Published in final edited form as:

Curr Opin Psychol. 2015 February 1; 1: 22–28. doi:10.1016/j.copsyc.2014.11.001.

Thriving through relationships

Brooke C Feeney¹ and Nancy L Collins²

¹Carnegie Mellon University, United States

²University of California, Santa Barbara, United States

Abstract

The specific pathways through which close relationships promote optimal well-being are not well understood. We describe a model (building on attachment theory's notion of safe haven and secure base support) that explains how close relationships promote thriving. This model defines thriving, identifies distinct contexts through which individuals may thrive (life adversity and life opportunities for growth), describes two distinct social support functions in close relationships that promote thriving (source of strength support and relational catalyst support), and identifies mediators through which relational support leads to long-term thriving.

Close and caring relationships are undeniably linked to health and well-being at all stages in the lifespan. Yet the specific pathways through which relationships promote optimal well-being are not well understood. The theoretical model of *thriving through relationships* seeks to address this gap by identifying the specific interpersonal processes through which relational support promotes thriving [1**]. This model builds on attachment theory and traditional social support theory by (a) emphasizing the important end-state of receiving relational support as 'thriving' (not just stress-buffering), (b) highlighting two life contexts in which people can thrive (adversity and opportunity), (c) specifying two corresponding relational support functions that promote thriving in each context (*source of strength support* and *relational catalyst support*), and (d) identifying specific mediators that are likely to explain the link between support and long-term thriving outcomes (see Figure 1 for a theoretical overview).

Defining thriving and thriving contexts

To understand how relationships facilitate (or hinder) thriving, it is important to begin with a clear definition of thriving. Drawing from diverse perspectives on resilience and optimal well-being, we conceptualize thriving in terms of five broad components of well-being including (1) *hedonic well-being*, (2) *eudaimonic well-being*, (3) *psychological well-being*, (4) *social well-being*, and (5) *physical well-being* (see Table 1).

In addition, we differentiate two life contexts through which individuals may potentially thrive. A first context involves the experience of adversity. Individuals thrive in this context when they are able to cope successfully with adversities, not only by being buffered from

potentially severe consequences of adversity when it arises, but also by emerging from the experience as a stronger or more knowledgeable person. Because thriving connotes growth and development, thriving in the face of adversity involves more than simply returning to baseline or maintenance of the status quo. Thriving occurs when people weather the storms of life in ways that enable them to learn and grow from the experience.

A second context for thriving involves the experience of life opportunities for growth and prosperity in the absence of adversity. Individuals thrive in this context when they are able to fully participate in opportunities for fulfillment and personal growth through work, play, socializing, learning, discovery, creating, pursuing hobbies, and making meaningful contribution to community and society. These opportunities may be viewed as positive challenges because they often involve goal strivings and goal pursuits that require time, effort, and concentration. Thriving individuals are likely to formulate and actively pursue personal goals, and to pursue them in a self-determined manner [2–4].

Relational support functions as predictors of thriving

A key proposition of the thriving through relationships model is that well-functioning close relationships (with family, friends, and intimate partners) are fundamental to thriving because they serve two distinct support functions that correspond to the two life contexts through which people may potentially thrive (see Table 2). These support functions are rooted in attachment theory [5–7], which proposes that people enter the world with propensities to seek proximity to close others in times of stress (an attachment behavioral system), to explore the environment (an exploration system), and to support the attachment and exploration behavior of close others (a caregiving behavioral system). This model extends attachment theory in its focus on thriving and in its detailed articulation of ways in which supportive relationships contribute to thriving outcomes.

Support for thriving through adversity

One important function that relationships serve is to support thriving through adversity, not only by buffering individuals from the negative effects of stress, but also by helping them to emerge from the stressor in a way that enables them to flourish either because of or despite their circumstances (Figure 1, paths a–c). A useful metaphor is that houses destroyed by storms are frequently rebuilt, not into the same houses that existed before, but into homes that are better able to withstand similar storms in the future. So too are people able to emerge from adverse life circumstances stronger and better off than they were before with the support of significant others who fortify and assist them in the rebuilding. In this sense, relationships can provide a source of strength, in addition to a refuge, in adverse circumstances.

In other work, we refer to the support of a relationship partner's attachment behaviors (i.e. proximity-seeking and support-seeking in times of adversity) as the provision of a *safe haven*. This conceptualization is based on attachment theory's notion of a safe haven [6], which functions to support behaviors that involve 'coming in' to a relationship for comfort, reassurance, and assistance in times of stress [8–10]. However, when viewing thriving as the ultimate outcome of receiving support (and not only restoration of felt security), then the

term safe haven does not fully capture all of what is needed to promote thriving through adversity. Thus, we expand attachment theory's notion of a safe haven and refer to this relational support function that strengthens/fortifies as well as comforts/protects in times of adversity as *Source of Strength (SOS) support* (see top portion of Figure 1). Table 2 summarizes the components of SOS support, which include providing a safe haven, assisting in the development of a close other's strengths and abilities relevant to coping with the adversity, assisting in the reconstruction process once an individual has been fortified with the strength to rebuild, and assisting in reframing/redefining the adversity as a mechanism for positive change.

Support for thriving through participation in life opportunities in the absence of adversity

Another important function that relationships serve is to provide support for thriving through participation in life opportunities in the absence of adversity (Figure 1, paths d–f). Supportive relationships can help people thrive by promoting engagement in opportunities that enable them to enhance their positive well-being by broadening and building resources [6,11] and finding purpose and meaning in life [4]. Although most of the social support literature has focused on the importance of social support in times of adversity, we emphasize that support in the absence of adversity is equally important for thriving. A key aspect of this perspective is that people must fully embrace life and its opportunities in order to thrive, and that close relationships are integral in this process.

In other work, we have referred to the support of a significant other's exploration behavior as the provision of a *secure base* [9,12]. This is based on attachment theory's notion of a secure base, which functions to support behaviors that involve 'going out' from a relationship for autonomous exploration in the environment [6]. Thus, an important aspect of support-giving involves providing a base from which an attached person can make excursions into the world (to play, work, learn, discover, create) knowing that he/she can return for comfort, reassurance, or assistance should he/she encounter difficulties along the way. However, the term secure base does not fully capture a support function that promotes thriving in the absence of adversity. Thus, we expand attachment theory's notion of a secure base to include additional components necessary for supporting thriving. We refer to this relational support function that promotes engagement in life opportunities in non-adverse times as *Relational Catalyst (RC) support* (depicted in the bottom portion of Figure 1) because support-providers can serve as active catalysts for thriving in this context. Table 2 summarizes the components of RC support, which include nurturing a desire to create and/or seize life opportunities for growth; providing perceptual assistance in the viewing of life opportunities; facilitating preparation for engagement in life opportunities by promoting the development of plans, strategies, skills, and resources for approaching opportunities; and providing a launching function during actual engagement in life opportunities, which includes providing a secure base (being encouraging, available, and non-intrusive) during exploration, supporting capitalization [13] by celebrating successes and accomplishments, assisting in tune-ups and adjustments (e.g. in perceptions, skills, and strategies) as needed, and sensitively responding to setbacks.

The importance of support quality

In order to promote thriving, SOS and RC support must be *sensitive* and *responsive* to the recipient's goals, needs, and preferences [14,15] such that the recipient feels understood, validated, and cared for [16]. Insensitive or unresponsive support can exacerbate stress, reduce exploration and intrinsic motivation, and hinder rather than facilitate thriving. Support quality will depend on features of the support-provider (e.g. skills, resources, and motives), the support-recipient (e.g. communication skills and support-seeking efforts), and the situation or context.

Pathways to thriving through relationships

SOS and RC support are proposed to make independent contributions to thriving through specific mechanisms (Figure 1, paths b and e). Each support process occurs in a different life context, involves different support functions, and results in different immediate outcomes that, over time, make independent contributions to the long-term thriving outcomes (Figure 1, paths c and f). The mechanisms linking SOS and RC support to thriving are important to delineate because they are necessary for understanding *how* thriving through relationships occurs and because they have received so little attention in the social support literature. Proposed mechanisms have been organized into eight broad categories that reflect immediate changes in the recipient's (a) emotional state, (b) self-evaluations/self-perceptions, (c) appraisals of the situation or event, (d) motivational state, (e) situation-relevant behaviors/outcomes, (f) relational outcomes, (g) neural activation/physiological functioning, and (h) lifestyle behaviors [1]. Because SOS and RC support processes occur in different life contexts and have different functions, there should be differences in the specific manifestation of each outcome category for each support function (see Table 3). Moreover, these immediate outcomes are expected to temporally precede the core thriving outcomes, which develop over time and represent long-term outcomes. They are considered to be relatively circumscribed to the particular situation, and a collection of these circumscribed benefits contributes to thriving in a more global sense.

Empirical evidence

Support in times of adversity

Observational research that examines received support from close others in the context of dyadic interaction has shown beneficial effects of support on immediate outcomes relevant to thriving. For example, romantic partners who received more responsive support during the discussion of a personal stressor reported greater increases in positive mood after the discussion [8], and women who were waiting to begin a stressful laboratory task were more calmed when their romantic partners were more emotionally supportive during the waiting period [17]. Observational research has also shown that individuals who experience distress feel an urge toward proximity to a primary caregiver/attachment figure [17] and that support-recipients' subjective sense of being cared for is rooted in specific acts performed by their partner [18].

Daily diary and experience sampling studies provide additional evidence for the immediate benefits of receiving support. One study showed that on days when individuals experienced

more stress, they received more help and support from their social network, and those who received more support reported less depressed mood [19]. In another study, spouses' expressions of intimacy (physical affection) predicted lower daily cortisol levels, especially for partners with high work-related stress [20].

Likewise, studies that experimentally manipulate responsive support provision show that caring support from a significant other during an acute stressor has immediate benefits on personal and relational well-being [18,21–23]. For example, participants who walked across a dangerous cliff in an immersive virtual world were less anxious during the task when their romantic partner was both present and behaviorally responsive during the task (vs. absent or unresponsive) [22]. In another study, emotional support from a romantic partner prior to a stressful speech task reduced cortisol reactivity, facilitated emotional recovery, and increased expressions of gratitude and affection [21]. Recent experimental research also shows that the actual or symbolic presence of attachment figures can attenuate neural activation in brain regions associated with threat and emotion regulation [24,25] and reduce perceptions of pain [26].

Finally, predictions regarding SOS support enabling an individual to thrive are also supported by research showing that responsive social support in times of adversity is linked to long-term relationship outcomes in couples including increased satisfaction, intimacy, and trust [8,27], and by research showing that interventions designed to increase availability and responsiveness between couple members increases relationship quality and alters the brain's representation of threat cues in the presence of a romantic partner [28].

Support for life opportunities

Predictions regarding RC support enabling an individual to thrive are consistent with research showing that a spouses' support of exploration behavior and goal strivings predicts recipients' greater engagement in exploration activities, greater likelihood of attaining goals over time, and increases in personal growth [12,29,30] — and with research indicating that responsive parental support underlies healthy exploration behavior and the development of autonomy in children [6,31] and adolescents [32,33]. Other supporting evidence indicates that personal goal strivings motivated by one's close relationships predicts goal attainment and well-being [34], and that a romantic partner's behavioral affirmation of one's ideal self helps individuals move closer to their ideal selves over time [35].

The processes linking support for life opportunities to thriving in terms of psychological and physical health is supported by a longitudinal study with newlyweds showing that responsive support in this context during the first year of marriage predicts better psychological and physical health one year later [30] and by studies indicating that the successful pursuit of personally meaningful goals is related to elated vs. depressed mood, happiness, and satisfaction with life [36–39]. Additional evidence is provided by research linking positive emotions such as excitement, enthusiasm, and curiosity (emotions elicited or amplified by RC support) to psychological and physical health [40,41]. As a whole, these studies show that individuals high (vs. low) in well-being pursue goals that are important, fulfilling, challenging, fueled by optimistic expectations, and assisted by others [42].

Longitudinal studies that support this idea show that perceptions of goal attainability and social support for personal goals predict changes in subjective well-being over time [29], and that favorable conditions to attain personal goals lead to high progress in goal achievement that translate into enhanced well-being [36]. Likewise, other research showed that project-relevant social support and hindrance, particularly from the person most important to an individual, accounted for variations in psychological well-being and distress [38]. These effects are consistent with the perspective advanced here and with other researchers' speculations that social resources and networks contribute to mental health by encouraging the setting of personal goals and helping people achieve them [43]. In addition, indirect evidence for the effects of RC support on subjective well-being and mental health comes from work showing that support for competency, autonomy, and relatedness are associated with greater well-being among nursing home residents, with better performance and well-being in the workplace, and with well-being indicators including self-esteem, self-actualization, and a lack of depression and anxiety [44].

Evidence for the effects of RC support on thriving in terms of social well-being comes from studies showing that spousal support for personal goals predicts relationship satisfaction [29,45], that people draw closer to significant others who are instrumental in the accomplishment of their goals [46,47], that responsive secure base support (a component of RC support) during the first year of marriage predicts increases in relationship quality one year later [30], and that capitalization support (a component of RC support) received from friends, family, and romantic partners during a two-week diary period predicts increases in general perceptions of support from one's social network two months later [48].

Conclusion

This theoretical perspective on thriving through relationships highlights the importance of relational support in both adverse and non-adverse contexts. It emphasizes the need for researchers to take a new look at social support and conceptualize it as an interpersonal process with the promotion of thriving as the ultimate objective. This perspective provides an integrated conceptualization of thriving, describes two support functions that work together to promote thriving, considers social support within a life context (engagement in life opportunities for exploration and growth) that has been neglected in decades of research on social support, and within in a life context (dealing with life adversity) that has historically focused on buffering negative effects instead of promoting positive ones, identifies mechanisms that explain the links between support and thriving, emphasizes the importance of support within an interpersonal context and within one's closest relationships, and focuses attention on the nature and quality of support provided. Whereas other perspectives on thriving compartmentalize relationships as one domain in which people may thrive, this perspective puts relationships at the forefront in facilitating or hindering thriving in each domain of well-being.

Acknowledgments

This manuscript was supported by grants from the National Institute of Health (NIA, 1R01AG032370 - 01A2) and the National Science Foundation (BCS0424579) to the first author, and by grants from the Fetzer Institute (2347.04) and the National Science Foundation (SBR0096506) to the second author.

References and recommended reading

Paper of particular interest, published within the period of review, has been highlighted as:

•• of outstanding interest

- 1•• Feeney, BC.; Collins, NL. A new look at social support: a theoretical perspective on thriving through relationships. *Personal Soc Psychol Rev.* 2014. <http://dx.doi.org/10.1177/1088868314544222>. This original theory paper (on which the current article is based) provides an elaborated theoretical account of how individuals thrive through relationships. The goal of this manuscript was to present a theoretical perspective on thriving through relationships that highlights the importance of relational support in both adverse and non-adverse contexts. In doing so, we propose that researchers take a new look at social support and conceptualize it as an interpersonal process with the promotion of thriving as the ultimate objective
2. Deci EL, Ryan RM. The “what” and “why” of goal pursuits: human needs and the self-determination of behavior. *Psychol Inq.* 2000; 11:227–268.
3. Emmons RA. Personal strivings, daily life events, and psychological and physical well-being. *J Personal.* 1991; 59:453–472.
4. Ryff CD, Singer BH. The contours of positive human health. *Psychol Inq.* 1998; 9:1–28.
5. Bowlby, J. *Attachment and Loss: Vol. 1. Attachment.* New York: Basic Books; 1982.
6. Bowlby, J. *A Secure Base.* New York: Basic Books; 1988.
7. Mikulincer, M.; Shaver, PR. *Attachment in Adulthood: Structure, Dynamics, and Change.* New York: Guilford Press; 2007.
8. Collins NL, Feeney BC. A safe haven: an attachment theory perspective on support-seeking and caregiving in adult romantic relationship. *J Pers Soc Psychol.* 2000; 78:1053–1073. [PubMed: 10870908]
9. Feeney BC. A secure base: responsive support of goal strivings and exploration in adult intimate relationships. *J Pers Soc Psychol.* 2004; 87:631–648. [PubMed: 15535776]
10. Feeney, BC.; Collins, NL. Interpersonal safe haven and secure base caregiving processes in adulthood. In: Rholes, WS.; Simpson, JA., editors. *Adult Attachment: Theory, Research, and Clinical Implications.* New York, NY: Guilford Press; 2004. p. 300–338.
11. Fredrickson BL. The role of positive emotions in positive psychology: the broaden-and-build theory of positive emotions. *Am Psychol.* 2001; 56:218–226. [PubMed: 11315248]
12. Feeney BC. The dependency paradox in close relationships: accepting dependence promotes independence. *J Pers Soc Psychol.* 2007; 92:268–285. [PubMed: 17279849]
13. Gable SL, Reis HT. Good news! Capitalizing on personal events in an interpersonal context. *Adv Exp Soc Psychol.* 2010; 42:195–257.
14. Collins, NL.; Guichard, AC.; Ford, MB.; Feeney, BC. Responding to need in intimate relationships: Normative processes and individual difference. In: Mikulincer, M.; Goodman, GS., editors. *Dynamics of Romantic Love: Attachment, Caregiving, and Sex.* New York, NY: Guilford Press; 2006. p. 149–189.
15. Feeney BC, Collins NL. Predictors of caregiving in adult intimate relationships: an attachment theoretical perspective. *J Pers Soc Psychol.* 2001; 80:972–994. [PubMed: 11414378]
16. Reis, HT.; Patrick, BC. Attachment and intimacy: component processes. In: Higgins, ET.; Kruglanski, AW., editors. *Social Psychology: Handbook of Basic Principles.* New York: Guilford Press; 1996. p. 523–563.
17. Simpson JA, Rholes WS, Nelligan JS. Support seeking and support giving within couples in an anxiety-provoking situation: the role of attachment styles. *J Pers Soc Psychol.* 1992; 62:434–446.
18. Collins NL, Feeney BC. Working models of attachment shape perceptions of social support: evidence from experimental and observational studies. *J Pers Soc Psychol.* 2004; 87:363–383. [PubMed: 15382986]
19. Cutrona CE. Behavioral manifestations of social support: a microanalytic investigation. *J Pers Soc Psychol.* 1986; 51:201–208. [PubMed: 3735068]

20. Ditzen B, Hoppmann C, Klumb P. Positive couple interactions and daily cortisol: on the stress-protective role of intimacy. *Psychosom Med*. 2008; 70:883–889. [PubMed: 18842747]
21. Collins, NL.; Jaremka, LM.; Kane, HS. Social support during a stressful task reduces cortisol reactivity, promotes emotional recovery, and builds caring relationships (Unpublished manuscript). University of California; Santa Barbara: 2014.
22. Kane HS, McCall C, Collins NL, Blascovich JA. Mere presence is not enough: responsive support in a virtual world. *J Exp Soc Psychol*. 2012; 48:37–44.
23. Nils F, Rimé B. Beyond the myth of venting: social sharing modes determine the benefits of emotional disclosure. *Eur J Soc Psychol*. 2012; 42:672–681. <http://dx.doi.org/10.1002/ejsp.1880>.
24. Coan JA, Schaefer HS, Davidson RJ. Lending a hand: social regulation of the neural response to threat. *Psychol Sci*. 2006; 17:1032–1039. [PubMed: 17201784]
25. Norman, L.; Lawrence, N.; Iles, A.; Benattayallah, A.; Karl, A. Attachment-security priming attenuates amygdala activation to social and linguistic threat. *Soc Cogn Affect Neurosci*. 2014. <http://dx.doi.org/10.1093/scan/nsu127>. (Advanced access published online)
26. Eisenberger NI, Master SL, Inagaki TK, Taylor SE, Shirinyan D, Lieberman MD, Naliboff BD. Attachment figures activate a safety signal-related neural region and reduce pain experience. *Proc Natl Acad Sci U S A*. 2011; 108:11721–11726. [PubMed: 21709271]
27. Sullivan KT, Pasch LA, Johnson MD, Bradbury TN. Social support, problem solving and the longitudinal course of newlywed marriage. *J Pers Soc Psychol*. 2010; 98:631–644. [PubMed: 20307134]
28. Johnson SM, Moser MB, Beckes L, Smith A, Dalgleish T, et al. Soothing the threatened brain: leveraging contact comfort with emotionally focused therapy. *PLOS ONE*. 2013; 8:79314. <http://dx.doi.org/10.1371/journal.pone.0079314>.
29. Brunstein JC, Dangelmayer G, Schultheiss OC. Personal goals and social support in close relationships: effects on relationship mood and marital satisfaction. *J Pers Soc Psychol*. 1996; 71:1006–1019.
30. VanVleet, M.; Feeney, BC. A comparison of long-term consequences afforded by safe haven and secure base support among newlywed couples; San Diego, CA. Paper presented at the conference for the Society for Personality and Social Psychology; 2012.
31. Ainsworth, MDS.; Blehar, MC.; Waters, E.; Wall, S. Patterns of Attachment: Psychological Study of the Strange Situation. Hillsdale, NJ: Erlbaum; 1978.
32. Moore D. Parent–adolescent separation: the construction of adulthood by late adolescents. *Dev Psychol*. 1987; 23:298–307.
33. Noom MM, Dekovic M, Meeus WHJ. Autonomy, attachment and psychosocial adjustment during adolescence: a doubleedged sword? *J Adolesc*. 1999; 22:771–783. [PubMed: 10579889]
34. Gore JS, Cross SE. Relational self-construal moderates the link between goal coherence and well-being. *Self Identity*. 2010; 9:41–61.
35. Rusbult CE, Finkel EJ, Kumashiro M. The Michelangelo phenomenon. *Curr Direct Psychol Sci*. 2009; 18:305–309.
36. Brunstein JC. Personal goals and subjective well-being: a longitudinal study. *J Pers Soc Psychol*. 1993; 65:1061–1070.
37. Brunstein JC, Schultheiss OC, Grassman R. Personal goals and emotional well-being: the moderating role of motive dispositions. *J Pers Soc Psychol*. 1998; 75:494–508. [PubMed: 9731321]
38. Ruehlman LS, Wolchik SA. Personal goals and interpersonal support and hindrance as factors in psychological distress and well-being. *J Pers Soc Psychol*. 1988; 55:293–301. [PubMed: 3171909]
39. Sheldon KM, Abad N, Ferguson Y, Gunz A, Houser-Marko L, Nichols CP, Lyubomirsky S. Persistent pursuit of need-satisfying goals leads to increased happiness: a 6-month experimental longitudinal study. *Motivation and Emotion*. 2010; 34:39–48.
40. Fredrickson BL. Cultivating positive emotions to optimize health and well-being. *Prevent Treat*. 2000; 3:1–25.
41. Pressman SD, Cohen S. Does positive affect influence health? *Psychol Bull*. 2005; 131:925–971. [PubMed: 16351329]

42. Little, BR.; Salmela-Aro, K.; Phillips, SD. *Personal Project Pursuit: Goals, Action, and Human Flourishing*. Mahwah, NJ: Lawrence Erlbaum Associates; 2007.
43. Diener E, Fujita F. Resources, personal strivings, and subjective well-being: a nomothetic and idiographic approach. *J Pers Soc Psychol*. 1995; 68:926–935. [PubMed: 7776188]
44. Deci EL, LaGuardia JG, Moller AC, Scheiner MJ, Ryan RM. On the benefits of giving as well as receiving autonomy support: mutuality in close friendships. *Personal Soc Psychol Bull*. 2006; 32:313–327.
45. Kaplan M, Maddux JE. Goals and marital satisfaction: perceived support for personal goals and collective efficacy for collective goals. *J Soc Clin Psychol*. 2002; 21:157–164.
46. Fitzsimons GM, Fishbach A. Shifting closeness: interpersonal effects of personal goal progress. *J Pers Soc Psychol*. 2010; 98:535–549. [PubMed: 20307127]
47. Fitzsimons GM, Shah JY. How goal instrumentality shapes relationship evaluations. *J Pers Soc Psychol*. 2008; 95:319–337. [PubMed: 18665705]
48. Gable SL, Gosnell CL, Maisel NC, Strachman A. Safely testing the alarm: close others' responses to personal positive events. *J Pers Soc Psychol*. 2012; 103:963–981. [PubMed: 22889071]

Figure 1.
Theoretical model of thriving through relationships.
Adapted from Feeney and Collins [1**].

Table 1

Components of thriving.

Thriving components	Examples
1. Hedonic well-being	Happiness, life satisfaction, subjective well-being, pleasant affect, healthy affective balance — ratio of positive to negative affect
2. Eudaimonic well-being	Having purpose and meaning in life, having and progressing toward meaningful life goals, mastery/efficacy, control, autonomy/self-determination, personal growth, movement toward full potential
3. Psychological well-being	Positive self-regard, self-acceptance, resilience/hardiness, optimism, absence (or reduced incidence) of mental health symptoms or disorders
4. Social well-being	Deep and meaningful human connections, positive interpersonal expectancies (including perceived available support), prosocial orientation, faith in others/humanity
5. Physical well-being	Physical fitness (healthy weight and activity levels); absence (or reduced incidence) of illness and disease; health status above expected baselines; longevity

Adapted from Feeney and Collins [1^{••}].

Table 2

Description of support functions.

Source of strength support	Relational catalyst support
<p><i>Definition:</i></p> <p>Functions to promote thriving through adversity, not only by buffering the negative effects of stress but also by helping others to emerge from the stressor in ways that enable them to flourish</p> <p><i>Components:</i></p> <ol style="list-style-type: none"> 1 Providing a safe haven — safety and protection; relief from burdens; emotional or physical comfort; a comfortable environment for the expression of negative emotion and vulnerability; expressing empathy, understanding, acceptance, reassurance; shielding and defending; tangible aid to alleviate adverse circumstances 2 Providing fortification — assisting in the development/nurturing of strengths/talents; recognizing/nourishing latent abilities or helping to attain new ones 3 Assisting in the reconstruction process — motivating and assisting one to get back up, stay in the game, use strengths to renew and rebuild the self, problem-solve and cope with adversity in a positive manner 4 Assisting in reframing/redefining adversity as a mechanism for positive change 	<p><i>Definition:</i></p> <p>Functions to promote thriving through full participation in life opportunities for exploration, growth, and development in the absence of adversity</p> <p><i>Components:</i></p> <ol style="list-style-type: none"> 1 Nurturing a desire to create or seize opportunities for growth — expressing enthusiasm, validating goals and aspirations, encouraging individual to challenge or extend the self, leave one's comfort zone 2 Providing perceptual assistance in the viewing of life opportunities — appraising opportunities as positive challenges vs. threats, assistance in recognizing opportunities 3 Facilitating preparation for engagement in life opportunities — promoting the development of plans and strategies, development/recognition of skills and resources; providing instrumental or informational assistance; encouraging setting of attainable goals 4 Facilitating implementation by serving a launching function that enables one to fully engage in life opportunities by: <ol style="list-style-type: none"> a. Providing a secure base for exploration b. Supporting capitalization c. Assisting in tune-ups and adjustments; responding sensitively to failures/setbacks d. Perceiving & behaving toward individual in ways consistent with his/her ideal self

Adapted from Feeney and Collins [1**].

Table 3

Mechanisms linking SOS and RC support to long-term thriving.

Immediate outcome	SOS support	RC support
1. Emotional state	Decreases in negative emotions: fear, anxiety, doubt, discouragement, sadness, despair, loss/grief, guilt, shame, embarrassment, hurt/broken-heartedness, rejection, loneliness, helplessness, anger, frustration, resentment, jealousy, envy Increases in positive emotions: love, hope, gratitude, forgiveness, safety, security, relief, serenity/peace/calm Restore healthy affective balance	Increases in positive emotions: enthusiasm, excitement, pride, interest, happiness, joy, wonder, awe, curiosity, amusement, surprise; feel inspired, lively, energetic, invigorated; also feel love, gratitude Decreases in negative emotions: release from concerns about failure or guilt for use of resources (anticipatory worry)
2. Self-evaluations and self-perceptions	Increased self-acceptance and self-compassion; Restored sense of self-integrity Perceive self as capable of overcoming adversity Perceive self as strong and resilient	Increased self-confidence; feelings of competency & empowerment; state self-esteem Perceive self as capable of accomplishing goals (state self-efficacy) Perceive self as accomplished/skilled and engaged in life
3. Appraisals of the situation or event	Appraisals of resources as outweighing demands View problem as controllable and temporary, or belief that one can deal successfully with it if cannot be changed Appraisals of experience as leading to positive change	Expect positive outcomes of engaging in opportunity; expect to accomplish goals Appraisals of experience as valuable, worth time and effort View opportunity as meaningful and having potential to impact others
4. Motivational state	Switch from avoidance/prevention orientation to approach/promotion orientation Motivated to make changes in life and rebuild; motivated to persevere Motivated by expectations of what can be (not what currently is)	Approach/promotion motivation toward the opportunity; increased intrinsic motivation Motivated to stretch to new levels (not settle for good enough) Motivated to leave comfort zone to reach potential
5. Situation-relevant behaviors, resources, and outcomes	Improvements in coping strategies and self-regulation Problem resolution; a changed circumstance/outcome or successful adaptation to a circumstance that cannot be changed Successful rebuilding (replace old with new) Learning from the experience	Engagement in and persistence at life opportunity Goal accomplishment/progress Production of high quality result Opened doors for more opportunities Learning from the experience
6. Relational outcomes, attitudes, and expectations	Feelings of trust (confidence in partner's availability and goodwill) Feelings of emotional closeness with partner Feel accepted, loved and cared for despite vulnerabilities Belief that seeking support in adversity is beneficial	Feelings of social acceptance and bonding Feel valued and respected by others Form new social connections View that others believe in one's abilities (reflected appraisals) Self-expansion with partner Belief that seeking support for life opportunities is beneficial
7. Neural activation and physiological functioning	Deactivation of neural areas associated with threat Increased activation of reward-related neural areas associated with safety Adaptive immune, endocrine, and cardiovascular functioning associated with reduced stress response (reduced cortisol & cardiovascular threat response) Release of neuropeptides involved in social bonding (endogenous opioids and increased oxytocin)	Increased activation of neural areas associated with reward, positive affect, positive challenge, representation of goals, decision-making, and dopamine release Adaptive immune, endocrine, and cardiovascular functioning associated with positive affect and challenge Increases in anabolic processes (increases in bone and muscle mass)
8. Health and lifestyle behaviors	Better diet/nutrition (less stress-induced eating) and sleep quality (not affected by stress or rumination) Decreased use of addictive substances as means of coping Better self-care, adherence to health-care regimens	Increased physical and mental activity More restorative activities (relaxation, hobbies, sports, vacation) Better diet/nutrition and sleep quality associated with increases in positive affect

Adapted from Feeney and Collins [1**].