

# Investigating the Potential Selves counselling intervention for identity distress among young adults

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		<input type="checkbox"/> Protocol
<b>Registration date</b> 16/11/2021	<b>Overall study status</b> Completed	<input type="checkbox"/> Statistical analysis plan
		<input type="checkbox"/> Results
<b>Last Edited</b> 16/11/2021	<b>Condition category</b> Mental and Behavioural Disorders	<input type="checkbox"/> Individual participant data
		<input type="checkbox"/> Record updated in last year

## Plain English summary of protocol

### Background and study aims

This study examines a new online counselling/mentoring intervention focusing on personal identity and imagining future possibilities for oneself. This study is interested in studying young adults between the ages of 18 and 25. Developing a sense of self or identity is an important step in young adulthood. An underdeveloped or confused sense of identity can lead to mental health issues like anxiety and depression, problems in social relationships, and a sense of meaninglessness, and potentially may contribute to or exacerbate more enduring personality dysfunction. We want to know whether participating in this treatment will increase wellbeing among young adults who are experiencing challenges in their personal identity and sense of self, and how online therapy can be useful in promoting positive changes.

### Who can participate?

Young adults between the ages of 18 and 25 at the start of the study who must feel some level of current distress related to their identity. This distress can be related to any type of identity, including work or academic identity, sexual and gender identity, religious identity, and/or uncertainty about their sense of self. Distress can include but is not limited to feeling confused, scared, or worried, hopeless or lacking meaning, and/or sad or depressed, along with difficulties regulating emotions and dealing with interpersonal relationships. The research team will screen individuals who want to participate using questionnaires and phone interviews to ensure that the amount of distress meets the criteria for the study.

### What does the study involve?

Participants will be allocated to one of two groups, with an equal chance of being in either group (like tossing a coin) for the first half of the study. One group will receive treatment and the other group will be put on a waiting list and receive usual care at the start of the study. After 12 weeks, in the second half of the study, participants who were in the waiting list group will receive the treatment/intervention that they did not receive in the first half of the study.

The treatment will consist of 12 weeks of counselling focused on identity-related themes. The intervention will be guided by individual case formulations for each participant. All of the

sessions will occur online through the videoconferencing platform Zoom. Each participant will have the same therapist for all sessions and each therapist has at least graduate-level training in counselling, social work, or clinical psychology. The intervention is individualized for each participant but will follow an overall framework of exploring identity-related issues and associated emotional and interpersonal experiences. This includes exploring ways in which the participant's identities are both a personal strength and a challenge, thinking about the barriers participants might face with their identity goals, and planning ways that can encourage future growth once the intervention has been completed. For example, a participant may want to explore how their career or relationship preferences may be different from what their family might want, and how these differences may be related to separation-individuation difficulties that fuel distress. Counselling sessions in this case might explore what is important to this person about their preferences, their beliefs and personal meanings regarding their preferences and family relationships, and strategies for managing inner conflicts and associated emotions.

Participants in the treatment group will complete several questionnaire packets through an online portal. For the treatment group, participants will complete longer questionnaires before treatment, 4 weeks into treatment, 8 weeks into treatment, after the treatment is finished at 12 weeks, and 3 months after treatment has ended. Participants will also fill out a short questionnaire after every treatment session. The questionnaires will ask about things such as personal history, mental health, and issues like self-esteem, identity, and relationships. The longer questionnaire will take about 1 hour to complete, while the short questionnaire will take about 5 minutes.

The waitlist/usual care group will not be given treatment at the start of the study. Instead, they will wait for 12 weeks, during which time they may continue making use of any current professional supports (e.g. college counselling centre, family physician) before then receiving the same intervention as the treatment group. They will complete the same questionnaire battery as the treatment group at the start of the study, after waiting 12 weeks, 4 weeks into the start of their treatment, 8 weeks into the treatment, after the treatment is finished at 12 weeks, and 3 months after treatment has ended.

What are the possible benefits and risks of participating?

The most significant benefit is that participants will receive 12 sessions of online counselling at no direct user cost (estimated value of \$1500 CDN). By participating, there is a strong possibility of a reduction in overall mental health distress, as well as the development of a clearer sense of personal goals and abilities. Additionally, others may benefit in the future from what is learned through this study.

There is very little risk to participating in this study. These risks are similar to what any individual may face if they were to obtain virtual counselling outside of a research study. Some topics discussed in treatment can bring up uncomfortable thoughts and feelings.

All efforts will be made to ensure confidentiality of the online counselling sessions. For instance, therapists will work from secure and private locations, the Zoom platform will encrypt data before sending it over the Internet, and all participant records will be password protected and stored on encrypted hard drives.

Where is the study run from?

University of British Columbia (Canada)

When is the study starting and how long is it expected to run for?

From June 2019 to October 2024

Who is funding the study?

The Social Sciences and Humanities Research Council of Canada (SSHRC) (Canada) and the Michael Smith Foundation for Health Research (MSFHR) Scholar Award (Canada)

Who is the main contact?

Dr. David Kealy (Primary Investigator)

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## Contact information

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## Additional identifiers

### Clinical Trials Information System (CTIS)

Nil known

### ClinicalTrials.gov (NCT)

Nil known

**Protocol serial number**

H19-01671

## **Study information**

**Scientific Title**

Potential Selves intervention: A randomized trial examining the efficacy of a counselling intervention on young adults' identity distress

**Acronym**

Potential Selves

**Study objectives**

1. Participants who receive the Potential Selves intervention will show significant reduction of identity-related distress and impairment, and psychological symptoms, compared to participants in a waitlist/usual care control condition
2. Participants who receive the Potential Selves intervention will show significant reduction of identity-related distress and impairment, and psychological symptoms, compared to their own scores at baseline
3. Among participants receiving the Potential Selves intervention, changes in identity-related vulnerabilities and psychological symptoms will be mediated by therapist attunement and therapeutic alliance, and by improvement in participants' reflective functioning and cognitive reappraisal.

**Ethics approval required**

Old ethics approval format

**Ethics approval(s)**

Approved 01/10/2019, The University of British Columbia Office of Research Ethics Behavioural Research Ethics Board (Suite 102, 6190 Agronomy Road Vancouver, BC V6T 1Z3, Canada; +1 604-827-5113; laurel.evans@ors.ubc.ca), ref: H19-01671

**Study design**

Multi-centre interventional non-blind randomized waitlist-controlled trial

**Primary study design**

Interventional

**Study type(s)**

Treatment

**Health condition(s) or problem(s) studied**

Young adults experiencing distress and vulnerability related to personal identity, including sense of self, personal vocational directions, and capacity for interpersonal relatedness.

**Interventions**

The intervention, which we refer to here as Potential Selves, will be delivered in a counselling /mentoring format by trained advanced graduate students in counselling psychology and social work, over 12 sessions of individual intervention. The mentoring will be carefully supervised by experts in counselling and psychotherapy to ensure that counsellors will be adhering to these

tasks and to the individualized responsiveness to young adult clients. The intervention will be delivered as a virtual counselling (i.e. teletherapy) intervention, where participants and counsellors will meet online using UBC's Zoom platform, rather than in person.

The study will be conducted in two phases. In Phase 1, participants who complete the informed consent process will be randomly assigned (simple random assignment, using an online random number generator) to either the Potential Selves condition or to a usual care control condition, in which they will be waitlisted for the intervention (yet permitted to make use of other support services in the community). Potential Selves will consist of 12 sessions of individual counselling /mentoring, provided on a once-weekly basis by a graduate student trained and supervised by the PI and faculty co-investigators. Participants will be asked to complete a brief questionnaire assessing their experience in therapy after every session. To address our primary objective, participants in the experimental conditions will complete measures assessing domains relevant to identity, possible selves, and other personality-, emotion-, and wellbeing-related constructs at pre-treatment, during treatment (at weeks 4 and 8), post-treatment (at 12 weeks), and 3 months after treatment. The waitlist/usual care group will complete the same measures at pre-treatment and post-treatment, and following the 12-week waitlist period, will be eligible to receive the intervention and complete measures regarding the treatment. All assessments will be administered through UBC's Qualtrics platform and participants will be compensated upon completion of each assessment battery (value of \$10-20 CDN e-gift card).

In Phase 2 (addressing hypotheses 2 and 3), all participants in the control group will be allocated to receive the Potential Selves intervention. The intervention and assessment procedures in Phase 2 will otherwise be identical to the experimental group in Phase 1.

## **Intervention Type**

Behavioural

### **Primary outcome(s)**

1. Identity distress measured using the Identity Distress Scale (IDS) at baseline, 12 weeks, and 3 months post-treatment for experimental group participants, and at baseline, 24 weeks, and 3 months post-treatment for control group participants
2. Psychological distress measured using the Borderline Symptoms List 23 (BSL-23) at baseline, 12 weeks, and 3 months post-treatment for experimental group participants, and at baseline, 24 weeks, and 3 months post-treatment for control group participants

### **Key secondary outcome(s)**

1. Individual target objectives collected at baseline for both control and experimental group participants
2. Achievement of individual target objectives measured through a target objectives goals review at 12 weeks for experimental group participants
3. Mental health disorder severity measured using the Patient Health Questionnaire (PHQ) at baseline, 4, 8, and 12 weeks, and 3 months post-treatment for experimental group participants, and at baseline and 24 weeks for control group participants
4. Dysfunctional individuation measured using the Dysfunctional Individuation Scale (DIS) at baseline, 12 weeks, and 3 months post-treatment for experimental group participants, and at baseline and 24 weeks for control group participants
5. Loneliness measured using the UCLA-3 Loneliness Scale at baseline, 12 weeks, and 3 months post-treatment for experimental group participants, and at baseline and 24 weeks for control group participants
6. Outcome expectancy regarding the Potential Selves intervention measured using the

Outcome Expectancy Scale (OES) at baseline for both control and experimental group participants

7. Resilience measured using the Brief Resilience Scale (BRS) at baseline, 12 weeks, and 3 months post-treatment for experimental group participants, and at baseline and 24 weeks for control group participants

8. Attachment measured using the Experiences in Close Relationships-Short Form (ECR-S) at baseline, 12 weeks, and 3 months post-treatment for experimental group participants, and at baseline and 24 weeks for control group participants

9. Perceived functional impairment measured using the Work and Social Adjustment Scale (WSAS) at baseline, 12 weeks, and 3 months post-treatment for experimental group participants, and at baseline and 24 weeks for control group participants

10. Anxiety severity measured using the General Anxiety Disorder (GAD-7) questionnaire at baseline, 4, 8, and 12 weeks for experimental group participants, and at baseline and 24 weeks for control group participants

11. Interpersonal guilt measured using the Interpersonal Guilt Rating Scale at baseline, 12 weeks, and 3 months post-treatment for experimental group participants, and at baseline and 24 weeks for control group participants

12. Emotional regulation measured using the Emotion Regulation Questionnaire at baseline, 4, 8, and 12 weeks, and 3 months post-treatment for experimental group participants, and at baseline and 24 weeks for control group participants

13. measured using the Inventory of Interpersonal Problems (IIP-32) at baseline, 12 weeks, and 3 months post-treatment for experimental group participants, and at baseline and 24 weeks for control group participants

14. measured using the Emotional Understanding Scale at baseline, 12 weeks, and 3 months post-treatment for experimental group participants, and at baseline and 24 weeks for control group participants

15. Self-esteem measured using the Rosenberg Self-Esteem Scale at baseline, 12 weeks, and 3 months post-treatment for experimental group participants, and at baseline and 24 weeks for control group participants

16. Identity measured using the Self-Concept and Identity Measure at baseline, 12 weeks, and 3 months post-treatment for experimental group participants, and at baseline and 24 weeks for control group participants

17. Psychological distress measured using the Kessler Psychological Distress Scale (K-6) at baseline, 12 weeks, and 3 months post-treatment for experimental group participants, and at baseline and 24 weeks for control group participants

18. Life meaning measured using the Meaning in Life Questionnaire (MLQ) at baseline, 12 weeks, and 3 months post-treatment for experimental group participants, and at baseline and 24 weeks for control group participants

19. Guilt and shame measured using the Personal Feelings Questionnaire at baseline, 12 weeks, and 3 months post-treatment for experimental group participants, and at baseline and 24 weeks for control group participants

20. Reflective functioning measured using the Reflective Functioning Questionnaire (RFQ-8) at baseline, 4, 8, and 12 weeks, and 3 months post-treatment for experimental group participants, and at baseline and 24 weeks for control group participants

21. Personality traits measured using the Personality Inventory for DSM-5 – Brief Form (PID-5-BF) at baseline, 12 weeks, and 3 months post-treatment for experimental group participants, and at baseline and 24 weeks for control group participants

22. Overall life satisfaction measured using the Temporal Satisfaction with Life Scale at baseline, 12 weeks, and 3 months post-treatment for experimental group participants, and at baseline and 24 weeks for control group participants

23. Adverse childhood experiences measured using the Adverse Childhood Experiences (ACE-10) at baseline for both control and experimental group participants

24. Participant concerns about becoming infected with COVID-19 and concerns about the impact of the COVID-19 pandemic on their wellbeing measured using the COVID-19 Scale at baseline, 12 weeks, and 3 months post-treatment for experimental group participants, and at baseline and 24 weeks for control group participants
25. Participant intention for growth measured using the Personal Growth Inventory Scale at baseline, 12 weeks, and 3 months post-treatment for experimental group participants, and at baseline and 24 weeks for control group participants
26. Demographic information collected using the Demographic Questionnaire at baseline for both control and experimental group participants
27. Participant estimation of improvement measured using the Patient Estimation of Improvement questionnaire at 12 weeks for experimental group participants
28. Participant attribution of change to the intervention measured using the Change Attribution questionnaire at 12 weeks for experimental group participants
29. Participant experience of participant-therapist alliance measured using the Working Alliance Inventory (WAI-6) after every session of the Potential Selves intervention and at 4, 8, and 12 weeks for experimental group participants
30. Participant's experience of the therapist's degree of attunement and responsiveness measured using the Patient Experience of Attunement and Responsiveness (PEAR) Scale after every session of the Potential Selves intervention and at 4, 8, and 12 weeks for experimental group participants
31. The degree to which participants experienced and expressed positive and negative feelings during their counselling session measured using the Session Feelings and Expression questionnaire after every session of the Potential Selves intervention and at 4, 8, and 12 weeks for experimental group participants
32. Attitudes towards and satisfaction with the use of teletherapy measured using the Experience of Technology Scale after every session of the Potential Selves intervention and at 4, 8, and 12 weeks for experimental group participants

### **Completion date**

31/10/2024

## **Eligibility**

### **Key inclusion criteria**

1. Young adults aged between 18 and 25 years, inclusive.
2. Identity-related vulnerability, defined as mild to moderate distress or difficulty in identity-related domains such as sense of self or self-concept, vocational commitment, social relationships, intimate relationships and sexuality, and self-regulatory abilities. Assessed using the the Identity Distress Scale (IDS) as having mild distress in at least three domains or moderate distress in at least two domains, along with at least moderate overall severity or impairment for more than one month in duration.
3. Capacity to provide informed consent. Prospective participants aged 18 at the time of enrolment will be screened to determine whether they meet criteria as emancipated minors (e. g. attending post-secondary education, living independently from parents, or earning their own income).
4. Verbal and written proficiency in English is required to participate in the project, due to the interactions required between mentors and participants

### **Participant type(s)**

Patient

**Healthy volunteers allowed**

No

**Age group**

Adult

**Lower age limit**

18 years

**Upper age limit**

25 years

**Sex**

All

**Key exclusion criteria**

1. Presence of a significant psychological or behavioural problem that could pose risk to the individual participant (e.g. acute psychosis, active suicidal behaviour, and marked impulsivity)
2. Being a regular patient or client in an active psychotherapy/counselling treatment, defined as attending at a frequency of biweekly or weekly or greater (does not include less-frequent supportive care, or brief crisis intervention service, or vocational consultation, or primary care). This reflects concerns regarding interference with existing therapeutic relationships and concerns regarding the internal validity of the study.

**Date of first enrolment**

01/11/2021

**Date of final enrolment**

31/12/2023

**Locations****Countries of recruitment**

Canada

**Study participating centre**

**The University of British Columbia, Faculty of Medicine, Department of Psychiatry**

Detwiller Pavilion 2255 Wesbrook Mall

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**Study participating centre**

**University of British Columbia- Okanagan, Faculty of Health and Social Development, School of Social Work**

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## Sponsor information

### Organisation

University of British Columbia

### ROR

<https://ror.org/03rmrcq20>

## Funder(s)

### Funder type

Government

### Funder Name

Social Sciences and Humanities Research Council of Canada

### Alternative Name(s)

Conseil de recherches en sciences humaines, Social Sciences and Humanities Research Council, sshrc\_crsh, Conseil de recherches en sciences humaines du Canada, Social Sciences and Humanities Research Council - sshrc crsh, Social Sciences and Humanities Research Council (SSHRC), Conseil de recherches en sciences humaines (CRSH), SSHRC, SSHRC-CRSH

### Funding Body Type

Government organisation

### Funding Body Subtype

National government

### Location

Canada

### Funder Name

Michael Smith Foundation for Health Research

### Alternative Name(s)

The Michael Smith Health Research, Michael Smith Foundation for Health Research, HlthResearchBC, healthresearchbc, MSFHR

**Funding Body Type**  
Private sector organisation

**Funding Body Subtype**  
Trusts, charities, foundations (both public and private)

**Location**  
Canada

## Results and Publications

**Individual participant data (IPD) sharing plan**  
Raw data (de-identified) generated during and/or analysed during the current study are/will be shared directly with researchers who enquire. Requests for de-identified data from the study should be made to Dr. David Kealy at david.kealy@ubc.ca and will be considered following the overall trial end data (31/10/2024). Only de-identified participant data in the form of quantitative scores (i.e., no session recordings or transcripts) that underlie reported results will be shared. Data will be shared, along with the study protocol, with researchers who provide a methodologically sound proposal outlining the purpose of the request and the proposed analyses. Data will be available for sharing beginning 3 months following publication of the main study RCT findings, and ending 5 years post-publication.

**IPD sharing plan summary**  
Available on request

Study outputs					
Output type	Details	Date created	Date added	Peer reviewed?	Patient-facing?
<a href="#">Participant information sheet</a>	Participant information sheet	11/11/2025	11/11/2025	No	Yes
<a href="#">Study website</a>	Study website	11/11/2025	11/11/2025	No	Yes