

Anchors of the Self: Cultivating Life Longings (Sehnsucht) and Goals in LGBTQ+ Therapeutic Discourse

Eli Sharon^{1,*}

¹Tel Aviv Academic college

Research Article

Open Access &

Peer-Reviewed Article

DOI:

10.14302/issn.2574-612X.ijpr-25-5933

Corresponding author:

Eli Sharon, Tel Aviv Academic college

Keywords:

Sehnsucht (life longings), Self-concept,
Identity development, Meaning-making,
Psychological well-being

Received: December 20, 2025

Accepted: February 12, 2026

Published: March 03, 2026

Academic Editor:

Ian James Martins, Principal Research
Fellow, Edith Cowan University

Citation:

Eli Sharon (2026) Anchors of the Self: Cultivating Life Longings (Sehnsucht) and Goals in LGBTQ+ Therapeutic Discourse. International Journal of Psychotherapy Practice and Research - 2(2):34-44. <https://doi.org/10.14302/issn.2574-612X.ijpr-25-5933>

Abstract

We have highlighted the significant harm caused by internalized homophobia in LGBTQ+ individuals and the dimensions of internalized identity that often dim and redirect Motivations and Longings for a meaningful and valuable life for individuals in the LGBTQ+ community. We surveyed the dimensions of Life Goals and Longings as a basis for building motivation and a sense of worth in the individual, which forms the foundation of emotional well-being. From the perspective of the need for Longings and Life Goals, we identified relevant focal points in empowering work to establish these anchors within LGBTQ+ individuals. This process primarily focuses, alongside interpersonal and social dimensions, on the internal feelings associated with an individual's sense of identity. We emphasized the importance of having unique, personally tailored Longings for LGBTQ+ clients that are rooted in the dimensions ('virtues') of what is called 'character.' As Hammack and Toolis (2014) articulated, we did not focus on others' perceptions of the LGBTQ+ individual as the sole central factor in constructing an individual's sense of self-esteem, although it is an important factor. Instead, we focused on the view that LGBTQ+ individuals mainly construct their self-esteem based on their perception of their values relative to those of society around them. An individual's values and Goals are at the center of constructing their sense of self-esteem when compared to society's 'correct' Goals. Individuals see themselves in character traits, less so in terms of function, in relation to their environment, and thus define their self-esteem as being 'good' or 'bad' in their own eyes [66, 64, 67].

Introduction

Internalized homophobia is linked to difficulties in the sense of belonging, self-worth, and the construction of a healthy and coherent identity [1, 2, 3, 4, 5]. Studies have addressed the psychological difficulties (symptoms) experienced by members of the LGBTQ+ community due to social stigma based on prejudice, sexist, and gendered perceptions [6, 3, 4, 7]. There is no extensive discussion on the place of Life Longing and how it constructs an individual's overall emotional well-being [8, 9]. We recommend viewing these as focal points in therapeutic work in general and in work with LGBTQ+ populations in particular.

We will focus mainly on emotional well-being, feelings of satisfaction, and value as deeply influenced by the Goals that people are committed to dimensions that are occurring in the therapeutic field recently [10, 11, 12]. We emphasize the importance of seeing longings, values, aspirations, and Life Goals at the center of the therapeutic process from the understanding that they are the foundation of the individual's sense of 'self', identity, and emotional well-being, as Emmons (2003) states. Therapists can view them as the basis for constructing mental well-being [13, 14].

Longings

The definition and theory of longing as a foundation for well-being can be found in only a few studies [8, 15]. Kemper (1978), Lazarus (2020), Shaver et al. (1987), and Turner and Stets (2005) refer to longing as a second-order emotion that constitutes an "umbrella" for first-order emotions such as feelings of joy and sadness. Holm (1999) sees feelings of hope-grief, fear-joy (hope), fear-anger-depression, and satisfaction as encompassed under the umbrella of Longing. Longing is a motif that carries and holds the most intense and basic emotions of an individual. According to the developmental theories of Maslow (1998) and Rogers (1961), what underlies the essential change for a person during their development is a change in Longing.

Longing is known in the literature mainly from the German word *Sehnsucht* and is defined as a high level of desire that sometimes exists with a feeling of pain (due to the lack, E.S.) and exists continuously and repeatedly to achieve the desired or when its attainment is uncertain and still far off [16]. In this definition is also the dimension of hope, of "savoring life", which rests on a feeling of deep need and desire, as expressed in the definition found in the Cambridge Dictionary: "A feeling of wanting something or someone very much". It is a feeling of yearning for something or someone. Here we will use the term Life Longing (LL) which shifting is defined as an intense desire for alternative states in the significant dimension of self-fulfillment in life, serving as a repository that encompasses a wide range of intense and basic emotions related to the essence of the individual, as they deal with personal and collective thoughts and feelings about the optimal or utopian life of the individual [9].

The Distinction Between Longings and Goals

A critical theoretical baseline is the distinction between **Longings** and **Goals** [17]. While Goals are attainable and structured by importance, specificity, and timeframe, longings are inherently unattainable and marked by ambivalence. Longings persist over time, intensifying through self-reflection and self-assessment as individuals mature. They "color" the individual's approach to loss and provide direction when goals remain unattainable.

Longing and Self-Esteem

Self-esteem, vital for well-being, encompasses perceived competence and self-liking [18, 19] and grows from progress toward Life Goals. Autonomous well-being emerges when longings align with freely chosen Goals [20, 21]. Self-esteem is connected to goal achievement and successfully navigating life challenges [22, 23]. Longings reflect past perceptions [9] and drive essential personal development; without this striving, well-being declines [23].

Well-being, Goals, and Motivation

Goals are internal representations vital for well-being, driving consciousness, thought, and emotion. Motivation can be preventative or proactive, with therapeutic approaches shaping Life Goals to enhance purpose and self-efficacy [18, 24, 25, 26]. Meaning in life is a key component of well-being, and its absence predicts psychological distress [27, 28]. Therapy focuses on Goal actualization, as self-

efficacy from the Goal hierarchy builds self-worth. Goals are concrete expressions of future orientation that link well-being to striving and achievement [18, 29, 30]. Therapists help update and strategize Goals, boosting purpose [31, 32, 33]. Meaning independently fosters well-being and development. Therapeutic strategies can utilize Emmons' (1986) four well-being Goal dimensions—Intimacy, Spirituality, Generativity, and Power—prioritizing personal meaning [34]. Models such as Ryff's (1995) and Dissanayake's (2016) provide frameworks for integrated well-being work. Internally oriented motivations yield higher well-being, while external motivations can lead to distress [35]. Striving intensity strongly contributes to well-being [36, 37].

Self-Determination Theory [38] posits that optimal development stems from active motivation. Conversely, avoidance and suppressed longings diminish well-being, a risk especially pronounced in the LGBTQ+ community due to identity concealment and desire suppression, leading to higher rates of distress, anxiety, depression, and suicide [39, 40]. Acting on core virtues fosters consistency, purpose, and coherence in one's life narrative, forming the basis for achieving Life Goals [41, 42, 37]. Therapists assist clients, especially LGBTQ + individuals, in actualizing unique Life Goals aligned with these self-virtues [43].

LGBTQ+ Longings in a Heterosexual Society

The suppression or non-fulfillment of personal longings can extinguish an individual's will to live, undermining resilience and manifesting as anxiety, depression, substance abuse, or suicidality [9]. This is particularly acute within the LGBTQ+ community, where identity concealment and desire suppression correlate with heightened rates of distress [44, 40]. Such concealment erodes hope and self-confidence while exacerbating guilt [45]. For these individuals, consolidating a positive identity requires deep emotional and cognitive integration [46], as self-liking is rooted more in the realization of internal Goals and longings than in external perceptions [47]. Consequently, identity integration affirmed by internal objectives is vital for mental stability and self-acceptance.

Goals and Motivations in therapy

Since the 1950s, psychotherapy has shifted from symptom reduction to holistic well-being and efficacy [48]. To move from abstract longing to concrete action, the therapist must cultivate specific character virtues that allow the individual to withstand societal pressure. Based on Emmons (2003), the following are some specific virtues or qualities for pursuing Life Goals:

Prudence

Well-being involve striving for "good" long-term Goals. However, LGBTQ+ individuals often face societal norms that invalidate their longings, framing their relational aspirations as "not good" and creating systemic barriers. We propose that therapists reframe these goals as positive acts of prudence, transforming protective caution from a mode of concealment into a strategic strength. This shift fosters personal integration and empowers clients to pursue life Goals that align with their authentic identities.

Patience

The capacity to remain present and identify opportunities, which is a prerequisite for meaningful achievement. In therapy, cultivating the patience to tolerate discomfort allows LGBTQ+ individuals to better navigate others' reactions to their identity, thereby mitigating emotional distress [49]. This stance bolsters resilience, enabling clients to confront systemic barriers with reduced resentment while fostering the determination necessary to pursue authentic life Goals. Ultimately, patience serves as a protective shield for sustained and long-term striving.

Perseverance

Distinct from present-focused patience, refers to future-oriented commitment and enduring suffering, despite obstacles. However, it must be directed towards "correct" and authentic Goals, as misdirected effort leads to futility and distress. Therapists can guide clients in defining and adopting suitable Goals.

Longing in Clinical Practice

To effectively identify and work with an individual's longings, clinicians can utilize Holm's (1999) model, which defines three primary dimensions: focus (object, person, or situation), degree of specificity (general vs. specific), and perceived agency (active vs. passive). Beyond these, longings are characterized by direction, emotional valence (positive-negative), expectations, temporal orientation (past-future), and intensity. These dimensions allow therapists to describe and observe longings in a way that facilitates the clinical work of obscuring, enhancing, or actualizing such longings [9].

Following this, we suggest that therapists prioritize clients' developmental needs and self-realization Goals. The initial phase of this therapeutic process focuses on emotional well-being, as described by Fava (2017) based on Ryff's model (1995):

Purpose in Life

Well-being is characterized by a clear sense of direction, meaningful past and present experiences, and beliefs that provide significance to life. In contrast, a deficiency is marked by a lack of meaning, aimlessness, and an absence of intentional Goals or guiding purposes.

Autonomy

Positive well-being is defined by independence, self-determination, and the ability to resist social pressure while regulating behavior according to internal standards. Conversely, low well-being manifests as excessive preoccupation with others' judgments, reliance on external validation for decision-making, and a tendency to conform to social expectations.

Self-acceptance

Negatively, individuals experience self-dissatisfaction, unhappiness, past disappointments, and a desire to be different. They have a favorable self-attitude, accept all personal qualities, and feel positive about their past.

Positive Interpersonal relationships

Well-being involves the capacity for intimacy and concern for others' welfare through reciprocal, trusting relationships. Conversely, poor well-being manifests as social isolation, strained interactions, and lack of flexibility in establishing close connections.

After the initial Goal work, therapists can help clients transition from defensive patterns to an active, proactive stance. This relies on theories emphasizing self-realization as foundational for well-being, such as Maslow's self-actualization (1970), Rogers' fully functioning person (1980), Allport's (1961) maturity, and Jung's (1939) individuation.

Verbalizing Longing

Therapists can help clients articulate their longings through the five dimensions identified by Scheibe et al. (2007):

Incompleteness - Recognizing a missing element essential for a fuller life.

Utopian Alternatives - Imagining ideal realities is a vital process for LGBTQ+ clients, contrasting lived

rejection with longed-for acceptance.

Continuity - Fostering a sense of connection between positive past experiences and future aspirations.

Emotional Ambivalence - Navigating the "bittersweet" Tension between Hope and the Frustration of Reality.

Self-comparison - Guiding clients to establish personal standards of self-worth based on individualized Goals rather than detrimental societal norms.

More detailed information can be found in the works of [50, 51, 52, 8, 53, 54, 55, 56, 57, 58, 59,60, 61, 62].

In practice, the therapist identifies "content anchors" that express the gap between the actual and desired state. Drawing on Erikson's (1959) developmental stages and Shweder's (1996) themes (love, power, achievement, identity), longings are mapped across the life span. The clinical process involves three developmental steps:

Exploring the **origins** (when, how, and why the longing arose).

Tracking **evolution** throughout the client's maturation process.

Understanding the **functional role** of longing in the client's current life and self-efficacy.

This maturation is viewed through a "developmental pattern triangle", accounting for age-graded, history-graded, and unique interpersonal influences. In cases where clients cannot identify any longings, the therapist may view this absence as a clinical starting point. This "unformulated absence" often serves as a protective mechanism. Even **extinguishing longings** can be a strategy to preserve a sense of security, love, or survival under specific life circumstances.

The use of symbolic discourse

At this stage of therapeutic discourse, dealing with the formulation of longings, we recommend the use of metaphors. Sailing to realms beyond current existence and to realms of utopian longing and desire can be developed into verbalization through imagery and metaphors. Scheibe et al. (2007b) and Boesch (1998) mention that in working on Longings, it is good to help the client reside in symbolic dimensions that allow for rich discourse that is less limited by reality. The verbalization of longings expresses personal knowledge unique to the client, based on the individual's life experience, and enumerates basic life conditions that will allow a sense of fulfillment within incompleteness and imperfection. An expansion of the approach that emphasizes the experience of expanding the 'self' beyond existence dependent on others, which allows the individual to have a sense of competence and unique self-realization according to their Goals, can be found in Loonstra et al.'s (2007) article. We recommend that the discourse be rich in emotional dimensions that refer to lack, the utopian ideal, and feelings of sadness, fear, and disappointment, alongside feelings of strength and joy that respond to the negative and positive experiences in their lives, as enumerated by Scheibe et al. (2007b).

Longings and Goals in the Concrete World

The existence and pursuit of Goals are fundamental to well-being [43]. Formulating life Goals involves defining their importance, specificity, and temporal structure [52, 50]. Unlike longings, which remain ambivalent and idealized, these concrete Goals provide a functional roadmap for the individual's daily life: (1) Goal Formulation: Lack of clear verbalization hinders the identification of opportunities, emphasizing "intention viability" for practical action [63]; (2) Intention Activation: Environmental attitudes significantly influence an individual's drive to act. This is crucial for LGBTQ+ individuals, where

therapy may help them establish Goals despite the societal context. Therapists can use imagery, self-compassion, and personal responsibility to connect with clients' unique longings. Processing past disappointments and honoring complex emotions (pain, joy) foster internal commitment and conscious journeys towards well-being. Sheeran et al. (2008) also suggest what they call "intention elaboration" to actualize Goal Orientation. Goal-directed behaviors manifest in diverse forms and contexts, encompassing a rich array of actions beyond direct Goal realization, which mitigates anxiety. For LGBTQ+ clients, therapists must recognize that progress often lacks support from heterosexual environments. Therefore, establishing unique, positive support networks is essential, especially when their environment denies their authentic longings.

A clinical example

Applying Holm's (1999) framework reveals the complexity of an LGBTQ+ individual's longings. Here, the drive to establish a 'normative' family coexists with a fragile self-image [64], eroded by internalized homophobia and the weight of heterosexist supremacy. Modern perspectives highlight that self-worth is a dynamic construct shaped by social validation and personal agency [65]. Within the therapeutic process, the longing for family acts as a vehicle for reclaiming **self-competence**, shifting the focus from internalized stigma toward an active, valued role as a partner or parent [62]. Consequently, the therapist may identify this longing as a central focal point, using 'Family' to address the patient's core needs for belonging and self-esteem. The therapist assists in making these needs present, highlighting how establishing a family can address the individual's needs. These needs converge around the longing for parenthood and partnership, which provide a solid foundation for fulfilling these desires. Within this framework, self-worth is viewed as a byproduct of intergenerational continuity and the perceived impact that the individual has on their family unit and society at large. As therapists examine the **specific dimensions** of fulfilling this longing, they must facilitate exploration of the unique challenges facing non-heterosexual individuals during the family building process. This involves navigating legal, technical, and social complexities, as well as the broader family dynamics encountered when pursuing the Goals encapsulated by the longing for a family. By engaging in the act of 'family making', individuals are empowered to experience themselves as **active agents**. This engagement serves as the foundation for a healthy, proactive stance that fosters self-efficacy and identity. Ultimately, this process builds a sense of meaning underpinning self-worth and overall well-being. To integrate these gains, the therapist helps expand and deepen the actions derived from this longing, treating it as a cluster of needs essential to constructing a 'valued self'.

References

1. Carter, L. W., Mollen, D. & Smith, N. G. (2014). Locus of control, minority stress, and psychological distress among lesbian, gay, and bisexual individuals. *Journal of Counseling Psychology*, 61 (1), 169–175.
2. Igartua, K. J., Gill, K. & Montoro, R. (2009). Internalized homophobia: A factor in depression, anxiety, and suicide in the gay and lesbian population. *Canadian Journal of Community Mental Health*, 22(2), 15–30.
3. Meyer, I. H. (1995). Minority stress and mental health in gay men. *Journal of Health and Social Behavior*, 36(1), 38–56.
4. Meyer, I. H. (2007). Prejudice, social stress, and mental health in lesbian, gay, and bisexual populations: conceptual issues and research evidence. *Psychological Bulletin*, 129(5), 674–697.

5. Meyer, I. H. & Angeles, L. (1995). Minority Stress and Mental Health in Gay Men. *Journal of Health and Social Behavior*, 38–56.
6. Kashubeck-West, S., Szymanski, D. & Meyer, J. (2008). Internalized heterosexism: Clinical implications and training considerations. *The Counseling Psychologist*, 36(4), 615–630.
7. Sherry, A. (2007). Internalized homophobia and adult attachment Implications for clinical practice. *Psychotherapy: Theory, Research, Practice, Training*, 44(2), 219.
8. Holm, O. (1999). Analyses of longing: Origins, levels, and dimensions. *The Journal of Psychology*, 133(6), 621–630.
9. Scheibe, S., Kunzmann, U. & Baltes, P. B. (2007). Wisdom and Life-Longing: The Search for Psychological Utopias and the Management of Their Unrealizability. In C. N. Blackburn, J. A. & Dulmus (Eds.), *Handbook of gerontology: Evidence-based approaches to theory, practice, and policy* (pp. 117–142). New York: John Wiley & Sons.
10. Cawley, M. J., Martin, J. E. & Johnson, J. A. (2000). A virtues approach to personality. *Personality and Individual Differences*, 28(5), 997–1013.
11. McCullough, M. E. & Snyder, C. R. (2000). Classical sources of human strength: Revisiting an old home and building a new one. *Journal of Social and Clinical Psychology*, 19(1), 1–10.
12. Peterson, C. & Seligman, M. E. (2006). The values in action (VIA) classification of strengths. In I. S. Csikszentmihalyi, M. & Csikszentmihalyi (Eds.), *A life worth living: Contributions to positive psychology* (pp. 29–48). Oxford, New York: Oxford University Press.
13. Diener, E., Lucas, R. E., & Oishi, S. (2018). Advances and open questions in the science of subjective well-being. *Collabra: Psychology*, 4(1), 15.
14. Duckworth, A. L., & Seligman, M. E. (2017). The science and practice of self-control. *Perspectives on Psychological Science*, 12(2), 197–218.
15. Scheibe, S., Freund, A. M. & Baltes, P. B. (2007). Toward a Developmental Psychology of Sehnsucht (Life Longings): The Optimal (Utopian) Life. *Developmental Psychology*, 43(3), 778–795.
16. Scheibe, S., Kunzmann, U., & Baltes, P. B. (2009). New Territories of Positive Life-Span Development: Wisdom and Life Longings. In S. C. Snyder, C. R., Lopez, S. J., Edwards, L. M. & Marques (Eds.), *The Oxford handbook of positive psychology* (2nd ed., pp. 171–183). Oxford University Press.
17. Mayser, S., Scheibe, S. & Riediger, M. (2008). An Empirical Differentiation of Goals and Life Longings. *European Psychologist*, 13(2), 126–140.
18. Bandura, A. (1990). Perceived self-efficacy in the exercise of personal agency. *Journal of Applied Sport Psychology*, 2(2), 128–163.
19. Sheldon, K. M., Elliot, A. J., Kim, Y. & Kasser, T. (2001). What Is Satisfying About Satisfying Events? Testing 10 Candidate Psychological Needs. *Journal of Personality and Social Psychology*, 80(2), 325–339.
20. De Charms, R. (2013). *Personal causation: The internal affective determinants of behavior*. New York: Routledge.
21. Deci, E. L. & Ryan, R. M. (1985). *Conceptualizations of Intrinsic Motivation and Self-*

Determination. Intrinsic Motivation and Self-Determination in Human Behavior. New York: Springer.

22. Biswas-Diener, R., Diener, E. & Tamir, M. (2004). The psychology of subjective well-being. *Daedalus*, 133(2), 18–25.
23. Kotter-grühn, D., Kotter-grühn, D., Wiest, M., Paul, P. & Scheibe, S. (2009). What is it we are longing for? Psychological and demographic factors influencing the contents of Sehnsucht (life longings). *Journal of Research in Personality*, 43(3), 428–437.
24. Cochran, W. & Tesser, A. (1996). The “what the hell effect”: Some effects of goal proximity and goal framing on performance. In Leonard L. Martin, Abraham Tesser (Eds.), *Striving and feeling: Interactions among goals, affect, and self-regulation* (pp. 99–120). New York: Plenum Press.
25. Klinger, E. (1998). The search for meaning in evolutionary perspective and its clinical implications. In Paul Wong (Ed.), *Handbook of personal meaning: Theory, research, and application* (pp. 27–50). Mahwah, NJ: Erlbaum.
26. Locke, E. A. & Latham, G. P. (1990). *A theory of goal-setting and task performance*. NJ: Prentice-Hall: Englewood Cliffs.
27. Frankl, V. E. (1992). *Man’s Search for Meaning* Fourth Edition (Vol. 5).
28. Ryff, C. D. (2013). Psychological well-being revisited: Advances in the science and practice of eudaimonia. *Psychotherapy and psychosomatics*, 83(1), 10-28.
29. Emmons, R. A. (1986). Personal Strivings: An Approach to Personality and Subjective Well-Being. *Journal of Personality and Social Psychology*, 51(5), 1058–1068.
30. Steger, M. F., Frazier, P. & 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.
31. Compton, W. C., Smith, M. L., Cornish, K. A. & Quails, D. L. (1996). Factor Structure of Mental Health Measures. *Journal of Personality and Social Psychology*, 71(2), 406–413.
32. Fava, G. A. (2017). Well-Being Therapy–Treatment Manuals and Clinical Applications. *Verhaltenstherapie*, 27, 141-143.
33. Guidi, J., & Fava, G. A. (2021). Conceptual and clinical innovations of well-being therapy. *International Journal of Cognitive Therapy*, 14(1), 196-208.
34. Baltes, M. M. & Carstensen, L. L. (2003). The process of successful aging: Selection, optimization, and compensation. In *Understanding human development: Dialogues with lifespan psychology* (pp. 81–104). Boston: Springer.
35. Kasser, T. & Ryan, R. M. (1996). Further examining the American dream- Differential correlates of intrinsic and extrinsic goals. *Personality and Social Psychology Bulletin*, 22(3), 280–287.
36. Bandura, A. (2006). Toward a psychology of human agency. *Perspectives on Psychological Science*, 1(2), 164–180.
37. Seligman, M. E. (2011). *Flourish: A visionary new understanding of happiness and well-being*. New York: Simon and Schuster.
38. Deci, E. L. & Ryan, R. M. (2012). Self-Determination Theory. In Paul A. M. Van Lange, Arie W. Kruglanski, E Tory Higgins (Eds.), *Handbook of theories of social psychology* (Vol. 1(20), pp. 416–436). Washington, DC.: Sage.

39. Herek, G., M, Chopp, R. & Strohl, D. (2007). Sexual Stigma: Putting Sexual Minority Health Issues in Context. *The Health of Sexual Minorities*, 1–28.
40. Meyer, I. H. & Dean, L. (1998). Internalized homophobia, intimacy, and sexual behavior among gay and bisexual men. In Gregory M. Herek (Ed.), *Stigma and sexual orientation: Understanding prejudice against lesbians, gay men, and bisexuals* (pp. 160–186). New York: SAGE Publications.
41. Mittelmark, M. B., Sagy, S., Eriksson, M., Bauer, G. F., Pelikan, J. M., Lindström, B., & Espnes, G. A. (Eds.). (2022). *The handbook of salutogenesis* (2nd ed.). Springer Nature.
42. Sagy, S., Eriksson, M., & Braun-Lewensohn, O. (2015). The salutogenic paradigm. *Positive psychology in practice: Promoting human flourishing in work, health, education, and everyday life*, 61-80.
43. Emmons, R. A. (2003). Personal goals, life meaning, and virtue: wellsprings of a positive life. In C. L. M. Keyes and J. Haidt (Eds.), *Flourishing: Positive Psychology and the Life Well-Lived* (pp. 105–128). Washington, DC.: American Psychological Association.
44. Cabaj, P. (1996). Substance abuse in gay men, lesbians and bisexuals. In Robert P. Cabaj, Terry S. Stein (Eds.), *Textbook of homosexuality and mental health* (pp. 783–800). Washington, DC.: American Psychiatric Press.
45. Bagley, C. & Tremblay, P. (1997). Suicidal behaviors in homosexual males. *Crisis*, 18(1), 24–34.
46. Chang, C. J., Kellerman, J. K., Fehling, K. B., Feinstein, B. A. & Selby, E. A. (2021). The roles of discrimination and social support in the associations between outness and mental health outcomes among sexual minorities. *American Journal of Orthopsychiatry*, 91(5), 607.
47. Baumeister, R. F., Tice, D. M. & Hutton, D. G. (1989). Self-Presentational Motivations and Personality Differences in Self-Esteem. *Journal of Personality*, 57(3), 547–579.
48. Parloff, M. B., Kelman, H. C. & Frank, J. D. (1954). Comfort, effectiveness, and self-awareness as criteria of improvement in psychotherapy. *American Journal of Psychiatry*, 111(5), 343–352.
49. Schnitker, S. A. (2012). An examination of patience and well-being. *The Journal of Positive Psychology*, 7(4), 263–280.
50. Austin, J. T. & Vancouver, J. B. (1996). Goal Constructs in Psychology: Structure, Process, and Content. *Psychological Bulletin*, 120(3), 338–375.
51. Boesch, E. E. (1998). *Sehnsucht: Von der Suche nach Glück und Sinn* [Longing: About the search for happiness and meaning]. Bern, Switzerland: Huber.
52. Elliot, A. J., & Hulleman, C. S. (2017). Achievement goals. *Handbook of competence and motivation: Theory and application*, 2, 43-60.
53. Vogt, M. C. (1993). *Der anthropologische Zusammenhang zwischen Sehnsucht und Sucht* [The anthropological relationship between longing and addiction]. University of Zurich, Zurich, Switzerland.
54. Belk, R. W., Ger, G. & Askegaard, S. (2003). The Fire of Desire: A Multisited Inquiry into Consumer Passion. *Journal of Consumer Research*, 30(3), 326–351.
55. Diener, E. & Diener, C. (1996). Most people are happy. *Psychological Science*, 7(3), 181–186.
56. Diener, E. & Fujita, F. (1995). Resources, Personal Strivings, and Subjective Well-Being: A Nomothetic and Idiographic Approach. *Journal of Personality and Social Psychology*, 68(5), 926–935.

57. Goffman, E. (1978). *The presentation of self in everyday life*. In *The presentation of self in everyday life* (pp. 1–10). London: Harmondsworth.
58. Leary, M. R. (2014). The interplay of private self-processes and interpersonal factors in self-presentation. In *Psychological Perspectives on the Self* (p. (Vol. 4) 127-156). New York: Psychology Press.
59. Mead, G. H. (1913). The Social Self. *The Journal of Philosophy, Psychology and Scientific Methods*, 10(14), 374–380.
60. Mead, G. H. (1934). *Mind, self, and society*. Chicago: University of Chicago Press.
61. Szanto, T., & Landweer, H. (Eds.). (2020). *The Routledge handbook of phenomenology of emotion*. Routledge.
62. Tafarodi, R. W. & Swann Jr, W. B. (2001). Two-dimensional self-esteem: Theory and measurement. *Personality and Individual Differences*, 31(5), 653–673.
63. Sheeran, P., Webb, T. L. & Gollwitzer, P. M. (2008). The Interplay Between Goal Intentions and Implementation Intentions. *Personality and Social Psychology Bulletin*, 31(2005), 87–98.
64. Rosenberg M. (1965). *Society and the adolescent self-image*. Princeton, NJ: Princeton University Press.
65. Orth, U., Robins, R. W. & Widaman, K. F. (2012). Life-span development of self-esteem and its effects on important life outcomes. *Journal of Personality and Social Psychology*, 102(6), 1271.
66. Marsh, H. W., & O'Mara, A. (2008). Self-concept is as multidisciplinary as it is multidimensional: A review of theory, measurement, and practice in self-concept research. *Educational Psychology Review*, 20(1), 9–30.
67. Ventegodt, S. & Merrick, J. (2014). Significance of self-image and identity in youth development. *International Journal of Child and Adolescent Health*, 7(3), 199–209.
68. Allport, G. W. (1961). *Pattern and growth in personality*. Oxford, England: Holt, Reinhart & Winston.
69. Deci, E. L., & Ryan, R. M. (1985). Conceptualizations of intrinsic motivation and self-determination. In *Intrinsic motivation and self-determination in human behavior* (pp. 11-40). Boston, MA: Springer US.
70. Dissanayake, M. P. (2016). *The Multidimensional Model: An Integrated Approach to Psychological Well-being*. Felicitation volume of Prof. Kulasena Widanagama. Kelaniya.
71. Erikson, E. (1959). *Identity and the life cycle*. New York: Norton.
72. Freund, A. M. & Baltes, P. B. (2005). Entwicklungsaufgaben als Organisationsstrukturen von Entwicklung und Entwicklungsoptimierung [Developmental tasks as organizing structure for development and its optimization]. In S. H. Filipp & U. M. Staudinger (Eds.), *Enzyklopädie der Psychologie* (p. Vol. 6, pp. 35–78). Goettingen, Germany: Hogrefe.
73. Hammack, P. L., & Toolis, E. E. (2014). Narrative and the advancement of post-pathological psychology: The case of sexual identity development. *Social and Personality Psychology Compass*, 8(3), 69–81.
74. Jung, C. G. (1939). *The integration of the personality* (1st ed.). New York: Farrar & Rinehart.
75. Kemper, T. D. (1978). *A social interactional theory of emotions*. New York: Wiley.

76. Lazarus, R. S. (2020). *Emotions and Adaptation*. (Reprinted/Updated themes in The Cambridge Handbook of Positive Psychology).
77. Loonstra, B., Brouwers, A. & Tomic, W. (2007). Conceptualization, Construction and Validation of the Existential Fulfilment Scale. *European Psychotherapy*, 7(1), 5–18.
78. Maslow, A. (1998). *Towards a psychology of being* (3rd ed.). New York: Wiley.
79. Maslow, A. H. (1970). *Motivation and Personality* (2nd ed.). New York: Harper & Row.
80. Rogers, C. (1961). *On becoming a person*. New York: Riverside Press.
81. Rogers, C. R. (1980). *A way of being*. (C. R. Rogers, Ed.). Boston, MA: Houghton Mifflin Harcourt.
82. Shaver, P., Schwartz, J., Kirson, D., Connor, G. O., Campos, J., Darley, J., ... Smith, C. (1987). Emotion Knowledge: Further Exploration of a Prototype Approach. *Journal of Personality and Social Psychology*, 52(6), 1061.
83. Shweder, R. A. (1996). True ethnography: The lore, the law, and the lure. In R. A. Jessor, R., Colby, A. & Shweder (Ed.), *Ethnography and human development: Context and meaning in social inquiry* (pp. 15–52). Chicago: University of Chicago Press.
84. Turner, J. H., & Stets, J. E. (2005). *The sociology of emotions*. Cambridge University Press.