3	2	3	-3	3	-3	1	25
Exp16	1	-2	1	3	-2	3	3	3	1	2	30
Exp17	1	2	1	1	2	-2	3	1	-2	3	27
Exp18	2	2	1	1	1	2	2	-2	1	-2	24
Exp19	1	1	-2	2	2	1	3	-2	1	1	23
Exp20	1	1	2	2	1	2	2	-2	2	-2	19
Exp21	1	1	1	2	-2	1	2	2	-2	-2	28
Exp22	1	2	1	2	-2	1	2	2	2	1	27
Exp23	1	1	1	3	-2	3	-2	3	-3	3	20
Exp24	2	1	2	-2	1	2	1	1	1	1	22
Exp25	1	2	1	3	-2	3	-2	2	-3	1	25
Exp26	2	2	1	-2	1	-2	1	2	2	1	26
Exp27	1	2	1	-2	3	1	-2	1	2	-2	15
Exp28	1	2	1	-2	-2	1	3	3	1	-2	21
Exp29	1	2	-2	1	2	1	-2	2	2	1	29
Exp30	1	2	1	-2	2	1	-2	2	1	-2	37
Exp31	2	1	1	-2	1	1	1	1	1	-2	13
Exp32	1	2	1	-2	3	1	2	3	2	-2	22
Exp33	2	1	2	-2	1	1	2	3	2	-2	22
Exp34	2	1	1	-2	1	1	1	1	1	1	25
Exp35	1	1	2	3	-2	2	2	3	2	-2	29
Exp36	2	1	2	1	2	3	1	-2	2	-2	17
Exp37	2	1	2	-2	3	2	2	-2	2	1	26
Exp38	2	1	1	-2	2	1	-2	-2	2	1	17
Exp39	2	2	1	1	-2	1	-2	3	-2	1	22
Exp40	2	2	2	-2	3	-2	2	-2	2	-2	17

**MASTER DATA SHEET OF POSTTEST SELF ESTEEM SCORE
(CONTROL GROUP)**

Post test	SECTION -B Rosenberg Self-Esteem Scale (Rosenberg, 1965)										TOTAL
	Qno.1	Qno.2	Qno.3	Qno.4	Qno.5	Qno.6	Qno.7	Qno.8	Qno.9	Qno.10	
Control1	2	1	2	2	1	2	2	1	1	2	16
Control2	2	2	2	2	2	2	2	1	1	2	18
Control3	2	0	2	2	0	2	2	2	1	1	14
Control4	2	1	2	1	2	1	2	1	2	2	16
Control5	2	1	2	2	1	2	2	1	1	2	16
Control6	2	1	2	2	1	1	2	1	1	2	15
Control7	2	0	2	2	1	2	2	1	1	2	15
Control8	1	1	1	2	0	2	2	1	1	2	13

Control9	2	2	1	2	2	2	2	1	2	2	18
Control10	2	2	1	2	2	2	2	1	2	2	18
Control11	2	2	1	1	2	1	2	1	1	2	15
Control12	2	1	1	2	2	1	2	0	1	2	14
Control13	2	1	2	1	1	1	2	1	1	2	14
Control14	1	1	2	2	0	1	2	1	1	2	13
Control15	2	1	1	2	2	1	2	0	1	2	14
Control16	2	1	1	1	1	1	2	0	1	2	12
Control17	2	1	1	2	0	1	2	0	1	2	12
Control18	2	1	1	1	0	1	2	1	2	2	13
Control19	2	1	2	1	0	1	2	1	2	2	14
Control20	2	1	2	2	2	2	1	0	2	2	16
Control21	2	1	2	2	2	1	2	0	1	2	15
Control22	2	0	1	2	0	1	2	0	1	2	11
Control23	1	3	1	1	2	1	2	3	1	2	17
Control24	2	1	1	2	0	1	2	0	1	2	12
Control25	2	1	2	1	1	1	2	2	0	2	14
Control26	2	1	1	2	0	1	2	0	1	1	11
Control27	2	1	1	3	0	1	3	0	0	2	13
Control28	2	1	2	1	0	0	2	0	1	2	12
Control29	1	1	1	1	0	0	2	1	1	2	10
Control30	1	1	1	2	0	0	2	1	1	2	11
Control31	2	1	2	2	0	2	2	0	0	2	13
Control32	2	1	1	2	0	0	2	0	1	2	11
Control33	1	0	2	2	2	1	2	0	0	2	12
Control34	2	2	1	3	0	0	2	1	1	2	14
Control35	1	1	1	2	1	1	2	0	1	2	12
Control36	1	1	1	2	1	1	2	3	1	2	15
Control37	1	0	1	1	0	1	3	0	1	2	10
Control38	1	1	1	2	1	1	1	0	1	0	9
Control39	2	0	2	2	1	1	2	0	1	2	13
Control40	1	1	1	2	2	0	1	0	1	2	11

MASTER DATA SHEET OF POSTTEST ASSERTIVE BEHAVIOUR SCORE

(CONTROL GROUP)

Pre test	Section – C Assertiveness										
Subjects	Qno.1	Qno.2	Qno.3	Qno.4	Qno.5	Qno.6	Qno.7	Qno.8	Qno.9	Qno.10	TOTAL
Control1	1	2	1	-2	-2	1	-2	-2	1	1	6
Control2	-2	1	2	-2	-2	1	-2	-2	-3	-2	-17
Control3	2	1	-2	-2	-3	-2	2	-2	2	-3	-10
Control4	1	2	2	-3	2	2	1	-2	1	-2	5
Control5	1	-2	1	-2	-2	1	1	-2	1	1	7
Control6	1	2	-2	-2	-2	1	-2	-2	1	-1	-5
Control7	-2	1	1	-2	-2	1	1	-2	1	-2	5
Control8	1	-2	1	-2	1	-1	-1	-2	1	-1	-18
Control9	2	1	2	-2	-2	1	1	2	-2	2	29
Control10	2	1	1	-2	-2	1	1	-2	-2	2	3
Control11	1	2	1	1	-2	1	1	2	-3	1	10
Control12	2	1	2	-2	1	1	-2	1	1	-1	6
Control13	1	2	1	-2	1	1	-1	-2	1	1	-11
Control14	1	2	-1	1	-1	2	1	-2	1	-2	1
Control15	2	3	1	-2	1	1	-2	-3	1	-2	-6
Control16	-1	1	-3	-1	1	-1	1	-1	-1	-3	-23
Control17	-1	1	-2	-1	-2	1	-1	-2	-1	-1	-31
Control18	1	1	1	-3	-2	1	1	-3	1	1	10
Control19	1	2	2	-3	1	1	1	-2	1	1	18
Control20	2	-2	-2	-2	-2	-3	-1	-2	1	-2	-31
Control21	2	1	2	-3	1	2	-3	-2	-3	1	1
Control22	1	2	1	-2	1	1	1	-1	1	-1	6
Control23	1	-2	-2	-3	1	-2	-2	-2	1	-2	-28
Control24	1	1	2	-3	1	1	-2	-2	1	1	14
Control25	-3	2	-2	2	-3	2	2	-2	-2	1	-21
Control26	-3	2	-3	-3	1	1	-3	-2	1	-2	-31
Control27	-3	2	2	-2	-3	2	2	-2	-3	2	15
Control28	-2	2	1	-2	1	-2	1	2	-2	-2	-6
Control29	-2	1	1	-3	2	1	-2	-2	1	1	3
Control30	-2	1	-2	1	1	-2	1	-2	1	-2	-1
Control31	1	1	1	-2	1	-1	-1	-2	-2	1	-6
Control32	1	-1	-2	-3	-1	2	-1	-2	-1	1	-22
Control33	1	1	1	2	2	-2	1	-3	-2	1	8
Control34	-3	-2	1	1	1	1	-3	-2	1	-3	8
Control35	1	2	1	-1	-3	1	1	-3	1	1	0
Control36	-2	-2	1	-3	-2	-2	1	-2	-2	-2	-33
Control37	-1	1	-1	-2	-1	-2	-2	1	-2	-1	-20
Control38	1	2	1	2	1	1	2	2	1	2	19
Control39	1	2	-1	1	-2	1	-1	-2	2	-1	-14
Control40	1	-1	2	-2	-3	2	-1	-2	-2	1	-9

**MASTER DATA SHEET OF POSTTEST SELF ESTEEM SCORE
(EXPERIMENTAL GROUP)**

Post test 2	SECTION -B Rosenberg Self-Esteem Scale (Rosenberg, 1965)										TOTAL
	Qno.1	Qno.2	Qno.3	Qno.4	Qno.5	Qno.6	Qno.7	Qno.8	Qno.9	Qno.10	
Exp1	3	3	3	2	2	2	1	1	0	3	20
Exp2	2	3	3	2	2	2	3	1	1	3	22
Exp3	3	3	2	2	2	2	2	1	2	1	20
Exp4	3	2	3	3	3	2	3	2	2	2	25
Exp5	2	2	2	2	2	1	2	1	1	3	18
Exp6	3	2	3	2	2	1	2	1	2	3	21
Exp7	2	2	2	2	2	1	2	1	1	3	18
Exp8	2	3	2	2	2	1	2	1	1	2	18
Exp9	2	3	3	2	2	1	2	1	1	3	20
Exp10	2	2	2	2	1	2	1	1	1	2	16
Exp11	2	2	2	2	1	1	2	1	1	2	16
Exp12	2	2	2	2	2	1	2	1	2	2	18
Exp13	2	2	2	2	2	1	2	1	1	2	17
Exp14	2	2	2	3	2	1	2	1	1	2	18
Exp15	2	2	3	3	2	1	2	1	1	3	20
Exp16	2	2	3	2	2	1	2	1	3	2	20
Exp17	2	1	2	2	2	2	1	2	2	2	18
Exp18	2	3	2	3	2	1	2	1	2	3	21
Exp19	2	2	2	2	1	1	1	1	2	1	15
Exp20	3	2	1	1	2	2	2	2	2	2	19
Exp21	2	2	3	2	2	2	2	3	2	2	22
Exp22	2	2	3	2	2	3	2	2	2	3	23
Exp23	3	2	3	2	1	2	2	2	2	2	21
Exp24	2	3	3	3	2	2	3	2	2	3	25
Exp25	3	3	2	2	3	2	3	2	3	2	25
Exp26	3	2	3	3	2	2	3	2	2	3	25
Exp27	3	2	2	2	2	3	3	1	3	2	23
Exp28	3	2	3	2	2	2	3	3	2	3	25
Exp29	2	2	2	2	1	2	1	1	3	2	18
Exp30	3	2	2	2	2	2	3	3	3	2	24
Exp31	1	1	2	3	2	2	3	1	2	2	19
Exp32	2	2	2	1	2	2	1	2	2	2	18
Exp33	1	1	2	3	2	2	1	1	2	3	18
Exp34	1	1	2	3	2	2	3	1	2	3	20
Exp35	3	2	3	2	3	2	2	3	3	2	25

Exp36	3	2	3	2	3	2	2	3	3	2	25
Exp37	3	3	3	3	3	3	3	3	3	3	30
Exp38	2	2	2	3	3	3	3	3	2	3	26
Exp39	3	2	3	3	3	3	3	3	2	3	28
Exp40	3	1	2	2	3	3	2	3	2	3	24

**MASTER DATA SHEET OF POSTTEST ASSERTIVE BEHAVIOUR SCORE
(EXPERIMENTAL GROUP)**

Pre test	Section – C Assertiveness										
	Subjects	Qno.1	Qno.2	Qno.3	Qno.4	Qno.5	Qno.6	Qno.7	Qno.8	Qno.9	Qno.10
Exp1	2	-3	2	-3	-3	1	-2	-2	-3	3	18
Exp2	3	2	1	-2	-3	1	1	-3	-2	1	12
Exp3	2	2	1	2	2	1	2	-2	-2	2	28
Exp4	2	-2	2	2	-2	1	2	-2	3	2	33
Exp5	2	1	1	-2	-2	2	2	-2	1	1	18
Exp6	2	2	1	1	2	-2	1	-2	2	-2	14
Exp7	1	2	2	3	2	-2	2	2	-2	2	22
Exp8	2	1	1	3	-2	2	-2	3	1	-2	20
Exp9	1	1	2	1	1	-2	2	1	2	1	25
Exp10	2	1	2	-2	1	2	1	2	-2	1	32
Exp11	2	1	1	-2	2	2	2	2	1	2	32
Exp12	1	2	2	-2	-2	2	2	-2	2	1	35
Exp13	2	1	2	-2	-2	1	-2	-2	1	2	15
Exp14	1	-2	1	3	2	-3	2	-3	3	-3	22
Exp15	2	2	1	3	2	1	-3	3	-3	1	23
Exp16	2	-2	1	3	-2	3	3	3	1	2	32
Exp17	1	2	1	1	2	-2	3	1	-2	3	27
Exp18	2	2	1	1	1	2	2	-2	1	-2	24
Exp19	1	1	-2	2	2	1	3	-2	-2	1	21
Exp20	1	1	2	2	1	2	2	-2	2	-2	17
Exp21	1	1	1	2	-2	1	2	2	-2	-2	28
Exp22	1	2	1	2	-2	1	2	2	2	1	27
Exp23	1	1	1	3	-2	3	-2	3	-3	3	20
Exp24	2	1	2	-2	1	2	1	1	1	1	22
Exp25	1	2	1	3	-2	3	-2	2	-3	1	27
Exp26	2	2	1	-2	1	-2	1	2	2	1	26
Exp27	1	2	1	-2	2	1	-2	1	2	-2	18
Exp28	1	2	1	-2	-2	1	2	3	1	-2	24
Exp29	1	2	-2	1	2	1	-2	2	2	1	29
Exp30	1	2	1	-2	2	2	-2	2	2	-2	38
Exp31	2	1	1	-2	1	1	1	1	1	-2	13
Exp32	1	2	1	-2	3	1	2	3	2	-2	23
Exp33	2	1	2	-2	2	1	2	3	2	-2	25

Exp34	2	1	1	-2	1	1	1	1	1	1	25
Exp35	1	1	2	3	-2	2	2	3	2	2	34
Exp36	2	1	2	1	2	3	1	-2	2	-2	15
Exp37	2	1	2	-2	1	2	2	-2	2	1	24
Exp38	2	1	1	-2	2	1	-2	-2	2	1	17
Exp39	2	2	1	1	2	1	-2	2	-2	1	25
Exp40	2	2	1	-2	3	-1	2	-2	2	-2	23



A POSITIVE VIBE CAN SOLVE ALL YOUR PROBLEM

