



The Meaning Of Life And Its Relationship To Future Anxiety Among Cancer Survivors In Riyadh

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ABSTRACT

The purpose of the study was to determine the relationship between the meaning of life and future anxiety among cancer survivors in Riyadh. The study sample consisted of 208 individuals, and the meaning of life scale developed by Abdullah, Qasim, and Ibrahim (2016) and the future anxiety scale developed by Choucair (2005) were employed, with their psychometric properties distinguished.

According to the study's findings, there is a statistically significant negative correlation between the total degree of meaning in life and the total degree of future anxiety among cancer survivors. And the existence of statistically significant differences in the meaning of life and its dimensions at the level (0.01) among the recovered according to the age variable in favour of the category (15-24 years and older) and the word meaning level. According to the cancer type variable, life for each of (life purpose, hope and adherence to life, and the value of suffering) favours recovery from liver cancer. There is statistical significance at the level (0.05) in favour of the married study participants in the meaning of life for each (the purpose of life, the value of suffering) as a function of marital status. There are statistically significant differences in future anxiety and its dimensions at the level of 0.01 among the recoveries according to the age variable in favour of study participants (45 years and older) and the type of cancer variable in favour of study participants recovering from breast cancer. There are no statistically significant differences between the levels of life meaning and future anxiety among cancer survivors according to a variable (gender, recovery period) (sex, marital status, recovery period). Finally, the results demonstrated the possibility of predicting future anxiety using the meaning of life dimensions as an independent variable responsible for explaining (66.7%) the variance in future anxiety among cancer survivors.

Keywords: *The meaning of life, future anxiety, cancer survivors*

INTRODUCTION

Cancer, and the experience of recovering from it, elicit a wide range of emotions and beliefs; the primary illness itself, the secondary symptoms it can cause, and the fear of reinfection after treatment all contribute to the negative side of this experience; however, this does not negate the fact that the experience of recovery after cancer has a positive side, which is represented by the recovering person learning patience, changing his perspective on life, and so on (Mekdad, Al-Ansari, & Al-Anzi, 2014). The percentage of cancer survivors has grown over the past few decades, especially in the developed world. The rate of recovery and treatment of symptoms of cancer in the United States in 2010 exceeded 12 million (American Cancer Society, 2019); This is due to the medical advancement in the last stage, which provided effective treatment for a variety of cancers and was able to control and control them, especially those that are detected early (Fotouh, 2016).

While the patient's physical condition may improve, he may still experience negative psychological side effects that prevent him from fully reintegrating into society, such as anxiety, depression, and social withdrawal. One of the mental health issues that can prevent a recovering person from fulfilling his social role, being compatible with others, and making progress is anxiety. Future anxiety develops when a person's outlook on the future becomes negative or pessimistic as a result of the experience he lives, putting him in a state of imbalance about the future. This is because the causes of future anxiety are varied and it is linked to a variety of psychological issues. In light of what he has been through and what he is experiencing right now, the recovering addict can anticipate certain events in the future (Ahmed & Sobhi, 2019). This uncertainty is a source of anxiety and a desire to find meaning in the cancer survivor's life and suffering, especially when he is forced to think back on the bad times before the disease, the arduous path of treatment, and the looming fear of death that comes before the goals are reached (Fatouh, 2016).

Every person is driven to discover his or her own identity and purpose in life, and this internal struggle is what gives rise to the universal human quest for meaning. As one of the earliest theorists

of the term "meaning of life" in psychology, Frankel recognised that an individual's sense of purpose in life is shaped by their specific set of experiences and circumstances; as a result, each person's understanding of life's significance is wholly original and qualitative. Raise the stakes, so that life is actually worth living (Abdul Halim, 2010). A cured person may hold various beliefs and sentiments regarding the original illness, any possible aftereffects, and the possibility of relapse after treatment (Kabar, 2017).

There is a need to examine people who have had cancer and made a full recovery, as suggested by Khan et al. (2010). Cancer patients and those recovering from it experience poor psychological compatibility and elevated levels of depression, anxiety, pressure, and psychological pain, as confirmed by Brahmiyeh and Bouchellek (2016). According to research by Revenson et al. (Revenson et al, 2015), patients who have overcome cancer still deal with feelings of sadness and grief, acute phobias and anxiety, and an obsession with the future.

The researcher survived a bout with leukaemia and came away from the experience with a new perspective on life and a different appreciation for the past. Despite all the complications, side effects, and psychological and physical scars that the disease caused, he still has many questions about his future after recovery, about his health after recovery and chemotherapy, about marriage and childbearing, and about the ability to perform tasks to the fullest.

The importance of educating cancer survivors on the meaning of life and how it relates to their future fears has been highlighted above. However, most of these studies have not addressed the recovery stage or the psychological changes that occur to individuals after the experience, likely because they have been conducted on societies other than Saudi society and have focused on anxiety among cancer patients during the treatment period.

Study Questions and Problems

What is the relationship between the meaning of life and future anxiety for cancer survivors?

What is the level of meaning of life for cancer survivors?

What is the level of future anxiety for cancer survivors?

What are the differences between cancer survivors in the meaning of life due to demographic variables "gender, age, type of cancer, duration of recovery from cancer"?

What are the differences between cancer survivors in future anxiety due to demographic variables "gender, age, type of cancer, duration of recovery from cancer"?

What is the possibility of predicting the meaning of life through future anxiety for cancer survivors?

Theoretical framework And Previous Studies

First, the meaning of life

Viktor Frankl is regarded as one of the first theorists of the term, as well as the first to establish the concept of another meaning of life in the clinical tradition (Abdul Khaleq et al. 2007). The meaning of life, according to Frankl (1982), is "a state that a person seeks to achieve in order to give his life a value and a meaning worth living for, and it occurs as a result of satisfying his basic motive represented by the will for meaning." Borowa et al. (Borowa, et al., 2020) define the meaning of life as "anything that has a purpose, significance, value, and purpose. As the creation of meaning in life is a process that requires the continuous pursuit of growth, the meaning of life is expressed in general through the general pattern that contains the individual's values, goals, and beliefs." Responding positively to adversity, as well as an individual's combination of skills and experiences, can lead to general perceptions of meaning in life." According to the authors of the tool Abdullah, Qassem, & Ibrahim (2016), the meaning of life is "the individual's feeling of his personal value, and that he is an active member of his society, with his adherence to life and a positive and optimistic view of the future, and his adoption of a goal that serves as a message in his life that makes him employ all his potential And his capabilities - and ev

Dimensions of the meaning of life

Abdullah & colleagues (2016) divide life's dimensions into four categories:

Life goal: It means that the individual has one or more goals that he wants to achieve, feels his own mission in life, and derives his personal value and importance from it while bearing the responsibility to achieve as much as possible.

Hope and adherence to life: This refers to the individual's renewed sense of optimism and desire for life, while controlling negative energy-dissipating thoughts and having a positive outlook for the future.

Adaptability: This refers to an individual's ability to overcome life's difficulties and circumstances, accept and even use them to his advantage, be satisfied with reality and coexist with it, and quickly adapt to changes that occur in life without feeling helpless or frustrated.

Suffering's value: It refers to the positive view of suffering represented in all the traumas, problems, stumbling blocks, and even failures that the individual is exposed to, so that he feels its role in refining his personality, increasing his experiences in learning, solving problems, and increasing his ability to adapt and confront; thus reaching success and achieving the goal of life.

Some theories explain the concept of the meaning of life

Existential theory, humanistic theory, and individual psychology theory are some of the theories that explain the meaning of life and the sources that result from it. The individual does not deal with various things based on what they are, but rather on what they mean to him, he does not deal with abstract things. There is no human being who is immune to meanings. Recognizing the facts surrounding the individual occurs through the meaning that is associated with him. With these facts, and not with what they truly are, but with what he understood from them, it is natural to conclude that the meaning is nothing more than an incomplete and unfinished thing, and that there are many meanings in life. Recognized meaning contains some error, and thus no one knows the absolute meaning of life; therefore, no meaning can be completely right or completely wrong (Adler, 2005). In that the individual deals with things and situations through the meaning he attaches to them; the researcher agrees with Adler's theory of individual psychology.

Second: Future Anxiety

Anxiety is a normal human experience and a normal human sense, feeling, and interaction under certain conditions, and anxiety can serve vital functions that aid in activity and the preservation of life; however, anxiety can be a problem for the individual when there is no clear and rational reason for it, and the future will always be a source of anxiety because it cannot be known until the present moment. Worrying about one's future can cloud one's vision of one's potential and hinder one's abilities (Okasha, 2003). Individuals' self-attitudes towards the future, or what will happen and what could happen, are also directly impacted by future anxiety. Fear and worry about the future is possible. This makes it more likely that he won't be able to adjust to the circumstances that threaten his future, increasing his worry about that future (Ben Alou, 2003).

According to Zeinoh (2021), "future anxiety" refers to "a state of fear among individuals, anxiety, and discomfort with the future, given the social and economic pressures that prevent the realization of their hopes and aspirations." According to the tool, the researcher adopted Chou air's (2005) definition of future anxiety as "a psychological disorder that results from unpleasant past experiences, with perceptual distortion and distortion of reality and self, by evoking memories and past experiences with exaggeration of the negatives, and refutation of the positives of self and reality." Because of the anxiety and stress it causes, the person who possesses it is more likely to engage in destructive behaviors such as cutting themselves or others, believing they have no control over their circumstances, generalizing past failures, and anticipating future disasters.

Implications of future anxiety

Anxiety about the future can have far-reaching negative effects on a person's life, from causing him to live in constant turmoil and disrupting his future to putting him in a state of crisis, paralysis, and confusion in the here and now. This causes him to stop thinking clearly and logically, and he begins to see the world through a pessimistic lens. Al-Gharam (2020) categorised future anxiety symptoms as follows: psychological symptoms, such as fear, nervous tension, depression, inattention, forgetfulness, loss of

appetite, and insomnia. Motor neuron crises, including persistent headaches, nausea, chest pain, nail biting, increased sweating, cold extremities, bad dreams, and fainting spells; increased irritability in dealing with situations; rapid heart rate, increased breathing rate, nausea, high blood pressure, excessive motor activity.

Some theories explain anxiety

Cognitive theory, psychoanalytic theory, existential theory, behavioral theory, humanistic theory, and a plethora of others have all tried to explain the phenomenon of anxiety. People who experience anxiety as a result of the fluid exchange of information between the self and the community often point to the fact that a person's sense of social belonging as a justification for fortifying the ties that bind him to his immediate peers. Normal people are more motivated and organized by their hopes and dreams for the future than by their regrets and anxieties about the past. He emphasized how a lack of resources can make a person feel insecure, which can then lead to worry about the future (in: Al-Aziz, 2020). inherent; That then causes the anxious person to react with maladaptive emotions and actions; Because of the skewed, inaccurate, or overstated nature of the evaluation (Bseiso, 2006).

The researcher agrees with Adler's psychoanalytic view, in which he stresses that the individual can overcome his sense of inadequacy and helplessness through the person's interaction with his social ties and through good expectations for the future, and with cognitive theory, in which she interpreted anxiety as resulting from the individual's evaluation of things. irrationally, leading to inappropriate reactions in terms of both emotion and action.

Third: cancer

Cancer is the result of a malfunction in the human cells' genetic material at the part responsible for regulating cell growth and reproduction, so normally the cells of the human body reproduce regularly and slowly, but in cancer patients this process goes awry, leading to the development of malignant tumor's. Cancer develops when a flaw in the cells causes them to multiply and spread at an abnormally rapid rate (Taylor, 2008).

The technical term for this ailment in the medical field is tumors, while the term cancer now only refers to malignant growth (Al-Ansari, 1996). According to the Ministry of Health's definition from 2022, cancer is "a group of diseases characterized by abnormal growth and reproduction of cells," as well as "a mutation that causes a group of body cells to get out of control, so that they no longer perform their normal function, and begin to behave differently from their activity and the activity of other cells," ultimately leading to the destruction of other healthy cells in the body. Moreover, cancer cells can metastasize (spread from one organ to another) and spread throughout the human body.

Previous Studies

Results from studies addressing the study's meaning and future anxiety variables were presented in reverse chronological order. Mostarac & Brajkovi (2021) investigated the connection between cancer survivors' perceptions of the meaning of life and their levels of post-traumatic growth and happiness. (149) cancer patients who had been free of treatment for at least a month were included in the study. After undergoing treatment, a majority of cancer patients reported an increase in post-traumatic growth (72%), a high percentage of cancer patients reported having found their life's meaning, and a majority of cancer patients reported being satisfied with their lives (70% - 80%). There was no correlation found between the variables and the duration after treatment, and the occurrence of positive changes after treatment was not related to the variables or the duration after treatment. All study variables were higher for women and younger people (18-39), and the percentage of people with breast cancer was higher than for other types of cancer. Cancer is a positive indicator for the psychological well-being of cancer survivors because of its connection to questions of purpose and meaning in life.

Research conducted by Al-Tanbouli (2020) investigated the connection between leukaemia patients' search for meaning in life and their fear of the future. The purpose of this research was to examine whether or not leukaemia patients who had a strong sense of meaning in their lives were

less likely to worry about their futures. There were a total of (119) participants in the study. It was found that leukaemia patients who had a higher sense of meaning in their lives were less likely to be anxious about the future, which may be due to an inverse correlation between meaning and future anxiety. The results of the study supported a strategy to help blood cancer patients suffering from anxiety. We also conducted a study Anna et al. (2019) to determine whether or not people with advanced cancer differed from one another in their perceptions of the meaning of life across five countries and what factors were associated with those perceptions. Patients from 728 different countries were included in the study. Overall, the sample had a meaning of life score of (24), and there was no difference in this score between patients of different nationalities or between those whose pain, fatigue, sleepiness, distress, depression, anxiety, or pain was more severe. When compared to spiritual hardship, material hardship takes a back seat in the hierarchy of what gives life meaning. The patients are more educated, more likely to be married, more optimistic, and more satisfied with their lives.

And in Alloush (2019), researchers set out to understand how future worry affects adolescents' levels of depression after being diagnosed with cancer. Thirty people with cancer made up the sample. According to the findings, adolescent cancer patients do not show any statistically significant differences in future anxiety based on age or gender, and there is no correlation between future anxiety and depressive response. Kaaber (2018) also studied a group of cancer patients in the Gaza Strip to determine whether or not there was a correlation between post-traumatic growth, a sense of purpose in life, and marital adjustment. Cancer patients who were married (217) made up the sample. The study found statistically significant differences in the levels of post-traumatic growth, meaning of life, and marital compatibility among cancer patients, as well as a direct relationship among post-traumatic growth, meaning of life, and marital adjustment. The study's limitations apply to cancer patients: (sex, educational level, age, number of years of marriage, work, place of residence, number of children, type of disease, duration of treatment, economic level).

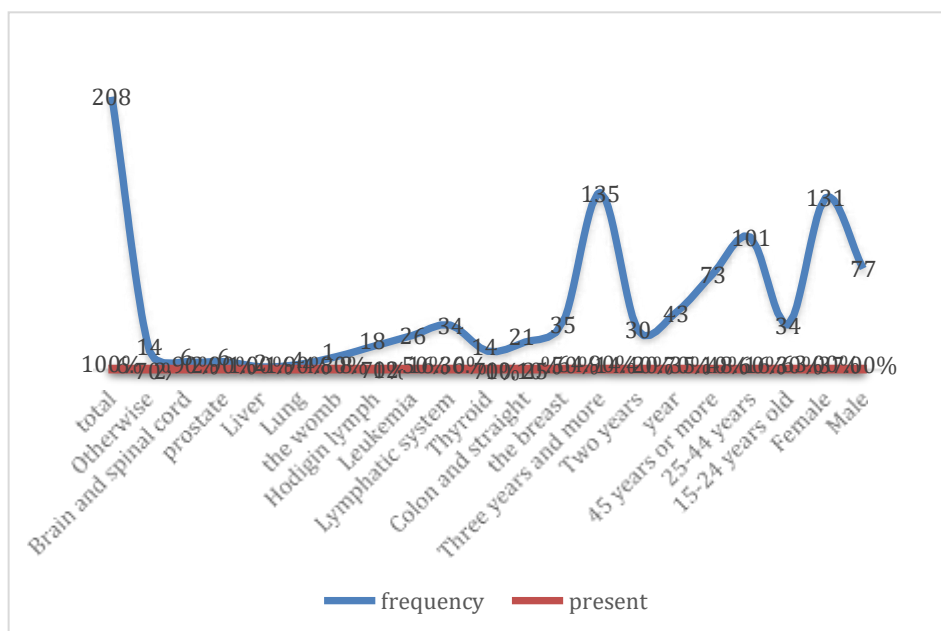
The purpose of the research conducted by Habib, Hassan, & Abdel-Rahman (2018) was to identify the connection between irrational thinking and future anxiety in mothers whose children were treated for leukaemia. Sixty mothers whose children were being treated for leukaemia were included in the analysis. The study found a statistically significant positive correlation between future anxiety symptoms and certain irrational thoughts in mothers of children undergoing treatment for leukaemia, but no effect of gender or birth order on future anxiety symptoms in mothers, with the exception of social future anxiety symptoms, which favoured females. Some mothers' irrational thoughts about their children's leukaemia treatment can be used as a predictor of future anxiety symptoms. Also, in 2018, Raslan, Helal, and Rahal set out to investigate the connection between a group of Homs-based diabetics' sense of purpose in life and their levels of future anxiety. An equal number of male and female diabetics (120) participated in the study. Results showed that participants had low levels of meaning in life and high levels of future anxiety, that there was a statistically significant inverse relationship between patients' scores on the meaning in life scale and the future anxiety scale, and that there were significant differences in the average scores of participants. Patients who have had the virus for more than nine years have an advantage on measures of meaning in life and future anxiety.

The physically challenged students at a secondary school in Riyadh were the subjects of a study by Al-Manahi (2017), who sought to determine the significance of life and how it relates to future anxiety and performance. (88) secondary school students with disabilities (44 with visible impairments and 44 with more subtle ones) made up the sample. internal and external, and there were statistically significant differences between the internally and externally physically handicapped on measures of the meaning of life, academic achievement, predictability of future anxiety, and achievement as measured the by meaning of life dimensions.

METHODOLOGY

The study population and its sample

Due to a lack of regional data on cancer survivorship, this study's population was comprised of all Riyadh residents who have survived the disease. Data were collected from charitable organizations serving cancer patients and survivors, such as the "Cancer Recovered Charitable Foundation," which reported more than 16,000 cases and 1,600 recoveries in this time period. Participants were selected with care to ensure that they had been in remission from their cancer for at least a year after diagnosis and treatment, were at least 15 years old, and were either auditors in oncology outpatient clinics at public hospitals or volunteers at charitable organizations that serve cancer patients.



Population characteristics are displayed in Figure 1 below.

Scale: To achieve the objectives of the study, the following Scales were used:

The meaning of life scale: The meaning of life scale was used, prepared by Number one on the scale of life's significance: Qasim, Abdullah, and Ibrahim (2016)'s meaning of life scale was used. It included 622 phrases distributed across 4 factors: (the purpose of life, hope, and adherence to life, the ability to agree, and the value of Suffering), with 20 statements for the first factor, 18 for the second, 11 for the third, and 13 for the fourth. There are 39 upbeat statements on the scale and 23 downers. Finding four statistically significant factors at the (0.01) level in the original study's factorial analysis of the scale is highly indicative of validity. The phrases on the scale were statistically significant at the level of significance (0.01) determined by examining internal consistency and calculating the value of the correlation coefficient between the degrees of the scale phrases and the total score of the axis to which each phrase belongs. There was a lot of reliability in the scale (0.942)

Validity of the arbitrators, Pearson's correlation coefficient, Cronbach's alpha stability coefficient, and midterm segmentation were used to confirm the scale's psychometric properties in the present study. High levels of validity and stability were discovered after the scale's non-statistically significant statements were eliminated.

Future anxiety scale: We used Choucair (2005)'s future anxiety scale, which consists of (28) statements across five dimensions and is meant to elicit a person's subjective experience of future anxiety. and consists of five statements, the less important it is in terms of real-world issues. There are six dimensions of worry: worry about one's health and about dying; six dimensions of worry about the future; six dimensions of hopelessness about the future; six dimensions of worry about failing in the future; and five dimensions of worry about failing in the future. Using significant correlation coefficients at 5% level, the original study confirmed the scale's validity by having it arbitrators and examining the criterion's validity (0.01). The reliability and validity of the scale were also found to be quite good. By re-applying the test and calculating the Spearman-Brown equation for the half-partition, as well as calculating Cronbach's alpha coefficient, it was determined that the scale was highly stable. Validity of the arbitrators, Pearson's correlation coefficient, Cronbach's alpha stability coefficient, and midterm segmentation were used to confirm the scale's psychometric properties in the present study. The reliability and validity of the scale were found to be quite high, as was its internal consistency, suggesting that it is both reliable and valid.

RESULTS

Firstly “There is a statistically significant relationship between the meaning of life and future anxiety for cancer survivors.”

TABLE 1: Pearson correlation coefficient results for cancer survivors' meaning of life and future anxiety (n = 208) recovered

Dimensions of the meaning of life	Dimensions of future anxiety					
	Concern about life problems	& Health death anxiety	mental anxiety	despair in the future	Fear anxiety and failure of	Total
The purpose of life	** 687-	** 751-	** 668-	** 621-	** 621-	791- **
Hope and hold on to life	** 395-	** 524-	** 456-	** 590-	** 590-	572- **
Compatibility	** 432-	** 554-	** 522-	** 615-	** 615-	623- **
suffering	** 538-	** 648-	** 541-	** 635-	** 635-	687- **
The overall score for the meaning of life	** 624-	** 736-	** 648-	** 703-	** 703-	789- **

Table 1 shows that there is a negative inverse relationship at the level (0.01) between the total score for future anxiety and its sub-dimensions (representing the goal of life, hope and adherence to life, the ability to agree, and the value of suffering), and the total score for the meaning of life and its sub-dimensions. The Pearson correlation coefficient for the total degree of meaning in life with the dimensions of future anxiety was (-0.624), (-0.736), - (0.648), -0.703, and (-0.768) among cancer survivors. These dimensions represented (worry about life problems, lack of health and death, mental anxiety, despair in the future, fear and anxiety of failure) (-0.789). According to the preceding finding, cancer patients who increase their sense of meaning in life have less reason to worry about

their future health. It has a sizeable effect on raising cancer survivors' future anxiety. Our findings are consistent with those of Raslan, Hilal, & Rahal (2018), Al-Tanbouli (2020), & Al-Manahi (2017), who all found a negative correlation between meaning in life and worry about the future, but at odds with those of Al-Manahi, who found no such link. The reason for this is that the recovery process can be greatly aided by the individual's optimistic outlook on life's meaning and purpose, as well as his firm grasp on and progress towards his personal life goals (Fatouh, 2016).

Secondly: “The level of meaning of life is different for cancer survivors.”

TABLE 2: Single-sample t-test for cancer survivors' meaning of life (n = 208)

Dimensions of the meaning of life	mean	standard deviation	df	T	sig
The purpose of life	65.99	15.21	207	84.421	0.001
Hope and hold on to life	74.43	45172	207	128.754	0.001
Compatibility	46.19	45081	207	259.867	0.001
suffering	53.0	5.56	207	171.922	0.001
The overall score for the meaning of life	239.6	34.0	207	35.886	0.001

Table (2) shows that the study sample who survived cancer had a significantly higher meaning of life scores than the hypothetical average of the scale, where the value of the significance level for the dimensions in a row and the total score came (0.001), and the dimension of hope and adherence to life ranked first among the dimensions. With a mean of 74.43 and a standard deviation of 9.03, the meaning of life comes in first, followed by the goal of life dimension at 66.99 and a spread of 15.21, then the value of suffering at 53.0 and 5.56. For cancer survivors, there was a high degree that tended to the average on the agreement dimension (mean = 46.19, standard deviation = 6.04) and on the meaning of life scale (mean = 239.6, standard deviation = 34.0). This study's findings corroborated those of previous investigations by Abd al-Khaleq, Saeed, Salem, & El-Nayal (2007), Kaaber (2017), & Mostarac & Brajkovi

(2020), all of which found that cancer patients and survivors reported high levels of meaning in their lives. This study's findings contradicted those of Raslan, Hilal, & Rahal (2018), who found that diabetic patients in Homs generally had a low sense of purpose in life. As (Frankl, 2007) pointed out, a person's structure in existence is dependent to a large extent on his goals in life, and without meaning in life, a person becomes restless, faces many psychological problems and disorders, and may even have thoughts of ending life. That has serious implications for his health. Adler argued that a person needs meaning in order to survive because he or she does not deal with the world around them as it is but rather as it means to them.

Third: The level of future anxiety varies among cancer survivors.

TABLE 3: Results of a single-sample t-test for differences in future anxiety among cancer survivors (n = 208)

Dimensions	mean	standard deviation	df	T	sig
Anxiety related to life problems	11.10	4.78	207	135.391	0.001
Health anxiety and death anxiety	12.77	4.86	207	128.286	0.001
mental anxiety	18.28	4.5044	207	127.052	0.001
despair in the future	19.16	3.87	207	137.261	0.001
Fear and anxiety of future failure	16.71	2.93	207	193.737	0.001
The overall score of the scale	78.02	18.13	207	17.518	0.001

Table 3 shows that there are significant differences between the study sample and the hypothetical mean of the future anxiety scale (17,518), where the value of the significance level for the dimensions respectively and the total score came to (0.001), with the future despair dimension showing the greatest deviation. With a mean score of 19.16 and a standard deviation of 2.80, it topped the list of future anxiety dimensions (3.87). Mathematical mean and standard deviation for the dimension of mental anxiety were 18.27 and 4.28, respectively; fear and anxiety about future failure ranked third, at 16.71 and 2.93; and the dimension of health anxiety and death anxiety ranked last, at 12.77 and 2.93. (4.86). When it comes to life-related anxiety, the average is 11.10 and the standard deviation is 11. (4.78). The mean score of cancer survivors on a scale measuring worry about the future was 78.02, with a standard deviation of 18.13. The findings of this study corroborated those of Raslan, Hilal, & Rahal (2018), who also ***Differences according to age variable***

found that their sample suffered from high levels of future anxiety. He attributes the high rates of future anxiety among cancer survivors to the traumatic experiences many of them have had to endure, noting that given the nature of organic diseases like cancer, it is only natural for the recovering to experience a wide range of emotions and beliefs. From reinfection, as suggested by Al-Jassum (Miqdad, Al-Ansari, & Al-Anzi, 2014). belief that all physical ailments have a psychological dimension due to anxiety, life pressures, and emotional arousal factors; changes in blood chemistry, organ function, and the immune system; and is one of the most important disorders affecting the personality of the recoverer. (2004)

Fourthly: There are statistically significant differences among those recovering from cancer in the meaning of life due to demographic variables (age, gender, type of cancer, duration of recovery from cancer).

TABLE 4: Differences in life satisfaction among cancer survivors by age (n = 208): One-way variance analysis results

Dimensions of the meaning of life	groups	sum of squares	df	mean of squares	f	sig
The purpose of life	between groups	7785.229	2	3892.615	19.908	0.001
	within groups	40083.727	205	195.530		
	total	47868.957	207			
Hope and hold on to life	between groups	722.113	2	361.056	4.586	0.001
	within groups	16138.806	205	78.726		
	total	16860.918	207			
Compatibility	between groups	671.684	2	335.50	4.990	0.001
	within groups	13780.623	205	67.222		
	total	7548.308	207			

suffering	between groups	1353.897	2	676.949	10.054	0.001
	within groups	13803.098	205	67.332		
	total	15156.995	207			
The overall score for the meaning of life	between groups	26929.431	2	13464.715	12.997	0.001
	within groups	212372.449	205	1035.963		
	total	239301.880	207			

Table 4 shows that there are statistically significant differences at the level of (0.01) between younger and older cancer survivors with regard to the meaning of life and all of its sub-dimensions, including (the goal of life, hope and adherence to life, the ability to agree, the value of suffering; The Scheffe test, which was used to determine whether there were significant differences between the groups and whether those differences favoured any particular age range, displays the results of dimensional comparisons of the mean scores of the meaning of life and its sub-dimensions represented in (the purpose of life, hope and adherence to life, the ability to agree, the value of suffering) among those recovering from cancer, stratified by age. Study participants aged 15–24 and those of other ages, for the benefit of study participants aged 15–24 and older, with means of 73.51 and 13.60, respectively, on the age dimension and 76.78 and

13.60, respectively, on the life dimension. A mean of 47.10 and a standard deviation of 3.68 for the ability to agree, a mean of 55.93 and a standard deviation of 5.92 for the value of suffering, a mean of 252.32 and a standard deviation of 24.40 for the total score scale, and the aforementioned result indicating that study participants aged 15–24 have a higher level of mean hope and adherence to life, agreement, and the value of suffering. The current study's findings corroborated those of Mostarac & Brajkovi (2021), who found that cancer survivors of different ages experienced statistically different levels of meaning in life. Kaaber (2017) & Alloush (2019) found no statistically significant differences in the level of meaning of life in a sample of cancer patients by age variable, whereas the results of the current study showed that there were such differences. Age is a major factor in cancer patients' worries about the future.

Differences according to the gender variable

TABLE 6: Differential Meaning in Life among Cancer Survivors by Gender: T-Test Results for Two Independent Samples

Dimensions of the meaning of life	gender	N	mean	standard deviation	T	sig
The purpose of life	males	77	64.92	14.92	0.773	0.441
	females	131	66.61	15.39		
Hope and hold on to life	males	77	73.23	9.91	1.467	0.144
	females	131	75.13	8.42		
Compatibility	males	77	45.57	7.45	1.138	0.257
	females	131	46.56	45049		
suffering	males	77	52.62	8.94	0.480	0.632
	females	131	53.21	8.35		
The overall score for the meaning of life	males	77	236.35	35.79	1.057	0.292
	females	131	241.51	32.89		

Table (6) shows that there are no statistically significant differences in the level of the meaning of life and its sub-dimensions represented in (the goal of life, hope and adherence to life, the ability to agree, the value of suffering) among those recovering from cancer, according to the variable of type, as the value of the level of significance for the dimensions reached respectively (0.441, 0.144, 0.257, 0.632), and for the total score (0.292), all of which have values greater than (0.05), which are not statistically significant. The previous result indicates the convergence of the level of meaning of life among the study

individuals who recovered from cancer, male and female. According to the gender variable, and agreed with the study (Alloush, 2019), where it indicated that there were no statistically significant differences in future anxiety among adolescent cancer patients due to the gender variable, while the result of the current study differed with the result of the study (Hamad, 2022), which concluded that there are differences Statistically significant in the level of future anxiety among adolescents with acute leukemia according to the gender variable in favor of males.

C. Differences according to the type of cancer variable

TABLE 8: Kruskal-Wallis test for differences in life satisfaction among cancer survivors, stratified by cancer type

	Cancer	N	Rank mean	chi-square value	sig
The overall score for the meaning of life	the breast	53	136.01	27.164	0.004
	Colon and straight	21	88.43		
	Thyroid	14	87.29		
	Lymphatic system	34	104.12		
	Leukemia	26	74.31		
	Hodigin lymph	18	91.00		
	the womb	10	107.90		
	Lung	4	69.00		
	Liver	2	138.00		
	prostate	6	90.83		
	Brain and spinal cord	6	101.17		
	Otherwise	14	111.11		

As can be seen in Table (8), there are statistically significant differences in the level of the meaning of life and its sub-dimensions represented in (the purpose of life, hope and adherence to life, the value of suffering) among cancer survivors, according to the variable of the type of cancer, with those recovering from liver cancer having the highest average ranks (138.0) for the meaning of life. Survival rates of a cancer population are broken down by disease subtype. Furthermore, Table 8 demonstrated that there were no statistically significant differences in the level of meaning of life with respect to the ability to agree with the variable of the type of cancer, as the

value of the significance level was (0.359), which is greater than (0.05), indicating that the difference was not statistically significant. The previous finding suggests that cancer survivors of different types tend to share a similar sense of purpose in life, and this may be because they share a common goal: to improve their resilience in the face of adversity and their ability to make the best of the circumstances they've been dealt. For their own good, to accept and live with the world as it is, and to quickly adjust to the inevitable shifts and developments of everyday life without growing despondent or bitter.

Differences according to the variable duration of recovery from cancer

TABLE 9: The effect of time since cancer treatment ended on survivors' perceptions of their lives' meaning (n = 208): a one-way variance analysis

Dimensions of the meaning of life	groups	sum squares	df	mean of squares	f	sig
The purpose of life	between groups	554.959	2	277.480	1.202	0.203
	within groups	47313.998	205	230.800		
	total	47868.957	207			
Hope and hold on to life	between groups	79.906	2	39.953	0.488	0.615
	within groups	16781.012	205	81.859		
	total	16860.918	207			
Compatibility	between groups	31.160	2	15.580	0.425	0.654
	within groups	7517.148	205	36.669		
	total	7548.308	207			
suffering	between groups	2.626	2	1.313	0.018	0.982
	within groups	15154.369	205	73.924		
	total	15156.995	207			
The overall score for the meaning of life	between groups	1169.777	2	584.889	0.504	0.605
	within groups	238132.103	205	1161.620		
	total	239301.880	207			

According to Table (9), there are no statistically significant differences in the level of the meaning of life and its sub-dimensions represented in (the purpose of one's life, one's hope and adherence to one's life, one's ability to agree, and one's valuation of suffering) among cancer survivors in terms of the variable duration of recovery from cancer, where the value of The level of significance for the dimensions respectively

(0.303, 0.615, 0.654, 0.982), and for the total score (Their time to recover is variable.

Fifth : There are statistically significant differences between cancer survivors in future anxiety due to personal and demographic variables (age, gender, type of cancer, duration of recovery from cancer)

Differences according to age variable

Table 10: One-way analysis of variance results showing differences in future anxiety among cancer survivors by age (n = 208)

Dimensions	groups	sum squares	df	mean of squares	f	sig
Concern about life problems	between groups	382.475	2	191.237	9.005	0.000
	within groups	4353.602	205	21.237		
	total	4736.077	207			
Health & death anxiety	between groups	388.579	2	194.289	8.851	0.000
	within groups	4499,801	205	21,950		
	total	4888.380	207			
mental anxiety	between groups	259.153	2	129.576	7.514	0.000
	within groups	3535.112	205	17.244		
	total	3794.264	207			

despair in the future	between groups	201.079	2	100.540	7.105	0.000
	within groups	2900.685	205	14,150		
	total	3101.764	207			
Fear and anxiety of failure	between groups	136.683	2	68.342	8.572	0.000
	within groups	1634.427	205	7.973		
	total	1771.111	207			
Total	between groups	6521.274	2	3260.637	10.868	0.000
	within groups	61506.649	205	300.032		
	total	68027.923	207			

Table (10) displays statistically significant differences at the level (0.01) in future anxiety and its sub-dimensions (concern related to life problems, health anxiety, death anxiety, mental anxiety, despair in the future, fear and anxiety of future failure) among cancer survivors who have been able to beat the disease. The Scheffe test, which compares the average scores of future anxiety and its dimensions (anxiety about life problems, health anxiety, death anxiety, mental anxiety, despair about the future, fear of failure in the future, and so on) among cancer survivors by age, reveals the direction of the differences and favours no age group over another. The problem-related anxiety dimension had a mean score of 12.70 and a standard deviation of 4.36 among participants aged 45 and older, which was significantly different from the scores of the 15- to 24-year-olds in the study. life, with a mean of

14.38 and a standard deviation of 3.99 on the health and death anxiety dimension, with a mean of 19.34 and a standard deviation of 4.16 on the mental anxiety dimension, with a mean of 20.19 and a standard deviation of 3.05 on the future hopelessness dimension, with a mean of 17.62 and a standard deviation of 2.41 on the future failure anxiety dimension, with a mean of 84.23 and a standard deviation of 2.41. Researchers found that participants aged 45 and up experienced significantly higher levels of future anxiety compared to participants of any other age group. The elderly worry more about the future because they have a greater understanding of the dangers associated with their age and the increased likelihood that their weakened bodies will make cancer more aggressive if it returns. (El-Masjid & Tawfiq, 2022)

B. Differences according to the gender variable

Table 12: T-test results for two independent samples of differences in future anxiety among cancer survivors according to gender variable

Dimensions	gender	N	mean	standard deviation	T	sig
Concern about life problems	males	77	10.66	4.86	1.003	0.317
	females	131	11.35	4.74		
Health & death anxiety	males	77	12.56	4.99	0.940	0.625
	females	131	12.90	4.80		
mental anxiety	males	77	17.99	4.78	0.765	0.445
	females	131	18.46	3.97		
despair in the future	males	77	18.58	45031	1.647	0.101
	females	131	19.50	3.67		
Fear and anxiety of failure	males	77	16.40	44994	1.151	0.251
	females	131	16.89	2.82		
Total	males	77	76.19	19.56	1.113	0.267
	females	131	79.09	17.22		

Table (12) shows no statistically significant differences in future anxiety and its sub-dimensions (concern related to life problems, health anxiety, death anxiety, mental anxiety, despair in the future, fear and anxiety of failure in the future) among cancer survivors of different types. Where the level of significance for the dimensions was (0.317, 0.625, 0.445,

0.101, 0.251), and for the total score (0.267), all of which were greater than 0.05, meaning not statistically significant. The current study agreed with Habib, Hassan, & Abdel-Rahman (2018), which found no statistically significant effect of gender on future anxiety in mothers of leukemia-treated children.

Differences according to the type of cancer variable

TABLE 14: The Kruskal-Wallis test for future anxiety in cancer survivors by cancer type.

The overall score for the Future anxiety	Cancer	N	Rank mean	chi-square	sig
	the breast	53	166.00	32.164	0.000
	Colon and straight	21	108.05		
	Thyroid	14	63.00		
	Lymphatic system	34	100.09		
	Leukemia	26	65.98		
	Hodigin lymph	18	90.00		
	the womb	10	127.85		
	Lung	4	135.38		
	Liver	2	129.24		
	prostate	6	120.08		
	Brain and spinal cord	6	106.33		
	Otherwise	14	106.18		

Table (14) demonstrates that there are statistically significant differences at the level of (0.01) in the level of future anxiety and its sub-dimensions (concern related to life problems, health anxiety, death anxiety, mental anxiety, despair in the future, fear and anxiety of failure

in the future), among the recovered of cancer according to the type of cancer variable, for the benefit of the study individuals who recovered from breast cancer, with an average rank of (149.0) for fear and anxiety of failure in the future. For the benefit of

Differences according to the variable duration of recovery from cancer

TABLE 15: One-way analysis of variance results showing how cancer survivors' future anxiety varies with how long it's been since they've been cancer-free (n = 208)

Dimensions	groups	sum of squares	df	mean of squares	f	sig
Concern about life problems	between groups	27.591	2.000	13.795	0.601	0.549
	within groups	4708.486	205,000	22.968		
	total	4736.077	207,000			
Health & death anxiety	between groups	58.371	2.000	29.185	1.239	0.292
	within groups	4830.009	205,000	23.561		
	total	4888.380	207,000			
mental anxiety	between groups	80.904	2.000	40.452	2.233	0.110
	within groups	3713.360	205,000	18.114		
	total	3794.264	207,000			
despair in the future	between groups	51.264	2.000	25.632	1.723	0.181
	within groups	3050.501	205,000	14.880		
	total	3101.764	207,000			
Fear and anxiety of failure	between groups	1.846	2.000	0.923	0.107	0.899
	within groups	1769.264	205,000	8.631		
	total	1771.111	207,000			
Total	between groups	698.453	2.000	349,226	1.063	0.347
	within groups	67329.470	205,000	328.436		
	total	68027.923	207,000			

As can be seen in Table (15), there are no statistically significant differences between the types of cancer survivors in terms of future anxiety or any of its sub-dimensions (anxiety about life problems, health anxiety, death anxiety, mental anxiety, despair about the future, fear of future failure, and so on). a range of possible post-cancer life spans; Each dimension's significance level was greater than 0.05 (0.549,

0.292, 0.110, 0.181, 0.899), and the overall score was 0.347 (not statistically significant). The time it takes them to recover from cancer. The length of time it takes to feel better after treatment has ended has no bearing on whether or not the underlying disease will return, so it will have no bearing on the study population's future anxiety levels.

Sixthly: Meaning of life does not predict future anxiety in cancer survivors.

TABLE 16: Multiple regression analysis of the role that cancer survivors' sense of purpose plays in predicting future anxiety (n = 208)

future variable (The meaning of life)	dependent variable (future anxiety)				
	B	standard error	Beta	T	sig
Constant	22.815-	5.519	-	4.134	0.001
The purpose of life	698-	0.068	0.585	10.197	0.001
Hope and hold on to life	412-	0.049	156-	2.752-	0.019
Compatibility	566-	0.194	0.189	2.917-	0.004
suffering	383-	0.171	0.181	2.234-	0.026
The overall score for the meaning of life	421-	0.023	0.789	18.451	0.001
F = 104,431 sig =0.001 R=0.667					

Table (16) displays that the "F" test value of (104.431) and the significance level of (0.001) are both smaller than the significance level (= 0.05), indicating that the model with its independent variables is valid for predicting the values of the dependent variable, future anxiety. Table (16) displays the statistical values that reveal the impact of the total degree of the meaning of life and its sub-dimensions (the goal of life, hope, and adherence to life, the ability to agree, the value of suffering) on future anxiety among cancer survivors, with the value of (T) For the purpose of life (-10.197) at the level of significance (0.001), for hope and adherence to life (2.752) at the level of significance (0.019), and for coping with adversity ((0.026). Furthermore, the regression equation is as follows for the total Meaning of Life score (-18.451) at the 0.001 level of significance: Target: reducing future anxiety (22,815) stemming from (0.698) a belief in and devotion to the value of human life (0.412) Ability to reach consensus (0.566) - The worth of pain (0.383) - Existence's ultimate purpose (0.421). The current study's findings were consistent with those of the approaches study (2017), which discovered that future anxiety could be predicted using the

dimensions of the meaning of life among a sample of the physically disabled, both internally and externally, in Riyadh. The reason for this is that a person's ability to understand and cohere, as well as their awareness of the purpose of life, can help lessen the intensity of anxiety, fears, and difficulties as he or she adjusts to the new situation, confronts reality, begins treatment, and fights off disease (Khudair, 2016). As Frankl pointed out, however, an increase in existential emptiness is seen among cancer survivors because it occurs when a person fails to find a meaning or purpose that gives his life a unique identity; that is, when he experiences existential frustration, which renders his life meaningless and leaves him feeling unmotivated to complete any given task or act upon any given message (Al-Qadi, 2009).

Recommendations

Increasing the availability of hospital-based rehabilitation programmers for cancer survivors, so that those who have recently been diagnosed with the disease can receive the emotional and practical help they need to realize their goals, maintain their sense of hope, and cling to life.

This can be accomplished by helping patients learn to appreciate the value of life, develop better problem-solving skills, prepare for the possibility of future difficulties, and cope with future anxiety. Developing counselling and awareness programmes for cancer survivors to increase their meaning of life and reduce future anxiety, as the results showed the inverse relationship between the two. Deepening positive life meanings reduces future anxiety and improves mental health. Supporting cancer survivor associations, which provide psychological and social support for high-anxiety recoveries by participating in activities that enhance the meaning of life and increase the value of their suffering, which reduces future anxiety.

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