Chapter 3
Method
3.1 Design

The present research has been designed to study Assertiveness in relation to Social Anxiety, Perceived Social Self-Efficacy and Social-Emotional Skills and to assess the efficacy of Assertiveness Training Programme in enhancing Perceived Social Self Efficacy and Social Emotional Skills and in lowering Social Anxiety. Howsoever, the impact of training was also assessed on Assertiveness scores.

Pearson Product Moment correlation was computed to study the relationships.

A×B Mixed Design was applied with one factor (A) varying between-subjects (Experimental vs Control group) and the other factor (B) varying within-subjects (Pre vs Post intervention scores) to assess the efficacy of Assertiveness Training Programme (ATP) on Social Anxiety, Perceived Social Self-Efficacy and Social Emotional Skills.

One way Multivariate Analysis of Variance (MANOVA) was applied to analyse the significance of difference between Control and Experimental groups collectively on Assertiveness, Social Anxiety, Perceived Social Self-Efficacy and Social Emotional Skills.

3.2 Sample

A total of 300 female participants with the mean age of 15.8 years were selected from various public schools of Patiala after due consent of the respective principals and the participants. Students of 9th, 10th, 11th and 12th standard from four public schools were selected for inclusion in the study. Mode of selection was incidental.
The participants were administered Assertiveness and Social Anxiety scales in the first meeting then in the next meeting, the same subjects were administered Perceived Social Self Efficacy and Social Emotional Skills scales. Standardised instructions were followed while administering all the scales.

After the scoring, the participants who came low and moderate on Assertiveness, high and moderate on Social Anxiety, low and moderate on Perceived Social Self Efficacy and low and moderate on Social Emotional Skills were screened out. The first group comprised of N₁=150. Rest of N₂=150 were the participants who were high on Assertiveness, low on Social Anxiety, high on Perceived Social Self-Efficacy and high on Social Emotional Skills.

The group N₁=150 was divided into two equal groups n₁ and n₂ of 75 individuals each i.e. n₁ = n₂ = 75 where n₁ is referred to as the Experimental group and n₂ is referred to as the Control group. Participants were assigned to n₁ and n₂ randomly.

### 3.3 Tools Used

#### 3.3.1 Assertiveness: The widely used 30-item Rathus Assertiveness Schedule (RAS, Rathus, 1973) was used to assess Assertiveness. Participants rate items on a 6-point scale of ranging from +3 (very characteristic of me, extremely descriptive) to -3 (very uncharacteristic of me, extremely non-descriptive), and the items are then summed to score. RAS has 17 reverse coded items to avoid response bias. Because of the statistical anomalies resulting from summing negative and positive numerals, a constant of 100 was added to the each raw score. Split-half reliability is .77, and 8-week test–re-test reliability is .78 (Rathus, 1973).
3.3.2 Social Anxiety: The Leibowitz Social Anxiety Scale (LSAS, 1987) is a self-report measure of Social Anxiety. It is a 24 item, 4 point likert type scale i.e. from 0 to 3. Each item depicts a different social situation. The items are divided into two sub scales: Social interaction and Performance situations. For each situation, the person rates their level of fear (where 0 indicates no fear and 3 indicates severe fear) and avoidance (where 0 indicates they never avoid a particular situation and 3 indicates they usually avoid the situation). Here, in the present study, only avoidance score has been considered. So the score ranges from 0 to 72.

3.3.3 Perceived Social Self-Efficacy: The Perceived Social Self Efficacy Scale by Smith and Betz (PSSE, 2000) has been used. The scale contains 25 items on a 5-point Likert-type scale (1=no confidence at all to 5 = complete confidence). The scale items are related to: making friends, social assertiveness, pursuing romantic relationship, performance in public situations, group and parties and receiving and giving help. A sum of all scores yields a total score that ranges from 25 to 125. Higher the score, higher the level of social self-efficacy. Previous research has demonstrated an internal consistency coefficients of .94 and test-retest reliability over a three week interval ranging from .68 to .86 (Smith and Betz, 2002).

3.3.4 Social Emotional Skills: Social Skills Inventory (Riggio and Carney, 2003) was used to assess Social Emotional Skills. The scale comprises of 90 items grouped into six distinct sub-scales with 15 items comprising each sub-scale. Items are so arranged that every sixth item belongs to the same scale. The six distinct sub-scales concern expressiveness, sensitivity and control, which span both social and emotional domains. The 90 questions are responded to using a Likert – type scale ranging from 1 to 5. The consolidated score ranges from 247 to 310 or above. The six subscales are:
• **Emotional Expressivity**: an individual’s ability to express spontaneously and accurately.

• **Emotional Sensitivity**: an individual’s ability to receive and decode the non-verbal communication of other.

• **Emotional Control**: an individual's ability to control and regulate emotional and non-verbal displays. An individual high on emotional control is likely to be a good emotional actor and able to use conflicting emotional ones to mask felt emotional states.

• **Social Expressivity**: an individual’s ability of verbal skills and an ability to engage others in social interaction.

• **Emotional Sensitivity**: an individual's ability to be attentive to others i.e. watches and listens.

• **Social Control**: an individual's skill of social self-presentation i.e. being tactful, socially adept and self-confident. Out of the 90 items, 32 items are reverse-scored.

The SSI sub-scales have shown acceptable test-retest reliability, with scores ranging from .81 to .96 and Cronbach's alpha coefficients ranging from .65 to .88 (Riggio and Carney, 2003).

### 3.4 Procedure

After randomly assigning 75 individuals each to Experimental and Control group, Assertiveness Training Programme was imparted to the 75 individuals comprising Experimental group. Assertiveness Training Programme is being described in detail in the following section. The training was imparted to 75 female adolescents in 5 groups with 15 participants in each group in 6 sessions, over a period
of one and a half months, meeting them once a week for 2 hours. However, the last session lasted for 2½ hours. All the sessions were conducted in the class-rooms of the school premises after the respective Principal's consent. The participants were made to sit in a semi-circular manner to accentuate interaction among themselves, if required and also, the planned activities could be carried out in the middle space easily. The modules of the intervention stayed standard for all the groups. Keeping in mind the ethical considerations, some neutral issues like career guidance and study habits were discussed with the participants in the control group.

After imparting the training to the Experimental group, re-administration of Assertiveness, Social Anxiety, Perceived Social Self-Efficacy and Social Emotional Skills scales was done on Experimental as well as Control Group.

After this, the statistical analyses were done. SPSS-16.0 version was used for data analysis.

3.5 Assertiveness Training Programme

Session: 1

Duration: 2 hrs.

1. STRATEGY: Rapport Building

CONTENT: The participants were made to sit in a semi-circular manner so that each can face everyone else. They were instructed as follows:

"We are here to learn more about life. We will learn from each other specially to overcome the situations that demand a lot of courage from us to speak before others, to make others' understand your point of view, to say no when you don't want to do a work being
delegated, to carry yourself in social situations. I would like you all to introduce yourselves and share that one incident where you just disliked the way you carried yourself in any situation of your social life."

   Slowly and gradually, the participants opened up and shared some incidents of their lives and they enjoyed the phase.

2. **STRATEGY: Confidentiality and Group Rules.**

   **CONTENT:** The participants were instructed as follows:

   "Now, we are a group so it's very important to respect each other because the groups function best when members feel the responsibility to keep the things. Confidential is what has been said within the group setting will not be revealed outside."

3. **STRATEGY: Discriminating Assertive, Non-Assertive and Aggressive behaviour.**

   **CONTENT:** This was done by giving examples of each situation.

   The importance of being Assertive was stressed upon:

   - It reduces mental and physical stress.
   - It encourages productivity.
   - You achieve win-win solutions.
   - You respect yourself more.
   - You are more at ease because you didn't step on to someone else to get your things done.
   - It allows you to remain in control.
   - It brings greater self-confidence.
   - You feel good about yourself.
The session was concluded on this note and the participants were assigned the task of jotting 5 situations on each of these three particular kinds of behaviour.

Session – 2

Duration: 2 hrs.

1. STRATEGY: Learning to use 'I' statements

CONTENT: "One thing, which is self-defeating in social set-ups and generally, worsens the situation even more is 'blaming game' wherein the two people involved in a folly or blunder put the responsibility on each other. Here, the motive is to find a solution also and not creating unpleasantness too. The key lies in good communication as good communication, is an essential aspect to the health of any relationship. I-statements are an effective form of communication because they maintain a respectful attitude toward the receiver and also place the responsibility for change in that person. Constructed properly, they also avoid the destructive putdowns inherent in blaming, criticizing, judging, shaming, ridiculing and name-calling".

An 'I – statement' has 4 parts:

1. "I"
2. What "I" feel or want.
3. The event that evoked your feelings or desire.
4. The effect the event has on "Me".

E.g.

(i) I feel scared when you are late home from work because I worry that something might have happened to you.

(You come home late everyday)
(ii) I feel bad/insulted when you made fun of my friends amongst your friends because I felt as if I don't know how to choose friends.
(You insulted my friends).

(iii) I felt shocked when you didn't help me in the exams because I felt you'll be there when I need you.
(You didn't help me)

The stress on 'you' did this or that always deteriorates the situation. The participants practiced it over various life situations and many other examples were quoted.

2. STRATEGY: Working on Body Language

CONTENT: "Your non-verbal behaviour speaks louder than your words. A social situation can be in or out of your hands depending upon your body language. A passive, under-confident body language invites ignoring, abandoning and evaluative attitude from others. On the other hand, an assertive, confident body language invites interest, applause and inviting attitude from others."

3 participants were invited to perform an activity who were made to exhibit 3 kinds of behaviour non-verbally:

- Aggressive
- Passive
- Assertive

The stress was laid on the following aspects of body language:

- Positive (Arms, Hands, Feet, Sitting, Standing).
• Tone of Voice.
• Eye Contact
• Listening Skills
• Questioning and Interruptions
• Eye brows.
• Head shaking / nodding.

**Session – 3**

**Duration: 2 hrs.**

1. **STRATEGY:** Challenging irrational beliefs and heading towards Cognitive Restructuring (Working on Social Anxiety).

   **CONTENT:** Aaron Beck’s cognitive or rational restructuring that involves recognizing and learning to stop self defeating thoughts and Albert Ellis’ ABC model of behaviour was discussed. The emphasis was laid on questioning irrational beliefs and thoughts.

   As according to Cognitive Behavioural Theory, how you think is how you feel. Your emotions influence your behaviour. If you think realistic, helpful thoughts will follow and you function better.

   The participants were shown the following example (of someone fearing public speaking) illustrating the interaction between thoughts, physical symptoms and behaviour.
1. Unhelpful Thought
(This is not going to work. I am hopeless at public speaking, I'll sweat and everyone will see that I'm anxious and will look like an idiot.)

2. Physical Symptoms
(You sweat and your heart begins to pound)

3. Unhelpful Thought
(I feel so anxious, I'll make a total fool of myself.)

4. Physical Symptoms
(Your sweat even more.)

5. Unhelpful Thought
(I can't do this. I should escape.)

6. Behaviour
(You leave the place and as you go away, your anxiety subsides.)

7. Unhelpful Thought
(I am a loser. Everyone else can do public speaking.)

The participants were further told about how to work right at the third stage and handle the situation i.e.

• to identify unhelpful thoughts and beliefs.

• evaluate the evidence for and against your thoughts and beliefs.

• creating more realistic statements you can say to yourself when anticipating or confronting feared social situations as these will decrease the degree of anxiety you experience.
• devise a plan for gradually exposing yourself to your feared social or performance situation.

The participants were further instructed to keep a track of such unhelpful thoughts and behaviour and keep noting them. The aim should be to bring the number down to as minimal as possible.

2. **STRATEGY:** Relaxation Training collaborated with Mental Imagery.

   **CONTENTS:** Deep breathing was instructed. The participants were further trained on Jacobson’s Progressive Muscular Relaxation Technique (in sitting position) collaborating with Mental Imagery.

   **Session:** 4

   **Duration:** 2 hrs.

   By now, the stage was set where the participants started feeling more accepting of themselves and were ready for a positive change. The following lines were written for them with an aim to make them think of their potential and step forward to realize it.

   **THE ASSERTIVE GIRL**

   I am me......

   I want to be me.

   Don't stop me

   Don't close me

   I want to be me.....

   But .... where is me ?

   I want to be me.
You told me that I have to be obedient
But... You did not set the limits
You told me that I have to comply
But... you did not set the limits
I lost me.
I want to be me.
I learnt to speak slowly.
But... there is something inside.....
Something that yells ....yells at the top of its voice.
I learnt to walk slowly.
But.........there is something inside....
Something that pushes... pushes and gears me to run, tread the downtrodden path ... mount on a high cliff, feel the breeze and yell to tell the world..... "I am happy."
I want to be me
I find me
I find life.
I feel a glaze inside
It's just like that of a sun
I feel a shine inside
It's just like that of the stars
Don't stop me
Don't close me
I want to be me.
Riding a soft cloud and reaching the far end of the clouds is what I want to do.

I want to sit on the head of the fountain to see the world.....

I want to be a steady rock for the generations to come......

Don't stop me.

Don't close me.

I want to be me........

Ruby Gupta

1. **STRATEGY:** Modelling

**CONTENT:** Here, Live as well as Symbolic modeling was used.

The participants were shown 3 videotapes of different situations:

1. An inspirational animated story.
2. A prominent Indian political leader addressing the public.
3. Presentation being conducted by a new employee in corporate sector.

The aim of this symbolic modeling was:

1. Appropriate expression of feelings i.e. to be open and frank within a social context.
2. Greeting others: imitating and maintaining conversations.
3. Disagreement: contradict and attack with knowledge and rhetorical ability to make a point.
4. Asking why: Questioning and insisting upon valid reasons for demands that appear arbitrary.
5. Talking about oneself: deliberate use of the word, 'I'.

6. Rewarding others for complements: express agreement when you are praised.

7. Refusing to justify opinions: refusing to be manipulated by people who initiated and maintain arguments for social dominance rather than for sincere search for truth.

8. Looking people in the eye: a sign of being sure of knowledge and social ascendance.

2. STRATEGY: Role Play

CONTENT: The following training procedure was administered:

1. The situation was described.

2. The participants responded covertly.

3. The participants heard the response of the facilitator regarding what constituted and assertive response in the situation.

4. The situation was role-played.

• Two situations were role-played.

• 10 minutes were allotted for each situation.

• Discussion of assertive responses took place at the end of each situation.

Situation 1

Facilitator: One of your classmates, someone whom you do not know very well, borrowed your class notes a week ago but failed to
return them at the next class thus forcing you to take notes on scrap paper. Now, this person comes up to you again and says, "Hallo! Can I borrow your class notes again?" What do you say?

The facilitator continues: Now listen to an assertive response to this same situation: "No, as I just cannot be sure whether you are going to return them back in time."

Let the person know that your refusal was based on his/her past behaviour.

- Your response is clear and brief and unambiguous.
- Your voice is well-controlled.

After this, the situation was role-played, which the participants did 5 times with different set of participants.

**Situation 2**

**Facilitator:** In this scene, picture yourself standing in a ticket line outside of a theatre. You have been in line now for atleast 10 minutes and the movie is about to start. As you are waiting patiently, two people walk up in your front and intend to cut in line.

"Now listen to an assertive response to this situation: "Excuse me, I have been waiting in this line for a while so I would appreciate if you would wait at the end of the line just like I did"."

Let the person know that he/she was violating your rights and your expectations were that each person had to abide by the same rules as everyone else for waiting in line.

- Your response is clear and brief and unambiguous.
- Your voice is firm and confident but well-controlled.
After this, the situation was role played, which the participants did 5 times with different sets of participants.

After this, the session was concluded and the participants were instructed to think about and internalize what they learnt that day.

Session: 5

Duration: 2 hrs.

1. **STRATEGY:** Working on Social Emotional Skills.

**CONTENT:** Based on CASEL and New Haven Social Development Curriculum Scope (developed by New Haven Public School, Connecticut), the following array of inter-related skills, attitudes, values and domains of information that lay a foundation for constructive development and behavior keeping in mind the needs of Indian adolescents.

The following aspects were stressed upon:

**Skills**

**Self Management**

- Self-monitoring.
- Self-control.
- Stress Management.
- Self Reward.

**Problem Solving and Decision Making**

- Problem recognition.
- Perspective taking.
- Realistic Goal setting.
- Awareness of adaptive response strategy.
- Alternative solution thinking.
• Consequential thinking.
• Decision making.
• Behavioural Enactment.

Communication
• Understanding non-verbal communication.
• Sending and Receiving Messages.

Attitude and Values
About self
• Self-respect.
• Feeling capable
• Willingness to grow
• Self acceptance.

About Others
• Awareness of social norms and values.
• Accepting individual differences.
• Respecting human dignity.
• Comparison for others.
• Valuing co-operation.
• Willingness to solve inter-personal problems.

About Tasks
• Willingness to work hard.
• Motivation to solve practical problems and academic problems.

RELATIONSHIPS
• Understanding relationships.
• Multicultural Awareness.
• Making friends.
• Bonding to pro-social peers.
• Understanding family life.
• Relating to parents.
• Relating to siblings.
• Conflict Education and Violence Prevention.

HEALTH
• Nutrition.
• Exercise.
• Personal Hygiene.
• Use of leisure time.
• Spiritual Awareness.
• Environmental Responsibility.

Session: 6

Duration: 2.30 hrs.

The group was thanked for participation. They were encouraged to share their experience of participation in the programme.

Re-administration of Assertiveness and Social Anxiety scales was done. After a break of 10 minutes, re-administration of Perceived Social Self Efficacy and Social Emotional Skills scales was done.

The same day, re-administration of all the four above mentioned scales on Control Group was also done in the same manner.
The Intervention Protocol is presented as follows:

<table>
<thead>
<tr>
<th>SESSIONS</th>
<th>TECHNIQUES USED</th>
<th>I</th>
<th>II</th>
<th>III</th>
<th>IV</th>
<th>V</th>
<th>VI</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>2 hrs.</td>
<td>2 hrs.</td>
<td>2 hrs.</td>
<td>2 hrs.</td>
<td>2 hrs.</td>
<td>2.30 hrs.</td>
</tr>
<tr>
<td>3.</td>
<td>Discriminating Assertive, Non-Acrtive &amp; Aggressive Behaviour</td>
<td></td>
<td></td>
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</tbody>
</table>

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Chapter 4

Results & Discussion
RESULTS AND DISCUSSION

The present research aims to study Assertiveness in relation to Social Anxiety, Self Efficacy and Social-Emotional Skills and the impact of Assertiveness Training Programme in enhancing Perceived Social Self Efficacy and Social Emotional Skills and lowering Social Anxiety. Howsoever, the impact of training was also assessed on Assertiveness scores.

The statistical findings of the study are presented from Table 1.0 to Table 8.0. Graphical Representations are depicted from Figure 1.0 to Figure 4.0. Table 1.0 depicts the correlation coefficients showing relationship amongst Assertiveness, Social Anxiety, Self Efficacy and Social Emotional Skills.

Tables 2.1 to 5.4 show Means, SDs, F-ratios, Interaction Means and Simple Effects’ summaries of Assertiveness, Social Anxiety, Self-Efficacy and Social Emotional Skills’ scores.

Tables 6.0 and 7.0 reflect the comparison of Control and Experimental Groups on post intervention scores of all the variables and ANOVA Summary for the effect of Intervention on all the variables respectively.

Table 8.0 represents MANOVA Summary for the Effect of Intervention on Assertiveness, Social Anxiety, Self-Efficacy and Social Emotional Skills.
Table 1: Correlation coefficients showing relationship among Assertiveness, Social Anxiety, Self-Efficacy and Social Emotional Skills.

<table>
<thead>
<tr>
<th></th>
<th>Assertiveness</th>
<th>Social Anxiety</th>
<th>Self-Efficacy</th>
<th>Social Emotional Skills</th>
</tr>
</thead>
<tbody>
<tr>
<td>Assertiveness</td>
<td>1.00</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Social Anxiety</td>
<td>-0.14*</td>
<td>1.00</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Self-Efficacy</td>
<td>0.16*</td>
<td>0.05</td>
<td>1.00</td>
<td></td>
</tr>
<tr>
<td>Social Emotional skills</td>
<td>0.08</td>
<td>0.07</td>
<td>0.61**</td>
<td>1.00</td>
</tr>
</tbody>
</table>

**p<0.01
*p<0.05

Now, it can be observed from Table 1.0 that Assertiveness and Social Anxiety were negatively related and the relationship was significant at p<0.05, which depicts that individuals low on Assertiveness would be high on Social Anxiety and vice-versa. Further, Table 1.0 shows that Assertiveness and Self-Efficacy were positively related and the relationship came out to be significant at p<.05, connoting that individuals high on Assertiveness would be high on Self-Efficacy also and vice-versa i.e. an assertive individual is an efficacious individual. These two findings support the first two hypotheses that Assertiveness and Social Anxiety would be negatively related and Assertiveness and Self Efficacy would be positively related.

Further, Table 1.0 reflects that Assertiveness and Social Emotional Skills were positively related but the value did not reach the level of significance. Similar is the case for the relationship
between Social Anxiety and Self-Efficacy as well as Social Anxiety and Social Emotional Skills that neither the value was significant nor the direction came as expected as per the proposed hypotheses that both the relationships would be negatively related. However, Table 1.0 further emphasises that Self-Efficacy and Social Emotional Skills were positively related ($r=.61$, $p<.01$). It revealed that the individuals high on Self-Efficacy would be high on Social Emotional Skills also and vice-versa.

As depicted by Table 1.0, Assertiveness & Social Anxiety were significantly negatively related and Assertiveness & Perceived Social Self Efficacy (PSSE) were significantly positively related. The findings are in line with the proposed hypotheses. An assertive individual will not be an anxious individual so far as social situations are concerned. These findings are quite consonant with those reported by Lin et al (2004), Schry & White (2013) and Wesley & Mattaini (2008). As a socially anxious person is afraid of social situations that involve interaction with other people for the fear of being negatively evaluated by others, it becomes difficult for him/her to speak up or assert oneself because of the fear of rejection. This fear is caused by the concerns of embarrassment, humiliation or negative evaluations by others (Luterek, 2007). The behaviour of socially anxious people is non-assertive and their primary goal is to avoid rejection at all costs and maintain some degree of connectedness with others (Clark & Wells, 1995). Moreover, lack of assertion and overreliance on others mediate the association between anxiety and interpersonal stress (Alden & Taylor, 2004; Joanne & Gayle, 2002). Creed & Funder (1998) and Lesure- Lester (2001) also reported that undergraduate students who report high level of social anxiety have been shown to be less assertive.
Further, the results revealed that an assertive individual is an efficacious individual and vice-versa. Social self-efficacy has been suggested to impact various domains of an individual's life experiences such as social adjustment (Ferrari & Parker, 1992; Smith & Betz, 2002). Poyrazli et al (2002) have also established a relationship between assertiveness and self-efficacy. The amazing construct put forth by Bandura centers on self-evaluation processes i.e. a belief in one's competence as well as one's environment and an efficacious individual perceives his environment to be responsive & receptive to his/her actions and this leads to personal effectiveness too (Bandura, 1977, 1981, 1986).

The correlation coefficients of Assertiveness & Social-Emotional Skills, Social Anxiety & Perceived Social Self-Efficacy and Social-Anxiety and Social Emotional Skills were not found to be significant. This may have happened due to sampling error. However, the literature has research evidence for the presence of a relationship between all the above mentioned variables reported by Greenberg et al (2003), Smith & Betz (2000, 2002), Asendorpf (1990), Coplan et al (2004), Nelson, Rubin & Fox (2005).

Though Assertiveness was not found to be correlated with Social Emotional Skills significantly, but the Social Emotional Skills, further, correlate significantly with PSSE. Table 1.0 revealed a significant positive correlation between PSSE and Social Emotional Skills with a magnitude of .61. A socially efficacious individual is a socially-emotionally skilled individual. Research suggests that lack of Social Emotional Skills and Assertiveness endangers people’s mental health (Liberman, 1992 from Shahbazi, 2005).
Healthy social emotional development in individuals unfolds in an inter-personal context. A person with social emotional competence has skills that facilitate social interaction with peers (Elias & Haynes, 2008). Social Emotional Development is an important aspect of self-efficacy (Bandura, 1986). The Collaborative for Academic, Social and Emotional Learning (CASEL) describes Social-Emotional Skills as including a strong work-ethic, team-work, self-efficacy and confidence.

On the whole, the relationships between Assertiveness and Social Anxiety, Assertiveness and Self-Efficacy and Self-Efficacy and Social Emotional Skills have come out to be significant.

Further, the present study intends to assess the efficacy of Assertiveness Training Programme on Social Anxiety, Perceived Social Self Efficacy and Social Emotional Skills. Here, it is important to mention that the scores on Assertiveness have also been statistically analysed as shown from Tables 2.1 to 2.4.

**Table 2.1**: Comparison of Means, SDs and F-ratios of Control-Experimental groups and Pre-Post intervention scores of Assertiveness.

<table>
<thead>
<tr>
<th>VARIABLES</th>
<th>LEVELS</th>
<th>MEANS</th>
<th>SD</th>
<th>F-RATIO</th>
</tr>
</thead>
<tbody>
<tr>
<td>Groups</td>
<td>Control</td>
<td>97.90</td>
<td>8.82</td>
<td>85.28**</td>
</tr>
<tr>
<td></td>
<td>Experimental</td>
<td>109.07</td>
<td>11.45</td>
<td></td>
</tr>
<tr>
<td>Test Scores</td>
<td>Pre-Intervention</td>
<td>99.03</td>
<td>9.29</td>
<td>152.19**</td>
</tr>
<tr>
<td></td>
<td>Post Intervention</td>
<td>107.94</td>
<td>12.06</td>
<td></td>
</tr>
</tbody>
</table>

**p<.01
### Table 2.2: ANOVA Summary for Assertiveness scores.

<table>
<thead>
<tr>
<th>SOURCE OF VARIANCE</th>
<th>SS</th>
<th>df</th>
<th>MS</th>
<th>F</th>
</tr>
</thead>
<tbody>
<tr>
<td>Groups (A)</td>
<td>9363.25</td>
<td>1.00</td>
<td>9363.25</td>
<td>85.28**</td>
</tr>
<tr>
<td>Error</td>
<td>16249.69</td>
<td>148.00</td>
<td>109.80</td>
<td></td>
</tr>
<tr>
<td>Test Scores (B)</td>
<td>5949.65</td>
<td>1.00</td>
<td>5949.65</td>
<td>152.19**</td>
</tr>
<tr>
<td>AB</td>
<td>3136.33</td>
<td>1.00</td>
<td>3136.33</td>
<td>80.22**</td>
</tr>
<tr>
<td>Error</td>
<td>5786.01</td>
<td>148.00</td>
<td>39.09</td>
<td></td>
</tr>
</tbody>
</table>

**p<.01

### Table 2.3: Means of Assertiveness scores showing interaction of Control-Experimental groups and Pre-Post intervention scores.

<table>
<thead>
<tr>
<th>Comparison groups</th>
<th>Groups</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Control</td>
</tr>
<tr>
<td>Test Scores</td>
<td>Pre Intervention</td>
</tr>
<tr>
<td></td>
<td>Post Intervention</td>
</tr>
</tbody>
</table>

### FIGURE 1.0: Graphical representation of Means of Assertiveness scores showing interaction of Control-Experimental groups and Pre-Post intervention scores.
Table 2.4: Summary of ANOVA of Simple effects of Assertiveness scores of: Groups (A) on Pre-Post Intervention scores (B) and Pre-Post Intervention scores (B) on Control and Experimental Groups (A)

<table>
<thead>
<tr>
<th>SOURCE OF VARIANCE</th>
<th>SS</th>
<th>df</th>
<th>MS</th>
<th>F-ratio</th>
</tr>
</thead>
<tbody>
<tr>
<td>A FOR B1</td>
<td>830.73</td>
<td>1.00</td>
<td>830.73</td>
<td>7.57</td>
</tr>
<tr>
<td>A FOR B2</td>
<td>11668.86</td>
<td>1.00</td>
<td>11668.86</td>
<td>106.08**</td>
</tr>
<tr>
<td>Error</td>
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<td>109.80</td>
<td></td>
</tr>
<tr>
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<td>223.26</td>
<td>5.71</td>
</tr>
<tr>
<td>B FOR A2</td>
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<td>1.00</td>
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<td>227.25**</td>
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<td>Error</td>
<td>5786.01</td>
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<td>39.09</td>
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</tbody>
</table>

**p<.01

A- Groups (Control& Experimental)
B1 - Pre-Intervention scores
B2- Post-Intervention scores
B- Pre-Post Intervention scores
A1- Control Group
A2- Experimental Group

Firstly, Table 2.1 shows the comparison of the means and standard deviations of Control-Experimental groups and Pre-Post Intervention scores of Assertiveness. It can be observed that the mean scores of Experimental group (M=109.07, SD =11.45) were higher as compared to Control Group (M=97.90, SD = 8.82) and the difference between the two groups was statistically significant \( F(1,148) = 85.28, p<.01 \). It refers to the finding that experimental group got benefited so far as Assertiveness Training Programme (ATP) is concerned. The
same is the case with pre-intervention scores \((M=99.03; SD=9.29)\), which were lower than the post-intervention scores \((M=107.94; SD=12.06)\) and the difference is statistically significant \(F(1,148) = 152.19, p<.01\).

Table 2.2 represents ANOVA Summary for Assertiveness scores. It is evident that the main effect of Groups (Control – Experimental) \(F(1,148) = 85.28, p<.01\) and Test Scores (Pre-Post) \(F(1,148) = 152.19, p<0.1\) as well as the Interaction between the two \(F(1,148)=80.22, p<0.1\) came out to be significant.

Table 2.3 shows the Interaction table of the means of Control – Experimental groups and Pre-post intervention scores. Figure 1.0 is the graphical representation of the findings on Assertiveness scores.

Now since the Interaction is significant, Table 2.4 shows the summary of ANOVA of Simple Effects of Assertiveness scores of Groups on Pre-Post Intervention scores and Pre-Post Intervention scores on Groups.

As evident from Table 2.1, experimental group participants showed significantly higher assertiveness as compared to those in control group \(F(1, 148) = 85.28, p <.01\). Also the post intervention scores on Assertiveness in experimental group were also found to be significantly higher \(F(1,148) = 152.19, p<.01\) as compared their pre-intervention scores. As the interaction \(F(1,148) = 80.22, p <.01\) between groups and pre-post intervention scores on Assertiveness came out to be significant, examining the group simple effects was chosen to be done (as shown in Table 2.4) i.e. the difference between control and experimental groups for each of the two scores on Assertiveness (pre & post). Table 2.4 revealed that Pre-Intervention scores of Control & Experimental groups did not differ significantly
but Post-Intervention scores of both the groups did differ significantly. Pre-post intervention scores of experimental group differ significantly at .01 level and pre-post-intervention scores of control group did not differ significantly from each-other. The deduced finding is that it is actually Post-Experimental scores that differ significantly from Pre-Control, Pre-Experimental and Post-Control scores reinforcing the efficacy of Assertiveness Training Programme. Figure 1.0 also showed an ordinal interaction showing a marked increase in Post-intervention scores of Experimental group.

The findings can be explained in the light of Hartmann's (1964) theoretical framework i.e. in the process of learning, one is increasing its mastery over the environment and through this fitting together with the external world, one develops the capacity to regulate equilibrium by means of autoplastic modifications of the self and alloplastic modifications of the environment. In turn, the individual progresses by not just learning the demands of the environment effectively but also learning to cope with the demands in a productive manner. Assertiveness is one such demand, which is placed on the individual in the social situations every now & then and not been able to adjust regularly only leads towards a debilitating and frustrating style of life and as & when the person realizes this, he/she makes an effort to either change himself/herself or try and bring changes in the environment. Social learning theory (Bandura, 1977) also lends a helping hand by making the individual realise that one still stands a chance and life can be better. One can still learn from the self-enhancing behaviour of others. One should have a desire to learn and change. The focus of the intervention was thus to make the adolescents realise and then trying to inculcate the change within. In India, there is a paucity of research on assertiveness in women (Uberoi, 2010). Generally, the assertiveness literature supports the
positive changes on self-esteem, self-concept and general self-enhancement. Researchers like Alberti & Emmons (1974), Bower & Bower (1976), Lange & Jacobowski (1976), Combes (1995) have shown research results quite in line with each other on assertiveness and assertiveness training that the training is a necessary component in bringing about change in one's social lives and their assertive responses to specific situations. But such a change comes with a word of caution that when assertive changes in the behaviour occur, it is useful to be aware of some possible reactions to newly acquired assertive behaviours as the trainers can be prepared beforehand against the possible negative reactions that may come from their own environment (Sert, 2003).


Wise (1991) found that assertiveness training is effective in educating the adolescents on personal transaction and social responsibility. Assertiveness training techniques may be used to help socially shy adolescents to make them learn the skills necessary for initiating and maintaining socially supportive inter-personal relationships as such relations are strong protective factors against an array of adolescent mental health problems and can increase the feelings of self-efficacy and self-esteem (Eskin, 2003).

The rapid social and technological changes exert pressures on the youth and adolescents of each era. The present youth will always
be different from the youth of yester years because the environment places its own demands and forces the individual to undergo a transformation in terms of communication and social presentations. The present study regards these adolescents, especially females, as self-organising, proactive, self-regulating and self-reflecting beings provided they are insightful for the need of a change. This thought is made the basic premise of trying to reduce adolescent females’ Social Anxiety and enhancing PSSE and Social Emotional Skills by imparting Assertiveness Training.

In the present study, the concept of Assertiveness gets more meaningful when defined in terms of selected indices/indicators such as Social Anxiety, Perceived Social Self Efficacy and Social Emotional Skills. The present research investigation attempted to observe the efficacy of Assertiveness Training after exploring the correlation amongst Assertiveness, Social Anxiety, Perceived Social Self Efficacy and Social Emotional Skills.

Assertiveness Training is conceptualized as a highly structured behavioural procedure that facilitates the substitution of withdrawing or inhibiting behavior with socially appropriate, expressive and outgoing behavior. The basic premise is that every individual possesses basic human rights and that the goal of assertiveness training should be to teach the individual how to stand up for these rights without violating the rights of others (Pope, 1986).

In the present study, assertiveness training was imparted to the individuals high and moderate on social anxiety, low and moderate on social self-efficacy and social-emotional skills following the basic tenants of assertiveness training. The female adolescents got benefited in non-threatening group setting.
Table 3.1: Comparison of Means, SDs and F-ratios of Control-Experimental groups and Pre-Post intervention scores of Social Anxiety.

<table>
<thead>
<tr>
<th>VARIABLES</th>
<th>LEVELS</th>
<th>MEANS</th>
<th>SD</th>
<th>F-RATIO</th>
</tr>
</thead>
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<td>Groups</td>
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<td>38.67</td>
<td>7.42</td>
<td>24.45**</td>
</tr>
<tr>
<td></td>
<td>Experimental</td>
<td>34.23</td>
<td>6.72</td>
<td></td>
</tr>
<tr>
<td>Test Scores</td>
<td>Pre-Intervention</td>
<td>39.32</td>
<td>6.66</td>
<td>142.27**</td>
</tr>
<tr>
<td></td>
<td>Post Intervention</td>
<td>33.58</td>
<td>7.01</td>
<td></td>
</tr>
</tbody>
</table>

**p<.01

Table 3.2: ANOVA Summary for Social Anxiety scores.

<table>
<thead>
<tr>
<th>SOURCE OF VARIANCE</th>
<th>SS</th>
<th>df</th>
<th>MS</th>
<th>F</th>
</tr>
</thead>
<tbody>
<tr>
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<td>1482.96</td>
<td>1.00</td>
<td>1482.96</td>
<td>24.45**</td>
</tr>
<tr>
<td>Error</td>
<td>8975.79</td>
<td>148.00</td>
<td>60.65</td>
<td></td>
</tr>
<tr>
<td>Test Scores (B)</td>
<td>2471.07</td>
<td>1.00</td>
<td>2471.07</td>
<td>142.27**</td>
</tr>
<tr>
<td>AB</td>
<td>911.76</td>
<td>1.00</td>
<td>911.76</td>
<td>52.49**</td>
</tr>
<tr>
<td>Error</td>
<td>2570.67</td>
<td>148.00</td>
<td>17.37</td>
<td></td>
</tr>
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</table>

**p<.01

Table 3.3: Means of Social Anxiety scores showing interaction of Control- Experimental groups and Pre-Post intervention scores.

<table>
<thead>
<tr>
<th>Comparison groups</th>
<th>Groups</th>
</tr>
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<tbody>
<tr>
<td></td>
<td>Control</td>
</tr>
<tr>
<td>Test Scores</td>
<td>Pre-Intervention</td>
</tr>
<tr>
<td></td>
<td>Post Intervention</td>
</tr>
</tbody>
</table>
FIGURE 2.0: Graphical representation of Means of Social Anxiety scores showing interaction of Control-Experimental groups and Pre-Post intervention scores.

Table 3.4: Summary of ANOVA of Simple effects of Social Anxiety scores of: Groups (A) on Pre-Post Intervention scores (B) and Pre-Post Intervention scores (B) on Control and Experimental Groups (A)

<table>
<thead>
<tr>
<th>SOURCE OF VARIANCE</th>
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<th>df</th>
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<th>F-ratio</th>
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<td>2360.17</td>
<td>1.00</td>
<td>2360.17</td>
<td>38.92**</td>
</tr>
<tr>
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<td>148.00</td>
<td>60.65</td>
<td></td>
</tr>
<tr>
<td>B FOR A1</td>
<td>190.41</td>
<td>1.00</td>
<td>190.41</td>
<td>10.96**</td>
</tr>
<tr>
<td>B FOR A2</td>
<td>3192.43</td>
<td>1.00</td>
<td>3192.43</td>
<td>183.80**</td>
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<tr>
<td>Error</td>
<td>2570.67</td>
<td>148.00</td>
<td>17.37</td>
<td></td>
</tr>
</tbody>
</table>

**p<0.01

A- Groups (Control& Experimental)
B1- Pre-Intervention scores.
B2- Post-Intervention scores
B- Pre-Post Intervention scores
A1- Control Group
A2- Experimental Group
Further, Table 3.1 shows the means and standard deviations of Control – Experimental groups and Pre-post Intervention scores of Social Anxiety. It is clear that the mean scores of Experimental group (M=34.23, SD=6.72) were lower as compared to Control group (M=38.67, SD=7.42) and the difference was statistically significant \( F (1, 148) = 24.45, p < .01 \). Also, the post intervention scores (M=33.58, SD =7.01) were lower as compared to pre-intervention scores (M=39.32, SD = 6.66) and again, the difference stood statistically significant \( F (1,148) = 142.27, p < .01 \).

Table 3.2 represents the ANOVA summary for Social Anxiety scores. It is evident that the main effect of Groups \( F (1,148) = 24.45, p < .01 \) and Pre-post intervention scores \( F (1,148) = 142.27, p < .01 \) as well as Interaction of the two \( F (1,148) = 52.49, p < .01 \) came out to be significant. Figure 2.0 shows the pictorial representation of the findings. However, the findings are in line with the fifth hypothesis of the study that the individuals who receive Assertiveness Training would have a significantly lower score on Social Anxiety than the individuals, who receive no training. Table 3.3 shows the Interaction table of the means of Control- Experimental groups and Pre-post intervention Scores. Table 3.4 shows the summary of ANOVA of simple effects of Social Anxiety scores of groups on pre-post intervention scores and pre-post intervention scores on groups.

A significant interaction \( F (1,148) = 52.49, p < .01 \) led to the computation of simple effects (Table 3.4), which further revealed that control and experimental groups did not differ significantly on pre-intervention scores but they did differ significantly on post-intervention scores \( F (1,148) = 38.92, p < .01 \). Also, pre-post intervention scores of experimental group differ significantly \( F (1,148) = 183.80, p < .01 \). An intriguing question is, a significant difference of
pre-post scores of control group. Undoubtedly, this can be attributed to the demand characteristics (McCambridge, 2012; Orne, 2000, 1962). Figure 2 also supports this contention, which represents the ordinal interaction in graphical form and it further clears the picture i.e. there is a steep decline in the post scores of the experimental group whereas, for post scores of control group, this decline is quite understated. So the hypothesis that the individuals who receive Assertiveness Training will have a significantly lower score on Social Anxiety than the individuals, who receive no training, gets proved here. The findings can be discussed in the light of Cognitive Behavioural Theory of A.T. Beck (1976), which is based on the cognitive model i.e. The way we perceive situations influences how we feel emotionally or how you think is how you feel. As the technique of Cognitive Restructuring was used in the training, it can be deduced that due to the influence of emphasising the role of inaccurate beliefs in feeling anxious in social situations and learning to challenge these irrational beliefs and thoughts, the participants must have explored the accuracy of their own beliefs, rather they learnt to question these beliefs and protecting themselves from the biasing effects of schema-driven processing. When one learns to identify faulty thinking and turn trying to modify beliefs and learning to relate to others in a different way, a change in behaviour definitely occurs and the same is depicted by the findings. Also, when you learn to respect yourself, your Self-Presentation or your Sociometer perceptions do no longer remain controlled by external forces (people & environment) but become a function of you as an individual being and your choices about people and the environment, wherein you are not an object to be evaluated but a person with the choice i.e. who you are exactly. You may be like-minded with some and may not be with others. And if someone doesn’t acknowledge you, then it is not a question-mark on your existence!
The superiority of the experimental group over the control group in the acquisition of desirable results through the inclusion of Assertiveness training programme and a consequent reduction in social anxiety corroborated the findings of previous researches such as Ghafarzade (1999), Calantari, Molavi & Neshatdust (2006), Moshaveri (2001), Schry (2011), Nisy & Yeylag (2001) and Mojtaba (2011).

**Table 4.1:** Comparison of Means, SDs and F-ratios of Control-Experimental groups and Pre-Post intervention scores of Self Efficacy.

<table>
<thead>
<tr>
<th>VARIABLES</th>
<th>LEVELS</th>
<th>MEANS</th>
<th>SD</th>
<th>F-RATIO</th>
</tr>
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<tbody>
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<td>73.15</td>
<td>11.00</td>
<td>23.79**</td>
</tr>
<tr>
<td></td>
<td>Experimental</td>
<td>80.87</td>
<td>13.99</td>
<td></td>
</tr>
<tr>
<td>Test Scores</td>
<td>Pre-Intervention</td>
<td>72.57</td>
<td>11.73</td>
<td>112.20**</td>
</tr>
<tr>
<td></td>
<td>Post Intervention</td>
<td>81.45</td>
<td>13.02</td>
<td></td>
</tr>
</tbody>
</table>

**Table 4.2:** ANOVA Summary for Self Efficacy scores.

<table>
<thead>
<tr>
<th>SOURCE OF VARIANCE</th>
<th>SS</th>
<th>df</th>
<th>MS</th>
<th>F</th>
</tr>
</thead>
<tbody>
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<td>4469.88</td>
<td>23.79**</td>
</tr>
<tr>
<td>Error</td>
<td>27811.11</td>
<td>148.00</td>
<td>187.91</td>
<td></td>
</tr>
<tr>
<td>Test Scores (B)</td>
<td>5914.08</td>
<td>1.00</td>
<td>5914.08</td>
<td>112.20**</td>
</tr>
<tr>
<td><strong>AB</strong></td>
<td>5668.05</td>
<td>1.00</td>
<td>5668.05</td>
<td>107.54**</td>
</tr>
<tr>
<td>Error</td>
<td>7800.87</td>
<td>148.00</td>
<td>52.71</td>
<td></td>
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</tbody>
</table>

**p<.01
Table 4.3: Means of Self Efficacy scores showing interaction of Control-Experimental groups and Pre-Post intervention scores.

<table>
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<th>Comparison groups</th>
<th>Groups</th>
</tr>
</thead>
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<td></td>
<td>Control</td>
</tr>
<tr>
<td>Test Scores</td>
<td></td>
</tr>
<tr>
<td>Pre-Intervention</td>
<td>73.05</td>
</tr>
<tr>
<td>Post Intervention</td>
<td>73.24</td>
</tr>
</tbody>
</table>

FIGURE 3.0: Graphical representation of Means of Self Efficacy scores showing interaction of Control-Experimental groups and Pre-Post intervention scores.
Table 4.4: Summary of ANOVA of Simple effects of Self Efficacy scores of: Groups (A) on Pre-Post Intervention scores (B) and Pre-Post Intervention scores (B) on Control and Experimental Groups (A)

<table>
<thead>
<tr>
<th>SOURCE OF VARIANCE</th>
<th>SS</th>
<th>df</th>
<th>MS</th>
<th>F-ratio</th>
</tr>
</thead>
<tbody>
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<td>35.53</td>
<td>1.00</td>
<td>35.53</td>
<td>0.19</td>
</tr>
<tr>
<td>A FOR B2</td>
<td>10102.41</td>
<td>1.00</td>
<td>10102.41</td>
<td>53.76**</td>
</tr>
<tr>
<td>Error</td>
<td>27811.11</td>
<td>148.00</td>
<td>187.91</td>
<td></td>
</tr>
<tr>
<td>B FOR A1</td>
<td>1.31</td>
<td>1.00</td>
<td>1.31</td>
<td>0.02</td>
</tr>
<tr>
<td>B FOR A2</td>
<td>11580.83</td>
<td>1.00</td>
<td>11580.83</td>
<td>219.71**</td>
</tr>
<tr>
<td>Error</td>
<td>7800.87</td>
<td>148.00</td>
<td>52.71</td>
<td></td>
</tr>
</tbody>
</table>

**p<0.01

A- Groups (Control& Experimental)

B1- Pre-Intervention scores.

B2- Post-Intervention scores

B- Pre-Post Intervention scores

A1- Control Group

A2- Experimental Group

Further, Table 4.1 shows the means and standard deviations of Control-Experimental groups and pre-post intervention scores of Perceived Social Self-Efficacy. It reflects that the mean scores of Experimental group (M=80.87, SD=13.99) were higher as compared to Control group (M= 73.15, SD = 11.00) and the difference was statistically significant {F (1,148) = 23.79, p<.01}. Also, the post intervention mean scores (M= 81.45, SD= 13.02) were higher as compared to pre-intervention mean scores (M = 72.57, SD = 11.73)
and again the difference was statistically significant \( F (1,148) = 112.20, p<.01 \).

Table 4.2 represents the ANOVA summary for Perceived Social Self-Efficacy. It clearly showed that the main effect of Groups \( F (1,148) = 23.79, p<.01 \) and Pre-post intervention scores \( F (1,148) = 112.20, p<.01 \) as well as the Interaction of the two \( F (1,148) = 107.54, p<.01 \) came out to be significant. Table 4.3 shows the interaction table of the means of Control-Experimental groups and pre-post intervention scores. Figure 3.0 gives the pictorial representation of the findings. A significant interaction again led to gauging of simple effects. Table 4.4 shows the summary of ANOVA of simple effects of Perceived Social Self-Efficacy scores of groups on pre-post intervention scores and pre-post Intervention scores on groups.

Embarking on tables 4.1 to 4.4 and the figure 3, the findings again establish the virtue of ATP in relation with perceived social self efficacy. The findings manifested that the experimental group participants exhibited significantly higher score on perceived social self-efficacy as compared to those in control group and the post-intervention scores on the construct were also found to be significantly higher than the pre-intervention scores. Simple Effects Analyses (Table 4.4) proclaimed that both control as well as experimental groups did not differ significantly from each-other on pre-intervention scores. However, both the groups differ significantly on post-intervention scores. Further, the table 4.4 also demonstrated that pre and post intervention scores of control group on perceived social self-efficacy scores did not differ significantly but pre and post intervention scores of experimental group did differ significantly. So
one can culminate with the idea that it is the Experimental group, whose post-intervention scores differ significantly from its pre-scores as well as pre and post scores of Control group. So again the findings can be well attributed to the competence of ATP. Figure 3.0 also shows an almost dis-ordinal interaction displaying a sharp increase in Post-intervention Experimental group scores.

Adolescence is not just transitional but a positive stage of life, which is full of possibilities and potential. If adolescents are genuinely interested in learning something, they do it with the best of their ability. Social self-efficacy is such a virtue, which everyone wants to be embellished with but important is the realisation that one needs to incorporate it within. Assertiveness Training helps the adolescents on this and once they start tapping their potential, they do come out with promising results. Self-Efficacy encapsulates a sense of confidence that the individual can elicit positive outcomes (Zimmerman & Cleary, 2001). Self-efficacy has been conceptualised as an antecedent due to its proactive impact on performance and its importance in the self-evaluation that takes place after a performance (Zimmerman & Cleary, 2001; Usher & Pajares, 2008). Self-efficacy does not stay fixed rather it is continually being impacted by the environment being a malleable construct. Family, school experiences and peer networks can all impact self-efficacy (Schunk & Meece, 2001). The present findings show that when a low efficacy person is disseminated with the cues and information in a conducive and accepting environment, things do change for the better.

The findings can further be discussed in the light of Bandura's (1977) theoretical framework, where he assumes that the development
of self-efficacy is influenced by the development of the capacity for symbolic thought and the development of a sense of personal agency, of an understanding that actions produce results by developing the capacity of self-observation and self-reflection. Bandura (1997) further suggests that first-hand mastery experience in a specific domain of functioning increases an individual's perceptions of personal efficacy for coping with the challenges that the domain asks for. That's how, Assertiveness Training, through the techniques of Modelling and Role-Play offer the opportunity to engage in powerful mastery experiences through practicing new behaviours and skills, which consequently enhance efficacy beliefs and assertiveness. The findings were in line with Weitlauf et al (2001), Ozer & Bandura (1990), Anderson & Betz (2001), Fan & Mak (1998), Matsushima & Shiomi (2003), Smith & Betz (2000).

On the whole, it is clear that in any domain, efficacy beliefs are the product of cognitive processing of the various sources of efficacy information conveyed enactively, vicariously, socially and physiologically. Once shaped, efficacy beliefs contribute to the quality of human functioning in diverse ways. Efficacy beliefs contribute to success by enlisting cognitive, motivational, affective and decisional processes through which accomplishments are realised (Bandura, 1997).

So, with this, it can be said that the hypothesis that the individuals who receive Assertiveness Training would have a significantly higher score on self-efficacy than the individuals who receive no training gets proved here.
Table 5.1: Comparison of Means, SDs and F-ratios of Control-Experimental groups and Pre-Post intervention scores of Social Emotional Skills.

<table>
<thead>
<tr>
<th>VARIABLES</th>
<th>LEVELS</th>
<th>MEANS</th>
<th>SD</th>
<th>F-RATIO</th>
</tr>
</thead>
<tbody>
<tr>
<td>Groups</td>
<td>Control</td>
<td>265.68</td>
<td>13.29</td>
<td>20.02**</td>
</tr>
<tr>
<td></td>
<td>Experimental</td>
<td>273.75</td>
<td>14.81</td>
<td></td>
</tr>
<tr>
<td>Test Scores</td>
<td>Pre-Intervention</td>
<td>264.66</td>
<td>12.95</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Post-Intervention</td>
<td>274.77</td>
<td>14.47</td>
<td>120.28**</td>
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**p<.01

Table 5.2: ANOVA Summary for Social Emotional Skills scores.

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<thead>
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<th>MS</th>
<th>F</th>
</tr>
</thead>
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<tr>
<td>Error</td>
<td>36070.01</td>
<td>148.00</td>
<td>243.72</td>
<td></td>
</tr>
<tr>
<td>Test Scores (B)</td>
<td>7660.85</td>
<td>1.00</td>
<td>7660.85</td>
<td>120.28**</td>
</tr>
<tr>
<td>AB</td>
<td>5808.00</td>
<td>1.00</td>
<td>5808.00</td>
<td>91.19**</td>
</tr>
<tr>
<td>Error</td>
<td>9426.15</td>
<td>148.00</td>
<td>63.69</td>
<td></td>
</tr>
</tbody>
</table>

**p<.01
Table 5.3: Means of Social Emotional Skills scores showing interaction of Control-Experimental groups and Pre-Post intervention scores

<table>
<thead>
<tr>
<th>Comparison groups</th>
<th>Groups</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Control</td>
</tr>
<tr>
<td>Test Scores</td>
<td>Pre-Intervention</td>
</tr>
<tr>
<td></td>
<td>Post Intervention</td>
</tr>
</tbody>
</table>

FIGURE 4.0: Graphical representation of Means of Social Emotional Skills scores showing interaction of Control-Experimental groups and Pre-Post intervention scores.
Table 5.4: Summary of Simple effects of Social Emotional Skills scores of: Groups (A) on Pre-Post Intervention scores (B) and Pre-Post Intervention scores (B) on Control and Experimental Groups (A)

<table>
<thead>
<tr>
<th>SOURCE OF VARIANCE</th>
<th>SS</th>
<th>df</th>
<th>MS</th>
<th>F-ratio</th>
</tr>
</thead>
<tbody>
<tr>
<td>A FOR B1</td>
<td>20.17</td>
<td>1.00</td>
<td>20.17</td>
<td>0.08</td>
</tr>
<tr>
<td>A FOR B2</td>
<td>10668.17</td>
<td>1.00</td>
<td>10668.17</td>
<td>43.72**</td>
</tr>
<tr>
<td>Error</td>
<td>36070.01</td>
<td>148.00</td>
<td>243.72</td>
<td></td>
</tr>
<tr>
<td>B FOR A1</td>
<td>64.03</td>
<td>1.00</td>
<td>64.03</td>
<td>1.01</td>
</tr>
<tr>
<td>B FOR A2</td>
<td>13404.83</td>
<td>1.00</td>
<td>13404.83</td>
<td>209.45**</td>
</tr>
<tr>
<td>Error</td>
<td>9426.15</td>
<td>148.00</td>
<td>63.69</td>
<td></td>
</tr>
</tbody>
</table>

**p<0.01

A- Groups (Control & Experimental)
B1- Pre-Intervention scores
B2- Post-Intervention scores
B- Pre-Post Intervention scores
A1- Control Group
A2- Experimental Group

Lastly, Table 5.1 shows the means and standard deviations of Control-Experimental groups and pre-post intervention scores of Social-Emotional Skills. The results represented that the mean scores of Experimental group (M=273.75, SD =14.81) were higher as compared to mean scores of Control group (M= 265.68, SD = 13.29) and the difference was found to be statistically significant (F (1,148) = 20.02, p<.01). Also, the post-intervention mean scores (M= 274.77, SD
results and discussion

Results and Discussion

= 14.47) were higher as compared to pre-intervention mean scores (M=
264.66, SD = 12.95) and again, the difference was statistically
significant {F (1,148) = 120.28, p<.01}

Table 5.2 represents the ANOVA summary for Social-Emotional
Skills scores. As Table 5.1 shows significant main effects, Table 5.2
shows significant interaction effects {F (1,148) = 91.19, p<.01} of
groups and pre-post intervention scores. Table 5.3 shows the
interaction table of the means of Control-Experimental groups and
pre-post intervention scores. Figure 4.0 describes the findings
graphically. Table 5.4 shows the summary of ANOVA of simple effects
of Social-Emotional Skills scores of Groups on Pre-post intervention
scores and Pre-post Intervention scores on Groups.

A significant interaction {F (1,148) = 91.19, p <.01} led to
computation of Simple effects. Simple Effects Analyses (Table 5.4)
manifested that both control as well as experimental groups did not
differ significantly from each other on pre-intervention scores.
However, both the groups did differ significantly on post-intervention
scores. Additionally, the table 5.4 also demonstrated that pre and post
intervention scores of control group on social emotional skills did not
differ significantly but pre and post intervention assessment of
experimental group did differ significantly. So it can be deduced that it
is the experimental group, whose post-intervention scores differ
significantly from its pre-scores as well as pre and post scores of
control group. Figure 4.0 shows an ordinal interaction with a
precipitous slope of Post-intervention Experimental group scores. This
again establishes the efficacy of Assertiveness Training Programme.
With this, the last hypothesis of the study that individuals who receive
Assertiveness Training will have significantly higher score on social emotional skills than the individuals who receive no training gets proved here.

An array of inter-related skills like Self-Management, Problem-Solving and Decision- Making, Communication etc. and Attitudes, Values about self and others, Understanding Relationships and importance of health were stressed upon during the training of social emotional skills.

Generally speaking, the assets like critical thinking, core values, respecting diversity, citizenship, character-building are not to be found anywhere and everywhere until and unless consciously inculcated at the home and school. This comes as a challenge to parents as well as teachers and also, not everyone is ready to take this challenge. Each element of this challenge can be enhanced by thoughtful, sustained and systematic attention to children's social and emotional learning (SEL). Over the course of last two decades, educators and researchers have discovered that social emotional learning (SEL) improves students’ academic performance, their adaptive social-emotional behaviour and peer relations, aggression, drug problems, high-risk sexual behaviour and other forms of antisocial and maladaptive behaviour (Consortium on the School Based Promotion of Social Competence, 1994; Durlak, 1996; Institute of Medicine, 1994; Weissberg & Greenberg, 1998).

Daniel Goleman (1995) provides much evidence for social and emotional intelligence as the complex and multifaceted ability to be effective in the critical domains of life (academic, personal, social, behavioural, affective). Goleman (1995) calls it 'a different way of being
smart’. Brick & Roffman (1993), Lickona (1993b), Lockwood (1993) have shown that character education programmes promote a set of values and directive approaches that lead to responsible behaviour. A socially emotionally skilled person is skilled in social interaction with peers (Elias & Haynes, 2008). Social-Emotional competence is a protective factor and believed to help adolescents navigate struggles they may face in life. By integrating social emotional learning into schools and homes, we tend to increase our chances of having healthy, responsible and caring learners. There is a strong evidence linking social-emotional health in the early childhood years (birth to 6) to subsequent school success and health in preteen and teen years and to long term health and well being in adulthood (Shonkoff et al, 2000). Resilience is also associated with social-emotional competence displayed among peers, in the classroom, in the community and at home (Masten, 1998; Werner & Smith, 1992).

In the present study, the role-played situations demanded the participants to be socially emotionally skilled. The findings were in consonance with Skian, Sanayi & Navabi (2008) and Molazamani & Ashtiani (2008).

Now, so far as findings on all the four variables i.e. Assertiveness, Social Anxiety, Perceived Social Self-Efficacy and Social Emotional Skills are concerned, the main as well as interaction effects of all of them have come out to be significant. Simple effects of these variables have further revealed that difference on post-intervention scores of all the four variables of experimental group have come out to be statistically significantly different from pre-intervention score of control and experimental groups.
Table 6.0: Comparison of Control and Experimental groups on post intervention scores of Assertiveness, Social Anxiety, Self-Efficacy and Social Emotional skills.

<table>
<thead>
<tr>
<th>Variables</th>
<th>Intervention</th>
<th>Control Group</th>
<th>Experimental Group</th>
<th>F (ANOVA)</th>
<th>F (MANOVA)</th>
<th>Partial Eta Squared</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Means</td>
<td>SD</td>
<td>N</td>
<td>Means</td>
<td>SD</td>
</tr>
<tr>
<td>Assertiveness</td>
<td></td>
<td>99.12</td>
<td>8.66</td>
<td>75</td>
<td>116.76</td>
<td>7.75</td>
</tr>
<tr>
<td>Social Anxiety</td>
<td></td>
<td>37.54</td>
<td>7.81</td>
<td>75</td>
<td>29.61</td>
<td>2.45</td>
</tr>
<tr>
<td>Self-Efficacy</td>
<td></td>
<td>73.24</td>
<td>11.0</td>
<td>75</td>
<td>89.65</td>
<td>9.14</td>
</tr>
<tr>
<td>Social Emotional skills</td>
<td></td>
<td>266.33</td>
<td>13.95</td>
<td>75</td>
<td>283.20</td>
<td>9.08</td>
</tr>
</tbody>
</table>

**p<0.01

Table 6.0 shows comparison of control and experimental groups on post-intervention scores of Assertiveness, Social-Anxiety, Perceived Social Self-Efficacy and Social Emotional Skills. As evident, the difference between post-intervention scores of Control and Experimental group Means came out to be statistically significant so far as F-statistic is concerned. To assess the efficacy of Assertiveness Training Programme on each dependent measure separately, a series of univariate analysis of variance (ANOVA) was applied (Table 6.0), the details of which (ANOVA Summary) are given in Table 7.0.
### Table 7.0: ANOVA Summary for the effect of Intervention (Control and Experimental groups) on Assertiveness, Social Anxiety, Self-Efficacy and Social Emotional Skills.

<table>
<thead>
<tr>
<th>Variables</th>
<th>Variance</th>
<th>Sum of Squares</th>
<th>df</th>
<th>Mean Square</th>
<th>F-ratios</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Between Groups</td>
<td>11668.860</td>
<td>1</td>
<td>11668.860</td>
<td>172.60**</td>
</tr>
<tr>
<td>Assertiveness</td>
<td>Within Groups</td>
<td>10005.600</td>
<td>148</td>
<td>67.605</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Total</td>
<td>21674.460</td>
<td>149</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Social Anxiety</td>
<td>Between Groups</td>
<td>2360.167</td>
<td>1</td>
<td>2360.167</td>
<td>70.36**</td>
</tr>
<tr>
<td></td>
<td>Within Groups</td>
<td>4964.373</td>
<td>148</td>
<td>33.543</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Total</td>
<td>7324.540</td>
<td>149</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Self-Efficacy</td>
<td>Between Groups</td>
<td>10102.407</td>
<td>1</td>
<td>10102.407</td>
<td>98.60**</td>
</tr>
<tr>
<td></td>
<td>Within Groups</td>
<td>15162.667</td>
<td>148</td>
<td>102.450</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Total</td>
<td>25265.073</td>
<td>149</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Social Emotional skills</td>
<td>Between Groups</td>
<td>10668.167</td>
<td>1</td>
<td>10668.167</td>
<td>76.97**</td>
</tr>
<tr>
<td></td>
<td>Within Groups</td>
<td>20512.667</td>
<td>148</td>
<td>138.599</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Total</td>
<td>31180.833</td>
<td>149</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**p<0.01

As depicted by Table 6.0, Assertiveness mean score of Control group (M=99.12, SD=8.66) was lower as compared to mean score of Experimental group (M=116.76, SD=7.75) and the difference is statistically significant (F(1,148)=172.60, p<.01).
Lesser of Social Anxiety reflected in Experimental group (M=29.61, SD=2.45) as compared to Control group (M=37.54, SD=7.81) and again, F-statistic deems the difference significant \( F(1,148) = 70.36, p<.01 \).

Experimental group emerged as a more efficacious group (M=89.65, SD=9.14) as compared to control group and this difference stands out to be statistically significant \( F(1,148) = 98.60, p<.01 \).

The same trend was observed for Social Emotional Skills' scores. The Experimental Group stood higher (M=283.20, SD=9.08) as compared to control group (M=266.33, SD=13.95) and the difference was statistically significant i.e. \( F(1,148), 76.97, p<.01 \).

Table 6.0 further revealed that the overall difference between control and experimental groups on all the variables has been found to be statistically significant \( F(1, 148) = 107.56 \) (exact statistic), \( p <0.1 \).

Post-hoc analysis on Assertiveness, Social Anxiety, Perceived Social Self-Efficacy and Social Emotional Skills was done. For this purpose, the statistic of Partial Eta Squared was used. The statistic provides the percent of variability in the dependent variable accounted for by the independent variable. Table 6.0 further depicts that Partial Eta Squared Analyses unveiled that 53.8% of variability in the post-intervention scores of Assertiveness can be attributed to the efficacy of Assertiveness Training Programme. In the same way, 32.2% of variability in Social Anxiety scores, 40.0% of variability in Perceived Social Self-Efficacy scores and 34.2% of variability in Social-Emotional Skills' scores can be well-attributed to the efficacious intervention.
Table 8: MANOVA Summary for the effect of Intervention (Control & Experimental groups) on Assertiveness, Social Anxiety, Self-Efficacy and Social Emotional skills.

<table>
<thead>
<tr>
<th>Effect</th>
<th>Value</th>
<th>F</th>
<th>Hypothesis df</th>
<th>Error df</th>
<th>Partial Eta Squared</th>
</tr>
</thead>
<tbody>
<tr>
<td>Intervention</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Pillai's Trace</td>
<td>.74</td>
<td>107.56**</td>
<td>4</td>
<td>145</td>
<td>.748</td>
</tr>
<tr>
<td>Wilks' Lambda</td>
<td>.25</td>
<td>107.56**</td>
<td>4</td>
<td>145</td>
<td>.748</td>
</tr>
<tr>
<td>Hotelling's Trace</td>
<td>2.97</td>
<td>107.56**</td>
<td>4</td>
<td>145</td>
<td>.748</td>
</tr>
<tr>
<td>Roy's Largest Root</td>
<td>2.96</td>
<td>107.56**</td>
<td>4</td>
<td>145</td>
<td>.748</td>
</tr>
</tbody>
</table>

**p<0.01

Endorsing the similar results, Table 8.0 shows MANOVA summary for the effect of Intervention (Control and Experimental Group) on Assertiveness, Social Anxiety, Perceived Social Self-Efficacy and Social Emotional Skills. Values for Pillai's Trace test, Wilk's Lambda, Hotelling's Trace and Roy's Largest Root test were found to be .74, .25, 2.97 and 2.96 respectively. All these values are found to be statistically significant i.e. \( F \text{ (MANOVA; 4,145) = 107.56 (exact statistic), p <0.1) } \), proving the efficacy of Assertiveness Training Programme. Also, Partial Eta Squared Analysis brought into the light the efficacy of Assertiveness Training Programme i.e. the magnitude of the effect of the intervention is 74.8%, which is a promising one i.e.
74.8% of the behaviour modification can be attributed to the intervention.

To conclude, it can be said that the intervention proved to be beneficial to the participants in enhancing Assertiveness, Self Efficacy and Social Emotional Skills and reducing Social Anxiety. And thus it can be firmly said that Assertiveness Training Programme does act as a catalyst in instilling effective functioning.

Significance of the present research findings can be understood in the light that Assertiveness is concerned with being able to express feelings, wishes, wants and desires appropriately and is an important personal and interpersonal skill. Adolescents are required to learn a complex set of social skills to engage in mutually beneficial interaction with significant others in their social networks. Family, school and other social systems need to respect adolescents and this respect is not based on certain conditions but on the fact that they are fellow beings and taking care of their natural rights and encouraging them to express themselves is like gate-keeping for their mental and overall health by virtue of being their parents, guardians and teachers. Assertiveness Training as a part of curriculum for adolescents should provide opportunities to practice assertive responses in a variety of situations.

As the present study establishes the efficacy of Assertiveness Training Programme, the fact gets reinforced that in an ever changing social world, which can be conducive, conflictual, manipulative, enhancing or at times, something else, being in the skin of an Assertive person will accentuate one’s meaning of existence and non-anxious, efficacious and a skilled way of leading your life adds to the endeavour of being a fully functioning person. And above all, Assertiveness rids you off guilt... that... you tried...and didn’t take it the way it was imposed...
An assertive person gives rise to an assertive society and an assertive country free of manipulations and conflicts, where all respect oneself and others’ self. But for this, it’s important to Arise, Awake and Know thyself.... to keep your mind without fear and your head held high....

**Implications of the study:**

1. The study may be replicated with females in both urban and rural areas and the results compared with the present findings.

2. Longitudinal, quantitative and qualitative studies could be conducted with similar sample and with similar variables.

3. Schools and universities can develop age and culture appropriate interventions at junior and senior levels and other community sites.

4. Volunteers can work with influential organisations and the government to design and deliver more effective programmes depending upon the need.

5. Graduate programmes and continuing educational courses at school level can train the recipients in the components of Assertiveness, Social Anxiety, Social Self-Efficacy and Social Emotional Skills in both theory and practice.

6. Assertiveness Training can be beneficial for people high on Aggression as they can be trained to modify their responses so that they do not hurt or offend others and at the same time achieve their goals.

7. Assertiveness Training can also be imparted to married couples to keep away marital conflicts and thus enhancing the quality of the marital interaction.
8. Assertiveness Training can be quite beneficial in the context of familial transactions as assertive skills can help the members to work out common goals and interests.

9. Assertive training is also helpful in corporate set-up for managers, customers, subordinates and superordinates as they can be taught to stand up for their rights, protect themselves against manipulative behaviour from others and also clarify their goals.

**Limitations of the study:**

1. Subjects were drawn from urban population and thus limiting the generalisability of the findings.

2. Convenience sampling was employed in contrast to random sampling.

3. Self-reports may have affected study results because of social desirability and the researcher’s presence.