

DISSERTATION

FRIENDSHIPS ON THE FRINGE:
INVESTIGATING CHALLENGING SUPPORT PROVISION AND THE ASSOCIATED
INDIVIDUAL AND RELATIONAL HEALTH OUTCOMES

Submitted by

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ABSTRACT

FRIENDSHIPS ON THE FRINGE: INVESTIGATING CHALLENGING SUPPORT PROVISION AND THE ASSOCIATED INDIVIDUAL AND RELATIONAL HEALTH OUTCOMES

Supportive communication plays a key role in relationship maintenance and satisfaction; however, the high expectations associated with support in friendships can also pose significant challenges. Indeed, experiencing difficulties while helping a friend may complicate providers' ability and willingness to offer ongoing support as well as their desire to maintain their friendship (Johnson, 2025; Johnson et al., 2026; Wortman & Lehman, 1985). Despite these complexities, limited research has explored how supportive challenges affect providers and their relationships. To address this gap, this study utilized a quantitative, nonexperimental research approach with a two-time interval survey design to evaluate the individual and relational health outcomes associated with difficult support provision in emerging adult friendships. This research builds on recent scholarship exploring the difficulties providers experience as well as the communicative strategies they might use to navigate their challenges while attempting to balance their own needs and the needs of support seekers (Johnson, 2025; Johnson et al., 2026; Ray, 2024). Participants completed surveys at two time points approximately two weeks apart. Each survey included measures assessing providers' perceptions of support-related challenges and the effects those challenges had on their personal well-being and their friendship with the friend they were struggling to support. Results highlight how specific support conditions, appraisals, and behaviors are associated with individual and relational health outcomes. Practically, these findings underscore the importance of awareness and intentionality as providers experience and

navigate challenging supportive relationships. Ultimately, this study highlights difficult support provision as a key area for continued investigation to better understand how supportive relationships can remain both sustainable and satisfying.

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DEDICATION

This dissertation is for every friend I have had over the course of my life thus far. Thank you for sparking the curiosity that enabled me to explore how to better show up for my friends while still showing up for myself. I am a better person—and a better friend—because of you.

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CHAPTER 1 – INTRODUCTION

Support is integral to friendship formation, adaptation, and thriving—a vital investment that often enhances relational closeness and satisfaction between friends (see Fehr & Harasymchuk, 2019; 2022). However, friendships can experience strain, causing an individual to question whether their friend will support them in their moments of need (Vieth et al., 2022), and people are likely to terminate friendships that do not offer desired support or connection (Apostolou, 2023). Unfortunately, high supportive expectations in friendships can pose challenges that ultimately complicate one's ability and desire to provide ongoing support and/or maintain their friendship (Johnson, 2025; Wortman & Lehman, 1985). Providers might experience supportive burnout, question their ability to make their friend feel better, or find themselves needing to prioritize their own well-being over their friend's immediate needs, inhibiting them from meeting their friend's support expectations (Johnson, 2025). While recent work has explored reasons for friendship decay and dissolution (e.g., Fellers & Ledbetter, 2022; Khullar et al., 2021; Vieth et al., 2022), less scholarship specifically explores the process that leads to friendship deterioration and dissolution. In particular, limited research explores the individual and relational outcomes of supportive challenges in friendships. This gap is concerning, as support is a fundamental aspect of friendship, and friendships are more vulnerable to dissolution compared to other relationship types (Khullar et al., 2021). Thus, tracing the connections between problematic supportive interactions among friends has the potential to illuminate pathways whereby enhanced communication might strengthen relationships, avoid relationship harm, and even potentially stave off relationship death.

Considering the importance of friendships alongside the complexities underlying support provision, the overarching goal of this project is to expand scholarly understanding of the individual and relational outcomes of challenging support provision in friendship contexts. This study builds on previous scholarship that investigates difficult social support experiences, as well as how support providers navigate the challenges they face when helping others. Indeed, providers may rely on support boundary creation (Johnson, 2025), deceptive/reluctant support provision (Johnson et al., 2026), and even nonsupport (Neufeld et al., 2007; Ray, 2024) to minimize or mitigate the challenges they face, and each of the decisions triggers a cascade of potential outcomes for the support provider, the recipient, their relationship, and their broader network. To explore outcomes associated with support challenges, this study utilized a quantitative research approach to evaluate potential prosocial and antisocial outcomes of difficult support provision in friendships.

In the following chapters, I overview foundational social support scholarship and relevant research highlighting the complexity that occurs in supportive communication generally and within friendships. In addition, I synthesize common support provider challenges and outline the various strategies providers might enact to navigate difficult supportive interactions or relationships. I then overview scholarship that situates support challenges as potentially more complex in voluntary relationships—like friendships—which may impact whether relationships are able to adapt and thrive or ultimately fall apart. All research hypotheses are posed at the end of the literature review, followed by an in-depth description of my methodological approach. My results detail the individual and relational outcomes that providers may experience as a result of challenging support provision in their friendships. Finally, I discuss the theoretical and practical implications of my dissertation research and pose important directions for future scholarship.

CHAPTER 2 – LITERATURE REVIEW

Social Support

Social support is defined as “verbal or nonverbal behaviors intended to provide or seek help” (MacGeorge et al., 2011, p. 323) and is often categorized in two main forms: *nurturant support* and *action-facilitating support*. Each type of support involves specific communicative strategies and goals. Nurturant support largely centers the emotional needs a support seeker has related to a specific stressor (Cutrona & Russell, 1990; Xu & Burleson, 2001). Emotional support, esteem support, and network support are all types of nurturant support (Rains et al., 2015; Xu & Burleson, 2001). *Emotional support* involves providing comforting messages, validating one’s experience(s), and making the support recipient feel cared for (Cutrona & Russell, 1990). Telling someone that it is completely normal to feel stressed during a life transition is an example of emotional support. *Esteem support* functions to bolster one’s self-esteem and self-worth (Cutrona & Russell, 1990). If someone is experiencing loneliness and struggling to maintain friendships, esteem support can look like reminding them that they are a fun, loyal friend. *Network support* consists of connecting people to larger social networks and making them feel valued within groups (Parks & Faw, 2014). If your colleague has had a lot of friends move out of state, inviting them to group gatherings and introducing them to your social network to help them build new connections would be a form of network support.

Contrarily, action-facilitating support aims to help support seekers find solutions and problem-solve related to a particular stressor (Rains et al., 2015; Xu & Burleson, 2001). Informational and tangible support are both types of action-facilitating support (Rains et al., 2015; Xu & Burleson, 2001). *Informational support* involves providing information related to a

particular stressor with the intention of facilitating solutions (Langford et al., 1997). For example, informational support can involve sharing information about community-based resources to help someone navigate their adjustment to a new city. *Tangible support* includes goods or services in times of stress (Cutrona & Russell, 1990). Offering to cook someone a meal or buy them a coffee while they work on finishing their dissertation is an example of tangible support.

Supportive communication plays a key role in whether relationships will thrive or struggle under the challenges of interdependent life. This study investigates different outcomes of challenging support provision, with a specific focus on understanding support provider experiences. I argue that providers offer support on a continuum, with positive support (i.e., authentic support that providers want to give) and nonsupport (i.e., not providing support at all; Ray et al., 2018; 2019; 2023) on either end of the spectrum. When providers are experiencing challenges, they may find themselves somewhere in the middle of positive support provision and nonsupport. For example, they may engage in support boundary creation (i.e., establishing parameters around the amount/type of offered support; Johnson, 2025) and/or deceptive/reluctant support (i.e., support that does not align with what a provider believes, feels, or wants to offer; Johnson et al., 2026) as a means of navigating the nuances and complexities they are experiencing, especially if they have not yet reached a point of cutting off support entirely. Given the complexities underlying social support, more scholarship is needed to assess how different factors, attributions, and behaviors impact the individual and relational outcomes providers may experience.

The Theory of Resilience and Relational Load

Supportive communication functions as one form of investment in relationships; as such, the theory of resilience and relational load (TRRL; Afifi et al., 2016) is a beneficial framework to assess how providers experience various benefits and challenges in their supportive relationships (Afifi et al., 2016). The TRRL explores how communal orientation and discrepancies, relational maintenance behaviors and discrepancies, and emotional reserves generate relational outcomes of resilience and relational load (Afifi et al., 2016). Relationships thrive when people effectively cope with stressors; however, relational damage occurs when people do not effectively adjust to their stressors—especially when experiencing long-term relational depletion or load (Afifi et al., 2016). Social support can help people effectively cope with their stress, though it is often simultaneously a source of stress for support providers.

The TRRL asserts that the communal orientation or discrepancies within a relationship influence how relational partners engage in maintenance behaviors (Afifi et al., 2016). Relational partners have a communal orientation if they view their stressors as collective problems, rather than viewing it as an individual problem (Afifi et al., 2016). However, there is a communal orientation discrepancy if one relational partner views problems as “our” problems, but the other views stressors as “my” or “your” problems (Afifi et al., 2016). Stronger communal orientation results in maintenance behaviors (i.e., relational investments) which ultimately increases emotional reserves (Afifi et al., 2016). As a result, stress is reduced and emotional reserves can be drawn upon when stress naturally occurs in the future (Afifi et al., 2016).

Communication maintenance behaviors are positive, validating everyday interactions that make people feel valued within their relationships (Afifi et al., 2016). Contrarily, communication maintenance discrepancies occur when one’s investments are not reciprocated and/or their relational desires are not met (Afifi et al., 2016). Communication maintenance and discrepancies

influence emotional reserves, which “reflect the accumulation of investments (i.e., maintenance) and discrepancies in investments” (Afifi et al., 2016, p. 667). The TRRL also asserts that communication maintenance and discrepancies have ripple effects on people’s security appraisals/behaviors and threat appraisals/behaviors (Afifi et al., 2016).

Security appraisals and behaviors prevent the depletion of resources—including one’s emotional reserves—which ultimately enhances their ability to prioritize preserving their relationships (Afifi et al., 2016). For example, expressing affection and offering support to a friend serve as relational investments, which builds emotional reserves and promotes relational preservation. Threat appraisals and behaviors contribute to relational depletion, as one’s “energy is being expended protecting and regulating oneself,” which often exacerbates stressors (Afifi et al., 2016, p. 671). For example, if someone consistently invests in their friendship by offering significant amounts of support and their friend does not reciprocate their investments, they might start to reduce the amount of effort and energy they put into their friendship. In doing so, they are choosing to prioritize their own needs over maintaining the friendship. Indeed, individuals attempt to preserve themselves over their relationships through threat appraisals and behaviors (Afifi et al., 2016). All of these relational exchanges contribute to whether relationships will grow and thrive or face depletion and relational load (Afifi et al., 2016).

The TRRL helps us understand why providers might experience challenges as well as how they might attempt to navigate their difficulties within their supportive relationships. Indeed, providers might use different supportive strategies to preserve themselves and/or their relationships dependent on various relational exchanges. Alternatively, if communicative behaviors are appropriately reciprocated and both interactants’ needs are met within a relationship, relational partners are more likely to enact security appraisals and behaviors (Afifi

et al., 2016). Moreover, these behaviors will build emotional reserves and contribute to relational preservation (Afifi et al., 2016). Positive supportive interactions are one form of security behaviors that may contribute to relational thriving, which often enhances relational and individual health (Afifi et al., 2016). Overall, (un)met needs and relational quality contribute to how people's relationships unfold (Afifi et al., 2016)—two important factors that might be particularly complicated in supportive relationships that are navigating significant or ongoing stressors. In short, the investments required to offer and give support prove the TRRL as a beneficial framework to evaluate how support providers might experience both positive and negative outcomes while investing in their supportive relationships.

Complexity in Supportive Communication

Research illuminates various positive outcomes support has on health and well-being (Albrecht & Adelman, 1987; MacGeorge et al., 2011; Priem & Solomon, 2015). Social support can enhance self-esteem, reduce stress, and even increase levels of attachment and long-term relational thriving between support providers and receivers (Berkman et al., 2000; Feeney & Collins, 2015). However, supportive communication is not always positive; research also highlights the complexities of social support, illustrating instances where supportive communication is ineffective or even harmful (see Faw et al., 2018; High & Dillard, 2012; McLaren & High, 2019; Wortman & Lehman, 1985). Most of this scholarship centers experiences where support provision is ineffective, noting that various factors influence support effectiveness, including message content, relational history, perception of support, and the supportive context (Goldsmith & MacGeorge, 2000; Marigold et al., 2014).

As such, scholars have strived to understand how, when, and why supportive communication results in negative outcomes, often centering the experiences of support

recipients (e.g., High & Dillard, 2012; McLaren & High, 2019; Ray et al., 2020; Wortman & Lehman, 1985). Vangelisti (2009) asserts that, “of course it is likely that, on average, acts of support that are prosocial and sensitive are more effective than those [that] are hurtful and insensitive” (p. 44). Other research illustrates how low-quality support (i.e., support that does not recognize, validate, and confirm recipients’ experiences) is more likely to result in negative outcomes for recipients (High & Dillard, 2012). Additionally, research exploring the content of social support depicts that when supportive messages include a negative component, recipients perceive the support as less effective and view the provider as less competent (Ray et al., 2020). Vangelisti (2009) asserts that sometimes support is unwanted, and McLaren and High (2019) extend this assertion by highlighting how support gaps (i.e., when recipients do not receive the amount and/or type of support they desire) are associated with hurt feelings and relational dissatisfaction. Less, however, is known about gaps from a providers’ perspective (i.e., when providers do not provide the amount and/or type of support they want to offer). While various literature highlights the ways in which social support provision might be ineffective or difficult, less is known about the complexities providers face in their supportive interactions and relationships.

Support Provider Complexities

By its nature, support is a dyadic process, and “[...] it is important to consider the support provider when assessing the potential outcomes of a supportive interaction” (Faw, 2018, p. 5). The outcomes of support provision are undoubtedly multifaceted and complex. On the one hand, providers can experience various benefits through their provision of support. For example, support providers may experience heightened self-esteem and self-worth, reduced stress, better physical and mental health, and enhanced feelings of closeness to the person they are supporting

(Brown et al., 2003; Inagaki & Orehek, 2017). The increase in relational satisfaction might serve as a buffer that minimizes the potential costs of giving support, ultimately causing support providers to experience fewer negative emotions during supportive interactions (Lu & Argyle, 1992).

That being said, Inagaki and Orehek (2017) assert that a supportive situation must meet certain criteria for providers to experience positive outcomes from a supportive interaction. To experience positive outcomes, a provider must choose to offer support freely (i.e., without being coerced or feeling obligated) and they must view their offered support as helpful and effective (Inagaki & Orehek, 2017). For example, if a support provider is helping a friend navigate a significant life transition because they feel like they have to—not because they want to—they are less likely to experience benefits from their support provision efforts. Similarly, if a support provider is helping a friend freely, but feels like their support provision is ineffective in helping solve the problem or make their friend feel better, they are less likely to have positive outcomes because of their support provision. If providers feel obligated to support others or believe that their investments are not making a positive impact on the support recipient, they likely experience relational strain. Repetitive or long-term strain contributes to relational load or depletion (Afifi et al., 2016), which might impact whether providers will continue investing in their relationships.

Research reflects that providers might have negative experiences providing support due to a multitude of additional personal and relational conditions, including support burnout, communication maintenance discrepancies, and/or feelings of futility (Afifi et al., 2016; Johnson, 2025; Parks, 2016; Ray et al., 2019). When providers offer help frequently or across prolonged periods of time, they might experience feelings of burnout (i.e., exhaustion, detachment,

inadequacy, or underachievement; Maslach & Leiter, 2016). Indeed, scholarship confirms that informal care providers, who—like informal support providers—offer significant support, often experience burnout deriving from the help they offer others (Reed et al., 2020). Other work suggests that people are more hesitant to offer help when a support seeker talks about the same problem persistently (Afifi et al., 2013; Stroebe et al., 2005). Indeed, Afifi and colleagues' (2003) results depicted that:

When people talk about a problem repeatedly, however, it can challenge even the best support providers' communication skills. Well-intentioned friends who normally provide good support may begin to wane their support efforts, which could further perpetuate the ruminator's anxiety and potentially hurt the relationship (p. 412).

This may be a reflection of the TRRL in action, with providers reaching depletion and opting to reduce their investments as a means of protecting themselves. Unfortunately, this can become a challenging cycle, as research shows that people who ruminate about their problems tend to seek support more frequently than others, and the support they receive may go unnoticed or underappreciated (Nolen-Hoeksema & Davis, 1999). Provider challenges are further complicated by a lack of reciprocity in supportive relationships.

Reciprocity involves receiving the same amount of investment from a relational partner that one has put in, and people generally expect mutual investment from relational partners (Gouldner, 1960). The TRRL asserts that discrepancies in investment can contribute to relational strain (Afifi et al., 2016), and a lack of reciprocity is one type of discrepancy that often shows up in challenging support situations (Johnson, 2025; Lu & Argyle, 1992). Allan (2008) argues that reciprocated supportive communication is a defining characteristic in friendships:

The maintenance of a broad balance of reciprocity and exchange is usually also an element within this nonhierarchical construction of friendship, though this may be less marked in particularly close friendships. In the doing of friendship, this balance is maintained through active, though largely implicit, monitoring of different forms of

material and emotional support exchanged, with each friend usually ensuring that they do not become overly indebted (p. 10).

It is unsurprising, then, that if a provider feels like they are investing more effort, it is likely to create strain on the relationship (Afifi et al., 2016). In these instances, providers might draw upon their emotional reserves until they reach a point of depletion. If their depletion becomes long-lasting, it could prompt support providers to engage in threat appraisals and behaviors (e.g., support boundary creation, deceptive/reluctant support provision, nonsupport, etc.) as a means of self-preservation. Interestingly, perceived reciprocity tends to decline as people age, but many middle-aged and older adults still find their relationships satisfying, whereas unbalanced reciprocity often impacts younger adults' satisfaction levels (Braun et al., 2018). As such, it is possible that reciprocity may matter more in young adulthood compared to older adulthood, posing questions about the role reciprocity plays in supportive relationships across the lifespan.

Wortman and Lehman's (1985) seminal work shows how supportive communication becomes increasingly complex when providers' needs conflict with recipients' needs—often resulting in feelings of obligation, experiences of negative affect, and worse relational outcomes. Indeed, support is fraught with conflicting goals for all interactants (Goldsmith, 1992; Wortman & Lehman, 1985), and face concerns (i.e., how people manage their positive self-image and personal autonomy; Brown & Levinson, 1987) enhance the complexities underlying how providers and recipients communicate their needs. A provider might experience conflicting goals around wanting to help someone while simultaneously wanting to take care of their own well-being, and their associated perceptions and behaviors impact whether their relationships will thrive or struggle (Afifi et al., 2016).

Supportive communication involves potential face threats for providers and recipients, which impacts how interactants perceive support effectiveness and quality (Goldsmith, 1994;

Goldsmith, 2000). For example, a provider might hesitate to express frustration around helping someone to maintain their positive image to minimize the likelihood of being viewed negatively for not supporting someone in their time of need. Unfortunately, the types and severity of challenges that providers might experience while offering support to others remain largely unexplored, making it difficult to fully conceptualize what factors might contribute to positive or negative outcomes of support provision. Regardless, scholarship has begun to explore different approaches providers can use to navigate challenges that arise in their supportive relationships.

Navigating Complexities in Support Provision

Supportive communication is integral to relationships, and it is vital to understand the nuances inherent in social support processes. Providers might view their supportive interactions or relationships as difficult, upsetting, or even toxic, which can have ramifications that contribute to relational depletion or load. Indeed, support providers can experience various challenges while offering help to others, and scholars have started investigating what strategies they might use to navigate the complexities of their support provision. In particular, recent scholarship on support boundary creation, deceptive/reluctant support provision, and nonsupport are important to consider when exploring how providers manage their challenging supportive relationships.

Support Boundary Creation

One communicative pathway for managing supportive challenges is support boundary creation (Johnson, 2025). Support boundaries are defined as “a support provider’s parameters around the amount and/or type of support they are willing to offer” (Johnson, 2025, p. 350). In other words, support boundaries symbolize a support provider’s limits for their ability to provide support within their relationships (Johnson, 2025). Providers can limit the quantity of their support (e.g., how many supportive conversations they are willing to have, the amount of time

they are willing to spend providing support, etc.) as well as specify what support type(s) (i.e., emotional, esteem, network, tangible, and informational) they are willing to continue providing (Johnson, 2025). Moreover, providers can offer lower quality support to create boundaries (Johnson, 2025).

Johnson (2025) found that support providers used three distinct strategies when creating support boundaries in their friendships: indirect support boundary creation, direct support boundary creation, and collaborative support boundary creation. *Indirect support boundary creation* involved communication and behavior that was implicit and unspoken with the purpose of minimizing support seeking and provision (Johnson, 2025). Participants engaged in various indirect strategies, including *physical separation*, *mediated separation*, *discursive separation*, and *passive separation* (Johnson, 2025). To reduce their support provision, participants created or enhanced the physical distance between them and their friend (Johnson, 2025). These participants often worked or lived in close proximity with their friend, and creating physical distance facilitated minimized support provision (Johnson, 2025). Other participants relied on mediated separation, in which they invested less time in mediated interactions, waited longer to respond to their friend, and even temporarily ignored calls or messages (Johnson, 2025). Discursive separation occurred when participants provided excuses or avoided specific topics as a means of offering less or different types of support (Johnson, 2025). Finally, participants implicitly created support boundaries by embracing opportunities for passive separation. In these instances, participants leaned into the distance they experienced through life circumstances (e.g., supportive interactants no longer living in the same city, pandemic safety precautions, etc.) rather than through their own actions and behaviors (Johnson, 2025). While indirect support boundary creation saves face (i.e., maintaining a positive self-image and/or retaining personal autonomy;

Brown & Levinson, 1987), these attempts might be less effective at minimizing support provision. Participants often transitioned from indirect strategies to more direct strategies for support boundary creation, with some acknowledging that the implicit strategies were not effective in reducing their support provision (Johnson, 2025).

Many participants also engaged in *direct support boundary creation*, in which they created parameters around their support provision through explicit communication strategies (Johnson, 2025). For these participants, they often directly stated the support conditions they were willing to accept (e.g., when and how they could be contacted for support), as well as the types of support they were willing to give (Johnson, 2025). For example, a provider could create a direct support boundary by specifying the times they would prefer to provide support (e.g., not in the middle of the night). While direct support boundary creation might be more effective in establishing parameters around the amount and/or type of support one is willing to offer, being more explicit heightens risks for one's positive self-image (e.g., being viewed as an ineffective support provider; Brown & Levinson, 1987).

A smaller number of participants—four out of 22—used *collaborative support boundary creation* strategies to navigate their supportive challenges (Johnson, 2025). In these instances, participants had open and honest conversations with their friend to create mutually agreed upon support boundaries (Johnson, 2025). Using collaborative strategies, participants were able to reaffirm their commitments to their friendship, engage in open dialogue about how to best move forward, and avoid miscommunication about their preferences related to support dynamics (Johnson, 2025). As such, it is possible that using collaborative communication strategies might be the most effective at minimizing miscommunication and face threats, while still successfully establishing parameters around support provision (Johnson, 2025). Less is known about the

individual and relational outcomes of support boundary creation, which highlights an important area for future research.

Deceptive/Reluctant Support Provision

Providers might be in difficult situations where they feel obligated to provide support (Ray et al., 2023), where they feel incapable of being helpful (Wortman & Lehman, 1985), and/or where their support attempts are ineffective or harmful (High & Dillard, 2012; McLaren & High, 2019). As such, support providers might rely on deception (i.e., intentional falsification or withholding of information to mislead others; McCornack & Levine, 1990) to navigate challenging supportive interactions. Recent scholarship explored *deceptive/reluctant support provision*, which is defined as “verbal and nonverbal supportive communication that is communicated unwillingly (i.e., hesitantly or against their wishes), does not align with support providers’ true feelings (i.e., disingenuous or inauthentic), or both” (Johnson et al., 2026, p. 1). In other words, deceptive/reluctant support occurs when providers offer support *unwillingly* and/or in ways that *do not align* with what they think or believe related to the support recipient’s stressor (Johnson et al., 2026). Another central aspect of deceptive/reluctant support provision is a provider’s relational *norms* and patterned behaviors. These behaviors impacted the deceptive/reluctant support process, through *boundary creeps* (i.e., supportive expectations gradually shifting from acceptable to unacceptable), *lack of reciprocity* (i.e., unequal investments), *no questions asked* (i.e., recipients expecting support provision without questions from the provider), and *toxicity* (i.e., support dynamics being toxic and unhealthy; Johnson et al., 2026).

Johnson and colleagues (2026) also identified various *complicating contextual factors* that impacted how providers engage in deceptive/reluctant support provision, including *fear of*

repercussions, justifications, values, networks, and isolation. Many participants cited *fear of repercussions*, in which they are concerned that by not engaging in deceptive support, there is risk of harm to the support recipient, the support provider, and/or their relationship (Johnson et al., 2026). Being afraid of potential repercussions may inhibit providers' ability to offer support willingly, which could impact their ability to experience positive outcomes of providing support (Inagaki & Orehek, 2017). *Justification* illustrated how participants rationalized their deceptive/reluctant support provision, by asserting *it's not all bad* (i.e., there are benefits to their relationships that outweigh the challenges of deceptive/reluctant support provision) and *it could be worse* (i.e., their relationship would be worse without deceptive/reluctant support provision; Johnson et al., 2026). Participants often cited personal *values* that shaped their deceptive/reluctant support processes, with *relational obligation* (i.e., support was an expectation based on the relationship itself) and *personal characteristics* (i.e., viewing themselves as caring and empathetic people) being particularly salient (Johnson et al., 2026). Relationships do not exist in a vacuum, and many participants discussed how their *networks* were involved in promoting deceptive/reluctant support provision as well as empowering them to stop (Johnson et al., 2026). Finally, participants occasionally felt as though they were the only person who was helping the support recipient, and their feelings of *isolation* contributed to their continued deceptive/reluctant support provision (Johnson et al., 2026).

This research highlights communicative pathways that providers might use to navigate their supportive challenges: “in deceptive/reluctant support, providers choose to communicate in ways that they believe will satisfy the recipient even as that communication fails to meet their own needs or subjects them to harm” (Johnson et al., 2026, p. 43). Indeed, providers might use deceptive/reluctant support as a security behavior to maintain their relationships (Afifi et al.,

2016). However, it is concerning that many providers described their supportive relationships as unhealthy and toxic, while also discussing the recipient's lack of investments and disrespect of boundary attempts (Johnson et al., 2026). As such, it is highly likely that the relationships themselves are a unique stressor that providers must navigate—on top of the other stressors impacting the health of their relationships (Afifi et al., 2016). Moreover, participants' experiences illuminate the ongoing and dynamic nature of supportive relationships (Johnson et al., 2026). In fact, participants often detailed how their support shifted from genuine and willing to deceptive over time (Johnson et al., 2026), which poses questions about how long-term communal orientation discrepancies, maintenance discrepancies, and relational depletion contribute to these challenging support processes. It is likely that after long-term depletion, support providers might shift to alternative strategies to handle their supportive challenges.

Nonsupport

Another way support providers can navigate challenging supportive relationships is by engaging in *nonsupport*. Nonsupport was originally conceptualized as support that is provided but unhelpful (Neufeld & Harrison, 2003). Then, Neufeld and colleagues (2007) identified different forms of non-supportive interactions that women family caregivers faced, including negative interactions, ineffective interactions, and the absence of expected support. Negative interactions included any supportive communication or behavior that was harmful, discounting, or minimizing (Neufeld et al., 2007). Additionally, negative interactions included placing blame, criticizing, and disrespecting others (Neufeld et al., 2007). Ineffective interactions consisted of behavior that was meant to be helpful, but was not perceived as helpful (Neufeld et al., 2007). This included insufficient or inappropriate advice, information, or other supportive behaviors (Neufeld et al., 2007). Finally, the absence of expected or desired support involved people not

recognizing support needs or not offering support even if the need was recognized (Neufeld et al., 2007). As such, people did not receive the help they needed—because people were unaware, intimidated, and/or in conflict which all contributed to the absence of support (Neufeld et al., 2007).

In more recent years, scholarship has explored the absence of expected or desired support from the providers' perspective (see Ray, 2024; Ray et al., 2019; Ray & Manusov, 2023). This work defines nonsupport as a support provider's conscious decision to not provide support to someone perceived as needing help (e.g., Ray et al., 2023; Ray et al., 2019; Ray & Veluscek, 2018). However, "this construct does not include, for instance, those people who may be waiting for a specific opportunity to provide emotional support or intend to communicate such support at a later time" (Ray et al., 2019, p. 23). Ray and colleagues (2019) highlight provider-related, recipient-related, relationship-related, and context-related reasons that people cite for not offering support to people in need. Provider-related reasons for not providing support involved not knowing what to say, concern about losing composure, tending to other priorities, experiencing discomfort, feelings of futility, and feeling insincere (Ray et al., 2019). When detailing recipient-related reasons for not offering emotional support, participants discussed how the recipient did not want or deserve support, how supportive interactions would cause negative affect, and how the support seeker received sufficient support from other people (Ray et al., 2019). Relationship-related reasons for not providing support included not being relationally close, concerns about maintaining privacy, and violating relational norms (Ray et al., 2019). Context-related reasons involved not having opportunities to provide support, not knowing how to reconnect after losing touch, and physical distance (Ray et al., 2019).

More recently, Ray and colleagues (2023) conducted a thematic narrative analysis to explore how nonsupporters construct themselves as well as the people they view as undeserving of support. When conceptualizing their own experiences, providers categorized themselves in three ways: the burdened giver, the defeated helper, and the obligated victim (Ray et al., 2023). Providers who were overloaded by support expectations and felt uncertain that they were the best option for providing support were labeled as burdened givers (Ray et al., 2023). Indeed, these providers felt they continuously offered support without receiving mutual investments, resulting in feeling taken advantage of in their supportive relationships (Ray et al., 2023). Those who had supported the support recipient over prolonged periods of time and felt like they were the only one who could offer help were defeated helpers (Ray et al., 2023). These participants eventually reached a breaking point after their support attempts were ignored (Ray et al., 2023). Finally, participants labeled as obligated victims felt victimized by the support seeker, but relational obligations pushed them to provide support anyway; however, feelings of coercion over time contributed to eventual nonsupport (Ray et al., 2023). Unfortunately, nonsupport contributes to various negative biopsychosocial outcomes for recipients, including worse physical and mental health as well as increased feelings of depression and loneliness (Ray, 2024). Moreover, nonsupport contributes to issues of social health, often causing hurt feelings as a result of not receiving the help one needs as well as shifting perceptions about the importance of the relationship (Ray, 2024).

Balancing the Self and the Relationship

Providers might use different strategies to navigate their challenging supportive relationships and simultaneously preserve their own well-being. If someone has experienced long-lasting lack of reciprocity within a friendship, they might create support boundaries as a

means of minimizing their investments to prioritize their own well-being but not cutting support off entirely to still maintain their relationship. As such, support boundary creation might be one communicative pathway that people use for simultaneous relationship preservation and self-preservation. Similarly, deceptive/reluctant support provision might serve as a means of self and relationship preservation. For example, a support provider might be deceptive by telling support recipients what they want to hear (rather than what the provider actually believes) in order to protect their relationship with the support recipient. However, providers might also choose to provide inauthentic support because they do not want to deal with potential backlash from expressing their genuine perspective—which could be one form of self-preservation. Finally, nonsupport is likely a means of self-preservation with less concern about the relational outcomes. Providers who stop providing support entirely likely do not care whether or not the relationship survives and are primarily concerned with protecting themselves and their well-being. Supportive challenges cause harm in all types of relationships, but might be especially detrimental in voluntary relationships, which face enhanced risks of relational dissolution when challenges arise (Khullar et al., 2021).

Friendship

Like all relationships, friendships are not immune to challenges that can negatively impact individual and relational health; however, the voluntary (i.e., chosen) nature of friendships alongside their lack of social regulation might enhance risks of relational decay or dissolution when these challenges arise (Khullar et al., 2021; Vieth et al., 2022; Wiseman, 1986). Indeed, research shows that people are more sensitive to relational maintenance changes (e.g., frequency of contact) in their friendships compared to familial relationships (Roberts & Doherty, 2010). People generally opt into the friendships they want, and these relationships are not

organized around specific tasks or institutional norms (Vieth et al., 2022; Wiseman, 1986). As a result, people's understanding of friendship often derives from the standards and qualities they expect of their friends (Fehr & Harasymchuk, 2019).

Given the costs needed to maintain friendships, the discrepancies between friendship expectations and experiences might contribute to relational depletion or load at higher levels than other relationship types. Friendship expectations are an individual's perception of the qualities they desire their friends to have as well as the behavioral norms they want their friends to follow (Hall, 2011). All stages of friendships—formation, maintenance, and dissolution—are dependent on one's expectations of their friend's characteristics and behavior, and whether their expectations are being met (see Clark & Ayers, 1993; Fehr & Harasymchuk, 2019; La Gaipa, 1987; Oswald et al., 2004; Wiseman, 1986). Moreover, one's past and current experiences with their friends—both good and bad—shape the way they understand friendship, and ultimately, alter the expectations they have for their friends across the lifespan (Elkins & Peterson, 1993; Wiseman, 1986).

As noted by Lee (2022), “people develop friendships by repeatedly exchanging social aid and participating in activities together, through which two people develop, sustain, or modify their mutual understanding of and affection for each other” (p. 4). It is unsurprising, then, that scholarship has well-documented friendship expectations. Indeed, scholars assert that the standards people have for their friends are integral to how they understand and define friendship (Hall, 2011; Hartup & Stevens, 1997). However, friendship is multifaceted; the term “friend” can be used for various friendship types that might have different meanings and purposes (Lee, 2022). For example, Rawlins (1994) identified three types of sustained adult friendships: active (i.e., friends who establish mutually agreed upon availability, contact, and commitment),

dormant (i.e., friends who share history and/or enough contact to uphold the potential of resuming the friendship), and commemorative (i.e., friends with minimal contact who exist largely as a memory). Across research, there are inconsistencies for what “counts” as a friend—often excluding relationship types such as family and romantic partners, viewing these relationships as mutually exclusive from friendships (Pennington et al., 2024). Friends might also be researched based on closeness and/or tie strength (i.e., casual friends, close friends, best friends; Oswald et al., 2004; Westmyer & Myers, 1996; Wiseman, 1986). These nuances “[highlight] the inherent fuzziness that surrounds friendships, and the need to better situate these relationships today” (Pennington et al., 2024, p. 2).

Since friendships are voluntary and self-managed, some argue that the primary goal of friendship is enjoyment and relational preservation (Wiseman, 1986). However, people’s expectations influence whether friendships will thrive or reach relational depletion (Afifi et al., 2016). Given the importance of friendship satisfaction on overall health, well-being, and life satisfaction (see Fehr & Harasymchuk, 2019; Gillespie et al., 2015; Hartup & Stevens, 1997; Pennington et al., 2024), it is vital to consider the functions, rules, and expectations people use to understand their friendships.

Characteristics, Functions, and Expectations of Friendship

Compared to other relationship types, friendship remains the most voluntary and the easiest to dissolve (Fehr, 1996; Fehr & Harasymchuk, 2019). Muraco (2012) asserts that “friendship is one of the most significant, yet socially ignored, relationships” people have (p. 15). Though these relationships are chosen, people still have expectations for how they want their friendships to be (Argyle & Henderson, 1984; Fehr & Harasymchuk, 2019; Hall, 2012). These expectations, however, may vary culturally, situationally, and individually (Fehr, 1996; Fehr &

Harasymchuk, 2022; Lee, 2022). Research has assessed friendship by investigating the rules, functions, ideal standards, norms and expectations, and layperson conceptions (see Argyle & Henderson, 1984; Fehr, 2004; Femlee & Muraco, 2009; Hall, 2012; Mendelson & Kay, 2003). Though research examines different aspects of friendship, there is a significant overlap in what people deem important for friendship satisfaction.

Friendship quality (i.e., relational closeness and satisfaction) and spending time with one's friends are essential components of one's overall health and well-being (Pennington et al., 2024; Pezirkianidis et al., 2023). Scholarship suggests that being satisfied with one's friends significantly predicts overall satisfaction with life, even after controlling for related variables (e.g., demographics, number of friendships, and general life satisfaction; Gillespie et al., 2015). Indeed, the absence of supportive friendships can be grave, with studies depicting increased loneliness, minimized satisfaction, and reduced well-being as outcomes (Nicolaisen & Thorsen, 2017). Broadly, people expect their friendships to be intimate, supportive, and enjoyable relationships (see Argyle & Henderson, 1984; Hall, 2012; Mendelson & Kay, 2003). Indeed, “characteristics such as self-disclosure, provision of support, and enjoyment of each other's company are paramount” (Fehr & Harasymchuk, 2019, p. 66).

Friends tend to have expectations about communication and intimacy within their relationship—generally desiring high levels of self-disclosure and the ability to openly express their emotions (Argyle & Henderson, 1984; Fehr & Harasymchuk, 2019; Hall, 2011, 2012; Mendelson & Kay, 2003; Oswald et al., 2004). Most people view friends as those they can talk to about personal, intimate aspects of their lives (Fehr & Harasymchuk, 2019; Oswald et al., 2004). Moreover, people expect their friends to be loyal, encouraging, and trustworthy (Argyle & Henderson, 1984; Hall, 2011, 2012; Mendelson & Kay, 2003). Another common expectation

in friendships is the ability to enjoy time together and have fun, which is a key facet from very early ages (Fehr & Harasymchuk, 2019; Hall, 2012). Friends often hang out, engage in fun activities, and interact in carefree ways, which contributes to their relational satisfaction and commitment (Fehr & Harasymchuk, 2019; Hall, 2012).

Across both scholarly and layperson discussions of friendship, “perhaps the most salient feature is the provision of social support, especially emotional support (a friend is someone who will “be there” for you in the good times and the bad)” (Fehr & Harasymchuk, 2019, p. 70). Indeed, the importance of social support in friendships is undeniable. Countless studies illustrate how people expect various types of support from their friends, including emotional support (i.e., expressing care and validation), instrumental aid (i.e., financial support, material goods, and acts of service), and informational support (i.e., advice and guidance). In fact, social support from friends is significantly tied to perceived friendship quality and satisfaction across numerous studies (see Fehr & Harasymchuk, 2019, 2022; Hall, 2012; Oswald et al., 2004; Pennington et al., 2024; Pezirkianidis et al., 2023; Westmyer & Myers, 1996). People often expect support from their friends more frequently and in bigger quantities compared to other relationship types (Pennebaker & O’Heeron, 1984; Sias & Bartoo, 2007). Moreover, Doherty (2021) found that providing and receiving support acted as the means for which friendships grew closer. As such, I argue that the way we define and fundamentally understand friendship prompts people to continue providing support—potentially beyond their means, when they don’t want to, and/or in ways that don’t align with what they feel or believe.

Given the concerns of generalizability for studies with Western, Educated, Industrialized, Rich, and Democratic (WEIRD; see Afifi & Cornejo, 2020) populations, Fehr and Harasymchuk (2022) conducted a meta-analysis to assess friendship formation and maintenance in sexual and

gender underrepresented groups as well as racial and ethnic underrepresented groups. Friendship among individuals in underrepresented groups remains understudied, which is problematic given friendship benefits “might be especially important for members of groups for whom friends are viewed as chosen family and whose support might be needed when experiencing stigmatization and discrimination” (Fehr & Harasymchuk, 2022, p. 452). Of importance, a lot of the friendship expectations and experiences in dominant groups are similarly common in underrepresented groups (Fehr & Harasymchuk, 2022). Indeed, Fehr and Harasymchuk’s (2022) results highlight that support provision, self-disclosure, and quality time were important aspects of friendship across various dominant and underrepresented groups. However, these communicative processes and behaviors might involve underlying challenges for underrepresented groups compared to dominant groups (Fehr & Harasymchuk, 2022).

Friendship Across the Lifespan

Friendship is vital for people’s life satisfaction, happiness, and health (Hartup & Stevens, 1997), and while friendships might look different throughout the lifespan—specifically with what activities friends do together—friendship remains similarly conceptualized across time (Fehr & Harasymchuk, 2019; Lee, 2022). At different life stages, people experience transitions that influence the expectations and realities of their friendships (Lee, 2022). Indeed, life transitions—which are common and frequent in emerging adulthood—can cause pressure in friendships for two primary reasons:

First, once people become separated by geographical distance, they have to make an active effort to meet with or contact old friends. Second, moving to a new location provides opportunities to make new friends, which takes time and energy that could otherwise be devoted to maintaining old friendships (Roberts & Dunbar, 2015, p. 427).

For example, young adults’ friendship expectations might shift as they transition to college, start their careers, or form families (Lee, 2022). Oswald and Clark (2003) found that many friendships

formed in high school experience a multitude of challenges during one's transition to college, likely due in part to the increased effort needed to maintain those relationships in combination with decreased rewards and investments. Langheit and Poulin (2022) also found that key aspects of friendship tend to generally decrease across emerging adulthood, with significant decline from age 25 to 30. However, they also found that shared activities, experiencing fun, and wanting the friendship to continue (even when challenges exist within the relationship) increased slightly from age 19 to 22, before declining (Langheit & Poulin, 2022). Emerging adults have less responsibilities than older adults, allowing them to focus on their friendships and interact with their friends at higher frequencies (Johnson et al., 2003), which might explain the slight increase in companionship and reliability in the earlier years of emerging adulthood.

People's expectations regarding investment from their friends as well as what investments they can offer in their friendships are likely to change across the lifespan (Lee, 2022). Older adults have experienced more friendship formation, maintenance, and dissolution compared to young adults, which shapes how they understand friendship (Elkins & Peterson, 1993; Lee, 2022; Wiseman, 1986). Roy and colleagues (2022) found higher levels of friendship formation and decay in young adult and adult populations compared to middle-aged individuals, which suggests that friendships may be more stable in later adulthood. It is possible that adults "may be more selective according to the types of friendships, personal friendship style, and social foci than young adults" (Lee, 2022, p. 7). Regardless, friendships remain an important relationship across adulthood, defined by both significant adaptability and vulnerability (Allan, 2008).

Lee (2022) identified four types of friendship for younger adults (21 to 30 years old) and older adults (50 to 70 years old). In emerging adulthood, friends are viewed as confidants and

companions who provide help and support with the life transitions often experienced in young adulthood (Fehr, 1996; Takasaki, 2017). Friendship quality and satisfaction impact emerging adults' identity, intimacy development, and well-being more than other relationship types (Mendelson & Kay, 2003). Both age groups have active, close friends that are categorized by frequent interaction, support provision, and self-disclosure; however, these relationships had more frequently formed in formal institutions (e.g., education systems, workplaces, etc.) for younger adults compared to older adults (Lee, 2022). Younger and older adults both also had long-distance friends, which were categorized with less frequent interaction while still expecting high levels of self-disclosure and social support (Lee, 2022). However, older adults' long-distance friendships had been longer-lasting, more homogenous, but formed in more diverse contexts (beyond just school or work, which was most common for younger adults; Lee, 2022).

Moreover, Lee (2022) identified younger adults as having adolescent friends (i.e., friends from childhood who were often still in regular contact, lived in close proximity, and had high levels of emotional attachment), whereas the older adults had longtime-not-close friends (i.e., friends they knew for a long time, frequently communicated with, and had supportive interactions, but did not involve high levels of emotional attachment). Finally, both younger adults and older adults had new friends, which were labeled as shorter and less emotionally close (Lee, 2022). Overall, younger adults' friendships were more racial diverse than older adults' friendships, whereas older adults formed friendships in more diverse social contexts compared to younger adults (Lee, 2022).

The Dark Sides of Friendship

Like all relationships, "friendship is not without demands, contradictions, limits, or failings" (Rawlins, 2008, p. 202). However, the voluntary nature of friendships might enhance

risks of relational dissolution when these challenges arise (Khullar et al., 2021; Vieth et al., 2022). While friendship is often associated with better long-term health outcomes (Fehr & Harasymchuk, 2019), less scholarship has explored what friendship conditions or experiences might contribute to reduced closeness, relational dissatisfaction, and/or relational load or friendship decay (Vieth et al., 2022). As noted by Khullar and colleagues (2021), “given that friendships are both vulnerable to dissolution and a hallmark of healthy social development, understanding the circumstances of dissolution is critical” (p. 3245). Indeed, deeper understanding will offer insight for potential strategies that people could implement to mitigate and manage challenging friendships, as a means of protecting themselves, their friends, and their relationships (Khullar et al., 2021).

Factors Contributing to Friendship Decay and Dissolution

Relational decay and dissolution involve decreased relational satisfaction and closeness, the gradual deterioration of an interpersonal connection, or even the complete termination of a relationship (Afifi et al., 2016; Fellers & Ledbetter, 2022; Khullar et al., 2021; Vieth et al., 2022). While friendship dissolution remains largely unexplored, recent scholarship offers insight for different factors that might contribute to friendship decay or loss. Friendship is generally positive and fulfilling; however, sometimes friends engage in harmful behavior (Khullar et al., 2021). Previous scholarship illustrates friendship dissolution deriving from external factors (e.g., friends no longer living in the same place; Rose, 1984), relationship characteristics (e.g., reduced closeness and intimacy; Rose & Serafica, 1986), and individual characteristics (e.g., gender differences; Benenson et al., 2014). These findings might be particularly salient in casual friendships, whereas it is probable that decreased relational quality more significantly contributes to dissolution in closer friendships (Vieth et al., 2022).

Heightened dissatisfaction in friendships could derive from various factors, including shifting network dynamics, alternative obligations, lack of reciprocity, differing values, and/or betrayal (Vieth et al., 2022). Additionally, friendships' supportive expectations might pose challenges that complicate relationships' ability to thrive (Johnson, 2025). If friends violate the standards their friendship was built upon, a variety of negative outcomes could ensue—including friendship loss (Rawlins, 2008). For example, if friends established their relationship with certain supportive expectations, and a provider creates support boundaries and ultimately stops offering the same amount and/or type of support that is expected and desired, that shift could contribute to friendship decay and/or dissolution (Rawlins, 2008). Of course, it can be harmful when friends want, need, or expect support and they do not receive it (McLaren & High, 2019), but it can also cause friendship strain to continue providing support beyond one's means. To create more ethical, sustainable, and satisfying supportive friendships, all interactants should be intentional about what they are seeking as well as what they are willing/able to provide.

Johnson and colleagues (2004) found most turning points that contributed to friendship dissolution were related to one's broader network and/or situational problems. Similarly, Fellers and Ledbetter (2022) identified network challenges (e.g., investing more in other friendships, prioritizing romantic partners over friendships, etc.) as a contributor to friendship decay. Moreover, some people experience relational decay because of their perceived discrepancies between their goals/beliefs compared to the goals/beliefs of their friend (Fellers & Ledbetter, 2022). Some scholarship suggests that people rarely end or demote a friendship in response to specific challenges (see McDonald & Asher, 2013), though friendship loss is not uncommon (Khullar et al., 2021). Instead, people often attribute friendship dissolution to gradual failures to invest in their friendships (Khullar, 2021; Rose, 1984; Rose & Serafica, 1986). Indeed, Khullar

and colleagues (2021) assert that “while certain critical events may lead emerging adults to dissolve friendships, in other cases, dissolution may take place over longer periods of time involving an accumulation of negative events” (p. 3259). For example, an accumulation of support provision challenges over a six-month period might contribute to relational depletion or load more notably than a one-time, challenging supportive interaction. Similarly, Duck (1982) argues that relational dissolution is often a result of several issues, rather than a one-time event. These assertions align with how Afifi and colleagues’ (2016) TRRL discusses outcomes of long-term relational depletion.

Experiences of friendship dissolution might also reflect attempts of self-preservation (Apostolou, 2023; Daley et al., 1997; Khullar et al., 2021). For example, if a friend demands an excessive amount of support and is not mutually investing in the friendship, one might terminate the friendship to prioritize their own well-being (Afifi et al., 2016; Apostolou, 2023; Daley et al., 1997; Khullar et al., 2021). In fact, some argue that

it would pay for individuals to terminate poor quality friendships, which would enable them to reduce resources that they would not be reciprocated, and open a slot in their social network, which could be filled in with a friend with desirable qualities” (Apostolou, 2023, p. 2).

This aligns with the TRRL’s assertion that people will engage in threat appraisals and behaviors when they decide to prioritize themselves over the relationship (Afifi et al., 2016). Clearly, there are a multitude of individual, relational, network, and situational factors that can ultimately contribute to friendship decay and dissolution, and these factors likely also influence how people demote and/or terminate their friendships (Vieth et al., 2022).

The Process of Friendship Decay and Dissolution

Various factors contribute to the process of friendship dissolution, its permanence, and the subsequent psychological and emotional effects that individuals face after the loss of a

friendship (Vieth et al., 2022). Friendship dissolution can happen in immediate, active ways or gradual, passive ways (Apostolou, 2023; Vieth et al., 2022). People will occasionally use immediate dissolution strategies to end their friendships (i.e., complete cease of interaction; Apostolou, 2023). While there are advantages to this method—like not investing in undesirable friendships, making space for a new connection in one’s network—it often generates negative emotional responses and significant turmoil for the involved parties (Apostolou, 2023; Vieth et al., 2022). These negative outcomes make it unlikely that the friendship could be repaired in the future—making active friendship dissolution more permanent (Apostolou, 2023; Vieth et al., 2022). Moreover, this method heightens risk of retaliation (e.g., spreading private information) from their ex-friend (Apostolou, 2023; Vieth et al., 2022).

Contrarily, people also end their friendships over time by reducing contact, creating distance, making excuses, and/or ghosting their friends (Apostolou, 2023; Vieth et al., 2022). Gradual dissolution minimizes the risk of retaliation, keeps the door open for future relational closeness (if desired), and reduces the likelihood of a negative emotional response from an ex-friend (Apostolou, 2023). Friendship decay can happen through reduced communication and vulnerability; disrupting friendship routines; heightened uncertainty; and reframing the meaning of the friendship (Fellers & Ledbetter, 2022). In both active and passive friendship dissolution, people might be at risk of being viewed as unreliable or bad friends if they do not explicitly communicate why the friendship is ending (Apostolou, 2023). Transparency about the reason for terminating a friendship could make it clear who is at “fault,” but not everyone would be comfortable being so explicit (Apostolou, 2023). Moreover, an individual would have to be rather confident that they are not at fault, and comfortable with the associated face risks that come with such a direct conversation.

The aforementioned studies illustrate the more intentional forms of friendship dissolution, but it is probable that friendship loss also happens unintentionally (Vieth et al., 2022). In fact, “some friendships may start to fade away or dissolve before either friend is aware of it” (Vieth et al., 2022, p. 174). While there is insight about potential relational outcomes as well as how the ex-friend might feel in both active and passive friendship dissolution, a lot is still unknown about the emotional toll of friendship loss (Vieth et al., 2022). Indeed, future research should investigate the range of responses people might have in friendship dissolution, as well as how the responses might shift based on the dissolution strategies employed (Vieth et al., 2022).

Navigating Friendship Challenges

Friendship challenges can negatively impact health and well-being, and people must consider individual, relational, and situational factors when deciding whether—and how—to terminate their friendships (Vieth et al., 2022). In some cases, friendship dissolution might be health-promoting, as “friendship strain is associated with impaired physical health, [so] it may be best to end acrimonious friendships that become too difficult to maintain” (Vieth et al., 2022, p. 174). Indeed, friendship dissolution can serve as an attempt to enhance one’s well-being by prioritizing their needs over the effort required to maintain an undesirable friendship (Afifi et al., 2016; Khullar et al., 2021). However, some people may prefer to address friendship challenges as a means of getting their relationship back on track and minimizing the risk of friendship depletion or relational load (Afifi et al., 2016; Fellers & Ledbetter, 2022).

Individuals who want to reduce friendship decay should increase the communication within their friendship (i.e., more time communicating, higher number of message exchanges, etc.) as well as adjust the content of their conversations to reflect enhanced openness and vulnerability with one another (Fellers & Ledbetter, 2022). This strategy may be difficult for

providers who are experiencing challenging support provision, as increased communication could result in providing even more support. Additionally, enjoying quality time with one another can reduce the risk of friendship dissolution (Fellers & Ledbetter, 2022); though this might be difficult if friends are spending their quality time ruminating and/or in difficult support cycles. In more severe situations, people should strive to restore similarity (i.e., finding things in common, sharing hobbies, finding parallels in their worldview) and engage in relationship repair by acknowledging any harm caused, holding themselves accountable, and making positive changes (Fellers & Ledbetter, 2022). For providers who are struggling in their friendships, it is possible that having explicit conversations about their challenges and intentionally working to adjust based on the needs of all parties could repair their relationships.

Rawlins (2008) offers several ethical considerations to enhance the health and longevity of friendships. Regardless of various constraints and challenges, Rawlins (2008) asserts that our emotions and our thoughts collaboratively inform our friendship choices. Indeed, friendship requires voluntary, intentional negotiation (Rawlins, 2008). Friends should have mutual concern for one another; treat each other as equals; invest in continued learning about one another and the friendship; trust and be trustworthy; and be respectfully honest (Rawlins, 2008). Finally, “friendship is a conscientiously interested relationship” in which people should thoughtfully attend to treating their friends well (Rawlins, 2008, p. 182). In short, these considerations serve as helpful reminders for people who want to promote resilience and thriving in their friendships (Afifi et al., 2016).

Research Hypotheses

Challenging support provision is very complex and much remains unknown about what factors are associated with individual and relational health outcomes for providers navigating

difficult support situations. Moreover, these challenges likely have unique outcomes on friendships during emerging adulthood. Based on the arguments outlined throughout supportive communication and friendship scholarship as well as consideration of the core tenants of the theory of resilience and relational load, I pose numerous hypotheses related to providers' individual health outcomes (see Figure 1) and their relational health with their friend (see Figure 2).

In my first hypothesized model, I focus on how various support conditions (i.e., perception of problem severity; length and frequency of support provision; and fear of repercussions for not providing support) might be associated with the strategies providers use to navigate their challenging supportive relationships (i.e., providing deceptive/reluctant support and/or creating support boundaries), which ultimately might be associated with different positive and negative health outcomes. I hypothesize that providers' perception of problem severity for the challenge they are providing support for will be negatively associated with reluctance (H1a) and positively associated with deception (H1b). I hypothesize that the length of time that providers have been offering support will be positively associated with both their reluctance to provide support (H2a) and deception within the support they provide (H2b). Similarly, I hypothesize that their frequency of support provision will be positively associated with both reluctance (H3a) and deception (H3b). Given scholarship on the normative pressure to provide support, I hypothesize that providers' fear of repercussions (e.g., being viewed as a bad friend, making their friend's challenges worse, etc.) should they choose to not provide support will be negatively associated with reluctance (H4a) and positively associated with deception (H4b).

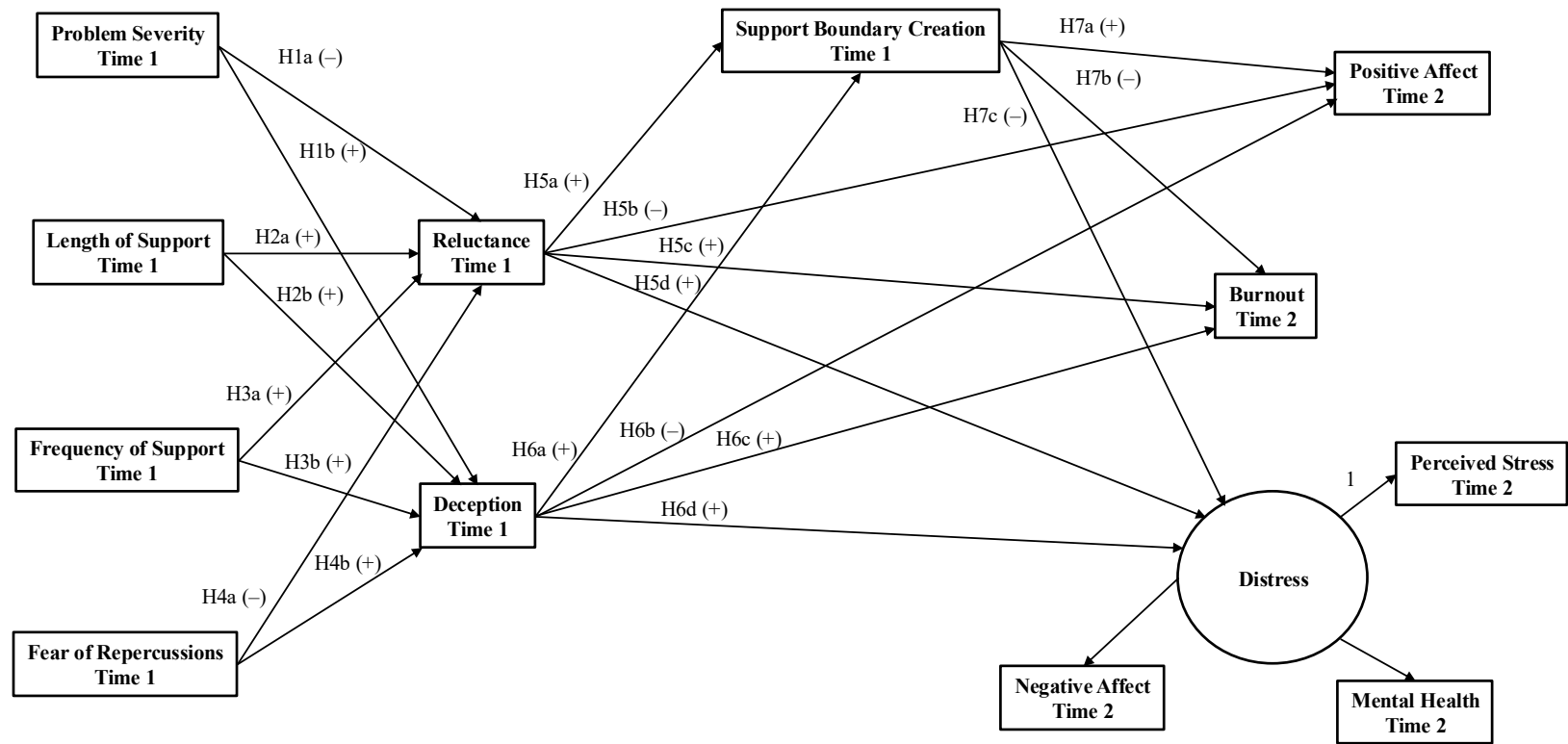


Figure 1
Hypothesized Model 1: Individual Health Outcomes

I also hypothesize that providers' reluctant support provision will be positively associated with support boundary creation (H5a), negatively associated with positive affect (H5b), and positively associated with both burnout (H5c) and distress (H5d). Similarly, I hypothesize that providers' deceptive support provision will be positively associated with support boundary creation (H6a), negatively associated with positive affect (H6b), and positively associated with both burnout (H6c) and distress (H6d). Finally, I hypothesize that support boundary creation will be positively associated with providers' positive affect (H7a) and negatively associated with burnout (H7b) and distress (H7c).

My second hypothesized model focused on how providers' perceptions and behaviors—both positive and negative—in their friendship as well as their individual outcomes might be associated with their relationships ultimately adapting to the challenges they are experiencing or reaching depletion and falling apart. In the following hypotheses, threat appraisals include providers' perceptions and beliefs that may contribute to relational depletion (e.g., having mixed feelings toward their friend, perceiving interference from their friend, experiencing turbulence in their relationship). Alternatively, security behaviors involve providers' actions that may contribute to relational thriving (e.g., engaging in friendship maintenance and coping communally with their friend).

I hypothesize that providers' investment in their friendships will be negatively associated with threat appraisals (H8a) and positively associated with security behaviors (H8b). In alignment with arguments made in the theory of resilience and relational load (Afifi et al., 2016), I hypothesize that providers' communal orientation will be negatively associated with threat

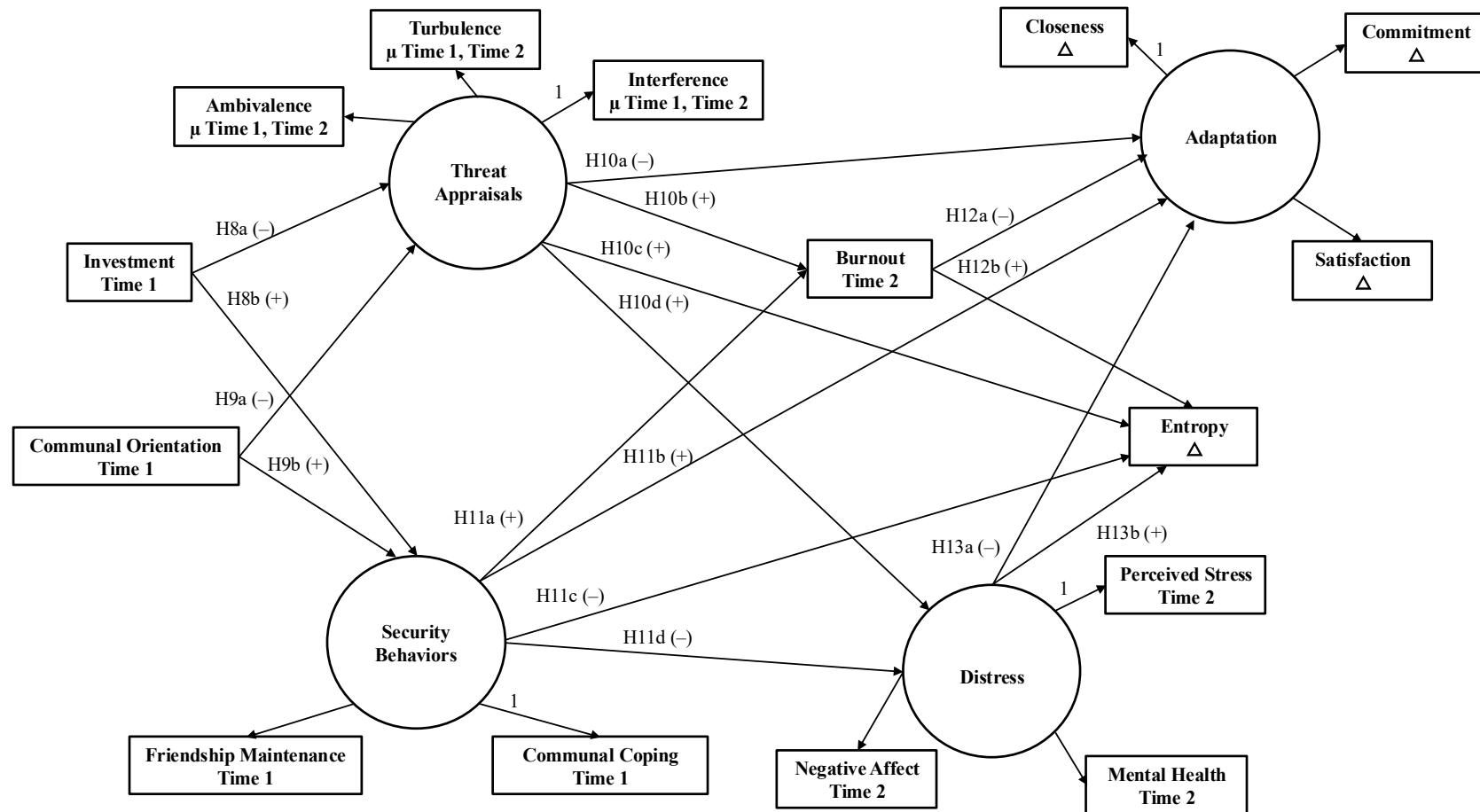


Figure 2
Hypothesized Model 2: Relational Health Outcomes

appraisals (H9a) and positively associated with security behaviors (H9b). I also hypothesize that providers' threat appraisals will be negatively associated with relational adaptation (H10a) and positively associated with burnout (H10b), friendship entropy (H10c), and distress (H10d). In addition, I hypothesize that providers' security behaviors will be positively associated with burnout (H11a) and relational adaptation (H11b) and negatively associated with friendship entropy (H11c) and distress (H11d). With consideration of burnout literature, I hypothesize that providers' burnout will be negatively associated with relational adaptation (H12a) and positively associated with friendship entropy (H12b). Finally, I hypothesize that providers' distress will be negatively associated with relational adaptation (H13a) and positively associated with friendship entropy (H13b).

CHAPTER 3 – METHODOLOGY

Method

To expand our understanding of the dark sides of social support and providers' experiences, this dissertation project utilized a quantitative approach to investigate the individual and relational health outcomes of challenging support provision in friendships during emerging adulthood. Recent studies have begun to examine how providers navigate challenging support dynamics, including support boundary creation (Johnson, 2025), deceptive/reluctant support provision (Johnson et al., 2026), and nonsupport (Neufeld et al., 2007; Ray, 2024). However, less is known about the outcomes of challenging support provision—especially for providers (Johnson et al., in press). Indeed, more complete and corroborated results are needed to comprehend which components of challenging supportive relationships influence whether individuals and their relationships ultimately struggle or thrive. To address this gap, I designed a quantitative, nonexperimental study using a two-time interval survey design, with approximately two weeks between Time 1 and Time 2. Both surveys included a series of scales assessing support providers' perspectives on the challenges they faced, as well as the effects these difficulties had on them personally and on their friendship with the person they were struggling to support.

Participants

Participant Eligibility

Broadly, this study aimed to understand the individual and relational health outcomes related to participants' difficult support provision experiences. To qualify for participation, individuals had to be *currently* experiencing challenges while providing a *close friend* support

around a given issue. More specifically, participants' experience providing support had to meet at least one of the following criteria: (1) they were feeling frustrated and/or exhausted by their supportive relationship with their friend (i.e., experiencing support burnout), (2) they had attempted to create parameters around the amount and/or type of support they offer their friend (i.e., created a support boundary); or (3) they had offered support to a friend unwillingly, when the support did not align with their feelings or beliefs about the situation, or they experienced both unwillingness and dishonesty in their supportive relationship (i.e., engaged in some form of deceptive/relevant support provision).

Friendships can become strained when individuals question whether their friend will be supportive when needed (Vieth et al., 2022), making this relationship type especially valuable for examining the outcomes of supportive challenges. As such, only individuals supporting a friend were eligible to participate. Moreover, friendships might look different throughout the lifespan (Fehr & Harasymchuk, 2019), and emerging adults generally have higher support expectations for their friends compared to other age groups (Lee, 2022). With this in mind, this study focused solely on how emerging adults ages 18 to 29 years old experience the effects of strenuous supportive relationships.

The theory of resilience and relational load (TRRL; Afifi et al., 2016) asserts that a certain degree of closeness is needed to experience resilience or relational load in relationships. Moreover, it is probable that support providers would not tolerate challenging supportive conditions—especially over prolonged periods of time—in relationships that they deem less close. In fact, the voluntary nature of friendships likely minimizes the tolerance people have for negative supportive situations (Khullar et al., 2021; Vieth et al., 2022). As such, participants had

to self-identify their friendship as close in order to participate in the larger study, which they reported through a yes/no question regarding friendship closeness in the screening survey.

Cultural norms and expectations likely shape how individuals understand and navigate support challenges (Zheng et al., 2021), which is why participation was restricted to people living within the United States. This criterion ensured that I did not overgeneralize the research findings across culturally diverse populations, which likely have important differences worth unpacking in future iterations of this work. To minimize language-based miscommunication throughout the study, participants were required to be fluent in English. There were no restrictions on the type of support participants had been struggling to provide (i.e., emotional, esteem, network, informational, or tangible), nor did I create limits around the types of challenges for which they provided support for.

Participant Demographics

All participants were recruited through Prolific, an online survey response platform. Participants' understanding, attentiveness, and honesty are higher on Prolific compared to other paid survey platforms (e.g., MTurk and Qualtrics), resulting in better quality data (Peer et al., 2021). There was some attrition, as 200 participants completed the survey at the first timepoint, and only 131 participants completed the survey at the second timepoint. A few participants ($n = 4$) were removed from the analysis for Model 1 and additional participants ($n = 2$) were removed from analysis for Model 2 due to failed attention checks and/or missing data in their survey responses. As such, I have provided separate demographic information for each model below. For the purposes of this study, there were no parameters around the type of challenge or problem that participants were supporting their friend with. Unsurprisingly, participants were struggling to support friends across a wide range of situations, including mental health challenges;

unhealthy and on again off again relationships; substance abuse; toxic work environments; job loss; difficult family systems; and breakups.

Model 1 Participants. Out of the 127 total participants, 40.2% identified as male ($n = 51$), 54.3% identified as female ($n = 69$), 0.8% identified as transgender male ($n = 1$), 1.6% identified as transgender female ($n = 2$), and 3.1% identified as nonbinary ($n = 4$). Most participants identified as White/Caucasian ($n = 69$, 54.3%), with additional participants identifying as Black or African American ($n = 25$, 19.7%), Asian ($n = 16$, 12.6%), Native Hawaiian or Other Pacific Islander ($n = 1$, 0.8%), and Native American or Alaska Native ($n = 1$; 0.8%). Additional participants identified as multiracial ($n = 15$, 11.8%). In total, 15.7% of participants identified as Hispanic/Latino/a/x ($n = 20$). All participants were emerging adults, ranging in age from 18 to 29 years old ($M = 24.78$, $SD = 3.14$). Most participants identified as heterosexual/straight ($n = 81$, 63.8%). Additional participants identified as asexual ($n = 5$, 3.9%), bisexual ($n = 21$, 16.5%), gay ($n = 7$, 5.5%), lesbian ($n = 4$, 3.1%), pansexual ($n = 5$, 3.9%) and queer ($n = 3$, 2.4%), with one participant choosing not to disclose their sexual orientation. They also reported their relationship status, with most participants ($n = 57$, 44.9%) being single at the time of the survey. Other participants were dating, but not cohabitating ($n = 27$, 21.3%), dating and cohabitating ($n = 25$, 19.7%), engaged ($n = 2$, 1.5%), and married ($n = 16$, 12.6%).

Participants were also asked to provide demographic information about their friend to the best of their ability. Of the participants' friends, 45.7% were identified as male ($n = 58$), 46.5% were identified as female ($n = 59$), 3.1% were identified as transgender male ($n = 4$), and 3.9% were identified as nonbinary ($n = 5$). One participant did not report the gender of their friend. Their friends were primarily White/Caucasian ($n = 70$, 55.1%), with an additional 15.7% identified as Asian ($n = 20$), 17.3% identified as Black or African American ($n = 22$), 1.6%

identified as Native American or Alaska Native ($n = 2$), and 3.2% identified as multiracial ($n = 4$). The remaining eight participants did not disclose the race of their friend. In total, 17.3% of participants' friends identified as Hispanic/Latino/a/x ($n = 22$). Their friends ranged in age from 18 to 52 years old ($M = 25.85$, $SD = 5.46$). Additionally, 66.9% participants shared that their friend identified as heterosexual/straight ($n = 85$), with other friends identifying as asexual ($n = 5$, 3.9%), bisexual ($n = 19$, 15.0%), gay ($n = 7$, 5.5%), lesbian ($n = 2$, 1.6%), pansexual ($n = 4$, 3.1%), and queer ($n = 5$, 3.9%). They also reported their friends' relationship status, with most participants' friends being single at the time of the survey ($n = 62$, 48.8%). Other friends were dating but not cohabitating ($n = 31$, 24.4%), dating and cohabitating ($n = 16$, 12.6%), engaged ($n = 2$, 1.6%), married ($n = 10$, 7.9%), and widowed ($n = 3$, 2.4%). One participant was identified as both divorced and single ($n = 1$, 0.8%), and two participants did not provide their friends' relationship status.

Participants were asked to categorize their relationship with their friend at the time of survey completion. Many participants ($n = 61$, 48.0%) categorized their relationship as best friends, with additional participants categorizing their relationships as close friends ($n = 47$, 37%), friends ($n = 8$, 6.3%), casual friends ($n = 3$, 2.4%), and colleague/work friends ($n = 2$, 1.6%). A few participants ($n = 5$, 3.9%) chose to categorize their friendship in multiple ways, including as a close friend and a colleague/work friend as well as best friend and sibling. One participant chose not to categorize their relationship with their friend ($n = 1$, 0.8%). Friendship length ranged from 0.5 years to 25 years ($M = 7.3$, $SD = 5.8$).

Model 2 Participants. Out of the 125 total participants, 40.0% identified as male ($n = 50$), 54.4% identified as female ($n = 68$), 0.8% identified as transgender male ($n = 1$), 1.6% identified as transgender female ($n = 2$) and 3.2% identified as nonbinary ($n = 4$). Most

participants identified as White/Caucasian ($n = 67, 53.6\%$), with additional participants identifying as Black or African American ($n = 25, 20.0\%$), Asian ($n = 16, 12.8\%$), Native Hawaiian or Other Pacific Islander ($n = 1, 0.8\%$), and Native American or Alaska Native ($n = 1, 0.8\%$). Additional participants identified as multiracial ($n = 15, 12.0\%$). In total, 15.2% of participants identified as Hispanic/Latino/a/x ($n = 19$). All participants were emerging adults, ranging in age from 18 to 29 years old ($M = 24.75, SD = 3.14$). Most participants identified as heterosexual/straight ($n = 80, 64.0\%$). Additional participants identified as asexual ($n = 5, 4.0\%$), bisexual ($n = 20, 16.0\%$), gay ($n = 7, 5.6\%$), lesbian ($n = 4, 3.2\%$), pansexual ($n = 5, 4.0\%$) and queer ($n = 3, 2.4\%$), with one participant choosing not to disclose their sexual orientation. They also reported their relationship status, with most participants ($n = 56, 44.8\%$) being single at the time of the survey. Other participants were dating, but not cohabitating ($n = 27, 21.6\%$), dating and cohabitating ($n = 25, 19.7\%$), engaged ($n = 1, 0.8\%$), and married ($n = 16, 12.8\%$).

Participants were also asked to provide demographic information about their friend to the best of their ability. Of the participants' friends, 46.4% were identified as male ($n = 58$), 45.6% were identified as female ($n = 57$), 3.2% were identified as transgender male ($n = 4$), and 4.0% were identified as nonbinary ($n = 5$). One participant did not report the gender of their friend. Their friends were primarily White/Caucasian ($n = 69, 55.2\%$), with an additional 15.2% identified as Asian ($n = 19$), 17.6% identified as Black or African American ($n = 22$), 1.6% identified as Native American or Alaska Native ($n = 2$), and 3.2% identified as multiracial ($n = 4$). The remaining eight participants did not disclose the race of their friends. In total, 17.6% of participants' friends were identified as Hispanic/Latino/a/x ($n = 22$). Their friends ranged in age from 18 to 52 years old ($M = 25.87, SD = 5.42$). Additionally, 67.2% participants shared that their friend identified as heterosexual/straight ($n = 84$), with additional friends identifying as

asexual ($n = 5$, 4.0%), bisexual ($n = 18$, 14.4%), gay ($n = 7$, 5.6%), lesbian ($n = 2$, 1.6%), pansexual ($n = 4$, 3.2%), and queer ($n = 5$, 4.0%). They also reported their friends' relationship status, with the majority being single at the time of the survey ($n = 61$, 48.8%). Other friends were dating but not cohabitating ($n = 30$, 24.0%), dating and cohabitating ($n = 16$, 12.8%), engaged ($n = 2$, 1.6%), married ($n = 10$, 8.0%), and widowed ($n = 3$, 2.4%). One participant was identified as both divorced and single ($n = 1$, 0.8%), and two participants did not provide their friends' relationship status.

Participants were asked to categorize their relationship with their friend at the time of survey completion. Many participants ($n = 59$, 47.2%) categorized their relationship as best friends, with additional participants categorizing their relationships as close friends ($n = 47$, 37.6%), friends ($n = 8$, 6.4%), casual friends ($n = 3$, 2.4%), and colleague/work friends ($n = 2$, 1.6%). A few participants ($n = 5$, 4.0%) chose to categorize their friendship in multiple ways, including as a close friend and a colleague/work friend as well as best friend and sibling. One participant chose not to categorize their relationship with their friend ($n = 1$, 0.8%). Friendship length ranged from 0.5 years to 25 years ($M = 7.3$, $SD = 5.8$).

Procedures

All recruitment and data collection procedures were approved by the Institutional Review Board at Colorado State University (IRB #7430). To determine their eligibility to participate in the larger study, potential participants completed a brief screening survey through Prolific. The screening survey (see Appendix A) included four questions to assess whether the participant met appropriate study inclusion criteria. In total, 750 screening surveys were completed, with 424 participants qualifying to participate in the larger study. All participants who completed the screening survey, including those who did not meet eligibility requirements, were compensated

\$0.20 through Prolific. Eligible participants were added to a restricted participant group that was given access to Survey 1, which remained open for approximately one week in order to obtain 200 responses. Before completing the survey at the first timepoint, eligible participants were given brief background information about the broader study. Additionally, participants indicated their consent at the beginning of the survey.

Survey 1 (see Appendix B) included scales to gather insight about: (1) participant demographic information; (2) demographic information of the participant's friend; (3) relational history and norms (e.g., type of friendship, closeness, relationship satisfaction, relational expectations, etc.); and (4) the supportive context and provider challenges (e.g., supportive norms, types of support provided, challenging or unsatisfying aspects of their support provision, etc.). Broadly, Survey 1 gathered general information and context about the participant, their relationship with their friend, and the challenges they experienced while trying to support their friend through their challenge or problem.

All participants who completed Survey 1 were added to a separate participant group that was invited to complete a follow-up survey approximately two weeks after the first survey. I selected to use a two-week interval for numerous reasons. First, due to the nuances underscoring supportive challenges, it is possible that the individual and relational dynamics might shift over small amounts of time. Additionally, a two-week period minimized the risk of participants no longer being friends with the person they were struggling to support, which may be more likely with long-term support burnout and difficulty (Afifi et al., 2016). Finally, shorter time intervals have been shown to minimize the risk of significant attrition in longitudinal studies (Benjamin-Bauman et al., 1984; Folkins et al., 1980), though this was still a limitation I experienced.

Survey 2 (see Appendix C) included scales measures related to the following: (1) updates on their relational norms (e.g., any shifts in their relationship maintenance behaviors, relational investment, etc. that had occurred within the past two weeks); (2) updates on the supportive context (e.g., any shifts in their friend's challenge, support expectations, support provision, etc. that had occurred within the past two weeks); (3) individual outcomes (e.g., burnout, negative affect, stress, etc.); and (4) relational outcomes (e.g., closeness, relationship satisfaction, uncertainty, etc.). In other words, Survey 2 gathered information about how the participants' support dynamics with their friend shifted across the two-week period between study surveys, as well as how ongoing supportive challenges impacted their individual and relational outcomes.

Measures

During data cleaning, participant responses were matched based on their unique Prolific ID code. I used AI assistance (via Microsoft365 Copilot) to help match the datasets based on participants' ID numbers. Once the data was paired, I reviewed the output to confirm data was matched appropriately. In the initial survey, participants were asked to provide their own demographic information as well as answer questions related to their friend's demographic information to the best of their ability. Demographic measures included: age, gender, ethnicity, race, sexual orientation, and romantic relationship status. They were also asked to respond to a series of scale measures related to their relational history and norms, the supportive context, and their experiences of provider challenges. In the second survey, participants completed scale measures related to how the supportive context and their support provision shifted (if at all) over the past two weeks as well as general measures related to their individual and relational health. All study measures are described in more detail below.

Measurements at Time 1

The descriptive statistics for all quantitative measurements at the first timepoint can be found in Table 1.

Table 1
Descriptive Statistics for Measurements at Time 1

Scale Variable	Range	M	SD	Reliability
Perceived Problem Severity	1-5	3.90	0.88	0.73
Length of Support	132 months	10.91	20.47	N/A
Frequency of Support	1-6	3.27	1.39	N/A
Investment	1-4	3.41	0.64	0.76
Communal Orientation	1-7	4.43	2.03	N/A
Communal Coping	1-7	5.35	1.54	N/A
Friendship Maintenance	1-5	3.39	0.49	0.79
Ambivalence	1-5	2.68	1.03	0.86
Relational Turbulence	1-6	2.46	1.25	0.95
Partner Interference	1-6	2.39	1.23	0.91
Relational Closeness	1-7	4.68	1.53	N/A
Relational Commitment	1-5	4.37	0.77	0.87
Relational Satisfaction	1-5	3.82	0.92	0.90
Friendship Entropy	1-7	2.09	1.45	0.94

Categorical Variables	% Yes	% No	Missing
Fear of Repercussions	71.7% (<i>n</i> = 91)	28.4% (<i>n</i> = 36)	N/A
Reluctance	77.9% (<i>n</i> = 99)	22.1% (<i>n</i> = 28)	N/A
Deception	62.2% (<i>n</i> = 79)	37.8% (<i>n</i> = 48)	N/A
Support Boundary Creation	43.3% (<i>n</i> = 55)	56.7% (<i>n</i> = 72)	N/A

Perceived Problem Severity. Participants were prompted to reflect on the challenge(s) their friend experienced while completing the Perceived Problem Severity Scale (Bodie et al., 2011). Broadly, this provided insight on participants' perception of the severity of their friend's

challenge. Participants responded to three items, including “I consider my friend’s problem to be very serious,” using a “strongly disagree” (1) to “strongly agree” (5) scale. All three items were combined to create an overall measure of perceived problem severity, and the scale showed acceptable reliability (Cronbach’s $\alpha = 0.73$; $M = 3.90$; $SD = 0.88$). Higher numbers indicate greater perceptions of problem severity.

Length of Support. Participants reported how long they had been supporting their friend with their problem(s). Participants were prompted to report the length in months, and if they had been supporting their friend with the identified challenge for less than one month, they were prompted to use fractions. Participants reported supporting their friends across a wide range of time, with an average of just under one year ($M = 10.91$ months; $SD = 20.47$; Range = 132).

Frequency of Support. Participants completed a single item measure regarding the frequency of their support provision. The item asked them to reflect on how frequently they have provided support to their friend related to their biggest challenge, and participants responded on “approximately once a month” (1) to “multiple times a day” (6) scale ($M = 3.27$; $SD = 1.39$).

Fear of Repercussions. To assess whether participants had concerns about potential repercussions should they stop providing support to their friend sought it (e.g., being viewed as an ineffective support provider, experiencing tension in their friendship, etc.), one single-item measure was included in Survey 1. The measure asked, “Do you have any concerns or worries about what might happen if you did not provide support to your friend related to this challenge?” Responses were measured with a “yes” (1) and “no” (2) scale. In total, 71.7% of participants reported being afraid of repercussions, with only 28.4% of participants reporting no fear.

Reluctance. A single-item measure assessed whether participants had provided reluctant support. The measure asked, “Have you ever provided support to your friend for this problem,

even when you did not want to?,” which was measured with a “yes” (1) and “no” (2) scale. In total, 77.9% of participants reported providing support reluctantly, with the remaining 22.1% reporting no reluctance in their support provision.

Deception. To assess whether participants engaged in deceptive support provision, I included a single-item measure which asked, “Have you ever told your friend what they wanted to hear related to their problem, even if you did not believe in what you were saying?,” which was measured with a “yes” (1) and “no” (2) scale. In total, 62.2% of participants reported providing deceptive support, with the remaining 37.8% of participants reporting no deception in their support provision.

Support Boundary Creation. I included one single-item measure to assess whether participants had created support boundaries (i.e., parameters around the amount and/or type of support they offer) with their friend. The measure asked participants, “Have you ever created any boundaries around the amount or type of support that you have provided your friend related to this challenge?,” which was measured with a “yes” (1) and “no” (2) scale. Only 43.3% of participants reported having created boundaries related to their support provision, with the majority (56.7%) not having created boundaries.

Investment. To assess relational investment, I used the facet subscale from the Investment Model Scales (Rusbult et al., 1998). Participants responded to three items using a “do not agree at all” (1) to “agree completely” (4) scale, including “I have invested a great deal of time in our friendship” and “I have told my friend many private things about myself (I disclose secrets to them).” All three items were combined to create an overall measure of relational investment, and the scale showed acceptable reliability (Cronbach’s $\alpha = 0.76$; $M = 3.41$; $SD = 0.64$).

Communal Orientation. I modified the Communal Coping Scale (see Afifi et al., 2015, which inductively derived the scale items from Afifi et al., 2006) to evaluate the degree of communal perceptions and behaviors that participants had toward their friends. Scale items were slightly adjusted to align with a broad range of challenges in friendships. To keep the survey as short as possible, three of the original 12 items were selected for inclusion in Survey 1. However, I ultimately selected a single item measure to assess participant perceptions (i.e., communal orientation) and a single item to measure behaviors (i.e., communal coping). Communal orientation was assessed with the item “We tend to view problems as ‘our problems’ rather than ‘my’ or ‘their’ problems.” The item was measured on a “strongly disagree” (1) to “strongly agree” (7) scale ($M = 4.43$; $SD = 2.03$). Higher numbers reflect greater communal orientation.

Communal Coping. Participants responded to a single-item measure from the Communal Coping Scale (Afifi et al., 2015) to assess their communal coping behaviors with their friends. The single item was “My friend and I talk through our problems and attempt to come to solutions together,” which was measured on a “strongly disagree” (1) to “strongly agree” (7) scale. Higher numbers indicate greater levels of communal coping ($M = 5.35$; $SD = 1.54$).

Friendship Maintenance. Participants’ friendship maintenance behaviors were evaluated with Oswald and colleagues’ (2004) Friendship Maintenance Scale. The scale measures how often participants experienced positivity, supportiveness, openness, and interaction in their friendship. Items were measured on a 5-point Likert scale from “never” (1) to “very often” (5). Sample items included how often the participant and their friend “make sacrifices for each other,” “listen without making any judgment,” “show signs of affection toward each other,” and “make an effort to spend time together even when you are busy.” Three

items from the positivity subscale were reverse coded so that higher scores represented greater positivity. Responses to all 15 items were combined to create an overall measure of friendship maintenance (Cronbach's $\alpha = 0.79$; $M = 3.39$; $SD = 0.49$). Higher numbers reflect more friendship maintenance behaviors.

Ambivalence. Participants' feelings of ambivalence toward their friend were assessed with Priester and Petty's (1996) Subjective Ambivalence Scale. It included three items: "To what extent do you have mixed feelings toward your friend?," "To what extent do you feel both positive and negative feelings toward your friend?," and "To what extent do you feel conflicted emotions/thoughts toward your friend?" These items were measured on a 5-point Likert scale from "not at all" (1) to "a very great extent" (5). Responses to all three items were combined to create an overall measure of ambivalence, and the scale showed acceptable reliability (Cronbach's $\alpha = 0.86$; $M = 2.68$; $SD = 1.03$).

Relational Turbulence. To assess participants' perceptions of relational turbulence in their friendships, I used Knobloch's (2007) Appraisals of Relational Turbulence Scale. Participants were told to reflect on their feelings about their friendship at the time of survey completion and indicate their level of agreement regarding how eight different descriptors described their relationship, including sample items like "in turmoil" and "overwhelming." Their agreement was measured from "strongly disagree" (1) to "strongly agree" (6), with higher numbers indicating more turbulence. All eight items were combined for an overall measure of relational turbulence, and the scale attained appropriate internal consistency (Cronbach's $\alpha = 0.95$; $M = 2.46$; $SD = 1.25$), with higher values representing greater relational turbulence.

Partner Interference. Partner interference, or the degree to which a participant perceives their friend as disrupting their actions and outcomes across various aspects of their life, was also

assessed. I slightly modified the Partner Interference Scale (see Solomon & Knobloch, 2001) to assess participants' perceptions of partner interference in their friendship. Participants responded to five items, including "my friend interferes with the plans I make" and "my friend interferes with the things I need to do each day." They responded to these items on a scale from "strongly disagree" (1) to "strongly agree" (6). All five items were combined for an overall measure of partner interference, and the scale reflected strong reliability (Cronbach's $\alpha = 0.91$; $M = 2.39$; $SD = 1.23$). Higher numbers indicated greater perceptions of interference.

Relational Closeness. Participants completed the Inclusion of the Other in the Self Scale (Aron et al., 1992) to determine how close they felt to their friend. They were prompted to give specific consideration for how they felt about their friendship while experiencing challenges supporting their friend. Participants were provided an image that showed seven unique pairs of circles, with one circle representing "the self" and the other circle representing "the other" (Aron et al., 1992). The circles ranged from entirely separate circles (1, indicating little or no closeness) to almost entirely overlapped (7, indicating maximum closeness; Aron et al., 1992), with higher numbers reflecting closeness and connection. The majority of responses reflected average to high closeness, with 77.9% of participants selecting a 4 or higher ($M = 4.68$; $SD = 1.52$).

Relational Commitment. I used the commitment subscale from the Investment Model Scales (see Rusbult et al., 1998) to assess how committed participants were to their friendship. Participants responded to three items using a "strongly disagree" (1) to "strongly agree" (5) scale; however, the scale did not meet acceptable reliability with all three items (Cronbach's $\alpha = 0.68$). The third item was identified as negatively impacting reliability, which was then removed. The final items included "I want our friendship to last for a very long time" and "I am committed to maintaining my relationship with my friend." After removing the third item, the scale

achieved acceptable reliability (Spearman-Brown coefficient = 0.87; $M = 4.37$; $SD = 0.77$), with higher numbers reflecting more commitment.

Relational Satisfaction. Participants responded to an adapted version of Hendrick's (1988) Relationship Assessment Scale, which was modified to assess how satisfied they were in their friendship (rather than a romantic relationship). This scale included six items, including "this friend meets my needs" and "compared to others' friendships, my relationship with my friend is good." Two items were reverse coded so that higher scores represented higher relational satisfaction. These items were measured on a "strongly disagree" (1) to "strongly agree" (5) scale, and they were combined for an overall measure of relational satisfaction. The scale showed acceptable internal consistency (Cronbach's $\alpha = 0.90$; $M = 3.82$; $SD = 0.92$), with higher numbers indicating greater satisfaction in the friendship.

Friendship Entropy. I used Fellers & Ledbetter's (2023) Relational Entropy Scale to evaluate participants' perceptions of entropy (i.e., decay or deterioration) in their friendship. The original scale was developed with consideration of qualitative work on relational entropy in friendships (Fellers & Ledbetter, 2022) and includes seven items. I made a slight modification by removing the final item, "I am relieved that this friendship has ended," from my study. I did not include the final item, as I tried to recruit participants who would remain friends over the two-week timeframe. Sample items include, "I do not want this friendship to continue" and "I think I would be better off without my friend," measured on a "strongly disagree" (1) to "strongly agree" (7) scale. Responses to all six items were combined for an overall measure of relational entropy, and the scale displayed appropriate consistency (Cronbach's $\alpha = 0.94$; $M = 2.09$; $SD = 1.45$). Smaller numbers indicate less relational entropy.

Measurements at Time 2

The descriptive statistics for all quantitative measurements at the second timepoint can be found in Table 2.

Table 2
Descriptive Statistics for Measurements at Time 2

Variable	Range	M	SD	Reliability
Positive Affect	1-5	3.13	0.93	0.85
Burnout	1-7	2.71	1.47	0.95
Negative Affect	1-5	2.06	0.85	0.83
Perceived Stress	1-5	2.84	0.84	0.81
Mental Health	1-6	4.03	1.08	0.85
Ambivalence	1-5	2.54	1.10	0.90
Relational Turbulence	1-6	2.28	1.23	0.95
Partner Interference	1-6	2.32	1.30	0.93
Relational Closeness	1-7	4.65	1.49	N/A
Relational Commitment	1-5	4.28	0.86	0.91
Relational Satisfaction	1-5	3.81	1.03	0.90
Friendship Entropy	1-7	2.11	1.46	0.94

Positive Affect. To assess participants' emotional states, the Positive and Negative Affect Schedule scale (Watson et al., 1988) was used. The original questionnaire included two, 10-item scales to measure positive and negative affect. For the purposes of this study, I shortened the scale to include five items for both positive and negative affect (10 items total). Participants were prompted to reflect on their experience supporting their friend and indicate to what extent they have felt the listed emotions over the past two weeks. The positive affect subscale included items like "determined" and "attentive." Participants responded to the items on a "very slightly or not at all" (1) to "extremely" (5) scale. Responses for all five items were combined to create an overall measure of positive affect, and the scale displayed appropriate internal consistency (Cronbach's $\alpha = 0.85$; $M = 3.13$; $SD = 0.93$). Higher numbers indicate more positive affect.

Burnout. I used a slightly modified version of the emotional exhaustion subscale from the Maslach Burnout Inventory (Maslach et al., 1996) to assess burnout related to participants' challenging supportive relationship. Scale items were adjusted to reflect their supportive challenges. Sample items included "I feel emotionally drained from supporting my friend" and "supporting my friend consistently is really a strain for me." Participants responded to the six items using a "never" (1) to "every day" (7) scale. Responses for all six items were combined for an overall measure of support burnout. The scale displayed strong internal consistency (Cronbach's $\alpha = 0.95$; $M = 2.71$; $SD = 1.47$), with lower numbers indicating less burnout.

Negative Affect. The negative affect subscale was used to assess participants' negative emotions. Participants were encouraged to reflect on the past two weeks of providing support to their friend and indicate the extent to which they experienced the listed emotions. The shortened subscale included five items, including "guilty" and "irritable," and participants responded on a "very slightly or not at all" (1) to "extremely" (5) scale. The five items were combined to create an overall measure of negative affect, and the scale had acceptable reliability (Cronbach's $\alpha = 0.83$; $M = 2.06$; $SD = 0.85$). Lower numbers indicate less negative affect.

Perceived Stress. Participants' stress levels were assessed with a shortened version of the Perceived Stress Scale (see Cohen et al., 1983). The original 14-item scale asks participants to identify how frequently they felt or thought a certain way over the course of a month on a "never" (1) to "very often" (5) scale. I slightly adjusted the items to focus on the last two weeks (rather than a whole month) to align with the time interval between Survey 1 and Survey 2; however, participants still reflected on their thoughts and feelings across all aspects of their lives (not just their relationship with their friend). The shortened scale included four items, with sample items including, "In the last two weeks, how often have you felt that you were unable to

control the things in your life?” and “In the last two weeks, how often have you felt difficulties were piling so high that you could not overcome them?” Two items asked about things going participants’ way and were reverse coded, and all items were combined to create an overall measure of stress. The scale had acceptable reliability (Cronbach’s $\alpha = 0.81$; $M = 2.84$; $SD = 0.84$), with lower numbers reflecting less perceived stress.

Mental Health. To measure participants’ general mental health, anxiety, and depression symptoms, the Mental Health Inventory (MHI-5; Ware Jr & Sherbourne, 1992) was included. The MHI-5 is a five-item scale as part of the larger SF-36 Health Survey that specifically focuses on psychological health and distress. Participants were asked to reflect on their emotions over the past two weeks, including sample items about the frequency the participants have “been a very nervous person” and “felt so down in the dumps that nothing could cheer [them] up.” Two items asked about positive feelings and were reverse coded, and all items were combined to create an overall measure of mental health. Participants responded to all items on a “all of the time” (1) to “none of the time” (6) scale. The scale achieved appropriate reliability (Cronbach’s $\alpha = 0.85$; $M = 4.03$; $SD = 1.08$), with higher numbers indicating more psychological distress.

Ambivalence. Participants’ feelings of ambivalence toward their friend were assessed again during Survey 2. The same items from the initial survey were included, and responses to all three items were once again combined to create an overall measure of ambivalence (Cronbach’s $\alpha = 0.90$; $M = 2.54$; $SD = 1.10$).

Relational Turbulence. I measured participants’ appraisals of relational turbulence again at timepoint two, using the same items from the initial survey. Responses to all eight descriptors were combined for an overall measure of relational turbulence (Cronbach’s $\alpha = 0.95$; $M = 2.28$; $SD = 1.23$), with lower numbers indicating less turbulence.

Partner Interference. Participants completed the same measure of partner interference in the second survey. All five items were combined to create an overall measure of partner interference (Cronbach's $\alpha = 0.93$; $M = 2.32$; $SD = 1.30$).

Relational Closeness. I gathered updated responses regarding relational closeness in the second survey, with participants completing the IOSS while considering their relationship over the past two weeks (Aron et al., 1992). The majority of responses reflected average to high closeness, with 78.6% of participants selecting a 4 or higher ($M = 4.65$; $SD = 1.49$).

Relational Commitment. Participants again completed the commitment subscale from the Investment Model Scales (see Rusbult et al., 1998) to assess how committed they were to their friendship after two additional weeks of challenges. Since the third item had to be removed from the time one measurements due to a reliability issue, I removed the third item from the second timepoint measurements. The remaining two items were combined for an overall measure of relational commitment, and the scale achieved acceptable reliability (Spearman-Brown coefficient = 0.91; $M = 4.28$; $SD = 0.86$).

Relational Satisfaction. In the second survey, participants were prompted to reflect on their feelings over the past two weeks when completing the same adapted version of Hendrick's (1988) Relationship Assessment Scale. All items were combined to create an overall measure of relational satisfaction (Cronbach's $\alpha = 0.90$; $M = 3.81$; $SD = 1.03$).

Friendship Entropy. Participants again completed the Relational Entropy Scale (Fellers & Ledbetter, 2023). Responses to all six items were combined for an overall measure of relational entropy (Cronbach's $\alpha = 0.94$; $M = 2.11$; $SD = 1.46$). Lower numbers reflect less relational entropy.

Researcher Positionality

Quantitative research strives to minimize researchers' "bias" and subjectivity as much as possible (Young & Ryan, 2020); however, it remains vital that I reflect on my positionality (Olmos-Vega et al., 2022; Tracy, 2010). Throughout all phases of this project—from research development to outputs—I engaged in self-reflexivity (see Olmos-Vega et al., 2022; Tracy, 2010). By doing so, I was aware of and transparent about how my identity and scholarly commitments influenced this research (Tracy, 2010). Like many researchers, I "[...] not only assume that subjectivity cannot be erased from the research process, [I] believe that such efforts are detrimental to the research" (Olmos-Vega et al., 2022, p. 243). As such, I practiced multifaceted reflexivity by considering how personal, interpersonal, methodological, and contextual factors impacted my dissertation (Olmos-Vega et al., 2022).

Personal reflexivity involves reflecting on how one's identities, research training, and personal experiences might impact various choices in a research project (Finally, 2002; Olmos-Vega et al., 2022). I have faced negative personal and relational outcomes in supportive contexts—both as the support provider and support recipient—which ultimately drives my research. As a support provider, I have numerous experiences with support boundary creation and deceptive support provision, as well as countless positive supportive experiences and instances of nonsupport. In other words, my experiences as a support provider have fallen on all aspects of the supportive communication continuum. These experiences likely influenced decisions I made throughout my dissertation project, including research design, implementation, and outputs. It is equally important to recognize how other aspects of my identity might influence this research project. I am a white, cisgender woman from the United States with an advanced degree in communication. Aspects of my identity may have influenced how I approached this project.

Interpersonal reflexivity includes reflecting on the relationships within the research experience, and it is especially important to reflect on researcher-participant relationships (Olmos-Vega et al., 2022). To thoughtfully engage in interpersonal reflexivity, researchers should practice “recognizing and appreciating participants’ unique knowledge and perspectives and attending to their impacts on the research process” while simultaneously analyzing the role power plays (Olmos-Vega et al., 2022, p. 244). Given I did not personally know any of my research participants, I did not have to attend to pre-existing relationships or how relational history might influence research outcomes. However, I still considered the power I have as a researcher and strove to make participants feel comfortable enacting agency throughout the research process (e.g., developing protocols that allowed participants to feel comfortable skipping questions they were uncomfortable answering). Interpersonal reflexivity should also include reflecting on the research collaboration itself (e.g., the relationships between researchers, any differences in researchers’ foundations and approaches, etc.; Olmos-Vega et al., 2022). As such, I reflected on the approaches and commitments I have in comparison to my committee members, who I collaborated with at varying levels throughout my dissertation project.

Methodological reflexivity includes researchers critically reflecting on the complexities and effects of their methodological choices (Olmos-Vega et al., 2022). In recent years, the connection between methodological decisions and overarching philosophical assumptions is not as rigid as it once was, and researchers might draw upon more than one worldview for a research project (Creswell & Clark, 2018). Indeed, “researchers have the flexibility to use the worldview that best fits the context of their particular study,” (Creswell & Clark, 2018, p. 41), and it remains vital that researchers acknowledge the worldviews that are influencing their projects (Olmos-Vega et al., 2022). Generally, my research seeks to understand challenging

communication phenomena, and I often embrace an interpretivist or constructivist worldview (Creswell & Clark, 2018; Miller, 2005b). I believe that multiple realities exist and use an interpretivist lens as I engage in theory generation (Creswell & Clark, 2018; Miller, 2005b). However, in certain contexts, I embrace a post-positivist worldview to understand how certain communicative and relational factors are associated with various outcomes and to explore how specific communication phenomena might apply or extend to a wide-ranging scope (Miller, 2005a). Moreover, I embrace a post-positivist worldview for theory verification purposes (Creswell & Clark, 2018). In my dissertation, I embraced a post-positivist worldview as I developed, implemented, and analyzed quantitative measures.

Finally, contextual reflexivity involves situating the research project within historical and cultural contexts, which ultimately highlights how different contextual factors influence research design and outcomes (Olmos-Vega et al., 2022; Walsh, 2003). My participants were living in the United States at the time of data collection, a Western culture that prioritizes individualism and explicit communication. Additionally, we are in a time where people are more actively discussing interpersonal challenges (e.g., more interpersonal scholars are invested in understanding the dark sides; see Spitzberg & Cupach, 2009) and the importance of boundaries (e.g., Johnson, 2025; Lobel, 2023). Moreover, ethical research practices strive to positively contribute to the contexts in which they occur (Bishop et al., 2002). My goal as a researcher is to understand challenges that arise in supportive communication—particularly for providers—so that we can eventually understand how to mitigate and manage the potential negative outcomes of difficult supportive relationships and situations. As such, I engaged in contextual reflexivity by seeking and offering practical contributions that derive from my participants' experiences.

CHAPTER 4 – RESULTS

Results

Preliminary Analyses

To test my predicted models on the individual and relational outcomes of challenging support provision, structural equation modeling (AMOS 7.0) was utilized (for a review of my hypotheses, please see Figures 1 and 2). Structural equation modeling (SEM) combines elements of confirmatory factor analysis and regression to test associations in complex, theory-driven relationships (Ullman & Bentler, 2012). SEM also allows researchers to account for measurement error and the fit of the entire model (Ullman & Bentler, 2012). Another key benefit to SEM is the ability to include latent variables (i.e., unobserved variables that are measured indirectly by multiple indicators), which is particularly helpful in social and behavioral sciences that often have abstract concepts (Hoyle, 2012). Moreover, SEM is often referred to as causal analysis, as it allows researchers to determine causal relationships between independent, dependent, and latent variables (Ullman & Bentler, 2012).

Variable Creation

To start, I created combined, changed, and latent variables for my hypothesized models.

Combined and Change Variables

In order to encompass the complexity of providers' experiences of difficult support provision, I opted to create several combined and change variables for my hypothesized model on relational outcomes. Given that providers' perceptions of their friendship might change across small periods of time, I created combined variable across both timepoints for feelings of ambivalence ($M = 2.54$; $SD = 1.10$), perceptions of relational turbulence ($M = 2.37$; $SD = 1.11$),

and perceptions of partner interference ($M = 2.36$; $SD = 1.11$). To create combined variables, I found the average of time one and time two data for each measure.

In addition, I was interested in how providers' relational outcomes may have shifted across the two timepoints. As such, I created change variables for relational closeness, relational commitment, relational satisfaction, and friendship entropy. In order to do this, I computed a change score in SPSS by subtracting Time 1 from Time 2, with positive differences indicating an increase and negative values reflecting a decrease. Relational closeness ($M = -0.03$; $SD = 1.73$), relational commitment ($M = -0.08$; $SD = 0.79$), and relational satisfaction ($M = -0.01$; $SD = 0.90$) all saw minor decreases. Friendship entropy saw a small increase across time ($M = 0.03$; $SD = 1.19$). Once all combined and change variables were created, I created latent variables to assess how multiple factors might contribute to broader relational perceptions, behaviors, and outcomes.

Latent Variables

For use in both Model 1 and Model 2, I computed a latent variable for providers' mental distress. A lot of factors can contribute to one's emotional and psychological state, and I wanted to capture different components that providers may have been experiencing related to their challenges helping a friend. Originally, I created a distress latent variable that included perceived stress, negative affect, and mental health measures; however, negative affect was removed because it did not effectively fit within the latent variable. The final latent variable for distress encompassed perceived stress and mental health symptoms at the second timepoint, and this latent variable is included in both models.

My second hypothesized model included three additional latent variables. To assess providers' negative or mixed feelings and perceptions about their friendships, I created a threat

appraisals latent variable, which included the feelings of ambivalence, relational turbulence, and partner interference combined variables. In addition, I created a security behaviors latent variable, which included friendship maintenance and communal coping behaviors at the first timepoint. To evaluate relational adaptation, I created a latent variable with the relational closeness, relational commitment, and relational satisfaction changed variables.

Measurement Models

I completed a measurement model to ensure that the measures effectively represented the concepts of interest in my established latent variables. I analyzed the measurement model in AMOS. After the initial analysis, negative affect was identified as inconsistent with the broader distress latent variable. As such, I removed negative affect and re-ran the model measurement analysis. With the second measurement model analysis, there was sufficient evidence to reflect the concepts of interest with my revised latent variables ($\chi^2 = 28.59$, $df = 29$, $p = 0.487$; CFI = 1.00; TLI = 1.00; RMSEA = 0.00). After variable creation and assessment of fit, I conducted a power analysis to ensure I achieved adequate sample size for both models.

Power Analyses

I conducted a power analysis using an a-priori sample size calculator for structural equation models (Soper, 2021), which computed the required sample size based on the number of observed and latent variables in each model. Effect sizes reflect the magnitude of the results—not just that variables are related, but how strong the relationship is (Cohen, 1990; Sullivan & Feinn, 2012). In other words, while the p-value reflects the existence of a relationship, it does not reveal the size of the effect, which makes reporting both p-values and effect sizes important in analyzing the meaning of quantitative results (Sullivan & Feinn, 2012). For my first model, a minimum sample of 87 was required for a small effect size (Cohen's $d = 0.1$) with statistical

power of 0.8 and a p-level of 0.05. For my second model, a minimum sample of 66 was needed for a medium effect size (Cohen's $d = 0.5$) with statistical power of 0.8 and a p-level of 0.05. After I surpassed the minimum sample size for both models, I evaluated the overall SEM model fit.

Model 1 Correlation

For a full list of correlations between the variables of interest in the individual health outcomes model, please see Table 3.

Model 2 Correlation

For a full list of correlations between the variables of interest in the relational health outcomes model, please see Table 4.

Overall SEM Model Fit

Another benefit of SEM is the ability to assess how well an entire model explains the observed data (Ullman & Bentler, 2012). As such, I had to ensure that my dataset fit my hypothesized models to an acceptable degree. To establish acceptable models, I employed various model fit statistics. In general, a comparative fit index (CFI) and the Tucker-Lewis Index (TLI) reflect good fit at equal to or greater than 0.95 and acceptable fit at 0.90 to 0.95 (Hu & Bentler, 1999). Both standardized root mean square residuals (SRMR) and root mean square error approximations (RMSEA) show good model fit if it is less than or equal to 0.05, and a model has acceptable fit with an SRMR or RMSEA of less than or equal to 0.08 (Hu & Bentler, 1999). Finally, a chi-square to degrees of freedom ratio reflects good fit at less than or equal to 3, and an acceptable fit at less than or equal to 5 (Hu & Bentler, 1999). With these model fit statistics in mind, I relied on the following criteria: a CFI greater than 0.90, a SRMR less than

Table 3*Correlation Matrix for Model 1: Individual Health Outcomes*

	1	2	3	4	5	6	7	8	9	10	11	12
1. Problem Severity	—											
2. Length of Support	.229*	—										
3. Frequency of Support	.276**	.103	—									
4. Fear of Repercussions	-.282**	.053	-.175	—								
5. Reluctance	-.189*	-.068	-.292***	.236**	—							
6. Deception	.051	-.051	.033	.252**	.315***	—						
7. Support Boundary Creation	.036	-.175	-.021	.014	.152	.122	—					
8. Positive Affect	.108	-.017	.151	.163	.042	-.003	-.068	—				
9. Burnout	.003	-.016	.108	-.260**	-.284**	-.097	-.169	-.349***	—			
10. Perceived Stress	.217*	-.023	-.049	-.258**	-.145	-.093	.152	-.410***	.339***	—		
11. Mental Health	-.146	-.047	.078	.168	.149	.024	-.138	.398***	-.326***	-.659***	—	
12. Negative Affect	.033	.055	.122	-.106	-.165	.087	.024	-.146	.611***	.403***	-.485***	—

Note: * = $p < .05$, ** = $p < .01$, *** $p < .001$

Table 4
Correlation Matrix for Model 2: Relational Health Outcomes

	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
1. Investment	—														
2. Communal Orientation	.287**	—													
3. Communal Coping	.227*	.626***	—												
4. Maintenance	.517***	.563***	.482***	—											
5. Ambivalence	-.210*	-.381***	-.451***	-.271**	—										
6. Turbulence	-.240**	-.379***	-.587***	-.293**	.707***	—									
7. Interference	-.054	-.016	-.260**	-.037	.371***	.556***	—								
8. Burnout	-.159	-.162	-.356***	-.159	.567***	.691***	.449***	—							
9. Perceived Stress	-.035	-.115	-.183*	-.072	.231**	.300***	.239**	.339***	—						
10. Mental Health	-.051	.016	.017	.002	-.209*	-.239**	-.175	-.326***	-.659***	—					
11. Negative Affect	-.062	-.065	-.223*	-.049	.418***	.460***	.437***	.611***	.403***	-.485***	—				
12. Entropy	.068	.159	.203*	.099	-.043	-.021	.066	.262**	.112	-.257**	.194*	—			
13. Closeness	-.044	-.099	-.032	-.039	-.077	-.115	-.098	-.307***	-.161	.268**	-.242**	-.351***	—		
14. Commitment	-.114	-.273**	-.181*	-.194*	.038	-.089	-.076	-.312***	-.038	.166	-.203*	-.603***	.291***	—	
15. Satisfaction	.107	-.214*	-.178*	-.154	-.048	-.126	-.175	-.336***	.016	.153	-.217*	-.611***	.395***	.489***	—

Note: * = $p < .05$, ** = $p < .01$, *** $p < .001$

0.08, a root mean square error approximation (RMSEA) less than 0.08, and a chi-square to degrees of freedom ratio (χ^2/df) of less than 3.00 (Hu & Bentler, 1999). After cleaning the data, conducting power analyses, and creating all necessary combined and latent variables, I analyzed my hypothesized models to determine overall model fit.

At first, my individual health outcomes model did not have an acceptable fit. Following the suggested modification indices, I made minor adjustments during analysis (e.g., adding covariances between measurement errors), which resulted in a revised empirical model for individual health outcomes with acceptable model fit. The revised model had an acceptable chi-square to degrees of freedom ratio ($\chi^2 = 36.731$, $df = 23$, $p = .035$). Additionally, the CFI was greater than 0.90 (CFI = 0.931), and RMSEA and SRMR were both less than 0.08 (RMSEA = 0.069; SRMR = 0.068). The TLI was slightly below the threshold of acceptable fit (TLI = 0.834); however, given all other fit statistics met the acceptable threshold, I proceeded with the model.

A similar process was followed for my relational health outcomes model. Hypothesized Model 2 did not originally meet model fit standards; however, after minor adjustments with modification indices and additional suggested covariances, my revised empirical for relational health outcomes reached a strong model fit. The chi-square to degrees of freedom test of model fit met the criteria of less than 3.00 ($\chi^2 = 70.436$, $df = 56$, $p = 0.093$). Additionally, CFI and TLI were greater than 0.95 (CFI = 0.979; TLI = 0.977), reflecting good model fit. The RMSEA and SRMR were both less than 0.08 (RMSEA = 0.046; SRMR = 0.060), with RMSEA meeting the good model fit threshold.

Results for Model 1: Individual Health Outcomes

For an overview of which Model 1 hypotheses were supported and not supported, please see Table 5 below.

Table 5
Summary of Support for Model 1 Hypotheses

Hypothesis	Description of Hypothesized Relationship	Test Statistic	p-value	Support Status
H1a	Problem severity will be negatively associated with reluctance	$\beta = -0.114$	<i>ns</i>	No
H1b	Problem severity will be positively associated with deception	$\beta = 0.152$	<i>ns</i>	No
H2a	Length of support will be positively associated with reluctance	$\beta = 0.031$	<i>ns</i>	No
H2b	Length of support will be positively associated with deception	$\beta = -0.108$	<i>ns</i>	No
H3a	Frequency of support will be positively associated with reluctance	$\beta = -0.203$	$p < .05$	No
H3b	Frequency of support will be positively associated with deception	$\beta = 0.049$	<i>ns</i>	No
H4a	Fear of repercussions will be negatively associated with reluctance	$\beta = 0.145$	<i>ns</i>	No
H4b	Fear of repercussions will be positively associated with deception	$\beta = 0.323$	$p < .001$	Yes
H5a	Reluctance will be positively associated with support boundary creation	$\beta = 0.133$	<i>ns</i>	No
H5b	Reluctance will be negatively associated with positive affect	$\beta = 0.059$	<i>ns</i>	No
H5c	Reluctance will be positively associated with burnout	$\beta = -0.247$	$p < .001$	No
H5d	Reluctance will be positively associated with distress	$\beta = -0.127$	$p < .05$	No
H6a	Deception will be positively associated with support boundary creation	$\beta = 0.085$	<i>ns</i>	No
H6b	Deception will be negatively associated with positive affect	$\beta = -0.005$	<i>ns</i>	No
H6c	Deception will be positively associated with burnout	$\beta = -0.019$	<i>ns</i>	No
H6d	Deception will be positively associated with distress	$\beta = -0.020$	<i>ns</i>	No
H7a	Support boundary creation will be positively associated with positive affect	$\beta = -0.064$	<i>ns</i>	No

H7b	Support boundary creation will be negatively associated with burnout	$\beta = -0.134$	<i>ns</i>	No
H7c	Support boundary creation will be negatively associated with distress	$\beta = 0.136$	$p < .05$	No

My final model yielded several significant direct effects (see Figure 3 for final model results). I hypothesized that providers' perception of problem severity for the challenge they were helping their friend with would be negatively associated with their reluctance to provide support (H1a) and positively associated with deception in their support provision (H1b). Results depict no significant relationship between their perception of problem severity and reluctance ($\beta = -0.114$, *ns*) or deception ($\beta = 0.152$, *ns*). I also hypothesized that the amount of time providers had been offering support to their friend would be positively associated with reluctantly providing support (H2a) and offering support that does not align with their beliefs (H2b). Length of support provision did not yield a significant relationship with providers' reluctance ($\beta = 0.031$, *ns*) or deception ($\beta = -0.108$, *ns*).

I hypothesized that providers' frequency of offering support would be positively associated with both reluctance (H3a) and deception (H3b). Contrary to my prediction, there was a significantly significant negative association between frequency of support and providers' reluctance ($\beta = -0.203$, $p < .05$), thus H3a was not supported. In addition, there was no statistically significant relationship between frequency of support and deception ($\beta = 0.049$, *ns*), so H3b was not supported. Providers may be afraid of potential repercussions should they decide to not provide support when they know their friend needs it. As such, I hypothesized that providers' fear of repercussions would be negatively associated with reluctance (H4a) and positively associated with deception (H4b). There was no statistically significant relationship between providers' fear of repercussions and their unwillingness to provide support ($\beta = 0.145$,

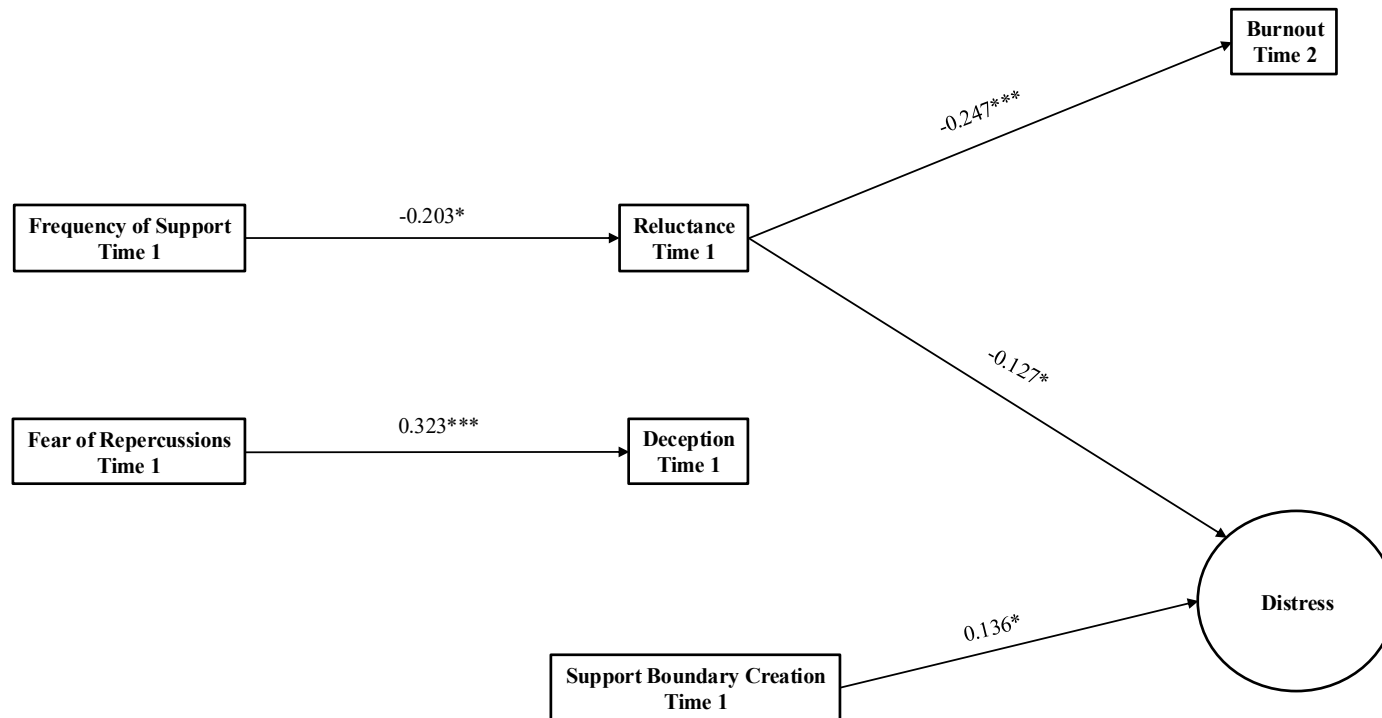


Figure 3

Final Model 1: Individual Health Outcomes

Note: Only statistically significant pathways are included in the final model.

* = $p < .05$, ** = $p < .01$, *** = $p < .001$

ns), meaning H4a was not supported. However, H4b was supported, as there was a statistically significant, positive relationship between fear of repercussions and providers' deceptive support provision ($\beta = 0.323, p < .001$).

I posed numerous hypotheses regarding potential effects from providers' reluctantly providing support, even when they do not want to. First, I hypothesized that providers' reluctance would be positively associated with support boundary creation (H5a). While there is reason to believe that one might be more likely to create boundaries around the amount or type of support they provide if they are feeling unwilling to continue helping their friend, there was no statistically significant relationship found ($\beta = 0.133, ns$) and H5a was not supported. I also hypothesized that providers' reluctance to help their friend would be negatively associated with positive affect (H5b), which did not yield statistically significant results ($\beta = 0.059, ns$). Providers' reluctance to offer help was hypothesized to have a positive association with burnout (H5c) and distress (H5d). Surprisingly, neither H5c or H5d were supported; contrary to my hypotheses, reluctance had statistically significant negative associations with both burnout ($\beta = -0.247, p < .001$) and distress ($\beta = -0.127, p < .05$).

Numerous hypotheses about potential effects from providers' deceptive support provision were posed as well. First, I hypothesized that deception would be positively associated with support boundary creation (H6a), which did not yield statistically significant results ($\beta = 0.085, ns$), and thus, was not supported. I also predicted that deception would be negatively associated with providers' positive affect (H6b), which was unsupported due to statistical insignificance ($\beta = -0.005, ns$). Finally, I hypothesized that deception would be positive associated with both burnout (H6c) and distress (H6d). Neither were supported, as both burnout ($\beta = -0.019, ns$) and distress ($\beta = -0.020, ns$) yielded statistically insignificant relationships.

I also made predictions regarding how providers' support boundary creation might be associated with certain individual health outcomes. I hypothesized that support boundary creation would be positively associated with providers' positive affect (H7a), which was unsupported ($\beta = -0.064$, *ns*). In addition, I predicted that providers' support boundary creation would be negatively associated with burnout (H7b), which yielding statistically insignificant results ($\beta = -0.134$, *ns*). Finally, I predicted that engaging in support boundary creation would be negatively associated with distress (H7c). Contrary to my hypothesis, there was a statistically significant positive relationship between support boundary creation and distress ($\beta = 0.136$, $p < .05$).

Results for Model 2: Relational Health Outcomes

For an overview of which Model 2 hypotheses were supported and not supported, please see Table 6 below.

Table 6
Summary of Support for Model 2 Hypotheses

Hypothesis	Description of Hypothesized Relationship	Test Statistic	p-value	Support Status
H8a	Investment will be negatively associated with threat appraisals	$\beta = -0.077$	<i>ns</i>	No
H8b	Investment will be positively associated with security behaviors	$\beta = 0.024$	<i>ns</i>	No
H9a	Communal orientation will be negatively associated with threat appraisals	$\beta = -0.411$	$p < .001$	Yes
H9b	Communal orientation will be positively associated with security behaviors	$\beta = 0.854$	$p < .001$	Yes
H10a	Threat appraisals will be negatively associated with adaptation	$\beta = 0.605$	$p < .01$	No
H10b	Threat appraisals will be positively associated with burnout	$\beta = 0.656$	$p < .001$	Yes

H10c	Threat appraisals will be positively associated with entropy	$\beta = -0.538$	$p < .001$	No
H10d	Threat appraisals will be positively associated with distress	$\beta = -0.523$	$p < .001$	No
H11a	Security behaviors will be positively associated with burnout	$\beta = 0.073$	<i>ns</i>	No
H11b	Security behaviors will be positively associated with adaptation	$\beta = -0.212$	$p < .01$	No
H11c	Security behaviors will be negatively associated with entropy	$\beta = 0.086$	<i>ns</i>	No
H11d	Security behaviors will be negatively associated with distress	$\beta = -0.306$	$p < .001$	Yes
H12a	Burnout will be negatively associated with adaptation	$\beta = -0.723$	$p < .01$	Yes
H12b	Burnout will be positively associated with entropy	$\beta = 0.565$	$p < .001$	Yes
H13a	Distress will be negatively associated with adaptation	$\beta = -0.260$	<i>ns</i>	No
H13b	Distress will be positively associated with entropy	$\beta = 0.159$	<i>ns</i>	No

My second model yielded several significant direct effects (see Figure 4 for final Model 2 results). As a reminder, the latent variable of threat appraisals includes providers' feelings of ambivalence toward their friendship, perceptions of turbulence in their friendship, and viewing their friend as interfering with different aspects of their life. According to the TRRL, threat behaviors and appraisals can lead to relational depletion or load "because energy is being expended protecting and regulating oneself, exacerbating stress" (Afifi et al., 2016, p. 671). Contrarily, security behaviors and appraisals help people avoid the depletion of resources through investment and maintenance. As such, the latent variable of security behaviors includes friendship maintenance and communal coping—both strategies that can make friends feel valued, cared for, and understood.

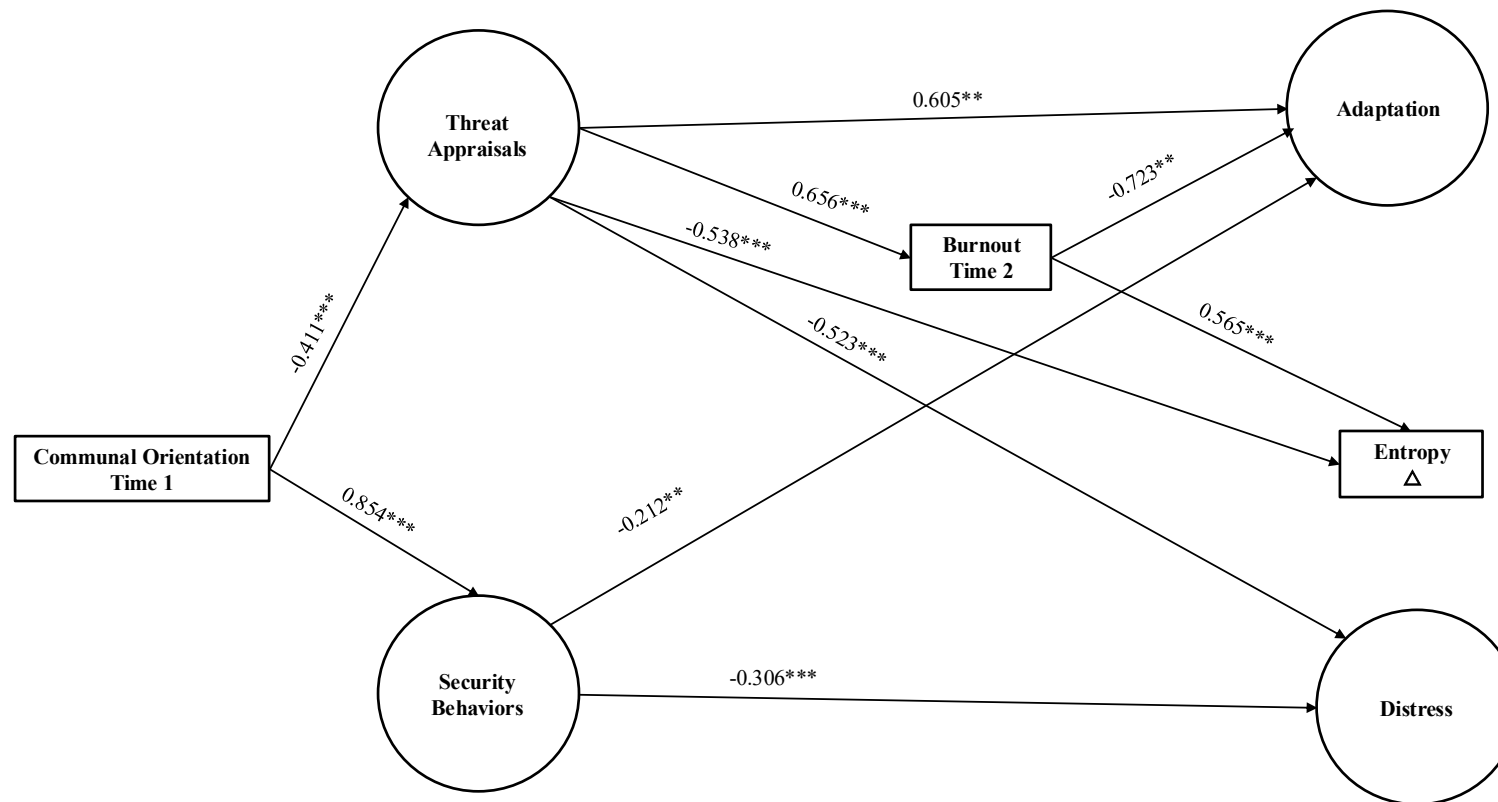


Figure 4

Final Model 2: Relational Health Outcomes

Note: Only statistically significant pathways are included in the final model.

* = $p < .05$, ** = $p < .01$, *** = $p < .001$

I predicted that providers' investment in their friendships would be negatively associated with threat appraisals (H8a) and positively associated with security behaviors (H8b). Investments associations with threat appraisals ($\beta = -0.077$, *ns*) and security behaviors ($\beta = 0.024$, *ns*) yielded statistically insignificant relationships. I also hypothesized that providers' communal orientation toward their friendships would be negatively associated with experiencing threat appraisals (H9a) and positively associated with engaging in security behaviors (H9b). Results indicated a statistically significant negative relationship between communal orientation and threat appraisals ($\beta = -0.411$, $p < .001$), supporting H9a. Results also supported H9b, with a statistically significant positive relationship between communal orientation and security behaviors ($\beta = 0.854$, $p < .001$).

Numerous hypotheses regarding the potential effects of providers' threat appraisals were posed. I predicted that providers' threat appraisals would be negatively associated with relational adaptation (H10a); however, this hypothesis was not supported. Rather, results indicated a statistically significant positive relationship between threat appraisals and relational adaptation ($\beta = 0.605$, $p < .01$). I hypothesized that providers' threat appraisals would be positively associated with burnout (H10b), which was ultimately supported ($\beta = 0.656$, $p < .001$). I also predicted a positive relationship between providers' threat appraisals and relational entropy (H10c), which was not supported. Instead, results depict a strong, statistically significant negative association between threat appraisals and relational entropy ($\beta = -0.538$, $p < .001$). Similarly, the association between threat appraisals and distress yielded unexpected results. I hypothesized that providers' threat appraisals would be positively associated with distress (H10d), which was not supported.

Rather, results reflect a negative relationship between threat appraisals and distress ($\beta = -0.523, p < .001$), with strong statistical significance.

I also posed numerous hypotheses regarding the potential effects of providers' security appraisals. First, I predicted that providers' security behaviors would be positively associated with burnout (H11a), which did not yield statistically significant results ($\beta = 0.073, ns$). As such, H11a was not supported. I hypothesized that providers' security behaviors would be positively associated with relational adaptation (H11b), which was ultimately unsupported. Contrary to my hypothesis, there was a statistically significant negative relationship between providers' security behaviors and relational adaptation ($\beta = -0.212, p < .01$). Hypothesis 11c stated that providers' security behaviors would be negatively associated with entropy. Results depict a statistically insignificant relationship between security behaviors and entropy ($\beta = 0.086, ns$), making H11c unsupported. Finally, I predicted that security behaviors would be negatively associated with distress (H11d), which was supported ($\beta = -0.306, p < .001$).

Hypotheses related to the potential effects of burnout and distress were also explored. In particular, I predicted that providers' burnout would be negatively associated with relational adaptation (H12a) and positively associated with relational entropy (H12b). Results supported both hypotheses, with burnout being negatively associated with adaptation ($\beta = -0.723, p < .01$) and positively associated with entropy ($\beta = 0.565, p < .001$). Finally, I posed hypotheses about the potential effects distress would have on relational health. I predicted that distress would be negatively associated with relational adaptation (H13a) and positively associated with relational entropy (H13b). Providers' distress was not associated with adaptation ($\beta = -0.260, ns$) or entropy ($\beta = 0.159, ns$) due to statistical insignificance.

CHAPTER 5 – DISCUSSION

The potential benefits of supportive communication for both recipients and providers are well-documented; however, less is known about the challenges providers experience in their supportive relationships (Johnson et al., in press). Moreover, minimal research has explored how these challenges and the strategies providers use to manage them are associated with different individual and relational health outcomes. As such, the central purpose of this study was to evaluate how providers' individual, relational, and contextual conditions and behaviors were associated with different health outcomes. This project utilized a quantitative, nonexperimental study with a two-time interval survey design to assess providers' complex experiences offering help to a friend during emerging adulthood. Results yielded several significant relationships, offering insight into what components of challenging support provision influence whether individuals and their relationships ultimately flounder or thrive. These findings offer important considerations regarding current conceptions of supportive communication and support provider experiences.

Model 1 assessed how different support conditions were associated with providers' strategies for navigating their challenges as well as how different navigation strategies were associated with individual health outcomes. The model yielded several significant direct effects, though often in contradictory ways to what I had predicted. Problem severity did not have significant relationships with reluctance (H1a) or deception (H1b). Similarly, the length of time providing support did not yield significant relationships with reluctance (H2a) or deception (H2b). Contrary to my hypotheses, frequency of support negatively predicted reluctance (H3a) and did not have a significant relationship with deception (H3b). Results found no significant

relationship between fear of repercussions and reluctance (H4a), but fear of repercussions positively predicted supportive deception in expected ways (H4b). Providers' reluctantly providing support was not associated with support boundary creation (H5a) or positive affect (H5b). However, reluctance in support provision yielded two statistically significant relationships in the opposite direction as hypothesized. Results illustrate reluctance as negatively predicting burnout (H5c) and distress (H5d). No significant relationships were found between deception and support boundary creation (H6a), positive affect (H6b), burnout (H6c), or distress (H6d). Support boundary creation did not yield relationships with positive affect (H7a) or burnout (H7b). However, contrary to my hypothesis, support boundary creation positively predicted distress (H7c).

Model 2 evaluated how communal orientation and relational investment were associated with threat appraisals and security behaviors as well as how providers' appraisals, behaviors, and supportive burnout contributed to different relational outcomes with their friend. Contrary to my predictions, results indicated that investment is not associated with threat appraisals (H8a) or security behaviors (H8b). Providers' communal orientation was negatively associated with threat appraisals (H9a) and positively associated with security behaviors (H9b), as expected. Results illustrated multiple unexpected associations with threat appraisals. Contrary to expectations, threat appraisals were positively associated with relational adaptation (H10a) and negatively associated with friendship entropy (H10c) and distress (H10d). As I predicted, threat appraisals positively predict burnout (H10b). Security behaviors did not yield significant associations with burnout (H11a) or friendship entropy (H11c). However, results indicate security behaviors are negatively associated with relational adaptation (H11b), a relationship in the opposite direction as predicted. Security behaviors are also negatively associated with distress (H11d), which was

expected. Results indicate that burnout negatively predicts relational adaptation (H12a) and positively predicts friendship entropy (H12b). Finally, distress did not have a significant relationship with relational adaptation (H13a) or friendship entropy (H13b).

Theoretical Implications

The findings from this study offer numerous theoretical implications. In particular, results contribute to our understanding of deceptive/reluctant support as an interpersonal communication experience and support boundary creation in friendships. Moreover, it builds upon existing literature about the outcomes of challenging support provision and applies the Theory of Resilience and Relational Load (TRRL; Afifi et al., 2016) to an often-underexplored relationship type.

Deceptive/Reluctant Support Provision and Support Boundary Creation

In close relationships, providers might find themselves in situations where they feel obligated or coerced to provide support (Ray et al., 2023) or where they feel unhelpful in their support provision (Wortman & Lehman, 1985). Johnson and colleagues (2026) argue that providers might rely on deceptive/reluctant support provision as one communicative pathway for navigating their challenging supportive relationships. Deceptive/reluctant support provision is defined as “verbal and nonverbal supportive communication that is communicated unwillingly (i.e., hesitantly or against their wishes), does not align with support providers’ true feelings (i.e., disingenuous or inauthentic), or both” (Johnson et al., 2026, p. 1). Results from Model 1 offer interesting takeaways regarding providers’ experiences with deceptive/reluctant support provision.

I hypothesized that the more frequently providers offered support, the more reluctant they would be to continue offering help; however, results indicated a statistically significant

relationship in the opposite direction. In other words, participants who provided support more frequently were less likely to provide support reluctantly. The negative association between frequency and reluctance may be a result of relational norms and broader willingness to invest in their friendships. People are more likely to invest at higher frequencies—and provide more support—to those they are close to (Afifi et al., 2016; Allan, 2008). As such, participants might not have perceived higher frequencies of support provision beyond what they generally expected to invest in their relationship. In other words, if providers regularly invest in their friendships, they may view frequent support provision as part of their routine investments, and thus, feel less reluctance. Moreover, providers sometimes offer help that is not explicitly sought (Bolger et al., 2000; Zee & Bolger, 2019), so it is possible that the frequency of support is a demonstration of providers' own self-initiated efforts, removing some of the potential negative consequences that might be associated with frequency. Future work should assess how the frequency of support seeking is associated with reluctance, as it is possible that perceiving high levels of support seeking may have a different association with reluctance.

In general, honest and transparent communication are valued in interpersonal relationships (Knapp, 2008), but there is also a range of acceptability for lying and deception in close relationships (Dunbar et al., 2016; Roggensack & Sillars, 2014). Indeed, deceptive affection (i.e., outward displays of affection that do not align with internal feelings; Floyd, 2006) is often discussed as a normal aspect of relationships (Horan & Booth-Butterfield, 2013). People provide deceptive affection for a multitude of reasons, including for prosocial, relationship-promoting reasons like maintaining their relationships and preventing conflict (Carton & Horan, 2014; Horan & Booth-Butterfield, 2013). Similarly, research demonstrates that support providers often cite their own worries about potential negative repercussions—including potential conflict

and/or harm to the relationship or the recipient—if they chose not to provide deceptive/reluctant support (Johnson et al., 2026). Results from this study illustrate that fear of repercussions positively predicted participants' deception but not their reluctance. The voluntary nature of friendships might provide insight for these different associations. In particular, people may not be willing to do something against their will for a voluntary relationship, but they may be more open to engaging in deception to preserve their friendships. It is possible that providers are more willing to tell their friends what they want to hear and/or withhold their genuine opinions in order to avoid causing additional stressors or conflict, as seen in communication of deceptive affection. Previous deceptive/reluctant support work looks at a variety of relationship types, including families, romantic partners, colleagues, etc. (Johnson et al., 2026). By looking specifically at friendship, this project expands scholarly understanding of how deceptive/reluctant support may function uniquely in friendships. Additional work is needed to fully unpack and understand why unwillingness and deception may show up differently in voluntary relationships.

Contrary to my prediction, reluctance was negatively associated with burnout and distress. Reluctant confidants—people who receive disclosures against their will—experience challenges regarding both receiving disclosures as well as questioning how to respond to disclosures they receive (McBride & Bergen, 2008; Petronio, 2000). In general, when people invest in their relationships at higher frequencies (especially over prolonged periods of time), they are more likely to experience reluctance regarding additional or continued investments (Afifi et al., 2016). These tensions and reluctance are similarly seen in supportive interactions when providers offer help at high frequencies (Johnson, 2025; Johnson et al., 2026). As such, it is possible that the participants in this study were generally offering support less frequently or in

ways that align with how they want to invest in their friendship, and, as a result, felt less reluctant. Providing support less frequently in combination with experiencing less feelings of reluctance might lead to decreased risk of burnout and stress, as seen in my results. If providers feel like they are the only one available or qualified to offer support, they are more likely to provide support beyond their means, as it can be difficult to disentangle oneself and the emotional stakes often feel higher (Johnson et al., 2026). It is also probable that continuing to provide support in combination with feeling isolated as a provider may increase one's feelings of reluctance—especially over time (Johnson et al., 2026). With this in mind, it is also possible that participants felt like they were part of a broader support network, rather than experiencing the pressures of being a primary or sole support provider for their friend—resulting in less reluctance and broader feelings of distress.

Highly person-centered (HPC) support acknowledges and validates another's feelings, often by helping people process their emotions within the broader context of their stressor (Burleson, 1982; MacGeorge et al., 2003), and recipients tend to evaluate HPC supportive messaging as more effective and sensitive compared to low or moderately person-centered support (Bodie et al., 2012). While HPC messaging is often the most helpful, it also requires the more intention and effort from providers. High quality supportive message creation tends to be more taxing compared to lower quality messages, and it also requires greater empathy (MacGeorge, 2001). As such, another way providers can exert less energy in their relationships is adjusting the quality of their support provision (Johnson, 2025). It is possible that providers who are experiencing reluctance might choose to offer lower quality support as a means of protecting themselves while simultaneously working to protect their relationships (Afifi et al., 2016; Johnson, 2025), resulting in less feelings of burnout and feelings of distress. Reduced

feelings of distress could also be attributed to not caring about how their support is perceived by their friend. Unfortunately, research shows that recipients may prefer no support over low quality support, though both can result in negative outcomes for relationships (Ray & Veluscek, 2018).

Finally, Model 1 results depicted that support boundary creation was positively associated with distress, which is not what I originally predicted. Support boundary creation is conceptualized as one way that providers can manage and mitigate undesirable support outcomes (Johnson, 2025); however, it is possible that the process of creating boundaries can cause stress for providers. There is a normative pressure for people to provide support when it is sought, and this is especially true in friendships (Allan, 2008), and boundary creation can alter relational norms and violate expectations, which can create uncertainty, tension, and conflict (Burgoon, 2015). Moreover, the voluntary nature of friendships poses unique challenges when people do not meet their friend's expectations for support (Roberts & Doherty, 2010; Vieth et al., 2022; Wiseman, 1986).

Support boundary creation enables providers to create parameters around the amount and/or type of support they are willing to provide (Johnson, 2025), and it is likely that support boundaries heighten recipients' risk of experiencing support gaps. Support gaps literature illuminates potential outcomes of reduced coping, hurt feelings, and negative relational consequences (e.g., Davis & High, 2019; McLaren & High, 2019) when people do not receive the amount or type of support they seek, with gaps of greater magnitude having greater influence on outcomes (Brock & Lawrence, 2009). People may experience support gaps regarding particular stressors (High & Crowley, 2018) or have broader perceptions of support gaps within a particular relationship (Xu & Burleson, 2001); regardless, gaps are believed to have negative consequences on provider-recipient relationships (McLaren & High, 2019). Similarly, both direct

and indirect support boundary creation has been found to contribute to relational dissolution in friendships (Johnson, 2025). These relational challenges are likely to be distressing—even if people intentionally choose to create support boundaries knowing that there may be relational consequences.

Heightened distress may also be explained with consideration of face concerns (i.e., one's effort to maintain positive self-image and personal autonomy; Brown & Levinson, 1987). Support boundary creation enables providers to maintain autonomy by creating parameters around the amount/type of support they are willing to offer, often before they reach a point of cutting off support entirely (Johnson, 2025). However, providers have also cited struggling to uphold or maintain their boundaries (Johnson, 2025), which likely causes some level of distress. Simultaneously, support boundary creation poses potential threats to providers' positive self-image. While they are providing support to some extent, support boundaries often prevent providers from offering help in alignment with what their friend wants or expects from them. Unfortunately, "failing to meet someone's desires for support may signal a lack of understanding and partner responsiveness" (Wang, 2019, p. 3450). Providers may be concerned about being viewed as uncaring, cold, or even a "bad friend" by creating support boundaries, and they might also struggle to process what their need for support boundaries says about them. Indeed, when providers struggle to offer support, they might begin to question whether they are violating their own moral code or understanding of themselves (Johnson et al., 2026).

The Theory of Resilience and Relational Load

As a reminder, the TRRL explores how various individual and relational factors impact one's ability to manage their stress, which ultimately contributes to relational outcomes of growth and thriving or depletion and relational load (Afifi et al., 2016). The theory examines

how communal orientation and discrepancies, relational maintenance behaviors and discrepancies, and emotional reserves generate prosocial and antisocial outcomes in relationships (Afifi et al., 2016). In general, the TRRL asserts that security behaviors/appraisals contribute to relational growth and thriving and reduce the likelihood of relational struggle and depletion (Afifi et al., 2016).

The TRRL asserts that communal orientation influences how people engage in maintenance behaviors, with stronger communal orientation contributing to increased relational investments (Afifi et al., 2016). Communal orientation involves viewing stressors as shared between relational partners (i.e., “our problem” rather than “your problem” or “my problem”). In supportive communication, having a communal orientation likely makes support provision feel less taxing—as it is an investment that benefits all interactants (Afifi et al., 2016, 2019, 2024; Haughton & Afifi, 2022). As such, it was unsurprising that communal orientation positively predicted security behaviors and negatively predicted threat appraisals in this study. Indeed, according to the TRRL, stronger communal orientation increases the likelihood that relational partners engage in security behaviors and simultaneously reduces the need for threat appraisals/behaviors (Afifi et al., 2016).

While the results of this study reflect security behaviors as negatively associated with distress, there was an unexpected relationship between security behaviors and relational adaptation. Contrary to other applications of the TRRL, results depicted that security behaviors were negatively associated with relational adaptation. In other words, providers’ maintenance and coping efforts did not contribute to relational adaptation; rather, it contributed to decreased relational adaptation. It is possible that security behaviors, which tend to benefit relationships, may have the opposite effect in relationships that are already struggling. Indeed, providers might

feel resentful or irritated by their continued investment in a supportive relationship is already in depletion. Haughton & Afifi's (2022) work on resilience in interracial-interethnic relationships highlights that "the stress felt by Black partners might be overwhelming in some of these relationships and become more hurtful, rather than less hurtful, the greater the partners actively maintain their relationship" (p. 285). Their participants experienced heightened stress when their partner invested in their relationship, particularly when they were concerned about their broader networks' disapproval of the relationship (Haughton & Afifi, 2022). While these results reflect how another's investment might have opposite effects, it is likely that this is also a possibility for those working to maintain relationships—particularly when there are overwhelming levels of stress underlying the connection (as is the case for many experiencing challenging support provision). In other words, stress of relationships might become all-consuming and ultimately reduce the prosocial benefits of maintenance behaviors (Haughton & Afifi, 2022), and I argue this is a possibility for all interactants. These results can also be understood through a lens of reciprocity in relationships. In general, people expect mutual investment from relational partners (Gouldner, 1960), though if people feel like they are not receiving mutual investment, they might experience frustration and opt to prioritize themselves over the relationship (Afifi et al., 2016). Moreover, lack of reciprocity and relational maintenance discrepancies may be particularly detrimental to voluntary relationships like friendship (Roberts & Doherty, 2015). More work should explore how one's security and threat appraisals/behaviors may have adverse effects due to individual or relational conditions, as well as how these conditions may have unique impacts for voluntary versus involuntary relationships.

According to the TRRL, people tend to engage in threat appraisals/behaviors when they have reached a point of prioritizing their own needs over the needs of the needs of the

relationship, even if it poses challenges or damages the relationship (Afifi et al., 2016). This is often associated with entering a phase of depletion due to sustained challenges in the relationship. This study's findings offer complex, unexpected relationships between threat appraisals and relational outcomes. For example, I predicted that threat appraisals would have a negative association with relational adaptation—as aligns with the majority of applications of TRRL (Afifi et al., 2020, 2020; Haughton & Afifi, 2022; McAninch et al., 2023). However, the opposite was found, with threat appraisals predicting increased relational adaptation. There was also a negative association between threat appraisals and friendship entropy.

While these associations were unexpected, they might both be tied back to the unique, voluntary nature of friends. In general, people view friends as people to whom they can disclose aspects of their life (Oswald et al., 2004), and social support is often considered a key aspect of how people conceptualize and understand the functions of friendship (Fehr & Harasymchuk, 2019). In some cases, providing and receiving support has even been found as a means for which friendships grew closer (Doherty, 2021). As such, participants may have been experiencing more intense threat appraisals as they grappled with the potential of losing their friend, and while threat appraisals have been associated with relational depletion in romantic and family relationships (Afifi et al., 2020, 2020; Haughton & Afifi, 2022; McAninch et al., 2023), it is possible that threat appraisals may function differently in friendships. Indeed, it is possible that people may become more committed to adapting to challenges and committing to their friendships when experiencing challenges, because people generally opt into their friendships and find them fulfilling points of connection (Khullar et al., 2021; Wiseman, 1986). Moreover, support is a very important part of most friendships, and people may be willing to adapt and

adjust through disruptions because loyalty, support, and trustworthiness are expected within friendships (Argyle & Henderson, 1984; Hall, 2012; Oswald et al., 2004).

On the contrary, threat appraisals were positively associated with participants' burnout. Burnout was measured with specific focus on emotional exhaustion, and it can be draining to experience turmoil and mixed feelings with relational partners (Knobloch, 2007). However, it is surprising that threat appraisals were negatively associated with experiences of distress. When people feel ambivalence and/or experience turbulence and interference in their relationships, this can cause stress and uncertainty (Knobloch, 2007), but this did not occur with my participants. It is possible that the negative association between threat appraisals and distress is a result of how distress was measured in my surveys. Both the mental health and perceived stress measures were general in nature, rather than specifically focused on the friendship, and participants were encouraged to think across various aspects of their lives. As such, it is possible that participants' challenges influenced relationship-specific outcomes but were not disruptive enough to effect participants' total experiences of distress. In other words, participants may have experienced distress within their relationships, but their supportive challenges were not impacting them across other aspects of their lives.

Alternatively, this could be a result of reaching acceptance regarding friendship depletion or entropy. If participants were experiencing significant turmoil in their friendships, they may feel a sense of relief should they view these circumstances as a potential way out of the friendship. Additional work should explore how threat appraisals impact relationship-specific distress. When people are emotionally exhausted from navigating challenges in their relationships, they are more likely to engage in behaviors that preserve themselves over the relationship (Afifi et al., 2016). As such, it is unsurprising that providers' support burnout was

negatively associated with relational adaptation and positively associated with friendship entropy.

Applications of the TRRL primarily investigate how relationships among romantic partners and family members come to thrive or struggle during difficult times (see Afifi et al., 2026; Arroyo et al., 2024; Guntzviller & Wang, 2021), and minimal scholarship explores how the TRRL applies to friendships. This project offers insight for what aspects of the TRRL may remain true in friendships as well as which tenets may differ and need further exploration. In short, many of the relationships I expected to find based on the extensive research that applies the TRRL did not hold true for my participants. It is possible that the voluntary nature of friendship may create unique dynamics that influence outcomes of thriving and resilience or struggling and depletion. Moreover, this may be particularly true in supportive contexts, as we often define and conceptualize friends as people who show up during times of need (Fehr & Harasymchuk, 2019). Communication scholars and relationship researchers should continue exploring how the TRRL may (or may not) apply to friendships, especially given how important friendship is for overall health, well-being, and fulfillment.

Practical Implications

The results from this project offer important considerations for individuals as they navigate challenging supportive relationships. While social support often contributes to positive outcomes for providers and recipients (MacGeorge et al., 2011), less is known about the challenges providers experience and how they can best navigate their challenges in order to protect themselves and their relationships (Johnson et al., in press). Results from this study provide insight for which support conditions and navigation strategies are associated with particular outcomes. As such, these findings can help support providers make intentional choices

about their approach to coping and reestablishing homeostasis in their relationships, with consideration of the unique challenges they are facing.

These findings serve as a valuable reminder that providers should strive for awareness and acknowledgement of their own needs in supportive processes. Indeed, providers are important interactants to consider in supportive relationships (Faw, 2018), though their needs often conflict with the needs of support recipients (Wortman & Lehman, 1985). These results highlight both the individual and relational challenges that may occur in response to providers' strain from their supportive interactions. If providers have awareness of support conditions that do not align with their needs, they could take proactive measures to avoid such conditions in the future. For example, if someone knows that persistently providing emotional support causes them emotional strain, they could offer other types of support that do not feel as taxing to them. Alternatively, they could have transparent, vulnerable conversations with their relational partners and establish supportive norms that feel sustainable and satisfying for all interactants (Johnson, 2025).

In other words, it is essential that support providers grapple with what relational and supportive conditions align with their needs and then communicate their needs clearly to relational partners. While providers often struggle to prioritize their own needs in supportive interactions—likely due in part to the normative pressures to provide support, especially for friends (Hall, 2012; Oswald et al., 2004; Pezirkianidis et al., 2023)—this study illuminates the significance of providers taking their own needs into account to avoid individual and relational harm. Scholarship often centers recipient experiences; however, when providers face negative individual or relational outcomes, their difficulties likely have ripple effects (e.g., lower quality

support, relational conflict, reduced satisfaction, etc.) that negatively impact support recipients, too.

Tracing the connections between problematic supportive interactions among friends illuminates potential communicative pathways that might strengthen relationships, minimize harm, and even prevent relational entropy. Loneliness and social isolation are pervasive public health issues, with an estimated 16% of the worldwide population experiencing loneliness between 2014 and 2023 (World Health Organization, 2025). Experiences of loneliness contribute to a variety of negative health outcomes, and “fulfilling connections are a critical and often underappreciated contributor to individual and population health and longevity, safety, prosperity, and well-being” (U.S. Department of Health and Human Services, 2023, p. 45). Given how many individuals are experiencing social isolation across the world, it is vital to continue investigating how individuals can manage relational challenges to ultimately maintain and strengthen their relationships. Indeed, recognizing and addressing relational challenges as soon as possible, rather than allowing challenges to persist across time, minimizes the risk of irreversible relational harm (Afifi et al., 2016). These findings might be particularly important for friendships, which are at higher risk of relational dissolution and entropy when difficulties arise compared to other relationship types (Vieth et al., 2022).

It is noteworthy that deception was not associated with distress or burnout, but reluctance was associated with both. As such, providers who engage in deceptive/reluctant support should consider ways to manage the reluctance they might be feeling to minimize the risk of burnout and distress. For example, if providers are in earlier stages of unwillingness, it may benefit them to have open, honest conversations with their friend about their capacity to help. However, not all providers may be comfortable or willing to have such conversations, and not all relational

partners may be open or willing to respect providers' boundaries. Regardless, continuing to help beyond their means and experiencing burnout may result in providers engaging in nonsupport and harming the relationship.

In short, the results from this study provide initial insight for how individual, relational, and contextual factors in problematic supportive interactions between friends result in different individual and relational outcomes for support providers. Still, additional investigation is needed to ensure providers are equipped with the knowledge, skills, and strategies needed to reduce harm and enhance individual and relational health.

Limitations and Future Directions

While this study offers significant takeaways about support providers' challenges and the associated individual and relational health outcomes, it is not without limitations. For the purposes of this study, I chose to focus on challenging support provision in emerging adulthood. Strong arguments have been made about the unique nature and importance of supportive friendships during emerging adulthood (Allan, 2008; Lee, 2022; Oswald & Clark, 2003); however, it is highly likely that providers still experience challenges in childhood, adolescence, and middle and older adulthood. In particular, children learn what is acceptable in friendships at early ages (see Painter Pataki et al., 1994); thus, understanding the messaging children receive and accept could be a point of early investigation into how norms around support are established that come to affect friendships throughout the lifespan. Moreover, providers' approach to navigating their challenging supportive relationships may shift across time. For example, some research suggests that older populations likely have more experience establishing boundaries in their relationships (Petronio, 2002), so they might be more willing to create support boundaries (and/or more effective at establishing them) compared to younger populations. Other research

suggests that older adults prioritize being honest—even blunt honesty—more than younger adults (O'Connor et al., 2022). As such, future research should explore how people experience support provision complexities, as well as how they navigate said challenges, across different age demographics.

Given the voluntary nature of friendship and the heightened risk of friendship decay deriving from relational challenges when compared to other relationships (Khullar et al., 2021; Vieth et al., 2022), this project solely focused on individuals who were struggling to provide support to a friend. However, previous scholarship highlights how providers struggle helping across relationship types (see Johnson et al., 2026; Ray et al., 2023 for examples). Indeed, recent scholarship reflects how people provide unwilling and/or inauthentic support in a variety of relationships, including among familial, romantic, and workplace connections (Johnson et al., 2026). Moreover, deceptive/reluctant support is further complicated by contextual and relational features that influence providers' experiences of reluctance and disingenuity in their supportive relationships (Johnson et al., 2026), and it is possible that there are unique contextual factors for different relationship types. For example, it is possible that providers may experience more relational obligation to continuing providing support with family members compared to with friends. While there are likely to be some similarities across challenging support provision, future scholarship should explore how support challenges and providers' strategies for navigating their difficult support relationships may result in unique experiences and outcomes across different relationship types.

This study took place with an approximately two-week interval between Survey 1 and Survey 2. Although this timeframe was intentionally selected to minimize attrition and prevent circumstances where participants were no longer friends with the person they struggled

supporting, it has limitations. First, even with best efforts to minimize attrition from time 1 to time 2 (e.g., shorter time interval, bonus pay incentives; Benjamin-Bauman et al., 1984; Folkins et al., 1980), I still saw significant attrition. In total, 200 participants completed Survey 1, with only 131 completing Survey 2. While researchers can employ additional strategies to increase participation at the second timepoint (e.g., recruiting more participants for Survey 1, leaving Survey 2 open longer, etc.), financial and timing constraints inhibited these options for this study. Additionally, it is possible that a longer time interval between surveys would have yielded different results. The TRRL argues that long-term relational challenges are more likely to result in negative outcomes of depletion or relational load (Afifi et al., 2016), and creating more time between surveys could have provided insight into how long-term support challenges impact individuals and relationships differently. Regardless, many participants reported struggling to support their friend for a prolonged period, so it is difficult to know if longer intervals would have made a significant difference with this participant group. Future scholarship should consider employing extended longitudinal methods to gain a more holistic picture of provider challenges and the associated outcomes. Moreover, researchers should consider how alternative data collection methods (e.g., diary studies; Bolger et al., 2003) could capture the more day-to-day or even mundane experiences of challenging support provision.

Unfortunately, a lot of the concepts of interest in this study are still exploratory in nature, meaning validated scale measures for these concepts do not yet exist. As such, I used single item measures to evaluate providers' reluctance to help their friends, dishonesty in their offered support, and efforts to create boundaries around their support provision. Researchers cannot determine reliability for single-item measures, and while single-item measures tend to be more convenient for participants, they cannot capture the full complexity of constructs (Cuvillier et al.,

2021). As such, the nuances underlying providers' strategies for navigating their challenges are not fully captured in my first model. For example, the support boundary creation single item measure asked participants to report whether they had created parameters around the amount or type of support they provided to their friend on a yes/no scale. However, Johnson (2025) found providers use a variety of strategies when creating support boundaries, with some approaches aligning with certain goals over others. Direct support boundary creation might be more effective in successfully establishing boundaries, but it is likely more face-threatening for all interactants (Johnson, 2025). Alternatively, indirect support boundary creation tends to be less face-threatening, but providers who used this method reported their boundaries often went unnoticed or disregarded (Johnson, 2025). Clearly, there are nuances that might be strategy-specific in support boundary creation, and similar arguments can be made for deceptive/reluctant support provision—though none of these complexities were captured with the single-item measures used in this study. Future work should strive to create comprehensive, validated scales to measure providers' deceptive/reluctant support and support boundary creation experiences. Measures that can capture the full breadth of providers' strategies for navigating the challenges they experience will provide a better picture for what outcomes they might experience, and why. Moreover, scholars should grapple with the potential impacts of technology on these processes, as it is possible that providers may feel more or less strain based on the modality of their deceptive/reluctant support provision and support boundary creation.

When considering measures, scholars have not yet created a support-specific burnout measure. For this study, I used a slightly modified version of the emotional exhaustion subscale from the Maslach Burnout Inventory (Maslach et al., 1996) to assess burnout as it related to participants' challenges providing support. While this effectively captures the emotional toll of

support provision, there are unique aspects of support-related burnout that likely are not captured here. Indeed, it is likely that different types of support might be associated with unique aspects of burnout. As such, interpersonal communication scholars should work to develop and validate a support burnout scale that can be used to further understand the nuances and challenges informal providers face in their supportive relationships, which remains largely unknown and underexplored (Johnson et al., in press).

The TRRL argues that people engage in security and threat appraisals/behaviors to either preserve the relationship or prioritize their own needs (Afifi et al., 2016). In this study, I created latent variables to capture providers' threat appraisals and security behaviors for Model 2. Threat appraisals included measures to evaluate providers' negative or mixed feelings and perceptions about their friendship, and security behaviors included measures to evaluate the maintenance and coping behaviors providers invested into their friendship. While I did not include threat behaviors or security appraisals in this study, future scholarship should consider measuring both attributions and behaviors together in threat and security latent variables. For example, it is possible that threat behaviors (e.g., intentionally spending less time with their friend) may have different implications on relational health compared to threat appraisals (e.g., having mixed feelings about the state of the friendship). As such, scholars should continue to grapple with how providers' security and threat appraisals/behaviors might be associated with different outcomes for relationships. Moreover, given the complexities underlying how, when, and why providers use different strategies when navigating their support challenges, it would be interesting to investigate how support boundary creation and deceptive/reliant support align with the TRRL framework.

Providers may have negative experiences in their supportive relationships due to a plethora personal and relational conditions, such as investment discrepancies, burnout, and/or feeling coerced to provide help (Afifi et al., 2016. 2013; Gouldner, 1960; Johnson, 2025). While support is often dyadic in nature, relationships exist within a broader, interdependent social contexts that likely influences providers' experiences (Parks, 2015). In fact, providers have cited network dynamics as impacting to their support boundary creation (Johnson, 2025) and deceptive/reluctant support provision (Johnson et al., 2026). As such, future scholarship should explore how broader social networks influence and are influenced by providers' difficulties. Indeed, exploring the network dynamics of taxing supportive situations, researchers will have a more holistic, nuanced understanding of how stressors can have ripple effects—not just from support seekers to providers, but also from providers to other social connections.

Conclusion

This study offers important insight about complexities in support provision among friends in emerging adulthood, and the associated individual and relational outcomes providers experience. It builds on recent scholarship exploring the types of difficulties providers may face as well as the communicative strategies they might use to handle these challenges while attempting to balance their own needs and the needs of support seekers (Johnson, 2025; Johnson et al., 2026; Ray, 2024). Moreover, it provides key takeaways about how specific conditions, appraisals, and behaviors are associated with individual and relational health outcomes. It also contributes to the Theory of Resilience and Relational Load (TRRL; Afifi et al., 2016) literature by depicting how providers' communal orientation, security behaviors, and threat appraisals are associated with individual and relational thriving or depletion—sometimes in unexpected ways. Practically, these findings illustrate the importance of awareness and intentionality as providers

experience and navigate challenging supportive relationships. Ultimately, this study highlights much left to be explored—how providers move between different strategies for navigating demanding supportive relationships, what these experiences look like across the lifespan, and the role social networks play in how providers process, experience, and move forward from their challenges.

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APPENDIX A

4/2/2026, 10:36 AM

Qualtrics Survey Software

Screening Survey

Screening Survey Description:

The goal of this screener is to determine your eligibility to participate in a larger study on difficulties providing support to others. We will ask you five questions, and it should take approximately one minute to respond.

You will receive \$0.20 for your completion. You can expect to receive payment within 7 to 10 business days.

Screening Study Privacy Information:

Any data you provide in this screening survey will be reviewed by members of a research team to verify whether you qualify to participate in our larger study or not. Individuals who do qualify will be invited to participate in the larger study. Those who do not qualify will not be invited to participate.

For all participants, data (i.e., survey responses, date of completion, payment amount, and Prolific identification numbers) will be retained on a password protected cloud-based drive for up to 7 years in accordance with local

https://colanetwp.pbd.qualtrics.com/Q/E/8/5/Screening/Blocker/Ask/GetSurvey/PrintPreview?C=connectSurveyID=SV_23926emQ66SLDfU8&ConnectLibraryID=4TR_SF_50a... 1/5

4/2/2026, 10:36 AM

Qualtrics Survey Software

Are you **currently** trying to create boundaries around the amount or type of support that you provide a **friend**?

- ☐ Yes
☐ No

Are you **currently** feeling exhausted and/or frustrated by the support or help that you are offering to a **friend**?

- ☐ Yes
☐ No

Do you have a **close relationship** with the **friend** you have been supporting where you have been experiencing these challenges?

- ☐ Yes
☐ No

Powered by Qualtrics

https://colanetwp.pbd.qualtrics.com/Q/E/8/5/Screening/Blocker/Ask/GetSurvey/PrintPreview?C=connectSurveyID=SV_23926emQ66SLDfU8&ConnectLibraryID=4TR_SF_50a... 3/5

4/2/2026, 10:36 AM

Qualtrics Survey Software

policies and laws. Information will only be shared with members outside of the research team as required by law.

What is your unique Prolific identification number? Please share that below.

Note: Failure to provide a Prolific identifier might result in loss of compensation.

Are you **currently** providing support or help to a **friend** when you do NOT want to?

- ☐ Yes
☐ No

Are you **currently** providing support or help to a **friend** that does NOT align with your true feelings or beliefs?

- ☐ Yes
☐ No

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APPENDIX B

4/10/26, 1:00 PM Qualtrics Survey Software Consent Thank you for your interest in this research study. Before we can include your experiences in the research, we must obtain your consent or permission to include you. Please read the following information carefully. Project Title: <u>Outcomes of Challenging Supportive Communication</u> Principal Investigator: Meara H. Faw, PhD, Associate Professor, Department of Communication Studies, Colorado State University (Meara.Faw@colostate.edu) Co-Investigator: Kylie J. Johnson, M.A., PhD Candidate, Department of Communication Studies, Colorado State University (Kylie.Johnson@colostate.edu) Researchers' Statement You are invited to participate in a research study that is being conducted by a research team at Colorado State University. The purpose of this consent form is to give you the information you will need to help you decide whether to participate in the study or not. Please read this form https://colostate.prolific.com/Q/8MSectionB/index/Ajw/04SurveyFirstReview?ConsentSurveyID=PV_7JD3M7YELD1314&ConsentLibraryID=CR_PYSO...	4/10/26, 1:01 PM Qualtrics Survey Software carefully. You may ask questions about the purpose of the research, what you will be asked to do, the possible risks and benefits, your rights as a research participant, and anything else about the research study or this form that is not clear. Please direct any questions you have to the co-investigator via email (Kylie.Johnson@colostate.edu). When all your questions are answered, you can decide if you would like to participate in this study or not. This process is called "informed consent." You may print a copy of this text for your records. Research Purpose The purpose of this to understand the individual, relational, and network outcomes of challenging support provision in friendship contexts. Study Procedures If you agree to participate, you will be asked to complete two online surveys through Prolific. Approximately 350 participants will take part in the study, and each individual's participation will take approximately 30 minutes per survey, 1 hour total. In order to participate in this study, all participants must identify as a support provider who is experiencing challenges while supporting a friend. You must also be 18 years of age or older and capable of completing the interview in English. https://colostate.prolific.com/Q/8MSectionB/index/Ajw/04SurveyFirstReview?ConsentSurveyID=PV_7JD3M7YELD1314&ConsentLibraryID=CR_PYSO...
4/10/26, 1:01 PM Qualtrics Survey Software In Survey 1, you will answer questions about yourself, the relationship you have with your friend, and the challenges you are experiencing while trying to support your friend with their a challenge or problem. Survey 2 will take place two weeks after participants complete the first survey. In Survey 2, you will answer questions about if/how your relationship with your friend as well as the support dynamics in your relationship have shifted since Survey 1. You will also respond to questions about your feelings and experiences navigating these challenges. All study procedures will take place online, and you can choose the time of day and the place that you complete them. Your involvement in the study will only last up to 14 days. Study Confidentiality We will make every effort to protect the confidentiality of study records that identify you, but we cannot guarantee total confidentiality. All information gathered in this study will be kept as confidential as possible. Your privacy is very important to us, and the researchers will take every measure to protect it. Your information may be given out if required by law; however, the researchers will do their best to make sure that any information that is released will not identify you. The data collected by the researchers in this study will be anonymous. There will be no way for members https://colostate.prolific.com/Q/8MSectionB/index/Ajw/04SurveyFirstReview?ConsentSurveyID=PV_7JD3M7YELD1314&ConsentLibraryID=CR_PYSO...	4/10/26, 1:01 PM Qualtrics Survey Software of the research team to know whose survey responses belong to whom. Prolific participants will receive a Prolific ID, which is completely anonymized and cannot be traced to their identities in any way. If participants include identifiable information in open-ended questions, it will be de-identified. To ensure confidentiality, the screening survey will be conducted within the secure Prolific platform and will never be exported or saved on the investigators' computers The research team will also protect the confidentiality of any information shared. Data will be stored on a password-protected OneDrive managed by Colorado State University. If information from this study is published or presented at scientific meetings, your name and other identifiable information will not be used. The research team works to ensure confidentiality to the degree permitted by technology. It is possible, although unlikely, that unauthorized individuals could gain access to your responses because you are responding online. However, your participation in this online survey involves risks similar to a person's everyday use of the internet. Risk, Stress, or Discomfort During your participation in this study, you may experience stress, discomfort, or related negative emotions from sharing your experiences with challenging support https://colostate.prolific.com/Q/8MSectionB/index/Ajw/04SurveyFirstReview?ConsentSurveyID=PV_7JD3M7YELD1314&ConsentLibraryID=CR_PYSO...

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provision, dependent on the context and the outcomes of your experiences.

You are allowed to withdraw from the study at any point in time. You may also decide to skip questions that you find invasive or uncomfortable.

If you find that your participation in this study causes you distress, we recommend you use the following resources: All participants can contact the SAMHSA's National Helpline (1-800-662-4357) or the Crisis Text Line (Text HOME to 741741).

Benefits of the Study

There is no direct benefit to you from taking part in this study; however, you may experience satisfaction in sharing your feelings and experiences related to your supportive experiences in your friendship.

The study has a lot of potential benefits for research and society. Deepening our knowledge about support provider experiences and the potential downsides/negative outcomes of support will greatly benefit and expand existing literature. Ultimately, our goal is to understand what aspects of challenging supportive relationships are associated with anti-social and/or negative outcomes, which will allow us to develop more proactive strategies for

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navigating these challenges in the future. The data from this study might lead to information that would help people have more ethical, sustainable, and satisfying supportive relationships with others as well as enhanced health and well-being.

Compensation

Participants can earn up to \$15 for participating in this study. You will be compensated for each part of the study you complete, and you will receive a bonus payment if you complete both surveys.

The table below details the payment rate for each part of the study:

First Survey	\$6
Second Survey	\$6
Bonus for completing both surveys	\$3

You will receive a payment directly via Prolific 10-14 business days after study completion.

WHO TO CONTACT

For questions or concerns about the study or study procedures, you may contact Associate Professor Meara H. Faw at Meara.Faw@colostate.edu or PhD Candidate Kylie J. Johnson at Kylie.Johnson@colostate.edu

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For questions about your rights as a research subject, as well as any complaints or comments regarding the manner in which the study is being conducted, you may contact the CSU Institutional Review Board at CSU_IRB@colostate.edu

If you have read this form in its entirety, please continue to the survey by signifying your consent. By continuing, you are agreeing to the following statements:

This study has been explained to me, and I volunteer to take part in this research. I have had a chance to ask questions via email. If I later have questions about the research, I can ask one of the researchers listed above. If I have questions about my rights as a research subject, I can contact an administrator at Colorado State University.

I have read the study information and...

☐ I consent to participate

☐ I do NOT consent to participate

Demographics of Participant

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What is your unique Prolific identification number? Please share that below.

Note: Failure to provide a Prolific identifier might result in loss of compensation.

Please identify your age in years:

Please select how you identify:

☐ Male

☐ Female

☐ Transgender male

☐ Transgender female

☐ Nonbinary

☐ Unsure

☐ prefer to identify this way (please specify):

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What is your ethnic identity?

- ☐ Hispanic/Latino/a/x
- ☐ Not Hispanic/Latino/a/x

What is your racial identity? Please select all that apply.

- ☐ Native American or Alaska Native
- ☐ Asian
- ☐ Black or African American
- ☐ Native Hawaiian or Other Pacific Islander
- ☐ White

☐ prefer to identify this way (please specify):

What is your sexual orientation?

- ☐ Asexual
- ☐ Bisexual
- ☐ Gay
- ☐ Heterosexual/straight
- ☐ Lesbian
- ☐ Pansexual
- ☐ Queer
- ☐ Questioning

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☐ Unsure

☐ prefer to identify this way (please specify):

What is your current relationship status? Please select all that apply.

- ☐ Single
- ☐ Dating, not-cohabiting
- ☐ Dating, cohabiting
- ☐ Engaged
- ☐ Married
- ☐ Widowed
- ☐ Separated
- ☐ Divorced

☐ Other, please specify:

Please identify your state of residence:

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Reflecting on your feelings and thoughts across all aspects of your life, please indicate how often you have felt or thought the items below.

	Never	Almost never	Sometimes	Fairly often	Very often
In the last month, how often have you felt that you were unable to control the important things in your life?	☐	☐	☐	☐	☐
In the last month, how often have you felt confident about your ability to handle your personal problems?	☐	☐	☐	☐	☐
In the last month, how often have you felt that things were going your way?	☐	☐	☐	☐	☐
In the last month, how often have you felt difficulties were piling up so high that you could not overcome them?	☐	☐	☐	☐	☐

Demographics of Participant's Friend

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Please answer the following questions about your friend to the best of your knowledge.

Please identify your friend's age in years:

Please select how your friend identifies:

- ☐ Male
- ☐ Female
- ☐ Transgender male
- ☐ Transgender female
- ☐ Nonbinary
- ☐ Unsure

☐ My friend prefers to identify this way (please specify):

What is your friend's ethnic identity?

- ☐ Hispanic/Latino/a/x
- ☐ Not Hispanic/Latino/a/x

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☐ Unsure

What is your friend's racial identity? Please select all that apply.

☐ Native American or Alaska Native
☐ Asian
☐ Black or African American
☐ Native Hawaiian or Other Pacific Islander
☐ White
☐ Unsure
☐ My friend prefers to identify this way (please specify):

What is your friend's sexual orientation?

☐ Asexual
☐ Bisexual
☐ Gay
☐ Heterosexual/straight
☐ Lesbian
☐ Pansexual
☐ Queer
☐ Questioning
☐ Unsure

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☐ My friend prefers to identify this way (please specify):

What is your friend's current relationship status? Please select all that apply

☐ Single
☐ Dating, not-cohabiting
☐ Dating, cohabiting
☐ Engaged
☐ Married
☐ Widowed
☐ Separated
☐ Divorced
☐ Unsure
☐ Other, please specify:

To the best of your knowledge, how lonely is your friend?
Please respond to the following items.

	Hardly ever	Some of the time	Often
How often does your friend feel like they lack companionship?	☐	☐	☐

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	Hardly ever	Some of the time	Often
How often does your friend feel left out?	☐	☐	☐
How often does your friend feel isolated from others?	☐	☐	☐

Please identify your friend's state of residence:

Relational History and Norms

At this moment in time, how do you categorize your friendship? Please select all that apply.

☐ Best friend
☐ Close friend
☐ Friend
☐ Casual friend
☐ Colleague-work friend
☐ Sibling
☐ Other, please specify:

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How long have you known your friend? Please report the length in years. If you have not been friends for one year, you can use fractions (e.g., 0.5 years)

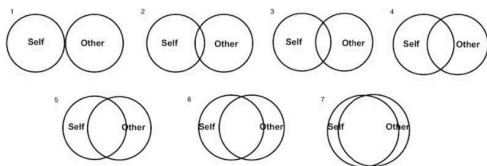
How often do you typically interact with this friend?

☐ Never
☐ Less than once a month
☐ Approximately once a month
☐ A few times a month
☐ Approximately once a week
☐ A few times a week
☐ Daily or almost daily

Below are a series of overlapping circles that are meant to represent your relationship with your friend. The circles range from no overlap (indicating little or no closeness) to almost complete overlap (indicating maximal closeness).

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Please consider the full expansion of your relationship with your friend. **With your entire friendship in mind**, please select the two circles that you feel best represents your closeness with this person **across time**.



- ☐ 1
☐ 2
☐ 3
☐ 4
☐ 5
☐ 6
☐ 7

Now, please consider your relationship with your friend since they have been dealing with the problem or challenge that you have been supporting them with. **When**

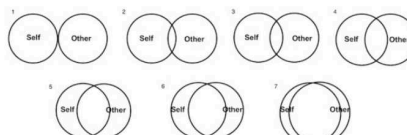
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	Strongly disagree	Somewhat disagree	Neither agree nor disagree	Somewhat agree	Strongly agree
This friend meets my needs	☐	☐	☐	☐	☐
I am satisfied in my relationship with my friend	☐	☐	☐	☐	☐
Compared to others' friendships, my relationship with my friend is good	☐	☐	☐	☐	☐
I often wish I had not formed this relationship with my friend	☐	☐	☐	☐	☐
My relationship with my friend meets my original expectations	☐	☐	☐	☐	☐
There are problems with my relationship with my friend	☐	☐	☐	☐	☐

There is an open text box below, but you should not write anything in that text box. Please skip this question and click through to the next page to show that you have read instructions.

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you think about this particular time in your friendship, please select the two circles that you feel best represents your closeness with this person.



- ☐ 1
☐ 2
☐ 3
☐ 4
☐ 5
☐ 6
☐ 7

Considering your current relationship with your friend, indicate your level of agreement or disagreement with the following statements.

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How certain are you about...

	Completely or almost completely uncertain	Mostly uncertain	Slightly more uncertain than certain	Slightly more certain than uncertain	Mostly certain	Completely or almost completely certain
What you can or cannot say to each other in this friendship?	☐	☐	☐	☐	☐	☐
The boundaries are appropriate and/or inappropriate behavior in this friendship?	☐	☐	☐	☐	☐	☐
The norms for this friendship?	☐	☐	☐	☐	☐	☐
How you can or cannot behave around your friend?	☐	☐	☐	☐	☐	☐

How certain are you about...

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	Completely or almost completely uncertain	Mostly uncertain	Slightly more uncertain than certain	Slightly more certain than uncertain	Mostly certain	Completely or almost completely certain
Whether or not you and your friend feel the same way about each other?	☐	☐	☐	☐	☐	☐
How you and your friend view your friendship?	☐	☐	☐	☐	☐	☐
Whether or not your friend likes you as much as you like them?	☐	☐	☐	☐	☐	☐

How certain are you about...

	Completely or almost completely uncertain	Mostly uncertain	Slightly more uncertain than certain	Slightly more certain than uncertain	Mostly certain	Completely or almost completely certain
The definition of this friendship?	☐	☐	☐	☐	☐	☐
How you and your friend would describe your friendship?	☐	☐	☐	☐	☐	☐

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	Completely or almost completely uncertain	Mostly uncertain	Slightly more uncertain than certain	Slightly more certain than uncertain	Mostly certain	Completely or almost completely certain
The state of the friendship at this time?	☐	☐	☐	☐	☐	☐

How certain are you about...

	Completely or almost completely uncertain	Mostly uncertain	Slightly more uncertain than certain	Slightly more certain than uncertain	Mostly certain	Completely or almost completely certain
Whether or not you and your friend will stay friends?	☐	☐	☐	☐	☐	☐
The future of your friendship?	☐	☐	☐	☐	☐	☐
Whether or not this friendship will end soon?	☐	☐	☐	☐	☐	☐

Please indicate how well each of the following represent your feelings about this friend.

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	Not at all	To a little extent	To some extent	To a great extent	To a very great extent
To what extent do you have mixed feelings toward your friend?	☐	☐	☐	☐	☐
To what extent do you feel both positive and negative feelings toward your friend?	☐	☐	☐	☐	☐
To what extent do you feel conflicted emotions/thoughts toward your friend?	☐	☐	☐	☐	☐

Please indicate your agreement with the following statements.

At the present time, this friendship is...

	Strongly disagree	Disagree	Somewhat disagree	Somewhat agree	Agree	Strongly agree
Turbulent	☐	☐	☐	☐	☐	☐
Chsotic	☐	☐	☐	☐	☐	☐
In turmoil	☐	☐	☐	☐	☐	☐
Tumultuous	☐	☐	☐	☐	☐	☐
Hedlic	☐	☐	☐	☐	☐	☐
Frenzied	☐	☐	☐	☐	☐	☐

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	Strongly disagree	Disagree	Somewhat disagree	Somewhat agree	Agree	Strongly agree
Overwhelming	☐	☐	☐	☐	☐	☐
Stressful	☐	☐	☐	☐	☐	☐

Please indicate your agreement with the following statements.

	Strongly disagree	Disagree	Somewhat disagree	Somewhat agree	Agree	Strongly agree
My friend influences the amount of time I spend with other people	☐	☐	☐	☐	☐	☐
My friend influences how much time I devote to my work	☐	☐	☐	☐	☐	☐
My friend influences whether I achieve the everyday goals I set for myself (e.g., goals for exercise, diet, studying, entertainment)	☐	☐	☐	☐	☐	☐
My friend influence whether I do the things I need to do each day	☐	☐	☐	☐	☐	☐

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Please indicate your agreement with the following statements.

	Strongly disagree	Disagree	Somewhat disagree	Somewhat agree	Agree	Strongly agree
My friend interferes with the plans I make	☐	☐	☐	☐	☐	☐
My friend interferes with my plans to attend parties or other social events	☐	☐	☐	☐	☐	☐
My friend interferes with the amount of time I spend with other people	☐	☐	☐	☐	☐	☐
My friend interferes with how much time I devote to my work	☐	☐	☐	☐	☐	☐
My friend interferes with the things I need to do each day	☐	☐	☐	☐	☐	☐

Please indicate the degree to which you agree with each of the following statements regarding your relationship with your friend.

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Don't agree at all Agree slightly Agree moderately Agree completely

	Don't agree at all	Agree slightly	Agree moderately	Agree completely
I have invested a great deal of time in our friendship	☐	☐	☐	☐
I have told my friend many private things about myself (I disclose secrets to them)	☐	☐	☐	☐
My friend and I share many memories	☐	☐	☐	☐

Please indicate the degree to which you agree with each of the following statements regarding your relationship with your friend.

	Strongly disagree	Disagree	Neither agree nor disagree	Agree	Strongly agree
Many aspects of my life have become linked to my friend (recreational activities, etc.), and I would lose all of this if we were to stop being friends	☐	☐	☐	☐	☐
I feel very involved in our friendship—like I have put a great deal into it	☐	☐	☐	☐	☐

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	Strongly disagree	Disagree	Neither agree nor disagree	Agree	Strongly agree
My relationships with others would be complicated if we stopped being friends (e.g., my friend is friends with other people I care about)	☐	☐	☐	☐	☐

Please indicate the degree to which you agree with each of the following statements regarding your relationship with your friend.

	Strongly disagree	Disagree	Neither agree nor disagree	Agree	Strongly agree
I want our friendship to last for a very long time.	☐	☐	☐	☐	☐
I am committed to maintaining my relationship with my friend.	☐	☐	☐	☐	☐
I would not feel very upset if our friendship were to end in the near future.	☐	☐	☐	☐	☐

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Please select strongly agree to show you are paying attention to this question.

- ☐ Strongly Disagree
☐ Disagree
☐ Neither Agree nor Disagree
☐ Agree
☐ Strongly Agree

Reflecting on your relationship with your friend, please indicate your agreement with the following statements.

	Strongly disagree	Somewhat disagree	Disagree	Neither agree nor disagree	Somewhat agree	Agree	Strongly agree
My friend and I talk through our problems and attempt to come to solutions together.	☐	☐	☐	☐	☐	☐	☐

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Strongly disagree Somewhat disagree Disagree Neither agree nor disagree Somewhat agree Agree Strongly agree

There is a feeling that my friend and I are going to be stronger as a result of working through this together.

We tend to view problems as "our problems" rather than "my" or "their" problems.

How often do you and your friend...

Never Rarely Sometimes Often Very often

Express thanks when one friend does something nice for each other?

Try to be upbeat and cheerful when together?

Make sacrifices for each other?

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Never Rarely Sometimes Often Very often

Threaten to end the friendship because of something that happened?

Blame each other for bad things that happen?

Not return each other's messages?

How often do you and your friend...

Never Rarely Sometimes Often Very often

Listen without making any judgment?

Talk about your friendship?

Try to make the other person "Feel good" about who they are?

How often do you and your friend...

Never Rarely Sometimes Often Very often

Share your private thoughts with each other?

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Never Rarely Sometimes Often Very often

Give advice to each other?

Show signs of affection toward each other?

How often do you and your friend...

Never Rarely Sometimes Often Very Often

Make an effort to spend time together even when you are busy?

Go to social gatherings together?

Get together just to hang out?

Do you feel like your friend puts the same amount of effort into your friendship as you do?

- ☐ Yes
- ☐ No

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Supportive Context & Provider Challenges

What is the biggest challenge or problem that are you currently supporting your friend with? Please describe this challenge or problem in 2-3 sentences.

Reflecting on the challenge(s) you are supporting your friend with, please indicate your agreement with the following statements

Strongly disagree Somewhat disagree Neither agree nor disagree Somewhat agree Strongly agree

I considered my friend a problem(s) to be very serious.

I considered my friend's problem to be a very severe one.

This problem makes my friend very upset.

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How long have you been supporting your friend with the biggest challenge or problem that they are experiencing? Please report the length in months. If you have been supporting your friend for less than one month, you can use fractions (e.g., 0.5 months).

How often have you been providing support to your friend for their challenge or problem?

- ☐ Approximately once a month
- ☐ A few times a month
- ☐ Approximately once a week
- ☐ A few times a week
- ☐ Daily or almost daily
- ☐ Multiple times a day

Have you ever provided support to your friend for this problem, even when you did not want to?

- ☐ Yes
- ☐ No

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Can you please describe what concerns or worries you have about what might happen if you did not provide support to your friend related to this challenge? This might include concerns you have about them, their ability to cope, how it might affect your relationship, etc. Please respond in 2-3 sentences.

Have you ever not provided support to your friend related to this problem, even though you knew they wanted support?

- ☐ Yes
- ☐ No

In this friendship, what does your support generally look like? What types of support are you offering? Please describe your support in 2-3 sentences.

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Have you ever told your friend what they wanted to hear related to their problem, even if you did not believe in what you were saying?

- ☐ Yes
- ☐ No

Have you ever created any boundaries around the amount or type of support that you have provided your friend related to this challenge?

- ☐ Yes
- ☐ No

Do you have any concerns or worries about what might happen if you did not provide support to your friend related to this challenge?

- ☐ Yes
- ☐ No

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When it comes to this friendship, how does your friend expect you to support them? This can include frequency, amount, types, nature of support, etc. Please describe your friend's expectations of you in 2-3 sentences.

How do you feel about the expectations you just described? This can include both positive and negative feelings that you may have. Please describe your feelings in 2-3 sentences.

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When it comes to your friendship, how do you expect your friend to support you? This can include frequency, amount, types, nature of support, etc. Please describe your expectations of your friend in 2-3 sentences.

Reflecting on your relationship with your friend, please respond to the following items.

	Not at all true	Slightly true	Moderately true	Mostly true	Really true
We spend most of our time together talking about problems that my friend or I have	☐	☐	☐	☐	☐

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	Not at all true	Slightly true	Moderately true	Mostly true	Really true
If one of us has a problem, we will talk about the problem rather than talking about something else or doing something else	☐	☐	☐	☐	☐
We talk about problems my friend or I have almost every time we see each other	☐	☐	☐	☐	☐
We keep talking even after we both know all the details about what happened	☐	☐	☐	☐	☐
We talk a lot about how bad the person with the problem feels	☐	☐	☐	☐	☐
We'll talk about every part of the problem over and over	☐	☐	☐	☐	☐
We spend a long time talking about how sad or mad the person with the problem feels	☐	☐	☐	☐	☐

Reflecting on your supportive relationship, please indicate the frequency you experience the following

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	Never	Rarely	Occasionally	Sometimes	Often	Very often	Every day
I feel emotionally drained from supporting my friend	☐	☐	☐	☐	☐	☐	☐
Supporting my friend consistently is really a strain for me	☐	☐	☐	☐	☐	☐	☐
I feel frustrated by providing support	☐	☐	☐	☐	☐	☐	☐
I feel I am working too hard to provide support	☐	☐	☐	☐	☐	☐	☐
Supporting my friend puts too much stress on me	☐	☐	☐	☐	☐	☐	☐
I feel like I am at the end of my rope	☐	☐	☐	☐	☐	☐	☐

Reflecting on your supportive relationship, please indicate the frequency you experience the following.

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	Never	Rarely	Occasionally	Sometimes	Often	Very often	Every day
I feel I am positively influencing my friend's life through my support	☐	☐	☐	☐	☐	☐	☐
I feel exhilarated after supporting my friend	☐	☐	☐	☐	☐	☐	☐
I have accomplished many worthwhile things in my friendship	☐	☐	☐	☐	☐	☐	☐

Reflecting on your supportive relationship, please indicate the frequency you experience the following.

	Never	Rarely	Occasionally	Sometimes	Often	Very often	Every day
I've become more callous toward my friend since experiencing challenges supporting them	☐	☐	☐	☐	☐	☐	☐
I worry that our friendship is hardening me emotionally	☐	☐	☐	☐	☐	☐	☐

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	Don't receive at all	Receive rarely	Receive occasionally	Receive regularly	Receive a great deal
Telling you whom to talk to for help	☐	☐	☐	☐	☐

For each of the items below, please indicate how much of each behavior ***you actually receive*** from your friend.

	Don't receive at all	Receive rarely	Receive occasionally	Receive regularly	Receive a great deal
Joining you in some activity in order to alleviate stress	☐	☐	☐	☐	☐
Expressing willingness to help you when you are in need of help	☐	☐	☐	☐	☐
Offering to help you do something that needs to be done	☐	☐	☐	☐	☐

I am also interested in learning ***what you desire*** from your friend. I want to know what is important and what kinds of things you desire from your friend.

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For each of the items below, please indicate ***how much of each behavior you desire*** from your friend.

	Don't desire at all	Desire rarely	Desire occasionally	Desire regularly	Desire a great deal
Telling you that they love you and feel close to you	☐	☐	☐	☐	☐
Expressing understanding of a situation that is bothering you, or disclosing a similar situation that they experienced before.	☐	☐	☐	☐	☐
Providing you with hope or confidence	☐	☐	☐	☐	☐

For each of the items below, please indicate ***how much of each behavior you desire*** from your friend.

	Don't desire at all	Desire rarely	Desire occasionally	Desire regularly	Desire a great deal
Telling you that you are still a good person even when you have a problem	☐	☐	☐	☐	☐
Trying to reduce your feelings of guilt about a problem situation	☐	☐	☐	☐	☐

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	Don't desire at all	Desire rarely	Desire occasionally	Desire regularly	Desire a great deal
Expressing agreement with your perspective on various situations	☐	☐	☐	☐	☐

For each of the items below, please indicate ***how much of each behavior you desire*** from your friend.

	Don't desire at all	Desire rarely	Desire occasionally	Desire regularly	Desire a great deal
Connecting you with people whom you may turn to for help	☐	☐	☐	☐	☐
Reminding you of the availability of companions who share similar interests or experiences with you	☐	☐	☐	☐	☐
Offering to spend time with you to get your mind off something (chatting, having dinner together, going to a concert, etc.)	☐	☐	☐	☐	☐

For each of the items below, please indicate ***how much of***

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each behavior you desire from your friend.

	Don't desire at all	Desire rarely	Desire occasionally	Desire regularly	Desire a great deal
Giving you advice about what to do	☐	☐	☐	☐	☐
Analyzing a situation with you and telling you about available choices and options	☐	☐	☐	☐	☐
Telling you whom to talk to for help	☐	☐	☐	☐	☐

For each of the items below, please indicate ***how much of each behavior you desire*** from your friend.

	Don't desire at all	Desire rarely	Desire occasionally	Desire regularly	Desire a great deal
Joining you in some activity in order to alleviate stress	☐	☐	☐	☐	☐
Expressing willingness to help you when you are in need of help	☐	☐	☐	☐	☐
Offering to help you do something that needs to be done	☐	☐	☐	☐	☐

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	Never	Rarely	Occasionally	Sometimes	Often	Very often	Every day
I don't really care what happens to my friend and their challenge(s)	☐	☐	☐	☐	☐	☐	☐

Reflecting on your supportive relationship, please indicate the frequency you experience the following.

	Never	Rarely	Occasionally	Sometimes	Often	Very often	Every day
I feel similar to my friend in many ways	☐	☐	☐	☐	☐	☐	☐
I feel personally involved with my friend's problems	☐	☐	☐	☐	☐	☐	☐
I feel uncomfortable about the way I have treated my friend	☐	☐	☐	☐	☐	☐	☐

Please select disagree to show you are paying attention to this question.

☐ Strongly Disagree

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☐ Disagree

☐ Neither Disagree nor Agree

☐ Agree

☐ Strongly Agree

In the context of friendship, your friend may do all kinds of different things for you when you need support, but they probably do so to a greater or lesser extent. Here, I am interested in **how much of each behavior you actually receive from your friend**.

For each of the items below, please indicate how much of each behavior **you actually receive** from your friend.

	Don't receive at all	Receive rarely	Receive occasionally	Receive regularly	Receive a great deal
Telling you that they love you and feel close to you	☐	☐	☐	☐	☐
Expressing understanding of a situation that is bothering you or disclosing a similar situation that they experienced before	☐	☐	☐	☐	☐

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	Don't receive at all	Receive rarely	Receive occasionally	Receive regularly	Receive a great deal
Providing you with hope or confidence	☐	☐	☐	☐	☐

For each of the items below, please indicate how much of each behavior **you actually receive** from your friend.

	Don't receive at all	Receive rarely	Receive occasionally	Receive regularly	Receive a great deal
Telling you that you are still a good person even when you have a problem	☐	☐	☐	☐	☐
Trying to reduce your feelings of guilt about a problem situation	☐	☐	☐	☐	☐
Expressing agreement with your perspective on various situations	☐	☐	☐	☐	☐

For each of the items below, please indicate how much of each behavior **you actually receive** from your friend.

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	Don't receive at all	Receive rarely	Receive occasionally	Receive regularly	Receive a great deal
Connecting you with people whom you may turn to for help	☐	☐	☐	☐	☐
Reminding you of the availability of companions who share similar interests or experiences with you	☐	☐	☐	☐	☐
Offering to spend time with you to get your mind off something (chatting, having dinner together, going to a concert, etc.)	☐	☐	☐	☐	☐

For each of the items below, please indicate how much of each behavior **you actually receive** from your friend.

	Don't receive at all	Receive rarely	Receive occasionally	Receive regularly	Receive a great deal
Giving you advice about what to do	☐	☐	☐	☐	☐
Analyzing a situation with you and telling you about available choices and options	☐	☐	☐	☐	☐

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Thinking about your current relationship with your friend, please indicate your level of agreement with each of the following statements.

	Strongly disagree	Disagree	Somewhat disagree	Neither agree nor disagree	Somewhat agree	Agree	Strongly agree
I do not want this friendship to continue	☐	☐	☐	☐	☐	☐	☐
I'm ready to move on from this friendship	☐	☐	☐	☐	☐	☐	☐
I think that I would be better off without my friend	☐	☐	☐	☐	☐	☐	☐
I feel disappointment when I think about the friendship	☐	☐	☐	☐	☐	☐	☐
I feel regret when I think about the friendship	☐	☐	☐	☐	☐	☐	☐
I feel frustrated when I think about the friendship	☐	☐	☐	☐	☐	☐	☐

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Network Dynamics

Have you talked to anyone about the challenges you are experiencing while trying to support your friend?

- ☐ Yes
☐ No
☐ Unsure
☐ Prefer Not to Say

As you answer the following questions, please keep the person who you most often discussed your challenges with in mind.

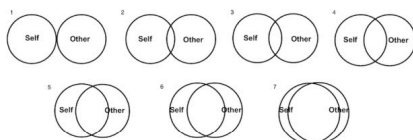
What type of relationship do you have with the person you have confided in?

Below are a series of overlapping circles that are meant to represent your relationship with your friend. The circles

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range from no overlap (indicating little or no closeness) to almost complete overlap (indicating maximal closeness).

Please consider the full expansion of your relationship with the person you have confided in. **With your entire relationship** in mind, please select the two circles that you feel best represents your closeness with this person **across time**.



- ☐ 1
☐ 2
☐ 3
☐ 4
☐ 5
☐ 6
☐ 7

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Please reflect on your experiences confiding in someone about the challenges you are experiencing while supporting your friend. I would like for you to briefly describe what those conversations have looked like. This can include what you disclose, how they have responded, how you have felt after talking to them, etc. Please respond in 3-5 sentences.

Reflecting on how you felt after confiding in your network member, please indicate your level of agreement with the following statements.

	Strongly disagree	Disagree	Somewhat disagree	Neither agree nor disagree	Somewhat agree	Agree	Strongly agree
I feel better after talking to my network member	☐	☐	☐	☐	☐	☐	☐

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	Strongly disagree	Disagree	Somewhat disagree	Neither agree nor disagree	Somewhat agree	Agree	Strongly agree
I wish my network member had not mentioned the challenges I have been experiencing	☐	☐	☐	☐	☐	☐	☐
After talking to my network member, I feel less depressed	☐	☐	☐	☐	☐	☐	☐
The way my network member talked to me irritated me	☐	☐	☐	☐	☐	☐	☐
Talking with my network member helped me get my mind off the challenges I am facing	☐	☐	☐	☐	☐	☐	☐
My network member made me feel better about myself	☐	☐	☐	☐	☐	☐	☐

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Qualtrics - Survey Subview

	Strongly disagree	Disagree	Somewhat disagree	Neither agree nor disagree	Somewhat agree	Agree	Strongly agree
I feel more optimistic after talking to my network member	☐	☐	☐	☐	☐	☐	☐
My network member doesn't seem to think I can handle my own problems	☐	☐	☐	☐	☐	☐	☐
It helped me understand my challenges better by talking it over with my network member	☐	☐	☐	☐	☐	☐	☐
My network member seemed really concerned about me	☐	☐	☐	☐	☐	☐	☐
My network member's comments were appropriate	☐	☐	☐	☐	☐	☐	☐

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Qualtrics - Survey Subview

	Strongly disagree	Disagree	Somewhat disagree	Neither agree nor disagree	Somewhat agree	Agree	Strongly agree
I felt that my network member was putting me down	☐	☐	☐	☐	☐	☐	☐
I wish my network member's comments had been briefer	☐	☐	☐	☐	☐	☐	☐

Reflecting on how you felt after confiding in your network member, please indicate your level of agreement with the following statements.

	Strongly disagree	Disagree	Neutral	Agree	Strongly agree
I feel better able to manage any emotional distress I was having	☐	☐	☐	☐	☐
It felt easier to handle any unhappiness I had about the situation	☐	☐	☐	☐	☐
I felt I was more capable of improving the situation	☐	☐	☐	☐	☐

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	Strongly disagree	Disagree	Neutral	Agree	Strongly agree
I was more confident about my ability to improve the situation	☐	☐	☐	☐	☐
I felt more strongly that I was able to make the situation better	☐	☐	☐	☐	☐
I felt more capable of dealing with any upset feelings I had	☐	☐	☐	☐	☐
I felt I need to talk with someone else in order to feel better	☐	☐	☐	☐	☐
I felt like I wanted direction from other people	☐	☐	☐	☐	☐
It seemed best to get some input on my problem from others	☐	☐	☐	☐	☐
I needed to get comforting from someone else	☐	☐	☐	☐	☐
I felt I wanted to seek emotional support from others	☐	☐	☐	☐	☐
I felt like I should get advice from someone else	☐	☐	☐	☐	☐
I intended to do what I had been advised	☐	☐	☐	☐	☐
I planned to follow the advice I was given	☐	☐	☐	☐	☐

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Strongly disagree Disagree Neutral Agree Strongly agree

It was my intention to use the advice I had been given

Did your network member offer suggestions for how you might navigate the challenges you are experiencing while supporting your friend?

☐ Yes
☐ No

Please briefly describe what suggestions your network member offered. This can include what strategies they suggested, how you felt about those options, whether you implemented any of them, etc. Please respond in 2-3 sentences.

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In general, would you say that talking to your network member about your challenges supporting your friend has...

Strongly disagree Disagree Neutral Agree Strongly agree

Made you feel closer to your network member?

Made you feel more confident in continuing to support your friend?

Made you feel less close to your network member?

Made you question how you have been supporting your friend?

Does your network member have a relationship with the friend you are struggling to support?

☐ Yes (please specify):
☐ No

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In general, what is the perception you have of how this network member is talking to your friend about their problems?

Strongly disagree Disagree Neutral Agree Strongly agree

My friend is asking my network member for just as much support as they are asking from me

My friend is asking for more support from my network member

My friend is asking for less support from my network member

My friend's requests for support are frustrating to my network member

My network member enjoys helping my friend with their problems

Does your friend know that you have talked with your shared network member about their problems?

☐ Yes
☐ No

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☐ Unsure

Why have you chosen to tell your friend/not tell your friend about the fact that you are talking about this issue with your shared network member?

Why have you decided not to talk to other people about the challenges you are experiencing while supporting your friend?

In general, how has your decision to keep these challenges to yourself felt for you?

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Qualtrics Survey Section

	Strongly Disagree	Disagree	Neutral	Agree	Strongly agree
I feel good about keeping my friend's problem to myself	☐	☐	☐	☐	☐
It is hard not to talk with other people about my friend's problem	☐	☐	☐	☐	☐

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APPENDIX C

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Consent

Thank you for your interest in this research study. Before we can include your experiences in the research, we must obtain your consent or permission to include you. Please read the following information carefully.

Project Title: Outcomes of Challenging Supportive Communication

Principal Investigator: Meara H. Faw, PhD, Associate Professor, Department of Communication Studies, Colorado State University (Meara.Faw@colostate.edu)

Co-Investigator: Kylie J. Johnson, M.A., PhD Candidate, Department of Communication Studies, Colorado State University (Kylie.Johnson@colostate.edu)

Researchers' Statement

You are invited to participate in a research study that is being conducted by a research team at Colorado State University. The purpose of this consent form is to give you the information you will need to help you decide whether to participate in the study or not. Please read this form

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carefully. You may ask questions about the purpose of the research, what you will be asked to do, the possible risks and benefits, your rights as a research participant, and anything else about the research study or this form that is not clear. Please direct any questions you have to the co-investigator via email (Kylie.Johnson@colostate.edu). When all your questions are answered, you can decide if you would like to participate in this study or not. This process is called "informed consent." You may print a copy of this text for your records.

Research Purpose

The purpose of this is to understand the individual, relational, and network outcomes of challenging support provision in friendship contexts.

Study Procedures

If you agree to participate, you will be asked to complete two online surveys through Prolific. Approximately 350 participants will take part in the study, and each individual's participation will take approximately 30 minutes per survey, 1 hour total. In order to participate in this study, all participants must identify as a support provider who is experiencing challenges while supporting a friend. You must also be 18 years of age or older and capable of completing the interview in English.

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In Survey 1, you will answer questions about yourself, the relationship you have with your friend, and the challenges you are experiencing while trying to support your friend with their a challenge or problem. Survey 2 will take place two weeks after participants complete the first survey. In Survey 2, you will answer questions about if/how your relationship with your friend as well as the support dynamics in your relationship have shifted since Survey 1. You will also respond to questions about your feelings and experiences navigating these challenges.

All study procedures will take place online, and you can choose the time of day and the place that you complete them. Your involvement in the study will only last up to 14 days.

Study Confidentiality

We will make every effort to protect the confidentiality of study records that identify you, but we cannot guarantee total confidentiality. All information gathered in this study will be kept as confidential as possible. Your privacy is very important to us, and the researchers will take every measure to protect it. Your information may be given out if required by law; however, the researchers will do their best to make sure that any information that is released will not identify you. The data collected by the researchers in this study will be anonymous. There will be no way for members

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of the research team to know whose survey responses belong to whom. Prolific participants will receive a Prolific ID, which is completely anonymized and cannot be traced to their identities in any way. If participants include identifiable information in open-ended questions, it will be de-identified. To ensure confidentiality, the screening survey will be conducted within the secure Prolific platform and will never be exported or saved on the investigators' computers

The research team will also protect the confidentiality of any information shared. Data will be stored on a password-protected OneDrive managed by Colorado State University. If information from this study is published or presented at scientific meetings, your name and other identifiable information will not be used.

The research team works to ensure confidentiality to the degree permitted by technology. It is possible, although unlikely, that unauthorized individuals could gain access to your responses because you are responding online. However, your participation in this online survey involves risks similar to a person's everyday use of the internet.

Risk, Stress, or Discomfort

During your participation in this study, you may experience stress, discomfort, or related negative emotions from sharing your experiences with challenging support

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provision, dependent on the context and the outcomes of your experiences.

You are allowed to withdraw from the study at any point in time. You may also decide to skip questions that you find invasive or uncomfortable.

If you find that your participation in this study causes you distress, we recommend you use the following resources: All participants can contact the SAMHSA's National Helpline (1-800-662-4357) or the Crisis Text Line (Text HOME to 741741).

Benefits of the Study

There is no direct benefit to you from taking part in this study; however, you may experience satisfaction in sharing your feelings and experiences related to your supportive experiences in your friendship.

The study has a lot of potential benefits for research and society. Deepening our knowledge about support provider experiences and the potential downsides/negative outcomes of support will greatly benefit and expand existing literature. Ultimately, our goal is to understand what aspects of challenging supportive relationships are associated with anti-social and/or negative outcomes, which will allow us to develop more proactive strategies for

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navigating these challenges in the future. The data from this study might lead to information that would help people have more ethical, sustainable, and satisfying supportive relationships with others as well as enhanced health and well-being.

Compensation

Participants can earn up to \$15 for participating in this study. You will be compensated for each part of the study you complete, and you will receive a bonus payment if you complete both surveys.

The table below details the payment rate for each part of the study:

First Survey	\$6
Second Survey	\$6
Bonus for completing both surveys	\$3

You will receive a payment directly via Prolific 10-14 business days after study completion.

WHO TO CONTACT

For questions or concerns about the study or study procedures, you may contact Associate Professor Meara H. Faw at Meara.Faw@colostate.edu or PhD Candidate Kylie J. Johnson at Kylie.Johnson@colostate.edu

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For questions about your rights as a research subject, as well as any complaints or comments regarding the manner in which the study is being conducted, you may contact the CSU Institutional Review Board at CSU_IRB@colostate.edu

If you have read this form in its entirety, please continue to the survey by signifying your consent. By continuing, you are agreeing to the following statements:

This study has been explained to me, and I volunteer to take part in this research. I have had a chance to ask questions via email. If I later have questions about the research, I can ask one of the researchers listed above. If I have questions about my rights as a research subject, I can contact an administrator at Colorado State University.

I have read the study information and...

☐ I consent to participate

☐ I do NOT consent to participate (direct out of study)

Update on Relational Norms

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What is your unique Prolific identification number? Please share that below.

Note: Failure to provide a Prolific identifier might result in loss of compensation.

At this moment in time, how do you categorize your friendship? Please select all that apply.

☐ Best friend

☐ Close friend

☐ Friend

☐ Casual friend

☐ Colleague- work friend

☐ Sibling

☐ Other, please specify:

In the past two weeks, have you interacted with this friend differently than you did before (i.e., more or less?)?

☐ Yes

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☐ No

How often did you interact with your friend over the past two weeks?

☐ Never
☐ Rarely
☐ A few times
☐ Often
☐ Daily or almost daily

In the past two weeks, how often did you and your friend...

	Never	Rarely	Sometimes	Often	Very often
Express thanks when one friend does something nice for each other?	☐	☐	☐	☐	☐
Try to be upbeat and cheerful when together?	☐	☐	☐	☐	☐
Make sacrifices for each other?	☐	☐	☐	☐	☐
Threaten to end the friendship because of something that happened?	☐	☐	☐	☐	☐

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	Never	Rarely	Sometimes	Often	Very often
Blame each other for bad things that happen?	☐	☐	☐	☐	☐
Not return each other's messages?	☐	☐	☐	☐	☐

In the past two weeks, how often did you and your friend...

	Never	Rarely	Sometimes	Often	Very often
Listen without making any judgment?	☐	☐	☐	☐	☐
Talk about your friendship?	☐	☐	☐	☐	☐
Try to make the other person "Feel good" about who they are?	☐	☐	☐	☐	☐

In the past two weeks, how often did you and your friend...

	Never	Rarely	Sometimes	Often	Very often
Share your private thoughts with each other?	☐	☐	☐	☐	☐
Give advice to each other?	☐	☐	☐	☐	☐

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	Never	Rarely	Sometimes	Often	Very often
Show signs of affection toward each other?	☐	☐	☐	☐	☐

In the past two weeks, how often did you and your friend...

	Never	Rarely	Sometimes	Often	Very often
Make an effort to spend time together even when you are busy?	☐	☐	☐	☐	☐
Go to social gatherings together?	☐	☐	☐	☐	☐
Get together just to hang out?	☐	☐	☐	☐	☐

Please indicate the degree to which you agree with each of the following statements regarding your relationship with your friend in the past two weeks.

	Do not agree at all	Agree slightly	Agree moderately	Agree completely
I have invested a great deal of time in our friendship	☐	☐	☐	☐

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	Do not agree at all	Agree slightly	Agree moderately	Agree completely
I have told my friend many private things about myself (I disclose secrets to them)	☐	☐	☐	☐
My friend and I share many memories	☐	☐	☐	☐

Please indicate the degree to which you agree with each of the following statements regarding your relationship with your friend in the past two weeks.

	Strongly disagree	Disagree	Neither agree nor disagree	Agree	Strongly agree
Many aspects of my life have become linked to my friend (recreational activities, etc.), and I would lose all of this if we were to stop being friends	☐	☐	☐	☐	☐
I feel very involved in our friendship—like I have put a great deal into it	☐	☐	☐	☐	☐

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Strongly disagree Disagree Neither agree nor disagree Agree Strongly agree

My relationships with friends would be complicated if we stopped being friends (e.g., my friend is friends with other people I care about)

☐ ☐ ☐ ☐ ☐

In the past two weeks, have you felt like your friend has put the same amount of effort into your friendship as you have?

☐ Yes
☐ No

Update on Supportive Context

Has the biggest challenge or problem that you have been supporting your friend with changed at all over the past two weeks?

☐ Yes
☐ No

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Strongly disagree Somewhat disagree Neither agree nor disagree Somewhat agree Strongly agree

This problem makes my friend very upset.

☐ ☐ ☐ ☐ ☐

Over the past two weeks, how frequently were you providing support?

☐ Approximately once
☐ A few times
☐ Numerous times
☐ Daily or almost daily
☐ Multiple times a day

Over the past two weeks, what did your support generally look like? What types of support did you offer your friend, and how, if at all, was your support different from before? Please describe your support in 2-3 sentences.

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Please describe how your friend's challenge has changed over the past two weeks. Your response should include details about whether things have gotten better or worse. Please describe these changes in 2-3 sentences.

Reflecting on how your friend's challenge(s) may have shifted over the past two weeks, please indicate your agreement with the following statements.

Strongly disagree Somewhat disagree Neither agree nor disagree Somewhat agree Strongly agree

I consider my friend's problem(s) to be very serious.

☐ ☐ ☐ ☐ ☐

I consider my friend's problem to be a very severe one.

☐ ☐ ☐ ☐ ☐

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In what ways has the amount and/or type of support you are providing changed within the last two weeks? Please select all that apply.

☐ I am offering less support
☐ I am offering the same amount of support
☐ I am offering more support
☐ I am offering different types of support
☐ I am offering the same types of support
☐ I am no longer offering support at all

Over the past two weeks, how has your friend expected you to support them? This can include frequency, amount, types, nature of support, etc. Please describe your friend's expectations of you in 2-3 sentences.

How have you been feeling about the expectations your friend has had over the past two weeks? This can include

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both positive and negative feelings that you may have.
Please describe your feelings in 2-3 sentences.

Reflecting on your interactions with your friend over the past two weeks, please indicate your agreement with the following statements.

	Strongly disagree	Disagree	Somewhat disagree	Neither agree nor disagree	Somewhat agree	Agree	Strongly agree
My friend and I talk through our problems and attempt to come to solutions together.	☐	☐	☐	☐	☐	☐	☐

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	Strongly disagree	Disagree	Somewhat disagree	Neither agree nor disagree	Somewhat agree	Agree	Strongly agree
There is a feeling that my friend and I are going to be stronger as a result of working through this together.	☐	☐	☐	☐	☐	☐	☐
We tend to view problems as "our problems" rather than "my" or "their" problems.	☐	☐	☐	☐	☐	☐	☐

It is important to verify that you are paying attention and reading instructions. There is an open-text box below, but you should not write anything in that text box. Please skip this question and click through to the next page to show that you have read instructions.

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Reflecting on your current relationship with your friend, please respond to the following items.

	Not at all true	Slightly true	Moderately true	Mostly true	Really true
We spend most of our time together talking about problems that my friend or I have.	☐	☐	☐	☐	☐
If one of us has a problem, we will talk about the problem rather than talking about something else or doing something else.	☐	☐	☐	☐	☐
We talk about problems my friend or I have almost every time we see each other.	☐	☐	☐	☐	☐
We keep talking even after we both know all the details about what happened.	☐	☐	☐	☐	☐
We talk a lot about how bad the person with the problem feels.	☐	☐	☐	☐	☐
We'll talk about every part of the problem over and over.	☐	☐	☐	☐	☐

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	Not at all true	Slightly true	Moderately true	Mostly true	Really true
We spend a long time talking about how sad or mad the person with the problem feels.	☐	☐	☐	☐	☐

In the past two weeks, have you ever provided support to your friend for this problem, even when you did not want to?

☐ Yes
☐ No

In the past two weeks, have you ever told your friend what they wanted to hear related to their problem, even if you did not believe in what you were saying?

☐ Yes
☐ No

In the past two weeks, have you ever created any boundaries around the amount or type of support that you

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have provided your friend related to this challenge?

☐ Yes

☐ No

Do you have any concerns or worries about what might happen if you did not provide support to your friend related to this challenge?

☐ Yes

☐ No

Can you please describe what concerns or worries you have about what might happen if you did not provide support to your friend related to this challenge? This might include concerns you have about them, their ability to cope, how it might affect your relationship, etc. Please respond in 2-3 sentences.

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In the past two weeks, have you ever not provided support to your friend related to this problem, even though you knew they wanted support?

☐ Yes

☐ No

Individual Outcomes

Reflecting on your supportive relationship, please indicate the frequency you experienced the following in the past two weeks.

	Never	Rarely	Occasionally	Sometimes	Often	Very often	Every day
I feel emotionally drained from supporting my friend	☐	☐	☐	☐	☐	☐	☐
Supporting my friend consistently is really a strain for me	☐	☐	☐	☐	☐	☐	☐
I feel frustrated by providing support	☐	☐	☐	☐	☐	☐	☐

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	Never	Rarely	Occasionally	Sometimes	Often	Very often	Every day
I feel I am working too hard to provide support	☐	☐	☐	☐	☐	☐	☐
Supporting my friend puts too much stress on me	☐	☐	☐	☐	☐	☐	☐
I feel like I am at the end of my rope	☐	☐	☐	☐	☐	☐	☐

Reflecting on your supportive relationship, please indicate the frequency you experienced the following in the past two weeks.

	Never	Rarely	Occasionally	Sometimes	Often	Very often	Every day
I feel I am positively influencing my friend's life through my support	☐	☐	☐	☐	☐	☐	☐
I feel exhilarated after supporting my friend	☐	☐	☐	☐	☐	☐	☐

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	Never	Rarely	Occasionally	Sometimes	Often	Very often	Every day
I have accomplished many worthwhile things in my friendship	☐	☐	☐	☐	☐	☐	☐

Reflecting on your supportive relationship, please indicate the frequency you experienced the following in the past two weeks.

	Never	Rarely	Occasionally	Sometimes	Often	Very often	Every day
I've become more callous toward my friend since experiencing challenges supporting them	☐	☐	☐	☐	☐	☐	☐
I worry that our friendship is hardening me emotionally	☐	☐	☐	☐	☐	☐	☐
I don't really care what happens to my friend and their challenge(s)	☐	☐	☐	☐	☐	☐	☐

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Reflecting on your supportive relationship, please indicate the frequency you experienced the following in the past two weeks.

	Never	Rarely	Occasionally	Sometimes	Often	Very often	Every day
I feel similar to my friend in many ways	☐	☐	☐	☐	☐	☐	☐
I feel personally involved with my friend's problems	☐	☐	☐	☐	☐	☐	☐
I feel uncomfortable about the way I have treated my friend	☐	☐	☐	☐	☐	☐	☐

Please select strongly agree to show you are paying attention to this question.

- ☐ Strongly disagree
☐ Disagree
☐ Neither agree nor disagree
☐ Agree
☐ Strongly agree

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Please reflect on how you have been feeling over the past two weeks when responding to the following items. How much of the last two weeks have you:

	All the time	Most of the time	A good bit of the time	Some of the time	A little of the time	None of the time
Been a very nervous person?	☐	☐	☐	☐	☐	☐
Felt downhearted and blue?	☐	☐	☐	☐	☐	☐
Felt calm and peaceful?	☐	☐	☐	☐	☐	☐
Felt so down in the dumps that nothing could cheer you up?	☐	☐	☐	☐	☐	☐
Been a happy person?	☐	☐	☐	☐	☐	☐

Reflecting on your feelings and thoughts across all aspects of your life, please indicate how often you have felt or thought the items below in the last two weeks.

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	Never	Almost never	Sometimes	Fairly often	Very often
In the last two weeks, how often have you felt that you were unable to control the important things in your life?	☐	☐	☐	☐	☐
In the last two weeks, how often have you felt confident about your ability to handle your personal problems?	☐	☐	☐	☐	☐
In the last two weeks, how often have you felt that things were going your way?	☐	☐	☐	☐	☐
In the last two weeks, how often have you felt difficulties were piling up so high that you could not overcome them?	☐	☐	☐	☐	☐

Please reflect on your experience supporting your friend and indicate to what extent you have felt the following emotions over the past two weeks.

	Very slightly or not at all	A little	Moderately	Quite a bit	Extremely
Upset	☐	☐	☐	☐	☐
Strong	☐	☐	☐	☐	☐

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	Very slightly or not at all	A little	Moderately	Quite a bit	Extremely
Guilt	☐	☐	☐	☐	☐
Scared	☐	☐	☐	☐	☐
Proud	☐	☐	☐	☐	☐
Irritable	☐	☐	☐	☐	☐
Alert	☐	☐	☐	☐	☐
Nervous	☐	☐	☐	☐	☐
Determined	☐	☐	☐	☐	☐
Attentive	☐	☐	☐	☐	☐

Relational Outcomes

Below are a series of overlapping circles that are meant to represent your relationship with your friend. The circles range from no overlap (indicating little or no closeness) to almost complete overlap (indicating maximal closeness).

Please consider your relationship with your friend over the past two weeks. **When you think about this particular time in your friendship**, please select the two circles that you feel best represents your closeness with this person.

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1 2 3 4 5 6 7

☐ 1
☐ 2
☐ 3
☐ 4
☐ 5
☐ 6
☐ 7

In the past two weeks, have you felt differently about your relationship with your friend compared to before (i.e., more or less satisfied, more or less close, etc.)?

- ☐ Yes
☐ No

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Considering your current relationship with your friend, indicate your level of agreement or disagreement with the following statements (1 = strongly disagree; 5 = strongly agree)

	Strongly disagree	Somewhat disagree	Neither agree nor disagree	Somewhat agree	Strongly agree
This friend meets my needs	☐	☐	☐	☐	☐
I am satisfied in my relationship with my friend	☐	☐	☐	☐	☐
Compared to others' friendships, my relationship with my friend is good	☐	☐	☐	☐	☐
I often wish I had not formed this relationship with my friend	☐	☐	☐	☐	☐
My relationship with my friend meets my original expectations	☐	☐	☐	☐	☐
There are problems with my relationship with my friend	☐	☐	☐	☐	☐

At this point in time, how certain are you about...

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	Completely or almost completely uncertain	Mostly uncertain	Slightly more uncertain than certain	Slightly more certain than uncertain	Mostly certain	Completely or almost completely certain
How committed you are to the friendship?	☐	☐	☐	☐	☐	☐
How much you like your friend?	☐	☐	☐	☐	☐	☐
How you feel about your friendship?	☐	☐	☐	☐	☐	☐

At this point in time, how certain are you about...

	Completely or almost completely uncertain	Mostly uncertain	Slightly more uncertain than certain	Slightly more certain than uncertain	Mostly certain	Completely or almost completely certain
How important this friendship is to you?	☐	☐	☐	☐	☐	☐
Your view of this relationship?	☐	☐	☐	☐	☐	☐
Whether or not you want to maintain your friendship?	☐	☐	☐	☐	☐	☐

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At this point in time, how certain are you about...

	Completely or almost completely uncertain	Mostly uncertain	Slightly more uncertain than certain	Slightly more certain than uncertain	Mostly certain	Completely or almost completely certain
Whether or not you want this friendship to last?	☐	☐	☐	☐	☐	☐
Your goals for the future of your friendship?	☐	☐	☐	☐	☐	☐
Whether or not you want this friendship to work out in the long run?	☐	☐	☐	☐	☐	☐

At this point in time, how certain are you about...

	Completely or almost completely uncertain	Mostly uncertain	Slightly more uncertain than certain	Slightly more certain than uncertain	Mostly certain	Completely or almost completely certain
What you can or cannot say to each other in this friendship?	☐	☐	☐	☐	☐	☐

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	Completely or almost completely uncertain	Mostly uncertain	Slightly more uncertain than certain	Slightly more certain than uncertain	Mostly certain	Completely or almost completely certain
The boundaries are appropriate and/or inappropriate behavior in this friendship?	☐	☐	☐	☐	☐	☐
The norms for this friendship?	☐	☐	☐	☐	☐	☐
How you can or cannot behave around your friend?	☐	☐	☐	☐	☐	☐

At this point in time, how certain are you about...

	Completely or almost completely uncertain	Mostly uncertain	Slightly more uncertain than certain	Slightly more certain than uncertain	Mostly certain	Completely or almost completely certain
Whether or not you and your friend feel the same way about each other?	☐	☐	☐	☐	☐	☐
How you and your friend view your friendship?	☐	☐	☐	☐	☐	☐

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	Completely or almost completely uncertain	Mostly uncertain	Slightly more uncertain than certain	Slightly more certain than uncertain	Mostly certain	Completely or almost completely certain
Whether or not your friend likes you as much as you like them?	☐	☐	☐	☐	☐	☐

At this point in time, how certain are you about...

	Completely or almost completely uncertain	Mostly uncertain	Slightly more uncertain than certain	Slightly more certain than uncertain	Mostly certain	Completely or almost completely certain
The definition of this friendship?	☐	☐	☐	☐	☐	☐
How you and your friend would describe your friendship?	☐	☐	☐	☐	☐	☐
The state of the friendship at this time?	☐	☐	☐	☐	☐	☐

At this point in time, how certain are you about...

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	Completely or almost completely uncertain	Mostly uncertain	Slightly more uncertain than certain	Slightly more certain than uncertain	Mostly certain	Completely or almost completely certain
Whether or not you and your friend will stay friends?	☐	☐	☐	☐	☐	☐
The future of your friendship?	☐	☐	☐	☐	☐	☐
Whether or not this friendship will end soon?	☐	☐	☐	☐	☐	☐

Please indicate how well each of the following represent your feelings about this friend at this moment in time.

	Not at all	To a little extent	To some extent	To a great extent	To a very great extent
To what extent do you have mixed feelings toward your friend?	☐	☐	☐	☐	☐
To what extent do you feel both positive and negative feelings toward your friend?	☐	☐	☐	☐	☐

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	Not at all	To a little extent	To some extent	To a great extent	To a very great extent
To what extent do you feel conflicted emotions/thoughts toward your friend?	☐	☐	☐	☐	☐

Please select disagree to show you are paying attention to this question.

☐ Strongly disagree

☐ Disagree

☐ Neither agree nor disagree

☐ Agree

☐ Strongly agree

Please indicate your level of agreement with the following statements.

At the present time, this friendship is...

	Strongly disagree	Disagree	Somewhat disagree	Somewhat agree	Agree	Strongly agree
Turbulent	☐	☐	☐	☐	☐	☐
Chaotic	☐	☐	☐	☐	☐	☐

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	Strongly disagree	Disagree	Somewhat disagree	Somewhat agree	Agree	Strongly agree
In turmoil	☐	☐	☐	☐	☐	☐
Tumultuous	☐	☐	☐	☐	☐	☐
Hedlic	☐	☐	☐	☐	☐	☐
Frenzied	☐	☐	☐	☐	☐	☐
Overwhelming	☐	☐	☐	☐	☐	☐
Stressful	☐	☐	☐	☐	☐	☐

Please indicate your level of agreement with the following statements at this moment in time.

	Strongly disagree	Disagree	Somewhat disagree	Somewhat agree	Agree	Strongly agree
My friend influences the amount of time I spend with other people	☐	☐	☐	☐	☐	☐
My friend influences how much time I devote to my work	☐	☐	☐	☐	☐	☐
My friend influences whether I achieve the everyday goals I set for myself (e.g., goals for exercise, diet, studying, entertainment)	☐	☐	☐	☐	☐	☐

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	Strongly disagree	Disagree	Somewhat disagree	Somewhat agree	Agree	Strongly agree
My friend influence whether I do the things I need to do each day	☐	☐	☐	☐	☐	☐

Please indicate your level of agreement with the following statements at this moment in time.

	Strongly disagree	Disagree	Somewhat disagree	Somewhat agree	Agree	Strongly agree
My friend interferes with the plans I make	☐	☐	☐	☐	☐	☐
My friend interferes with my plans to attend parties or other social events	☐	☐	☐	☐	☐	☐
My friend interferes with the amount of time I spend with other people	☐	☐	☐	☐	☐	☐
My friend interferes with how much time I devote to my work	☐	☐	☐	☐	☐	☐

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	Strongly disagree	Disagree	Somewhat disagree	Somewhat agree	Agree	Strongly agree
My friend interferes with the things I need to do each day	☐	☐	☐	☐	☐	☐

Please indicate the degree to which you agree with each of the following statements regarding your relationship with your friend.

	Strongly disagree	Disagree	Neither agree nor disagree	Agree	Strongly agree
I want our friendship to last for a very long time	☐	☐	☐	☐	☐
I am committed to maintaining my relationship with my friend	☐	☐	☐	☐	☐
I would not feel very upset if our friendship were to end in the near future	☐	☐	☐	☐	☐

Considering your current relationship with your friend, indicate your amount of agreement or disagreement with

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the following statements.

	Strongly disagree	Somewhat disagree	Neither agree nor disagree	Somewhat agree	Strongly agree
This friend meets my needs	☐	☐	☐	☐	☐
I am satisfied in my relationship with my friend	☐	☐	☐	☐	☐
Compared to others' friendships, my relationship with my friend is good	☐	☐	☐	☐	☐
I often wish I had not formed this relationship with my friend	☐	☐	☐	☐	☐
My relationship with my friend meets my original expectations	☐	☐	☐	☐	☐
There are problems with my relationship with my friend	☐	☐	☐	☐	☐

Thinking about your current relationship with your friend, please indicate your level of agreement with each of the following statements.

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	Strongly disagree	Disagree	Somewhat disagree	Neither agree no disagree	Somewhat agree	Agree	Strongly agree
I feel more optimistic after talking to my network member	☐	☐	☐	☐	☐	☐	☐
My network member doesn't seem to think I can handle my own problems	☐	☐	☐	☐	☐	☐	☐
It helped me understand my challenges better by talking it over with my network member	☐	☐	☐	☐	☐	☐	☐
My network member seemed really concerned about me	☐	☐	☐	☐	☐	☐	☐
My network member's comments were appropriate	☐	☐	☐	☐	☐	☐	☐

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	Strongly disagree	Disagree	Somewhat disagree	Neither agree no disagree	Somewhat agree	Agree	Strongly agree
I felt that my network member was putting me down	☐	☐	☐	☐	☐	☐	☐
I wish my network member's comments had been briefer	☐	☐	☐	☐	☐	☐	☐

Reflecting on how you felt after confiding in your network member over the past two weeks, please indicate your level of agreement with the following statements.

	Strongly disagree	Disagree	Neutral	Agree	Strongly agree
I feel better able to manage any emotional distress I was having	☐	☐	☐	☐	☐
It felt easier to handle any unhappiness I had about the situation	☐	☐	☐	☐	☐
I felt I was more capable of improving the situation	☐	☐	☐	☐	☐

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	Strongly disagree	Disagree	Neutral	Agree	Strongly agree
I was more confident about my ability to improve the situation	☐	☐	☐	☐	☐
I felt more strongly that I was able to make the situation better	☐	☐	☐	☐	☐
I felt more capable of dealing with any upset feelings I had	☐	☐	☐	☐	☐
I felt I need to talk with someone else in order to feel better	☐	☐	☐	☐	☐
I felt like I wanted direction from other people	☐	☐	☐	☐	☐
It seemed best to get some input on my problem from others	☐	☐	☐	☐	☐
I needed to get comforting from someone else	☐	☐	☐	☐	☐
I felt I wanted to seek emotional support from others	☐	☐	☐	☐	☐
I felt like I should get advice from someone else	☐	☐	☐	☐	☐
I intended to do what I had been advised	☐	☐	☐	☐	☐
I planned to follow the advice I was given	☐	☐	☐	☐	☐

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	Strongly disagree	Disagree	Neutral	Agree	Strongly agree
It was my intention to use the advice I had been given	☐	☐	☐	☐	☐

Has your network member offered any new suggestions for how you might navigate the challenges you are experiencing while supporting your friend?

☐ Yes
☐ No

Please briefly describe what new suggestions your network member has suggested. This can include strategies they suggested, how you felt about those options, whether you implemented them, etc. Your response should be 3-4 sentences.

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Does your friend know that you have talked with your network member about their problems?

- ☐ Yes
☐ No

Why have you chosen to tell your friend/not to tell your friend about the fact that you are talking about this issue with others?



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