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The L.E.G.A.C.Y.® Appreciative Life Review Model: A Framework and Process to Develop Psychosocial Resources in Emerging and Young Adulthood

Nicole Onori Hansen
Nova Southeastern University

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**The L.E.G.A.C.Y.® Appreciative Life Review Model:
A Framework and Process to Develop Psychosocial Resources
in Emerging and Young Adulthood**

Nicole Onori Hansen

A Capstone Project

Submitted in partial fulfillment of the requirements for the
Post-Professional Doctor of Occupational Therapy (Dr.OT) Degree
at Nova Southeastern University

Dr. Pallavi Patel College of Health Care Sciences

Department of Occupational Therapy

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Abstract

This project introduces the L.E.G.A.C.Y. appreciative life review model (L.E.G.A.C.Y.) and provides preliminary evidence for its feasibility with emerging adults in a higher education context. L.E.G.A.C.Y. is the first model to integrate appreciative inquiry as well as a retrospective-prospective framework and experiential elements into the life review process. Increased rates of mental health disorders, underdeveloped psychosocial resources, and limited independent living skills have resulted in significant role impairments and poor adjustment to college. Conceptual development of the L.E.G.A.C.Y. model and the results of a quasi-experimental pilot study that investigated its effectiveness with a group of college students ($N = 17$) are presented. Attributional style, the search for and presence of meaning in life, and life satisfaction were measured before and after participation in a short-term L.E.G.A.C.Y. workshop. No statistically significant main effect, interaction effect, or effect of time was observed for any measure of attributional style or meaning in life. However, the main effect of the treatment on quality of life was statistically significant and achieved a moderate effect size. No interaction effect between treatment and time or main effect of time was observed on quality of life. The small sample size, limited intervention dosage, and reduced sensitivity of the measurement tools resulted in inconclusive findings. However, the L.E.G.A.C.Y. model is relevant, well-received by participants, shows promise as an intervention to facilitate the development of positive psychosocial resources in college students, and meets the feasibility guidelines for further study.

Keywords: adjustment, appreciative inquiry, college students, emerging adulthood, experiential, higher education, life review, meaning, mental health, narrative therapy, occupational narrative, occupational therapy, psychosocial, purpose, reminiscence

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The L.E.G.A.C.Y.® Appreciative Life Review Model: A Framework and Process to Develop Psychosocial Resources in Emerging and Young Adulthood

Chapter 1: Introduction

Students at all levels are currently challenged to meet the rapidly changing demands of 21st century education whether they have a mental health issue or not. The transition to postsecondary education and adult work life has recently received substantial attention, especially due to the prevalence of mental health conditions in emerging adults (ages 18-25) and the impact it has had on student retention and graduation rates. A large-scale, global study from the World Health Organization (Alonso et al., 2018) indicated that 20% to 42.9% of college students with any mental health disorder report significant role impairments. Moreover, approximately 75% of mental health conditions typically emerge before age 24 (Kessler et al., 2005). The National Alliance for Mental Illness (NAMI) estimated that 64% of students are not retained after their freshman year due to mental health issues (Gruttadaro & Crudo, 2012). Additionally, the National Center for Education Statistics (NCES) reported that at least 76% of postsecondary institutions have had matriculating students with a mental health condition (Raue & Lewis, 2011). Interestingly, institutional reports of disability by category indicated that 15% of all reported disabilities were psychological or psychiatric in nature (Raue & Lewis, 2011). Thus, student mental health is a critical factor for colleges and universities to consider when developing, designing, and delivering student support services for all students, including first year experience (FYE) and orientation programs for incoming freshmen. The aims of this project are to introduce the L.E.G.A.C.Y. appreciative life review model (L.E.G.A.C.Y.) and provide preliminary evidence for its feasibility with emerging adults in a higher education context.

Background

Student success at the collegiate level is traditionally measured via a student's grade point average (GPA) as well as institutional retention and graduation rates (McFarland et al., 2019). While academic success is paramount in postsecondary education, without a foundation of mental health and independent living skills, student success may be unachievable or unsustainable. Many emerging adults are struggling to adjust to the unstructured living and learning environments of college due to underdeveloped personal psychosocial resources (e.g., resilience and self-efficacy) and a lack of independent living skills. Ten percent of college students *without* a mental health disorder reported significant challenges with role impairments in the areas of home management, academic work, close relationships, and social life. Furthermore, rapidly increasing rates of depression, anxiety, and other mental health conditions in college students have exacerbated these role impairments, domestically and abroad (Alonso et al., 2018). The overall freshmen retention rate of first-time, full-time, degree-seeking undergraduate students at public and private institutions, which ranged from 62% (least selective colleges with open admissions) to 96% (most selective colleges with a less than 25% acceptance rate), demonstrates that students are unable to adjust to the demands of postsecondary education (McFarland et al., 2019). As a result, students now require more support services to achieve and sustain successful performance: personally, academically, and socially. Clearly, it is beyond the capacity of many young adults to adapt to and successfully perform within the unstructured and independent living and learning environments of higher education.

Although colleges and universities have allocated significant human and financial resources to support a positive transition to postsecondary education, the emphasis on academic success may be misdirected. Most institutions provide a robust constellation of support services,

such as student success coaches, wellness initiatives, disability resources, counseling, and FYE programs. However, many students are still unable to effectively manage the multiple role demands of emerging adulthood (i.e., student, worker, friend, volunteer, etc.). The collective challenges that students, faculty, and staff in higher education currently face is reflected in the high demand for university counseling services as well as declining retention and graduation rates. Nevertheless, only 10% to 15% of college students seek mental health services due to limited access or stigma, and estimates indicate that there is only one campus counselor for every 1,737 students (Melby, 2019; Roy, 2018; Thielking, 2017). Therefore, the transition to postsecondary education is not only difficult for young adults with mental health issues but tends to be challenging for a large percentage of traditional-aged (18-24 years) college students. Not only are students unprepared to be self-sufficient with activities of daily living and the management of multiple life roles, but institutions have been unable to identify the gaps in student services that would facilitate thriving academically, personally, and socially as well.

Since the inception of federally mandated disability support services in higher education during the early 1970s, the definition and scope of disability has expanded to include mental illnesses, such as anxiety, depression, and posttraumatic stress disorder (Keenan et al., 2019; Madaus, 2011). Occupational therapists have had a vital and longstanding presence in primary and secondary school settings, typically to provide interventions for students who are challenged with physical, developmental, cognitive, and/or psychosocial problems that impede learning (Orentlicher et al., 2017). However, the provision of occupational therapy services in higher education has been an emerging practice area that is currently gaining traction in the early 21st century (Keptner & McCarthy, 2020). In educational contexts, occupational therapists evaluate the supports and barriers that affect a student's capacity to successfully participate and perform

in learning (academic) and co-curricular activities. Occupational therapists also provide evidence-based interventions and resources to facilitate and support psychosocial adjustment, mental health, and healthy transitions (Brown et al., 2019). A growing number of occupational therapists have successfully advocated for, developed, and delivered occupational therapy services in higher education settings for students with mental health issues. These programs have provided students with a supportive bridge from traditional counseling and psychotherapy (talk therapies) to occupational participation and performance (doing) in meaningful and relevant contexts. Occupational therapy services in higher education have yielded not only an increase in students' capacity to apply and generalize newly learned psychosocial, emotional, academic, and life skills, but these programs have also improved retention rates, GPA, and graduation rates as well (Keptner et al., 2016; Keptner & McCarthy, 2020; Quinn et al., 2014; Spencer et al., 2018).

Recently, the global (COVID-19) pandemic has rapidly changed and transformed traditional undergraduate higher education from a residential, face-to-face learning experience to socially distanced digital learning communities (Crawford et al., 2020; Raaper & Brown, 2020). Virtual education (i.e., online learning) and student support services have enabled postsecondary institutions and college students to continue their education during the pandemic. However, the temporary dissolution of physical and social university environments has created and magnified challenges with teaching; learning; opportunities for experiential learning, service, and co-curricular engagement; and students' mental health (Raaper & Brown, 2020). Financially, a significant loss of residential revenue (room and board fees) as well as decreases in enrollment due to parental and student job losses has threatened the financial viability of many postsecondary institutions (Aucejo, 2020; Friga, 2020; Nicola et al., 2020). While many universities and students have successfully adapted to the required and rapid changes of the

global pandemic, the long-term impact and outcomes on learning, mental health, and career readiness are unknown.

Since the mid-1980s, the National Resource Center for the First Year Experience and Students in Transition (NRC-FYEST, n.d.-a.) at the University of South Carolina has served as the international leader in best practice and research for the postsecondary student transition. Their mission is “supporting and advancing efforts to improve student learning and transitions into and through higher education” (NRC-FYEST, n.d.-b, para. 1). According to the 2017 National Survey of First Year Experiences conducted by the NRC-FYEST, 73.5% of postsecondary institutions who responded to the survey ($N = 525$ or 13.5% response rate) offered at least one FYE program (Young, 2018b). Typically, FYE programs are an integrated constellation of academic and co-curricular services that are designed to support student success. Institutional priorities and objectives tend to strongly influence the curriculum and delivery of FYE programs at both public and private institutions. Regardless of institution type, the focus of most FYE programs is on academic advising, planning, and success strategies along with cultivating a connection to the university or college and providing information about campus services and resources. However, a significant gap in FYE curricula appears to be a paucity of programs that address students’ mental health, well-being, and personal development. Results from the 2017 National Survey of First Year Experiences indicated that personal development and health and wellness were less frequently reported institutional objectives (49.2% and 40.6%, respectively). Furthermore, personal development and health and wellness curricula were not included in the top 22 most common FYE programs or initiatives (Young, 2018a, 2018b). Similarly, the What Works Clearinghouse (2016) used three broad outcome domains (credit accumulation, degree attainment, and general academic achievement) to systematically review

the evidence for the effectiveness and success of FYE programs. Again, the outcomes of FYE programs on students' psychosocial adjustment to college as well as the relationship between psychosocial adjustment and academic success, retention, persistence, and degree attainment was not an outcome domain included in the review protocol.

Problem Statement and Identified Need

Increased rates of mental health disorders, underdeveloped psychosocial resources, and limited independent living skills in emerging adults have resulted in a poor adjustment to the unstructured living and learning environments of college for many students (Alonso et al., 2018; Gruttadaro & Crudo, 2012; Wyatt et al., 2017). Due to these factors, postsecondary institutions have experienced decreases in retention and graduation rates (Gruttadaro & Crudo, 2012; Kognito, 2017; Wyatt et al., 2017). Moreover, existing student support services tend to focus on academic success strategies rather than students' mental health, well-being, and personal development. I have developed the L.E.G.A.C.Y. appreciative life review model to facilitate the development of psychosocial resources, healthy adaptive responses, and successful occupational performance with individuals of all ages across life roles and contexts. Although a limited number of college students have participated in life review and reminiscence programs (other than as part of a research study), life review has not been widely used preventively or as a psychosocial intervention with this population. The L.E.G.A.C.Y. appreciative life review model presents colleges and universities with a strengths-based framework and process to support and sustain a positive transition to higher education by facilitating the mental health, well-being, and personal development of students from enrollment to graduation. Developing and strengthening positive psychosocial resources as well as providing mental health support has become more critical and germane during the aftermath of the COVID-19 pandemic.

The L.E.G.A.C.Y.® Appreciative Life Review Model

I created the interdisciplinary L.E.G.A.C.Y. appreciative life review model by synthesizing multiple theories, models, and approaches from my broad scope of education, training, and experience in psychology, occupational therapy, counselor education, health and wellness coaching, and career development (Onori Hansen, 2016, 2017). Lifespan development (Erikson, 1950, 1968, 1982), the traditional life review (Butler, 1963), appreciative inquiry (Cooperrider, 1986), narrative therapy (White & Epston, 1990), and the person-environment-occupation-performance model from occupational therapy (Bass et al., 2017; Baum & Christiansen, 2005; Baum et al., 2015; Christiansen & Baum, 1991, 1997; Christiansen et al., 2015) provide the theoretical foundations for the L.E.G.A.C.Y. appreciative life review model. The appreciative life review is defined as “an intentional process that facilitates remembering positive and negative experiences, in context, to create appreciative and meaning-focused narratives that facilitate well-being and adaptive responses” (Onori Hansen, 2017, Slide 42). The term, L.E.G.A.C.Y., is a trademarked acronym for Life, Experiences, Gifts, Aspirations, Contributions, Younger Generations, which are the six core content areas of the appreciative life review.

Significance

The negative impact and outcomes resulting from mental health issues, underdeveloped psychosocial resources, and limited independent living skills in emerging adults may contribute to a plethora of problems, including (a) impoverished learning, (b) underdeveloped potential, (c) altered career trajectories, (d) poor quality of life (QOL), (e) decreased postsecondary retention and graduation rates, (f) decreased socioeconomic status due to lower lifetime earnings, (g) the decreased financial viability of colleges and universities, and (h) workforce shortages in the

global knowledge economy (Alonso et al., 2018; Gruttadaro & Crudo, 2012; Johnson, 2012; McFarland et al., 2019; U.S. Department of Education, 2015; Whistle, 2019; Winzer et al., 2018).

Aims and Objectives of the Project

The overarching purpose of this project was to introduce the L.E.G.A.C.Y. appreciative life review model and present preliminary evidence for its feasibility with emerging adults in a higher education context. The specific objectives of the project were the following:

- Present, discuss, and synthesize the underlying theoretical foundations of the L.E.G.A.C.Y. appreciative life review model.
- Map the conceptual development of the L.E.G.A.C.Y. appreciative life review model.
- Present the findings of a quasi-experimental pilot study conducted on the L.E.G.A.C.Y. appreciative life review model with a small cohort of college students.
- Present recommendations for the multidisciplinary application and practice of the L.E.G.A.C.Y. appreciative life review model.

A literature review of the L.E.G.A.C.Y. model's foundational theories, evidence for the use of life review and reminiscence with emerging and young adults, and conceptual development of the L.E.G.A.C.Y. model is presented. Additionally, the methodology and results of a quasi-experimental pilot study that examined the effect of the L.E.G.A.C.Y. model on the attributional style, life satisfaction, and the search for and presence of meaning in life of college students is reported and discussed. Recommendations, applications, and implications for practice of the L.E.G.A.C.Y. model are proposed. Finally, the limitations and challenges of life review and reminiscence interventions are considered.

Chapter 2: Literature Review

Theoretical Foundations of the L.E.G.A.C.Y.[®] Appreciative Life Review Model

Emerging adults have not adequately developed the psychosocial resources and independent living skills necessary to adjust to the ordinary demands of adult life and challenges of postsecondary education (Alonso et al., 2018; Gruttadaro & Crudo, 2012). Moreover, emergent and existing mental health issues as well as unstructured living and learning environments have become barriers to flourishing and success across life roles and contexts in this population (Gruttadaro & Crudo, 2012; Kognito, 2017; Keenan, 2019). Postsecondary institutions are struggling to effectively address these issues, despite a plethora of student services. The premise of the L.E.G.A.C.Y. appreciative life review is that individuals from late adolescence through late adulthood reflect upon and review their lives to seek understanding and meaning about their personal and family narratives as well as resolve psychosocial issues, navigate life transitions, make amends, live more intentionally, and improve overall mental health and well-being (Ando, 2003; Arkoff et al., 2006; Bohlmeijer et al., 2007; Butler, 1963; Chippendale & Bear-Lehman, 2012; Cox, 2015; Haber, 2006; Haight & Haight, 2007; Hallford & Mellor, 2016a, 2016b, 2016c; Hallford et al., 2013; McAdams, 1985, 1993, 1996, 2001b, 2011, 2013; McAdams et al., 2006; McAdams & Guo, 2014; Piquart & Forstmeier, 2012; Robins & Wilner, 2001; Robinson, 2015; Webster, 1994; Webster & Gould, 2007; Westerhof & Bohlmeier, 2014; Whitbourne et al., 2009; Zuidervae, 2016). The purpose of the retrospective-prospective L.E.G.A.C.Y. appreciative life review is to facilitate the creation of appreciative and meaning-focused occupational narratives (Goldstein et al., 2004; Melton et al., 2017). Occupational narratives are defined by Onori Hansen (2017) as “individual and collective stories of being, doing, becoming, and belonging” (Slide 6; see also Wilcock & Hocking, 2015). Onori

Hansen (2017) theorizes that appreciative and meaning-focused occupational narratives stimulate the development of purpose as well as support occupational participation and performance, healthy patterns of living, and life satisfaction. Moreover, appreciative and meaning-focused occupational narratives encourage the development of identity (Christiansen, 1999; McAdams, 1985, 1993, 1996, 2001b, 2008, 2011), redemption sequences (McAdams et al., 1997, 2001, 2006), positive psychosocial resources, and healthy adaptive responses (Ando, 2003; Arkoff et al., 2006; Cox, 2015; Hallford & Mellor, 2016a, 2016b, 2016c; Hallford et al., 2013; Onori Hansen, 2017; Pinguart & Forstmeier, 2012). Redemption sequences are narratives or stories in which bad events or experiences (e.g., loss or failure) are interpreted as having good or positive outcomes, such as personal insight, constructive behavior change, goal achievement, and/or making relational amends (McAdams et al., 1997, 2001b, 2006). The primary goal of the L.E.G.A.C.Y. appreciative life review is to develop the psychosocial resources essential for mental health and overall well-being, healthy patterns of living (habits and routines), positive transitions, and successful participation and performance in all life roles.

As an occupation-centered model (Fisher, 2014) supported by interdisciplinary theories, the L.E.G.A.C.Y. framework and process is an integration and application of narrative psychotherapeutic approaches, appreciative inquiry (Cooperrider, 1986), and *doing*, which may be implemented to facilitate healthy adaptive responses (adjustment and coping), the development of positive psychosocial resources, and successful occupational performance. Appreciative inquiry (Cooperrider, 1986) uses an asset-focused paradigm to identify and amplify strengths, possibility thinking, and *what is working well* rather than traditional problem-solving approaches that are focused on identifying and fixing weaknesses and deficits. An appreciative approach to life review is vital for facilitating adaptive responses, redemption sequences, positive

reframing, meaning making, forgiveness, acceptance, and personal growth.

Preliminary evidence supports the concept that shifting the temporal context of reminiscence and life review interventions to younger ages is an effective intervention to facilitate identity development, adaptive problem-solving, the development of positive psychological resources (e.g., self-esteem, self-efficacy, self-acceptance, and environmental mastery), and ongoing opportunities for life course corrections (Ando, 2003; Arkoff et al., 2006; Cox, 2015; Hallford & Mellor, 2016a, 2016b, 2016c; Hallford et al., 2013; Onori Hansen, 2017). Furthermore, there is evidence that life review can improve the mental health and well-being of individuals across the lifespan (Bohlmeijer et al., 2007; Chippendale & Bear-Lehman, 2012; Hallford & Mellor, 2016a, 2016b, 2016c; Hallford et al., 2013; Pinguart & Forstmeier, 2012; Westerhof & Bohlmeier, 2014; Zuiderveld, 2016). The theoretical foundations that support the L.E.G.A.C.Y. appreciative life review model, including adult development (Erikson, 1950, 1968, 1982), the traditional life review (Butler, 1963), appreciative inquiry (Cooperrider, 1986), social constructivism and narrative therapy (White & Epston, 1990), and the person-environment-occupation-performance model from occupational therapy (Bass et al., 2017; Baum & Christiansen, 2005; Baum et al., 2015; Christiansen & Baum, 1991, 1997; Christiansen et al., 2015), are presented. The development of resilience, psychosocial resources, and meaning in life during emerging adulthood is also discussed.

Adult Development and Emerging Adulthood

Erikson's (1950) seminal theory of psychosocial development established a lifespan approach in the field of human development that continues to be a foundation for subsequent studies and comparative theories of adult development (Arnett, 2000; Bronfenbrenner & Morris, 2006; Hudson, 2001; Lachman, 2001; Levinson, 1978; Piaget, 1970; Sheehy, 1976). In his model

of psychosocial development, Erikson (1950, 1968, 1982) outlined eight stages of human development from birth through death in which individuals experience a series of normative developmental challenges or crises. According to Erikson's theory, mastery of these normative developmental challenges during each stage results in not only growth and maturation but prepares an individual to achieve the developmental milestones of later stages as well.

Alternatively, failure to achieve the expected psychosocial milestones on time (i.e., during the age-appropriate developmental stage) may cause negative outcomes. Delays or difficulties developing competence with normal developmental challenges may negatively affect an individual's short-term and long-term capacity to master current and future developmental milestones, respectively.

Fifty years after Erikson (1950, 1968, 1982) introduced the model of psychosocial development, Arnett (2000) proposed and presented evidence for emerging adulthood (ages 18-25), a new developmental stage situated between adolescence and young adulthood. Emerging adulthood is an outgrowth of the substantial societal shifts and changes in social norms that have altered the normal developmental trajectories of individuals in their third decade of life. However, emerging adulthood is culturally constructed rather than universal and is restricted to industrialized or postindustrial societies that permit an extended period of role exploration (Arnett, 2000; Robinson, 2015). Primary factors contributing to a significantly altered developmental trajectory for emerging adults include (a) extended periods of postsecondary education, (b) delays in marriage and childbearing, (c) increases in the human lifespan, (d) an uncertain 21st-century world, and (e) protracted interdependence with parents due to economic challenges.

Emerging adulthood is a distinct developmental stage that is characterized by five

features: identity exploration in work, relationships, and worldview; instability; self-focus; feeling in-between (neither an adolescent nor adult); and a sense of possibilities. During this period of semi-autonomy (Goldscheider & Davanzo, 1986), emerging adults are not bound by enduring role constraints, responsibilities, and commitments. Frequent changes and instability are dominant in this developmental stage as individuals explore possible life directions before committing to enduring choices in their late twenties. Maladaptive responses during emerging adulthood may result in the quarter-life crisis (Robbins & Wilner, 2001) when mental health issues (Robinson, 2015) as well as feelings of doubt, indecisiveness, and helplessness are impeding mastery of the transition to adulthood. Surprisingly, emerging adults reported that responsibility for oneself, making independent decisions, and becoming financially independent as the three subjective indicators of full adulthood, *not* the traditional milestones associated with adulthood: graduation, launching one's career, or marriage (Arnett, 2000; Arnett & Schwab, 2012).

Resilience and Psychosocial Resources in Emerging Adults

Researchers from higher education, psychology, and the allied health professions have reported the results of studies used to examine the developmental trajectories, risk and protective factors, psychosocial functioning, and mental health issues of emerging adults, especially as they affect the adjustment to college (Alonso et al., 2018; Arnett, 2000; Arnett & Schwab, 2012; Coiro et al., 2017; Eells, 2017; Griggs, 2017; Gruttadaro & Crudo, 2012; Kahn, 2016; Kahn et al., 2019; Karris Bachik et al., 2020; Keptner & McCarthy, 2020; McAdams & Guo, 2014; Pascarella & Terenzini, 2005; Robinson, 2015; Roy, 2018; Schutte & Malouff, 2002; Trevisan et al., 2017; Wyatt et al., 2017). In an editorial for the *Journal of College Student Psychotherapy*, Rosenbaum and Weatherford (2017) discussed and challenged the cultural assumptions that 21st

century college students are less resilient. Rosenbaum and Weatherford (2017) acknowledged that the millennial generation has been bombarded by high expectations from a young age and has fewer psychosocial resources to cope with academic, family, cultural, and social demands. While the stigma surrounding mental health issues still exists, Rosenbaum and Weatherford (2017) suggested that it has lessened during the 21st century as students are readily encouraged to seek help and more openly express their challenges with peers, families, and professionals. Rosenbaum and Weatherford (2017) also speculated that such help-seeking behaviors and openness may be misinterpreted as less resilience and observed that mental health stigma might have caused students to mask similar challenges in the mid- to late-20th century. Furthermore, the financial, political, and global instability that students are currently experiencing, such as the 2008 recession, extreme polarization of political parties in the United States, and the COVID-19 pandemic (St. Amour, 2020; Deloitte, 2019; Van Dam, 2020), have created a generational burden that exceeds the social justice challenges of the 1960s, 1970s, and 1980s.

The American Psychological Association (as cited in Eells, 2017) defines resilience as the following:

The process of adapting well in the face of adversity, trauma, tragedy, threats or significant sources of stress—such as family and relationship problems, serious health problems or workplace and financial stressors. It means “bouncing back” from difficult experiences. Research has shown that resilience is ordinary, not extraordinary. People commonly demonstrate resilience. (p. 78)

Svetina (2014) demonstrated that the achievement of normative psychosocial milestones (Erikson, 1950, 1968, 1982) or positively adapting to ordinary, expected, and challenging life events is related to the development of resilience. Svetina’s research (2014) has yielded

empirical evidence for the value of preventively building resilience through normal and expected developmental processes rather than solely in response to adverse events. In addition to resilience, Kahn (2016) and Kahn et al. (2019) also identified academic self-sufficiency and optimism as protective factors that significantly improve the adjustment of first-year college students. Whereas, the primary risk factors negatively affecting first-year college adjustment were the use of psychiatric medication and insecure attachment styles (fearful-avoidant and anxious-preoccupied) that impede healthy separation-individuation from parents and family. Interestingly, Kahn (2016) and Kahn et al. (2019) discovered that the significance of these risk factors lessened after adjusting for protective factors. Thus, strengthening protective factors may compensate for existing vulnerabilities that contribute to maladjustment.

Common approaches used to improve student adjustment, resilience, stress management, coping skills, and mental health are cognitive-based skill building programs and coping skills groups designed to facilitate resilience via problem-solving, expressive writing, mindfulness, and cognitive reappraisal interventions (Bettis et al., 2017; Coiro et al., 2017; Shatkin et al., 2016). These programs have demonstrated positive and mixed short-term results, but the long-term outcomes have not been adequately studied. Nevertheless, innovative approaches have introduced promising alternatives to cultivate the protective factors, psychosocial resources, and positive mental health of emerging adults. Occupation-based interventions that bridge psychoeducation and performance (doing; Keptner, 2017; Keptner et al., 2016; Keptner & McCarthy, 2020; Quinn et al., 2014; Spencer et al., 2018), web-based programs depicting restorative narratives of students overcoming adversity to vicariously develop self-efficacy (Ray et al., 2019), hope-based interventions (Griggs, 2017) and the SAVES (social connection, attitude, values, emotional acceptance, and silliness/humor) resiliency model (Eells, 2017) are

new approaches being implemented to facilitate positive mental health in college students.

According to Truskauskaite-Kuneviciene et al. (2020), positive mental health (i.e., high levels of emotional and mental well-being) is a significant protective factor against the development of adjustment disorder symptoms in emerging adults who are exposed to life stressors. However, exposure to increased life stressors may decrease positive mental health. Karris Bachik et al. (2020) researched the association between the 24 values in action (VIA) character strengths (Peterson & Seligman, 2004), the well-being (e.g., life satisfaction, subjective happiness, resilience, and positive affect), and academic success of a large sample of college students. The results indicated that life satisfaction was significantly related to the character strengths (in rank order) of zest/enthusiasm, hope/optimism, gratitude, and love/intimacy and was negatively correlated with spirituality. Similarly, subjective happiness was predicted by the character strengths (in rank order) of zest/enthusiasm, hope/optimism, curiosity/interest, and humor/playfulness and was negatively correlated with industry/perseverance. Interestingly, resilience was significantly and positively related to only one character strength: curiosity/interest. Karris Bachik et al. (2020) found that curiosity and the 24 character strengths as a whole (set) were more strongly related to resilience than any other variables. Moreover, the character strengths as a set as well as curiosity and love of learning were the two specific character strengths that most contributed to academic achievement. Because love of learning was one of the character strengths least associated with life satisfaction, Karris Bachik et al. (2020) proposed that academic institutions consider facilitating curiosity versus a love of learning. While mechanisms of the causal relationship between curiosity and resilience cannot be determined from Karris Bachik et al. (2020), the evidence was found to support Duckworth (2016) that grit, the combination of extraordinary resilience, determination, and direction (i.e.,

passion and perseverance), is critical in the pursuit and achievement of superordinate goals. More importantly, grit is mutable and can be developed.

As previously discussed, the focus of most FYE programs is on teaching students the skills and strategies needed for academic success rather than on facilitating the development of psychosocial resources and character strengths that are essential for mental health, well-being, and thriving in all life roles, especially during times of transition and adversity. However, Pascarella and Terenzini (2005), Schutte and Malouff (2002, 2019), and Wyatt et al. (2017) emphasized the importance of developing students' competencies with non-academic or non-cognitive skills during FYE programs to facilitate healthy adaptive responses, mental health, and academic success. While academic success, retention, and graduation are paramount in higher education, without a foundation of psychosocial (non-academic) resources, such as resilience, grit, social support, emotional regulation, and self-efficacy, these outcomes may be unachievable.

Meaning in Life

Meaning *in* life is defined as “the sense made of, and significance felt regarding, the nature of one’s being and existence” (Steger et al., 2006, p. 81). While meaning in life is subjective, the presence of meaning in life has been correlated with psychological health, overall well-being, and life satisfaction (Cox, 2015; Eakman, 2015; Hooker et al., 2019; Ikiugu, 2019; Lund et al., 2019; Steger, 2012; Steger et al., 2006, 2013; Trevisan, 2017), whereas the meaning *of* life is a philosophical concept that attempts to explain the universal reason(s) for human existence (Martela & Steger, 2016). Frankl (1959/2006) introduced the idea that the meaning of life is an individual rather than universal construct. In *Man’s Search for Meaning*, Frankl (1959/2006) asserted that every individual has a unique and specific *will to meaning* or the

longing to find meaning in their life. According to Frankl (1959/2006), that which matters is that every person strives to discover, understand, and satisfy their distinct will to meaning rather than seeking a universal meaning of life. In fact, Frankl has been credited with identifying the fundamental and significant distinction between a universal and individually constructed meaning of life. The individually constructed meaning of life that Frankl described is the meaning *in* life construct currently studied by psychologists (Martela & Steger, 2016; Steger et al., 2006, 2013). Frankl's innovative thinking transformed the study of meaning from a philosophical endeavor to a psychological science by delineating the fundamental distinction between a universal and individually constructed meaning of life. Furthermore, Frankl (1959/2006, 1963) translated existential philosophical concepts into logotherapy, a branch of psychotherapy that uses meaning-centered interventions and continues to be the foundation of contemporary meaning research and meaning-centered therapeutic approaches (Yalom, 1980; Weixel-Dixon, 2020).

While meaning and purpose are interrelated, ambiguous definitions of these constructs have confounded research. McKnight and Kashdan (2009) defined purpose as “a central, self-organizing life aim that organizes and stimulates goals, manages behaviors, and provides a sense of meaning” (p. 242). Furthermore, McKnight and Kashdan proposed that purpose has three dimensions, strength, scope, and awareness, which exist on a three-dimensional continuum. *Scope* refers to the breadth or extent that a goal is ubiquitous in a person's life. *Strength* indicates the tendency for purpose to influence thoughts, emotions, and behaviors. *Awareness* is the extent to which a person can verbalize their purpose. Comparatively, the following dimensions of meaning have been described in the literature: (a) the search for meaning and presence of meaning (Steger et al., 2006), (b) comprehension and purpose (Steger, 2012), and (c) purpose,

significance, and coherence (Edwards & Van Tongeren, 2019; Martela & Steger, 2016).

Interestingly, McKnight and Kashdan (2009) stated that “Meaning does not always drive purpose; rather, meaning probably drives the development of purpose. Once a purpose becomes developed, purpose drives meaning. In short, purpose and meaning have a temporal, bidirectional relationship” (p. 243). Perhaps more germane than identifying the sources of meaning is identifying which facets of the human experience tend to be inherently meaningful and contribute to meaning making.

The sources of meaning, the concept of meaning making, and how human beings derive meaning in life has been studied extensively. Frankl (1959/2006) asserted that there are three ways for individuals to discover meaning in their lives under any circumstances, “by creating a work or doing a deed; by experiencing something or encountering someone [e.g., goodness, truth, beauty, or loving another human being]; and by the attitude we take toward unavoidable suffering” (p. 111). Contemporary meaning-in-life researchers have supported and further explicated Frankl’s original theory, which continues to be a foundation for current research. While meaning making is a subjective appraisal of doing, being, becoming, and belonging experiences (Wilcock & Hocking, 2015), psychologists, occupational therapists, and occupational scientists have identified which dimensions of an experience or event contribute to its meaningfulness (Eakman, 2015; Eakman & Eklund, 2011; Ikiugu, 2019; Lund et al., 2019; Martela & Steger, 2016; Rowles, 2008). Eakman (2015) and Eakman and Eklund (2011) identified three primary sources of meaning: pleasure and enjoyment, competence and goal achievement, and social connectedness. Multiple researchers have supported these broad sources of meaning, including Ryan and Deci (2000, 2001) who stated that meaning is derived from pleasure and enjoyment, purposeful behavior, and the fulfillment of basic human needs

(autonomy, competence, and relatedness). Moreover, Lund et al. (2019) demonstrated that joining with others, a sense of belonging, and revaluing self (self-worth) contributes to meaning making. Ikiugu (2019) established that meaning is derived from physically and mentally stimulating experiences as well as connections with people. Similarly, Fidler and Fidler (1983) and Rogers (1983) stated that competence and mastery, valued goals, interests, self-efficacy, control, and creativity are fundamental for meaning making. Finally, Rowles (2008) expanded and updated Frankl's (1959/2006) taxonomy of meaning. He stated that humans experience meaning by exercising autonomy, achieving self-worth through occupational participation, experiencing satisfying relationships, and understanding and accepting our place in the universe while also appreciating the beauty and mystery of life. Thus, Eakman (2015) and Eakman and Eklund's (2011) taxonomy of meaning has adequately articulated and summarized the sources of meaning.

Perhaps more significant is the evidence that demonstrates the presence of meaning is positively correlated with mental health, life satisfaction, and well-being (Cox, 2015; Eakman, 2015; Hooker et al., 2019; Ikiugu, 2019; Lund et al., 2019; Steger, 2012; Steger et al., 2006, 2013; Trevisan, 2017). Steger et al. (2009) investigated the impact of the search for and presence of meaning in life in emerging adulthood, young adulthood, middle adulthood, and older adulthood. Individuals in early life stages reported higher levels of searching for meaning while adults in the later stages of life reported a higher presence of meaning. Interestingly, the presence of meaning is positively correlated with well-being across the lifespan and searching for meaning is related to increased psychological distress and decreased well-being during later stages of life. Similarly, Trevisan et al. (2017) investigated the relationships between the presence of meaning and the search for meaning in life and the interaction that these variables had on college

adjustment. The results indicated that the presence of meaning in life is positively correlated and the search for meaning in life is negatively correlated with college adjustment. However, the active search for meaning in this population moderated the relationship between the presence of meaning and adjustment. More specifically, students with a high presence of meaning who were also actively searching for meaning were less likely to experience decreases in well-being. However, students who concurrently experienced a high search for meaning and a low presence of meaning were more likely to experience reduced well-being.

Most college students are at a meaning-making crossroads (Korgan & Durdella, 2016) and have a transitional meaning-making style that reflects conflicts or incongruencies between their internal self-perceptions and beliefs and the messages they receive from external influences (i.e., family, peers, and instructors; Baxter Magolda, 1999, 2001, 2020). During the transitional meaning-making stage, cognitive filtering is still permeable and an individual's core identity and capacity for resilience is susceptible to the instability of external influences. In fact, unstable sources of daily meaning are related to lower levels of positive affect, relationship satisfaction, social connectedness, and global life satisfaction. Additionally, people with unstable meaning have average well-being as well as higher global levels of depression and negative affect (Steger & Kashdan, 2013). Edwards and Van Tongeren (2019) demonstrated that meaning mediates the relationship between suffering and well-being; however, current suffering is associated with decreases in meaning, well-being, and mental health. Evidently, the presence of meaning in life is a foundation of well-being, life satisfaction, and mental health across the life span.

Life Review and Reminiscence

Butler (1963), a geropsychiatrist, transformed the conventional perspectives of aging from a process of physical and mental decline to a time of harvest and celebration with

opportunities for constructive growth and positive outcomes. He created this paradigm shift by introducing the concept that life review and reminiscence are universal, normal, and potentially healthy developmental processes of late adulthood. Butler (1963) defined life review as “a naturally occurring, universal mental process characterized by the progressive return to consciousness of past experiences, and, particularly, the resurgence of unresolved conflicts; simultaneously, and normally, these revived experiences and conflicts can be surveyed and reintegrated” (p. 66). Comparatively, “reminiscence is the act or process of recalling the past” (Butler, 1963, p. 66). Haber (2006) and Haight and Haight (2007) uphold Butler’s (1963) original distinctions between reminiscence and life review. Reminiscence, as defined by Haber (2006) is “the recall of memories . . . usually characterized as simple daydreaming, storytelling, or nostalgia by oneself or with others” (p. 154). Furthermore, Haber noted that reminiscence is likely a universal human experience that begins in childhood. Haight and Haight (2007) asserted that life review is a form of reminiscing. However, the uniquely defining characteristics of life review that distinguish it from reminiscence include (a) a systematic and structured lifespan approach, (b) a duration of approximately 6 to 8 weeks (c) individual (rather than group) sessions with a therapeutic listener, and (d) an evaluation process (Haight & Haight, 2007). It is worthy to note that life review and life review therapy are distinct interventions. Life review interventions are focused on the *systematic review and evaluation* of positive and negative memories across the lifespan. More specifically, the purpose of the life review is to facilitate adjustment during transitions or adversity, enhance positive psychological health, and discern purpose and meaning in life. Whereas, the objective of life review therapy is to alleviate serious mental health conditions (e.g., depression and anxiety) by altering negative patterns of remembering that tend to evoke and sustain bitterness revival, disappointment, and obsessive rumination (Westerhof &

Bohlmeijer, 2014; Westerhof et al., 2010). The distinguishing features of reminiscence and life review are compared and contrasted in Table 1.

While Haber (2006) and Haight and Haight (2007) agree with Butler's seminal concept that life review is distinguished from reminiscence by its evaluative process, the terms have been used interchangeably across multiple health and social science disciplines. Additionally, other terms used to describe similar therapeutic processes, such as guided autobiography, autobiographical memory, and life story work, continue to muddy both research and practice. Perhaps most confusing is that the evaluative process has been integrated into reminiscence research and practice. Although Wong and Watt (1991) published a taxonomy of reminiscence that outlined six functions of reminiscence (transmissive, narrative, instrumental, integrative, obsessive, and escapist), the Reminiscence Functions Scale (RFS) has become the predominant taxonomy and assessment in the field (Webster, 1993, 1997). The RFS categorizes and measures the following eight domains of reminiscence: (a) death preparation, (b) identity, (c) problem-solving, (d) teaching and informing, (e) conversation, (f) boredom reduction, (g) bitterness revival, and (h) intimacy maintenance. Alternatively, Westerhof and Bohlmeijer (2014) outlined three overarching functions of reminiscence: social, instrumental, and integrative that also provide a simple yet broad reminiscence taxonomy. The *social functions* of reminiscence are building relationships through shared conversation and teaching and informing others. The *instrumental function* of reminiscence is to remember and use positive coping strategies from the past to adapt to current circumstances or problems. The *integrative function* of reminiscence is similar to Butler's (1963) life review because remembering and reflection are used for identity continuity and constructing a coherent narrative identity. Therefore, integrative reminiscence may be considered evaluative because the process is used to reexamine memories, resolve

conflicts, accept and make meaning of negative life experiences, and facilitate healthy adaptive responses by reintegrating new perspectives into one's life story.

Table 1

Comparison of Reminiscence and Life Review

	Qualities and Characteristics of Reminiscence	Qualities and Characteristics of Life Review
Butler (1963)	Spontaneous or intentional Selective or unselective Non-purposeful–pleasurable and/or pejorative Purposeful (with intent of escapism) Valued and affirmed or devalued	Normal and universal Process Volitional and conscious process Purposeful–pleasurable and/or pejorative Triggered by realization of one's mortality Therapeutic Includes unresolved conflicts and difficult memories
Haber (2006)	Simple and spontaneous Passive process Detailed and descriptive memories Alone or shared (dyads, triads, or groups)	Structured and systematic process Intentional and voluntary Purposeful–Education-focused Purposeful–Therapeutic-focused Focused on one or more life themes Lifespan perspective (birth–death) Evaluative and meaning-focused Coming to terms and acceptance

Continued

	Qualities and Characteristics of Reminiscence	Qualities and Characteristics of Life Review
Haight & Haight (2007)	Volitional or non-volitional Natural form of human activity Non-evaluative Non-purposeful Fun and enjoyable Personal and engaged (self-focused) or disengaged and impersonal (event-focused)	Structured and systematic process Individual (with therapeutic listener) Purposeful and goal-directed Cathartic and therapeutic (i.e., forgiveness, reconciliation, increase self-esteem, reconnection, and life satisfaction) Reframing & reintegration Acceptance

Butler's (1963) theory that the life review is a normal and universal process of late adulthood has supported Erikson's (1950, 1968, 1982) theory that the primary psychosocial task of late adulthood is achieving ego integrity. [Ego] integrity is defined as "The acceptance of one's one and only life cycle as something that had to be and that by necessity permitted no substitutions" (Erikson, 2001, p. 356). Simply stated, ego integrity is the belief and acceptance that one's life was well-lived, meaningful, and significant. Fleming (2020) suggested that ego integrity is a sense of fulfillment within the context of an imperfect life. Ego integrity is achieved by overcoming the feelings of despair commonly experienced in late adulthood due to regrets (actions or omissions), unfinished business, fears about death, and contemplating the significance of one's life. When conducted within the context of a helping relationship (Butler, 1963; Haight & Haight, 2007), life review and reminiscence can be therapeutic processes that facilitate adaptive responses and ego integrity.

Late adulthood traditionally sets the contextual stage for the life review and is focused on retrospection, reconciliation, and the resolution of unfinished business, typically in response to end-of-life issues or preparation for death. Nevertheless, individuals of all ages review their lives (Butler, 1963; Haight & Haight, 2007; McAdams et al., 2006; Robins & Wilner, 2001; Robinson, 2015; Webster, 1994; Webster & Gould, 2007), and recent evidence has demonstrated that life review and reminiscence can significantly improve the mental health and well-being of individuals across the lifespan (Ando, 2003; Arkoff et al., 2006; Bohlmeijer et al., 2007; Chippendale & Bear-Lehman, 2012; Cox, 2015; Hallford et al., 2013; Hallford & Mellor, 2016a, 2016b, 2016c; Pinquart & Forstmeier, 2012; Westerhof & Bohlmeier, 2014; Zuidervue, 2016). As a result, life review and reminiscence have transpired into therapeutic processes for evaluating and navigating present circumstances, especially in response to a problem, crisis, trauma, or loss with individuals from emerging adulthood to midlife (Butler, 1963; Bluck & Gluck, 2004; Cappeliez, 2013; Cox, 2015; Haight & Haight, 2007, Graham et al., 2019; Pasupathi & Carstensen, 2003; Thomas & Briggs, 2016; Webster et al., 2010; Westerhof & Bohlmeijer, 2014; Westerhof et al., 2010). Regardless of age, engaging in a life review can be a therapeutic process or educational experience that facilitates healing, growth, development, and adaptive responses (e.g., reconciliation, forgiveness, understanding, and acceptance). Positive outcomes of the life review may also include a deeper self-understanding, improved life satisfaction and well-being, adaptive problem solving, making amends, constructing generative life narratives and redemption stories, coping with adverse feelings (e.g., loss, guilt, conflict), and finding meaning in life. Maladaptive responses, such as depression, anxiety, or suicidal ideation, may occur during the life review process when it is conducted independently rather than with a trained therapeutic listener or helping professional.

Appreciative Inquiry

Cooperrider (1986) originally developed the appreciative inquiry (AI) philosophy and approach to be a transformational change process for organizations. Traditionally, businesses, organizations, and the helping professions use a problem-solving approach to address challenging issues. The goal of problem-solving methods and strategies is to identify, define, and mitigate deficits and weaknesses. Conversely, AI is an asset-focused paradigm that facilitates change by identifying and amplifying existing strengths and assets. The premise of AI is that amplifying strengths and assets *appreciates* (increases) their value, and the intentional appreciation of strengths via structured inquiry generates positive change. Rather than mitigating problems and deficits, AI disrupts the status quo and reverses adverse conditions in human, economic, and organizational systems by using positive inquiry, reflections, and conversations as a generative change agent (Bushe, 2007; Moore & Tschannen-Moran, 2010).

Cooperrider and Suresh Srivastva (Cooperrider's advisor at Case Western Reserve University) created the five original AI principles in the early 1990s (AI Commons, 2017a; Cooperrider & Whitney, 1999). The original AI principles and their abbreviated meanings include the following:

- The Constructionist Principle. Reality is subjective and socially constructed.
- The Simultaneity Principle. Inquiry is an intervention that creates change.
- The Poetic Principle. We can choose what we want to learn.
- The Anticipatory Principle. Images and visions inspire action.
- The Positive Principle. Positive questions create momentum for positive change.

The philosophy, principles, and methods of AI are supported by social constructivism theory (Amineh & Asl, 2015; Gergen, 2015; Goldenberg et al., 2017, McAdams et al., 1997). As such, the AI process may be seamlessly integrated with narrative-based therapeutic approaches. In recent years, AI has been applied successfully with individuals across multiple disciplines, including positive psychology (Cantore & Cooperrider, 2013), health and wellness coaching (Moore & Tschannen-Moran, 2010; Moore et al., 2016), academic advising (Bailey-Taylor, 2009) and career development (Schutt, 2007, 2018).

The 5-D cycle (define, discover, dream, design, and destiny/delivery) is the core structure and process of the AI approach (AI Commons, 2017b). The AI process is initiated by facilitating the *define* stage to identify and decide on an affirmative issue for change. The *discover* stage centers on exploring, identifying, and appreciating current strengths and assets (also known as *the best of what is*) as well as determining desired outcomes. Best experiences, core values, generative conditions, and three wishes for the future are the four discoveries extracted and illuminated to strengthen the client's energy and self-efficacy (Moore & Tschannen-Moran, 2010). The *dream* stage focuses on imagining possibilities (also known as the *best of what might be*) by encouraging the expression of narratives, metaphors, and images about the discoveries uncovered during the discover stage. During the dream stage, clients enhance their awareness as well as generate energy and enthusiasm about the aspirations, wishes, and hopes they have for the future. The *design* stage supports the dream stage by asking *how can it (the dream) be* and co-constructing compelling goals, a plan, and infrastructure (e.g., habits, relationships, systems, and resources) to support realization of the dream. A commitment to action and implementation of the plan is also a vital part the design stage. Finally, the *destiny/delivery* stage is an action-oriented phase that focuses on innovation, empowerment, and learning. Generative change is

facilitated during the destiny/delivery stage by connecting existing strengths and assets (what is working well) with the vision or dream (the best of what could be) and implementing the plans (also known as provocative propositions) created during the design stage.

Fundamentally, AI is about facilitating generativity and the change process, not positivity (Bushe, 2007; Cooperrider & Srivastva, 1987). The focus of appreciative inquiry is on the positive, specifically to support generativity and change. However, many professionals and laypeople mistakenly believe that AI is essentially designed to facilitate positivity and optimism. Regardless, the most invaluable secondary outcome of the AI process may be the development of positivity and an appreciative mindset. Researchers have demonstrated that positivity (Fredrickson, 2001, 2009, 2013; Fredrickson & Kok, 2018) and the AI process (Brunzell et al., 2019; Sekerka & McCraty, 2004; Verleysen et al., 2015) can cultivate possibility thinking and build the psychosocial resources (e.g., resilience, autonomy, competence, and relatedness) that are essential for flourishing.

Person-Environment-Occupation-Performance Model

The person-environment-occupation-performance (PEOP) model originated in the occupational therapy profession and is supported by developmental and systems theories (Bass et al., 2017; Baum & Christiansen, 2005; Baum et al., 2015; Christiansen & Baum, 1991, 1997; Christiansen et al., 2015). Developmental theories provide a contextual lens for understanding occupational performance (i.e., human doing). Systems theory supports the dynamic and reciprocal relationships (transactions) that inherently exist among person, environment, and occupation factors. The overarching conceptual framework of the PEOP model is its transactive process, specifically that person, environment, and occupation factors influence and are influenced by occupational performance.

Principles of the PEOP model that reflect the value of occupation from a developmental standpoint include “1) the drive for engagement, 2) the complexity and multidimensional nature [of occupation], 3) the importance of environmental context, 4) temporal influences, 5) [the] inherent nature of occupations, and 6) [occupation’s] influence on health and well-being” (Bass et al., 2017; see also Primeau & Ferguson, 1999). Additionally, a core assumption of the PEOP model is that people can only achieve well-being when they are able to perform and participate in the desired occupations that contribute to a personally meaningful and satisfying life. Thus, the integration of a collaborative, client-centered approach with the transactive PEOP model will yield a comprehensive, systematic, and coherent framework to guide the occupational therapy process from beginning to end (Baum et al., 2015).

The emphasis of the seminal PEOP model (Christiansen & Baum, 1991) was the interaction and impact of person and environmental factors on occupational performance, which instigated a shift back toward the profession’s founding principle of holistic care during an era when the medical model had become prevalent (Christiansen et al., 2011). The second edition of the PEOP model (Christiansen & Baum, 1997) more clearly delineated the intrinsic (psychological, cognitive, physiological, and neurobehavioral) and extrinsic (social, societal, cultural, and physical) factors that influence occupational performance. More significantly, the second edition of the PEOP model identified occupational performance as fundamental to the development of identity, role fulfillment, and well-being. In the third iteration of the PEOP model (Baum & Christiansen, 2005), occupation was identified as a distinct and central construct of the model rather than being viewed within the context of occupational performance. Another significant shift in the third edition was a focus on the distinction between occupational performance and occupational participation as contributing factors to health, well-being, and

quality of life. The definition of participation from the “Occupational Therapy Practice Framework: Domain and Process” (American Occupational Therapy Association [AOTA], 2020) is “involvement in a life situation,” a definition adopted from World Health Organization (WHO, 2001, p. 10). Whereas, the “performance of occupation [is] the result of choice, motivation, and meaning within a supportive context and environment” (AOTA, 2020, p. 5).

Currently in its fourth edition, the PEOP model continues to integrate a client-centered, collaborative approach within its transactive process. However, the distinguishing feature of the model’s fourth edition is its emphasis on client narratives (Bass et al., 2017). According to Bass et al. (2017), “The narrative is the starting point for the Person-Environment-Occupation-Performance (PEOP) Occupational Therapy Process” (p. 173), which has four stages: narrative, assessments and evaluation, interventions, and evaluation of outcomes. During the narrative stage, the therapist develops the therapeutic relationship, determines which occupations are meaningful to the client (and that which makes them meaningful) and preliminarily assesses the supports and barriers to occupational participation and performance. The PEOP model’s strength is its applicability to individual, organizational, community, and population-wide clients. Consequently, it has broad applications in emerging practice areas, such as public health, primary care, higher education, faith-based communities, and corporations. The client-centered and occupation-based PEOP model presents an overarching conceptual model for occupational therapy that also unifies the profession’s broad scope of practice. As a theoretically sound framework that integrates all aspects of the occupational therapy domain and process, the PEOP model is invaluable for practitioners, researchers, educators, and students. Research in occupational therapy and occupational science (Clark et al., 1991; Carroll & Loesche, 2017; Ho & Siu, 2018; Mulry, 2016; Whalley et al., 2020), the study of human participation and

occupation, presents evidence to support the efficacy of the PEO model.

Social Constructivism and Narrative Therapy

White and Epston (1990) developed and introduced narrative therapy, a form of psychotherapy, as an alternative approach to the predominant behavioral, cognitive-behavioral, and problem-solving psychotherapeutic approaches common during the late 20th century. Social constructivism and poststructuralism (Amineh & Asl, 2015; Gergen, 2015; Goldenberg et al., 2017; McAdams et al., 1997), the theoretical roots and foundational concepts underlying narrative therapy, originated from postmodern thinking and philosophy. Postmodernism is a worldview that reality is socially constructed through language and the complex interplay of social and cultural influences (Goldenberg et al., 2017). The postmodern worldview presents people with the option to explore alternative perspectives and meanings (interpretations) of their lived experiences. According to the postmodern worldview, there are multiple versions of reality, and truth is elusive because people continually construct and reconstruct their understanding of self (i.e., identity) and the world (Walther & Carey, 2009). Comparatively, the modernist perspective has the worldview that there is a singular version of reality or an objectively knowable universe governed by universal laws even if human beings do not have the knowledge or capacity to understand that reality (Goldenberg et al., 2017).

The working assumption of social constructivism theory is that reality is conditional and contextual because it is developing and evolving through human communication, interaction, relationships, and social contexts (Amineh & Asl, 2015; Goldenberg et al., 2017). The term *constructivism* was coined by postmodern theorists to express the concept that individuals subjectively construct reality. Personal, cultural, and societal beliefs are the interpretive lenses that people use to derive meaning from their lived experiences as well as construct, share, and

communicate their narratives. Narratives, whether personal, cultural, or societal, are the stories that people create from their lived experiences to develop identity, share beliefs, gain a sense of understanding, order, meaning, and continuity in their lives as well as preserve and organize memories (Goldenberg et al., 2017; McAdams, 1985, 1993, 1996, 2001, 2008, 2011; McAdams et al., 2006).

Similarly, Derrida (1978) introduced the concept of deconstruction and presented the phenomenological idea that lived experiences and narratives may have multiple meanings. Derrida (1978, 1998) posited that deconstruction is not solely the disassembling of assumptions, a methodology, or something one does. Rather, deconstruction takes place and arises through the quality of language one uses. Thus, there are multiple versions of reality because people continually construct, deconstruct, and reconstruct their understanding of self and the world (Goldenberg et al., 2017). Poststructuralism supports postmodernism, social constructivism, and deconstruction because it “rejects the structuralist [modernist] notion that there is a deep structure to all phenomena and that its complexity can be broken down to its elements” (Goldenberg et al., p. 372; see also Combs & Freedman, 2004; Phelan & Kinsella, 2009).

Narrative therapy is the practical application of social constructivism, poststructuralism, and deconstruction within a therapeutic context. Multiple disciplines, including psychotherapy, family therapy (Goldenberg et al., 2017; Sommers-Flanagan & Sommers-Flanagan, 2012), career counseling (Savickas, 2005), and occupational therapy (Bass et al., 2017; Bonsall, 2012; Clark et al., 1997; Price-Lackey & Cashman, 1996) have successfully adopted narrative approaches within their discipline-specific theories and models. The premise of narrative therapy is that identity and reality is shaped by the stories we tell ourselves and others (Goldenberg et al., 2017). Self-narratives, family narratives, and cultural narratives are not stories *about* our lives,

rather they *are* our lives (Freedman & Combs, 2000). Similarly, occupational therapist Charles Christiansen (1999) asserted that identity is not only developed and influenced by social and contextual narratives, but it is also central to the evolving self-narratives from which human beings derive a sense of purpose, coherence, and meaning. Moreover, Christiansen emphasized that engagement in occupation or doing is a key mechanism for the development and expression of identity and self-narratives. Namely, it is through doing that an individual fulfills their needs for purpose, efficacy, value, self-worth, and meaning while also having the opportunity to develop and demonstrate agency, competence, and striving to become one's imagined or future self.

Narrative therapy is a client-centered approach in which the therapist respects the client as the expert of their life. Additionally, therapists may use narrative therapeutic approaches for both evaluation and intervention purposes (Bass et al., 2017; Goldenberg et al., 2017, Ribeiro et al., 2016; White & Epston, 1990). Narrative therapists facilitate storytelling to help individuals identify and deconstruct the internalized narratives that have positively or negatively shaped their identity, values, and beliefs. The focus of therapeutic dialogue and interventions is on externalizing problems and creating alternative life stories through reauthoring, reframing, and reinterpreting the meaning of an individual and family's narrative. Life review, reminiscence, and guided autobiography are structured or semi-structured forms of narrative therapy that may be effectively implemented with individuals or groups across the lifespan (Webster et al., 2010; Westerhof et al., 2010; Westerhof & Bohlmeijer, 2014).

Evidence for Use of Life Review and Reminiscence with Emerging and Young Adults

Multidisciplinary interest and research in the use of reminiscence and life review interventions with children, adolescents, and young adults was shown in a review of the literature

(Bluck & Gluck, 2004; Cappeliez, 2013; Graham et al., 2019; Hallford, 2016a, 2016b, 2016c; Lata et al., 1997; McAdams & Guo, 2014; Salmon & Reese, 2016; Thomas & Briggs, 2016; Webster, 1994; Webster & Gould, 2007), particularly in palliative and end-of-life care (Guidotti et al., 2019; Keim-Malpass et al., 2015; Piderman et al., 2017; Portnoy et al., 2016; Torges et al., 2008). However, only a few researchers (Ando, 2003; Arkoff et al., 2006; Cox, 2015; Hallford & Mellor, 2016a, 2016b, 2016c; Hallford et al., 2013) have explored the use of reminiscence and life review with well, young adult populations during stable periods or normal life transitions, such as adjustment to college or adult work life. Preliminary evidence from these studies has demonstrated proof of concept (i.e., feasibility of the principle) for the use of life review and reminiscence whether brief or extended as an effective intervention for developing positive psychosocial resources in emerging and young adults. These psychosocial resources (e.g., self-efficacy, resilience, environmental mastery, sense of competence, and meaning in life) are essential for flourishing during stable periods and for healthy adaptive responses during times of transition. Evidence for the use of life review and reminiscence interventions with emerging and young adults, specifically to facilitate psychosocial resources, well-being, and adaptive responses, has yielded promising outcomes.

Webster (1994) demonstrated that age is not a predictor of reminiscence frequency, the affective quality (i.e., emotional tone) of memories, and whether the content of the reminiscence was philosophical (meaning-focused) or non-philosophical (see Table 2). However, age was a significant predictor of the temporal dimension of the memories recalled (i.e., new, recent, old, or remote). Not surprisingly, older adults were more inclined to recall remote memories during reminiscence. Webster supported the concept that reminiscence is a normative process that occurs throughout the lifespan (Bluck & Gluck, 2004; Cappeliez, 2013; Graham et al., 2019;

McAdams et al., 2006; Webster et al., 2010; Westerhof et al., 2010; Westerhof & Bohlmeijer, 2014). However, in a study about reminiscence across adulthood, Webster and Gould (2007) found that the function of reminiscence varies by age. Young adults reminisce for identity development, problem solving, bitterness revival, and boredom reduction (“self” functions). Whereas, older adults reminisce for “social” functions, specifically teaching or informing, intimacy maintenance, and death preparation. Interestingly, no age differences were demonstrated for the identity and conversation functions of reminiscence. Based upon the results of their study, Webster and Gould (2007; see Table 2) proposed that reminiscence is an adaptive means for self-exploration and the development of a coherent narrative identity for young adults.

McAdams and Guo (2014) asserted that a coherent narrative identity begins to develop in adolescence as individuals start to understand and internalize their unfolding story of being and becoming (self). The life story model of identity and structured life story interview developed by McAdams (1985, 1993, 1996, 2001, 2008) is similar to the structured life review (Haight & Haight, 2007) in that it presents a framework for developing narrative identity through the retrospective-prospective process of constructing, evaluating, and integrating one’s past, present, and future life. As college students prepare to launch into adult life, McAdams and Guo (2014) emphasized that a coherent narrative identity and a constructed life story embedded with generativity scripts can support a positive transition to adult life. Generativity scripts are planned or imagined circumstances, events, or scenarios in which an individual contributes a positive legacy to future generations (McAdams & Guo, 2014). In a seminal study, McAdams et al. (2006) demonstrated both temporal continuity and positive developmental changes in the narrative identity of emerging adults over a three-year period (see Table 2).

Hallford and Mellor (2016c) established preliminary evidence for the effectiveness of brief, guided reminiscence interventions for identity development and adaptive problem-solving in a large, randomized controlled experimental study of young adults (see Table 2).

Reminiscence prompts that facilitated the positive reinterpretation of autobiographical memories demonstrated small but significant effects on positive well-being and self-concept. Additionally, increases in self-efficacy, meaning in life, self-esteem, and affect were observed in the problem-solving and identity conditions (prompts). Conversely, neutral or bitterness revival prompts (e.g., focused on negative experiences, conflicts, or regrets) had no significant effect on affect, self-esteem, self-efficacy, meaning in life, or the perception of a cohesive narrative identity. Hallford and Mellor (2016c) also supported the effectiveness of reminiscence-based interventions as an indirect mediator of depression (through various psychological variables, such as self-esteem, self-efficacy, and meaning in life), which was found to be similar in both younger and older adults in a large study (Hallford et al., 2013).

In a quasi-experimental study, Arkoff et al. (2006) conducted a structured, 14-week life review intervention with college freshmen, which demonstrated significant improvements in self-acceptance and environmental mastery (see Table 2). Self-acceptance in this research was defined as a positive attitude and regard towards self and past life narratives as well as acknowledgment and acceptance of personal strengths and weaknesses. Environmental mastery was defined as a sense of control and competence with effectively managing one's external environment, including the ability to select activities, opportunities, and contexts that align with personal needs and values (Seifert, 2005). Self-acceptance and environmental mastery are vital psychosocial resources for emerging adults to navigate transitions competently and successfully as well as to participate in daily occupations at home, school, work, social, and community

environments.

Similarly, Ando (2003) investigated the effect of a short-term life review intervention (1 three-hour session) on the psychological well-being of college students by measuring two dimensions of mood (tense arousal and energetic arousal). Tense arousal and energetic arousal represent low hedonic tone and high hedonic tone, respectively with an increase in energetic arousal suggesting improved psychological well-being. (Hedonic tone, otherwise known as valence, refers to the intrinsic affective quality associated with an event, experience, or object.) Low hedonic tone suggests the presence of negatively valenced emotional states (e.g., anger), whereas high hedonic tone suggests the presence of positively valenced (e.g., joy) emotional states. Pretest and posttest measures indicated a significant increase in energetic arousal after the life review, but no change in the tense arousal state occurred. This change indicated improved hedonic states (mood) in young adults after the short-term life review (see Table 2). In a second study, Ando (2003) researched the effect of a long-term life review (four sessions) on the self-esteem and mental health of young adults. Self-esteem scores significantly increased after the life review, and a significant decrease in the General Health Questionnaire-30 (GHQ-30) composite score and several subscores (somatic symptoms, sleep disturbance, anxiety, and dysphoria; Goldberg & Hillier, 1979) indicated a decrease in mental health symptoms after the long-term life review (see Table 2).

Hallford and Mellor (2016a) conducted a correlational study with a sample of young adults that assessed the relationship between adaptive autobiographical memory (reminiscence) and depressive symptoms. They indicated that the frequency of autobiographical reminiscence when used for identity and problem solving is not directly related to depression symptomatology. However, the findings demonstrated that when used frequently for identity continuity and

problem solving, autobiographical reminiscence in young adults is adaptive and indirectly related to levels of depressive symptoms through the development of psychological resources (e.g., self-esteem, self-efficacy, optimism, and meaning in life) over time. Hallford and Mellor (2016a) supported the use of cognitive-reminiscence therapy as an intervention for young adults to build resilience and decrease depressive symptoms through the development of positive psychological resources (see Table 2).

Hallford and Mellor (2016b) also conducted a randomized controlled trial with a small sample of young adults who had moderate depressive symptoms and were receiving treatment at a community mental health service for youth. As compared to usual care (six individual psychotherapy sessions), of the young adults who received a six-week course of individual cognitive-reminiscence therapy, 86% reported an improvement of depressive symptoms. The effect size was large after the six-week intervention and at the three-month follow-up. Additionally, secondary outcomes included a large effect on psychosocial resources following the sixth session, specifically self-esteem, self-efficacy, meaning in life, and optimism. These outcomes were maintained at the three-month follow-up (see Table 2), and Hallford and Mellor (2016b) strengthened the evidence for the use of cognitive-reminiscence therapy with emerging adults to develop psychosocial resources and facilitate adaptive responses.

Remarkably, Cox (2015) demonstrated that meaning-centered life story prompts that elicited negative meaning predicted subjective well-being in emerging young adults in a mixed methods study that compared a sample of emerging adults (college students) with a sample of late-midlife adults. Conversely, life story prompts that elicited positive meaning predicted subjective well-being in late-midlife adults (see Table 2). Cox suggested that events with negative meaning presented emerging adults with the contextual learning experiences needed to

guide future decisions and actions. Thus, life events with negative meaning may have positive outcomes by providing emerging adults with the opportunity to reframe, reauthor, and reinterpret their *experiences in context*, which is essential for identity development, adaptive problem solving, psychological well-being, and flourishing. In a large study of adults, Graham et al. (2019) supported Cox's findings that the reminiscence profile of emerging and young adults was characterized by bitterness revival and boredom reduction functions (see Table 2). Again, these types of reminiscence appear to be developmentally appropriate for emerging adults who tend to be focused on identity exploration, personal growth, and a search for meaning during the transition to adult life (Arnett, 2000, 2004; Arnett & Schwab, 2012).

Table 2*Evidence Supporting the Use of Life Review and Reminiscence with Emerging Adults*

Citation	Methods/Design	Sample Size	Analysis	Study Findings/Results
Ando, M. (2003). The effects of short-and long-term life review interview on the psychological well-being of young adults. <i>Psychological reports</i> , 93(2), 595-602.	<u>Study One</u> Quantitative Pre-experimental Pretest and posttest (Short-term intervention)	<i>N</i> = 77 students at junior college in Japan (ages 19-20 years).	2 x 2 ANOVA Main effect of time: $F(1, 76) = 4.87, p < .05$ Main effect of arousal: $F(1, 76) = 64.87, p < .05$ Interaction effect: $F(1, 76) = 27.7, p < .001$	Statistically significant increase in energetic arousal (positive mood) after the short-term life review but no change in the tense arousal state (negative mood).
	<u>Study Two</u> Quantitative Pre-experimental Pretest and posttest (Long-term intervention)	<i>N</i> = 149 second year university students in Japan (ages 19-21 years).	2 x 6 ANOVA Main effect of time: $F(1, 148) = 10.1, p < .01$ Main effect of factors: $F(5, 740) = 49.7, p < .001$	Self-esteem scores significantly increased and the GHQ-30* composite and subscores (somatic symptoms, sleep disturbance, anxiety, and dysphoria) significantly decreased after the long-term life review.
Arkoff, A., Meredith, G. M., Bailey, E., Cheang, M. D., Richard, A., Griffin, P. B., & Niyekawa, A. M. (2006). Life review during the college freshman year. <i>College Student Journal</i> , 40(2), 263-270.	Quantitative Quasi-experimental Pretest and posttest Post program questionnaire (mixed methods) given to intervention group. 14-weekly, 50-minute sessions delivered in small groups.	<i>N</i> = 66 first year students at U.S. university <u>Intervention Group</u> 30 students (ages 18-20 years; 25 females & 5 males). <u>Control Group</u> 36 students (ages 18-20; 29 females & 7 males).	Dependent <i>t</i> tests <u>Intervention Group</u> Ryff* Subscales- Environmental mastery: ($t = 4.36, p < .001$); Self-acceptance: ($t = 3.12, p < .05$) <u>Control Group</u> No significant changes on any Ryff Subscales	Statistically significant differences on environmental mastery and self-acceptance after participation in 14-week life review. On a scale of 0 (Poor)-4 (Excellent), program participants rated overall program (3.35), interest in program (2.96), and helpfulness of program (2.80). Salient comments: participants like close relationships developed with peers, sharing in safe and supportive environment, and relief/surprise about shared concerns and feelings. Continued

Citation	Methods/Design	Sample Size	Analysis	Study Findings/Results
Cox, K. (2015). Meaning making in the life Story, and not coherence or vividness, predicts well-being up to 3 years later: Evidence from high point and low point stories. <i>Identity, 15</i> (4), 241-262.	Mixed Methods Pretest and posttest Qualitative: Life story prompts	<u>Emerging Adults</u> <i>N</i> = 108 university students (<i>N</i> = 74 at 3-year follow-up) (age range = 18-23; \bar{x} age = 19.7) Female: 77% Male: 23% White: 69.7% Asian: 4.8% Black: 2.1% Hispanic & other: 4.8% <u>Late-Midlife Adult</u> 154 adults (at baseline, participants' age \approx 57 years) White: 55% Black: 43%	<u>Emerging Adults</u> Bivariate Correlations between SWB and Narrative Codes: Baseline: ($-.25, p < .01$) Year 3: ($-.26, p < .05$) <u>Late-Midlife Adults</u> Bivariate Correlations between SWB and Narrative Codes: Baseline: (.16, $p < .05$) Year 2: (.17, $p < .05$) Year 3: (.20, $p < .05$)	<u>Emerging Adults</u> Negative meaning (of high and low points) predicted subjective well-being in emerging adults. (Negative meaning had predictive strength, but positive meaning did not. Positive meaning from low points did not translate to psychological flourishing for emerging adults.) <u>Late-Midlife Adults</u> Positive meaning (of high and low points) predicted subjective well-being in late-midlife adults. (Positive meaning had predictive strength, but negative meaning did not. Positive meaning in high and low points predicted subjective well-being for late-midlife adults.)
Graham, K. L., Rahm-Knigge, R. L., & Conner, B. T. (2019). Profiling reminiscers: Using a self-report measure of frequency and functions of reminiscence to identify individual patterns of retrieval. <i>Journal of Adult Development, 1</i> -11.	Quantitative Analysis of Secondary Data	<i>N</i> = 907 participants (age range = 17-88 years, \bar{x} age = 32.83 years, <i>SD</i> = 18.01) Females: 59.1% Males: 40.9%	Mean responses by age for factors on Reminiscence Function Scale <u>Bitterness Revival</u> Young Adult, 3.02 Middle Adult, 1.86 Older Adult, 2.73 <u>Boredom Reduction</u> Young Adult, 3.23 Middle Adult, 1.93 Older Adult, 2.80	The reminiscence profile of emerging and young adults was characterized by bitterness revival and boredom reduction functions, which reflects a focus on identity exploration, personal growth, and a search for meaning. Continued

Citation	Methods/Design	Sample Size	Analysis	Study Findings/Results
Hallford, D. J., & Mellor, D. (2016a). Autobiographical memory and depression: Identity-continuity and problem-solving functions indirectly predict symptoms over time through psychological well-being. <i>Applied Cognitive Psychology</i> , 30(2), 152-159.	Quantitative Correlational	$N = 171$ young adults (\bar{x} age = 25.9 years, $SD = 3.5$) Females: 52.7% Males: 47.3%	Zero Order Correlations between study variables: <u>Problem-solving</u> Baseline: ($r = .71, p < .001$) Follow-up: ($r = .82, p < .001$) <u>Identity</u> Baseline: none Follow-up: ($r = .68, p < .001$) Structural Equation Modelling CMIN = 1979.811 ($df = 1064$), $p < .001$, CMIN/ $df = 1.86$, RMSEA = .071, 90% CI [.066, .076], SRMR = .074, CFI = .087.	Frequent use of autobiographical reminiscence in young adults for identity continuity and problem-solving in young adults is adaptive and indirectly related to levels of depressive symptoms through the development of psychological resources (e.g., self-esteem, self-efficacy, optimism, and meaning in life) over time.
Hallford, D. J., & Mellor, D. (2016c). Brief reminiscence activities improve state well-being and self- concept in young adults: A randomised controlled experiment. <i>Memory</i> , 24(10), 1311-1320.	Quantitative RCT Pretest and posttest	$N = 321$ young adults (\bar{x} age = 25.5 years, $SD = 3.0$) Female: 50.5% Male: 49.5%	4 x 2 Repeated measures MANOVA Significant effect for time $F(7, 311) = 5.2$, $p < .001$ and significant interaction effect between time and condition $F(21, 939) = 2.1$, $p = .003$	Results indicated that the problem-solving and identity reminiscence conditions caused significant improvements in self-esteem, meaning in life, self-efficacy, and affect. There were no effects on optimism. Differences between the conditions did not appear to be due to the positive or negative valence of memories. Small to moderate effect sizes ($d = .15$ – $.35$) in problem solving and identity conditions for all variables measured.

Continued

Citation	Methods/Design	Sample Size	Analysis	Study Findings/Results
		<u>4 Conditions</u> <u>Groups</u> Problem solving ($n = 89$) Identity ($n = 69$) Bitterness revival ($n = 79$) Control ($n = 84$)	Follow-up within groups t tests <u>Problem-solving</u> <u>condition</u> Self-esteem ($t = 3.3$, $p = .001$) Meaning in life ($t = 4.4$, $p < .001$) Self-efficacy ($t = 3.3$, $p = .005$) Negative affect ($t = 3.0$, $p = .004$) (represents decrease in negative affect) <u>Identity Condition</u> Self-esteem ($t = 2.4$, $p = .022$) Meaning in life ($t = 3.9$, $p < .001$) Self-efficacy ($t = 2.6$, $p = .011$) Positive affect ($t = 2.5$, $p = .014$) (represents increase in positive affect)	
Hallford, D. J., & Mellor, D. (2016b). Autobiographical memory-based intervention for depressive symptoms in young adults. <i>Psychotherapy and psychosomatics</i> , 85(4), 246-249.	Quantitative RCT Pretest and posttest (at 4 time points)	$N = 26$ young adults (\bar{x} age = 20.8 years, $SD = 1.9$) with moderate depression	<u>Depression Sx</u> Effect for time $F(1, 24)$ $= 18.6$, $p < .001$ No interaction effect $F(1, 24) = 1.9$, $p = .146$ Continued	As compared to usual care (six, individual psychotherapy sessions), of the young adults who received a six-week course of individual cognitive reminiscence therapy, 86% and 77%, reported an improvement of depressive symptoms at 6 weeks and 3 months, respectively. Secondary outcomes included a positive and large effect on the development of psychosocial resources, specifically self-esteem,

Citation	Methods/Design	Sample Size	Analysis	Study Findings/Results
		<u>Intervention Group</u> (n = 14, \bar{x} age = 20.6 years, SD = 1.7) Female: 57.1% Male: 42.9% <u>Usual Care Group</u> (n = 12, \bar{x} age = 21.1 years, SD = 2.1) Female: 41.7% Male: 58.3%	<u>Secondary outcomes</u> Effects at 6 weeks and 3 months on Self-esteem ($d = 1.99$, $d = 1.21$) Self-efficacy ($d = 1.19$, $d = 0.93$) Meaning in life ($d = 1.46$, $d = 1.14$) Optimism ($d = .92$, $d = .74$)	self-efficacy, meaning in life, and optimism that were maintained at the 3-month follow-up.
McAdams, D.P. et al. (2006). Continuity and change in the life story: A longitudinal study of autobiographical memories in emerging adulthood. <i>Journal of personality</i> , 74(5), 1371-1400.	Mixed Methods Quantitative: Non-experimental Pretest and posttest Correlational Qualitative: Narratives about 10 key life stories at pretest (baseline) and posttest at 2 time points (3 months and 3 years) were thematically coded.	<u>Time 1</u> N = 145 (age range = 18-23 years, \bar{x} age = 19.7 years) Females: 74% Males: 26% <u>Time 2</u> N = 112 Females: 74% Males: 26% <u>Time 3</u> N = 87 Females: 77% Males: 23%	Longitudinal stability (continuity) of aggregated scores from (Time 1 + 2) to Time 3 for Narrative complexity ($r = .60$, $p < .001$), Emotional tone ($r = .53$, $p < .001$), Agency ($r = .43$, $p < .001$), Personal growth ($r = .41$, $p < .001$) Communion ($r = .28$, $p < .05$) Developmental change of aggregated scores from (Time 1 + 2) to Time 3. ANCOVA	Over a three-year period, the narrative identity of emerging adults demonstrated temporal continuity and positive developmental changes for narrative complexity, positive (vs. negative) emotional tone, and themes of agency, growth, and communion. Continued

Citation	Methods/Design	Sample Size	Analysis	Study Findings/Results
			showed significant effects for time on: Emotional tone $F(1, 73) = 5.53, p < .05$ Personal growth $F(1, 73) = 5.21, p < .05$ Narrative complexity $F(1, 73) = 7.69, p < .01$	
Webster, J. D. (1994). Predictors of reminiscence: A lifespan perspective. <i>Canadian Journal on Aging, 13</i> (1), 66-78.	Quantitative Regression	<p>$N = 94$ participants (age range = 18-81 years)</p> <p><u>Young Adults</u> ($n = 59$, age range = 18-27 years, \bar{x} age = 23.07 years)</p> <p>Female: 76%</p> <p>Male: 24%</p> <p><u>Middle-Age Adults</u> ($n = 22$, age range = 32-58 years, \bar{x} age = 42.86 years),</p> <p>Female: 59%</p> <p>Male: 41%</p> <p><u>Older Adults</u> ($n = 13$, age range = 63-81, \bar{x} age = 73.61 years).</p> <p>Female: 23%</p> <p>Male: 77%</p>	<p>Reminiscence Questionnaire:</p> <p>Age did not emerge as a significant predictor of reminiscence frequency, affect, or meaning in a forward, step-wise regression.</p> <p><u>Temporal</u></p> <p>$t(98) = 3.35, p < .01$</p>	<p>Age is not a predictor of reminiscence frequency, emotional tone, or the philosophical (meaning-focused) content of memories. However, memory remoteness was predicted by age.</p> <p>Continued</p>

Citation	Methods/Design	Sample Size	Analysis	Study Findings/Results
Webster, J. D., & Gould, O. (2007). Reminiscence and vivid personal memories across adulthood. <i>The International Journal of Aging and Human Development</i> , 64(2), 149- 170.	Mixed Methods Quantitative: Non-experimental (ANOVA) Correlation Qualitative: Structure and content analysis of responses to a prompt about a landmark memory.	<i>N</i> = 198 participants (age range = 18–95 years Females: 47.5% Males: 52.5% Age by decade groups: 10s (\bar{x} = 18.6, <i>SD</i> = .49) 20s (\bar{x} = 23.1, <i>SD</i> = 3.3) 30s (\bar{x} = 35, <i>SD</i> = 2.2) 40s (\bar{x} = 45.4, <i>SD</i> = 2.5) 50s (\bar{x} = 53.5, <i>SD</i> = 3.2) 60s (\bar{x} = 63.8, <i>SD</i> = 2.6) 70s (\bar{x} = 74.8, <i>SD</i> = 2.6) 80s (\bar{x} = 82.7, <i>SD</i> = 2.8) 90s (\bar{x} = 92.3, <i>SD</i> = 1.8)	Reminiscence Function Scale: Means Across Age Groups <u>Boredom</u> $F(8, 177) = 3.49, p < .01$ <u>Problem-Solving</u> $F(8, 177) = 2.09, p < .05$ <u>Bitterness Revival</u> $F(8, 177) = 7.73, p < .01$ <u>Identity</u> $F(8, 177) = 1.93, p < .10$ <u>Death Preparation</u> $F(8, 177) = 7.77, p < .01$ <u>Teach/Inform</u> $F(8, 177) = 2.19, p < .05$ <u>Intimacy</u> $F(8, 177) = 1.79, p < .05$ <u>Conversation</u> $F(8, 177) = 1.32, ns$	Young adults reminisce for “self” functions: identity development, problem-solving, bitterness revival, and boredom reduction. Older adults reminisce for “social” functions: teaching or informing, intimacy maintenance, and/or death preparation. No age significant differences were demonstrated for the identity or conversation functions of reminiscence.

Note. *GHQ-30 = General Health Questionnaire-30; Ryff = Ryff Scales of Psychological Well-Being; Sx = symptoms; SWB = subjective well-being.

Chapter 3: Methods

Development of the L.E.G.A.C.Y.® Appreciative Life Review Model

Phase One

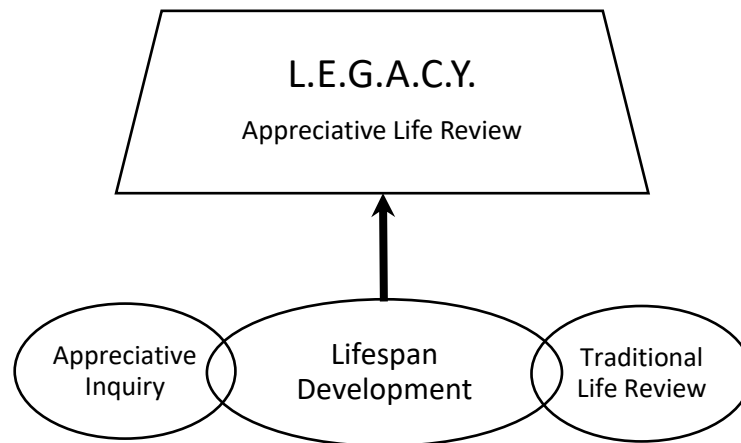
I conceived of the L.E.G.A.C.Y. appreciative life review model to be a synthesis of lifespan development theory, the traditional life review process, and AI to create a positive, affirming, and generative life review process (see Figure 1). The developmental lens grounds the model by focusing the life review on the critical psychosocial tasks of each life stage. The primary concept of the appreciative life review is that by integrating a positive, strengths-based, and generative approach into the life review, the process can be used to facilitate normal developmental milestones as well as support growth, change, and transformation for individuals across the lifespan. Additionally, the L.E.G.A.C.Y. appreciative life review model is designed to facilitate the simultaneous fulfillment of an individual's *raison d'être* and legacy. While the purpose and function of the appreciative life review may vary by life stage and can be used therapeutically with individuals during significant life transitions, challenges, or crises, the process was also designed for use with well populations to facilitate the following:

- Development of an appreciative mindset.
- Discovery and amplification of values, strengths, and best experiences.
- Achievement of normal developmental milestones.
- Identification of regrets, turning points, and unfinished business.
- Construction of generative life narratives and redemption stories.
- Fulfillment of a purposeful, values-centered, and meaning-focused life.
- Engagement in meaningful occupations (vocational, avocational, volunteer).

- Life satisfaction and well-being.

Figure 1

Phase One Concept Map of the L.E.G.A.C.Y. Appreciative Life Review Model



Phase 2

After the appreciative life review concept was developed, I focused on creating a name and model to support the concept and process. The name and acronym, L.E.G.A.C.Y., was chosen for the model because it conveys the overarching aim of the appreciative life review, facilitating the concurrent fulfillment of an individual's *raison d'être* and legacy. Interestingly, Maslow (1970) described the paradoxical composite of self-actualization (i.e., realizing one's *raison d'être*) and altruism (generativity) as transcendent actualization. Striving for self-actualization and generative behaviors are evident across the lifespan (Erikson, 1950, 1982; Lawford et al., 2005, 2013, 2020; Lawford & Ramey, 2015; McAdams, 2001a; McAdams et al., 1997; McAdams & Guo, 2014). Thus, shifting the context of the appreciative life review to earlier developmental stages and encouraging periodic engagement in the process throughout the lifespan can facilitate the healthy growth, development, and adaptive responses needed to

achieve self-actualization or transcendent actualization. Moreover, lifelong engagement in an appreciative life review presents individuals with multiple opportunities to construct, deconstruct, and reconstruct their narrative identity. According to McAdams (2011), “Narrative identity is the internalized and evolving story of the self that a person constructs to make sense and meaning out of his or her life” (p. 99). An individual’s narrative identity is their self-defining life story that is continually recreated and redeveloped by integrating their “reconstructed past, perceived present, and imagined future” (McAdams, 2013, p. 152). The intentional exploration, reflection, and development of narrative identity that transpires during the appreciative life review process cultivates a trial and correction mindset. Not only does a trial and correction mindset foster learning from both positive and negative experiences, but it enables and encourages life course corrections and beginning new life chapters rather than merely coping with enduring regret and grief.

The L.E.G.A.C.Y. acronym provides a working framework for the model, and each letter of the acronym represents one of the model’s six core areas: Life, Experiences, Gifts, Aspirations, Contributions, and Younger Generations (see Figure 2). Each core area has four fundamental elements or content areas (described below) that have been strategically designed and developed to facilitate and guide the appreciative life review process (see Figures 3-8).

- The *Life Core*. Centers on exploring, reflecting upon, understanding, and appreciating one’s identity and the fundamental elements of self, including personality, values, and roles and relationships (see Figure 3).
- The *Experiences Core*. Focuses on exploring, identifying, and reflecting upon and reinterpreting one’s life experiences, including best experiences, setbacks and turning points, newly discovered strengths and values, and silver linings. In this core, the

emphasis is on understanding and appreciating the positive impact of challenges and setbacks (see Figure 4).

- The *Gifts Core*. Centers on exploring, identifying, and appreciating one's life gifts, specifically strengths, talents, interests, and passions. This core emphasizes the relationship between life gifts and identity, values, meaning in life, and life purpose (see Figure 5).
- The *Aspirations Core*. Focuses on exploring, reflecting upon, identifying, and articulating one's meaning and purpose in life. The heart of the *Aspirations Core* is "becoming" and an inspiring life vision with attainable goals is created to support striving toward and realization of the vision (see Figure 6).
- The *Contributions Core*. Centers on exploring, reflecting upon, identifying, and appreciating which meaningful life gifts will be shared and how they will be shared, specifically via one's time, talents, treasures, and/or traditions. Ideally, the contributions are a composite of self-actualizing and altruistic behaviors (see Figure 7).
- The *Younger Generations Core*. Focuses on exploring, reflecting upon, and identifying the current and future recipients and beneficiaries of one's contributions or legacy. While a legacy is typically shared with younger generations and that is the name of this core area, it is expected that some individuals will share their time, talents, treasures, and traditions with older generations because that is their gift, strength, and/or passion (see Figure 8).

Perhaps most pertinent, an individual's purpose, contributions, and legacy are highly valued and esteemed, regardless of their scope of outreach and/or degree of extraordinariness.

Figure 2

Phase Two Concept Map of the L.E.G.A.C.Y. Appreciative Life Review Model

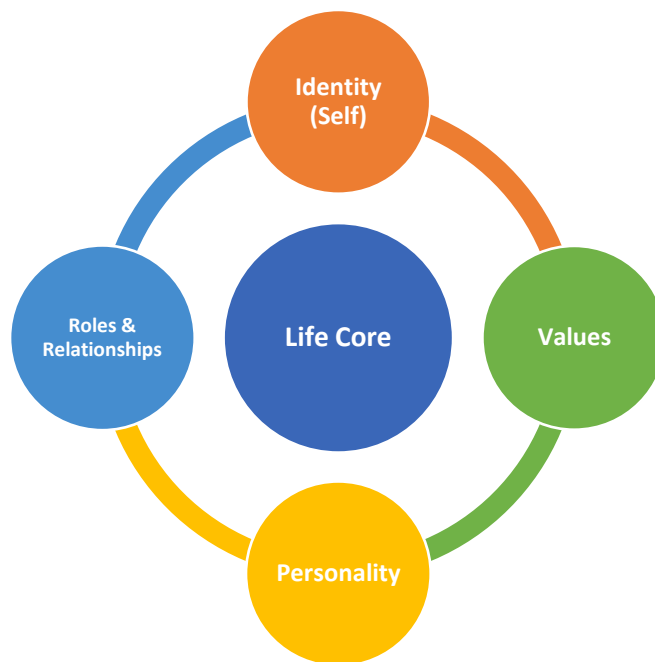


During Phase 2 of development, the focal point of the L.E.G.A.C.Y. framework and process was creating a L.E.G.A.C.Y. vision and plan. Phase 2 ended with the inaugural implementation of the L.E.G.A.C.Y. appreciative life review model. L.E.G.A.C.Y. was delivered in a one-and one-half day workshop format to a group of 31 college students. This group of emerging young adults demonstrated an overwhelmingly positive response to participating in the L.E.G.A.C.Y. appreciative life review process. The content of the class discussions and reflection papers provided qualitative evidence that participating in the L.E.G.A.C.Y. appreciative life review was related to shifts in thinking, specifically the capacity to amplify strengths and reinterpret negative life experiences as having positive outcomes. As a result, I began to envision the L.E.G.A.C.Y appreciative life review as a process to be used with

emerging and young adults to build psychosocial resources and successfully navigate life transitions.

Figure 3

Phase Two Concept Map of the L.E.G.A.C.Y. Life Core



Phase 3

During the third phase of development, I recognized the need to strengthen and broaden the theoretical foundation of the L.E.G.A.C.Y. appreciative life review model (see Figures 9, 10, and 11), especially after the narrative element emerged as a predominant feature of the model during the inaugural workshop. Although narrative therapeutic approaches influenced the L.E.G.A.C.Y. model during the first two phases of development, they were considered a subordinate element. Additionally, the broad scope of the L.E.G.A.C.Y. model needed support from a systems theory that reflected the transaction between developmental (person), environmental, contextual, and occupational factors as well as the influences of these factors

Figure 4

Phase Two Concept Map of the L.E.G.A.C.Y. Experiences Core

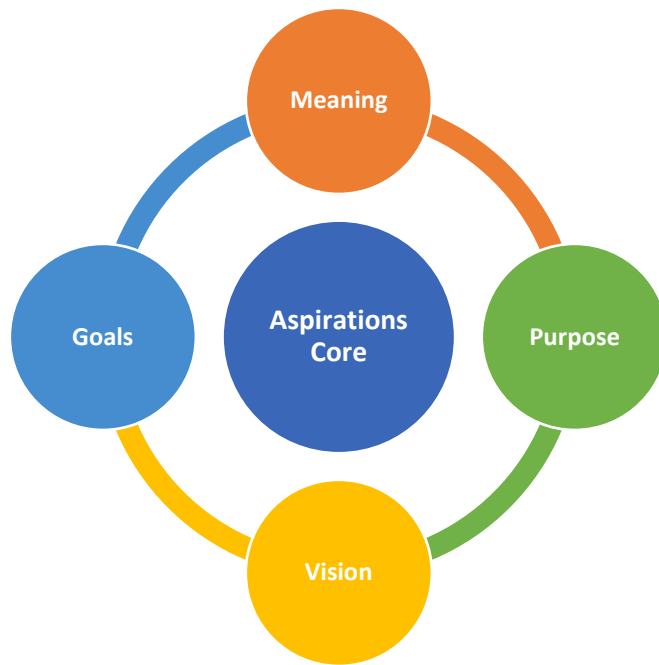
**Figure 5**

Phase Two Concept Map of the L.E.G.A.C.Y. Gifts Core



Figure 6

Phase Two Concept Map of the L.E.G.A.C.Y. Aspirations Core

**Figure 7**

Phase Two Concept Map of the L.E.G.A.C.Y. Contributions Core

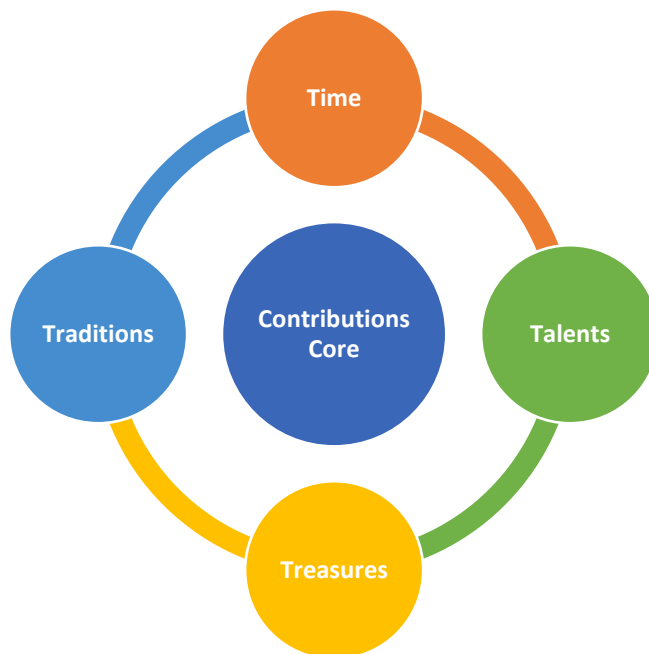


Figure 8*Phase Two Concept Map of the L.E.G.A.C.Y. Younger Generations Core*

on an individual's occupational performance and ever-evolving occupational narrative (see Figure 11). Thus, narrative therapy (White & Epston, 1990) and the PEOP model (Bass et al., 2017; Baum & Christiansen, 2005; Baum et al., 2015, Christiansen & Baum, 1991, 1997; Christiansen et al., 2015) were integrated into the L.E.G.A.C.Y. appreciative life review model along with the concepts that being, doing, becoming, and belonging (occupational participation and performance) are prerequisites for health, well-being, and QOL (Playford, 2015; WHO, 2001; Wilcock & Hocking, 2015). Not only are being, doing, becoming, and belonging (Wilcock & Hocking, 2015) central constructs in the "Occupational Therapy Practice Framework: Domain and Process" (AOTA, 2020), but the synthesis and expression of being, doing, becoming, and belonging *is* occupational participation, performance, and engagement. Interestingly, the concepts of being, doing, becoming, and belonging seamlessly aligned with the L.E.G.A.C.Y.

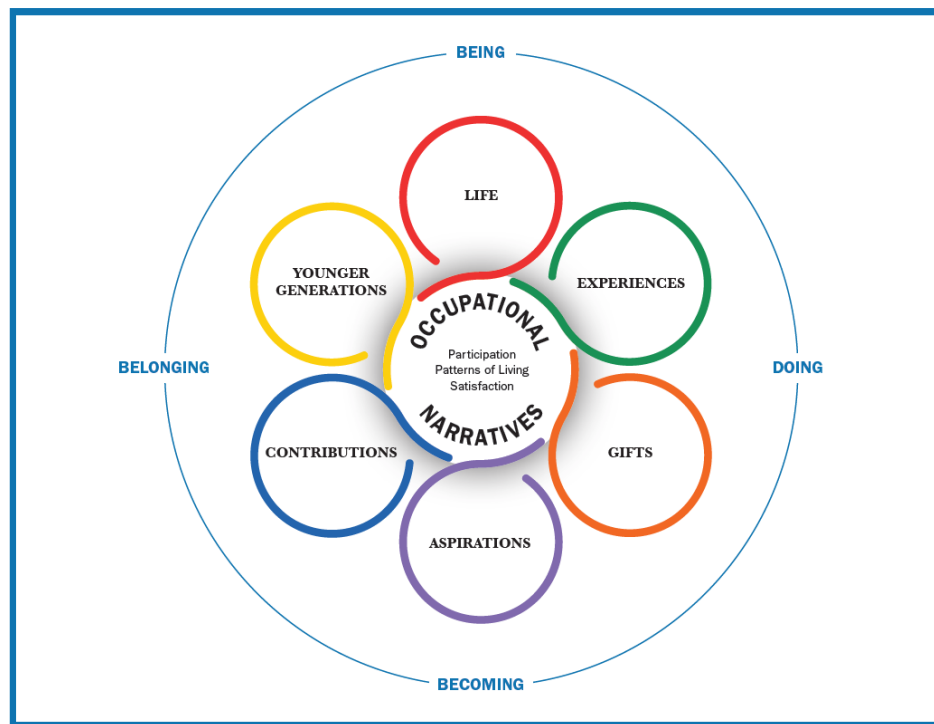
appreciative life review model and process (see Figures 9, 10, and 11). As such, Onori Hansen (2017) defined the occupational narrative as “individual and collective stories of being, doing, becoming, and belonging” (Slide 6).

Being (Merriam-Webster, n.d.), a simple yet complex concept, is generally described by terms such as existence, life, and essence or the distinctive nature of a person. Kabat-Zinn (2001) introduced the western world to mindfulness and mindful-based stressed reduction (MBSR), a contemporary meditative approach developed from the Buddhist tradition to treat pain, anxiety, and depression. Mindfulness is essentially a *being* state, and MBSR presents the pragmatic methods and tools to learn how *to be* and how *to be still*. A significant amount of scientific evidence has been published about the effectiveness of MBSR and has yielded mixed results (Goyal et al., 2014; Stetka, 2017; Van Dam, 2018).

Doing, also referred to as occupational participation and performance by occupational therapists, is an easier concept to understand. However, it is characteristically but not obviously multidimensional. For example, participation, performance, and engagement are doing concepts, yet they have different definitions. The “Occupational Therapy Practice Framework: Domain and Process” (AOTA, 2020) has adopted the World Health Organization’s definition of participation, which is “involvement in a life situation or occupation” (WHO, 2001, p. 10). Whereas, “Occupational performance is the accomplishment of the selected occupation resulting from the dynamic transaction among the client, their contexts, and the occupation” (AOTA, 2020, p. 8). Although occupational performance involves both competence and a targeted outcome, engagement is distinguished by the volitional performance of an occupation that involves not only the interaction of mind, body, and spirit but also occurs within a supportive context and environment as well (AOTA, 2020).

Figure 9

Phase Three Concept Map of the L.E.G.A.C.Y.® Appreciative Life Review Model

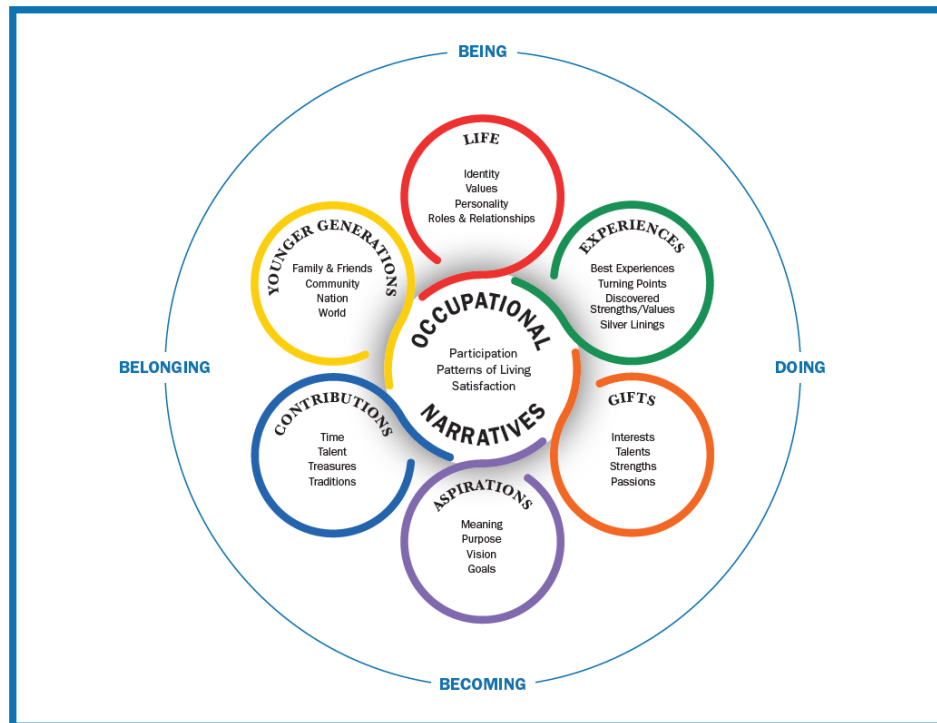


The ordinariness of occupational participation, performance, and engagement tends to mask its power to influence health and well-being. Regardless, doing is an expression of our being or essence as well as a mechanism for personal growth, self-fulfillment, social interactions, community contributions, and societal development (Wilcock, 2002; Wilcock & Hocking, 2015).

Becoming instills the concept of a future to being and doing. It is the process of human growth, development, and transformation. As Fromm (1947) eloquently stated, “Man’s main task in life is to give birth to himself, to become what he potentially is” (p. 237). The state of flow (Csíkszentmihályi, 2009) may be the best outwardly visible manifestation of becoming. Flow is a state of being totally immersed in an experience for its own sake by engaging in a *just right challenge*, which creates a sense of timelessness and loss of self-consciousness. Essentially, flow is the state and process of becoming.

Figure 10

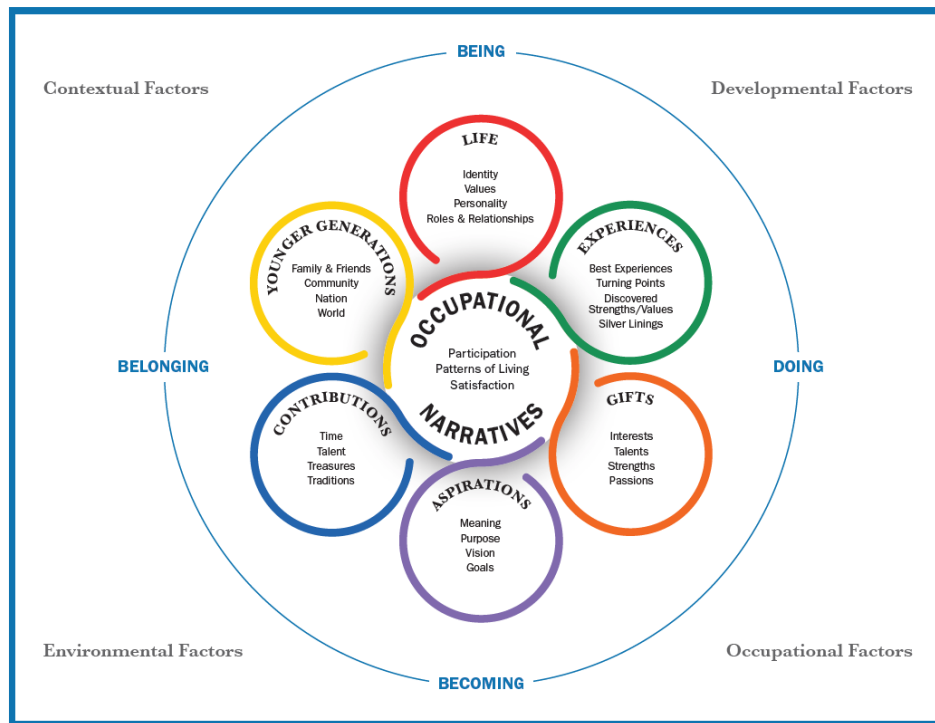
Phase Three Concept Map of the L.E.G.A.C.Y.® Appreciative Life Review Model with Detail of Core Areas



According to Brown (2015), *belonging* is “the innate human desire to be part of something larger than us” (p. 145). In her book, *Braving The Wilderness: The Quest for True Belonging and the Courage to Stand Alone*, Brown (2017) shared her current qualitative research, which indicates that “true belonging only happens when we present our authentic, imperfect selves to the world, [and] our sense of belonging can never be greater than our level of self-acceptance” (p. 32). Essentially, she is stating that one must accept and belong to oneself in order to be part of the larger sociocultural contexts that are personally relevant. Ideally, a sense of true belonging is one of the positive outcomes of an appreciative life review.

Figure 11

Phase Three Concept Map of the L.E.G.A.C.Y. Appreciative Life Review Model with Detail of Core Areas and Influencing Factors



After integrating narrative therapy; the PEOP model; and the concepts of being, doing, becoming, and belonging into the L.E.G.A.C.Y. appreciative life review model, the focal point of the model shifted to the creation of appreciative and meaning-focused occupational narratives. I theorized that appreciative and meaning-focused occupational narratives drive the development of purpose and support occupational participation, healthy patterns of living, and life satisfaction by facilitating being, doing, becoming, and belonging. Additionally, meaning-focused occupational narratives that are appreciative (values-oriented and strengths-based) encourage the creation of redemption stories that foster the development of positive psychosocial resources and healthy adaptive responses.

In summary, the L.E.G.A.C.Y. appreciative life review model has evolved into an occupation-based framework and process that is supported by interdisciplinary theories and integrates narrative therapeutic approaches with *doing* and guided reflection to facilitate (a) the development of positive psychosocial resources, (b) healthy adaptive responses, (c) occupational participation and performance, (d) healthy patterns of living, and (e) life satisfaction and well-being. Occupational therapists' distinct contribution to the life review and reminiscence processes is facilitating the process of reauthoring, reframing, and reinterpreting occupational narratives *through* the powerful process of being, doing, becoming, and belonging (Wilcock & Hocking, 2015). Reauthoring and reinterpreting occupational narratives through occupational participation and performance supports and internalizes changes in an individual's identity, values, beliefs, aspirations (purpose and meaning in life) goals, and behavior.

Pilot Study

Overview and Hypotheses

The overall aim of the research was to explore the effectiveness of the appreciative life review on facilitating life satisfaction and the development of positive psychosocial resources (Onori Hansen, 2016, 2017). More specifically, the L.E.G.A.C.Y. appreciative life review model (Onori Hansen, 2016, 2017) was investigated to gather preliminary data about the concept of a values-centered, strengths-based, and meaning-focused (appreciative) approach to the life review. Six hypotheses were investigated. I predicted that there would be no statistically significant interaction between time and treatment for the intervention and control groups on measures of the following:

- Composite Negative Attributional Style (CoNeg; Hypothesis 1) as assessed by the Attributional Style Questionnaire (ASQ; Peterson et al.,

1982; Seligman, 1984).

- Composite Positive Attributional Style (CoPos; Hypothesis 2) as assessed by the ASQ (Peterson et al., 1982; Seligman, 1984).
- Composite Positive minus Composite Negative Attributional Style (CPCN; Hypothesis 3) as assessed by the ASQ (Peterson et al., 1982; Seligman, 1984; Obtained permission for use of the ASQ from the University of Pennsylvania Positive Psychology Center on January 5, 2018).
- Life satisfaction (Hypothesis 4) as assessed by the Quality of Life Inventory (QOLI; Frisch, 1994).
- The presence of meaning in life (Hypothesis 5) as assessed by the Meaning in Life Questionnaire (MLQ; Steger et al., 2006).
- The search for meaning in life (Hypothesis 6) as assessed by the MLQ (Steger et al., 2006).

Study Design

A pilot study was conducted to assess the effect of the L.E.G.A.C.Y. appreciative life review model on the attributional style, life satisfaction, and the search for and presence of meaning in life of college students. A quasi-experimental design was used because the appreciative life review is an emerging concept, and funding was unavailable to support the research. The Winona State University (WSU) Institutional Review Board approved the study, and it was conducted on the WSU campus. A convenience sample consisting of eight student volunteers in the intervention group and nine student volunteers in the control group were recruited for the study. The intervention group was enrolled in the one-credit elective course, L.E.G.A.C.Y.[®] Life Review: Creating a Meaningful Life and Lasting Legacy through the WSU

Counselor Education Department. The course was delivered in a one-and one-half day workshop format (14 total contact hours [12 hours in class and 2 hours of homework]), and students chose a grading option of A to F (a letter grade) or Pass/Fail. Students who chose the letter grade option were required to write a reflection paper. A total of 55 students were enrolled in the course. A larger sample was not recruited for the study due to the students' limited availability to participate in the pretest and posttest assessment sessions.

Participants

Participants in the intervention group were recruited via a standardized group email sent to the 55 students enrolled in the course. A campus-wide announcement in the university's weekly electronic newsletter was used to recruit participants for the control group. Inclusion criteria included being 18 years or older and an undergraduate student. Nontraditional students (ages 24 and older) were encouraged to participate in the study. Eight students who had enrolled in the L.E.G.A.C.Y. course volunteered to participate in the study. A group of nine undergraduate social work students volunteered to participate in the study and were assigned to the control group. Sociodemographic characteristics of the participants at baseline are presented in Table 3. All participants completed both the pretest and posttest phases of the study. Participants in the intervention and control groups were entered into a random drawing to win one of two \$50 gift cards for participating in the study. A separate drawing was held for each group so that the participants in each group had an equal chance of winning a gift card.

Measures and Materials

Attributional Style Questionnaire

The ASQ (Peterson et al., 1982; Seligman, 1984) was used to measure three dimensions of attributional style: internal or external, stable or unstable, and global or specific. Attributional

style is an individual's explanatory style or how they interpret the causes of good and bad events. When an individual experiences an uncontrollable (good or bad) event, they typically demonstrate a positive or negative explanatory or attributional style (see Table 4). People who are prone to low self-esteem and depression tend to explain or interpret negative (bad) events from a combination of internal, global, and stable attributional lenses. Additionally, depressed individuals tend to explain or interpret positive (good) events from a combination of external, specific, and unstable attributional lenses. Conversely, people with healthy self-esteem tend to have an attributional style that is reversed. The ASQ composite scores (Composite Negative Attributional Style, Composite Positive Attributional Style, and the Composite Positive minus Composite Negative) are more strongly related to the presence or absence of depression than the specific attributional dimensions. A positive change in attributional style (decreases in the CoNeg score, increases in the CoPos score, and increases in the CPCN score) may be a measurable indicator that an individual has learned to reinterpret the causes of bad and/or good life events. Alpha coefficients indicate that the internal reliability of the ASQ composite scales for good events and bad events are .75 and .72, respectively. The composite ASQ scores (CPCN, CoNeg, and CoPos) are considered the most reliable and valid predictors of depression symptomatology because the discriminative validity between the three individual dimensions (control, generalizability, and stability) as measured by the ASQ is not considered precise (Peterson et al., 1982).

Quality of Life Inventory

The QOLI (Frisch, 1994) was used to measure life satisfaction because the assessment generates a weighted satisfaction score (importance multiplied by satisfaction) for 16 subscales (areas of life). Areas of life measured by the QOLI include health, self-esteem, goals and values,

Table 3*Sociodemographic Characteristics of Study Participants at Pretest*

Baseline characteristic	Intervention Group		Control Group		Full Sample	
	<i>n</i>	%	<i>n</i>	%	<i>n</i>	%
Gender						
Female	7	87.5	6	66.7	13	76.5
Male	1	12.5	3	33.3	4	23.5
Age ^a						
Marital status						
Single	2	25	4	44.4	6	35
Married	4	50	0	0	4	23.5
Committed Relationship	1	12.5	5	55.6	6	35
Divorced & Remarried	1	12.5	0	0	1	6.5
Children ^b	4	50	0	0	4	23.5
Highest educational level						
Associate degree earned/pursuing	5	62.5	1	11	6	35
Bachelor's degree						
Pursing Bachelor's degree	3	37.5	8	89	11	65
Race/Ethnicity						
White	6	75	8	89	14	82
Black	0	0	0	0	0	0
Hispanic	0	0	1	11	1	6
Asian	2	25	0	0	2	12
Area of Study (Major)						
Social Work	1	12.5	9	100	10	58.5
Nursing	4	50	0	0	4	23.5
Health Care Admin/Leadership	1	12.5	0	0	1	6
Individualized Studies	1	12.5	0	0	1	6
Individualized Studies & Business Admin	1	12.5	0	0	1	6

^a Intervention group: $n = 8$, Mean age = 34.63 years old (Range = 21–51; $SD = 10.39$). Control group: Mean age = 25 years old (Range = 19–49; $SD = 10.46$). ^b Reflects the number and percentage of participants who identified being a parent.

money, work, play, learning, creativity, helping, love, friends, children, relatives, home, neighborhood, and community. Additionally, the subscales are used to calculate an overall (composite) QOL score. A *T* score is calculated from the composite QOL score and converted to a percentile score. Four descriptive QOL classifications (very low, low, average, and high) correspond to a percentile score range. The alpha coefficients for the sum of the weighted satisfaction scores are .79, which indicates strong internal reliability. Convergent validity was demonstrated via positive correlations with the Satisfaction with Life Scale ($r = .56, p < .001$; Frisch, 1994) and Quality of Life Index ($r = .75, p < .001$; Frisch, 1994). A change from one overall QOL classification to the next highest QOL classification is considered clinically significant.

Table 4*Dimensions of Attributional Style*

Three Dimensions of Attributional Style		
Internal Attributions <i>Events are caused by something about the person (self)</i>	Control	External Attributions <i>Events are caused by something about the situation</i>
Specific Attributions <i>Events are caused by something specific or circumscribed</i>	Generalizability	Global Attributions <i>Events are caused by something present in a variety of situations</i>
Stable Attributions <i>Events are caused by non-transient factors</i>	Stability	Unstable Attributions <i>Events are caused by transient factors</i>

Meaning in Life Questionnaire

The MLQ (Steger et al., 2006) was used to measure the presence of meaning in life and search for meaning in life. Subscale scores for the presence of meaning in life (MLQ-P) and search for meaning in life (MLQ-S) are calculated separately. The internal consistency (reliability) of the MLQ-P and MLQ-S subscales are $\alpha = .81$ to $.86$ and $\alpha = .84$ to $.92$, respectively. Convergent validity of the MLQ-P and MLQ-S subscales are $\alpha = .86$ and $\alpha = .87$, respectively, based upon correlations with multiple other measures of well-being. The MLQ is designed to measure meaning in life across the entire continuum of human functioning. Therefore, the MLQ does not have cut-off scores to indicate the presence or absence of psychological disorders. However, general guidelines are provided to interpret the MLQ scores (see Table 5).

Procedures

The principal investigator (PI) met with the intervention group participants 1 hour before the intervention (1½ day L.E.G.A.C.Y. workshop) was started to provide and obtain informed consent, collect demographic data, and administer the pretest measures. This meeting was conducted in a different classroom than the intervention. Each participant was provided with a packet that included a written copy of the informed consent and the ASQ, QOLI, and MLQ assessments with their assigned study code numbers. The PI explained the risks and benefits of participation to the group and emphasized that participation, non-participation, or withdrawal from the study would not affect their course grades. After answering questions and obtaining written informed consent, participants were instructed to write their demographic data (age, gender, marital status, parental status, race, education level, and college major) on the QOLI test booklet and then proceed to take the assessments in the order provided (QOLI, MLQ, and ASQ).

by carefully reading the instructions and completing one assessment before beginning the next one. All assessments were administered in a paper-pencil format. When a participant had completed the assessments, they submitted them to the PI who then gave them a reminder card with their study code number and dismissed them from the classroom. Participants were issued reminder cards with their assigned study codes in order to maintain deidentification during administration of the posttest measures. The PI conducted the same process without any discussion about the intervention with the control group in a classroom setting.

Approximately 4 weeks after the intervention was conducted and all assignments had been submitted, the PI administered the posttest measures in the same order (QOLI, MLQ, and ASQ) to each participant of the intervention group. Group administration of the posttest measures was not feasible with the intervention group participants, so the assessments were individually administered to each participant in a quiet meeting room. Participants were instructed to write their study code numbers, not names, on each assessment to preserve the deidentification of the results. The PI conducted a group administration of the posttest measures with the control group in the same classroom 4 weeks after the group had taken the pretest measures. Again, the posttest measures were administered in the same order (QOLI, MLQ, and ASQ) to the control group and participants wrote their study codes on the assessments. The PI handscored all the assessments and triple checked the results for accuracy.

Data Analysis

A two-way repeated measures ANOVA was run using IBM SPSS Statistics 26 to determine the effect of different treatments over time for attributional style, QOL, and the search for and presence of meaning in life. The data were normally distributed with no outliers and met the assumptions for a two-way repeated measures ANOVA.

Table 5*Guidelines to Interpret Meaning in Life Questionnaire Scores**

Presence of Meaning Subscale		Search for Meaning Subscale	Interpretation
Above 24	and	Above 24	Person feels their life has a valued meaning and purpose but is still actively exploring that meaning and purpose. Life's meaning is viewed as an unfolding and deepening process. Focus: What can my life mean?
Above 24	and	Below 24	Person feels their life has valued meaning and purpose but is not actively exploring that meaning or seeking meaning. Focus: Satisfied with what makes life meaningful, why they are here, and what they want to do.
Below 24	and	Above 24	Person feels their life does <i>not</i> have a valued meaning and purpose and is actively searching for someone or something that will give life meaning or purpose. Focus: Likely feeling lost and distressed.
Below 24	and	Below 24	Person feels their life does <i>not</i> have a valued meaning and purpose and is not actively exploring or seeking meaning. Focus: Thinking about meaning or purpose is not interesting or important.

Note. (Steger, 2010).

Chapter 4: Results

A two-way repeated measures ANOVA was run to determine the effect of different treatments over time on attributional style (CoNeg, CoPos, and CPCN scores). Analysis of the studentized residuals as assessed by the Shapiro-Wilk test of normality demonstrated that there was normality. No outliers were present as indicated by no studentized residuals greater than approximately 3 standard deviations. There was no need to test for sphericity for the interaction term as assessed by Mauchly's test because there were only two levels of each factor. Data are mean plus or minus standard deviation unless otherwise stated. There was no statistically significant interaction between treatment and time on any measure of attributional style CoNeg, $F(1, 7) = 1.952, p = .212$, partial $\eta^2 = .245$, CoPos, $F(1, 7) = 1.640, p = .248$, partial $\eta^2 = .215$, CPCN, $F(1, 7) = .046, p = .837$, partial $\eta^2 = .008$. Therefore, simple main effects were run. The main effect of the treatment group on attributional style was not statistically significant on any dimension CoNeg, $F(1, 7) = 2.176, p = .191$, partial $\eta^2 = .226$, CoPos, $F(1, 7) = .535, p = .492$, partial $\eta^2 = .082$, CPCN, $F(1, 7) = 2.886, p = .140$, partial $\eta^2 = .325$. Additionally, the main effect of time was not statistically significant on any measure of attributional style CoNeg, $F(1, 7) = .509, p = .503$, partial $\eta^2 = .078$, CoPos, $F(1, 7) = .993, p = .358$, partial $\eta^2 = .142$, CPCN, $F(1, 7) = .065, p = .807$, partial $\eta^2 = .011$.

A two-way repeated measures ANOVA was run to determine the effect of different treatments over time on QOL. Analysis of the studentized residuals showed that there was normality as assessed by the Shapiro-Wilk test of normality. No outliers were identified as assessed by a lack of studentized residuals greater than approximately 3 standard deviations. There was no need to test for sphericity for the interaction term as assessed by Mauchly's test because there were only two levels of each factor. Data are mean plus or minus standard

deviation unless otherwise stated. There was no statistically significant interaction between treatment and time on quality of life, $F(1, 7) = 1.041$, $p = .342$, partial $\eta^2 = .129$. As a result, simple main effects were run. The main effect of the treatment on QOL was statistically significant and achieved a moderate effect size, $F(1, 7) = 9.021$, $p = .02$, partial $\eta^2 = .563$. The main effect of time was not statistically different, $F(1,7) = .441$, $p = .528$, partial $\eta^2 = .059$. Both groups improved from pretest to posttest.

A two-way repeated measures ANOVA was run to determine the effect of different treatments over time on the presence of meaning in life (MIL-P) and search for meaning in life (MIL-S). Analysis of the studentized residuals as assessed by the Shapiro-Wilk test of normality showed that there was normality. No outliers were present as assessed by the absence of studentized residuals greater than approximately 3 standard deviations. There was no need to test for sphericity for the interaction term as assessed by Mauchly's test because there were only two levels of each factor. Data are mean plus or minus standard deviation unless otherwise stated. There was no statistically significant interaction between treatment and time on MIL-P, $F(1, 7) = .762$, $p = .416$, partial $\eta^2 = .113$ or on MIL-S, $F(1, 7) = 3.719$, $p = .095$, partial $\eta^2 = .347$. Thus, simple main effects were run. The main effect of the treatment group on MIL-P, $F(1, 7) = 1.840$, $p = .224$, partial $\eta^2 = .235$, and on MIL-S, $F(1, 7) = .170$, $p = .693$, partial $\eta^2 = .024$ was not statistically different. Additionally, the main effect of time was not statistically different for MIL-P, $F(1,7) = 2.857$, $p = .142$, partial $\eta^2 = .323$, or MIL-S, $F(1, 7) = .170$, $p = .693$, partial $\eta^2 = .024$.

Chapter 5: Discussion

Emerging adults are challenged to meet the rapidly changing demands of postsecondary education and adult working life. Moreover, the prevalence of mental health issues in this population has significantly affected student retention and graduation rates at higher education institutions (Gruttadaro & Crudo, 2012; Kognito, 2017; Wyatt et al., 2017). Significant role impairments in the areas of home management, academic work, close relationships, and social life have been reported by traditional-aged (18-24 years) college students with and without mental health conditions (Alonso et al., 2018; Gruttadaro & Crudo, 2012). Due to underdeveloped personal psychosocial resources (e.g., resilience, grit, social support, emotional regulation, and self-efficacy, environmental mastery) and limited independent living skills, many emerging adults have been unprepared to adjust to the unstructured living and learning environments of higher education. Rapidly increasing rates of anxiety, depression, and other mental health conditions have exacerbated these role impairments in the United States and abroad (Alonso et al., 2018). Academic success is paramount in postsecondary education for both students and institutions. However, academic success may be unattainable and unsustainable without a foundation of mental health and independent living skills. Students' mental health, personal psychosocial resources, and self-sufficiency with activities of daily living are critical factors for colleges and universities to consider when developing, designing, and delivering student support services for *all* students.

Regardless of institution type, most existing student support services and FYE programs in higher education are focusing on academic success strategies, presenting information about campus resources, and cultivating a connection to the university (Young, 2018a, 2018b). However, a common gap in FYE curricula and student services appears to be a paucity of

programs that address students' mental health, well-being, and personal development. The three broad outcome domains traditionally used to measure FYE program effectiveness and success include credit accumulation, degree attainment, and general academic achievement.

Interestingly, the effect of FYE programs on students' psychosocial adjustment to college as well as the relationship between psychosocial adjustment and academic success, retention, persistence, and degree attainment is not typically measured (What Works Clearinghouse, 2016; Young, 2018a, 2018b). A plethora of adverse outcomes may result from mental health issues, underdeveloped psychosocial resources, and limited independent living skills in college students. These adverse outcomes may include (a) impoverished learning, (b) underdeveloped potential, (c) altered career trajectories, (d) poor QOL, (e) decreased postsecondary retention and graduation rates, (f) decreased socioeconomic status due to lower lifetime earnings, (g) the decreased financial viability of colleges and universities, and (h) workforce shortages in the global knowledge economy (Alonso et al., 2018; Gruttadaro & Crudo, 2012; Johnson, 2012; McFarland et al., 2019; U.S. Department of Education, 2015; Whistle, 2019; Winzer et al., 2018).

Occupational therapists have a longstanding history of providing services in elementary and secondary education (Orentlicher et al., 2017). However, the provision of occupational therapy services in higher education is an emerging practice area. Since the early 2000s, occupational therapists have successfully advocated for, developed, and delivered occupational therapy services in higher education for students with mental health issues, learning disorders, and other disabilities (Keptner et al., 2016; Keptner & McCarthy, 2020; Quinn et al., 2014; Spencer et al., 2018). Occupational therapy programs in postsecondary education whether delivered individually or in groups have provided students with a supportive bridge from

traditional counseling and psychotherapy (talk therapies) to occupational participation and performance (doing) in meaningful and relevant contexts. College students who received occupational therapy services in postsecondary settings have demonstrated improvements in their capacity to apply and generalize newly learned psychosocial, emotional, academic, and life skills. Additionally, students who participated in occupational therapy during their collegiate career exhibited increased retention rates, GPA, and graduation rates (Keptner et al., 2016; Keptner & McCarthy, 2020; Quinn et al., 2014; Spencer et al., 2018).

Considerable shifts in social norms during the late 20th and early 21st centuries have significantly altered the developmental trajectories of individuals from late adolescence to early adulthood, primarily in post-industrialized societies. As a result, Arnett (2000) proposed a new developmental stage, emerging adulthood, which is situated between adolescence and young adulthood. Emerging adulthood is characterized by instability, identity exploration, and a sense of possibilities. Maladaptive responses and mental health issues are common during emerging adulthood as twenty-somethings learn to master independent living skills, obtain postsecondary education or training, and work while seeking to understand the purpose and meaning of their lives (Baxter Magolda, 1999, 2001, 2020; Korgan & Durdella, 2016; Robbins & Wilner, 2001; Robinson, 2015). Although it is not surprising that most college students are at a meaning-making crossroads (Korgan & Durdella, 2016), unstable sources of meaning have been related to decreased mental health, well-being, social connectedness, and life satisfaction (Steger & Kashdan, 2013). Conversely, the presence of meaning in life has been positively correlated with mental health, overall well-being, and life satisfaction across the lifespan (Cox, 2015; Eakman, 2015; Hooker et al., 2019; Ikiugu, 2019; Lund et al., 2019; Steger, 2012; Steger et al., 2006, 2013; Steger & Kashdan, 2013; Trevisan, 2017). Moreover, the presence of meaning in life is

positively correlated and the search for meaning in life is negatively correlated with college adjustment (Trevisan et al., 2017).

Developing protective factors, specifically positive mental health (Truskauskaite-Kuneviciene et al., 2020), academic self-sufficiency, and optimism (Kahn, 2016; Kahn et al., 2019), have been shown to compensate for existing vulnerabilities and stressors that contribute to maladjustment in emerging adults. There is evidence that also supports the value of preventively building resilience through normal developmental experiences (Svetina, 2014), such as overcoming academic challenges and mastering independent living skills. Interestingly, resilience was significantly and positively related to a single character strength: curiosity. The specific character strengths that most contributed to academic achievement were curiosity and love of learning (Karris Bachik et al., 2020). However, love of learning was one of the character strengths least related to life satisfaction. Multiple researchers (Pascarella & Terenzini, 2005; Schutte & Malouff, 2002, 2019; Wyatt et al., 2017) have emphasized that developing and strengthening students' competencies with psychosocial (non-academic) skills and resources are essential for facilitating adjustment, mental health, and academic success as well as increasing retention and graduation rates. Nevertheless, colleges and universities have commonly used cognitive-based skill-building programs to facilitate resilience with mixed results (Bettis et al., 2017; Coiro et al., 2017; Shatkin et al., 2016).

Innovative approaches have been introduced to develop and strengthen the protective factors, psychosocial resources, and positive mental health of emerging adults, including occupation-based interventions that bridge psychoeducation and performance (doing; Keptner, 2017; Keptner et al., 2016; Keptner & McCarthy, 2020; Quinn et al., 2014; Spencer et al., 2018). Recent evidence has demonstrated that life review and reminiscence can significantly improve

the mental health and well-being of individuals across the lifespan (Ando, 2003; Arkoff et al., 2006; Bohlmeijer et al., 2007; Chippendale & Bear-Lehman, 2012; Cox, 2015, Hallford & Mellor, 2016a, 2016b, 2016c; Hallford et al., 2013; Westerhof et al., 2010). Consequently, life review and reminiscence have transpired into therapeutic approaches that are used with individuals from emerging adulthood to midlife, especially during times of transition and change.

A nascent concept, shifting the temporal context of life review and reminiscence interventions to younger ages, is an innovative intervention that may be implemented to facilitate healthy adaptive responses during expected and normal life transitions (Ando, 2003; Arkoff et al., 2006; Cox, 2015, Hallford & Mellor, 2016a, 2016b, 2016c; Hallford et al., 2013). There is preliminary evidence to support the use of life review and reminiscence with emerging adults as an effective intervention to facilitate identity development, adaptive problem-solving, the development of positive psychological resources, and ongoing opportunities for life course corrections (Ando, 2003; Arkoff et al., 2006; Cox, 2015; Hallford & Mellor, 2016a, 2016b, 2016c; Hallford et al., 2013; Onori Hansen, 2017). Psychosocial resources, such as self-efficacy, resilience, environmental mastery, a sense of competence, and meaning in life, are essential for thriving during stable periods and healthy adjustment during times of transition. Nevertheless, only one researcher (Arkoff et al., 2006) implemented an extended (14 week) life review intervention with a formal curriculum to a group of first-year college students. Although the feasibility of using life review and reminiscence to develop psychosocial resources and facilitate adjustment with emerging adults has yielded promising outcomes, virtually no structured programs or curricula currently exist for use in education, clinical, or community settings.

The L.E.G.A.C.Y. appreciative life review model has been created, designed, and developed as a framework and process to shift the context of the life review to earlier ages and

developmental stages. The premise of the L.E.G.A.C.Y. model is that regardless of age, engaging in a life review can be a therapeutic process or educational experience that facilitates personal growth, healing, meaning-making, occupational participation, the development of positive psychosocial resources, and healthy adaptive responses (i.e., adjustment and coping). As an occupation-centered model supported by interdisciplinary theories, L.E.G.A.C.Y. is a synthesis of lifespan development (Erikson 1950, 1968, 1982), the traditional life review (Butler, 1963), appreciative inquiry (Cooperrider, 1986), narrative therapy (White & Epston, 1990), and the person-environment-occupation-performance model from occupational therapy (Bass et al., 2017; Baum & Christiansen, 2005; Baum et al., 2015; Christiansen & Baum, 1991, 1997; Christiansen et al., 2015). Key distinctions between the L.E.G.A.C.Y. appreciative life review model and traditional approaches to life review and reminiscence are the integration of appreciative inquiry and experiential elements (i.e., occupational participation or doing) into a process that is both retrospective and prospective.

The purpose of the retrospective-prospective L.E.G.A.C.Y. model is to not only facilitate the creation of appreciative and meaningful occupational narratives but is to facilitate a coherent narrative identity as well. The process of deconstructing, evaluating, reconstructing, and integrating one's past, present, and future life through an appreciative lens also supports the development of a narrative identity that incorporates redemption sequences and generativity scripts. Furthermore, occupational narratives that feature a coherent narrative identity and generativity scripts can support a positive transition to adult life (McAdams & Guo, 2014) by developing purpose, meaning in life, and positive psychosocial resources. Purpose, meaning in life, and positive psychosocial resources are essential for mental health, well-being, healthy patterns of living (habits and routines), life satisfaction, and successful participation and

performance in all life roles.

The effect of a short-term (1½ day) workshop, L.E.G.A.C.Y. appreciative life review intervention on the attributional style, life satisfaction, and the search for and presence of meaning in life was measured in a small sample of college students. Attributional style was measured to assess changes in explanatory style that would indicate the development of positive psychosocial resources. More specifically, positive changes in attributional style would be reflected in decreased CoNeg scores, increased CoPos scores, and increased CPCN scores. A two-way repeated measures ANOVA indicated that there was no statistically significant difference on any dimension of attributional style (CoPos, CoNeg, and CPCN) for either the intervention group or control group. More specifically, no simple main effect, interaction effect, or effect of time was observed for attributional style. Thus, I failed to reject the null for hypotheses one, two, and three (accepted).

The QOLI (Frisch, 1994) was used to measure global changes in life satisfaction because it generates a composite QOL score based on the weighted satisfaction score (importance multiplied by satisfaction) in 16 areas of life. Composite QOL scores are converted to percentile scores that correspond to four QOL classifications (very low, low, average, and high). A change from one QOL classification to the next highest classification is considered a clinically significant change. A two-way repeated measures ANOVA showed a statistically significant main effect on the intervention group ($p = .02$) and in the control group. However, there was no statistically significant interaction effect between treatment and time on QOL, and the main effect of time was not statistically significant. Therefore, I failed to reject (accepted) the null for hypothesis four that there would be no statistically significant difference in life satisfaction between the intervention group and control group. However, the main effect achieved a moderate

effect size (partial $\eta^2 = .563$) on QOL, suggesting that an increased sample size and increased intervention dosage has the potential to yield a statistically significant difference between the intervention and control groups.

The MLQ (Steger et al., 2006) was used to measure changes in the search for and the presence of meaning in life. While MLQ scores do not indicate the presence or absence of a mental health disorder, the presence of meaning in life has been correlated with well-being and positive psychological health. Conversely, the search for meaning in life is generally related to psychological distress. However, individuals with a high presence of meaning in life who are also actively searching for meaning are less likely to experience decreases in well-being because their search tends to be a deepening process that enhances self-understanding. A two-way repeated measures ANOVA indicated no statistically significant interaction effect between treatment and time on the MIL-P or MIL-S subscales of the MLQ. Additionally, no statistically significant difference was demonstrated for a simple main effect of treatment or effect of time on either the MIL-P or MIL-S subscales. As result, I failed to reject the null for hypotheses five and six (accepted).

Several research challenges introduced bias and confounding variables into the pilot study and likely affected the results. First, the use of a small convenience sample resulted in selection bias for both the intervention and control groups. Second, individuals who self-select to participate in a study on life satisfaction and meaning in life are more likely to have inherent (and unidentified) traits and circumstances that drive personal learning, growth, and development. Third, some volunteers may have been motivated to participate in the study to win a prize. Although the sociodemographic characteristics of the sample were normally distributed and not statistically different between groups (on measures of sex, race/ethnicity, and

relationship status), the small sample size significantly decreased the statistical power of the study.

During the study, the primary investigator (PI) implemented a standardized data collection protocol with both the intervention and control groups. Because the PI conducted the study without additional personnel, inter-examiner variability was eliminated. However, the lack of examiner blinding and social interactions with the study participants before and after the data collection process may have unintentionally caused examiner bias. Although the study participants were de-identified, it was possible for the PI to ascertain the identity of study participants based upon their sociodemographic characteristics and the small size of the study. The PI's knowledge about the participant's sociodemographic data may have influenced her interactions with the participants during the postintervention data collection.

Additional variables that may have affected the results include the small dosage size of the intervention (a 1½-day workshop format) and the sensitivity of the ASQ, QOLI, and MLQ instruments to detect significant changes over a short period of time. Finally, environmental influences that were not controlled may have affected the results, including (a) the need to use different locations for the pretest and posttest data collection (intervention group only), (b) a change from group to individual administration of the posttest measures (intervention group only), (c) the administration of pretest measures about 1 week before midterm exams, (d) and the collection of posttest measures about 1 week after spring break.

Despite having a normally distributed sociodemographic sample, the pilot study could have resulted in a Type II error due the small sample size. As a result, the study lacked the statistical power needed to definitively determine the effectiveness of the L.E.G.A.C.Y. appreciative life review with a group of college students. Consequently, no significant

differences were found between the intervention and control groups on measures of attributional style, the search for meaning in life, or the presence of meaning in life. However, the main effect on QOL (life satisfaction) was statistically significant regardless of group, but no significant interaction effect was observed for treatment and time. The absence of an interaction effect on the QOL measure and the lack of significant changes on attributional style, the search for meaning in life, and presence of meaning in life were likely due to the short duration of the intervention dosage and a small sample size that limited the statistical power to detect short-term changes. The significant changes demonstrated by the control group on the QOL measure may be due to the respite provided by spring break.

The primary aims of this project were to introduce the L.E.G.A.C.Y. appreciative life review model and provide preliminary evidence for its feasibility with emerging adults in a higher education context. According to Bowen et al. (2009), an intervention is deemed feasible and warrants further research when initial findings indicate that it is relevant, sustainable, and effective. The areas of focus or guidelines for determining feasibility as proposed by Bowen et al. (2009) are acceptability, demand, implementation, practicality, adaptation, integration, expansion, and limited-efficacy testing (see Table 6).

The pilot study conducted on the L.E.G.A.C.Y. appreciative life review intervention in a higher education setting met several of the feasibility criteria. First, the L.E.G.A.C.Y. intervention was *acceptable* in that it was well-received by study participants and the students who did not participate in the study. The workshop participants substantiated this observation with a 100% overall satisfaction rating (Winona State University, 2018). Additionally, many students commented that they would prefer an increase in the frequency and duration of the intervention (course) in the form of a semester-long class. The students' request along with

WSU's support of the inaugural L.E.G.A.C.Y. course in 2016 and interest in offering the L.E.G.A.C.Y. course in the future also demonstrated a *demand* for the intervention. Furthermore, market research (Anderson et al., 2017) that targeted public and private four-year colleges and universities in the upper Midwest indicated a strong interest in the L.E.G.A.C.Y. appreciative life review. The survey respondents indicated that the L.E.G.A.C.Y. program would be well-suited for use in both the academic domain and student support services. Not surprisingly, these institutions also identified their top needs and priorities as student mental health (88.3%) and student retention (71.1%). In terms of *implementation* and *practicality*, the L.E.G.A.C.Y. appreciative life review was successfully delivered as planned in a real-world context with minimal challenges and limited resources. The primary challenge was delivering the program to a large class (55 students) without an assistant facilitator because there was not enough time to attend to each individual student and small group during the workshop.

The strengths of the L.E.G.A.C.Y. appreciative life review are its capacity for *adaptation* and *expansion*. In addition to its scalability, the L.E.G.A.C.Y. model and program may be implemented with individuals from late adolescence through late adulthood in a variety of formats and settings (education, community, clinical, non-profit, and corporate). Although *limited-efficacy testing* demonstrated that the L.E.G.A.C.Y. program can be easily integrated as a course in a college's curriculum, its wide-scale *integration* in the form of a campus-wide program (e.g., FYE or orientation) has not been tested. Nevertheless, the L.E.G.A.C.Y. appreciative life review program shows promise as an innovative student success framework that supports the integrated program delivery of student services from enrollment to graduation.

Limitations and Criticisms of Life Review and Reminiscence

Webster et al. (2010) conducted a critical review of the interdisciplinary literature and observed

Table 6*Guidelines to Determine the Feasibility of an Intervention*

Criteria for Feasibility	Definition
Acceptability	How individual recipients and stakeholders react or respond to the intervention.
Demand	Estimated or actual use of the intervention with a designated population or in a specific setting.
Implementation	The scope, likelihood, and process in which an intervention can be implemented as proposed and planned within a real-world (uncontrolled) context.
Practicality	The degree to which an intervention may be implemented when one or more resources (human, financial, time, and/or commitment) may be constrained.
Adaptation	The delivery of the intervention (format, content, or process) may be modified for different contexts and populations.
Integration	The extent or degree to which a program or intervention may be integrated into an existing infrastructure or system.
Expansion	The potential for a successful intervention or program to be scalable and/or used with different populations and delivered in other settings.
Limited-Efficacy Testing	The intervention or program is suitable for limited or preliminary testing with a convenience sample.

Note. (Bowen et al., 2009).

that limitations exist in life review and reminiscence research and practice. Limitations cited include (a) the lack of a clear conceptual model that distinguishes the differences between reminiscence and life review, (b) the lack of evidence for basic assumptions about life review (e.g., its universality in late adulthood), (c) conflicting evidence about its therapeutic efficacy, (d) limited availability of psychometric instruments to assess baseline and outcome measures, (e) poor experimental design of studies, and (f) a weak connection to other theoretical frameworks.

Consequently, I propose the L.E.G.A.C.Y. appreciative life review model (Onori Hansen, 2016, 2017) as a conceptual framework and process to guide future practice and research. The multi-faceted L.E.G.A.C.Y. model is supported by several interdisciplinary theoretical frameworks and provides a semi-structured approach to the life review that is feasible, practical, adaptable, and scalable. Moreover, the L.E.G.A.C.Y. model and process may be implemented with individuals (and groups) of all ages in multiple contexts as an intervention to facilitate the development of positive psychosocial resources, mental health, healthy transitions, and well-being. Evidence compiled since the late 20th century has demonstrated that life review and reminiscence interventions can improve the mental health and well-being of individuals across the lifespan. Further development and research of the L.E.G.A.C.Y. appreciative life review model is warranted to address the limitations of life review and reminiscence interventions as well as strengthen current evidence for their effectiveness.

Although Butler (1963) originally conceived the life review as a universal and developmental process that occurred during late adulthood, it has been applied effectively with multiple populations and ages (e.g., terminally ill children and adults, cognitively impaired, trauma survivors, incarcerated individuals, families, and college students). Haber (2006) examined Erikson's view that the life review is integral to achieving ego integrity during late adulthood. In his discussion, Haber pointed out that Erikson did not address why some older adults achieve ego integrity without conducting a life review, whereas others in late adulthood who do participate in a life review intervention continue to experience despair. Thus, the concept that life review is a universal process during old age has been questioned. Likewise, the notion that life review is a process exclusive to midlife and late adulthood has been debunked as research continues to emerge about the role of reminiscence and life review with children,

adolescence, and emerging adults as a facilitator of normal developmental milestones, positive transitions, euthymic mood, and healthy adaptive responses (Ando, 2003; Arkoff et al., 2006; Bluck & Gluck, 2004; Cappeliez, 2013; Cox, 2015; Graham et al., 2019; Hallford, 2016a, 2016b, 2016c; Hallford et al., 2013; Lata et al., 1997; McAdams & Guo, 2014; Salmon & Reese, 2016; Thomas & Briggs, 2016; Webster, 1994; Webster et al., 2010; Webster & Gould, 2007).

Limitations of the current studies with emerging and young adults include concerns about ecological and external validity due to intervention procedures that ranged from a very brief, online format (mean = 4.95 minutes) with no human interaction (Hallford & Mellor, 2016c) to one, 3-hour session (Ando, 2003) in a classroom setting, and 14 weekly, 50-minute sessions facilitated by university faculty and staff (Arkoff et al., 2006). Additional concerns are a lack of follow-up data (Ando, 2003; Arkoff et al., 2006; Hallford & Mellor, 2016c) and an overall dearth of randomized controlled studies, which limits the ability to assess the long-term impact of the interventions. Furthermore, effect sizes ranged from small (Hallford & Mellor, 2016c) to large (Hallford & Mellor, 2016b) or were not statistically analyzed (Ando, 2003; Arkoff et al., 2006; Webster & Gould, 2007). Other challenges of life review and reminiscence research are that it is subject to history, recall, or memory bias. Furthermore, the research has been criticized for its limited consideration of the sociocultural and demographic factors that may influence outcomes.

Implications and Recommendations for Practice and Research

The emerging L.E.G.A.C.Y. appreciative life review model presents a framework and process to create *appreciative and meaning-focused occupational narratives* with clients in occupational therapy. Appreciative and meaning-focused occupational narratives facilitate the development of purpose and psychosocial resources as well as support occupational participation, healthy patterns of living, and life satisfaction (Onori Hansen, 2017). Individuals of

all ages tend to reflect and review their life when they are affected by health issues that alter their personal narrative. Moreover, there is evidence to support the use of life review and reminiscence as therapeutic interventions to improve the mental health and well-being of individuals across the lifespan. Thus, integrating an appreciative life review into the occupational therapy process is particularly relevant to support healthy adaptive responses during recovery and rehabilitation. The L.E.G.A.C.Y. appreciative life review model also seamlessly aligns with the “Occupational Therapy Practice Framework” (AOTA, 2020) and is supportive of its overarching statement that occupational therapy’s domain is “Achieving health, well-being, and participation in life through engagement in occupation” (p. 5). Beyond occupational therapy, a variety of related professional disciplines (e.g., psychologists, counselors, and life and wellness coaches) may be trained to apply the L.E.G.A.C.Y. model with clients across multiple practice settings. For example, the model is appropriate for use with well individuals who are navigating normal or unexpected transitions as well as more targeted applications in career development, hospice and grief support, and addictions. Additionally, the L.E.G.A.C.Y. model is suitable for implementation in community, clinical, education, non-profit, and corporate settings.

While this PI focused her research and paper on the application of the L.E.G.A.C.Y. model with emerging adults in higher education settings, it may also be used with individuals from late adolescence through late adulthood to facilitate and support the following:

- The development of psychosocial resources and healthy adaptive responses.
- Normal and expected (psychosocial) developmental milestones.
- Positive changes in attributional style.
- The development of an appreciative mindset.
- The capacity to successfully navigate life transitions and change.

- An enhanced awareness and presence of purpose and meaning in life.
- Occupational participation and performance.
- Healthy patterns of patterns of living (habits and routines).
- The construction of appreciative life narratives and redemption stories to foster personal growth, relational reconciliation, and the resolution of unfinished business.
- Mental health, well-being, and overall life satisfaction.
- The creation of an enduring legacy.

Although there is a robust collection of literature on life review and reminiscence, the L.E.G.A.C.Y. appreciative life review model is the first to incorporate appreciative, retrospective-prospective, and experiential approaches into the life review process. An appreciative approach to life review is an optimal method for facilitating adaptive responses (adjustment and coping), identity development, redemption stories and generativity scripts, positive reframing, meaning making, forgiveness, acceptance, and personal growth. The retrospective and prospective lenses present a framework and process for deconstructing, evaluating; reconstructing; and integrating one's past, present, and future life. Finally, including experiential elements (i.e., doing or occupational participation) in the life review process supports and internalizes any constructive changes in an individual's occupational narrative.

Additional research is needed to explore the therapeutic effectiveness of life review and reminiscence with emerging and young adults. Likewise, further studies are needed to investigate the effects of the L.E.G.A.C.Y. appreciative life review on the development of psychosocial resources, purpose and meaning in life, occupational participation, healthy patterns of living, and life satisfaction. Furthermore, qualitative research of the L.E.G.A.C.Y. appreciative life review

model is recommended to examine its effectiveness at generating appreciative and meaning-focused occupational narratives.

References

AI Commons. (2017a, May 10). *5 classic AI principles*.

<https://appreciativeinquiry.champlain.edu/learn/appreciative-inquiry-introduction/5-classic-principles-ai/>

AI Commons. (2017b, November 14). *5-D cycle of appreciative inquiry*.

<https://appreciativeinquiry.champlain.edu/learn/appreciative-inquiry-introduction/5-d-cycle-appreciative-inquiry/>

Alonso, J., Mortier, P., Auerbach, R. P., Bruffaerts, R., Vilagut, G., Cuijpers, P., Demyttenaere, K., Ebert, D. D., Ennis, E., Gutiérrez-García, R. A., Green, J. G., Hasking, P., Lochner, C., Nock, M. K., Pinder-Amaker, S., Sampson, N. A., Zaslavsky, A. M., Kessler, R. C., & WHO WMH-ICS Collaborators. (2018). Severe role impairment associated with mental disorders: Results of the WHO world mental health surveys international college student project. *Depression and Anxiety*, 35(9), 802–814.

<https://doi.org/10.1002/da.22778>

American Occupational Therapy Association. (2020). Occupational therapy practice framework: Domain and process (4th ed.). *American Journal of Occupational Therapy*, 74(Suppl. 2), 7412410010. <http://doi.org/10.5014/ajot.2014.682006>

Amineh, R. J., & Asl, H. D. (2015). Review of constructivism and social constructivism. *Journal of Social Sciences, Literature and Languages*, 1(1), 9–16.

Anderson, J., Van Dalsen, T., De Falco, D., Ligmanowski, Z., & Ulmer, A. (2017). Market research for the L.E.G.A.C.Y.™ appreciative life review in higher education [unpublished manuscript]. Department of Management and Marketing, North Central College.

- Ando, M. (2003). The effects of short-and long-term life review interview on the psychological well-being of young adults. *Psychological Reports*, 93(2), 595–602.
<https://doi.org/10.2466/pr0.2003.93.2.595>
- Arkoff, A., Meredith, G. M., Bailey, E., Cheang, M. D., Richard, A., Griffin, P. B., & Niyekawa, A. M. (2006). Life review during the college freshman year. *College Student Journal*, 40(2), 263–270.
- Arnett, J. J. (2000). Emerging adulthood: A theory of development from the late teens through the twenties. *American Psychologist*, 55(5), 469–480. <https://doi.org/10.1037/0003-066X.55.5.469>
- Arnett, J. J. (2004). *Emerging adulthood: The winding road from the late teens through the twenties*. Oxford University Press.
- Arnett, J. J., & Schwab, J. (2012). *The Clark University Poll of Emerging Adults: Thriving, struggling, and hopeful*. Clark University. <http://www2.clarku.edu/clark-poll-emerging-adults/pdfs/clark-university-poll-emerging-adults-findings.pdf>
- Aucejo, E. M., French, J., Araya, M. P. U., & Zafar, B. (2020). The impact of COVID-19 on student experiences and expectations: Evidence from a survey. *Journal of Public Economics*, 191, Article 104271. <https://doi.org/10.1016/j.jpubeco.2020.104271>
- Bailey-Taylor, A. (2009). Advising adult students: Connecting Schlossberg's transition theory to the appreciative advising model. *The Mentor: Innovative Scholarship on Academic Advising*, 11.
- Bass, J. D., Baum, C. M., & Christiansen, C. H. (2017). Person-environment-occupation-performance model. In J. Hinojosa, P. Kramer, & C. B. Royeen (Eds.), *Perspectives on*

- human occupation: Theories underlying practice* (2nd ed., pp. 161–182). F. A. Davis Company.
- Baum, C. M., & Christiansen, C. H. (2005). Person-environment-occupation-performance: A model for planning interventions for individuals and organizations. In C. H. Christiansen, C. M. Baum, & J. D. Bass (Eds.), *Occupational therapy: Performance, participation, and well-being* (3rd ed., pp. 242–267). Slack.
- Baum, C. M., Christiansen, C. H., & Bass, J. D. (2015). The person-environment-occupation-performance model. In C. H. Christiansen, C. M. Baum, & J. D. Bass (Eds.), *Occupational therapy: Performance, participation, and well-being* (4th ed., pp. 49–55). Slack.
- Baxter Magolda, M. B. (1999). The evolution of epistemology: Refining contextual knowing at twentysomething. *Journal of College Student Development*, 40(4), 333-344.
- Baxter Magolda, M. B. (2001). *Making their own way: Narratives for transforming higher education to promote self-development*. Stylus Publishing.
- Baxter Magolda, M. B. (2020). *Making their own way: Narratives for transforming higher education to promote self-development*. Stylus Publishing.
- Bettis, A. H., Coiro, M. J., England, J., Murphy, L. K., Zelkowitz, R. L., Dejardins, L., Eskridge, R., Hieber Adery, L., Yarboi, J., Pardo, D., & Compas, B. E. (2017). Comparison of two approaches to prevention of mental health problems in college students: Enhancing coping and executive function skills. *Journal of American College Health*, 65(5), 313–322. <https://doi.org/10.1080/07448481.2017.1312411>

- Bluck, S., & Glück, J. (2004). Making things better and learning a lesson: Experiencing wisdom across the lifespan. *Journal of Personality*, 72(3), 543–572.
<https://doi.org/10.1111/j.0022-3506.2004.00272.x>
- Bohlmeijer, E., Roemer, M., Cuijpers, P., & Smit, F. (2007). The effects of reminiscence on psychological well-being in older adults: A meta-analysis. *Aging & Mental Health*, 11(3), 291–300. <https://doi.org/10.1080/13607860600963547>
- Bonsall, A. (2012). An examination of the pairing between narrative and occupational science. *Scandinavian Journal of Occupational Therapy*, 19(1), 92–103.
<https://doi.org/10.3109/11038128.2011.552119>
- Bowen, D. J., Kreuter, M., Spring, B., Cofta-Woerpel, L., Linnan, L., Weiner, D., Bakken, S., Kaplan, C. P., Squiers, L., Fabrizio, C., & Fernandez, M. (2009). How we design feasibility studies. *American Journal of Preventive Medicine*, 36(5), 452–457.
<https://doi.org/10.1016/j.amepre.2009.02.002>
- Bronfenbrenner, U., & Morris, P. A. (2006). The bioecological model of human development. In W. Damon, & R. M. Lerner (Eds.). *Handbook of child psychology: Theoretical models of human development* (6th ed., Vol. 1, pp. 793–828). John Wiley & Sons.
- Brown, B. (2015). *Daring greatly: How the courage to be vulnerable transforms the way we live, love, parent, and lead*. Penguin Books.
- Brown, B. (2017). *Braving the wilderness: The quest for true belonging and the courage to stand alone*. Random House.
- Brown, C., Stoffel, V. C., & Munoz, J. (2019). *Occupational therapy in mental health: A vision for participation*. F. A. Davis.

- Brunzell, T., Stokes, H., & Waters, L. (2019). Shifting teacher practice in trauma-affected classrooms: Practice pedagogy strategies within a trauma-informed positive education model. *School Mental Health, 11*(3), 600–614. <https://doi.org/10.1007/s12310-018-09308-8>
- Bushe, G. (2007). Appreciative inquiry is not about the positive. *OD Practitioner, 39*(4), 33–38.
- Butler, R. N. (1963). The life review: An interpretation of reminiscence in the aged. *Psychiatry, 26*(1), 65–76. <https://doi.org/10.1080/00332747.1963.11023339>
- Cantore, S. P., & Cooperrider, D. L. (2013). Positive psychology and appreciative inquiry: The contribution of the literature to an understanding of the nature and process of change in organizations. In H. S. Leonard, R. Lewis, A. M. Freedman, & J. Passmore (Eds.), *Wiley-Blackwell handbooks in organizational psychology. The Wiley-Blackwell handbook of the psychology of leadership, change, and organizational development* (pp. 267–287). Wiley-Blackwell. <https://doi.org/10.1002/9781118326404.ch13>
- Cappeliez, P. (2013). Neglected issues and new orientations for research and practice in reminiscence and life review. *The International Journal of Reminiscence and Life Review, 1*(1), 19–25.
- Carroll, T. C., & Loesche, S. J. (2017). Caring for the caregiver: How occupational therapy can support those who care for young children. *OT Practice, 22*(7), 8–11.
- Chippendale, T., & Bear-Lehman, J. (2012). Effect of life review writing on depressive symptoms in older adults: A randomized controlled trial. *American Journal of Occupational Therapy, 66*(4), 438–446. <https://doi.org/10.5014/ajot.2012.004291>

- Christiansen, C. H. (1999). Defining lives: Occupation as identity: An essay on competence, coherence, and the creation of meaning. *American Journal of Occupational Therapy*, 53(6), 547–558. <https://doi.org/10.5014/ajot.53.6.547>
- Christiansen, C., & Baum, C. M. (1991). *Occupational therapy: Overcoming human performance deficits*. Slack.
- Christiansen, C., & Baum, C. M. (1997). *Occupational therapy: Enabling function and well-being*. Slack.
- Christiansen, C., Baum, C. M., & Bass-Haugen, J. (2011). The person–environment–occupational performance model. In E. A. S. Duncan (Ed.), *Foundations for practice in occupational therapy* (5th ed., pp. 93–104). Elsevier.
- Christiansen, C., Baum, C. M., & Bass, J. D. (2015). *Occupational therapy performance, participation, and well-being*. Slack.
- Clark, F., Carlson, M., & Polkinghorne, D. (1997). The legitimacy of life history and narrative approaches in the study of occupation. *American Journal of Occupational Therapy*, 51(4), 313–317. <https://doi.org/10.5014/ajot.51.4.313>
- Clark, F. A., Parham, D., Carlson, M. E., Frank, G., Jackson, J., Pierce, D., Wolfe, R. J., & Zemke, R. (1991). Occupational science: Academic innovation in the service of occupational therapy's future. *American Journal of Occupational Therapy*, 45(4), 300–310. <https://doi.org/10.5014/ajot.45.4.300>
- Coiro, M. J., Bettis, A. H., & Compas, B. E. (2017). College students coping with interpersonal stress: Examining a control-based model of coping. *Journal of American College Health*, 65(3), 177–186. <https://doi.org/10.1080/07448481.2016.1266641>

- Combs, G., & Freedman, J. (2004). A poststructuralist approach to narrative work. In L. E. Angus & J. McLeod (Eds.), *The handbook of narrative and psychotherapy* (pp. 137–155). Sage.
- Cooperrider, D. L. (1986). *Appreciative inquiry: Toward a methodology for understanding and enhancing organizational innovation* (Publication No. 8611485). [Doctoral dissertation, Case Western Reserve University]. ProQuest Dissertations & Theses Global.
- Cooperrider, D. L., & Srivastva, S. (1987). Appreciative inquiry in organizational life. In W. A. Pasmore & R. W. Woodman (Eds.), *Research in organizational change and development*, (Vol. 1, pp. 129–169). Emerald Group Publishing.
- Cooperrider, D. L., & Whitney, D. (1999). *Appreciative inquiry*. Barrett-Koehler Communications.
- Cox, K. (2015). Meaning making in the life story, and not coherence or vividness, predicts well-being up to 3 years later: Evidence from high point and low point stories. *Identity*, 15(4), 241–262. <https://doi.org/10.1080/15283488.2015.1089508>
- Crawford, J., Butler-Henderson, K., Rudolph, J., Malkawi, B., Glowatz, M., Burton, R., Magni, P., & Lam, S. (2020). COVID-19: 20 countries' higher education intra-period digital pedagogy responses. *Journal of Applied Teaching & Learning*, 3(1), 9–28. <https://doi.org/10.37074/jalt.2020.3.1.7>
- Csikszentmihályi, M. (2009). *Flow: The psychology of optimal experience*. Harper Row.
- Deloitte. (2019). *The Deloitte global millennial survey 2019: Societal discord and technological transformation create a “generation disrupted.”* Author. <https://www2.deloitte.com/content/dam/Deloitte/global/Documents/About-Deloitte/deloitte-2019-millennial-survey.pdf>

- Derrida, J. (1978). *Writing and difference*. University of Chicago Press.
- Derrida, J. (1998). *Of grammatology*. Johns Hopkins University Press.
- Duckworth, A. (2016). *Grit: The power of passion and perseverance*. Scribner.
- Eakman, A. M. (2015). The meaningful activity wants and needs assessment: A perspective on life balance. *Journal of Occupational Science*, 22(2), 210–227.
<https://doi.org/10.1080/14427591.2013.769405>
- Eakman, A. M., & Eklund, M. (2011). Reliability and structural validity of an assessment of occupational value. *Scandinavian Journal of Occupational Therapy*, 18(3), 231–240.
<https://doi.org/10.3109/11038128.2010.521948>
- Edwards, M. E., & Van Tongeren, D. R. (2019). Meaning mediates the association between suffering and well-being. *The Journal of Positive Psychology*, 1–12.
<https://doi.org/10.1080/17439760.2019.1651890>
- Eells, G. T. (2017). Hyper-achievement, perfection, and college student resilience. *Journal of College and Character*, 18(2), 77–82. <https://doi.org/10.1080/2194587X.2017.1300096>
- Erikson, E. H. (1950). *Childhood and society*. W. W. Norton & Company.
- Erikson, E. H. (1968). *Identity: Youth and crisis*. W. W. Norton & Company.
- Erikson, E. H. (1982). *The life cycle completed: A review*. W. W. Norton & Company.
- Erikson, E. H. (2001). *The Erik Erikson reader*. W. W. Norton.
- Fidler, G. S., & Fidler, J. W. (1983). Doing and becoming: The occupational therapy experience. In G. Kielhofner (Ed.), *Health through occupation: Theory and practice in occupational therapy* (pp. 267–280). F. A. Davis.

Fisher, A. G. (2014). Occupation-centred, occupation-based, occupation-focused: Same, same or different? *Scandinavian Journal of Occupational Therapy*, 21, 96–107.

<https://doi.org/10.3109/11038128.2014.952912>

Fleming, J. S. (2020). *Psychological perspectives on human development* [eBook].

<http://swppr.org/Textbook/Contents.html>

Frankl, V. E. (1963). *Man's search for meaning: An introduction to logotherapy*. Washington Square Press.

Frankl, V. E. (2006). *Man's search for meaning*. Beacon Press. (Original work published in 1959).

Fredrickson, B. L. (2001). The role of positive emotions in positive psychology: The broaden-and-build theory of positive emotions. *American Psychologist*, 56, 218–226.

<https://doi.org/10.1037/0003-066X.56.3.218>

Fredrickson, B. (2009). *Positivity: Groundbreaking research reveals how to embrace the hidden strength of positive emotions, overcome negativity, and thrive*. Crown.

Fredrickson, B. L. (2013). Updated thinking on the positivity ratio. *American Psychologist*, 68, 814–822. <https://doi.org/10.1037/a0033584>

Fredrickson, B. L., & Kok, B. (2018). Evidence for the upward spiral stands steady: A response to Nickerson (2018). *Psychological Science*, 29, 467–470.

<https://doi.org/10.1177/0956797617707319>

Freedman, J. H., & Combs, G. (2000). Narrative therapy with couples. In E. M. Dattilio & L. J. Bevilacqua (Eds.), *Comparative treatments for relationship dysfunction* (pp. 342–361).

Springer.

- Friga, P. N. (2020). Under Covid-19, university budgets like we've never seen before. *The Chronicle of Higher Education*. <https://www.chronicle.com/article/under-covid-19-university-budgets-like-weve-never-seen-before/>
- Frisch, M. B. (1994). *Quality of Life Inventory: Manual and treatment guide*. National Computer Systems (NCS).
- Fromm, E. (1947). *Man for himself: An inquiry into the psychology of ethics*. Rinehart.
- Gergen, K. J. (2015). *An invitation to social constructivism*. Sage.
- Goldberg, D. P., & Hillier, V. F. (1979). A scaled version of the general health questionnaire. *Psychological Medicine*, 9(1), 139–145.
<https://doi.org/10.1017/S0033291700021644>
- Goldenberg, I., Stanton, M., & Goldenberg, H. (2017). *Family therapy: An overview*. Cengage Learning.
- Goldscheider, F. K., & Davanzo, J. (1986). Semi-autonomy and leaving home in early adulthood. *Social Forces*, 65(1). <https://doi.org/10.1093/sf/65.1.187>
- Goldstein, K., Kielhofner, G., & Paul-Ward, A. (2004). Occupational narratives and the therapeutic process. *Australian Occupational Therapy Journal*, 51(3), 119–124.
<https://doi.org/10.1111/j.1440-1630.2004.00443.x>
- Goyal, M., Singh, S., Sibinga, E. M. S., Gould, N. F., Rowland-Seymour, A., Sharma, R., Berger, Z., Sleicher, D., Maron, D. D., Shihab, H. M., Ranasinghe, P. D., Linn, S., Saha, S., Bass, E. B., & Haythornthwaite, J. A. (2014). Meditation programs for psychological stress and well-being: A systematic review and meta-analysis. *JAMA Internal Medicine*, 174(3), 357–368. <https://doi.org/10.1001/jamainternmed.2013.13018>

- Graham, K. L., Rahm-Knigge, R. L., & Conner, B. T. (2019). Profiling reminiscers: Using a self-report measure of frequency and functions of reminiscence to identify individual patterns of retrieval. *Journal of Adult Development*, 27(3), 170–180.
<https://doi.org/10.1007/s10804-019-09339-8>
- Griggs, S. (2017). Hope and mental health in young adult college students: An integrative review. *Journal of Psychosocial Nursing and Mental Health Services*, 55(2), 28–35.
<https://doi.org/10.3928/02793695-20170210-04>
- Gruttadaro, D., & Crudo, D. (2012). *College students speak: A survey report on mental health*. National Alliance on Mental Illness. https://www.nami.org/About-NAMI/Publications-Reports/Survey-Reports/College-Students-Speak_A-Survey-Report-on-Mental-H.pdf
- Guidotti, L., Solari, F., Bertolini, P., Gebennini, E., Ghiaroni, G., & Corsano, P. (2019). Reminiscing on acute and chronic events in children with cancer and their parents: An exploratory study. *Child: Care, Health and Development*, 45(4), 568–576.
<https://doi.org/10.1111/cch.12673>
- Haber, D. (2006). Life review: Implementation, theory, research, and therapy. *The International Journal of Aging and Human Development*, 63(2), 153–171.
<https://doi.org/10.2190/DA9G-RHK5-N9JP-T6CC>
- Haight, B. K., & Haight, B. S. (2007). *The handbook of structured life review*. Health Professions Press.
- Hallford, D. J., & Mellor, D. (2016a). Autobiographical memory and depression: Identity-continuity and problem-solving functions indirectly predict symptoms over time through

- psychological well-being. *Applied Cognitive Psychology*, 30(2), 152–159.
<https://doi.org/10.1002/acp.3169>
- Hallford, D. J., & Mellor, D. (2016b). Autobiographical memory-based intervention for depressive symptoms in young adults. *Psychotherapy and Psychosomatics*, 85(4), 246–249. <https://doi.org/10.1159/000444417>
- Hallford, D. J., & Mellor, D. (2016c). Brief reminiscence activities improve state well-being and self-concept in adults: A randomised controlled experiment. *Memory*, 24(10), 1311–1320. <https://doi.org/10.1080/09658211.2015.1103875>
- Hallford, D. J., Mellor, & Cummins, R. A. (2013). Adaptive autobiographical memory in younger and older adults: The indirect association of integrative and instrumental reminiscence with depressive symptoms. *Memory*, 21(4), 444–457.
<https://doi.org/10.1080/09658211.2012.736523>
- Ho, E. C. M., & Siu, A. M. H. (2018). Occupational therapy practice in sleep management: A review of conceptual models and research evidence. *Occupational Therapy International*, 1–12. <https://doi.org/10.1155/2018/8637498>
- Hooker, S. A., Masters, K. S., Vagnini, K. M., & Rush, C. L. (2019). Engaging in personally meaningful activities is associated with meaning salience and psychological well-being. *The Journal of Positive Psychology*, 1–11.
<https://doi.org/10.1080/17439760.2019.1651895>
- Hudson, F. M. (2001). *Mastering the art of self-renewal: Adulthood as continual revitalization*. MJF Books.

- Ikiugu, M. N. (2019). Meaningful and psychologically rewarding occupations: Characteristics and implications for occupational therapy practice. *Occupational Therapy in Mental Health*, 35(1), 40–58. <https://doi.org/10.1080/0164212X.2018.1486768>
- Johnson, N. (2012). *The institutional costs of student attrition*. American Institutes of Research. <https://deltacostproject.org/sites/default/files/products/Delta-Cost-Attrition-Research-Paper.pdf>
- Kabat-Zinn, J. (2001). *Full catastrophe living: How to cope with stress, pain and illness using mindfulness meditation*. Piatkus.
- Kahn, M. (2016). *Risk and protective factors explaining first-year college adjustment*. [Doctoral dissertation, University of Pennsylvania]. University of Pennsylvania Scholarly Commons. https://repository.upenn.edu/cgi/viewcontent.cgi?article=1082&context=edissertations_sp2
- Kahn, M., Solomon, P., & Treglia, D. (2019). Risk and protective factors explaining first-year college adjustment. *Journal of The First-Year Experience & Students in Transition*, 31(1), 29–50.
- Karris Bachik, M. A., Carey, G., & Craighead, W. E. (2020). VIA character strengths among US college students and their associations with happiness, well-being, resiliency, academic success and psychopathology. *The Journal of Positive Psychology*, 1–14. <https://doi.org/10.1080/17439760.2020.1752785>
- Keenan, W. R., Madaus, J. W., Lombardi, A. R., & Dukes, L. L. (2019). Impact of the Americans With Disabilities Act Amendments Act on Documentation for Students with Disabilities in Transition to College: Implications for practitioners. *Career Development*

and Transition for Exceptional Individuals, 42(1), 56–63.

<https://doi.org/10.1177/2165143418809691>

Keim-Malpass, J., Adelstein, K., & Kavalieratos, D. (2015). Legacy making through illness blogs: Online spaces for young adults approaching the end-of-life. *Journal of Adolescent and Young Adult Oncology*, 4(4), 209–212. <https://doi.org/10.1089/jayao.2015.0003>

Keptner, K. M. (2017). Long-term follow-up of an occupation-based group addressing occupational performance and satisfaction in university freshmen. *Occupational Therapy in Mental Health*, 33(4), 308–325. <https://doi.org/10.1080/0164212X.2017.1331150>

Keptner, K. M., Harris, A. L., Mellyn, J. C., Neff, N. R., Rassie, N., & Thompson, K. M. (2016). Occupational therapy services to promote occupational performance, performance satisfaction, and quality of life in university freshmen: A pilot study. *Occupational Therapy in Mental Health*, 32(2), 185–202. <https://doi.org/10.1080/0164212X.2015.1135094>

Keptner, K. M., & McCarthy, K. (2020). Mapping occupational therapy practice with postsecondary students: A scoping review. *The Open Journal of Occupational Therapy*, 8(1), 1–17. <https://doi.org/10.15453/2168-6408.1617>

Kessler, R. C., Berglund, P., Demler, O., Jin, R., Merikangas, K. R., & Walters, E. E. (2005). Lifetime prevalence and age-of-onset distributions of DSM-IV disorders in the National Comorbidity Survey Replication. *Archives of General Psychiatry*, 62(6), 593–602. <https://doi.org/10.1001/archpsyc.62.6.593>

Kognito. (2017). *Increasing student retention through improved mental health*. https://www.cmich.edu/veterans/Documents/HiEd_WP_032117_StudentRetentionWP.pdf

f

- Korgan, C., & Durdella, N. (2016). Exploring capacity for meaning making in relation to educational resilience in first-year, full-time college students. *Journal of The First-Year Experience & Students in Transition*, 28(1), 109–127.
- Lachman, M. E. (2001). *Handbook of midlife development*. Wiley.
- Lata, J. L., Nakamoto, M. J., & DeGenova, M. K. (1997). Regrets of college students: Implications for outlook on life. *College Student Journal*, 31(4), 480–489.
- Lawford, H., Pratt, M. W., Hunsberger, B., & Pancer, S. M. (2005). Adolescent generativity: A longitudinal study of two possible contexts for learning concern for future generations. *Journal of Research on Adolescence*, 15, 261–273. <https://doi.org/10.1111/j.1532-7795.2005.00096.x>
- Lawford, H. L., Astrologo, L., Ramey, H. L., & Linden-Andersen, S. (2020). Identity, intimacy, and generativity in adolescence and young adulthood: A test of the psychosocial model. *Identity*, 20(1), 9–21. <https://doi.org/10.1080/15283488.2019.1697271>
- Lawford, H. L., Doyle, A. B., & Markiewicz, D. (2013). The association between early generative concern and caregiving with friends from early to middle adolescence. *Journal of Youth and Adolescence*, 42(12), 1847–1857. <https://doi.org/10.1007/s10964-012-9888-y>
- Lawford, H. L., & Ramey, H. L. (2015). “Now I know I can make a difference”: Generativity and activity engagement as predictors of meaning making in adolescents and emerging adults. *Developmental Psychology*, 51, 1395–1406. <https://doi.org/10.1037/dev0000034>
- Levinson, D. J. (1978). *The seasons of a man's life*. Ballantine Books.
- Lund, K., Argentzell, E., Leufstadius, C., Tjörnstrand, C., & Eklund, M. (2019). Joining, belonging, and re-valuing: A process of meaning-making through group participation in a

- mental health lifestyle intervention. *Scandinavian Journal of Occupational Therapy*, 26(1), 55–68. <https://doi.org/10.1080/11038128.2017.1409266>
- Madaus, J. W. (2011). The history of disability services in higher education. *New Directions for Higher Education*, 154(1), 5-15.
- Martela, F., & Steger, M. F. (2016). The three meanings of meaning in life: Distinguishing coherence, purpose, and significance. *The Journal of Positive Psychology*, 11(5), 531–545. <https://doi.org/10.1080/17439760.2015.1137623>
- Maslow, A. H. (1970). *Motivation and personality*. Harper & Row.
- McAdams, D. P. (1985). *Power, intimacy, and the life story: Personological inquiries into identity*. Dorsey Press.
- McAdams, D. P. (1993). *The stories we live by: Personal myths and the making of self*. Morrow.
- McAdams, D. P. (1996). Personality, modernity, and the storied self: A contemporary framework for studying persons. *Psychological Inquiry*, 7(4), 295–321. https://doi.org/10.1207/s15327965pli0704_1
- McAdams, D. P. (2001a). Generativity in midlife. In M. E. Lachman (Ed.), *Handbook of midlife development* (pp. 395–443). John Wiley & Sons.
- McAdams, D. P. (2001b). The psychology of life stories. *Review of General Psychology*, 5(2), 100–122. <https://doi.org/10.1037/1089-2680.5.2.100>
- McAdams, D. (2008). *The life story interview*. Foley Center for the Study of Lives, Northwestern University. <https://www.sesp.northwestern.edu/foley/instruments/interview/>
- McAdams, D. P. (2011). Narrative identity. In S. J. Schwartz, K. Luyckx, & V. L. Vignoles (Eds.), *Handbook of identity theory and research* (pp. 99-115). Springer. https://doi.org/10.1007/978-1-4419-7988-9_5

McAdams, D. P. (2013). Life authorship: A psychological challenge for emerging adulthood, as illustrated in two notable case studies. *Emerging Adulthood, 1*(2), 151–158.

<https://doi.org/10.1177/2167696813481774>

McAdams, D. P., Bauer, J. J., Sakaeda, A. R., Anyidoho, N. A., Machado, M. A., Magrino-

Failla, White, K. W., & Pals, J. L. (2006). Continuity and change in the life story: A longitudinal study of autobiographical memories in emerging adulthood. *Journal of Personality, 74*(5), 1371–1400. <https://doi.org/10.1111/j.1467-6494.2006.00412.x>

McAdams, D. P., Diamond, A., de St. Aubin, E. D., & Mansfield, E. (1997). Stories of commitment: The psychosocial construction of generative lives. *Journal of Personality and Social Psychology, 72*(3), 678–694. <https://doi.org/10.1037/0022-3514.72.3.678>

McAdams, D. P., & Guo, J. (2014). How shall I live? Constructing a life story in the college years. *New Directions for Higher Education, 166*, 15–23, <https://doi.org/10.1002/he.20091>

McAdams, D. P., Reynolds, J., Lewis, M., Patten, A., & Bowman, P. J. (2001). When bad things turn good and good things turn bad: Sequences of redemption and contamination in life narrative, and their relation to psychosocial adaptation in midlife and in students. *Personality and Social Psychology Bulletin, 27*, 208–230.

<https://doi.org/10.1177/0146167201274008>

McFarland, J., Hussar, B., Zhang, J., Wang, X., Wang, K., Hein, S., Diliberti, M., Forrest

Cataldi, E., Bullock Mann, F., & Barmer, A. (2019). *The condition of education 2019* (NCES 2019-144). U.S. Department of Education. National Center for Education Statistics. <https://nces.ed.gov/pubs2019/2019144.pdf>

McKnight, P. E., & Kashdan, T. B. (2009). Purpose in life as a system that creates and sustains

- health and well-being: An integrative, testable theory. *Review of General Psychology*, 13(3), 242–251. <https://doi.org/10.1037/a0017152>
- Melby, D. E. (2019, May 3). *OLLU president ties college graduation rates to mental health struggles*. San Antonio Report. <https://therivardreport.com/ollu-president-ties-college-graduation-rates-to-mental-health-struggles/>
- Melton, J., Holzmuehler, R. P., Keponen, R., Nygard, L, Munger, K., & Kielhofner, G. (posthumous). (2017). Crafting occupational life. In R. R. Taylor (Ed.), *Kielhofner's model of human occupation* (5th ed., pp. 123–139). Wolters Kluwer.
- Merriam-Webster. (n.d.). Being. In *Merriam-Webster.com dictionary*. Retrieved September 17, 2020 from https://www.merriam-webster.com/dictionary/being?utm_campaign=sd&utm_medium=serp&utm_source=jsonld
- Moore, M., & Tschannen-Moran, B. (2010). *Coaching psychology manual*. Wolters Kluwer Health/Lippincott, Williams & Wilkins.
- Moore, M., Jackson, E., & Tschannen-Moran, B. (2016). *Coaching psychology manual* (2nd ed.). Wolters Kluwer.
- Mulry, C. M. (2016). Promoting productive aging using an innovative community mobility program. *SIS Quarterly Practice Connections*. 1(1), 18–19.
- National Resource Center for The First-Year Experience and Students in Transition. (n.d.-a). *About us*. https://sc.edu/about/offices_and_divisions/national_resource_center/about/index.php

National Resource Center for The First-Year Experience and Students in Transition. *Mission statement*. (n.d.-b).

https://sc.edu/about/offices_and_divisions/national_resource_center/about/index.php

Nicola, M., Alsafi, Z., Sohrabi, C., Kerwan, A., Al-Jabir, A., Iosifidis, C., Agha, M., & Agha, R. (2020). The socio-economic implications of the coronavirus and COVID-19 pandemic: A review. *International Journal of Surgery*, 78, 185-193.

<https://doi.org/10.1016/j.ijsu.2020.04.018>

Onori Hansen, N. (2016). *L.E.G.A.C.Y.™: An appreciative life review model* [Unpublished master's capstone paper]. Winona State University.

Onori Hansen, N. (2017, November 11). *L.E.G.A.C.Y.® appreciative life review: An emerging model to support occupation-based practice in mental health* [Conference session]. Minnesota Occupational Therapy Association Annual Conference, Minneapolis, MN, United States.

Orentlicher, M. L., Case, D., Podvey, M. C., Myers, C. T., Rudd, L. Q., & Schoonover, J. (2017). *Frequently asked questions (FAQ): What is occupational therapy's role in transition services and planning?* American Occupational Therapy Association.

<https://www.aota.org/-/media/Corporate/Files/Secure/Practice/Children/FAQ-What-is-OTs-Role-in-Transition-Services-and-Planning-20170530.pdf>

Pascarella, E. T., & Terenzini, P. T. (2005). *How college affects students: Findings and insights from twenty years of research*. Josey-Bass.

Pasupathi, M., & Carstensen, L. L. (2003). Age and emotional experience during mutual reminiscing. *Psychology and Aging*, 18(3), 430–442. <https://doi.org/10.1037/0882-7974.18.3.430>

- Peterson, C., & Seligman, M. E. (2004). *Character strengths and virtues: A handbook and classification* (Vol. 1). Oxford University Press.
- Peterson, C., Semmel, A., von Baeyer, C., Abramson, L. Y., Metalsky, G. I., & Seligman, M. E. (1982). The attributional style questionnaire. *Cognitive Therapy and Research*, 6(3), 287–299. <https://doi.org/10.1007/BF01173577>
- Phelan, S., & Kinsella, E. A. (2009). Occupational identity: Engaging socio-cultural perspectives. *Journal of Occupational Science*, 16(2), 85–91. <https://doi.org/10.1080/14427591.2009.9686647>
- Piaget, J. (1970). Piaget's theory (G. Gellerier & J. Langer, Trans.). In P. H. Mussen (Ed.), *Carmichael's manual of child psychology* (3rd ed., Vol. 1, pp. 11-23). John Wiley & Sons.
- Piderman, K. M., Radecki Breitkopf, C., Jenkins, S. M., Lapid, M. I., Kwete, G. M., Sytsma, T. T., Lovejoy, L. A., Yoder, T. J., & Jatoi, A. (2017). The impact of a spiritual legacy intervention in patients with brain cancers and other neurologic illnesses and their support persons. *Psycho-Oncology*, 26(3), 346–353. <https://doi.org/10.1002/pon.4031>
- Pinquart, M., & Forstmeier, S. (2012). Effects of reminiscence interventions on psychosocial outcomes: A meta-analysis. *Aging & Mental Health*, 16(5), 541–558. <https://doi.org/10.1080/13607863.2011.651434>
- Playford, D. (2015). The international classification of functioning, disability, and health. *Oxford Medicine Online*. <https://doi.org/10.1093/med/9780199673711.003.0001>
- Portnoy, S., Girling, I., & Fredman, G. (2016). Supporting young people living with cancer to tell their stories in ways that make them stronger: The beads of life approach. *Clinical*

Child Psychology and Psychiatry, 21(2), 255–267.

<https://doi.org/10.1177/1359104515586467>

Price-Lackey, P., & Cashman, J. (1996). Jenny's story: Reinventing oneself through occupation and narrative configuration. *American Journal of Occupational Therapy*, 50(4), 306–314.

<https://doi.org/10.5014/ajot.50.4.306>

Primeau, L. A., & Ferguson, J. M. (1999). Occupational frame of reference. In P. Kramer & J. Hinojosa (Eds.), *Frames of reference for pediatric occupational therapy* (2nd ed., pp. 469–516). Lippincott Williams & Wilkins.

Quinn, S., Gleeson, C. I., & Nolan, C. (2014). An occupational therapy support service for university students with Asperger's syndrome (AS). *Occupational Therapy in Mental Health*, 30(2), 109–125. <https://doi.org/10.1080/0164212X.2014.910155>

Raaper, R., & Brown, C. (2020). The covid-19 pandemic and the dissolution of the university campus: Implications for student support practice. *Journal of Professional Capital and Community*. <https://doi.org/10.1108/JPCC-06-2020-0032>

Raue, K., & Lewis, L. (2011). *Students with disabilities at degree-granting postsecondary institutions* (NCES 2011–018). U.S. Department of Education, National Center for Education Statistics. <https://nces.ed.gov/pubs2011/2011018.pdf>

Ray, E. C., Arpan, L., Oehme, K., Perko, A., & Clark, J. (2019). Testing restorative narratives in a college student resilience project. *Innovative Higher Education*, 44(4), 267–282.

<https://doi.org/10.1007/s10755-019-9464-4>

Ribeiro, A. P., Gonçalves, M. M., Silva, J. R., Brás, A., & Sousa, I. (2016). Ambivalence in narrative therapy: A comparison between recovered and unchanged cases. *Clinical Psychology & Psychotherapy*, 23(2), 166–175. <https://doi.org/10.1002/cpp.1945>

- Robbins, A., & Wilner, A. (2001). *Quarterlife crisis: The unique challenges of life in your twenties*. Penguin.
- Robinson, O. C. (2015). Emerging adulthood, early adulthood and quarter-life crisis: Updating Erikson for the 21st century. In R. Žukauskienė (Ed.), *Emerging adulthood in a European context* (pp.17–30). Routledge.
- Rogers, J. C. (1983). The study of human occupation. In G. Kielhofner (Ed.), *Health through occupation: Theory and practice in occupational therapy* (pp. 93–124). F. A. Davis.
- Rosenbaum, P., & Weatherford, R. D. (2017). Resilience in college students. *Journal of College Student Psychotherapy*, 31(2), 91–92. <https://doi.org/10.1080/87568225.2017.1297640>
- Rowles, G. D. (2008). Place in occupational science: A life course perspective on the role of environmental context in the quest for meaning. *Journal of Occupational Science*, 15(3), 127–135. <https://doi.org/10.1080/14427591.2008.9686622>
- Roy, N. (2018, December 17). *The rise of mental health on college campuses: Protecting the emotional health of our nation's college students*.
<https://www.higheredtoday.org/2018/12/17/rise-mental-health-college-campus-protecting-emotional-health-nations-college-students>
- Ryan, R. M., & Deci, E. L. (2000). Self-determination theory and the facilitation of intrinsic motivation, social development, and well-being. *American Psychologist*, 55, 68–78.
<https://doi.org/10.1037/0003-066X.55.1.68>
- Ryan, R. M., & Deci, E. L. (2001). On happiness and human potentials: A review of research on hedonic and eudaimonic well-being. *Annual Review of Psychology*, 52(1), 141–166.
<https://doi.org/10.1146/annurev.psych.52.1.141>

St. Amour, M. (2020, June 23). *Report: COVID-19 has hurt college students.*

<https://www.insidehighered.com/quicktakes/2020/06/23/report-covid-19-has-hurt-college-students>

Salmon, K., & Reese, E. (2016). The benefits of reminiscing with young children. *Current Directions in Psychological Science*, 25(4), 233–238.

<https://doi.org/10.1177/0963721416655100>

Savickas, M. L. (2005). The theory and practice of career construction. In S. D. Brown & R. W. Lent (Eds.), *Career development and counseling: Putting theory and research to work* (pp. 42–70). John Wiley & Sons.

Schutt, D. A. (2007). *A strength-based approach to career development using appreciative inquiry*. National Career Development Association.

Schutt, D. A. (2018). *A strengths-based approach to career development using appreciative inquiry* (2nd ed.). National Career Development Association.

Schutte, N., & Malouff, J. (2002). Incorporating emotional skills content in a college transition course enhances student retention. *Journal of the First-Year Experience & Students in Transition*, 14(1), 7–21.

Schutte, N. S., & Malouff, J. M. (2019). The impact of signature character strengths interventions: A meta-analysis. *Journal of Happiness Studies*, 20(4), 1179–1196.
<https://doi.org/10.1007/s10902-018-9990-2>

Seifert, T. A. (2005, Spring). *Ryff Scales of Psychological Well-Being*. Wabash National Study.
<https://centerofinquiry.org/uncategorized/ryff-scales-of-psychological-well-being/>

- Sekerka, L. E., & McCraty, R. (2004). Understanding the psychophysiology of appreciation in the workplace. In D. Cooperrider & M. Avital (Eds.), *Constructive discourse and human organization: Advances in appreciative inquiry* (pp. 217–239). Elsevier Science.
- Seligman, M. E. P. (1984). *Attributional Style Questionnaire* [Measurement instrument]. University of Pennsylvania Positive Psychology Center.
- Shatkin, J. P., Diamond, U., Zhao, Y., DiMeglio, J., Chodaczek, M., & Bruzzese, J. M. (2016). Effects of a risk and resilience course on stress, coping skills, and cognitive strategies in college students. *Teaching of Psychology*, 43(3), 204–210.
<https://doi.org/10.1177/0098628316649457>
- Sheehy, G. (1976). *Passages: Predictable crises of adult life*. Dutton.
- Sommers-Flanagan, J., & Sommers-Flanagan, R. (2012). *Counseling and psychotherapy theories in context and practice: Skills, strategies, and techniques*. John Wiley & Sons.
- Spencer, B., Sherman, L., Nielsen, S., & Thormodson, K. (2018). Effectiveness of occupational therapy interventions for students with mental illness transitioning to higher education: A systematic review. *Occupational Therapy in Mental Health*, 34(2), 151–164.
<https://doi.org/10.1080/0164212X.2017.1380559>
- Steger, M. F. (2010). The meaning in life questionnaire (MLQ).
<http://www.michaelfsteger.com/wp-content/uploads/2013/12/MLQ-description-scoring-and-feedback-packet.pdf>
- Steger, M. F. (2012). Making meaning in life. *Psychological Inquiry*, 23(4), 381–385.
<https://doi.org/10.1080/1047840X.2012.720832>
- Steger, M. F., Frazier, P., Oishi, S., & Kaler, M. (2006). The meaning in life questionnaire: Assessing the presence of and search for meaning in life. *Journal of Counseling*

- Psychology*, 53(1), 80–93. <https://doi.org/10.1037/t01074-000>
- Steger, M. F., & Kashdan, T. B. (2013). The unbearable lightness of meaning: Well-being and unstable meaning in life. *The Journal of Positive Psychology*, 8(2), 103–115. <https://doi.org/10.1080/17439760.2013.771208>
- Steger, M. F., Oishi, S., & Kashdan, T. B. (2009). Meaning in life across the life span: Levels and correlates of meaning in life from emerging adulthood to older adulthood. *The Journal of Positive Psychology*, 4(1), 43–52. <https://doi.org/10.1080/17439760802303127>
- Steger, M. F., Shin, J. Y., Shim, Y., & Fitch-Martin, A. (2013). *Is meaning in life a flagship indicator of well-being?* In A. S. Waterman (Ed.), *The best within us: Positive psychology perspectives on eudaimonia* (pp. 159–182). American Psychological Association. <https://doi.org/10.1037/14092-009>
- Stetka, B. (2017, October 11). *Where's the proof that mindfulness meditation works?* <https://www.scientificamerican.com/article/wheres-the-proof-that-mindfulness-meditation-works1/>
- Svetina, M. (2014). Resilience in the context of Erikson's theory of human development. *Current Psychology*, 33(3), 393–404. <https://doi.org/10.1007/s12144-014-9218-5>
- Thielking, M. (2017, February 8). *Surging demand for mental health care jams college services.* <https://www.scientificamerican.com/article/surging-demand-for-mental-health-care-jams-college-services/>
- Thomas, L., & Briggs, P. (2016). Reminiscence through the lens of social media. *Frontiers in Psychology*, 7, 870. <https://doi.org/10.3389/fpsyg.2016.00870>

- Torges, C. M., Stewart, A. J., & Nolen-Hoeksema, S. (2008). Regret resolution, aging, and adapting to loss. *Psychology and Aging, 23*(1), 169–180. <https://doi.org/10.1037/0882-7974.23.1.169>
- Trevisan, D. A., Bass, E., Powell, K., & Eckerd, L. M. (2017). Meaning in life in college students: Implications for college counselors. *Journal of College Counseling, 20*(1), 37–51. <https://doi.org/10.1002/jocc.12057>
- Truskauskaite-Kuneviciene, I., Kazlauskas, E., Ostreikaite-Jurevice, R., Brailovskaia, J., & Margraf, J. (2020). Positive mental health and adjustment following life-stressors among young adults. *Current Psychology*. <https://doi.org/10.1007/s12144-020-00714-3>
- U.S. Department of Education. (2015, July 27). *Fact sheet: Focusing higher education on student success*. <https://www.ed.gov/news/press-releases/fact-sheet-focusing-higher-education-student-success>
- Van Dam, A. (2020, June 05). The unluckiest generation in U.S. history. *Washington Post*. <https://www.washingtonpost.com/business/2020/05/27/millennial-recession-covid/>
- Van Dam, N. T., van Vugt, M. K., Vago, D. R., Schmalzl, L., Saron, C. D., Olendzki, A., Meissner, T., Lazar, S.W, Kerr, C.E., Gorchov, J., Fox, K.C. R., Field, B. A., Britton, W. B., Brefczynski-Lewis, J. A., & Meyer, D. E. (2018). Mind the hype: A critical evaluation and prescriptive agenda for research on mindfulness and meditation. *Perspectives on Psychological Science, 13*(1), 36–61. <https://doi.org/10.1177/1745691617709589>
- Verleysen, B., Lambrechts, F., & Van Acker, F. (2015). Building psychological capital with appreciative inquiry: Investigating the mediating role of basic psychological need

satisfaction. *The Journal of Applied Behavioral Science*, 51(1), 10–35.

<https://doi.org/10.1177/0021886314540209>

Walther, S., & Carey, M. (2009). Narrative therapy, difference and possibility: Inviting new becomings. *Context*, 105, 3–8.

Webster, J. D. (1993). Construction and validation of the reminiscence functions scale. *Journal of Gerontology*, 48(5), 256–262. <https://doi.org/10.1093/geronj/48.5.P256>

Webster, J. D. (1994). Predictors of reminiscence: A lifespan perspective. *Canadian Journal on Aging*, 13(1), 66–78. <https://doi.org/10.1017/S0714980800006565>

Webster, J. D. (1997). The reminiscence functions scale: A replication. *The International Journal of Aging and Human Development*, 44(2), 137–148.

<https://doi.org/10.2190/AD4D-813D-F5XN-W07G>

Webster, J. D., Bohlmeijer, E. T., & Westerhof, G. J. (2010). Mapping the future of reminiscence: A conceptual guide for research and practice. *Research on Aging*, 32(4), 527–564. <https://doi.org/10.1177/0164027510364122>

Webster, J. D., & Gould, O. (2007). Reminiscence and vivid personal memories across adulthood. *The International Journal of Aging and Human Development*, 64(2), 149–170. <https://doi.org/10.2190/Q8V4-X5H0-6457-5442>

Weixel-Dixon, K. (2020). *Existential group counselling and psychotherapy*. Routledge.

Westerhof, G. J., & Bohlmeijer, E. T. (2014). Celebrating fifty years of research and applications in reminiscence and life review: State of the art and new directions. *Journal of Aging Studies*, 29, 107–114. <https://doi.org/10.1016/j.jaging.2014.02.003>

- Westerhof, G. J., Bohlmeijer, E., & Webster, J. D. (2010). Reminiscence and mental health: A review of recent progress in theory, research and interventions. *Ageing and Society*, 30(4), 697–721. <https://doi.org/10.1017/S0144686X09990328>
- Whalley, R., McAndrew, & R., Kaskutas, V. (2020). Analysis of practice patterns in a student experiential learning clinic. *American Journal of Occupational Therapy*, 74 (4 Suppl. 1), 7411505226–7411505402. <https://doi.org/10.5014/ajot.2020.74S1-PO9322>
- What Works Clearinghouse. (2016). *WWC intervention report: First year experience courses*. Institute of Education Sciences. https://ies.ed.gov/ncee/wwc/Docs/InterventionReports/wwc_firstyear_102116.pdf
- Whistle, W. (2019, January 28). *Ripple effect: The cost of the college dropout rate—Third way*. <https://www.thirdway.org/report/ripple-effect-the-cost-of-the-college-dropout-rate>
- Whitbourne, S. K., Sneed, J. R., & Sayer, A. (2009). Psychosocial development from college through midlife: A 34-year sequential study. *Developmental Psychology*, 45(5), 1328–1340. <https://doi.org/10.1037/a0016550>
- White, M., & Epston, D. (1990). *Narrative means to therapeutic ends*. Norton.
- Wilcock, A. A., & Hocking, C. (2015). *An occupational perspective of health* (3rd ed.). Slack.
- Wilcock, A. A. (1998). Reflections on doing, being, and becoming. *Canadian Journal of Occupational Therapy/Revue Canadienne D'Ergothérapie*, 65(5), 248–257. <https://doi.org/10.1177/000841749806500501>
- Winona State University. (2018). *Evaluation data for the L.E.G.A.C.Y.™ life review: Creating a meaningful life and lasting legacy workshop* [Unpublished raw data].

- Winzer, R., Lindberg, L., Guldbrandsson, K., & Sidorchuk, A. (2018). Effects of mental health interventions for students in higher education are sustainable over time: A systematic review and meta-analysis of randomized controlled trials. *PeerJ*, 6:e4598. <https://doi.org/10.7717/peerj.4598>
- Wong, P. T., & Watt, L. M. (1991). What types of reminiscence are associated with successful aging? *Psychology and Aging*, 6(2), 272–279. <https://doi.org/10.1037/0882-7974.6.2.272>
- World Health Organization. (2001). *International classification of functioning, disability and health*. <https://apps.who.int/iris/bitstream/handle/10665/42407/9241545429.pdf>
- Wyatt, T. J., Oswalt, S. B., & Ochoa, Y. (2017). Mental health and academic performance of first-year college students. *International Journal of Higher Education*, 6(3), 178–187. <https://doi.org/10.5430/ijhe.v6n3p178>
- Yalom, I. D. (1980). *Existential psychotherapy*. Basic Books.
- Young, D. G. (2018a, September 28). *Data from the 2017 national survey on the first-year experience: Creating connections to go beyond traditional thinking* [PowerPoint slides]. https://sc.edu/nrc/system/pub_files/1538846259_0.pdf
- Young, D. G. (2018b, March 11). *Presenting data from the 2017 national survey of first-year experiences* [PowerPoint slides]. https://sc.edu/nrc/system/pub_files/1538845727_0.pdf
- Zuiderveen, A., Ivey, C., Dordan, S., & Leiras, C. (2016). Encouraging occupation: A systematic review of the use of life review and reminiscence therapy for the treatment of depressive symptoms in older adults. *Occupational Therapy in Mental Health*, 32(3), 281–298. <https://doi.org/10.1080/0164212X.2016.1145090>