HOW I’D LIKE MY LIFE TO BE:
FUTURE-ORIENTED INTERVENTIONS FOR TEEN COUNSELLING

by

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Abstract

The purpose of this study is to assess empirical and theoretical support for the use of future-oriented interventions for teen counselling. A review of the literature found three foundational points supporting their use: teens face common developmental tasks and concerns that require future-oriented thought, yet they often lack future focus; future-oriented interventions can direct an individual’s conscious attention to future matters, and; future orientation is associated with wellbeing, though the mechanism is not well understood, and the relationship depends on factors such as temporal bias and temporal attitude. The review confirmed the study’s central hypothesis that single-session, future-oriented interventions might have multiple, beneficial uses in teen counselling, especially for counsellors who work from the theoretical standpoint of positive psychology, time perspective theory, or future directed therapy. The review also revealed a number of key findings that help guide the selection, development, and evaluation of future-oriented interventions for teen counselling. Based on these findings, the study identified six future-oriented interventions that may be appropriate for teen counselling, and proposed one new intervention for further study: How I’d Like My Life To Be.
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Chapter 1: Introduction

Problem

Counselling teens presents unique challenges. First, teens are often reluctant, unmotivated participants in counselling, so counsellors need ways to engage them and make counselling productive and worthwhile for them. Second, a teen’s level of developmental functioning governs their ability to participate in, and benefit from, counselling interventions, and counsellors need to match interventions to the teen’s developmental level, and not beyond (Pledge, 2004).

Teens are in, or soon to be entering, a stage of life when they need to make future-oriented decisions about major developmental tasks related to career, education, family, and other aspects of later life (Nurmi, 1991). For this reason, future orientation is particularly important in adolescence, and teens are uniquely positioned to benefit from future-oriented interventions. Recent studies have suggested that future-oriented interventions might have clinical value when working with teens (Johnson, Blum, & Cheng, 2014; Eryilmaz, 2011). However, to date, few such interventions have been developed and studied.

Reluctant Participants

Most teens who attend counselling come because someone else thinks they need to be there (Pledge, 2004). Typically, their parent, their school, or the court system makes the referral, and the teen is required, or strongly encouraged, to attend whether they want to or not. As a result, they often participate reluctantly and may demonstrate resistance (Gardner, 2013).

Often the counselling goals set by the adult do not match those of the teen. The reason the adult referred the teen to counselling may be for a problem the teen has little motivation to change, or may not even view as a problem. In some cases, the teen may insist the problem
belongs to someone else, such as their mother, father, teacher, or principal, or may even feel wrongfully accused (Rubenstein, 2003). Without an identifiable problem recognized by the teen to be a problem, the teen and the counsellor may struggle to set clear counselling goals or find a sense of purpose or direction in therapy. When the teen’s goals do not align with those of the adult making the referral, the counsellor may need to approach treatment indirectly. In these cases, the counsellor might employ therapeutic interventions that address common adolescent concerns related to their developmental level, or generally beneficial interventions that promote wellbeing.

**Common Problems**

Regardless of the reason for counselling, many teens, particularly those in high school or who have recently graduated, face similar concerns, challenges, and life-shaping decisions. Teens are in a stage of life characterized by growing independence, autonomy, and increasing development of individual interests, skills, and preferences (Nurmi, 1991). Those graduating from high school have reached a major life transition point. Many face uncertainty and the push and pull of internal desires and external influences, such as parents, that may contribute to anxiety or other forms of distress.

**Need for Adolescent-Specific Interventions**

Teens need therapeutic interventions that take into account their unique characteristics as clients. However, the field of psychotherapy has often approached teens as if they were simply younger adults, and adolescent psychotherapy has only recently come to be viewed as a distinct field (Rubenstein, 2003). Many teens exhibit a general resistance to therapy (Gardner, 2013), and are intolerant of traditional talk therapies used with adults (Rubenstein, 2003). This is not surprising, given Seligman’s observation (2011) that talk therapy techniques are generally
difficult to do, no fun at all, and difficult to incorporate into one’s life. Most teens, except perhaps those in late adolescence, are not well equipped to benefit from adult-oriented insight therapy due to an undeveloped logical system, short attention span, and tendency toward immediate gratification (Gardner, 2013). Many anxious and depressed adolescents cannot identify, name, or verbalize their feelings or needs, and do not see how talking to a total stranger could ease their pain or improve their life (Rubenstein, 2003). Furthermore, many teens resist therapeutic techniques commonly used with children, such as play therapy, because they do not want to be thought of as a child (Gardner, 2013).

Need for Future Orientation

Adolescents are less oriented to the future than adults (Steinberg et al., 2009), yet many of the decisions and tasks teens face require future orientation. Future orientation has important implications for the health and wellbeing of adolescents, and adolescents with greater levels of future orientation report greater wellbeing over time (Chua, Milfont, & Jose, 2014). Also, previous studies have reported that adolescents who place higher emphasis on future orientation tend to engage in less risk-taking behavior (Apostolidis, Fieulaine, & Soule, 2006).

Purpose

The purpose of this study is twofold: First, to assess empirical and theoretical support for the use of future-oriented interventions for teen counselling. Second, to identify existing future-oriented interventions used in any field of work with teens that may be useful in counselling, and propose other future-oriented interventions based on this study’s findings. These interventions may serve as the basis for future study.
Method

This study will review relevant literature and discuss empirical and theoretical support for the use of future-oriented interventions with an adolescent population. Based on these findings, the study will identify and propose specific future-oriented interventions that counsellors may find useful when working with teens. The scope of this study will be limited to interventions that can be completed in one, individual 50-minute counselling session.

Research Question

This study seeks to answer the question: Does current research, psychological theory, and accepted psychotherapeutic practice support use of future-oriented interventions for teen counselling?

Hypotheses

This study hypothesizes that single-session, future-oriented interventions might have multiple, beneficial uses in teen counselling. First, they might be helpful in stimulating productive dialogue in reluctant teens around common teen concerns related to specific developmental tasks. Second, they might be used to increase wellbeing in teen clients by helping the teen identify future goals and possibilities, and experience a greater sense of purpose and hopefulness about the future. Third, they might help teens uncertain about the future, or lacking focus, identify future plans and see steps they can take toward realizing those plans. Fourth, they might shift cognitive orientation from past disappointment or regret or present conflict to future opportunities helping the teen come to view specific problems as temporary and changeable elements of the broader life context.
Research Objectives

This study seeks to 1) identify existing future-oriented interventions from fields such as psychotherapy, education, and life coaching that may be useful in teen counselling, and 2) develop and propose new interventions based on findings from the literature review.

Theories Influencing This Study

Theories and concepts from positive psychology, time perspectives theory, and developmental theory influence this study.

Positive Psychology and Wellbeing

Positive psychology supports the idea that fostering wellbeing in a client is a worthwhile and beneficial therapeutic goal, perhaps just as important as seeking to eliminate the client’s negative, problem symptoms (Seligman, 2011). Positive psychology asks the question, after problem symptoms are successfully eliminated in a client, what replaces them? Seligman has proposed wellbeing as an antidote to depression, and a way to increase life satisfaction. A growing body of literature supports Seligman’s theories. A recent meta-analysis (Bolier et al., 2013) showed that positive psychology interventions could enhance subjective and psychological wellbeing and help reduce depressive symptoms, though the authors noted that additional studies in diverse populations were needed to strengthen the evidence base. The relationship between wellbeing and future orientation is central to this thesis, and acceptance of the clinical value of increasing wellbeing in a client places this thesis under the umbrella of positive psychology.

Time Perspective Theory and Future Orientation

Zimbardo and Boyd (1999) identified five time perspectives that relate to many established psychological concepts. These are past positive, past negative, present hedonistic, present fatalistic, and future. Although this thesis focuses on the future time perspective,
Zimbardo and Boyd believed that a balanced time perspective was most psychologically and physically healthy for individuals and optimal for societal functioning. They defined balance as the mental ability to switch flexibly among time perspectives as the task or situation required rather than be biased to a particular time perspective that is not adaptive across situations. Future orientation resides within the larger concept of time perspective theory as only one component of a balanced time perspective. This macro view helps define the suitability and possible limitations of future-oriented interventions as they relate to wellbeing and counselling.

**Developmental Theories**

Developmental theories, and particularly those that clarify the tasks and challenges of adolescence, help inform the potential content and focus of future-oriented interventions for teen counselling, and guide this study. Erikson (1994) focused attention on tasks the teen must achieve during adolescence for successful transition from childhood to adulthood. He described it as the stage of “identity versus role confusion.” During this stage the teen examines their identity and tries to find out exactly who they are. They explore possibilities and start to form their identity based on these explorations. The teen must figure out how they will fit in society, and who they will be as an adult. Erikson believed that failure to establish a sense of identity within society could lead to role confusion, leaving the individual unsure about themselves or their place in society. Nurmi (1991) observed that adolescent goals and interests focus on the major developmental tasks of late adolescence and early adulthood. These interests are future oriented, reflecting anticipated lifespan development, and typically concern matters such as future education, career, and relationships.
Definitions

This study uses the plain-language term *teen* as a synonym for *adolescent*. Teens are those in the developmental period between childhood and adulthood. This could be loosely defined as ages 13 to 18.

*Future orientation* is the image an individual has about their future (Seginer, 2008). It includes their thoughts, plans, motivations, hopes, and feelings about their future (Nurmi, 1991). This definition includes cognitive and affective elements. Future orientation provides the basis for setting goals and making plans for the future (Stoddard, Zimmerman, & Bauermeister, 2011).

This study adopts the lay understanding of *wellbeing* as a state of being happy, healthy, satisfied, or well. This broad definition encompasses the related academic concept of *subjective wellbeing* often used in happiness studies. Subjective wellbeing, according to Diener (n.d.) who pioneered the concept, is how people evaluate their lives in terms of a global judgment (such as life satisfaction or feelings of fulfillment), evaluating the domains of their lives (such as marriage or work), or their ongoing emotional feelings about what is happening to them (feeling pleasant emotions, which arise from positive evaluations of one's experiences, and low levels of unpleasant feelings, which arise from negative evaluations of one's experiences).

*Counsellor* is used synonymously with the terms *therapist* and *psychotherapist*.

Assumptions, Limits, and Scope

Though this study focuses on teens, the future-oriented concepts may apply to adults, particularly young adults still facing developmental concerns and task related to the transition to adulthood. Some teens may already participate in future-oriented activities such as life-planning or goal-setting activities offered through school or at home, or they may independently embrace a strong future time perspective. For these teens, the interventions described in this study may be
redundant, unnecessary, or contraindicated. For practicality of application of the interventions being studied, the scope of this study will be limited to interventions that can be completed in one, 50-minute counselling session. The interventions adapted or developed by this study’s author and described in this paper are theoretical propositions and have not been subject of experimental research.

**Significance**

This study underscores the need for, and usefulness of, adolescent-specific therapeutic interventions that address common teen concerns related to their developmental stage. It provides specific activities or interventions that counsellors may consider using with teens, particularly those who are not engaged participants. It emphasizes the common thread underlying many of the struggles, challenges, and concerns facing adolescents, which may point to the possibility of common approaches to treatment and the widespread use of generalized adolescent interventions. It highlights the utility of time perspective theory as a means to conceptualize client problems or identify cognitive biases. It furthers the discussion of the importance or practicality of increasing wellbeing as a therapeutic goal regardless of the presenting problem. Finally, it introduces ideas, activities, and interventions from outside the traditional sphere of psychotherapy that may prove useful in counselling.
Chapter 2: Literature Review

This literature review synthesizes current knowledge related to future orientation in adolescents, the relationship between future orientation and wellbeing, and the application of future-oriented interventions in teen counselling. It focuses on themes and topics relevant to the evaluation, development, and application of future-oriented interventions for teen counselling. The review has six main sections: the relationship of this study to previous research, future orientation and wellbeing, personal goals, future expectations, possible selves, and influencing future orientation in teens.

Strategy for Searching the Literature

Three core concepts were identified for search: future orientation in adolescents, future orientation and wellbeing, and future-oriented interventions. Related or synonymous search terms included future focus, future time perspective, future expectations, time perspective, temporal focus, adolescent goals, personal goals, life planning, and possible selves. This review searched two primary databases: Google Scholar and the City University of Seattle Library.

Relationship of This Study to Previous Research

Nurmi’s comprehensive review (1991), “How Adolescents See Their Future: A Review of the Development of Future Orientation and Planning,” highlighted the importance of future orientation in adolescence and provided the theoretical foundation for many recent, related studies, including this one. Nurmi observed that, even though future events motivate human behaviour throughout the lifespan, future orientation is especially important to young people since they face a number of age-specific tasks that will influence their later life. In particular, young people face important decisions regarding future career, lifestyle, and family. Also, how
they see their future plays an important part in their identity formation as they explore options and commit to future interests.

A second key study directly related to the focus of this paper is Zimbardo and Boyd’s seminal work on time perspective theory (1999), “Putting Time in Perspective: A Valid, Reliable Individual-Differences Metric.” Zimbardo and Boyd suggested that time perspective is a powerful influence on many aspects of behaviour, attitudes, and values, such as educational achievement, health, choice of romantic partners, sexual behaviour, and risk taking. Zimbardo and Boyd’s work has led to increased interest in the direct, intentional manipulation of time perspective as a psychotherapeutic intervention. To date, however, few mental health interventions use the concept of time at their foundation (Sword, Sword, & Brunskill, 2015).

Previously Studied Interventions

Few studies have tested the efficacy of interventions specifically designed to promote or increase future orientation, particularly in young people. The most relevant identified by this review is Marko and Savickas’s research on a Time Perspective Modification Intervention in career counselling (1998). In the context of career counselling, Marko and Savickas observed that many individuals did not orient themselves to the future and seldom thought about how their careers might unfold. They believed that, for career interventions to be useful for individuals stuck in the present, counsellors first needed to increase awareness of the future and optimism about planning careers. To do this, they designed and studied a Time Perspective Modification Intervention that directly targeted the time perspectives of high school and college students, and aimed to increase future orientation and improve career planning. The intervention, based in part on Cottle’s Circles Test (1967), required 2.5 hours to complete. From their analysis of the results, Marko and Savickas concluded that such an intervention could increase students’ future
orientation by developing their sense of a unified, continuous flow of past, present, and future, and that it could increase their optimism about the achievability of future goals. Although the results seemed promising, this review has not found any other studies, applications, or field tests of the Time Perspective Modification Intervention.

More recently, Van Beek, Kerkhof, and Beekman (2009) studied Future Oriented Group Training for suicidal patients based on the presumption that suicidal ideation is characterized by diminished positive future thinking. The training aimed to help make patients’ lives more livable by focusing on what the future might realistically have to offer. Training consisted of ten weekly group sessions that combined cognitive therapy, problem solving therapy, and future thinking to promote goal-directed and future-oriented behavior. The sessions focused almost exclusively on things to come. Van Beek et al. found that, although most of the patients who attended more than six sessions appreciated the intervention and benefitted in terms of suicidality and depressive and other psychiatric symptoms, the effects were too small to be statistically significant. Contrary to their hypothesis, they concluded that the mechanism of change was not through improved future positive thinking. Instead, they believed that reduction in suicidality was accounted for by decrease in depression. Study participants were not exclusively adolescents, but ranged in age from 18 to 65.

**Future Directed Therapy**

Vilhauer et al. (2012) proposed a system of psychotherapy based on the concept of future orientation, which they called Future Directed Therapy. They designed Future Directed Therapy as a clinical intervention to reduce symptoms of depression and improve wellbeing. To achieve this, the intervention aims to promote a paradigm shift that moves the client away from dwelling on the past or highlighting their present limitations to creating more positive future expectancies.
Future Directed Therapy teaches people to redirect their thinking toward things that feel better and bring them closer to what they want in life. The therapy proposes that anticipating a positive future and feeling able to act on that future are keys to emotional wellbeing, and that what people want (any desired future state) is the fundamental motivating force behind their behaviour.

Vilhauer et al.'s non-randomized pilot study (2012) found initial support for treatment of Major Depressive Disorder through creation of positive expectations for the future. They suggested that Future Directed Therapy could also be modified as an intervention for suicide prevention since people at risk for suicide typical have low positive future expectations. The study’s lead researcher, Vilhauer, expanded the concept and discussion of Future Directed Therapy in her book, *Think Forward to Thrive: How to Use the Mind’s Power of Anticipation to Transcend Your Past and Transform Your Life* (2014).

**Recent Study Recommendations**

Several recent studies have suggested possible applications of future-oriented interventions in teen counselling, and highlighted directions for further research. These suggestions helped guide the direction of this paper.

Salmela-Aro (2010) suggested that intervention programs focused on the development of functional personal goals might play a key role in the successful development of teens and improve their wellbeing. Similarly, Johnson et al. (2014) supported the idea that improving an adolescent’s future orientation had the potential to promote a successful transition to adulthood. They believed that future-oriented interventions could especially benefit vulnerable adolescents since they are more likely to struggle with the transition. Chua et al. (2014) suggested that direct interventions to foster future orientation in young people could have a positive impact on their coping strategies. Echoing Nurmi (1991), they believed that a strong, positive future orientation
would affect their present behavior, which would ultimately have a positive effect on their future. Stoddard et al. (2011) suggested that interventions that foster the development of future goals and aspirations for young people could play a vital role in violence prevention efforts. They believed these interventions could help youth develop a sense of hope by providing experiences that help them see future possibilities.

Several studies offered explicit suggestions on how future-oriented interventions might be designed. Chua et al. (2014) suggested that future-focused techniques could play a role in teaching young people to set ambitious but achievable goals, and make appropriate plans to attain them. They suggested that goal setting would be a good habit to instill in preadolescents and early adolescents who may not regularly think about these things. Stoddard et al. (2011) suggested helping youth develop personal scripts to guide their behavioural choices and motivate them to make better, healthier choices. Eryilmaz (2010) cited the potential impact of including career goals in clinical tools to increase happiness of adolescents. Chua et al. (2014) supported use of interventions similar to Marko and Savickas’s Time Perspective Modification Intervention (1998).

In Chapter 1 this paper hypothesized that future-oriented interventions might have multiple beneficial uses in teen counselling for a range of presenting problems. Johnson et al.’s recommendations (2014) support and guide this notion. In particular, they noted that interventions that improve an adolescent’s future orientation have the potential to be used as adjunct treatments to improve the effectiveness of risk behaviour interventions since these interventions are predicated on a young person’s beliefs about the future and ability to plan.
Future Orientation and Wellbeing

Research has demonstrated the benefits of future orientation in multiple areas including motivation, sense of responsibility, ability to organize and plan, self-efficacy, academic achievement, financial success, and health conscious behaviour (Boniwell, Osin, Linley, & Ivanchenko, 2010; Boyd & Zimbardo, 2005). Studies assessing critical components of future thinking such as planning, goal setting, and problem solving have found that individuals who are skillful in these areas demonstrate a greater sense of wellbeing (Vilhauer et al., 2012). Future orientation may be particularly important for adolescents since adolescents with greater levels of future orientation report greater wellbeing over time (Chua et al., 2014). Also, adolescents who place higher emphasis on a future orientation tend to engage in less risk-taking behaviour (Apostolidis et al., 2006).

However, despite the benefits of future orientation, general future focus has not been consistently associated with wellbeing (Rush & Grouzet, 2012). In fact, the literature suggests that overemphasis on the future may negatively impact wellbeing. Being overly focused on future goals compromises spontaneity, decreasing one’s ability to enjoy the present (Boniwell & Zimbardo, 2003). Because wellbeing exists in the present, neglecting the present moment may prevent an individual from appreciating and enjoying life (Rush & Grouzet, 2012). Boniwell and Zimbardo (2004) warned of some of the drawbacks of excessive future orientation, such as workaholism, lack of social connections, and lack of a sense of community (Boniwell et al., 2010).

The literature also suggests that whether future orientation is beneficial or not depends on one’s attitude toward the future, and whether it is positive or negative. When an individual focuses excessively on the distant future, their wellbeing depends on whether they see their
future thoughts as pleasant or unpleasant. Positive thoughts about the future relate positively to wellbeing (Rush & Grouzet, 2012). However, research on future anxiety has shown that negative thoughts about the future can be detrimental (Zaleski, 1996).

**Future Orientation in Adolescence**

Future orientation is especially relevant for individuals in times of developmental, personal, and cultural transitions that require preparation for what lies ahead (Seginer, 2008), such as one encounters during adolescence. Nurmi (1991) commented that adolescents face a number of age-specific tasks related to their development that require them to think about the future, and that their future-oriented decisions such as those related to career, lifestyle, and future family heavily influence their later adult life. Also, adolescent problem behaviours such as delinquency and substance abuse can be related to how young people see their future.

Despite the importance of future orientation during adolescence, teens are generally less oriented to the future than adults (Steinberg et al., 2009). Future orientation varies across age groups (Chua et al., 2014) and the level of planning for the future increases with age (Nurmi, 1991). For example, young adolescents are generally less future oriented than older adolescents. Future orientation also varies within age groups, and some adolescents have better planning abilities and clearer goals than others (Chua et al., 2014).

**How Future-Orientation Affects Wellbeing**

Although research has clearly demonstrated a relationship between future orientation and wellbeing, the mechanism by which future orientation affects wellbeing is not well understood. Researchers have offered different theories. Chua et al. (2014) suggested that future orientation likely leads to greater wellbeing through multiple pathways. They suggested that one such pathway is increased use of adaptive coping, decreased use of maladaptive coping, or both. For
example, their study of 1,774 preadolescents and early adolescents showed that future orientation predicted lower maladaptive coping, which in turn predicted lower substance use and less self-harming behaviour. Johnson et al. (2014) proposed that expectancy value theory offers another possible mechanism. According to expectancy value theory, individuals modify their current behaviour based on their judgment of future outcomes. Coping changes, such as those observed by Chua et al., may be just one of many possible behavioural changes that an individual may make based on their future view.

**Balanced Time Perspective**

If future orientation is indeed beneficial, to what degree should an individual be oriented to the future at the expense of other time perspectives? We have the capacity to consciously direct our attention to any of the three primary temporal dimensions -- past, present, or future (Rush & Grouzet, 2012). For example, an individual may choose to revisit the past through memories, experience the present as it is occurring, or anticipate the future through expectations (Boniwell et al., 2010). Rush & Grouzet (2012) observed that each of the temporal perspective dimensions has the potential to influence our daily wellbeing. However, the literature is divided on which temporal dimension is most conducive to wellbeing (Boniwell et al., 2010). How the temporal perspective dimensions interact with each other to predict wellbeing has yet to be examined. However, it is not likely that these dimensions act independently (Rush & Grouzet, 2012). A prevailing view in the literature is that future orientation is best considered within the context of balanced time perspective.

Boniwell and Zimbardo (2004) suggested that reliance on a single time perspective limits one’s ability to meet the situational demands of life and may bias how we think, see, and behave. They believed that, to facilitate wellbeing, one should strive for a balanced time perspective, and
that a balanced time perspective was most psychologically and physically healthy for individuals, and optimal for societal functioning (Zimbardo & Boyd, 1999). A balanced time perspective has been defined as the mental ability to switch among time perspectives as the task or situation requires rather than be biased to a particular time perspective that is not adaptive across situations (Boniwell & Zimbardo, 2004). An individual with a balanced time perspective is able to move flexibly between each time perspective and use the most appropriate one in a given situation (Drake, Duncan, Sutherland, Abernethy, & Henry, 2008). Their actions are shaped by a consideration of all three temporal zones (Zimbardo & Boyd, 1999). Three recent studies demonstrated a strong positive relation between balanced time perspective and wellbeing (Zhang, Howell, & Stolarski, 2013; Boniwell et al., 2010; Drake et al., 2008). Furthermore, having a balanced time perspective is related to increased life satisfaction, happiness, positive affect, psychological need satisfaction, self-determination, vitality, and gratitude, and decreased negative affect (Zhang et al., 2013). Unfortunately, there is no consensus on what constitutes an ideal balanced time perspective since what is ideal for one individual isn’t for the next.

**Temporal Focus, Attitude, and Distance**

The literature reveals three important factors that influence the effect of temporal perspective. They are temporal focus, temporal attitude, and temporal distance.

Temporal focus is the attention an individual devotes to thinking about the past, present, and future (Shipp et al., 2009). Although individuals have the ability to direct their focus to any temporal dimension, it is not always consciously decided (Boyd & Zimbardo, 2005). An individual’s temporal focus typically changes throughout the day, shifting among past memories, present experiences, and future expectations. Nevertheless, an individual may have a preference or predisposition for a particular temporal dimension or general time orientation (Zimbardo &
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Boyd, 1999). When a particular temporal perspective becomes habitual, it represents a dispositional style and predicts life choices (Zhang et al., 2013).

Temporal attitude is the affective component of temporal perspective and refers to one’s attitude toward the content within the past, present, and future temporal regions (Nuttin, 1985). In short, our thoughts toward any temporal dimension can be positive or negative. Research has consistently found that a general tendency to have a positive temporal attitude toward the past, present, and future relates to wellbeing (Rush & Grouzet, 2012; Boniwell et al., 2010; Drake et al., 2008).

Temporal distance is how near to or far from the present moment an individual’s thoughts span (Rush & Grouzet, 2012). When thinking about the future we can consider the near future or the distant future. For example, we can think about tomorrow, next week, next year, or twenty years from now. When temporal distance is increased, the level of abstraction also increases making thoughts more vague and less concrete (Dhar & Kim, 2007). To explain this further, construal level theory (Trope & Liberman, 2003) proposes that temporal distance changes an individual’s responses to future events by changing how they mentally represent those events. The greater the temporal distance, the more likely events will be represented by abstract features that convey the perceived essence of the events (high-level construals) rather than by more concrete details (low-level construals).

The distant future is more uncertain than the present or near future. Many possibilities, events, and outcomes could change the distant future, so individuals have less control over it (Rush & Grouzet, 2012). Furthermore, a constant focus on the distant future may prevent one from making their life optimal in the present. Rush and Grouzet observed that when individuals
focused on the distant future more than usual their wellbeing depended on whether they considered their distant future thoughts to be pleasant or unpleasant.

**Time Perspective Therapy**

Time Perspective Therapy is a relatively new talk therapy developed by Zimbardo, Sword, and Sword (2008) based on Zimbardo’s earlier work. Time Perspective Therapy embraces the idea that individuals have a unique time perspective that can shift or alter depending on one’s experiences (Sword et al., 2015). For example, in times of distress, one’s time perspective might shift toward a past negative experience and rumination.

Time Perspective Therapy follows three steps. First, the therapist administers the Zimbardo Time Perspective Inventory to determine the client’s time perspective and any time bias that may be associated with the reported problems. Second, the therapist teaches the client about the importance of a balanced time perspective and helps them balance their time bias to more closely match a proposed theoretically ideal time perspective. Third, the therapist teaches the client self-soothing activities such as meditation and physical exercise. Additionally, the therapist encourages the client to engage in more pro-social and present-hedonistic activities to offset the avoidance and isolation typically experienced when one is depressed.

Zimbardo, Sword, and Sword described how Time Perspective Therapy might be used for treatment of post-traumatic stress disorder in their book, *The Time Cure: Overcoming PTSD With the New Psychology of Time Perspective Therapy* (2012). A study into the treatment’s efficacy was scheduled to begin at Tripler Army Medical Center, the largest military medical facility in the Pacific, in 2014 (Sword et al., 2015).
Transcendental Future

Many people believe in some form of life after death. Zimbardo and Boyd (1999) described the time period from the point of imagined death to infinity as the transcendental future. An individual’s expectations of life after death are often linked to their religious or philosophical beliefs. However, holding beliefs about life after death does not necessarily equate to being future oriented. In terms of time perspective theory, what might be more relevant is how often an individual thinks about or imagines themselves in a transcendental future context and if these thoughts are positive or negative (Seema, Sircova, & Baltin, 2014) rather than the specific beliefs or content. Though intriguing, a full and meaningful discussion of the complex and interrelated topics of spirituality, religion, future orientation, and the transcendental future as they relate to adolescence is beyond the scope of this paper.

Measuring Future Orientation

Although several scales have been proposed to measure future orientation, recent studies have tended to endorse those that measure multiple aspects of temporal focus. Three of the most commonly referenced are the Zimbardo Time Perspective Inventory, the Temporal Orientation Scale, and the Temporal Focus Scale. One measure, the Adolescent Time Inventory, has been developed specifically for use with youth.

Since it was first proposed in 1999, the Zimbardo Time Perspective Inventory (Zimbardo & Boyd, 1999) has become the leading measure of time perspective (Boniwell et al., 2010). The 56-item inventory consists of five factors: past-negative, past-positive, present-hedonistic, present-fatalistic, and future. These factors take into account both the different temporal zones and also the dimension of emotional valence. One theoretical objection to the inventory is lack of emotional valence in the future factor (Boniwell et al., 2010). The inventory is used in

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therapeutic application as the first step of Time Perspective Therapy (Sword et al., 2015). Example items are, “It gives me pleasure to think about my past” and “Since whatever will be will be, it doesn’t really matter what I do.”

Often used in conjunction with the Zimbardo Time Perspective Inventory is the Transcendental Future Time Perspective Inventory. This 10-item inventory rates an individual’s orientation to the future after death. Example items are, “Humans have a soul” and “I believe in miracles.”

The Temporal Orientation Scale is a 28-item questionnaire that includes three subscales representing past, present, and future temporal orientation (Holman & Silver, 1998). Example items are, “Planning activities takes the fun out of them” and “I believe it is important to save for a rainy day.”

Shipp, Edwards, and Lambert (2009) proposed the Temporal Focus Scale as a briefer alternative to the Zimbardo Time Perspective Inventory and the Temporal Orientation Scale. The Temporal Focus Scale is a 12-item self-report measure of cognitive engagement with the temporal domains of past, present and future. Example items are, “I replay memories of the past in my mind,” and “I focus on my future.” Because the Temporal Focus Scale is less than a quarter of the length of the Zimbardo Time Perspective Inventory and less than half the length of the Temporal Orientation Scale, Shipp et al. believed it would be more practical to use than the other two measures.

Based on the Circles Test (Cottle, 1967), the Adolescent Time Inventory (Mello, Finan, & Worrell, 2013) takes a graphical approach to measuring an individual’s time orientation. First, the adolescent chooses the image from a set of drawings that best illustrates the level of importance they give to the past, present, and future. Then they choose another image from a
different set of drawings that illustrates how they perceive the relationship between the past, present, and future. This inventory offers the advantage of being simple to administer for research studies.

**Personal Goals**

Salmela-Aro (2009) defined personal goals as future-oriented representations of what individuals strive for in various life domains. They are states of the future that people seek to attain, maintain, or avoid (Nair, 2003). To envision future goals, a person must adopt a future orientation. Studies have shown that the pursuit of one’s conscious goals is associated with emotional wellbeing (Marttinen & Salmela-Aro, 2012). However, whether goals are beneficial to wellbeing or not depends on several factors including goal content, attainability, and the individual’s ability to revise goals.

**Personal Goals in Adolescence**

During adolescence, teens make choices and decisions about their future life paths (Nurmi, 1991). Setting personal goals helps direct their exploration, planning, decision-making, and commitments to promote successful transition to adulthood (Nurmi, 1991; Salmela-Aro, 2010). Adolescent goals are not always purely personal and individual. Adolescents co-regulate their goals with peers, parents, and teachers (Salmela-Aro, 2009). For example, educational goals are often shared with peers. Adolescent goals have been widely studied over the past two decades with the results summarized in Massey, Gebhardt, and Garnefski’s comprehensive review (2008).

**Goal Content**

Nurmi (1991) found that adolescents’ goals and interests concern the major developmental tasks of late adolescence and early adulthood, and reflect anticipated future
When asked about their future wishes and interests, teens typically talk about matters connected to their personal lives, such as education, work, future family, leisure activities, travel, and self-development (Marttinen & Salmela-Aro, 2012). The most common adolescent goals relate to education, occupation, and social relationships (Massey et al., 2008).

In general, adolescent goals follow a cultural prototype that leads teens to achieve their educational goals first, followed by occupational and family goals, and then finally securing material assets (Massey et al., 2008). Many, but not all, studies have found gender differences in adolescent goal content, and goal content appears to reflect gendered norms, particularly with regard to family, educational, and occupational goals (Massey et al., 2008). Despite these general patterns, the type of goals that adolescents strive for can vary greatly between individuals.

Cross-sectional and longitudinal studies have shown that young adults who have goals related to personal relationships, family, and education have better subjective wellbeing and fewer symptoms of depression than other young adults (Salmela-Aro, 2010). However, not all personal goals promote wellbeing. Pursuit of intrinsic life goals such as self-acceptance and community involvement are related to greater wellbeing, but extrinsic life goals such as financial success and recognition are negatively or neutrally related to wellbeing (Kasser & Ryan, 2001). Intrinsic goals refer to goals that people set for themselves out of their own interests, while extrinsic goals are goals induced or imposed by others or an external source (Simons, Vansteenkiste, Lens, & Lacante, 2004). Additionally, studies suggest that self-related goals concerning the development of personality and identity are related to distress, low self-esteem, problems with mental health, and exhaustion (Marttinen & Salmela-Aro, 2012).

Certain types of goals may be more beneficial or effective than others. People typically put more effort into achieving, and have a greater chance of success with, goals they set for
themselves out of their own interests, rather than those induced or imposed by others or an external source (Simons et al., 2004). Additionally, Brunstein, Schultheiss, and Grassman (1998) found that only the achievement of goals that are congruent with motivational dispositions contributed to enhanced wellbeing. In their study of student participants, they found that the combination of high commitment to, and high attainability of, motive-congruent goals predicted an increase in students' emotional wellbeing over one semester. In contrast, high commitment to motive-incongruent goals predicted a decline in emotional wellbeing.

Whatever the goals, the literature suggests that goals need to be periodically revised and adjusted (Salmela-Aro, 2010). Salmela-Aro observed that people compensated for failure experiences by adjusting their personal goals on the basis of previous role transitions, and speculated that the inability to adjust previous goals is likely to lead to depressive symptoms. This suggests that goal-oriented interventions should promote periodic review and revision of goals.

**Future Expectations**

Future expectations have been defined as beliefs about the likelihood of a specific event occurring in the future (Sipsma, Ickovics, Lin, & Kershaw, 2012). These expectations influence goal setting and planning, and guide behaviour and development (Nurmi 1991; Seginer 2008).

Research has consistently found that positive, optimistic thinking about the future fosters motivation and leads to successful performance, while negative, pessimistic thinking has the opposite effect (Oettingen & Mayer, 2002). Studies have found positive future expectations linked to improved social and emotional development, particularly among minority and low-income youth (Sipsma et al., 2012). Research has also shown links between negative future expectations and delinquency (Nurmi 1991).
For expectations to be beneficial, research suggests they should be positive and realistically attainable – not wishful thinking or fantasies. Oettingen and Mayer (2002) observed that, because positive expectations reflect past successes, they provide a valid basis for strong behavioural investment. Positive fantasies, on the other hand, are not based on past successes and conceal the need to plan and act to attain them.

Sipsma et al. (2012) suggested that future-oriented interventions that help adolescents make positive and realistic future expectations would influence their behaviours. They added that interventions should be tailored to distinct subpopulations and for disparate future expectations.

**Possible Selves**

Markus and Nurius’s idea of possible selves (1986) is another future-oriented concept that has been considered for application in teen counselling. Oyserman and Fryberg (2006) described possible selves as the selves we imagine ourselves becoming in the future, we hope to become, we are afraid we may become, and we fully expect we will become. Markus and Nurius believed possible selves are important because they function as incentives for future behaviour and provide an evaluative and interpretive context for the current view of self. Possible selves are particularly relevant during adolescence, a time when youth are free to try on different possible selves without commitment (Oyserman & Fryberg, 2006).

Shepard and Marshall (1999) proposed that possible selves could be used in life-career counselling to help clients explore and generate options, increase self-awareness, and formulate plans to achieve goals. They developed an interview-style intervention to encourage adolescents to consider their futures in terms of their hopes, fears, capabilities, expectations, priorities, and action-plans, and suggested that counsellors could include the procedure as part of their counselling interviews. In this way, adolescents could explore their possible selves and elaborate
on the cognitive and affective components of those selves. Counsellors could then help them consider hoped-for careers and lifestyles, self-efficacy and competency, and family life relationships, and address fears such as unemployment, sexual abuse, drug and alcohol misuse, and injuries.

Oyserman, Bybee, Terry, and Hart-Johnson (2004) noted how possible selves, expectations, and concerns about the coming year could promote feeling good or self-regulation. Their results suggested that having an achievement-related focus in self-concept provides some impetus to behaviour and outcome change. They also found that youth who have a self-regulatory focus are better able to make change.

Exploration of possible selves may be particularly beneficial for minority youth. Such an exploration might lead to an understanding of how social expectations or stereotypes influence or restrict the individual’s self-identified possible selves. Ultimately this could help reduce achievement gap and decrease risk of other negative outcomes contained in stereotypes (Oyserman & Fryberg, 2006).

The possible selves interventions studied by Shepard and Marshall and by Oyserman et al. are discussed in greater detail in Chapter 3.

**Influencing Future Orientation in Teens**

Although numerous studies have been conducted on the relationship between future orientation and wellbeing, and between future orientation and behaviours, these studies have provided little guidance on how future orientation might be influenced or fostered in adolescents, particularly in counselling. Furthermore, research has not yet fully explained the various mechanisms through which future orientation impacts health and wellbeing, and what individual and environmental factors influence future orientation (Johnson et al., 2014). This information is
needed to inform the design of interventions to help adolescents improve their future orientation (Johnson et al., 2014). However, despite gaps in the knowledge, the literature has consistently revealed a number of concepts and processes that are characteristic of, or associated with, future orientation, many of which have been discussed in this literature review. Those commonly cited include motivations, expectations, planning, hopes and fears, dreams and fantasies, desires and aspirations, destiny, personal goals, and possible selves. All of these provide potential avenues for promoting or influencing future orientation in an individual.

Other factors that influence future orientation include developmental age, external environments, social interactions, and family context. Developmentally, early adolescents tend to be less future oriented than older adolescents (Nurmi, 1991). Early adolescents may rarely consider future educational, family, or career plans, though these matters become more important as transition to adulthood nears. Future orientation can be modified by change in the external environments, such as entry into an occupation (Trommsdorff, Lamm, & Schmidt, 1979). School is the primary external environment for most teens. Social interactions, particularly with peers, help shape a teen’s beliefs about the future and offer ideas and possibilities for exploration. Family context was also found to influence adolescents’ future orientation, in particular their future interests, plans, causal attributions, and affects (Nurmi, 1991). For many adolescents, parental influence may be significant.

Johnson et al.’s (2014) recent, thorough literature review indicated that gender, parenting, socioeconomic status, and race might also influence future orientation. For example, they cited evidence suggesting that girls have a stronger future orientation towards family whereas boys have a stronger future orientation towards career. However, the results are not conclusive and often mixed. Furthermore, Nurmi (1991) believed that anticipated lifespan development accounts
for a sizeable number of the age, sex, socioeconomic status, and cultural differences in the content and temporal extension of future orientation.
Chapter 3: Future-Oriented Interventions

This chapter describes specific future-oriented interventions that may be appropriate for teen counselling. This is not an exhaustive list of all potentially useful interventions but a sampling of interventions that have been used in related research or are consistent with findings of the literature review in Chapter 2. The interventions described in this chapter are Next Year Possible Selves, Possible Selves Mapping Interview, An Interview With Future Me, Future Thinking Task, Goals in Time, The Who Will I Be? Test, and How I’d Like My Life To Be. This chapter also discusses related activities from the fields of psychotherapy and education.

Criteria

The interventions described in this chapter meet the following criteria, consistent with the research questions posed in this study:

1. promote or require a shift in the time perspective of the client’s conscious thought from past or present to future,
2. have content relevant to the common concerns or developmental needs of teens,
3. are appropriate for use in one-to-one counselling, and
4. can be completed in a single counselling session of one hour or less.

Key Findings from Literature Review

The literature review in Chapter 2 revealed a number of key findings that help guide the selection, development, and evaluation of future-oriented interventions for teen counselling.

These findings suggest that future-oriented interventions for teens should:

- relate to common teen concerns regarding future education, career, family, social relationships, lifestyle, leisure activities, travel, and self-development;
- promote positive, optimistic thinking about the future;
• encourage realistically attainable hopes and goals, not wishful thinking or fantasies;
• emphasize intrinsic hopes and goals set by the teen out of their own interests, not extrinsic goals induced or imposed by an external source;
• encourage motive-congruent hopes and goals;
• avoid self-related goals concerning the development of personality and identity;
• be flexible to allow for differences in age, gender, culture, socioeconomic status, and individual factors, or be tailored for distinct subpopulations;
• promote the idea that goals need to be revisited periodically and adjusted for change or failure.

Search Strategy

An online search helped identify potentially useful interventions. The search included two scholarly databases, Google Scholar and the City University of Seattle Library, and a general Google search. Primary search terms included future-oriented interventions, future-focused activities, and synonymous phrases. The search considered results from non-traditional counselling and psychological resources such as educational, self-help, and life coaching resources.

Next Year Possible Selves

Oyserman et al.’s Next Year Possible Selves intervention (2004) is a two-page, two-part written activity (see Appendix A for intervention). Part one asks the client to imagine what they will be like or what they will be doing next year, and describe steps they may already be taking to realize that vision. Part two focuses on current ongoing problems and near-term anticipated problems, specifically, what the client wants to avoid being like or doing next year. The counsellor can lead the activity in session or assign it to the client as homework. However, a
counsellor-led interview may better engage teens (Shepard & Marshall, 1999), since many already feel the burden of school-related homework or simply dislike homework assignments.

**Discussion**

Oyserman et al. selected a one-year time frame partly because their study focused on self-regulation and they believed that possible selves further in the future would be less likely to serve a self-regulatory function for youth. They also believed that youth would get clearer feedback about their success when working toward shorter-term expected selves. Feedback can reinforce a youth’s perception of their likely success in achieving goals. A one-year cycle seems particularly relevant to teens since their educational progress and advancement takes place in one-year increments, both in high school and in post-secondary education. However, in counselling, a one-year time frame could have different implications for different teens. For example, a teen progressing from grade 11 to 12 may expect or experience relatively minor changes compared to a teen in the final year of high school who will be transitioning to life after school, which is a major step toward adulthood.

The intervention calls for the client to imagine both hoped-for and feared possible selves. Research generally discourages a negative, pessimistic view of the future. However, Shepard and Marshall (1999) hypothesized that the feared self plays an important role in self-concept, motivating the teen to take concrete action to avoid the feared outcome. Before administering the second half of this intervention and exploring feared possible selves, the counsellor may wish to evaluate the intervention’s motivational potential for that particular client. An exploration of feared possible selves (and hoped-for possible selves) might be appropriate for a client who is heavily focused on future fears or anticipates a negative future life outcome such as living in the street, experiencing a mental health decline, or reconnecting with a negative peer group.
This intervention helps the teen envision and reframe their near-term possible selves as goals to be pursued and achieved. It helps the teen identify behaviours or internal resources that may already be moving them toward those goals, increasing their expectations that these possible selves can be achieved. The intervention, together with the counselling dialogue, encourages the teen to put steps in place and take action to achieve their preferred next year possible self. Additionally, the dialogue could help the client challenge unhelpful future thinking such as expecting a highly unlikely outcome.

**Possible Selves Mapping Interview**

Shepard and Marshall’s Possible Selves Mapping Interview (1999) is divided into three sections: introduction, exercise, and debriefing (see Appendix B for a detailed description). In the introduction, the interviewer explains the concept of possible selves and encourages the client to relax and let their thoughts flow into the future. Next, in the exercise section, the interviewer asks the client to “think about what you hope to become” and “think about what you fear, dread, or don’t want for yourself.” No specific time frame is provided and the client is free to imagine their possible selves at any future time. The interviewer writes hoped-for selves on green cards and feared selves on yellow cards, which are then used in various activities. The activities help the client understand the relative importance of hoped-for and feared selves and their meaning, assess the capability and likelihood of achieving each possible self, and reflect on steps they have already taken to bring about or prevent these possible selves. Following each activity, the information is recorded on a Possible Selves Map. Finally, in the debriefing section, the interviewer asks the client to summarize their Possible Selves Map “as if they were talking to someone who knew nothing about them.” The interview takes between 20 and 30 minutes to complete.
Discussion

Shepard and Marshall described the interview as an opportunity for the client to construct and reconstruct the self in multiple contexts or domains. The interview helps the client explore and generate options, appraise levels of competency, and formulate plans to achieve goals. In administering the interview, the counsellor helps the client discern between possible selves that are realistically achievable and those that are not. When a hoped-for self is seen as unachievable, the plans and motivational controls needed to attain it do not develop. Although Shepard and Marshall administered the intervention in a group setting, it could be administered individually.

Though similar to Next Year Possible Selves, this intervention places a heavier emphasis on evaluating the likelihood of possible future outcomes, which counsellors may find beneficial for helping a client challenge unhelpful or inaccurate future thinking. Also, some clients may appreciate the imaginative freedom of this intervention and find it easier to identify and explore possible selves when not restricted to imagining life at a particular future moment, such as next year.

An Interview With Future Me

This simple intervention (see Appendix C), adapted by the author of this thesis, is based on Vilhauer’s Conversation With Your Future Self (2014) and the Letter to Future Me exercise used in educational and life coaching applications. The counsellor asks the client to imagine themselves at some specific moment in the future. For example, the counsellor might ask a soon-to-graduate high school student to imagine herself one year from now, five years from now, or on her 20th or 30th birthday. The counsellor then holds a conversation with the client’s future self guided by a series of questions such as “What are you doing now? Who are the most important
people in your life?” and “How did you get here?” In short, the intervention is a role play with the client taking on the role of their future self.

**Discussion**

The loose, flexible framework of the exercise requires the counsellor to prepare the client to take on the role and “get into character,” and then to direct the interview in a productive and helpful way. For clients who find it is easy to imagine possible future selves and are comfortable with role play, the experiential process could offer a fun, energetic, creatively-inspiring way to envision future possibilities. Additionally, the emotional experiencing of imagined achievements could make the possibilities seem more real or achievable, bolstering motivation. However, this form of role play might not be appropriate for all clients. For example, shy or introverted clients might resist the outgoing nature of the exercise, or clients with attention deficit might not be able to maintain the future character sufficiently to make the exercise productive.

**Future Thinking Task**

Several research studies have used the Future Thinking Task (MacLeod et al., 1997) to measure future-directed thinking by recording the things people predict or expect to experience. The interview portion of the activity resembles a brainstorming session (see Appendix D for the script). The interviewer asks the participant to say aloud what things might happen to them in the future at three different moments in time. These should be things that they think will definitely happen or are at least quite likely to happen. For each future moment the participant has one minute to come up with as many things as they can. The interviewer encourages them to say whatever comes to mind, trivial or not. The second part of the Future Thinking Task is a coding process not relevant to the proposed use of this activity as a counselling intervention.
Discussion

This intervention has two main strengths. First, it takes little time to administer. Second, it helps generate numerous ideas for counselling conversations, starting the process of future-oriented exploration. In this sense, the intervention seems incomplete and might be best considered a way of opening the door to more detailed future-oriented conversations that will follow, led by the counsellor. The intervention places time pressure on the client, which may not always be beneficial. For example, a depressed client or a client deeply focused on a past event or present challenge might struggle to imagine future circumstances and may need more time to do so.

Goals in Time

A counsellor might use this intervention, based on Therapist Aid’s Goal Planning worksheet (n.d.), to help the client clarify goals for various near-term milestones (see Appendix E). The counsellor asks the client to state one goal for each of four future moments in time: one week, one month, one year, and five years. Then the counsellor facilitates a discussion that identifies strengths and resources the client has that will help achieve these goals, obstacles that might prevent them from being achieved, and steps the client needs to take to move closer to their goals. For example, a five-year goal might be to get a good job. In this case, a required step might be to graduate from college and a current obstacle might be the client’s current high school math grade. The conversation ends with a call to action: “What can I start doing tomorrow to work toward my goals?”

Discussion

Goal-setting activities are common to many life and professional domains including self-help, peak performance, executive coaching, and life coaching. There are countless variations
and this is just one example that meets the criteria outlined earlier in this chapter. The underlying theoretical basis for administering this or any goal-setting activity in teen counselling is that the pursuit of one’s conscious goals is associated with emotional wellbeing (Marttinen & Salmela-Aro, 2012).

In this activity, the identified goals span a period from one week to five years. Typically, the longer the term, the more vague and general the goals and the less control we have over them (Trope & Liberman, 2003). For near-term goals, the counsellor may encourage SMART goals that are specific, measurable, attainable, relevant, and time bound. The counsellor encourages the client to revisit their goals periodically, acknowledge and reward successes, and adjust goals for changing desires and circumstances.

The call to action at the end of the intervention may not be appropriate for every client since it assumes the client is ready to take action. In practice, however, the counsellor may find that the client is not yet ready to act on change, and is merely exploring options and identifying future possibilities. In such cases, a call to action is likely to be ineffective. It may even be counterproductive, leading the client to commit to a future goal they have not yet fully embraced.

In administering this intervention, the counsellor should consider the effect of cultural, family, gender, socioecomonic, and other factors on goal setting, and open that discussion if helpful. For example: Are seemingly modest goals the result of socioeconomic conditioning and a resulting dim future view? Are clear and easily stated goals the client’s preferred goals or is the teen pursuing goals long-instilled by parents, perhaps influenced by the family’s culture? Do the client’s goals appear limited by socially-constructed gender norms and are these norms congruent with the client’s own values and beliefs?
The Who Will I Be? Test

In this activity proposed by Zimbardo and Boyd (2008), the counsellor asks the client to think of the person they want to become and finish the phrase “I will be…” with as many thoughtful responses as possible. From this information the client identifies five concrete goals they hope to accomplish in the future, and arranges them from the one they hope to achieve soonest to the one they hope to achieve last. The client then mentally rehearses reaching the goals similar to how athletes visualize their desired performance (see Appendix F for complete intervention). Although The Who Will I Be? Test is presented here as a standalone intervention, Zimbardo and Boyd suggested it as the third stage of a self-directed exploration of an individual’s time perspective. The first two activities focused on the individual’s past and present.

Discussion

Zimbardo and Boyd (2008) believed that rehearsing the steps needed to move toward the goal, in other words focusing on the process rather than the end product, increases the chance of success in achieving the goal. Additionally, the mental rehearsal of future steps represents ongoing future-oriented thought. So, the intervention trains the client to use future-oriented process of visualization as a means to goal attainment, a technique that could benefit the client throughout their life.

Another strength of The Who Will I Be? Test is that it takes an exploration of possible selves (the answers to the question “I will be”) and encourages the client to begin to put concrete goals in place related to these possible selves. Furthermore, the goals are arranged from nearest to most distal which, in terms of construal level theory, represents a logical arrangement of goals from most defined and likely to be achieved to most abstract.
This intervention may be appropriate for teens who have a clear vision for their future or who lack focus but are still able to identify clear future goals. However, it may not be appropriate for teens who need time to explore future possibilities without commitment.

**How I’d Like My Life To Be**

In this intervention, proposed by the author of this thesis, the counsellor asks the client to consider their hopes and goals across ten future life dimensions. The ten life dimensions are family and friends, love and intimate relationships, school and education, work and career, home and lifestyle, health and appearance, creativity and expression, skills and personal development, community and society, and fun and travel (see Appendix G for the complete intervention).

The counsellor asks the client to identify three hopes or goals for each life dimension. These hopes and goals may be associated with any time in the future, allowing the client to choose and focus on the temporal distance that interests them the most or is easiest for them to envision. The counsellor may use the client’s responses as points of discussion to help the client more deeply explore possibilities or outline their vision for the future. When complete, the counsellor asks the client to circle the three items most important to them. These items may become the focus of further exploration or planning. The activity takes about 50 minutes to complete, depending on the depth of discussion guided by the counsellor.

The final document becomes a loose, flexible life plan containing the client’s self-generated hopes and goals for their future, clarifying what is desirable or important to them and worth pursuing. The counsellor encourages the client to keep the document and review it from time to time, rewarding themselves for achievements completed, and revising their hopes and goals as they wish, taking control over their future. Regular review of the document provides a periodic return to future orientation.
Discussion

A strength of this activity is that it encourages the client to consider their future across a range of life dimensions associated with wellbeing that they might not otherwise consider or deem important. However, its success depends largely on the counsellor’s skill in engaging the client and inspiring their active participation. This activity’s loosely structured format requires the counsellor to guide productive exploration of hopes and goals in a way that is relevant to the individual client. For example, the activity does not call for direct exploration of topics such as safety and security, or spirituality and religion. However, these topics might be of great personal importance to some clients. The counsellor is encouraged to tailor the activity, making discussion relevant to the client. The intervention is best suited to high-school-aged teens who have begun to consider what their life might look like after graduation, or need to begin that exploration.

A weakness is that the activity does not directly support the development of definite steps toward the attainment of the client’s hopes and goals, which might be beneficial for some clients. Instead, the ideas are planted as seeds and left for the client’s conscious and unconscious consideration over time. Of course, the counsellor may elect to facilitate the client’s development of plans and steps toward clearly identified and prioritized goals as a follow up activity.

Other Interventions

The fields of psychotherapy and education offer other future-oriented activities that may be relevant to teen counselling.

Future-Oriented Conversations in Psychotherapy

Future-oriented questions and conversations are common to many psychotherapeutic approaches. Although these techniques encourage a time perspective shift in the client, that is not
typically their explicit purpose. Instead, they are often used to set therapeutic goals, build hope, or direct a client away from focusing on a problem or influences that support a problem.

One therapy that makes frequent use of future orientation is solution focused brief therapy. Therapists using this model routinely invite clients to envision a “preferred future,” a time in the future when the problem no longer exists. Exploring the preferred future helps the client envision a positive life outcome, and identify existing strengths and resources that might help them achieve that outcome (Iveson, 2002). Narrative therapy places similar focus on a preferred future helping clients re-author new and preferred stories for their lives and relationships, which frequently include a future element (Morgan, 2000).

Addictions counselling provides another example of the use of future-oriented conversations. For example, an addictions counsellor may ask a client struggling with alcohol addiction to imagine their life at some time in the future when they have conquered the addiction and live life sober. The counsellor’s reason for encouraging this dialogue might be to motivate the client to change current behaviours in pursuit of that improved lifestyle. Alternatively, the counsellor may ask the client to imagine their life in the future if they do not change their drinking habits. In this case, the counsellor may be hoping that the client’s negative view of a problematic future serves to motivate behavioural change in the present.

**Life and Career Planning in Schools**

Many schools offer life and career planning courses or activities. These typically help adolescents work on some of the basic developmental tasks required to transition to adulthood. One example is the Career and Personal Planning Course offered in schools in British Columbia, Canada (British Columbia Ministry of Education, 2008). The course offers several future-oriented activities. One activity has students predict possible significant events in their lives for
the next five years and make relevant plans. Students write self-instruction manuals entitled “How Do I Get to Where I Want to Go?” At the end of grades 11 and 12, they complete “Looking Back and Looking Ahead” self-assessments. As part of the process, students make adjustments to their plans and develop strategies necessary to reach their goals.
Chapter 4: Discussion

This study reviewed the literature to determine whether current research, psychological theory, and accepted psychotherapeutic practice supported use of future-oriented interventions for teen counselling. It found three foundational points supporting their use:

1. Teens face common developmental tasks and concerns that require future-oriented thought, yet they often lack future focus.
2. Future-oriented interventions can direct an individual’s conscious attention to future matters.
3. Future orientation is associated with wellbeing, though the mechanism is not well understood, and the relationship depends on factors such as temporal bias and temporal attitude.

The study’s central hypothesis that single-session, future-oriented interventions might have multiple, beneficial uses in teen counselling was confirmed. In particular, the study’s findings suggest that future-oriented interventions may be used to:

- shift focus from past negative memories or present unhappiness to future hopes or goals;
- reduce uncertainty or future anxiety through planning, goal-setting, or envisioning future events;
- stimulate productive dialogue in reluctant teens around common teen concerns related to specific developmental tasks;
- balance time perspective when working within the framework of time perspective theory;
- foster positive, future expectations in depressed or suicidal clients;
• enhance other therapeutic interventions such as those addressing addiction or risky behaviours.

These points are discussed in greater detail in the Clinical Implications section of this chapter.

Despite the multiple, potential benefits, and the common use of future-oriented activities in fields such as education and life coaching, few, specific future-oriented interventions have been the subject of study within the context of teen counselling. However, those that have been studied have yielded promising results. Lack of understanding of the mechanism between future orientation and wellbeing has hampered development of effective future-oriented interventions. Further research is needed to better understand the mechanism and guide the development of counselling interventions. Absent full understanding of the connection between future orientation and wellbeing, this studied relied on knowledge of factors consistently associated with future orientation to inform the evaluation and development of proposed interventions. Key factors included motivations, expectations, planning, hopes and fears, personal goals, and possible selves.

This study has highlighted seven interventions that may be appropriate for teen counselling. Each has its own strengths, weaknesses, unique characteristics, and potential uses, and no single intervention appears to be universally superior to the others. This chapter provides suggestions and considerations to help counsellors select an appropriate intervention, and administer the intervention effectively and responsibly.
Clinical Implications

This section offers guidance and suggestions for the use of future-oriented interventions in teen counselling. This includes when to use future-oriented interventions, which interventions to use, and how to use them effectively and responsibly.

When to Use Future-Oriented Interventions

Counsellors may find future-oriented interventions useful in a variety of situations, regardless of the counsellor’s theoretical approach. Here are some possible uses.

To change the client’s focus. Future-oriented interventions can help shift a client’s focus from past negative memories or present unhappiness to future hopes or goals. For example, exploring future possibilities might help a teen mired in at-home conflict come to view their current situation as temporary and changeable, and that things won’t always be this way. They might help an unmotivated, stuck, or lost teen heavily weighted to present activities and concerns discover a sense of purpose in life or optimism about future possibilities. They might help a teen dwelling on past disappointment or regret let go of some of those concerns and move toward new, future opportunities. These kind of shifts to a future time perspective may be particularly relevant in the context of future directed therapy.

To reduce uncertainty or future anxiety. Many teens express uncertainty about their future, or fear or anxiety about what the future may hold for them. Future-oriented interventions may help them develop a vision or framework for their future, clarify their goals, identify resources they have that can help them achieve those goals, and better understand and leverage the power or control they have to shape their future.

To stimulate conversation. Not all teens respond to traditional talk therapy, particular if they are reluctant participants in counselling. Some may lack insight, while others may simply
tire of a counsellor’s questions. Future-oriented interventions may help stimulate dialogue around a range of topics relevant to teens and their transition to adulthood. These interventions offer another way for counsellors to add variety to their practice. For example, a counsellor might suggest a future-oriented activity with a regular client as a different way to advance the dialogue or take it in a new direction. A solution-focused counsellor might use these activities as an alternative to the miracle question or a way to elicit a richer or more inspired description of the client’s preferred future. When working with an untalkative teen, the counsellor might suggest a future-oriented intervention as a structured activity intended to break the silence.

To balance time perspective. Within the theoretical framework of time perspective therapy, future-oriented interventions may be used to balance time perspective in clients who lack future focus, as revealed by their score on the Zimbardo Time Perspective Inventory or other measure of time perspective bias.

With depressed or suicidal clients. Depressed or suicidal clients typically struggle to identify future plans or express a realistic or hopeful view of the future. Future-oriented interventions may foster development of positive, future expectations in these clients.

In combination with other therapeutic techniques. For teens struggling with addiction or risky behaviours, future-oriented interventions might help expand a teen’s view of future goals and how current behaviours might be obstacles to achieving those goals (Johnson et al., 2014; Nurmi, 1991).

Selecting an Intervention

There are many ways to direct a client’s conscious thought to the future. The specific method a counsellor uses to encourage a future perspective depends on the client’s abilities, needs, treatment goals, and preferences, as well as the counsellor’s own therapeutic philosophy.
and approach. Chapter 3 presented seven different options, each with strengths, weaknesses, limitations, and unique characteristics.

As a general guideline, younger teens not yet facing the tasks associated with transition to adulthood may benefit from interventions focused on the near-term future that relate to ongoing or upcoming goals or concerns, perhaps up to one year. An example would be Next Year Possible Selves, though the counsellor could modify any intervention to direct the client’s conscious thought to any point in the future. Similarly, explorations of the transcendental future, life after death, and spirituality may not prove useful for young teens.

Teens in high school, or who have graduated or left school, may benefit from the How I’d Like My Life To Be intervention. This intervention focuses on life dimensions that reflect common concerns of mid- to late-stage adolescents, and encourages development of longer-term goals associated with happiness and life satisfaction in adulthood.

Teens struggling with addiction or other unhealthy behaviours might benefit from an exploration of feared possible selves and the development of plans to avoid the feared outcomes. Examples include the Possible Selves Mapping Interview or An Interview With Future Me.

**Suggestions for Using Future-Oriented Interventions**

Following are suggestions and considerations to help counsellors administer future-oriented interventions effectively and responsibly.

**Encourage a positive temporal attitude.** Positive thoughts about the future relate to wellbeing (Rush & Grouzet, 2012) while negative future thoughts can be detrimental (Zaleski, 1996). Therefore, when administering an intervention, consider the valence of the thoughts and ideas generated by the teen, and encourage a positive, hopeful view of the future.
Choose appropriate temporal distance. Depending on the therapeutic intent, the counsellor might direct the client to a specific future time period or, alternatively, let the client choose the time period according to their inclination. In selecting temporal distance consider the client’s needs, abilities, and developmental age. Near-term goals tend to be more specific and concrete while more distant goals tend to be more abstract (Trope & Liberman, 2003). With this in mind, the counsellor may wish to encourage SMART goals in the near term and specific plans to achieve them, while encouraging flexibility in more distant goals over which the teen has less control.

Watch for overemphasis on future goals. Overemphasis on future goals may reduce present happiness or have other negative effects. One example might be a student fixated on a career goal who spends five or six hours per night on homework at the expense of friendships or other aspects of a healthy, balanced lifestyle. Consider using structured tools such as the Zimbardo Time Perspective Inventory to identify time perspective bias.

Expand the dialogue. Use the interventions to encourage rich dialogue and self-exploration. The activities may provide an entry point to new topics of discussion. For example, the counsellor may use the conversations that result from these interventions to explore the teen’s value system or promote discussions about the teen’s cultural understandings and how they impact their life, or how their gender identity helps shape their vision of future possibilities, family, and lifestyle.

Explain the theory. Explain the reason for using the intervention, and what you hope to achieve through its use. Use the intervention as a psychoeducational tool to teach the teen how to recognize their own temporal tendencies and understand that they have the ability to direct their conscious thought to any temporal dimension as they choose. For example, if they find
themselves dwelling on a past negative event, they can consciously and immediately redirect their thoughts to present matters or future hopes.

**Revisit and revise.** Encourage the client to revisit future-oriented activities, evaluate and reward successes, and change plans and goals as they wish or as circumstances dictate. The client shouldn’t feel restricted by these activities or any documents generated from them, or locked-in to stated goals. Adolescence is a time of exploration and a teen’s goals may change frequently. The interventions should allow for change.

**Solicit feedback and measure effectiveness.** Ask clients to rate the intervention afterward (perhaps on a scale of one to ten) and give feedback. Their comments will help you understand the teens’ perceived value of the intervention, and point to ways you might improve or better administer it in future.

**Limitations of This Study**

This study focused on future-oriented interventions that could be completed within one, 50-minute, individual counselling session. It did not evaluate longer-term interventions such as life planning courses in schools that typically span multiple sessions. This study did not test the efficacy of any of the proposed interventions. Only two of the seven interventions described in Chapter 3 of this study have been part of previous research studies.

Following in the theoretical footsteps of positive psychology, this study views increasing client wellbeing as a worthwhile and beneficial counselling goal. Not all counsellors or psychotherapeutic approaches may place the same importance on the promotion of wellbeing. Furthermore, the mechanism of action between future orientation and wellbeing is not well understood.
The majority of the research that formed the basis for the suggestions and recommendations in this study comes from Western sources. For this reason, the interventions proposed in this study tend toward individualistic goals and a me-centered future view. The theoretical underpinnings of these interventions may not support their use in collectivist societies, and further study is required.

**Significance**

This study underscores the need for, and usefulness of, adolescent-specific therapeutic interventions that address common teen concerns related to their developmental stage. It provides specific activities or interventions that counsellors may consider using with teens, particularly those who are not engaged participants. It emphasizes the common thread underlying many of the struggles, challenges, and concerns facing adolescents, which may point to the possibility of common approaches to treatment and the widespread use of generalized adolescent interventions. It highlights the utility of time perspective theory as a means to conceptualize client problems or identify cognitive biases. It furthers the discussion of the importance or practicality of increasing wellbeing as a therapeutic goal regardless of the presenting problem. Finally, it introduces ideas, activities, and interventions from outside the traditional sphere of psychotherapy that may prove useful in counselling.

**Further Research**

This study highlights the use, benefits, and potential of future-oriented interventions in teen counselling. Counsellors are invited to consider possible application of these interventions in their practices based on their experience, preferences, judgment, and client needs. This study encourages further research into the application of specific future-oriented interventions for teen
counselling, such as those described in Chapter 3, to determine when and how they might be best applied for the benefit of teen clients.

**Conclusions**

Future-oriented interventions have a role in teen counselling, especially for counsellors who work from the theoretical standpoint of positive psychology, time perspective theory, or future directed therapy. The interventions have multiple, beneficial uses, and offer another therapeutic option for counsellors working with the sometimes challenging teen population. However, counsellors need a basic understanding of time perspective theory and the relationship between future orientation and wellbeing to use the interventions effectively and responsibly. As with any structured intervention, the effectiveness of future-oriented interventions depends on the counsellor’s skill and judgment in administering them to their teen clients and adapting the interventions to the client’s specific needs.
References


Appendix A: Next Year Possible Selves

Who will you be next year? Each of us has some image or picture of what we will be like and what we want to avoid being like in the future. Think about next year. Imagine what you will be like, and what you will be doing next year. In the lines below, write what you expect you will be like and what you expect to be doing next year.

In the space next to each expected goal, mark No if you are not currently working on that goal or doing something about that expectation and mark Yes if you are currently doing something to get to that expectation or goal.

For each expected goal that you marked Yes, use the space to the right to write what you are doing this year to attain that goal.

Use the first space for the first expected goal, the second space for the second expected goal and so on.

<table>
<thead>
<tr>
<th>Next year, I expect to be</th>
<th>Am I doing something to be that way?</th>
<th>If yes, what am I doing now to be that way next year?</th>
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In addition to expectations and expected goals, we all have images or pictures of what we do not want to be like; what we do not want to do or want to avoid being. First, think a minute about ways you would not like to be next year -- things you are concerned about or want to avoid being like. Write those concerns or selves to-be-avoided in the lines below.

In the space next to each concern or to-be-avoided self, mark No if you are not currently working on avoiding that concern or to-be-avoided self and mark Yes if you are currently doing something so this will not happen next year.

For each concern or to-be-avoided self that you marked Yes, use the space at the end of each line to write what you are doing this year to reduce the chances that this will describe you next year.

Use the first space for the first concern, the second space for the second concern and so on.

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<tr>
<th>Next year, I want to avoid being/doing</th>
<th>Am I doing something to avoid this?</th>
<th>If yes, what am I doing now to avoid being that way next year?</th>
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Appendix B: Possible Selves Mapping Interview

The Possible Selves Mapping Interview (PSMI) is divided into three sections: Introduction, Exercise, and Debriefing. The Introduction serves two purposes. Firstly, the concept of possible selves is explained, and participants are given examples relevant to this age group. Secondly, participants are encouraged to relax and let “their thoughts flow into the future.”

In the Exercise section, participants are asked to respond to the prompts, “think about what you hope to become” and “think about what you fear, dread, or don't want for yourself.” Hoped-for selves are written on green cards by the interviewer and feared selves on yellow cards. These cards are then used in a series of four activities, carried out for both hoped-for and feared selves. Following each activity, the information is recorded on the Possible Selves Map. A description of the four activities follows. (1) To ascertain the relative importance of hoped-for and feared selves, participants rank their hoped-for (and feared) selves and elaborate on these possible selves by answering a series of questions. The questions are designed to access the meaning of these selves to the participants, who are asked to group the cards in a way that makes sense to them and then to discuss the significance of the grouping with the interviewer. (2) To assess perceived self-efficacy, participants are asked, “How able do you think you are of achieving (or preventing) this possible self?” Respondents are then asked to select the possible self they feel most able to achieve, star the card and rate their capability on a 7-point Likert-type scale (1 = not at all capable; 7 = completely capable). (3) Outcome expectancy is appraised by the question, “How likely do you think it is that this possible self will happen?” Respondents are asked to put a check mark on the card and again rate the likelihood on a Likert-typescale. (4) To secure information about short- and long-term goal setting and likelihood of achievement,
participants are asked to reflect on the steps that they had taken this past month to bring about (or prevent) these possible selves.

In the Debriefing section participants are asked to summarize their Possible Selves Map “as if they were talking to someone who knew nothing about them.” In return, the interviewer then re-summarizes the participant's PSMI and checks for accuracy. The entire Interview takes between 20 and 30 minutes, depending on how many possible selves the adolescent generates.

Appendix C: Interview With Future Me

**Purpose.** To direct the client’s conscious attention to the future and begin to imagine what it might take to realize that future.

**Instructions to Therapist.** Ask your client to imagine themselves in a moment in the future. For example, you might ask a soon-to-graduate high school student to imagine herself one year from now, five years from now, or on her 20th or 30th birthday. Use the questions below to start a conversation with your client’s future self.

**Suggested Questions.**

Tell me about yourself.

Where are you and what are you doing?

Who are the most important people in your life?

What does it feel like being here (in the future)?

What is the best part of being here?

How did you get here?

What was the most difficult challenge in getting here?

How did you overcome that challenge?

What advice do you have for the “past you?”

Appendix D: Future Thinking Task

**Script for Counsellor.** I’d like to ask you to think about things that might happen to you in the future. I will give you 3 different time periods in the future, one at a time, and I’d like you to try to think of things that might happen to you in those time periods. Like before, I will give you a minute to try to think of as many things as you can. It doesn’t matter whether the things are trivial or important, just say what comes to mind. But, they should be things that you think will definitely happen or are at least quite likely to happen. If you can’t think of anything or if you can't think of many things, that’s fine, but just keep trying until the time limit is up.

First I’m going to ask you to think of positive things in the future. So, I’d like you to try to think of things that you are looking forward to, in other words, things that you will enjoy. So, I want you to give me as many things as you can that you’re looking forward to over the next week including today. Now, I’d like you to do the same but this time I want you to give me things that you’re looking forward to over the next week. Now, I’d like you to do the same but this time I want you to give me things that you’re looking forward to over the next five to ten years. Now, I’d like you to think of things that you’re worried about or not looking forward to, in other words, things that you would rather not be the case or rather not happen. So, I want you to give me as many things as you can that you’re worried about or not looking forward to over the next week including today. Now I want you to give me as many things as you can that you’re worried about or not looking forward to over the next year. Finally, I want you to give me as many things as you can that you’re worried about or not looking forward to over the next five to ten years.

Appendix E: Goals in Time

**Purpose.** To identify near- and medium-term goals and start to think about what it will take to achieve them. SMART goals are specific, measurable, attainable, relevant, and time bound.

**My goals.**

What do I want to accomplish next week?

Next month?

Next year?

In five years?

**How I Will Achieve My Goals.**

My strengths, skills, and resources that will help me achieve my goals.

Obstacles to reaching my goals.

Things I need to do to achieve my goals.

**Call to Action.**

What can I start doing tomorrow to work toward my goals?

Revisit your goals periodically. Reward success. Goals are flexible and you can change them whenever and however you wish.

Appendix F: The Who Will I Be? Test

Think of the person you want to become and what the evidence of your accomplishment might be once you have reached your goals. Spend time answering the questions thoughtfully as many times as you can.

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<th>I will be:</th>
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<td>I will be:</td>
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Go through your answers and identify five or so concrete goals that you hope to reach in the future.

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<tr>
<th>Concrete Future Goal</th>
<th>When Will the Goal Be Accomplished?</th>
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Once you’ve identified five concrete goals, arrange them in order from the one that you hope to reach soonest to the one that you hope to accomplish last. After you’ve indicated how long you think it will take to reach them, we want you to mentally rehearse reaching them.

Appendix G: How I’d Like My Life To Be

For each category, write 3 hopes or goals for how you would like your life to be in the future.

<table>
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<tr>
<th>Category</th>
<th>1.</th>
<th>2.</th>
<th>3.</th>
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<tbody>
<tr>
<td>Family and friends</td>
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<td>Love and intimate relationships</td>
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<td>School and education</td>
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<td>Work and career</td>
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<td>Home and lifestyle</td>
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<td>Health and appearance</td>
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<tr>
<td>Creativity and expression</td>
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<tr>
<td>Skills and personal development</td>
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<td>Community and society</td>
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<td>Fun and travel</td>
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<td>What else?</td>
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Now CIRCLE the three that are most important to you.

I will update my hopes and goals and reward myself for progress every ___ months.

Rate this exercise 1 to 10.