



THE SOCIAL CURE: RESEARCH HIGHLIGHTS

If you could take a side-effect-free pill proven to reduce the risk of depression and anxiety, generate a sense of psychological well-being, extend life, reduce perceptions of pain, and strengthen the immune system, would you take it?

I have good news: That "pill" exists. And it's free and readily available. It's called: **social connection.**

Because we humans evolved in social packs, we're hard-wired to need interpersonal relationships and feel a sense of group belonging. In fact, good relationships may be the single most important source of psychological well-being (Peterson, 2006).



High-Quality Relationships Are Major Predictors of:

- · Mental health
- Health behavior
- Physical health
- Mortality risk

***** How Do Positive Relationships Affect Our Health?

- Influence our health-related behaviors
- Give social support
- Bolster confidence to face challenges
- Create a sense of responsibility to ourselves and others
- Aid emotion regulation
- Positively impact physiological indicators of health (e.g., immune, endocrine, and cardiovascular functioning)

Can We Have Too Many Important Relationships?

- No. There's no "threshold" for having sufficient social connection. Generally, the more the better—so long as our connections are high-quality.
- But bad relationships are major contributors to stress and poor mental and physical health.





Groups Are as Important as Relationships

- According to what's been called "Social Cure" research, belonging to groups that matter to us is just as important to our well-being as interpersonal relationships.
- People with many group memberships have higher well-being than those with few—above and beyond the number of interpersonal relationships they have.

❖ What Kinds of Groups Generate Social Cure Benefits?

- •All types of non-work social groups: Family, community, hobby groups, sports teams, social identity categories (e.g., ethnicity, race, cultural heritage, gender, sexual orientation, religion, disability, profession, university member), etc.
- **All kinds of work-related groups:** Firm, work group, department, profession, affinity groups, committees, etc.

Our need for relationships to flourish is "among the bestsupported hypotheses in the scientific study of well-being"

(Haidt et al., 2008).





***What Are The Health Benefits of Groups?**

- Reduced Ioneliness
- Less depression and anxiety
- Greater confidence and self-esteem
- Higher life satisfaction
- Improved indicators of physical health
- Faster mood recovery and better psychological well-being
- In workplaces, positive job attitudes, less burnout, psychological well-being, and group functioning

JOIN NOCOMMUNITY GROUPS



The likelihood a person with depression relapsing 4 years later

JOIN TWOCOMMUNITY GROUPS



The likelihood a person with depression relapsing 4 years later if they join two community groups

The More The Merrier

- Whether at work or at home, groups are good for us.
- Generally, the more groups we have in our lives, the better our well-being.

❖ Does Quality Matter?

Yes, the <u>quality</u> of our group connections makes a big difference. We can derive "Social Cure" benefits from groups only when we "identify" with them—which means we experience a subjective sense of belonging or a meaningful shared identity.

***** What Determines Quality?

Four features are especially important for cultivating meaningful shared identities:

POSITIVE

We have positive feelings about our groups and find them meaningful. For example, they may:

- Boost our self-esteem because we're proud to be members
- Contribute to a sense of meaningfulness based on the group's activities, mission, or contribution to a sense of being valued and mattering
- Foster a sense of belonging while also enabling individual authenticity
- Bolster our self-efficacy or confidence to take on challenges or overcome setbacks



Our groups support us in ways important to us—such as:

- Emotional support (e.g., caring, empathy, love, trust).
- Instrumental support (e.g., things, services, aid) or
- Informational support (problem-solving, appraisal, support for self-evaluation)



We feel like a prototypical member of the group—i.e., that we're similar to other group members in ways that are important to to us.



Our multiple groups are compatible when we're able to harmonize them. They're incompatible when they have contradictory expectations regarding norms, attitudes, values, and behavior.

***** Can Social Ties Harm Us?

Unfortunately, yes—social ties are not uniformly good.

Because social ties are so central to our lives and are not always high-quality, they can be sources of harm. For example, groups memberships can damage our well-being if they:

- Encourage unhealthy norms
- Are incompatible with other group memberships/identities
- Make us feel excluded or unsupported

The Goal: More High-Quality Connections

The goal is to improve the quality of our group memberships and relationships and develop social connections that we find meaningful and valuable—not just increase the number of social contacts/group memberships for their own sake.



THE BENEFITS OF HIGH SOCIAL CONNECTION:



50% increased chance of longevity



Lower rates of anxiety and depression



Higher self-esteem and empathy



Social connection creates a positive feedback loop of social, emotional, and physical well being



in ways that aid immunity

and mental health

Most common response to what gives life meaning



Reduced perception of physical pain



Hill to be climbed perceived as less steep in the presence of a friend



Better **emotion**

regulation skills

Reduced workplace burnout



Bolsters confidence to face challenges and overcome setbacks



Social connection creates a positive feedback loop of social, emotional, and physical well being



Increased goal attainment when disclosed to others

THE DANGERS OF LOW SOCIAL CONNECTION:



Worse for health than smoking, high blood pressure, or obesity



Higher inflamation at the cellular level



Higher susceptibility to anxiety and depression



Slower recovery from disease



Increased antisocial behavior and violence



Reduced immune response



References

Avanzi, L., Perinelli, E., Bressan, M., Balducci, C., Lombardi, L., Fraccaroli, F., & van Dick, R. (2021). The mediational effect of social support between organizational identification and employees' health: A three-wave study on the social cure model. *Anxiety, Stress, & Coping,* 34(4), 465-478.

Baumeister, R. F., & Leary, M. R. (1995). The need to belong: Desire for interpersonal attachments as a fundamental human motivation. *Psychological Bulletin*, 117(3), 497-529.

Bentley, S. V., Greenaway, K. H., Haslam, S. A., Cruwys, T., Steffens, N. K., Haslam, C., & Cull, B. (2020). Social identity mapping online. *Journal of Personality and Social Psychology*, 118(2), 213–241.

Brown, R. (2020). The social identity approach: Appraising the Tajfellian legacy. *British Journal of Social Psychology*, 59(1), 5–25.

Chua, S. N., Carbonneau, N., Milyavskaya, M., & Koestner, R. (2015). Beyond the self in self-control: The role of relational interdependent self-construal in goal pursuit. *Journal of Social and Personal Relationships*, 32(3), 330–343.

Coan, J. A., Schaefer, H. S., & Davidson, R. J. (2006). Lending a hand: Social regulation of the neural response to threat. *Psychological Science*, 17, 1032–1039.

Cole, S. W. (2009). Social regulation of human gene expression. Current Directions in *Psychological Science*, 18(3), 132-137.

Cruwys, T., Dingle, G. A., Haslam, C., Haslam, S. A., Jetten, J., & Morton, T. A. (2013). Social group memberships protect against future depression, alleviate depression symptoms and prevent depression relapse. *Social Science & Medicine*, 98, 179-186.

Diener, E. (2001, Feb.). *Subjective well-being*. Address presented at the annual meeting of the Society for Personality and Social Psychology, San Antonio, TX, cited in Reis & Gable (2003).

Diener, E., & Seligman, M. (2002). Very happy people. *Psychological Science*, 13, 81-84.

Dutton, J. E., & Ragins, B. R. (2007). *Exploring positive relationships at work: Building a theoretical and research foundation. Psychology Press.*

Frenzel, S. B., Junker, N. M., Häusser, J. A., Erkens, V. A., & van Dick, R. (2023). Team identification relates to lower burnout— Emotional and instrumental support as two different social cure mechanisms. *British Journal of Social Psychology*, 62(2), 673-691.

Gable, S. L. & Gosnell, C. L. (2011). The positive side of close relationships. In K. M. Sheldon, T. B. Kashdan, & M. F. Steger (Eds.), *Designing positive psychology: Taking stock and moving forward* (pp. 265-279). Oxford University Press.

Greenaway, K. H., Cruwys, T., Haslam, S. A., & Jetten, J. (2016). Social identities promote well-being because they satisfy global psychological needs. *European Journal of Social Psychology*, 46(3), 294–307. https://doi-org.ccl.idm.oclc.org/10.1002/ejsp.2169

Greenaway, K.H., Amiot, C.E., Louis, W.R., & Bentley, S. (2017). The role of psychological need satisfaction in promoting student identification. In K.I. Mavor, M. Platow, & B. Bizumic (Eds.), *Self and social identity in educational contexts* (pp.176–192). Routledge.

Haidt, J., Seder, P. J., & Kesebir, S. (2008). Hive psychology, happiness, and public policy. *Journal of Legal Studies*, 37, S133-S156.

Harris, P. R., & Easterbrook, M. J. (2024). Groups or values? Testing the effectiveness of online social cure, groupaffirmation, and self-affirmation manipulations on wellbeing outcomes. *Journal of Community & Applied Social Psychology*, 34(2), e2774.

Haslam, S. A., & van Dick, R. (2011). A social identity approach to workplace stress. In D. De Cremer, R. van Dick, & J. K. Murnighan (Eds.), *Organization and management series*. *Social psychology and organizations* (pp. 325–352). Routledge/Taylor & Francis Group.

Haslam, S. A., Haslam, C., Cruwys, T., Sharman, L. S., Hayes, S., Walter, Z., ... & Young, T. (2024). Tackling loneliness together: A three-tier social identity framework for social prescribing. *Group Processes & Intergroup Relations*, 27(5), 1128-1150.

Hayes, Shaun., Sharman, L., McNamara, N., & Dingle, G. (2024). Link workers' and clients' perspectives on how social prescribing offers a social cure for loneliness. *Journal of Health Psychology*, 1-14.





lyer A, Jetten J, Tsivrikos D, et al. (2009) The more (and the more compatible) the merrier: Multiple group memberships and identity compatibility as predictors of adjustment after life transitions. *British Journal of Social Psychology*, 48(4), 707–733.

Jetten, J., Haslam, S. A., Cruwys, T., Greenaway, K. H., Haslam, C., & Steffens, N. K. (2017). Advancing the social identity approach to health and well-being: Progressing the social cure research agenda. *European Journal of Social Psychology*, 47(7), 789-802.

Jones, J. M., & Hynie, M. (2017). Similarly torn, differentially shorn? The experience and management of conflict between multiple roles, relationships, and social categories. Frontiers in Psychology, 8 (1732), 1-16.

Khan, S. S., Hopkins, N., Tewari, S., Srinivasan, N., Reicher, S. D., & Ozakinci, G. (2014). Efficacy and well-being in rural north India: The role of social identification with a large-scale community identity. *European Journal of Social Psychology*, 44(7), 787-798.

Kok, B. E., & Fredrickson, B. L. (2013). Well-being begins with "We": The physical and mental health benefits of interventions that increase social closeness. In F. Huppert, & C. Cooper (Eds.), Wellbeing: A complete reference guide, interventions and policies to enhance wellbeing (pp. 1–29). Blackwell: John Wiley & Sons.

Kyprianides, A., Easterbrook, M. J., & Brown, R. (2019). Group identities benefit well-being by satisfying needs. *Journal of Experimental Social Psychology*, 84(July), 103836.

Lieberman, M. D. (2013). *Social: Why our brains are wired to connect*. Crown Publishers.

Matschke, C., & Fehr, J. (2015). Internal motivation buffers the negative effect of identity incompatibility on newcomers' social identification and well-being. *Social Psychology*, 46, 335–344.

National Institute for Health Research (NIHR, July 2022), Community navigator manual, Vol 2. Available at https://www.ucl.ac.uk/priment/sites/priment/files/community_navigator_programme_manual_v2_july_2022.pdf. Peterson, C. (2006). *A primer in positive psychology*. Oxford University Press.

Ramarajan, L. (2014). Past, present and future research on multiple identities: Towards an intrapersonal network approach. *Academy of Management Annals*, 8(1), 589–659.

Reis, H. T., & Gable, S. L. (2003). Toward a positive psychology of relationships. In C. L. Keyes & J. Haidt (Eds.), *Flourishing: The positive person and the good life* (pp. 129–159). American Psychological Association.

Slavich, G. M., Mengelkoch, S., & Cole, S. W. (2023). Human social genomics: Concepts, mechanisms, and implications for health. *Lifestyle Medicine*, 4(2), e75.

Steffens, N. K., Haslam, S. A., Schuh, S. C., Jetten, J., & van Dick, R. (2017). A meta-analytic review of social identification and health in organizational contexts. Personality and Social Psychology Review, 21(4), 303-335.

Stuart A, Stevenson C, Koschate M, et al. (2022) 'Oh no, not a group!' The factors that lonely or isolated people report as barriers to joining groups for health and well-being. *British Journal of Health Psychology*, 27(1), 179–193.

Taylor, S. (2011). How psychosocial resources enhance health and well-being. In S. Donaldson, M. Csikszentmihalyi, & J. Nakamura (Eds.), *Applied positive psychology (pp. 65-77). Psychology Press.*

Umberson D, Montez J. Social relationships and health: A flashpoint for health policy. *Journal of Health and Social Behavior*, 51(1 Suppl), S54–S66.

Author Bio: Dr. Anne M. Brafford, JD, MAPP, PhD, is a former law firm partner and owner of Aspire, an education and consulting firm for the legal profession. She is a co-founder of the Institute for Well-Being in Law and the creator and co-chair of the annual Well-Being Week in Law. She can be reached at abrafford@aspire.legal.

