

(Research Article)

A Pastoral Counseling Model for Christian Generation Z Experiencing Future Anxiety

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Abstract: Christian Generation Z is negotiating adulthood within an unusually dense field of uncertainty: unstable work transitions, digital comparison, climate concern, post-pandemic disruption, and shifting religious participation. These conditions intensify future anxiety, understood here as anticipatory apprehension toward an unfavorable personal future. This article aims to construct a pastoral counseling model for Christian Gen Z who experience future anxiety without reducing their distress either to a clinical disorder alone or to insufficient faith. Because no field data were collected, the study uses a constructive conceptual design grounded in an integrative literature review, practical theological reasoning, and a critical synthesis of psychological, pastoral, and youth mental health scholarship published before 2024. The analysis identifies three main findings. First, future anxiety among Christian Gen Z is best interpreted as a narrative disruption of agency, meaning, belonging, and hope. Second, pastoral counseling requires an integrative stance that combines spiritual competence, evidence-informed anxiety care, digital awareness, and ecclesial accompaniment. Third, the article proposes the SELAH model: Situational-spiritual assessment, Empathic presence, Lament and meaning reconstruction, Adaptive agency planning, and Hope-building ecclesial accompaniment. The model offers a non-reductive framework for churches, counselors, and Christian educators while emphasizing referral, ethical boundaries, and further empirical testing.

Keywords: Christian Generation Z; Constructive Theology; Ecclesial Accompaniment; Future Anxiety; Hope.

1. Introduction

Generation Z has entered adolescence and early adulthood amid conditions that make the future appear both hyper-visible and unstable. Digital platforms expose young people to uninterrupted comparison, global crises are encountered in real time, and educational or career planning occurs within economic volatility. The psychological language used to describe this situation varies - stress, worry, anxiety, uncertainty, intolerance, eco-anxiety, or depressive distress - but a common thread is anticipatory fear: the sense that the future is approaching faster than one can prepare for it. International reports describe youth mental health as a public concern requiring more accessible, community-based, and culturally responsive support (UNICEF, 2021). Global mental-health policy also calls for stronger systems of care rather than leaving distress to individual endurance alone (World Health Organization, 2022). Before the pandemic, Generation Z was already described as highly stressed by national and personal futures (American Psychological Association, 2018). Although such reports cannot be generalized uncritically to every local church context, they indicate that future-oriented distress is not a marginal pastoral issue.

The object of this article is Christian Generation Z who experience future anxiety. The term Generation Z is used as a practical cohort marker rather than as a deterministic identity label. It points to young people whose formative years have been deeply shaped by digital connectivity, educational competition, public crises, and the weakening of stable institutional connects. Developmentally, many occur during the transition from late adolescence to emerging

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adulthood, a period characterized by identity exploration, instability, self-focus, and vocational decision-making (Arnett, 2000). Psychologically, this transition becomes more difficult when uncertainty is experienced not as normal openness. Still, as a threat, future anxiety can be understood as a cognitive-affective orientation marked by apprehension and fear regarding unfavorable changes in one's personal future (Zaleski, 1996). Uncertainty about a possible future threat can disrupt anticipatory regulation (Grupe & Nitschke, 2013). Fear of the unknown may also function as a central transdiagnostic feature of anxiety (Carleton, 2016).

For Christian youth and young adults, future anxiety is not merely a private mental state. It affects vocation, discipleship, prayer, identity, finances, academic persistence, relational decisions, and participation in the church community. Some young Christians fear failing God's purpose; others fear being trapped in a life that does not align with family, church, or social media expectations. Some experience prayer as consolation, while others experience spiritual guilt when anxiety persists. Pastoral counseling, therefore, cannot simply repeat doctrinal affirmations about providence without attending to the lived experience of anxiety, nor can it outsource every form of distress to clinical professionals without recognizing the church's responsibility for accompaniment, meaning-making, and communal care.

Previous research offers several relevant but incomplete resources. Studies on youth mental health show rising concern about anxiety and mood problems among adolescents and young adults, including cohort-related increases in psychological distress (Twenge et al., 2019). Research on social media suggests associations between social media use, depression, anxiety, and psychological distress, especially through comparison, approval seeking, and problematic patterns of use (Keles, McCrae, & Grealish, 2020). Climate anxiety research also shows that many young people experience distress, anger, helplessness, and betrayal when imagining the long-term future of the planet (Hickman et al., 2021). Child and adolescent anxiety literature supports developmentally sensitive assessment and treatment (Creswell, Waite, & Hudson, 2020). Cognitive-behavioral therapy remains strongly represented in the evidence base for anxiety treatment among young people (James et al., 2020). Spiritual well-being may function as a protective factor, while negative religious coping can intensify distress (Aggarwal et al., 2023). Classic religious coping theory explains why faith can operate as either a resource or a source of strain (Pargament, 1997).

The weakness of the existing literature is not the absence of research but insufficient integration. Clinical literature often treats religion as a contextual variable rather than a theological world of meaning. Pastoral literature sometimes addresses anxiety through prayer, scripture, and community, but does not always engage evidence-informed understandings of uncertainty, cognitive avoidance, referral, and risk assessment. Youth ministry literature often emphasizes belonging and discipleship while leaving the specific counseling process needed for future anxiety underdeveloped. In addition, much Christian discourse about God's plan may unintentionally intensify anxiety if it becomes perfectionistic, deterministic, or dismissive of developmental exploration.

The research problem is therefore: What constructive pastoral counseling model can responsibly address future anxiety among Christian Generation Z by integrating psychological insight, theological meaning-making, and ecclesial accompaniment? This article offers a conceptual solution through a model called SELAH: Situational-spiritual assessment, Empathic presence, Lament and meaning reconstruction, Adaptive agency planning, and Hope-building ecclesial accompaniment. The contribution is threefold. Theoretically, it reframes future anxiety as a disruption of agency, meaning, belonging, and hope. Practically, it provides a sequence that pastors and Christian counselors can adapt without exceeding their competence. Theologically, it proposes a pastoral response that permits Lament, uncertainty, and gradual discernment rather than forcing premature certainty. The article proceeds by reviewing relevant literature, explaining the constructive method, presenting three analytical findings, comparing the contribution with previous approaches, and concluding with implications and limitations.

2. Literature Review

Future anxiety differs from ordinary planning stress because it is organized around an anticipated threat. The person does not merely think about future events but emotionally inhabits a feared version of the future (Zaleski, 1996). Anxiety research supports this interpretation because uncertainty about a possible threat can alter attention, emotion, and anticipatory behavior (Grupe & Nitschke, 2013). Fear of the unknown can also operate as a foundational fear beneath many anxiety presentations (Carleton, 2016). For Christian Gen Z, the feared future may involve career failure, debt, relational instability, family disappointment, ecological catastrophe, political polarization, or the fear of missing God's will. Future anxiety

is therefore not only a symptom cluster but a constricted imagination of what life may become.

The developmental context is crucial. Emerging adulthood helps explain why future-oriented questions become especially intense in the late teens and twenties: identity, love, work, worldview, and independence are under negotiation (Arnett, 2000). However, contemporary young people negotiate these tasks in a digital environment. Social media research consistently raises concern about associations with depression, anxiety, and psychological distress, although causality and mechanisms vary (Keles, McCrae, & Grealish, 2020). Digital media do not create future anxiety on their own. However, they amplify comparison, expose young people to curated success, and compress time: one's future always seems measurable against someone else's present. The pandemic also intensified concern about uncertainty, social isolation, interrupted schooling, and family stress. Youth mental health is now widely framed as shaped by social determinants, care access, and institutional support rather than merely individual weakness (UNICEF, 2021). Global mental-health policy makes the same point by emphasizing system transformation and service gaps (World Health Organization, 2022).

Clinical literature provides necessary but incomplete guidance. Cognitive-behavioral therapy has a strong evidence base for anxiety (Hofmann et al., 2012). Reviews of child and adolescent anxiety treatment also identify cognitive-behavioral therapy as a central intervention (James et al., 2020). Developmentally appropriate assessment should consider avoidance, safety behaviors, parental or environmental factors, and access barriers (Creswell, Waite, & Hudson, 2020). These insights are useful for pastoral counseling because future anxiety often persists through avoidance: the young person delays decisions, over-researches options, seeks constant reassurance, or spiritualizes indecision. However, pastoral counseling is not identical to psychotherapy. Its distinctive competence lies in spiritual assessment, theological interpretation, moral and vocational discernment, ritual practice, and communal support. The challenge is to use evidence-informed insight without pretending that pastors are clinical specialists unless they are trained and licensed as such.

Religion and spirituality are empirically relevant to mental health, but the relationship is not simple. Broad reviews connect religion and spirituality with multiple mental-health outcomes while also recognizing methodological complexity (Koenig, 2012). A more recent review reaches a similar conclusion and stresses the need for careful interpretation of the evidence (Lucchetti, Koenig, & Lucchetti, 2021). Spiritually or religiously tailored psychotherapies can be beneficial when they are responsive to the client's beliefs and values (Captari et al., 2018). Among young people aged 10-24, spiritual well-being may be protective, while negative religious coping can be associated with greater depressive symptoms (Aggarwal et al., 2023). This distinction is vital. Christian language may heal or harm depending on how it is used. Trust God can be a liberating invitation when embedded in compassionate accompaniment; it can become damaging when used to shame anxious youth, deny structural problems, or suppress legitimate grief.

Pastoral care theory offers a framework for this integration. Pastoral care must be interpretive, relational, and attentive to lived theology (Doehring, 2015). It must also be intercultural and contextual, resisting one-size-fits-all ministry (Lartey, 2003). Integration in Christian counseling requires humility because psychological, theological, and spiritual dimensions are interwoven in the person (McMinn, 2011). Practical theological reasoning is useful here because it moves from lived experience to interdisciplinary interpretation, theological judgment, and faithful practice (Osmer, 2008). Spiritual and religious competence also requires self-awareness, respect, knowledge, and skill when religious material appears in counseling (Vieten et al., 2013).

A final cluster of literature concerns hope, meaning, and belonging. Hope theory defines hope in terms of agency and pathways: people need both motivation and plausible routes toward goals (Snyder, 2002). Meaning research distinguishes between the presence of meaning and the search for meaning. This distinction helps explain why many Gen Z Christians are not rejecting faith but are searching for a coherent future within it (Steger et al., 2006). Stressful events often demand meaning-making when global beliefs and situational realities collide (Park, 2010). Sense-of-purpose interventions are emerging as a relevant area for youth depression and anxiety prevention (Hielscher et al., 2023). Connectedness has protective relevance for youth depression and anxiety (Raniti et al., 2022). Quality social connection also matters in digital interventions for young people with depression and anxiety (Dewa et al., 2021). The literature gap, then, is a constructive pastoral model that brings together future-oriented anxiety, Christian meaning-making, evidence-informed skills, and ecclesial belonging.

3. Proposed Method

This study uses a qualitative, constructivist conceptual design. It is not field research and does not claim to report interview findings, survey data, prevalence rates, or intervention outcomes. The article is best classified as a conceptual research article grounded in an integrative literature review and practical theological construction. Its purpose is to generate a model that is coherent, ethically usable, and ready for later empirical evaluation.

The sources were selected purposively from four bodies of literature published before 2024. The first body concerns future anxiety, uncertainty, and youth anxiety, including classical and contemporary psychological research. The second concerns Generation Z, digital life, climate change, and youth mental health, as reported by reputable institutions. The third concerns religion, spirituality, mental health, spiritually integrated psychotherapy, and spiritual competence. The fourth concerns pastoral counseling, practical theology, hope, meaning, resilience, and ecclesial accompaniment. Books were included when they function as recognized theoretical sources in pastoral care or the psychology of religion. Journal articles and systematic reviews were prioritized where available.

Data collection was conducted through structured literature identification rather than empirical sampling. The inclusion criteria were: relevance to future-oriented anxiety; young people or emerging adults; Christian or religious-spiritual counseling relevance; methodological credibility; and usefulness for constructing a pastoral model. The exclusion criteria were: popular blogs, unsupported opinion pieces, non-credible websites, unverified claims, and sources published after 2023. Because the article is conceptual, the term 'data' refers to scholarly arguments, theoretical constructs, and synthesized findings rather than to participant-generated evidence.

The analysis used thematic synthesis and practical theological reasoning. First, recurring themes were extracted: uncertainty, future threat, digital comparison, developmental transition, religious coping, hope, meaning, belonging, and referral ethics. Second, these themes were interpreted through practical theology, especially the movement from lived experience to interdisciplinary interpretation, theological normativity, and practical response (Osmer, 2008). Third, the emerging model was tested for conceptual coherence. Each step had to address a real dimension of future anxiety, remain consistent with Christian pastoral care, and avoid replacing clinical treatment where clinical care is needed.

Validity in this kind of study is not statistical validity but trustworthiness. Four strategies were used. Source triangulation compared psychological, theological, clinical, and institutional literature. Conceptual transparency was maintained by clearly distinguishing empirical findings from constructive proposals. Negative-case sensitivity was applied by acknowledging that religion can intensify distress through shame, spiritual bypassing, or negative religious coping. Practical plausibility was considered by asking whether pastors, Christian counselors, and church educators could adapt the model within realistic ministry settings.

Ethically, the study involves no human participants and therefore does not require informed consent or institutional review for fieldwork. Nevertheless, ethical issues are central to the proposed model. Future anxiety can coexist with generalized anxiety disorder, depression, trauma, suicidal ideation, self-harm risk, or family violence. Pastoral counselors must not overreach their competence. They should conduct basic risk screening, maintain confidentiality within legal and pastoral limits, refer to licensed mental-health professionals when needed, and avoid implying that persistent anxiety is evidence of weak faith. The model, therefore, assumes collaborative care rather than pastoral self-sufficiency.

4. Results and Discussion

Future Anxiety as a Disrupted Narrative of Agency, Meaning, Belonging, and Hope

The first conceptual finding is that future anxiety among Christian Gen Z is best understood as a disrupted narrative rather than merely an isolated feeling. Anxiety narrows the young person's imagined future until it appears threatening, morally loaded, and unavoidable. The future becomes an object of apprehension rather than a horizon of discernment (Zaleski, 1996). In uncertainty research, the unknown is frequently interpreted as a threat rather than a possibility (Carleton, 2016). Anticipatory anxiety also involves cognitive and emotional preparation for a possible threat (Grupe & Nitschke, 2013). For Gen Z Christians, this narrative disruption often has four dimensions.

The first dimension is agency. Young people may feel responsible for making the right decision about education, work, relationships, ministry, finances, and migration, while simultaneously feeling that the systems shaping their future are beyond their control. Hope requires both agency and pathways (Snyder, 2002). Future anxiety damages both. Agency is weakened

because the young person does not feel capable of moving forward; pathways are weakened because available options appear blocked, risky, or spiritually ambiguous. Pastoral counseling should therefore not treat hope as a slogan. Hope must be reconstructed as a disciplined capacity to identify faithful next steps even when total certainty is unavailable.

The second dimension is meaning. Many Christian Gen Z members are not simply asking, What job should I take? However, what kind of life is worth living before God? The distinction between the presence of meaning and the search for meaning is pastoral because searching for meaning is not necessarily unbelief (Steger et al., 2006). It may be a sign of serious moral and spiritual development. Meaning-making becomes especially urgent when global beliefs - God is good, life has purpose, obedience matters - collide with situational uncertainty, such as unemployment, family pressure, or repeated failure (Park, 2010). Pastoral counseling should not rush the counselee from disorientation to certainty. It should help the counselee name the conflict, lament it, test interpretations, and reconstruct meaning through prayer, scripture, wise counsel, and concrete action.

The third dimension is belonging. Future anxiety becomes heavier when borne alone. Connectedness can protect young people from depression and anxiety (Raniti et al., 2022). Quality social connection is also relevant even when support is mediated through digital interventions (Dewa et al., 2021). This has direct ecclesial implications. A church may preach hope, but still produce anxiety if young people experience it as a performance arena where only successful testimonies are welcome. Conversely, a church can become a protective ecology when it provides intergenerational mentoring, peer solidarity, honest testimony, and practical support. Resilience is not merely an individual trait but a function of accessible relationships, resources, and culturally meaningful support (Ungar, 2011).

The fourth dimension is theological hope. Christian hope differs from optimism because it is not dependent on smooth outcomes. However, pastoral misuse of hope can become avoidant. Statements about divine providence may silence Lament, and claims about God's perfect plan may make every decision feel like a hidden exam. Religious coping literature distinguishes positive coping, such as trust and spiritual support, from negative coping, such as feeling punished or abandoned by God (Pargament, 1997). Spiritual well-being may protect young people, while negative religious coping can worsen distress (Aggarwal et al., 2023). Thus, pastoral counseling must ask not only whether a young person believes in God but how that belief is functioning in anxiety.

This narrative interpretation corrects two reductions. The first reduction is clinical reductionism, where future anxiety is treated only as a symptom requiring a technique. Techniques matter, but Christian Gen Z also needs theological meaning and communal belonging. The second reduction is spiritual reductionism, where anxiety is treated only as a failure of trust. Trust matters, but anxiety is also embodied, cognitive, developmental, digital, and social. A constructive pastoral model must hold these layers together.

Integrating Spiritual Competence, Evidence-Informed Care, and Digital-Relational Ecology

The second finding is that pastoral counseling for future anxiety requires an integrative stance. Integration does not mean adding a Bible verse to a psychological technique or adding psychological vocabulary to spiritual advice. It means discerning which dimension of distress is primary at a given moment and responding with appropriate competence. Religiously and spiritually tailored psychotherapy can be effective when aligned with clients' values (Captari et al., 2018). Competence in religious and spiritual domains also requires respect, knowledge, and skill (Vieten et al., 2013). For pastoral counselors, competence begins with theological humility: the counselor must not assume that a counselee's anxiety has a single spiritual cause.

Evidence-informed pastoral care can borrow from anxiety treatment without becoming unauthorized psychotherapy. The cognitive-behavioral literature emphasizes the roles of avoidance, catastrophic interpretation, reassurance seeking, and exposure to feared situations (Hofmann et al., 2012). Youth anxiety literature also stresses the importance of developmentally appropriate assessment and attention to maintaining factors (Creswell, Waite, & Hudson, 2020). Systematic review evidence supports cognitive-behavioral therapy for anxiety disorders in children and adolescents (James et al., 2020). In pastoral counseling, these insights can be translated into accessible practices: helping the counselee identify future-oriented catastrophic thoughts; distinguishing controllable next steps from uncontrollable outcomes; reducing compulsive reassurance seeking; and practicing gradual engagement with avoided responsibilities, such as applying for work, discussing finances, or making academic decisions. Such practices remain pastoral when embedded in prayerful discernment, moral reflection, and supportive accountability.

At the same time, pastoral care must be spiritually competent. Lived theology refers to the often implicit theology people use to interpret suffering (Doehring, 2015). A Gen Z Christian might intellectually believe that God is gracious, but emotionally live under an image of God as a disappointed examiner. Another may use spiritual language to avoid grief: I should not feel anxious because God is in control. In such cases, pastoral counseling should explore images of God, inherited family expectations, church messages about success, and the counselee's experience of prayer. Integration requires careful attention to the person, the counseling relationship, and the spiritual interventions used (McMinn, 2011). Prayer, scripture, confession, silence, and blessing are not neutral techniques; they must fit the counselee's readiness and not be used coercively.

Digital-relational ecology is also essential. Screens mediate Gen Z's future imagination. Social media can normalize mental-health conversations, provide support, and connect isolated youth; it can also intensify comparison, urgency, and self-branding. The relationship between social media, anxiety, and depression is complex, but comparison and approval seeking remain pastorally relevant patterns (Keles, McCrae, & Grealish, 2020). Pastoral counseling should therefore include digital assessment: What future does the counselee repeatedly see online? Which accounts intensify inadequacy? Does the counselee use online religious content for formation, avoidance, argument, or reassurance? Does digital life help or damage sleep, concentration, and embodied community? Such questions are pastoral because they concern desire, identity, attention, and discipleship.

The integrative stance also requires referral. Mental-health systems need transformation and expanded access to support (World Health Organization, 2022). Churches can contribute, but they cannot replace clinical services. Pastoral counseling should include clear referral pathways for severe anxiety, panic, trauma, self-harm, suicidal ideation, eating disorders, substance misuse, or functional impairment. Referral should not be framed as pastoral failure. It is an act of care. A theologically mature church recognizes common grace in psychological science and professional mental-health care.

Finally, integration must be ecclesial. Pastoral care is contextual and relational rather than abstract and standardized (Lartey, 2003). Christian Gen Z needs more than individualized sessions; they need communities where uncertainty can be spoken about without stigma. Intergenerational mentoring can help young people discover that faithful lives rarely unfold in straight lines. Small groups can provide accountability for practical next steps. Worship can reorient attention toward God without denying fear. Service can move anxious self-focus into meaningful participation. The church's role is not to guarantee outcomes but to become a trustworthy ecology of hope.

The SELAH Model for Pastoral Counseling with Christian Gen Z

The third finding is the proposed SELAH model. Selah, a biblical term associated with pause and reflection, is used here as an acronym for a five-phase pastoral counseling process: Situational-spiritual assessment, Empathic presence, Lament and meaning reconstruction, Adaptive agency planning, and Hope-building ecclesial accompaniment. The model is not a clinical manual. It is a constructive framework for pastors, pastoral counselors, campus ministers, and Christian educators who need a responsible approach to accompanying Gen Z Christians facing future anxiety.

The first phase is the situational-spiritual assessment. The counselor begins by mapping the counselee's future anxiety in concrete terms. What future is feared? What decision, deadline, relationship, or imagined failure triggers anxiety? What bodily symptoms, thoughts, avoidance patterns, and digital habits accompany it? What spiritual interpretations are attached to it? This phase should include basic risk screening and referral judgment. It should also include spiritual assessment: images of God, prayer experience, church belonging, family expectations, and religious coping style. Religion and spirituality should be taken seriously as part of human functioning, not treated as a decorative background (Pargament et al., 2013). In this model, assessment prevents premature advice. It also distinguishes normal developmental uncertainty from clinically significant distress.

The second phase is Empathic presence. Future-anxious Gen Z Christians often receive advice before they are heard. Empathic presence slows the process. The counselor validates distress without endorsing catastrophic conclusions. This is where pastoral counseling differs from motivational speaking. The young person does not need to be pushed immediately into achievement or spiritual victory. They need a relationship in which fear can be named safely. Listening reveals the lived theology beneath the anxiety (Doehring, 2015). Empathic presence also reduces shame. When anxiety is interpreted as weak faith, young people may hide distress until it becomes more severe. Pastoral presence communicates that anxiety is a human experience that can be brought before God and community.

The third phase is Lament and meaning reconstruction. Future anxiety often contains grief: grief over lost certainty, delayed dreams, economic limitation, family conflict, or a world that feels unsafe. Christian counseling should recover Lament as a faithful practice. Lament allows the counselee to tell the truth before God rather than performing premature peace. Meaning reconstruction then asks: What story is anxiety telling? What story does the gospel open without denying reality? Stressful experiences require reinterpretation when they violate global beliefs (Park, 2010). The counselor may use scripture, prayer, journaling, theological reflection, or narrative exercises, but the aim is not to force a single answer. The aim is to move from catastrophic meaning - My future is already ruined - to faithful meaning - My future is uncertain, but I can discern the next faithful step with God and others.

The fourth phase is Adaptive agency planning. This phase translates hope into action. Hope requires both motivation and workable pathways toward goals (Snyder, 2002). The counselor helps the counselee clarify goals, generate pathways, and strengthen agency. The emphasis is on next steps rather than total certainty. For example, a student anxious about a career may identify three concrete actions: speak with a mentor, revise a curriculum vitae, and apply to two opportunities. A counselee anxious about God's will may distinguish moral obedience, wise preference, and uncertain outcomes. Evidence-informed anxiety care also encourages reducing avoidance. The counselor can help the counselee identify one avoided task and practice gradual engagement with it. This does not eliminate prayer; it embodies prayer as faithful movement.

The fifth phase is Hope-building ecclesial accompaniment. Future anxiety returns when the counselee leaves the counseling room but returns to isolation. Therefore, the model ends with community. The counselor identifies supportive relationships, mentoring structures, small groups, family conversations, or professional referrals. Youth connectedness supports mental-health protection (Raniti et al., 2022). Quality social connection matters even when support is digitally mediated (Dewa et al., 2021). Resilience depends on supportive social ecologies (Ungar, 2011). Ecclesial accompaniment should be specific. Joining the community is too vague. The plan should identify who will walk with the counselee, what a realistic rhythm of contact is, what boundaries are needed, and what signs indicate that additional help is required.

The SELAH model answers the research problem by integrating psychological and theological dimensions of future anxiety without collapsing one into the other. It begins with assessment because anxiety must be understood before it is addressed. It centers empathic presence because shame blocks disclosure. It includes Lament because Christian hope must pass through truthfulness. It adds agency planning because hope requires pathways. It ends with accompaniment because Gen Z anxiety is relationally and ecologically shaped. The model is both constructive and testable. Future studies can examine its acceptability among Christian Gen Z, its feasibility in church counseling settings, and its outcomes when combined with referral protocols.

5. Comparison

Compared with general clinical approaches, the SELAH model gives more explicit attention to theology, lived images of God, Lament, vocation, and church community. Cognitive-behavioral approaches offer strong tools for anxiety, but pastoral counseling must also interpret how faith, guilt, prayer, and calling function in the counselee's future narrative. Compared with traditional pastoral advice, the model is more systematic and risk-aware. It resists quick spiritualization and includes assessment, referral, and evidence-informed attention to avoidance and uncertainty.

Compared with broad studies of religion and mental health, this article narrows the focus to Christian Gen Z and future anxiety. Spiritually integrated psychotherapy research supports the relevance of client belief and value alignment (Captari et al., 2018). Youth-focused evidence also shows that spiritual well-being and negative religious coping can affect mental-health outcomes in different directions (Aggarwal et al., 2023). Current reviews of spirituality, religiousness, and mental health support the importance of careful interpretation rather than simple causal claims (Lucchetti, Koenig, & Lucchetti, 2021). These studies do not provide a pastoral process specifically oriented to future-anxious Christian youth. The contribution of this article is therefore not a new empirical claim but an integrative pastoral model.

The strength of the approach is its non-reductive character. It recognizes anxiety as cognitive, emotional, bodily, digital, social, and spiritual. It also gives the church a constructive role without making the church a substitute for clinical care. Its limitation is that the model has not yet been empirically tested. It also requires pastoral competence; poorly trained counselors could misuse spiritual practices, ignore risk signs, or impose theological interpretations.

Therefore, the model should be implemented with training, supervision, and referral partnerships.

6. Conclusions

This article constructs a pastoral counseling model for Christian Generation Z experiencing future anxiety. The central argument is that future anxiety should be understood as a disruption of agency, meaning, belonging, and hope. Christian Gen Z does not need simplistic reassurance that everything will be fine, nor does it need counseling that ignores faith. It needs pastoral accompaniment that listens deeply, interprets wisely, acts ethically, and connects young people with both spiritual and professional resources.

The proposed SELAH model offers five phases: Situational-spiritual assessment, Empathic presence, Lament and meaning reconstruction, Adaptive agency planning, and Hope-building ecclesial accompaniment. The model responds to the research objective by integrating anxiety theory, the youth mental health literature, spiritual competence, pastoral theology, and Christian hope. Theoretically, it reframes future anxiety as a narrative and ecological problem. In practice, it provides pastors and Christian counselors with a care sequence that includes referrals and community support.

The study is limited by its conceptual design. No interviews, surveys, or intervention trials were conducted. The model, therefore, cannot claim effectiveness. Future research should test the model through qualitative studies with Christian Gen Z, feasibility studies in church and campus-ministry contexts, and mixed-method evaluation of outcomes such as anxiety reduction, hope, meaning, spiritual well-being, and help-seeking behavior. The most urgent practical implication is clear: churches must become communities where uncertain futures can be named without shame and discerned with courage.

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