

Effectiveness of Coping Strategies –based counseling program on Self-Transcendence Among Nurses At European Gaza Hospital

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Abstract

The study aimed to examine the effectiveness of a counseling program based on stress coping strategies in improving self-transcendence among nurses at European Gaza Hospital. The researchers used this quasiexperimental utilizing a single-group pretest-posttest design, 33 nurses, comprising 20 males and 13 females, participated in the study. The researchers developed and implemented self-transcendence scale as well as the counseling program itself. Results showed statistically significant improvements in self-transcendence scores from pretest to posttest. However, no significant differences were found between posttest and follow-up measures on the STS scale. These findings suggest the importance of prioritizing nurses' well-being through tailored counseling interventions. Recommendations include implementing psychological support programs, providing ongoing professional development, fostering a collaborative work environment, promoting self-care practices, and conducting regular program evaluations. These strategies aim to enhance nursing practices and promote mental health and self-transcendence among nurses.

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Introduction

Nurses considered the backbone of healthcare, constantly grapple with substantial stress and emotional strain due to their demanding roles. Their work, characterized by direct patient care, long hours, and high-stakes decision-making, often leads to chronic stress that can diminish their sense of transcendence, affecting both their professional performance. The nurses at the European Gaza Hospital in the Gaza Strip face even more formidable challenges, given the region's socio-political turmoil. Therefore, exploring interventions to improve their self-transcendence is imperative.

These healthcare heroes are vital for ensuring high-quality and safe patient care, yet they face a myriad of challenges that endanger their well-being. The relentless demands of their job—coping with work pressure, exposure to various risks, navigating moral and ethical dilemmas, and addressing the needs of patients and their families—place a significant burden on them. Beyond their clinical duties, nurses are also expected to engage in professional development, continuing education, and workplace management. The cumulative effect of these pressures often makes it challenging for them to balance their personal and professional lives, leading to stress and burnout (Cruz, 2017; Abd Elkader et al., 2019).

The concept of self-transcendence, as defined by Reed, refers to an individual's ability to expand the boundaries of the self in several ways: intrapersonally (toward greater awareness of one's philosophy, values, and dreams), interpersonally (to connect with others and the surrounding environment), temporally (to integrate the past and future in a meaningful way in the present), and transpersonally (to connect with dimensions beyond one's known world). It is a characteristic of developmental maturity, involving an increased awareness of the environment and an orientation toward broader perspectives on life and the surrounding environment (Smith and Lier, 2014; Reed, 2009). People who face life-threatening experiences and difficult life events gain this expanded awareness of the self and environment. Through this mature approach to life and death, individuals reflect goals that align significantly with Erikson's generativity and ego integrity perspectives, rather than pursuing the self-struggle for identity characteristic of earlier developmental stages (Sheldon and Kasser, 2001).

Thus, self-transcendence can be understood as a human experience encompassing psychological, social, physical, emotional, and spiritual aspects (Reed, 2009). There is a positive relationship between work engagement (vitality, dedication, and absorption) and self-transcendence, which contributes to increasing nurses' self-awareness, inner strength, understanding of difficult work situations, reducing burnout, and enhancing

quality of life (Palmer et al., 2010; Reed, 1996). Self-transcendence can be stimulated through occupational and life stressors and work difficulties to enhance well-being by transforming losses and difficulties into therapeutic experiences (Reed, 1996; Barton and Hart, 2023).

Coping involves the deliberate allocation of one's mental and behavioral resources to address personal and interpersonal challenges, aiming to manage, alleviate, or endure stress and conflicts. It encompasses the conscious thoughts and actions deployed to navigate both internal and external stressors. Unlike defense mechanisms, which operate on a subconscious level, coping strategies are consciously chosen and executed methods to mitigate stress. These strategies, often referred to as coping skills, are aimed at reducing or tolerating stressors. Coping primarily encompasses adaptive coping strategies, which are constructive approaches aimed at stress reduction(Jathanna & D'Silva, 2014). These strategies fall into two main categories: emotion-focused coping and solution-focused coping(Kato, 2015).

Physical and psychological aspects significantly impact nurses' performance, life, and productivity, as well as community safety. The strategies adopted by individuals, along with the habits and activities they engage in, are influential variables affecting their mental and physical health. Therefore, nurses need guidance and training programs (Mohammed et al., 2023; Hossain and Clatty, 2021), which positively reflect on their mental health and improve their self-transcendence and quality of life at the European Gaza Hospital. This hospital is one of the prominent healthcare facilities in the region, serving a large number of patients with a variety of health conditions. Based on the principles of stress-coping strategies, nurses learn how to control stress and manage pressures correctly. The program aims to equip nurses with the necessary tools and skills to efficiently and effectively face daily challenges and stresses in the nursing field. The goal is not only to overcome professional challenges but also to enhance their self-transcendence and improve their personal and professional quality of life.

Problem Statement

In recent decades, the global nursing workforce has grown substantially, with more nurses enduring long-hour shifts and escalating stress levels (Vitale et al., 2015). These dedicated professionals often contend with overwhelming workloads, limited social support, and a declining quality of life. As their careers progress, the relentless demands of night and shift work can lead to disillusionment and diminished resilience. This trend is coupled with numerous health issues, such as fatigue, sleep disturbances, anxiety, and disruptions to their daily routines.

In clinical settings, nurses frequently face challenging circumstances that can further degrade their quality of life. To foster a more positive outlook, enhance overall well-being, boost productivity, and reduce stress levels, it is crucial for nurses to develop effective coping mechanisms. This study aims to address these needs by exploring a the effectiveness of counseling program designed to provide structured support and guidance, aiding nurses in developing better stress management strategies and improving their self-transcendence. By delving into various coping techniques, this research seeks to equip nurses with the tools needed to strengthen their resilience and enhance their transcendence amidst the demands of their challenging profession.

Study Objectives

- 1. To assess the effectiveness of a counseling program based on coping strategies in improving selftranscendence among nurses at European Gaza Hospital.
- 2. To Detect the differences between the mean scores of individuals in the experimental group on the pretest and posttest on the self-transcendence scale.
- 3. To Detect the differences between the mean scores of individuals in the experimental group on the posttest and follow-up test on the self-transcendence scale.
- 4. To provide recommendations for integrating effective coping strategies into the regular support systems for nurses at the European Gaza Hospital.

Study hypothesis

1. H1: There were no statistically significant differences at a significance level (α) of 0.05 or less between the mean scores of nurses in the experimental group on the pretest and posttest on the self-transcendence scale.

2. H2: There were no statistically significant differences at a significance level (α) of 0.05 or less between the mean scores of nurses in the experimental group on the posttest and follow-up test on the self-transcendence scale.

Theoretical Significance

This study holds particular importance as it aims to present a counseling program based on stress-coping strategies targeting nurses working at the European Gaza Hospital. The contribution of this program to enhancing self-transcendence and quality of life for nurses represents a crucial step towards improving the mental and overall health of these healthcare professionals. Beyond the direct benefits to the nurses, the results of this study will provide valuable theoretical and practical information on coping strategies and self-transcendence. This will contribute to a comprehensive understanding of the needs and challenges faced by nurses and how to enhance their personal and professional well-being.

Moreover, this study will improve the performance of healthcare teams and organizations in general. A deeper understanding of nurses' needs and the improvement of their self-transcendence will enhance the healthcare services they provide to patients, thereby improving overall healthcare services. Given the importance of mental health care for nurses and healthcare teams, this study can serve as a guide on how to improve conditions and raise awareness about the importance of supporting and ensuring the well-being of nurses. Achieving this goal contributes to the improvement of public health and promotes sustainable development in the healthcare sector.

Practical Significance

The practical significance of this research lies in raising awareness about the work-related stress experienced by nurses and its impact on their quality of life and level of self-transcendence. This research is a valuable addition to the limited quasi-experimental studies currently available in this field, contributing to a deeper understanding of the challenges and needs of nurses. Additionally, the findings of this research will guide psychologists and decision-makers at the Ministry of Health in implementing effective strategies to cope with work stress and enhance self-transcendence for healthcare workers. This can be achieved by providing appropriate training and counseling using specific and proven coping strategies. In turn, this can significantly improve the overall conditions for healthcare workers, increasing their effectiveness and well-being at work.

Moreover, this research can play a crucial role in improving the work environment and mental health of nurses and healthcare workers in general. It can serve as an inspiration for the implementation of similar strategies in the future.

Study Method

Study design

This study employed a quasi-experimental (pre/post) research design. Quasi-experimental research shares similarities with experimental research but does not meet the criteria for true experimental research. While the independent variable is manipulated, participants are not randomly allocated to conditions or sequences of conditions (Cook & Campbell, 1979).

Study setting

The study was conducted at the European Gaza Hospital among nurses who working and recruited for nursing profession from September, 2023 to October 2023.

Study sample

To fulfill the objectives of this study, a convenience sample comprising 33 nurse from them 20 male and 13 female nurses from the European Gaza Hospital was utilized. This sample encompassed all nurses who were actively working during the study period.

Table(1): distribution of the study sample

Total population	Sum	Male		Female	
Study population	348	211	60.6	137	39.4
Pilot study	45	27	60.6	18	39.4
Original study sample	240	145	60.5	95	39.5
Nurses with low scores	160	97	60.6	63	39.4
Experimental sample	33	20	60.6	13	39.4

Study tools:

Self-Transcendence Scale

After reviewing previous literature related to self-transcendence, the researcher developed a self-transcendence scale based on prior studies such as those by Wu et al. (2016), McCarthy and Bockweg (2013), Lundman et al. (2011), Schnell (2009), Wong (1998), Reker (1996), and Reed (1991).

Description of the STS scale

The Self-Transcendence Scale consists of four dimensions, each comprising five indicators to measure the respective dimension according to the researcher's definition of self-transcendence. The researcher defined self-transcendence as "the ability to use positive personal characteristics to assist individuals and communities with a positive self-motivation to achieve goals related to personal and community well-being, self-perceptions, self-transcendence, and achieving an integrated vision without regard to personal attachments." The sub-dimensions of this definition are:

- 1. **Personal Dimension**: Possessing a personal philosophy, meaning, and values in life and the ability to achieve them within a social and cultural context.
- 2. Social Dimension: The ability to connect with the community and environment, share ethical and behavioral values with individuals, and provide assistance that enhances community well-being within the cultural and environmental context.
- **3.** Self-Perception Dimension: The individual's ability to utilize past experiences and integrate them into future planning, benefiting from them in the present. This constitutes the individual's life experience, development, and growth.
- 4. Self-Transcendence Dimension: The individual's ability to go beyond personal or selfish interests and dedicate themselves to providing exceptional assistance to the community through elevated ethical values.

Each dimension includes five positively worded items, rated on a five-point Likert scale where "Always" receives 5 points, "Often" receives 4 points, "Sometimes" receives 3 points, "Rarely" receives 2 points, and "Never" receives 1 point. Participants' scores range from 20 to 100, with higher scores indicating a higher level of self-transcendence. Conversely, lower scores indicate a need for improvement in self-transcendence.

Procedures

Face and Content Validity

After formulating the items and establishing the dimensions of the Self-Transcendence Scale, the researcher presented the scale to a group of experts in psychological counseling, educational management, and educational administration at universities in Jordan, Palestine, and Saudi Arabia. The aim was to examine and evaluate the scale based on the items' relevance to the field and the dimension they measure, as well as the extent to which the scale's items relate to the field they belong to and the attribute the tool measures. The experts also assessed the clarity and linguistic structure of the items. Subsequently, the reliability of the tool domains was assessed using the test-retest method, demonstrating high reliability, as indicated by Cronbach's alpha coefficients (refer to the table for details). Additionally, the internal consistency of the self-transcendence scale domains were evaluated (see the table for results).

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		Scale dimensions	Items	Correlation	Alpha Cronbach
	.1	Personal dimension	5-1	0.890	0.724
	.2	Social dimension	10-6	0.909	0.703
	.3	Self-perception dimension	15-11	0.921	0.744
	.4	Self-transcendence dimension	20-16	0.734	0.747
		Total STS			0.885

Table(1): description of self-transcendence scale

Ethical Considerations

Verbal consent was obtained from participating nurses, who were informed about the study's purpose during the initial interview. They were assured that their participation was entirely voluntary and that they could withdraw from the study at any time without any consequences. The confidentiality of all provided information was guaranteed.

Fieldwork Overview

Official permission for data collection and the implementation of the educational program was secured from the Ministry of Health and the European Gaza Hospital directorate. Researchers conducted individual interviews with available nurses to explain the study's objectives and obtain their consent to participate. The study spanned approximately 12 months, from May 2023 to May 2024, and was conducted in five phases:

Preparation Phase: In this initial phase, researchers conducted an extensive review of both national and international literature and explored online resources to develop the study tools and design a counseling program based on coping strategies. The tools were subsequently revised and refined.

Assessment Phase: Researchers met with nurses to explain the study's purpose and the method for completing the questionnaires. This was done either individually or in group meetings. In August 2023, questionnaires were distributed to participating nurses prior to the program's implementation.

Planning Phase: Drawing on literature reviews, sample characteristics, and assessment phase results, researchers designed a counseling program aimed at improving the quality of life for nurses at EGH through coping strategies.

Implementation Phase: Researchers first announced the program within the study setting to gauge participants' readiness and encourage their involvement. The program was explained to emergency clinic unit nurses working night shifts, who agreed to participate and provided a learning room for the sessions. The counseling program, designed based on identified needs and literature reviews, included educational booklets to enhance nurses' coping abilities and quality of life.

To achieve the program's objectives, a variety of educational strategies, teaching methods, media, and evaluation techniques were employed. Pre-test sheets were distributed to nurses to assess their coping methods and quality of life over 13 sessions. The program sessions, held three times per a week (Sunday, Tuesday, and Thursday), utilized lectures, group discussions, and brainstorming, lasting 60-70 minutes each, depending on the workload. Sessions began at 11:00 AM and concluded at 1:00 PM. Educational booklets were distributed on the first day, and each session began with an orientation and ended with feedback on the previous and current sessions. Real-life scenarios were provided for nurses to suggest alternative solutions.

Evaluation Phase: The program's impact was assessed using the same tools as the pre-test. A post-test was administered at the final session to measure improvements in nurses' coping abilities and quality of life. The data were then analyzed, interpreted, and clinically evaluated, leading to a comprehensive discussion of the study's findings.





Figure (1): the framework for the counseling program

Results

Results Related to H1:

H1: "There are no statistically significant differences at the significance level ($\alpha < 0.05$) between the mean ranks of the experimental group's scores in the pre-test and post-test measurements of the STS".

To verify the validity of this hypothesis, the researcher calculated the arithmetic means of the experimental group members' scores in the pre-test and post-test using the paired sample t-test. The following table illustrates the significance of the differences between the pre-test and post-test measurements for the experimental group members.

STS domains	Pre/post	No.	Mean	St.d	T value	Significance
Personal dimension	Posttest	33	22.42	2.44	9.114	**0.000
	Pretest	33	15.27	3.11		
Social dimension	Posttest	33	21.93	3.00	6.163	**0.000
	Pretest	33	17.36	3.48		
Self-perception dimension	Posttest	33	22.00	3.26	5.846	*0.000
	Pretest	33	17.12	4.10		
Self-transcendence	Posttest	33	21.27	2.95	7.779	**0.000
dimension	Pretest	33	16.42	2.83		
STS scale	Posttest	33	87.63	10.73	9.162	**0.000
STS scale	Pretest	33	66.66	8.84		

Table(2) mean score of experimental group on pretest/posttest on STS scale

The results from the previous table indicate that the "t" value for personal well-being is 9.114, for social wellbeing is 6.163, for self-concept is 5.846, for self-transcendence is 7.779, and for the Self-Transcendence Scale as a whole is 9.162, with a significance level (p-value) of 0.000, which is less than the significance level of 0.05. Therefore, the null hypothesis is rejected, and the alternative hypothesis is accepted, which suggests that "there are statistically significant differences at a significance level ($\alpha \le 0.05$) between the mean scores of individuals in the experimental group in the pre-test and post-test on the Self-Transcendence Scale dimensions ".

Comparing the mean scores (post-test - pre-test), it is evident that the mean score for the post-test is higher than the mean score for the pre-test in the dimensions of the Self-Transcendence Scale. Thus, the significance of the differences favors the post-test.

The results indicate a positive impact of the intervention on the self-transcendence levels of individuals in the experimental group. This effect can be interpreted as an improvement in aspects related to self-confidence, positive thinking, self-development, and enhancement of coping strategies.

The researcher attributes these results to a variety of factors and activities implemented through the counseling program. The techniques used in the counseling program played a significant role in improving selftranscendence among nurses in terms of their diversity, integration, including: Psychoeducation": Explaining and clarifying self-transcendence concepts and dimensions, coping strategies, positive thinking patterns, and their application in facing challenges. Where, Positive reinforcement": Encouraging nurses to think positively about themselves and their abilities, providing positive reinforcement during counseling sessions, leading to increased confidence and success-oriented thinking. Furthermore, Role-play": Encouraging nurses to engage in roleplaying in various scenarios, which contributed to the development of thinking and dealing skills, as well as problem-solving effectiveness. Also, Mindfulness": Mindfulness practices reduced stress and increased selfawareness, contributing to the improvement of self-transcendence. In addition, Self-talk": Encouraging nurses to practice positive self-talk, focusing on optimistic perspectives towards life events. While, Emotional disclosure": Encouraging expression of strong emotions and guiding nurses towards positive thinking in facing emotional challenges. Meanwhile, Dialogue and discussion": Participating in group discussions promoted social interaction and knowledge exchange. However, Peer support": Forming support groups enhanced social support and mutual trust. Finally, Homework activities": Assigned activities at home, such as relaxation, mindfulness, self-talk, and problem-solving, contributed to improving mental health and reducing stress.

Meditation and relaxation techniques had a positive impact on nurses by enhancing self-transcendence and improving their personal and professional quality of life. These techniques encouraged positive thinking, reduced stress levels, and increased self-awareness. They also enhanced the ability to cope with challenges, fostering a sense of inner peace and mental clarity. Moreover, meditation promoted self-compassion, an essential aspect of self-transcendence. These techniques contributed in various forms to enhance and develop coping strategies, which in turn led to improvements in self-transcendence levels by enhancing personal, social well-being, selfconcept, and self-transcendence.

To determine the effect size, the researcher calculated Cohen's d value using the following equation ($d = \frac{t}{\sqrt{n}}$). An effect size is considered small (0.2), medium (0.5), or large (0.8). The results of the effect size calculations can be summarized in the following table:

STS domains	Cohen (d)	Effect size
Personal dimension	1.58	Large
Social dimension	1.07	Large
Self-perception dimension	1.01	Large
Self-transcendence	1.35	Large
STS	1.59	Large

Table(3): Cohen equation for effect size STS

The previous table indicates that the average post-test scores for personal well-being, social well-being, self-concept, and self-transcendence were (1.58, 1.07, 1.01, 1.35) respectively, with a standard deviation higher than

the average pre-test scores. This implies a significant effect of the program in improving self-transcendence among nurses at Gaza European Hospital.

Observing the impact of the counseling program, we find that the average post-test score for personal well-being was 1.58 standard deviations higher than the average pre-test score, indicating a significant impact of the program on change within the experimental group. The average post-test score for self-transcendence was 1.35 standard deviations higher than the average pre-test score, ranking second. The average post-test score for social well-being was 1.07, and the average post-test score for self-concept was 1.01. The average post-test score for self-transcendence as a whole was 1.59 standard deviations higher than the average pre-test score for the experimental group, all of which exceed the Cohen's specified value of 0.8 for program effect. This means that the counseling program had a clear and significant impact on the change that occurred within the experimental group.

These results align with several previous experimental studies conducted on nurses. For example, Dos Santos et al. (2016) used meditation, love, and compassion to enhance self-transcendence among nurses. Hwang et al. (2013) utilized intergenerational service learning to promote self-transcendence among nurses and build positive attitudes towards the elderly. Lamet et al. (2011); Chen and Walsh (2009); Walsh et al. (2008); Hacker (2007) employed creative arts-based interventions to enhance self-transcendence among nurses. Wasner et al. (2005) demonstrated the importance of spiritual care in improving self-transcendence among nurses and enhancing their attitudes towards elderly patients.

Results Related to H2

H2:"There are no statistically significant differences at the significance level ($\alpha \le 0.05$) between the mean ranks of the experimental group's scores in the post-test and follow-up measurements on the STS ".

To verify the hypothesis, the researcher calculated the arithmetic means for the experimental group in the posttest and follow-up measurements using the paired sample t-test. The following table illustrates the significance of the differences between the post-test and follow-up measurements for the experimental group.

STS domains	Pre/post	No.	Mean	St.d	T value	Significance
Personal dimension	Posttest	33	22.42	2.44	0.803	0.428
	Pretest	33	21.96	2.17		
Social dimension	Posttest	33	21.93	3.00	0.121-	0.905
	Pretest	33	22.03	2.88		
Self-perception dimension	Posttest	33	22.00	3.26	0.316	0.754
	Pretest	33	21.75	3.12		
Self-transcendence	Posttest	33	21.27	2.95	0.556-	0.582
dimension	Pretest	33	21.66	2.35		
STS scale	Posttest	33	87.63	10.73	0.086	0.932
SIS scale	Pretest	33	87.42	8.64		

Table(4):) mean score of experimental group on follow-up-test/posttest on STS scale

The previous table reveals that the "t" value for personal dimension is (0.803), for social dimension (-0.121), for self-perception (0.316), for self-transcendence (-0.556), and for the overall self-transcendence scale (0.086), all at a significance level greater than (0.05). Therefore, the null hypothesis is accepted, which states that "there are no statistically significant differences at the ($\alpha \le 0.05$) significance level between the means of the scores of individuals in the experimental group in the pre-test and post-test on the self-transcendence scale."

The researcher believes that the continued effectiveness of the counseling program can be attributed to various factors, including a sustainability session aimed at guiding participants on how to integrate stress coping strategies into their daily lives, encouraging them to seek opportunities for growth and development, and reminding them of their goals.

The sustainability of development is an essential part of any successful counseling program and is of great importance to the participating nurses. This has a positive impact on improving the mental health, personal, and professional quality of life of nurses. Sustainability of development has been reinforced in several ways, such as encouraging nurses to continuously seek opportunities for growth and development in their daily lives by enhancing their skills and capabilities sustainably, leading to improved performance at work and increased satisfaction with their lives. They were also reminded of their goals and the importance they represent to them, which helped maintain dedication and motivation to move forward.

Additionally, they were regularly guided towards achieving their professional and personal goals. Furthermore, communication among participating nurses in the program was encouraged due to its significant positive impact, enabling them to share their experiences and coping strategies with daily life stresses and problems.

Moreover, they were encouraged to remain committed to continuous learning and to attend workshops and training courses that contribute to the development of their skills and knowledge. They were also taught self-care techniques such as meditation, yoga, and exercise to contribute to sustaining development and help alleviate stress and promote self-awareness.

Thus, sustaining development means that nurses not only receive support and guidance during the counseling program but are also empowered to continue improving their personal and professional lives sustainably over time.

There was also a significant role played by the techniques used in the counseling program, including psychoeducation, mindfulness practice and meditation, encouragement of peer and supervisor support. Emotional disclosure through writing and talking, prayer, sharing stories and successes, group exercises, learning relaxation techniques, and engaging in physical activity were effective means of expressing emotions and contributed to improving self-awareness and helped nurses better address psychological challenges. On the other hand, spiritual reinforcement through prayer, sharing stories and successes contributed to enhancing the spiritual and cultural dimension of nurses, positively impacting their mental health, self-transcendence, and emotional stability. Engaging in physical exercise and adopting healthy lifestyle habits promoted physical fitness and overall health for nurses, which is an essential part of self-care.

These activities and techniques contributed to enhancing the mental, physical, and social health of nurses and enabled them to better cope with daily challenges. This, in turn, contributed to maintaining the effectiveness of the counseling program and achieving positive results in the long run.

The results of the current study regarding the sustainability of the effectiveness of the counseling program in the follow-up test are consistent with the results of many previous studies that addressed the improvement of self-transcendence. For example, Mohammed's study (2023) showed the continued effect of the program after two consecutive months on the self-transcendence variable. Afaghi et al. (2020) demonstrated the sustained effect of the program in the follow-up test on the self-transcendence variable. Dos Santos et al. (2016) showed the sustained effect of the program on the self-transcendence variable during the follow-up period. Likewise, Hwang et al. (2013) showed the sustained effect of the program after 16 months on the self-transcendence variable, and Wasner et al. (2005) demonstrated the sustained effect of the program on the sustained effect of the program on the self-transcendence variable during the follow-up test variable, after 6 months.

Conclusions Drawn from the Study

In conclusion, the counseling program implemented in this study has shown significant effectiveness in improving self-transcendence among nurses. The findings reveal that the program has led to substantial enhancements in various aspects of self-transcendence, including personal well-being, social well-being, self-concept, and self-transcendence itself. The statistical analysis demonstrates that the post-test scores for these dimensions were significantly higher than the pre-test scores, indicating a clear and substantial impact of the counseling program on the participants.

Moreover, the sustained effectiveness of the program was evident in the follow-up test, where participants continued to show improvements in self-transcendence even after the conclusion of the program. This sustained effect underscores the long-term benefits of the counseling intervention, indicating that the strategies and techniques imparted during the program had a lasting impact on the participants' self-transcendence.

The success of the counseling program can be attributed to several factors, including the incorporation of stress coping strategies into daily life, encouragement of growth and development opportunities, and the establishment

of a supportive environment among participants. Additionally, the utilization of various techniques such as psychoeducation, mindfulness practices, emotional disclosure, and spiritual reinforcement played a significant role in enhancing self-awareness and facilitating the participants' ability to cope with challenges effectively.

Overall, the results of this study contribute to the growing body of evidence supporting the efficacy of counseling interventions in promoting self-transcendence among healthcare professionals. By addressing the holistic well-being of nurses and empowering them to transcend their personal limitations, such programs not only benefit the individuals but also have the potential to enhance the quality of patient care and contribute to a healthcare settings. Therefore, the implementation of counseling programs aimed at fostering self-transcendence should be considered an integral part of professional development and support initiatives for healthcare professionals.

Proposed Research Studies:

- 1. Exploring the Long-Term Impact of Mindfulness-Based Counseling on Self-Transcendence Among Healthcare Professionals"
- 2. Examining the Role of Peer Support and Coping Strategies in Enhancing Self-Transcendence: A Mixed-Methods Approach"
- 3. Integrating Art Therapy into Counseling Interventions for Nurses: Effects on Self-Transcendence and Well-Being"

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Annex:

Table(A) differences in the mean score of nurses STS scale pre and post application of the counseling program

	Pretest Post		Postte	test	
Personal domain	mean	SD	mean	SD	
I have meaningful values in life.	3.33	1.36	4.60	0.49	
I see that there is meaning to my spiritual beliefs.	3.06	1.41	4.54	.79	
I strive to achieve my goals and dreams in life.	3.06	1.46	4.57	.56	
I enjoy my skills and hobbies.	3.00	1.54	4.30	.68	
I feel that success and failure have meaning in my life.	2.81	1.55	4.39	.74	
Social domain					
I make sure to share my values with others.	3.75	1.09	4.39	.78	
I feel that I provide valuable services to society.	3.39	1.39	4.48	.712	
I strive to help others spontaneously.	3.09	1.48	4.39	.78	
I feel a moral connection between myself and society.	3.72	1.32	4.42	.75	
I give what I have to others despite my need for it.	3.39	1.58	4.24	.75	
Self-perception					
I feel that my past experiences have value in my life.	3.72	1.45	4.48	.71	
I see that getting older is a part of life.	3.24	1.43	4.45	.75	
I believe that I am capable of facing life's challenges.	3.42	1.29	4.24	.90	
I feel that previous experiences contributed to building my attitudes.	3.36	1.43	4.42	.75	
I feel that difficult experiences have a role in my life.	3.36	1.29	4.39	.65	
Transcending oneself					
I look for values beyond self-interest.	3.21	1.31	4.12	.81	
I believe I can do something special in this community.	3.48	1.37	4.39	.74	
I do my best to make this community better.	3.42	1.25	4.21	.81	
I can make contributions that benefit society.	3.30	1.18	4.15	.75	
I like people to remind me of the good deeds I do for them.	3.00	1.32	4.39	.74	

Annex

Table(B) sessions

Consign 1. A consintance and Duilding Turet	Seasien 2. Understanding Self transcondence
Session 1: Acquaintance and Building Trust	Session 2: Understanding Self-transcendence
Establish trust and rapport among participants.	Define and discuss the concept of self-transcendence
Techniques: Lecture, Discussion and Dialogue,	Techniques: Lecture, Dialogue and Discussion,
Questions and Interpretation	Psychoeducation, Positive Reinforcement,
Activities	Homework**
Lecture:** Brief introduction to the program and	Activities
its objectives.	Lecture: Overview of self-transcendence and its
Discussion and Dialogue :** Icebreaker activities	dimensions.
to introduce participants	Dialogue and Discussion: Group discussion on
Questions and Interpretation:** Open-ended	personal perceptions of quality of life.
questions to encourage sharing of personal	Psychoeducation : Explanation of the impact of self-
experiences and expectations.	transcendence on overall well-being.
	Positive Reinforcement: Encouraging positive
	reflections.
	Homework:** Participants complete a self-
	assessment on their current self-transcendence.
Session 3: Learning Coping Strategies	Session 4: Problem-Focused Coping
Introduce various coping strategies.	Teach problem-focused coping techniques.
Techniques: Discussion and Dialogue,	Techniques: Discussion and Dialogue, Homework,
Psychoeducation, Homework**	Role-Play**
Activities	Activities
Discussion and Dialogue: Sharing current	Discussion and Dialogue: Identifying common
coping mechanisms.	problems and potential solutions.
Psychoeducation : Overview of different coping	Role-Play: Practice problem-solving in hypothetical
strategies.	scenarios.
Homework: Participants reflect on and write	Homework: Apply problem-focused coping to a
about their current coping strategies and their	real-life situation and journal the
effectiveness.	3
Session 5: Emotion-Focused Coping	Session 6: Meaning-Focused Coping
Session 5: Emotion-Focused Coping Explore emotion-focused coping methods.	Session 6: Meaning-Focused Coping Understand and apply meaning-focused coping
Explore emotion-focused coping methods.	Understand and apply meaning-focused coping
	Understand and apply meaning-focused coping strategies.
Explore emotion-focused coping methods. Techniques : Emotional Disclosure, Meditation,	Understand and apply meaning-focused coping
Explore emotion-focused coping methods. Techniques : Emotional Disclosure, Meditation, Homework** Activities	Understand and apply meaning-focused coping strategies. Techniques : Mindfulness, Meditation, Homework** Activities
Explore emotion-focused coping methods. Techniques : Emotional Disclosure, Meditation, Homework** Activities Emotional Disclosure : Participants share their	Understand and apply meaning-focused coping strategies. Techniques : Mindfulness, Meditation, Homework**
Explore emotion-focused coping methods. Techniques : Emotional Disclosure, Meditation, Homework** Activities Emotional Disclosure : Participants share their emotional responses to stress.	Understand and apply meaning-focused coping strategies. Techniques : Mindfulness, Meditation, Homework** Activities Mindfulness : Exercises to focus on the present moment.
Explore emotion-focused coping methods. Techniques : Emotional Disclosure, Meditation, Homework** Activities Emotional Disclosure : Participants share their emotional responses to stress.	Understand and apply meaning-focused coping strategies. Techniques : Mindfulness, Meditation, Homework** Activities Mindfulness : Exercises to focus on the present
Explore emotion-focused coping methods. Techniques: Emotional Disclosure, Meditation, Homework** Activities Emotional Disclosure: Participants share their emotional responses to stress. Meditation: Guided meditation to manage	Understand and apply meaning-focused coping strategies. Techniques : Mindfulness, Meditation, Homework** Activities Mindfulness : Exercises to focus on the present moment. Meditation : Guided meditation on finding meaning in experiences.
Explore emotion-focused coping methods. Techniques: Emotional Disclosure, Meditation, Homework** Activities Emotional Disclosure: Participants share their emotional responses to stress. Meditation: Guided meditation to manage emotions.	Understand and apply meaning-focused coping strategies. Techniques : Mindfulness, Meditation, Homework** Activities Mindfulness : Exercises to focus on the present moment. Meditation : Guided meditation on finding meaning
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Explore emotion-focused coping methods. Techniques: Emotional Disclosure, Meditation, Homework** Activities Emotional Disclosure: Participants share their emotional responses to stress. Meditation: Guided meditation to manage emotions. Homework: Practice meditation and document emotional changes. Session 7: Social Support Coping Highlight the importance of social support in coping. Techniques: Support Group, Homework,	Understand and apply meaning-focused coping strategies. Techniques: Mindfulness, Meditation, Homework** Activities Mindfulness: Exercises to focus on the present moment. Meditation: Guided meditation on finding meaning in experiences. Homework: Reflect on and write about meaningful aspects of life. Session 8: Proactive Coping: Teach proactive coping strategies. Techniques: Sport Exercises, Relaxation, Meditation, Homework** Activities**:
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 Explore emotion-focused coping methods. Techniques: Emotional Disclosure, Meditation, Homework** Activities Emotional Disclosure: Participants share their emotional responses to stress. Meditation: Guided meditation to manage emotions. Homework: Practice meditation and document emotional changes. Session 7: Social Support Coping Highlight the importance of social support in coping. Techniques: Support Group, Homework, Discussion** Activities Support Group: Form small groups to share experiences and support each other. Discussion: Benefits of social support and ways to strengthen it. Homework: Engage with a support network and document interactions. 	Understand and apply meaning-focused coping strategies. Techniques: Mindfulness, Meditation, Homework** Activities Mindfulness: Exercises to focus on the present moment. Meditation: Guided meditation on finding meaning in experiences. Homework: Reflect on and write about meaningful aspects of life. Session 8: Proactive Coping: Teach proactive coping strategies. Techniques: Sport Exercises, Relaxation, Meditation, Homework** Activities**: Sport Exercises: Physical activities to reduce stress. Relaxation: Techniques to calm the mind and body. Meditation: Guided meditation for proactive coping. Homework: Incorporate proactive coping strategies

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strategies.	Techniques: Meditation, Relaxation, Homework**			
Techniques: Mindfulness, Meditation,	Activities**:			
Homework**	Meditation: Guided meditation with a religious			
Activities	focus.			
Mindfulness:** Exercises to connect with	Relaxation: Techniques to find peace and comfort			
spiritual beliefs.	in religious practices.			
Meditation:** Guided spiritual meditation.	Homework: Engage in religious practices and			
Homework:** Practice spiritual activities and	document experiences.			
reflect on their impact.				
Session 11: Cognitive Coping Strategies	Session 12: Sustainability of the Program			
Apply cognitive coping strategies.	Ensure the long-term sustainability of coping			
Techniques: Self-Talk, Relaxation, Homework	strategies.			
Activities:	Techniques: Group Process, Meditation,			
Self-Talk: Exercises to promote positive	Relaxation**			
thinking.	Activities**:			
Relaxation: Techniques to manage stress through	Group Process: Discuss ways to maintain coping			
cognitive reframing.	strategies over time.			
Homework: Practice self-talk and relaxation	Meditation: Guided sessions to reinforce			
techniques, and journal the outcomes.	sustainability.			
	Relaxation: Techniques to ensure continued use of			
	coping skills.			
Session 13: Evaluation and Ending				
Evaluate the program's effectiveness and conclude the sessions.				
Techniques: Positive Encouragement, Discussion, Reinforcement				
Activities				
Positive Encouragement: Reflect on progress and celebrate achievements.				
Discussion: Group discussion on personal growth and program impact.				
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Reinforcement: Provide positive reinforcement for continued use of coping strategies.