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## **The Relationship Between Perceiv-ed Social Support and Positive Mental Health: A Review**

**Noura Ali ban maan <sup>1</sup>, Saja mohamad Al harrashi <sup>1</sup>, Hamedah baker alburaih <sup>1</sup>, Fatimah Mohammed Ahmed albeladi <sup>1</sup>, Noora fahad alfudhiekh <sup>1</sup>, Zainab Mohammed Aldawood <sup>2</sup>, Sukainah Naji Albasha <sup>2</sup>, Zainab Ali Alshakhs <sup>2</sup>, Abdullah fayed sufuq alanazi <sup>3</sup>**

1. Prince Saud bin Jalawi Hospital in Al-Ahsa
2. Alomran general hospital
3. Saudi National Guard

### **Abstract**

Perceived social support (PSS), defined as an individual's subjective belief in the availability and adequacy of support from their social network, is a cornerstone construct in understanding psychological well-being. This review synthesizes contemporary evidence on the robust, positive relationship between PSS and positive mental health (PMH), the latter conceptualized not merely as the absence of illness but as the presence of flourishing, emotional well-being, psychological resilience, and life satisfaction. Epidemiological and longitudinal studies consistently demonstrate that higher levels of PSS are associated with and predictive of greater PMH across diverse populations. Key theoretical frameworks, including the Stress-Buffering Model and the Main Effect Model, explain the mechanisms through which PSS operates, protecting against adversity and fostering continuous positive affect and self-worth. The relationship is influenced by moderating factors such as age, gender, culture, and personality traits. Critically, the *perception* of support availability is often more impactful than received support.

Interventions designed to enhance PSS, particularly through strengthening social connections and cognitive restructuring of support appraisals, show efficacy in promoting PMH. This review concludes that fostering PSS is a vital, evidence-based target for public health initiatives and clinical interventions aimed at cultivating population-wide mental health resilience and flourishing.

**Keywords:** Perceived Social Support, Positive Mental Health, Psychological Well-being, Flourishing, Resilience, Stress-Buffering, Social Determinants of Health.

### **1. Introduction**

Mental health is increasingly understood on a continuum, ranging from severe psychopathology to optimal states of well-being and functioning—a state termed positive mental health (PMH). PMH encompasses emotional well-being (e.g., happiness, contentment), psychological well-being (e.g., autonomy, purpose in life), and social well-being (e.g., social integration, contribution) [1]. Alongside this paradigm shift, the role of social determinants in shaping mental health

outcomes has gained prominence. Among these, social support is consistently identified as a critical protective factor.

Social support is a multidimensional construct comprising **received support** (tangible aid and assistance actually provided) and **perceived social support (PSS)**—the cognitive appraisal that support is available if needed. A wealth of evidence suggests that PSS, the subjective component, is more strongly and consistently linked to mental health outcomes than received support [2]. This is because PSS provides a stable sense of being cared for and belonging, which functions as a continuous psychological resource.

While extensive research has established PSS as a buffer against mental disorders like depression and anxiety, this review focuses on its relationship with *positive* mental health. Understanding how PSS contributes to flourishing, resilience, and life satisfaction is essential for moving beyond a deficit model of mental healthcare towards promotion and prevention. This review examines the nature of this relationship, dominant theoretical models, mediating and moderating factors, and implications for intervention.

## 2. Theoretical Frameworks Linking PSS and PMH

Two primary models explain how PSS influences mental health:

- ❖ **The Stress-Buffering Model:** This model posits that PSS protects mental health primarily during periods of high stress or adversity. It is theorized to function by: a) altering the cognitive appraisal of a stressful event as less threatening, and b) facilitating more adaptive coping strategies (e.g., problem-focused coping). By mitigating the negative psychological impact of stress, PSS preserves PMH indicators like emotional stability and life satisfaction [3].
- ❖ **The Main Effect (Direct Effect) Model:** This model argues that PSS benefits PMH irrespective of stress levels. It proposes that integration within a supportive social network provides: a) positive affective experiences (e.g., feelings of predictability, stability, and self-worth), and b) behavioral reinforcement for healthy behaviors (e.g., exercise, adherence to medical advice). These ongoing benefits directly enhance one's sense of flourishing, purpose, and overall well-being [4].

Empirical evidence supports both models, suggesting they are complementary rather than mutually exclusive.

## 3. Empirical Evidence for the PSS-PMH Relationship

Cross-sectional, longitudinal, and meta-analytic studies provide strong evidence for this association:

- **Cross-Sectional Correlations:** Numerous studies report significant positive correlations between PSS (measured by scales like the Multidimensional Scale of Perceived Social Support) and PMH indicators (e.g., life satisfaction, positive affect, psychological well-being scales). These associations hold across age groups, from adolescents to older adults [5].
- **Longitudinal and Predictive Studies:** Prospective research demonstrates that higher baseline PSS predicts greater PMH and lower levels of future psychological distress, even after controlling for baseline mental health. This supports a causal role for PSS in maintaining and promoting well-being over time [6].
- **Meta-Analytic Evidence:** Large-scale meta-analyses confirm a medium-to-large effect size for the relationship between social support and subjective well-being, with perceived support showing stronger effects than structural aspects of networks (e.g., size) [7].

## 4. Mediators and Moderators of the Relationship

The strength and pathway of the PSS-PMH link are influenced by several factors:

- **Mediators (Pathway Mechanisms):**
  - **Self-Esteem and Self-Efficacy:** PSS enhances feelings of self-worth and belief in one's capabilities, which in turn directly boosts PMH [8].
  - **Positive Affect and Optimism:** Supportive relationships generate positive emotions and a more optimistic outlook, key components of PMH.
  - **Health-Promoting Behaviors:** PSS encourages engagement in physical activity, better sleep, and healthcare utilization, which improve overall well-being.

- **Moderators (Boundary Conditions):**
  - **Age:** The source of support may differ; for youth, parental and peer support are crucial, while for older adults, support from partners and adult children becomes paramount.
  - **Gender:** Women often report both higher levels of PSS and place greater value on emotional support, which may strengthen the PSS-PMH link compared to men, who may emphasize instrumental support [9].
  - **Culture:** In collectivistic cultures, where interdependence is valued, social support may have an even more pronounced effect on PMH than in individualistic cultures [10].
  - **Personality:** Traits like extraversion and agreeableness may enhance both the perception of support and engagement in social networks, amplifying the benefits.

## 5. The Critical Distinction: Perceived vs. Received Support

A key finding in the literature is the "support gap." **Perceived support** is consistently a stronger predictor of PMH than **enacted or received support**. In some cases, unsolicited or poorly matched received support can even have negative effects, inducing feelings of indebtedness or inadequacy. This underscores that the *belief* in a reliable safety net is the active ingredient for psychological well-being [2].

## 6. Implications for Intervention and Practice

- ❖ **Clinical Practice:** Mental health assessments should routinely evaluate PSS. Therapies can integrate techniques to help clients identify, strengthen, and more positively appraise their support networks (e.g., cognitive restructuring for support-related beliefs).
- ❖ **Public Health & Community Interventions:** Initiatives should aim to build "social infrastructure." This includes creating community centers, facilitating social groups for at-risk populations (e.g., new parents, retirees), and using peer support programs.
- ❖ **Digital and Workplace Interventions:** Technology can be leveraged to maintain connections (especially for isolated individuals). Workplaces can foster

PMH by promoting a supportive organizational culture and team cohesion.

- ❖ **Policy:** Policies supporting paid family leave, community funding, and anti-loneliness strategies recognize social connection as a public health priority.

## 7. Conclusion

The relationship between perceived social support and positive mental health is robust, well-documented, and multifaceted. PSS acts as both a shield against the erosive effects of stress and a sustained source of positive psychological nourishment. Its influence is mediated through enhanced self-esteem, positive affect, and healthy behaviors, and is moderated by demographic and cultural factors. The primacy of perception over receipt of aid highlights the importance of cognitive and emotional aspects of relationships. Fostering environments—from the clinical setting to the broader community—that enhance individuals' perception that they are valued, cared for, and belong represents one of the most potent strategies for cultivating population-wide resilience, flourishing, and positive mental health.

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