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Abstract
People who are socially integrated and have strong social ties live happier, longer lives. The link between social connection and well-being is commonly explained in terms of the benefits of receiving care and support from others. However, the benefits of giving care and support to others for the support provider are often overlooked. We review emerging findings that suggest when, why, and how giving support to others provides benefits to the self. We identify possible mechanisms by which these benefits arise and outline boundary conditions that influence such benefits. To gain a richer understanding of the association between social ties and well-being, an important future research direction is to not only consider the support receiver but also emphasize the support provider.

Keywords
social support, support provider, caregiving, social integration, well-being

People thrive when they experience close social bonds and suffer when they lack social ties. In particular, social connections foster a sense of social support—the perception or experience of being loved and cared for by others, esteemed and valued, and part of a social network of mutual assistance and obligations (Wills, 1991)—which is important for functioning in daily life (Lakey & Orehek, 2011). An implicit assumption guiding most research on social support is that the individual receiving care and support benefits whereas the person providing care and support incurs some cost. However, recent perspectives have highlighted the potential benefits of serving as a support provider (Brown, Nesse, Vinokur, & Smith, 2003; Dunn, Aknin, & Norton, 2008; Inagaki & Eisenberger, 2012). Giving support, therefore, may be another way to maintain social connections and fulfill the need for strong social bonds.

Consider a case in which you decide that you would like to do something for your partner after a long day at work. You know that she enjoys a pasta dish that you cook, and you decide to make it for her. Most social-support research has focused on the potential benefits for your partner while overlooking the benefits to you, the support giver. However, by doing something for someone else, you may also benefit yourself.

In line with this example, an accumulating body of research suggests that giving social support to others, rather than costing the giver, may instead lead to benefits for the giver. In the present article, we highlight new findings detailing when, why, and how support providers benefit from giving. We discuss two boundary conditions regarding when giving support is beneficial. Finally, because this is a relatively new, emerging literature, we discuss implications of the present perspective and directions for future research.

Giving Social Support

Why might giving to others be beneficial? One answer to this question is derived from the observation that humans have a natural capacity to care for, nurture, and protect others, especially during times of need (Bowlby, 1988). Babies are born dependent on others and, as a consequence, require intense care at the beginning of life. Processes that promote caring for offspring may extend...
to promote caring for others such as friends, romantic partners, and other family members (Brown & Brown, 2015; Feeney & Collins, 2001; Preston, 2013; Taylor et al., 2000). From this perspective, caring for others is not just the “right thing to do” but is critical to our species’ survival. Mechanisms should therefore be in place to (a) reinforce and motivate giving behavior and also (b) reduce social withdrawal or stress-related responding to facilitate effective care during times of need (Inagaki et al., 2016). That is, the act of giving to others may feel good and may reduce stress responses for the support provider.

**Giving support is rewarding**

Spending money on others (vs. oneself) leads to greater positive affect (Aknin et al., 2013), and doing nice things for others (vs. oneself) leads to increases in one’s happiness and sense of belonging to a social group (Nelson, Layous, Cole, & Lyubomirsky, 2016). These effects extend to young children. For example, giving a treat to a puppet (vs. receiving a treat) leads to increased displays of happiness in children under 2 years old (Aknin, Hamlin, & Dunn, 2012). Giving to others is also associated with favorable social outcomes including increased self-esteem (Piferi & Lawler, 2006), self-worth (Gruenewald, Liao, & Seeman, 2012), and feelings of social connection with the recipient (Inagaki & Eisenberger, 2012).

Caring for others seems to rely on neural regions associated with pleasure and reward. Animals’ care for offspring is associated with increased activity in the ventral striatum (VS; Lonstein, Simmons, Swann, & Stern, 1997) and septal area (SA; Fleischer & Slotnick, 1978). Consistent with these findings, damage to either the VS or the SA significantly reduces effective parental care in rats (Fleischer & Slotnick, 1978; Hansen, 1994). In humans, giving support activates these same brain regions. The first experimental demonstration of support-related activity in these brain regions among human participants showed that giving support by holding a romantic partner’s arm as he endured uncomfortable shocks (vs. not giving support) activated both the VS and the SA (Inagaki & Eisenberger, 2012). In addition, giving money to charities (Moll et al., 2006) and to close others activates the VS more than winning money for oneself (Telzer, Fuligni, Lieberman, & Galván, 2014). Taken together, this body of work points to reward-related psychological and neurobiological mechanisms as one potential driver underlying the benefits of giving support.

**Giving support is stress reducing**

Findings from both animals and humans suggest that giving care to others inhibits stress responses, which facilitates care during times of need (Taylor et al., 2000). Thus, another route by which giving support may lead to benefits for the support provider is by reducing social withdrawal or stress-related responding (Inagaki et al., 2016; Poulin, Brown, Dillard, & Smith, 2013). For example, female macaques who gave more (vs. less) support by grooming others displayed lower stress levels (Shutt, MacLarnon, Heistermann, & Semple, 2007) and fewer anxiety-related behaviors (self-scratching, self-grooming, aggressive actions; Aureli & Yates, 2010).

In humans, self-reported support giving is associated with reduced stress-related neural activity in the amygdala, the dorsal anterior cingulate cortex, and the anterior insula in response to a social stressor (Inagaki et al., 2016). In addition, SA activity while participants give support (vs. do not give support) is associated with less amygdala activity (Inagaki & Eisenberger, 2012). These results suggest that greater activity in one of the regions critical for parental care, the SA, is associated with less stress-related responding.

In the first experimental manipulation of giving support prior to a stressor, writing a supportive note to a friend in need (vs. writing about a neutral topic) caused reductions in stress-related responding to a psychosocial stressor (Inagaki & Eisenberger, 2016). Consistent with these findings, an intervention outside the lab showed that being randomly assigned to give money to others (vs. spend money on oneself) led to lower resting blood pressure after the intervention (Whillans, Dunn, Sandstrom, Dickerson, & Madden, 2016). Together, the experimental findings suggest that another way giving to others benefits the provider is by reducing stress.

**Boundary Conditions: When Is Giving Beneficial?**

Whether giving support leads to beneficial outcomes should depend on two factors: (a) whether an individual freely chooses to give support and (b) whether she or he thinks the support is effective (Orehek, in press). Providing initial support for the first factor, participants who freely chose to give support experienced greater wellbeing, such as increased positive affect and self-esteem, whereas participants without a choice did not experience benefits (Weinstein & Ryan, 2010). Additional research is needed to investigate whether free choice influences neural processes underlying support giving. Support for the second factor can be gleaned from neural evidence, which shows that individuals who report their support giving as more effective experience greater rewards, as indexed by greater neural activity in both the VS and the SA in response to giving support (Inagaki & Eisenberger, 2012). The perceived effectiveness of giving support can also be increased when the support recipient appreciates...
or recognizes the support provided (Orehek & Forest, 2016). These findings provide initial evidence that the two proposed factors help explain when giving support produces benefits for the provider.

Although no experimental studies have examined whether choice and perceived effectiveness are important for the stress-reducing effects of giving support, clues can be gleaned from research on caregiver burden. Caregivers often feel forced to care for loved ones out of obligation and give chronic care they perceive as ineffective (Adelman et al., 2014). Therefore, chronic caregiving often violates the two parameters under which giving support is proposed to lead to beneficial outcomes, first by removing the choice to give and second by decreasing the perception that care is effective (e.g., in light of the deterioration of a care recipient). Research has shown that caregiving is often associated with increased stress (Adelman et al., 2014), which suggests that choice and effectiveness may indeed be necessary conditions for giving support to reduce stress in the support provider. In addition, choice and effectiveness, among other factors (e.g., increased financial strain), may explain why caregiving is sometimes associated with stress. Future research is needed to more fully investigate the roles of choice and effectiveness in influencing the link between support giving and stress and to explore the potential for additional boundary conditions.

**Implications and Future Directions**

The research reviewed above provides initial evidence regarding when, why, and how giving support is beneficial for the support provider. In addition to the short-term benefits reviewed here, we expect benefits of giving support to extend to long-term well-being. Indeed, large-scale analyses of human social ties have demonstrated remarkable health-promotion effects: Parenthood (Agerbo, Mortensen, & Munk-Olsen, 2012), marriage (Carr & Springer, 2010), and social integration (Holt-Lunstad, Smith, & Layton, 2010) are all robustly associated with greater longevity. Whereas it has been assumed that social ties increase longevity via the care and support received from these relationships, the current perspective suggests that an underexplored factor in the social ties–longevity linkage is the care given to others. Others have shown that giving support is also linked to longevity (Allman, Rosin, Kumar, & Hasenstaub, 1988; Brown et al., 2003). Refocusing attention on when, why, and how the individual giving support benefits from supportive interactions may illuminate new avenues for intervening in the lives of those who suffer from a lack of social connections or support.

Moving forward, research should outline the types of actions that support givers employ, as well as whether what they do, whom they do it for, and why they do it influence the personal benefits they experience. For instance, when does giving support to others cease to be good for long-term health, as often observed among chronic caregivers, and who benefits most from giving to others? In addition to benefitting the self, how does giving support strengthen existing social relationships or help form new social bonds? How does the specific person to whom support is given and that person’s response influence benefits and costs to the support provider? Would knowing that one’s support was ineffective alter the stress-reducing effects of giving support (Inagaki & Eisenberger, 2016; Whillans et al., 2016)? Finally, others have theorized that regions such as the orbitofrontal cortex are important for giving support (see the Recommended Readings for a full overview) and should be explored further.

Giving social support leads to emotional, physical, and social benefits that are most likely to occur when giving is freely chosen and is perceived to be effective. These findings fit with the notion that people have a natural inclination to care for others and flourish when they have strong social ties. A new focus on the individual giving support, in addition to continuing work on the individual receiving support, will help paint a more complete picture as to when, why, and how social support is good for health and well-being and, ultimately, may help us harness a natural human tendency in order to benefit social relationships.

**Recommended Reading**


Lakey, B., & Orehek, E. (2011). Relational regulation theory: A new approach to explain the link between perceived social support and mental health. *Psychological Review, 118*, 482–495. A recent theory on social-support processes that emphasizes relational regulation of affect and cognition in everyday conversations and shared activities; especially relevant to the current article, it suggests that partners often initiate social interaction as a way of regulating their partner’s affect.


**Declaration of Conflicting Interests**
The authors declared that they had no conflicts of interest with respect to their authorship or the publication of this article.

**References**


Orehek, E. (in press). Close relationships and goal pursuit: A people as means perspective. In C. Kopetz & A. Fishbach (Eds.), *The motivation-cognition interface: From the lab to the real world*.


