

The Effect of Assertive Leadership Development Program on Assertive Leadership Behaviors: A Case Study of Managers in a Pharmaceutical and Medical Device Company

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Abstract

This study evaluated the effectiveness of the Assertive Leadership Development Program (ALDP) and its Communication Skills for Assertive Leadership (CSAL) workshop, aimed at boosting assertive leadership among managers in a pharmaceutical and medical device company in Thailand. A single-group quasi-experimental design was used. Managers attended the CSAL workshop, a one-day event with seven sessions under the ALDP umbrella. The evaluation applied the Rathus Assertiveness Schedule (RAS) at three points: before the workshop, immediately after the workshop, and at 2-4 weeks follow-up. Sixteen managers completed the training and subsequent RAS assessments. Post-training, scores rose significantly from an average of 18.56 (SD = 21.24) to 28.81 (SD = 24.45), with sustained improvement at 30.75 (SD = 19.49) during follow-up. The ALDP, focusing on communication skills, effectively promotes assertive leadership behaviors. It shows promise in improving managerial assertiveness, crucial for achieving goals and fostering positive workplace relationships. Implementing the ALDP could enhance team performance and cultivate lasting relationships, driving organizational success in Thailand's pharmaceutical and medical device sectors.

Keywords: Assertive leadership, Communication skills, Leadership training program

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ประสิทธิผลของโปรแกรมพัฒนาภาวะผู้นำแบบรักษาสีห์ ต่อพฤติกรรมการเป็นผู้นำแบบรักษาสีห์: กรณีศึกษาผู้จัดการในบริษัทยาและเครื่องมือแพทย์

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บทคัดย่อ

การศึกษานี้มีวัตถุประสงค์เพื่อประเมินโปรแกรมพัฒนาภาวะผู้นำแบบรักษาสีห์ (Assertive leadership development program - ALDP) และการอบรมทักษะการสื่อสารเพื่อภาวะผู้นำแบบรักษาสีห์ (Communication skills for assertive leadership - CSAL) ซึ่งมุ่งเน้นการเพิ่มภาวะผู้นำแบบรักษาสีห์ ของผู้จัดการบริษัทยาและเครื่องมือแพทย์ในประเทศไทย รูปแบบงานวิจัยนี้เป็นการทดลองแบบกลุ่มเดียว โดยมีผู้จัดการ 16 คนเข้าร่วมการอบรม CSAL 1 วัน ประกอบด้วย 7 หัวข้อการอบรมภายใต้โครงการ ALDP ซึ่งประเมินผลโดยใช้เครื่องมือ Rathus assertiveness schedule (RAS) ในการวัดระดับภาวะผู้นำแบบรักษาสีห์ ของผู้เข้าร่วม 3 ช่วงเวลา คือ ก่อนการอบรม หลังการอบรม ทันที และติดตามผลหลังการอบรม 2-4 สัปดาห์ ข้อมูลที่ได้ถูกวิเคราะห์ด้วยสถิติเชิงพรรณนาและการทดสอบทางสถิติ ผลการวิจัยพบว่า คะแนนเฉลี่ยของภาวะผู้นำแบบรักษาสีห์ เพิ่มขึ้น จาก 18.56 (SD = 21.24) ก่อนการอบรม เป็น 28.81 (SD = 24.45) หลังการอบรมทันทีอย่างมีนัยสำคัญ และเพิ่มขึ้นอย่างต่อเนื่องเป็น 30.75 (SD = 19.49) ติดตามผลหลังการอบรม 2-4 สัปดาห์ ผลการศึกษาแสดงให้เห็นว่าโปรแกรม ALDP สามารถส่งเสริมพฤติกรรมการเป็นผู้นำแบบรักษาสีห์ได้อย่างมีประสิทธิภาพ โดยโปรแกรมนี้จะช่วยให้ผู้จัดการพัฒนาภาวะผู้นำแบบรักษาสีห์ ซึ่งเป็นสิ่งสำคัญต่อการบรรลุเป้าหมายขององค์กรและสร้างความสัมพันธ์ที่ดีในที่ทำงาน

คำสำคัญ: ภาวะผู้นำแบบรักษาสีห์, ทักษะการสื่อสาร, โปรแกรมฝึกอบรมภาวะผู้นำ

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Introduction

The pharmaceutical and medical device industries globally have seen substantial growth, propelled by technological innovations and escalating healthcare needs. In 2022, the global pharmaceutical market reached a valuation of \$1.49 trillion, with forecasts predicting a rise to \$2.03 trillion by 2028 (Market Reports World, 2023). The Thai pharmaceutical sector, stimulated by an aging demographic and increased healthcare demands, is projected to grow by 4.5-5.0% between 2022 and 2025 (Krungsri Research, 2022). Similarly, Thai manufacturers of medical devices are anticipated to experience robust growth from 2023 to 2025. The value of goods distributed both domestically and internationally is projected to increase at annual rates of 5.5-7.0% and 6.5-7.5%, respectively (Tanpaiboon, 2023). Despite these promising growth trajectories, the sectors face considerable challenges, particularly concerning employee motivation and retention. The high turnover rates highlight the complexities of job satisfaction, which extend beyond mere financial incentives. According to Mercer's Total Remuneration Survey (2023), the turnover rate in Thailand's pharmaceutical and medical device industries stands at 13%, driven by dissatisfaction with income, non-competitive benefits, poor managerial relationships, and a waning passion for work (Mercer, 2023). Effective leadership is a critical factor in addressing these turnover issues and bolstering organizational performance. Assertive leadership, in particular, is essential for navigating the balance between achieving short-term objectives and maintaining long-term effectiveness (Hayashi Junior & Guonik, 2018).

Studies on assertiveness have spanned various healthcare professional groups including medical interns, midwives, nursing students, nurses, and physicians, aiming to enhance social skills and, consequently, patient safety (Gutgeld-Dror et al., 2024; Noh & Kim, 2021; O'Connor et al., 2013; Warland et al., 2014; Yoshinaga et al., 2018). However, no studies were found to include pharmacists or managers in pharmaceutical and medical device companies (Omura et al., 2017). This gap highlights the originality of the current study, which extends assertive leadership training into a novel professional context. The Assertive Leadership Development Program (ALDP) being investigated in this study was developed by integrating insights from various assertiveness training studies while tailoring it to the unique challenges and essential

competencies required in the pharmaceutical and medical device industries. This adaptation ensures that ALDP is specifically designed to address the leadership demands within this context.

The study also addresses the challenges in Thailand's pharmaceutical and medical device industry regarding high turnover rates and the imperative for effective leadership. As a case study, it evaluates the impact of the ALDP, specifically the Communication Skills for Assertive Leadership (CSAL) workshop, on enhancing assertive leadership among managers within a multinational company. The workshop served as the training intervention that helped to determine changes in the managers' assertiveness levels.

Literature Review

Effective Leadership and Employee Outcomes

Effective leadership plays a crucial role in cultivating loyalty among employees. Increased employee retention and reduced turnover can result by fostering job satisfaction, engagement, and organizational commitment. Effective leaders employ transformational approaches to inspire, challenge, and support employees. A vision that aligns with employees' values and a work environment that meets employees' psychological and professional needs must be created to inspire and motivate employees (Bass & Riggio, 2006). Such condition enhances job satisfaction and engagement.

Eisenberger et al. (2002) found that perceived organizational support, which is often a result of effective leadership, significantly predicts employees' intentions to stay. Effective leaders serve their employees by being advocates to promote work-life balance that contributes to employee well-being (Kossek et al., 2011). Employees' trust and job embeddedness thus result (Liden et al., 2008). Similarly, employees who feel valued by their leaders exhibit stronger organizational commitment. Moreover, through mentoring and coaching, leaders can contribute to employee retention by helping employees advance in their career (Ghosh & Reio, 2013). Showing of concern for employees' well-being, recognizing their contributions, and providing them with career development opportunities all cultivate loyalty.

Wells and Welty Peachey (2011) found that employees working under transformational and servant leaders report higher satisfaction and engagement, leading to increased retention. In contrast, autocratic leadership, characterized by high control and low employee involvement, often leads to higher turnover. Employees under authoritarian leaders experience greater stress and lower job satisfaction, increasing turnover risk (De Hoogh & Den Hartog, 2009). While certain leadership styles appear to be more effective than others in producing positive employee outcomes, it is important to note that assertiveness in leadership still needs to be balanced with any positive leadership style or trait for it to be effective. Assertiveness, when practiced with empathy and support, can lead to clear communication, strong decision-making, and consideration for employees' perspectives that further enhance positive work environment. Specific studies directly linking assertive leadership to employee retention and turnover are limited. Therefore, assertive leadership needs to be further explored.

Assertive Leadership

The Definition of Assertive Leadership

Assertive leadership is defined by proactive communication and the promotion of solutions that benefit all stakeholders, fostering transparency and alignment with organizational goals (Ames, 2009). This leadership style combines effective communication and negotiation among diverse perspectives, encapsulating two dimensions of assertiveness - general assertiveness and leadership assertiveness.

General assertiveness focuses on individual rights, expression, and communication skills, crucial for interpersonal behavior. Influential works by Alberti and Emmons (2017), Lange and Jakubowski (1976), Lazarus (1973), Smith (1975) underscore the importance of clear, confident self-expression that balances self-advocacy with respect for others. This skill is essential for bridging different communicative styles and fostering effective interpersonal relationships.

Leadership assertiveness, on the other hand, highlights the necessity for leaders to assert their views confidently while advocating for individual rights and promoting collaborative success (Ames, 2009; Ames & Flynn, 2007; Hayashi Junior & Guonik, 2018; Maloney & Moore, 2020). Effective leaders maintain a balance between achieving objectives and nurturing relationships, ensuring a focus on both instrumental and

relational outcomes. This balance enables assertive leaders to drive organizational success and cultivate a supportive team environment.

The current study emphasized the dimension of leadership assertiveness. The focus was placed particularly on the roles of managers within pharmaceutical and medical device company as the study context. These managers are pivotal in driving superior performance and fostering positive relationships through active listening and valuing the opinions of others. Assertive leadership provides directions for managers in responding to diverse situations to achieve a balance between instrumental and interpersonal outcomes.

Types, Characteristics, and Behaviors of Assertive Leadership

Assertive leadership is a multifaceted concept encompassing various types (Gillen, 2001). Each type is further distinguished by unique characteristics and behaviors. In this discussion, we explore each assertive leadership type in more detail and its alignment with the Five-Factor Model (McCrae & John, 1992) and the Hogan Personality Inventory (HPI) Model (Hogan & Hogan, 2007). Hayashi Junior and Guonik (2018) categorized assertive leaders into four different types and labeled them according to their main characteristics: Breeze, Stone, Fire, and Water. Table 1 presents the four assertive leadership types along with key characteristics and behaviors corresponding to those explained by the Five-Factor Model and the HPI Model.

Table 1. Assertive Leadership Types

Leadership Type	Characteristics	Correspondence in Models		Key Behaviors
		Five-Factor Model	Hogan Personality Inventory (HPI)	
Breeze	Meekness and Patience	Stability	Adjustment	• Composure in critical situations • Comforting during challenges • Fosters self-confidence and composure

Leadership Type	Characteristics	Correspondence in Models		Key Behaviors
		Five-Factor Model	Hogan Personality Inventory (HPI)	
Stone	Resolute Determination	Conscientiousness	Prudence	• Vocal assertion of needs and opinions • Adherence to rules • Detail-oriented • Reliability and dependability
Fire	Self-Assured Autonomy with Humility	Extraversion	Ambition & Sociability	• Proactive problem-solving • Trust in capabilities • Open expression of viewpoints • Initiative-taking • Competitiveness • Active pursuit of leadership roles • Outgoing and sociable disposition
Water	Values Friendship and Interpersonal Relationships	Agreeableness	Interpersonal Sensitivity	• Friendly interactions • Conflict avoidance • Minimization of friction • Warmth and cooperation • Social sensitivity • Consideration and tactfulness

Breeze leaders, known for their emotional stability and patience, stay calm under pressure. They create a confident and resilient environment. Stone leaders focus on determination and detail, confidently asserting their needs and promoting organizational excellence. Fire leaders, with self-assurance and independence, proactively solve problems and share their views. Also, they are known for sociability and communication skills. Water leaders emphasize nurturing relationships, being friendly, and avoiding conflicts to ensure harmony and cooperation.

Effective leadership involves recognizing when to apply different aspects of assertiveness to suit various contexts and challenges (Goleman, 2000). This adaptability is crucial for leadership effectiveness in responding to the dynamic nature of leadership roles. Ames and Flynn (2007) noted that extremes, either excessive or insufficient assertiveness, could negatively impact perceptions of leadership effectiveness. Excessive assertiveness, characterized by dominance and aggression, may achieve short-term objectives but often provokes resistance and conflicts, potentially undermining long-term outcomes (Falbe & Yukl, 1992; Friedman et al., 2000). In human resources contexts, highly assertive individuals may appear less friendly or team-oriented (Kelly et al., 1982; Kern, 1982). Leaders who practice this level of assertiveness are prone to disagreements and may struggle with collaboration. As a result, they can jeopardize workplace relationships (Ames & Flynn, 2007).

Conversely, under-assertiveness, marked by self-sacrifice, cooperativeness, and consideration, might foster social benefits but can also undermine goal achievement and appear instrumentally weak (Bass, 1990; De Cremer & van Knippenberg, 2004; Judge et al., 2004). Leaders exhibiting low assertiveness are often less effective in influencing others and managing conflicts. Further, low assertiveness often leads to avoidance and non-initiation of necessary confrontations or negotiations (Bohns, 2016). A balanced approach to assertiveness, avoiding extremes, is essential for fostering a workplace environment that benefits both employees and the organization.

The Importance of Assertive Leadership in Thailand's Pharmaceutical and Medical Device Sectors

Assertive leadership fosters clear communication, decisive action, and a collaborative environment, essential for navigating the complexities of the pharmaceutical and medical device industries. Thailand's medical device market is characterized by a high number of small and medium enterprises, with over 10,000 distributors, 90.6% of which are small companies (Tanpaiboon, 2023). Assertive leaders can effectively manage these complexities by ensuring compliance with regulatory standards and maintaining quality assurance.

The Thai government, in collaboration with the private sector, has invested over 1.7 billion baht to enhance the production of pharmaceuticals, medical devices, and

healthcare services to meet international standards (Sawasdee Thailand, 2025). Assertive leadership is crucial in capitalizing on these investments, fostering innovation, and maintaining a competitive edge in the global market. As Thailand positions itself as a medical hub in Southeast Asia, the demand for skilled professionals in the pharmaceutical and medical device sectors is increasing (The Nation, 2024). Assertive leaders who communicate a clear vision and provide growth opportunities are more likely to attract and retain top talent, essential for sustaining industry growth. The medical device market in Thailand is projected to reach a value of USD 2.5 billion by 2028, growing at a compound annual growth rate (CAGR) of 6.9% in local currency terms. Assertive leadership contributes to operational efficiency by setting clear goals, streamlining processes, and ensuring that teams are aligned with organizational objectives.

Assertive leadership is integral to the advancement of Thailand's pharmaceutical and medical device sectors. By effectively navigating regulatory challenges, driving innovation, attracting talent, and enhancing efficiency, assertive leaders can significantly contribute to the industry's growth and Thailand's emergence as a regional medical hub. Investing in training programs and skill development in communication and balancing task and relationship orientations could enhance leader effectiveness, especially required in such complex and dynamic industries.

Assertive Leadership Development Program

Training is a systematic process aimed at fostering learning experiences that enhance knowledge, skills, attitudes as well as intentional behavioral change (Armstrong, 2001; Blanchard & Thacker, 2007). Training can help in modifying behaviors and attitudes by facilitating positive shifts in traits such as shyness and interpersonal hostility through initial interventions and booster sessions to maintain these changes (Baggs & Spence, 1990; Alden & Cappe, 1986; Caprara & Zimbardo, 1996; Deffenbacher et al., 1994; Thurman, 1985).

Assertiveness training, initiated in the late 1960s by Lazarus (1973), was initially designed to empower individuals with mental health concerns who displayed passive behaviors. It quickly evolved into a vital tool for enhancing the social skills of those struggling with interpersonal communication. Integral to behavioral therapy, the training

aims to equip individuals with effective communication styles and skills, recognized as the foundation of any assertiveness program (Larsen & Jordan, 2017).

The Assertive Leadership Development Program (ALDP) under investigation of this study was developed by the researcher. Its development was founded on results of past research studies relating to assertiveness as well as frameworks on learning and training. The Communication Skills for Assertive Leadership (CSAL) workshop, especially, was designed to enhance leadership effectiveness through assertiveness training. Table 2 presents the workshop's seven sessions with descriptions of activities taken place in each session as well as referenced researches and theories on which the design of the workshop was based.

Table 2. Communication Skills for Assertive Leadership (CSAL) Workshop

Session - Name (Time Allotted)	Descriptions of Activities	Referenced Research & Theories
Session 1 - The Assertive Program Journey (30 minutes)	Participants engaged in dynamic self-introductions and ice-breaking activities, establishing the groundwork for assertive leadership exploration.	Icebreakers serve as an effective instructional strategy to reduce social barriers by helping learners build rapport, relieve social tension, and establish trust within the group (Chlup & Collins, 2010; Galbraith, 2004; Ukens, 1997).
Session 2 - Unveiling Assertive Leadership (30 minutes)	Participants explored the definition, characteristics, and behaviors of assertive leadership and differentiate passiveness, aggressiveness, and assertiveness	Ames (2009); Ames and Flynn (2007); Gillen, (2001); Marili and Weyers, (2009)
Session 3 - The Assertive Leader in You (15 minutes)	Participants assessed their assertiveness levels by completing the Rathus Assertiveness Schedule (RAS) questionnaire. This activity helped to foster a deepened	Rathus (1973)

Session - Name (Time Allotted)	Descriptions of Activities	Referenced Research & Theories
	self-awareness and pinpoint growth opportunities.	
Session 4 - The Importance of Assertive Leadership (15 minutes)	An expansion on the importance and levels of assertiveness and their impact on leadership effectiveness, offering participants a comprehensive view	Ames and Flynn (2007); Ames et al. (2017)
Session 5 - From Non-Assertive to Assertive (15 minutes)	The training's practical application was highlighted where an interactive workshop facilitated the transition towards assertive behaviors.	Utilizing strategies endorsed by Maloney and Moore (2020)
Session 6 - Assertive Communication in Action (210 minutes)	- An immersive experience into verbal and non-verbal assertive communication, incorporating "I" statements and How to Say "No" techniques - The non-verbal portion focuses on understanding and interpreting body language, distinguishing between assertive, aggressive, and passive cues	- Based on the insights of Bramson (1981); Cahn and Abigail (2007); Maheshwari (2016) - Buback (2004); Hayashi Junior and Guonik (2018); Maheshwari (2016)
Session 7 - Setting Assertive Goals" (20 minutes),	Setting SMART objectives for applying assertive techniques in daily life and wrapping up the day	Drawing on goal-setting theories by Doran (1981)

The training workshop's learning objectives primarily targeted application (per Bloom's Taxonomy, Anderson et al., 2001) to enable managers to effectively apply their learned knowledge in practical settings. The workshop incorporates the significance of body language (Buback, 2004), and interactive elements such as role-play (Omura et al., 2017) to develop a robust skill set while also focusing on problem-solving and

building self-confidence (Meshko et al., 2022; Warland, 2014). Assertiveness training is not just about verbal and non-verbal communication; it involves a deeper engagement with one's personal and professional identity. It includes developing self-confidence, addressing personal fears, enhancing problem-solving skills, and clarifying one's assertiveness level. This comprehensive development is essential for managers navigating complex leadership dynamics.

The training explores various dimensions and types of assertiveness, such as Breeze, Stone, Fire, and Water, reflecting the diversity of assertive leadership styles in different organizational contexts. Understanding the essence of assertive leadership is critical. Research by Maheshwari (2016) and others like Cohen et al. (1974) and Warland et al. (2014) helps clarify the behaviors associated with passive, aggressive, and assertive interactions and provides a strategic communication framework that respects both self and others.

The CSAL workshop aims to deepen understanding of assertive leadership through detailed discussions on communication skills, including the use of "I" statements and techniques for saying "no." It also covers non-verbal cues and their practical applications, utilizing scenario-based role-playing and evaluations to enhance communication in challenging interactions. This training is designed to develop the skills necessary for effective assertive leadership, particularly vital in the high-stake pharmaceutical and medical device sectors where clear communication is crucial.

To assess assertiveness levels, the Rathus Assertiveness Schedule (RAS) (Rathus, 1973) is employed, allowing participants to self-rate their assertiveness. This evaluative tool enables individuals to gauge their assertiveness and track their progress throughout the training, fostering a self-awareness that is essential for personal and professional growth in leadership roles.

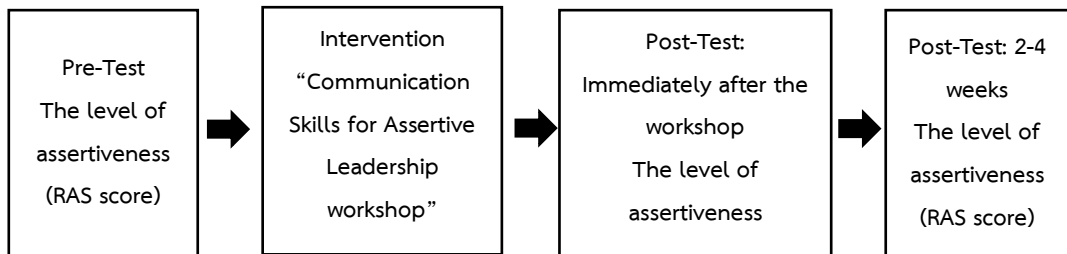
Research Methodology

Design and Setting

The research question guiding the study was *"How effective is the Communication Skills for Assertive Leadership (CSAL) workshop in promoting assertive leadership behaviors for managers in the pharmaceutical and medical device*

company?” The study employed a quasi-experimental design with a single-group intervention. The CSAL workshop served as the intervention and condition allowing pre- and post-tests to determine the effect of the training program as measured by changes in the Rathus Assertiveness Schedule (RAS) scores. Post-test evaluations were conducted immediately after training and at a 2-4 week follow-up. See Figure 1.

Figure 1. Research Design



The CSAL workshop followed a structured curriculum to maintain consistency in content delivery, reducing variability in participant experiences. Additionally, managers were encouraged to reflect on their leadership behaviors and assess changes in real workplace scenarios, reinforcing the impact of the training.

The CSAL training workshop was conducted on December 13, 2023 at a hotel in Bangkok for a pharmaceutical and medical device company. This workshop was an initiative to bolster assertive communication among the company’s managers. It also served as a pilot for the development of a comprehensive training. Thus, results and feedback could be used for refinement of training content and methodologies.

Participants

In recruiting participants, invitations were sent out via company’s internal email system to all individuals who were in the management positions including managers with and without subordinates as well as department heads. Due to limited capacity, only 20 volunteers were accepted to take part in the CSAL training. Participating managers included both pharmacists and non-pharmacists. Registration, declaration of consent to be included in the study, as well as responses regarding demographic information were obtained electronically. The demographic questionnaire using

Microsoft Form gathered data on participants' age, gender, years of experiences, number of subordinates, educational background, and company nationality experiences.

Justification for Sample Size

This study included 20 participants. Despite the small sample, it is justified as a pilot study to assess the feasibility and preliminary effectiveness of ALDP. Previous assertiveness training research has shown medium-to-large effect sizes (Omura et al., 2017), suggesting that even small samples can detect meaningful changes.

Measurement Instrument

Rathus Assertiveness Schedule (RAS) was used to assess the assertiveness of managers (Rathus, 1973). It is a widely recognized instrument for gauging assertiveness in a standardized and short-structured format. The self-administered questionnaire consisted of 30 statements relating to assertive behaviors as performed in relationships with others in various scenarios. Response rating was on a six-point Likert scale from +3 (strongly characteristic, i.e., “Very much like me”) to -3 (strongly uncharacteristic, i.e., “Very much unlike me”). Of the 30 statement items, 17 were negative items and required reverse scoring. The total scores ranged from -90 to 90 points, with higher scores indicating the higher degree of assertiveness.

Studies have confirmed RAS's high internal consistency (Cronbach's alpha 0.77–0.84) as a tool for assessing assertiveness (Rathus, 1973; Alberti & Emmons, 2017). In terms of validity, construct validity is supported by correlations with established assertiveness measures like the Assertion Inventory, while criterion validity demonstrates that RAS scores predict real-world assertive behaviors (Ames, 2009). Although originally designed for general assertiveness, RAS has been effectively applied in leadership research to assess leadership assertiveness.

Its applicability is the result of behavioral alignment with managerial skills such as confident communication, conflict management, and composure in challenging situations. Past research has successfully used RAS in leadership studies (Ames & Flynn, 2007), supporting its relevance for professional settings. RAS also enables quantifiable pre-post intervention tracking, allowing for statistical evaluation of assertiveness improvements.

Data Analysis Approach

The study used paired-sample t-tests to assess changes in assertiveness across three points: pre-test, immediate post-test, and 2-4 week follow-up. Descriptive statistics (means and standard deviations) summarized the data, while t-tests compared pre- and post-training scores to evaluate short-term and sustained effects. A significance threshold of $p < 0.05$ determined statistical differences, and Cohen's d measured effect size.

Findings

Participant Demographics

A total of 20 managers registered for the CSAL training workshop. However, one individual declined participation due to medical issues at a later date. Therefore, 19 were included in the RAS score assessment for the pre-test. During the training, two participants dropped out due to conflicting work meeting, resulting in only 17 participants who completed the CSAL training in its entirety. All 17 completed the RAS questionnaire immediately after the workshop for the post-test and again for 2-4 weeks follow-up post-test. However, one participant revoked the consent to be included in the study, resulting in data from only 16 individuals being considered in the analysis and presented in the results. Table 3 presents the demographic information of the 16 managers who completed the CSAL training and RAS assessment at three different points.

Table 3. Demographic Characteristics of Participants (n = 16)

Variable	Value = n (%)
1. Gender	
Male	5 (31.3)
Female	9 (56.3)
Not specified	2 (12.5)
2. Age	Mean = 44.3 years
3. Highest educational background	
Doctoral degree	1 (6.3)
Master's degree	7 (43.8)
Bachelor's degree	8 (50.0)

4. Work experience years

<10	0 (0)
11-20	9 (56.3)
21-30	7 (43.8)

5. No. of subordinates

0-4	8 (50.0)
5-9	8 (50.0)
10 or more	0 (0)

6. Company nationality experiences

Thai	3 (18.8)
European	8 (50.0)
American	8 (50.0)
Asian (excluded Thai)	9 (56.3)

7. Communication skills or leadership training experiences

Yes	13 (81.3)
No	3 (18.8)

Results on Assertiveness Levels

Results from statistical analyses showed significant increases, after completing the CSAL training workshop, in the assertiveness levels among managers in the pharmaceutical and medical device company under study. Table 4 shows the means and standard deviations of all measures at each assessment point as well as changes in the outcomes of assertiveness levels.

Table 4. Changes in Outcomes of Assertiveness Levels (n = 16)**Pair 1: pre-test vs. post-test immediately after training**

Measure	Pre-test Mean (SD)	Post-test Mean (SD)	Paired Difference, Immediately after training Post-test immediately after training – Pre-test Mean (SD)		
			t	p	
RATHUS ASSERTIVENESS SCORE	18.6 (21.2)	28.8 (24.4)	+ 10.2 (15.0)	2.74	.015*

Pair 2: pre-test vs. post-test 2-4 weeks after training

Measure	Pre-test	Post-test	Paired Difference,		
		2-4 weeks	Post-test 2-4		
		after training	weeks after		
	Mean (SD)	Mean (SD)	training – Pre-test	t	p
			Mean (SD)		
RATHUS ASSERTIVENESS SCORE	18.6 (21.2)	30.8 (19.5)	+ 12.2 (14.1)	3.45	.004**

Pair 3: post-test immediately after the training vs. post-test 2-4 weeks after training

Measure	Post-test	Post-test	Paired Difference,		
	Immediately	2-4 weeks	Post-test 2-4 weeks		
	after training	after training	after training - Post-		
			test		
			Immediately after		
			training		
	Mean (SD)	Mean (SD)	Mean (SD)	t	p
RATHUS ASSERTIVENESS SCORE	28.8 (24.4)	30.8 (19.5)	+ 2.0 (12.1)	0.64	.531

Note. *significant $p < .05$, ** significant $p < .01$

Initially, the mean score before the intervention (i.e., pre-test) was observed at 18.6 (SD = 21.2). Immediately after the workshop, the mean score rose to 28.8 (SD = 24.4). Subsequently, a second post-intervention assessment 2-4 weeks after the workshop yielded further increase in the mean score to 30.8 (SD = 19.5).

Pairwise comparisons of outcome measures indicated that the CSAL training led to significant improvement after training completion in mean difference from pre-test to post-test immediately after training (Pair 1) with an increase of 10.2 points (SD = 15.0, $t = 2.74$, $p < 0.05$). This improvement was maintained until the 2-4 weeks follow-up. The results in mean difference from pre-test to post-test 2-4 weeks after training (Pair 2) showed significant increase of 12.2 points (SD = 14.1, $t = 3.45$, $p < 0.01$). However, there was no statistically significant mean difference from post-test immediately after training to post-test 2-4 weeks after training (Pair 3).

Discussion and Conclusion

The increase in assertiveness scores immediately following the CSAL training, with a mean rise of 10.2 points, and the sustained improvement observed at the 2-4

weeks follow-up, with an additional mean increase of 12.2 points, underscore the effectiveness of the training program. The findings align with results of previous research, such as Omura et al. (2017), who reported the partial effectiveness of assertiveness training for healthcare professionals, and Cohen et al. (1974) who noted improvements in interpersonal effectiveness. These improvements were evidenced by significant increases in RAS scores from pre-therapy to post-therapy, maintained at six-month follow-up. Additionally, Lee and Crockett (1994) found that intensive assertiveness training significantly enhanced assertiveness and reduced occupational stress. The benefits of ALDP's training program are further amplified by the leadership endorsement of assertive communication practices as indicated by the positive effects of similar communication training in healthcare leadership (Sayre et al. (2012)).

This single-group experimental study has successfully demonstrated the effectiveness of the ALDP, tailored for managers in the pharmaceutical and medical device sectors, in elevating assertiveness levels. The findings highlight the program's potentials to enhance assertive communication skills among both pharmacist and non-pharmacist managers by the improvement of assertiveness as indicated by the RAS scores before and after attending the program. These outcomes suggest a promising direction for integrating assertive behavior development into professional practice, advocating for further research with extended follow-ups to solidify these preliminary results.

Limitations and Future Research

This study has some limitations that need to be discussed in order to provide constructive directions for future research. The areas deserving attention include the size and nature of the sample and RAS as the assertiveness measurement instrument and its administration.

The small sample size of pharmacists and non-pharmacist managers ($n = 16$) limits the generalizability of the findings. Increasing the sample size in future studies would enhance statistical robustness and improve confidence in the findings. The single-group pre-test/post-test design limits the ability to isolate the effects of training from other influencing factors and to conclusively attribute observed changes solely to

the assertiveness training. Future research should incorporate a control group to isolate the training's specific effects and strengthen causal inferences.

Voluntary participation of the sample suggests high intrinsic motivation among managers, which likely led to more engagement and effort during the training. This supports existing literature that emphasizes the importance of learner motivation in training effectiveness (Deci & Ryan, 2000). Further, the relatively lower baseline assertiveness scores suggest that those with lower initial scores tend to show more significant improvements post-intervention. However, no notable improvements were observed at the 2-4 weeks follow-up, indicating the need for sustained interventions to maintain training effects. Therefore, interpretation of results should be taken with caution.

This study relied on self-reported assertiveness scores, which are susceptible to social desirability and self-rater bias. In future research, a 360-degree assessment may be implemented to enhance reliability and reduce self-rater bias, allowing for more objective evaluations by incorporating feedback from subordinates, peers, and supervisors.

Potential confusion between assertiveness and aggressiveness in the measures used may affect interpretation, as suggested by Rathus (1973). Employing multiple assertiveness scales, such as the Adaptive and Aggressive Assertiveness Scales (AAA-S) (Thompson & Berenbaum, 2011), could help clarify this distinction in future research. The first round of RAS assessment was conducted in Session 3, following the introduction of the definition and core principles of assertiveness in Session 2. This sequencing may have inadvertently influenced the outcomes. It would be helpful for future research to administer the RAS assessment in the initial session. This adjustment would mitigate any potential interference caused by participants' preliminary exposure to assertiveness concepts, ensuring a more accurate baseline measurement of assertiveness levels prior to any training influence.

Further, the 2-4 week follow-up period is relatively brief compared to the 3-6 months used in previous studies (e.g., Yoshinaga et al., 2018). Employing longitudinal design with extended follow-ups (six months to a year) and integrating observational methods would provide better insights into the sustainability of assertiveness training effects on workplace behavior.

Implications

Findings of this study have implications for research, practice, and organizational development, particularly in leadership training programs within high-stake industries such as pharmaceutical and medical device. From a research perspective, this study extends assertiveness training into a new professional context, contributing to leadership literature by demonstrating its applicability beyond healthcare professionals. The study bridges theory and practice by providing empirical evidence of the impact of assertiveness training on managerial effectiveness through the use of the Rathus Assertiveness Schedule (RAS). The training program's framework has potential for adaptation and implementation across different cultural settings, warranting further investigation into the effects of extended or repeated sessions on assertiveness enhancement.

Positive results in increased assertiveness and enhanced communication, conflict management, and decision-making skills among managers support the integration of structured assertiveness training into leadership development initiatives. For HROD practitioners, these findings reinforce the value of incorporating periodic reinforcement sessions to sustain assertiveness improvements and integrating practical, scenario-based training methods to help managers apply assertive communication strategies in real-world situations. By embedding assertiveness training into long-term leadership development programs and addressing self-assessment limitations, organizations can foster a culture of confident, effective leadership while strengthening the link between leadership theories and practical workplace applications.

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