

Self-Transcendence: Scale and Theory

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Reed's *Self-Transcendence Scale* (STS) emphasizes developmentally-based strengths rather than decremental characteristics of individuals across the lifespan from adolescence to later life. The (STS) measures a major psychosocial/spiritual resource of developmental maturity, self-transcendence. "Self-transcendence" refers to the capacity to expand personal boundaries and be oriented toward perspectives, activities, and purposes beyond the self without negating the value of the self and the present context. Self-transcendence is defined as the expansion of self-boundaries in multi-dimensional ways: for example: (a) inwardly in introspective activities; (b) outwardly through concerns about others' welfare; (c) temporally whereby the perceptions of one's past and future enhance the present; and (d) transpersonally through connections with a higher or greater dimension. The STS has been translated into various languages.

The STS is a one-dimensional scale, consisting of 15 items that together identify characteristics of a matured view of life that expand boundaries of the self. The STS is administered as an interview to elicit perceptions of the degree to which the participants experience each item in their current life. It may also be administered as a questionnaire. Responses are based upon a 4-point scale ranging from 1 for "not at all" to 4 for "very much." The final score reflects overall level of self-transcendence and takes into account intraindividual differences in self-transcendence experiences; a low score on one item may be offset by a high score on another item. A sample of items includes: "Sharing my wisdom and experience with others"; "helping others in some way"; and "finding meaning in my past experiences." Items were developed to avoid bias toward the physically able or healthy person, and instead to measure the person's ability to derive a sense of well-being through cognitive, creative, social, spiritual, and introspective avenues.

The STS originally was developed from a 36-item "Developmental Resources of Later Adulthood" scale (Reed, 1986), in which s-t was the primary factor, accounting for up to 80% of the variance. The STS was constructed to measure *self-transcendence*, with less redundancy and a better scaling technique for use across various ages. Reliability as estimated by Cronbach's alpha ranges from .80 to .88 (Coward, 1990). Content validity is adequate as based on a thorough literature review of empirical and theoretical literature to specify the domain of content and careful construction and refinement of the items. Support for construct validity was supported based on various empirical results, including significant correlations with other measures as theorized, in qualitative studies of subjective experiences of s-t, and in secondary analysis of data from correlational and longitudinal studies (e.g. Coward, 1990; Reed, 1991)

Brief Description of the Reliability and Validity of the STS

The Self-Transcendence Scale (STS) (Reed, 1986) consists of 15 items relating to the specific behaviors or perspectives involving the expansion of self-boundaries in various ways, including inwardly through introspective activities, outwardly through involvement with others, and temporally by living in the present or holding perspectives of past and future that enhance the present. Possible scores range from 15 to 60 (or 1.0 to 4.0 if the total score is divided by the total number of items) where the higher scores indicate greater self-transcendence. Generally, 15 to 30 is considered to be a low level of self-transcendence; 31-45 is moderate; and 46 to 60 is considered high levels of self-transcendence.

The instrument has been used in many populations of various ethnicities and across adulthood from young to middle and especially older adults; among well and ill groups; and with patients, caregivers, and professional nurses. A version for adolescents has been developed and used successfully. The STS has demonstrated acceptable construct validity and reliability, which generally has been found to be around .80 to as high as .94 (e.g. Bean & Wagner, 2006; Chen & Walsh, 2009; Coward, 1990; Coward, 1991; Reed, 1989; Reed, 1991; Thomas, Burton, Quinn Griffin, & Fitzpatrick, 2010).

SCORING THE SELF-TRANSCENDENCE SCALE

The possible scores for each item range from 1 to 4, with:

Not at all = 1 to *Very much* = 4, as indicated on the questionnaire.

To calculate the STS total score:

- Sum the participant's scores on each of the 15 items, for a total score of 15 to 60.
- In some previous studies, a total score ranging from 1.0 to 4.0 was obtained because researchers divided the sum by the number of items answered. Multiplying this total score by 15 will generate a total score ranging from 15 to 60 if you want to compare your scores with those found in other studies.

ACQUIRING PERMISSION FOR USE

You are welcome to use the instrument in your research, but in return I ask that you send me a brief abstract of the outcomes of your use of the STS, such as its reliability (internal consistency as estimated by Cronbach's alpha), how it correlated with other measures. For formal permission to use the STS, please send your request, including a brief description of who you are and how you plan to use the instrument, to Dr. Reed by email.

The email address is: preed@email.arizona.edu

**Selected Publications on the Self-Transcendence Theory and Scale
(Search databases such as CINAHL for more recent publications)**

- Reed, P.G. (1986). Developmental resources and depression in the elderly. *Nursing Research*, 35, 368-374.
- Reed, P.G. (1989). Mental health of older adults. *Western Journal of Nursing Research*, 11, (2), 143-163.
- Reed, P.G. (1991). Self-transcendence and mental health in oldest-old adults. *Nursing Research*, 40 (1), 5-11.
- Reed, P.G. (1991). Toward a nursing theory of self-transcendence: Deductive reformulation using developmental theories. *Advances in Nursing Science*, 13 (4), 64-77.
- Reed, P.G. (1996). Transcendence: Formulating nursing perspectives. *Nursing Science Quarterly*, 9 (1), 2-3.
- Reed, P.G. (2009). Demystifying self-transcendence of mental health nursing practice and research. *Archives of Psychiatric Nursing*, 23 (5), 397-400.

Book Chapters

- Reed, P.G. (1998). The place of transcendence in nursing's Science of Unitary Human Beings: Theory and research. In M. Madrid (Ed.), *Patterns of Rogerian knowing* (pp. 187-196). New York: NLN.
- Reed, P.G. (2015). Pamela Reed's Theory of Self-Transcendence. In M.C.Smith & M.E. Parker (Eds.). *Nursing theories & nursing practice (4th ed.)* (pp. 411-420). Philadelphia: F.A. Davis.
- Reed, P.G. (2003, 2008, 2014). Theory of Self-Transcendence. In M.J.. Smith & P. Liehr, (Eds.). *Middle range theory for nursing (3rd ed.)* (pp. 109-140). New York: Springer.
- Reed, P.G. (2018). Pamela G. Reed: Self-transcendence theory. In M.R. Alligood (Ed.). *Nursing theorists and their work (9th ed.)*(pp. 463-476.). St. Louis: Mosby.

Additional Publications

- Acton, G. J., & Wright, K. B. (2000). Self-transcendence and family caregivers of adults with dementia. *Journal of Holistic Nursing*, 18, 143-158.
- Chin-A-Loy, S. S., & Fernsler, J. I. (1998). Self-transcendence in older men attending a prostate cancer support group. *Cancer Nursing*, 21(5), 358–363.
- Coward, D. D. (1990). The lived experience of self-transcendence in women with advanced breast cancer. *Nursing Science Quarterly*, 3(4), 162–169.
- Coward, D. D. (1991). Self-transcendence and emotional well-being in women with advanced breast cancer. *Oncology Nursing Forum*, 18(5), 857–863.
- Coward, D. D. (1994). Meaning and purpose in the lives of persons with AIDS. *Public Health Nursing*, 11(5), 331–336.
- Coward, D. D. (1995). Lived experience of self-transcendence in women with AIDS. *Journal of*

Obstetrics, Gynecologic, & Neonatal Nursing, 24, 314-318.

- Coward, D. & Reed, P.G. (1996). Self-transcendence: A resource for healing at the end of life. *Issues in Mental Health Nursing*, 17 (3), 275-288.
- Coward, D. D. (1996). Correlates of self-transcendence in a healthy population. *Nursing Research*, 45 (2), 116-121.
- Coward, D. D. (2003). Facilitation of self-transcendence in a breast cancer support group: Part II. *Oncology Nursing Forum*, 30(2), 291-300.
- Ellermann, C. R., & Reed, P.G. (2001). Self-transcendence and depression in middle age adults. *Western Journal of Nursing Research*, 23 (7), 698-713.
- Enyert, G., & Burman, M.E. (1999). A qualitative study of self-transcendence in caregivers of terminally ill patients. *American Journal of Hospice and Palliative Care*, 16 (2), 455-462.
- Hunnibell, L. S., Reed, P.G., Quinn Griffin, M., & Fitzpatrick, J. J. (2008). Self-transcendence and burnout in hospice and oncology nurses. *Journal of Hospice and Palliative Care*, 10 (3), 172-9.
- Joffrion, L. P., & Douglas, D. (1994). Grief resolution: Facilitating self-transcendence in the bereaved. *Journal of Psychosocial Nursing*, 32(3), 13–19.
- Mellors, M.P., Riley, T.A., & Erlen, J. A. (1997). HIV, self transcendence, and quality of life. *Journal of the Association of Nurses in AIDS Care*, 8(2), 59–69.
- Neill, J. (2002) Transcendence and transformation in the life patterns of women living with rheumatoid arthritis. *Advances in Nursing Science*, 24, 27–47.
- Nygren, B., Aléx, L., Jonsén, E., Gustafson, Y., Norberg, A., & Lundman, B. (2005). Resilience, sense of coherence, purpose in life and self-transcendence in relation to perceived physical and mental health among the oldest old. *Aging & Mental Health*, 9(4), 354–362.
- Palmer, B., Quinn Griffin, M.T., Reed, P., & Fitzpatrick, J.J. (2010). Self-transcendence and work engagement in acute care staff registered nurses. *Critical Care Nursing Quarterly*, 33 (2), 139-148.
- Ramer, L., Johnson, D., Chan, L., & Barrett, M. T. (2006). The effect of HIV/AIDS disease progression on spirituality and self-transcendence in a multicultural population. *Journal of Transcultural Nursing*, 17 (3), 280-289.
- Reese, C.G., & Murray, R.B. (1996). Transcendence: The meaning of great-grandmothering. *Archives of Psychiatric Nursing*, 10 (4), 245-251.
- Runquist, J. J. & Reed, P.G. (2007). Self-transcendence and well-being in homeless adults. *Journal of Holistic Nursing*, 20 (2), 118-122..
- Young, C.A, & Reed, P.G. (1995). Elders' perceptions of the role of group psychotherapy in fostering self-transcendence. *Archives of Psychiatric Nursing*, 9 (5), 338-347.

Self-Transcendence Scale

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DIRECTIONS: Please indicate the extent to which each item below describes you. There are no right or wrong answers. I am interested in your frank opinion.

As you respond to each item, think of how you see yourself at this time of your life. Circle the number that is the best response for you.

	Not at all	Very little	Some- what	Very much
<i>At this time of my life, I see myself as:</i>				
1. Having hobbies or interests I can enjoy.	1	2	3	4
2. Accepting myself as I grow older.	1	2	3	4
3. Being involved with other people or my community when possible.	1	2	3	4
4. Adjusting well to my present life situation.	1	2	3	4
5. Adjusting to changes in my physical abilities.	1	2	3	4
6. Sharing my wisdom or experience with others.	1	2	3	4
7. Finding meaning in my past experiences.	1	2	3	4
8. Helping others in some way.	1	2	3	4
9. Having an ongoing interest in learning.	1	2	3	4
10. Able to move beyond some things that once seemed so important.	1	2	3	4
11. Accepting death as a part of life.	1	2	3	4
12. Finding meaning in my spiritual beliefs.	1	2	3	4
13. Letting others help me when I may need it.	1	2	3	4
14. Enjoying my pace of life.	1	2	3	4
15. Letting go of past regrets.	1	2	3	4

Thank you very much for completing these questions. On the back of this sheet, please write down any additional comments that may help us understand your views.