

Regulatory Focus and the Interpersonal Dynamics of Romantic Partners' Personal Goal Discussions

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Abstract

Guided by regulatory focus theory, we examined how romantic partners' chronic concerns with promotion (advancement) and prevention (security) shape the interpersonal dynamics of couples' conversations about different types of personal goals. Members of 95 couples ($N = 190$) first completed chronic regulatory focus measures and then engaged in videotaped discussions of two types of goals that were differentially relevant to promotion and prevention concerns. Participants also completed measures of goal- and partner-relevant perceptions. Independent observers rated the discussions for support-related behaviors. Highly promotion-focused people approached their partners more, perceived greater partner responsiveness, and received more support when discussing goals that were promotion-relevant and that they perceived as less attainable. When partners' responsiveness to promotion-relevant goals was low, highly promotion-focused people reported greater self-efficacy regarding these goals. Highly prevention-focused people perceived more responsiveness when partners were less distancing during discussions of their prevention-relevant goals, and greater responsiveness perceptions reassured them that these goals are less disruptive to the relationship. These findings suggest that chronic concerns with promotion and prevention orient people to their relationship environment in ways that are consistent with these distinct motivational needs, especially when discussing goals that increase the salience of these needs.

Frank has two important goals he wants to achieve: He is eager to get a promotion at work, and he wants to pay down his credit card debt. Frank talks about each of these goals with his romantic partner, Ava. Will Frank discuss one of these goals more openly than the other with Ava? Will his perceptions of and behaviors toward Ava differ, depending on which goal he discusses? Which factors will predict whether and when he perceives Ava as responsive? And how will Frank respond if Ava does not support his goals?

We suggest that the *broader motivational concerns* that underlie specific personal goals should affect how romantic partners communicate about their goals. Personal goals and motivational systems have been shown to jointly shape people's affective experiences; for instance, people typically experience greater well-being when pursuing goals that are congruent with their dominant motivational needs (Brunstein, Schultheiss, & Grässmann, 1998; Job, Langens, & Brandstätter, 2009; Murray, 1938). We know little, however, about how such congruence shapes the interpersonal dynamics that take place when romantic partners try to meet their motivational needs associated with their personal goals. If a goal is more (rather than less) relevant to people's salient motivational needs, the very self-regulatory strategies that they mobilize to attain this goal should also affect when and how they attune to

their social environment, including their romantic partners. Thus, to fully understand when and how Frank adjusts his perceptions of and behaviors toward Ava and when he believes she is responsive to his goals, we must consider both *what* Frank is pursuing (i.e., how he views or represents his goals) and *how* he does so (i.e., the motivational orientation with which he pursues them).

Regulatory focus theory (Higgins, 1997) is one framework that explains how two broad motivational concerns govern how goals are represented and pursued. These concerns, we propose, should also attune people to different attributes of their partners and different aspects of their relationships as they pursue their goals, thereby impacting how partners' discussions of these goals transpire.

Promotion and Prevention Motivations

Regulatory focus theory (Higgins, 1997) proposes two independent self-regulatory orientations: (a) a *promotion focus*,

which is concerned with attaining growth and advancement through the pursuit of hopes and aspirations (i.e., goals one *hopes* to achieve), and (b) a *prevention focus*, which is concerned with maintaining security through the fulfillment of duties and obligations (i.e., goals one *must* achieve). Each regulatory focus can be temporarily activated by situational cues that emphasize needs for either advancement or security. However, prolonged exposure to environments that highlight needs for advancement or security can also generate chronic concerns about promotion and prevention, respectively. For example, chronic individual differences in regulatory focus can develop through socialization experiences, such as parenting practices that encourage either promotion or prevention concerns (Higgins & Silberman, 1998), or through extended contact with one's broader cultural context, which provides incentives for accomplishment or for meeting one's responsibilities (e.g., Lee, Aaker, & Gardner, 2000).

Whether promotion or prevention concerns are momentarily activated or chronically instilled, they should have similar psychological consequences (Higgins, 1990; but see Lisjak, Molden, & Lee, 2012). A large body of research has documented a range of psychological processes associated with promotion and prevention (see Molden, Lee, & Higgins, 2008, for a review). Promotion-focused people, for example, show increased sensitivity to the presence and absence of positive events, are concerned with autonomy needs and achieving their own optimal outcomes, and endorse achievement and self-direction values. In contrast, prevention-focused people are more sensitive to the presence and absence of negative events, are concerned with interdependence needs and meeting others' expectations, and endorse conformity and security values (e.g., Higgins, Roney, Crowe, & Hymes, 1994; Higgins & Tykocinski, 1992; Lee et al., 2000; Leikas, Lönnqvist, Verkasalo, & Lindeman, 2009).

Promotion and prevention orientations are also systematically linked to distinct goal-pursuit strategies. When people are promotion focused, they are in a state of eagerness; they try to capitalize on opportunities that might help them realize their aspirations and are concerned about missing out on opportunities. Accordingly, promotion-focused people prefer to use approach strategies and consider multiple ways of attaining goals in order to corral a wide range of opportunities for advancement (i.e., they are more "inclusive" when deciding how to pursue goals; Crowe & Higgins, 1997; Förster, Higgins, & Idson, 1998; Higgins et al., 1994). When people are prevention focused, in contrast, they are in a state of vigilance and are concerned with maintaining security by meeting their duties and responsibilities. They prefer to use avoidance strategies and narrow their consideration of means for goal attainment. That is, they are more "exclusive" when selecting goal-pursuit strategies, preferring to rely on a select few (but certain) strategies to attain their goals, even if they might miss out on advancement opportunities (Crowe & Higgins, 1997; Förster et al., 1998; Higgins et al., 1994).

Regulatory Focus and Goal Pursuit in Close Relationships

Because people usually pursue goals in social environments and romantic partners are frequently a primary source of support, the motivational concerns associated with advancement (promotion) or security (prevention) should also affect interpersonal outcomes (Molden & Winterheld, 2013). Indeed, the perceived fulfillment of motivational needs associated with promotion and prevention influences both global perceptions of well-being and relationship quality (Molden, Lucas, Finkel, Kumashiro, & Rusbult, 2009). We still know little, however, about when and how the broad motivational concerns that partners bring into actual goal-support interactions shape the way in which they respond to and perceive one another during these interactions. When people discuss personal goals with their romantic partners, the evaluative sensitivities and goal-pursuit strategies associated with their chronic promotion and prevention concerns should "attune" them to their partners in ways that facilitate fulfillment of their needs for advancement or security, respectively. This should be especially likely to occur when partners discuss goals that are of high motivational relevance to their chronic promotion or prevention concerns.

Promotion-Focused Goal Pursuit in Close Relationship Contexts

Given their strong needs for advancement and tendency to cast a wide strategic net to advance their aspirations, highly promotion-focused people should view their social environments as an opportunity to be seized upon for goal attainment. Thus, they should adjust to their relationship partners—both behaviorally and perceptually—in ways that facilitate attainment of their motivationally relevant goals (i.e., goals that are represented as aspirations).

Perceptions of Goal Attainability. While not every aspiration requires support from others, those that are more difficult to attain typically increase people's desire for support from close others (Feeney, 2004). Moreover, low perceived goal attainability can amplify their motivational priority (Carver, 2003). And, when people perceive that a goal is not progressing well (and that therefore assumes higher motivational priority), they tend to feel closer to others who can help with this goal and approach them more eagerly (Fitzsimons & Fishbach, 2010).

Thus, when a goal that can fulfill advancement needs is perceived as difficult to attain, highly promotion-focused people should try to create a goal-promotive environment to which their partners will be responsive. Specifically, highly promotion-focused people should discuss these goals more openly and thoroughly with their partners, and they should attend to their partners in an expectancy-biased manner and perceive greater responsiveness from them. This assumption is based on research showing that regulatory focus creates per-

ceptual sensitivities that are consistent with and sustain people's motivational concerns (Molden et al., 2008). In addition, to the extent that highly promotion-focused people's expectations and the behaviors of their partners interconnect in complementary ways, their *partners* should be more likely to provide responsive support when highly promotion-focused individuals believe their promotion-relevant goals are difficult to attain.

Adjusting to Low Partner Responsiveness. Romantic partners are, of course, not always supportive of each other's goals. When this happens, highly promotion-focused people should respond with eagerness-related means to their partner's reluctance to provide support for their advancement needs. This assumption is buttressed by several research findings. First, striving to attain one's aspirations highlights the need to be self-directed and autonomous, and the desire to achieve one's own agendas and optimal outcomes (Hui, Molden, & Finkel, 2013; Lee et al., 2000; Leikas et al., 2009). Second, previous research has shown that promotion-focused people are prone to illusions of control over outcomes that are, in fact, determined by chance (Langens, 2007). Third, when people deal with obstacles to their goals by redoubling the effort they put into goal pursuit (rather than coping with negative feelings due to impeded goal pursuit), engagement with the goal and its perceived value is enhanced (Higgins, Marguc, & Scholer, 2012). Hence, when partners are less supportive of their aspirations, highly promotion-focused people should muster their own self-regulatory resources and increase self-efficacious beliefs to both offset deficient partner support and sustain the eagerness associated with promotion-focused goal pursuit. Self-efficacy (i.e., the belief in one's ability to attain a given goal) contributes to motivation by increasing the amount of effort one expends on a given aspiration (Bandura, 1997), thereby increasing the chances of attaining ideal outcomes.

Prevention-Focused Goal Pursuit in Close Relationship Contexts

Although prevention-focused people tend to be less receptive to support from others (e.g., Righetti & Kumashiro, 2012), they should be sensitive to partner support under certain conditions. Given their more interdependent mind-set, highly prevention-focused people should be more aware of the potential interpersonal costs of personal goal pursuit. The extent to which one's partner appears engaged during a discussion may be one good indicator of whether the partner is "on board" with one's goals or whether these goals could strain the relationship. Indeed, previous research has found that prevention-focused people are sensitive to partner behaviors that might ensure or undermine security. During conflict, for example, prevention-focused people are particularly sensitive to their romantic partner's distancing behaviors (Winterheld & Simpson, 2011). Accordingly, when discussing their goals,

highly prevention-focused people should monitor their partners more closely and perceive greater responsiveness when their partners are less distancing while discussing goals that are most motivationally relevant to prevention-focused people (i.e., goals that are represented as responsibilities and obligations). Moreover, when highly prevention-focused people perceive greater partner responsiveness to these goals, they should feel more reassured that these goals are less disruptive to the relationship.

The Present Study

To test these ideas, we conducted a behavioral observation study with romantic couples. We first measured each partner's chronic prevention and promotion focus. One week later, couples came to the lab. Each partner chose one promotion-relevant goal (involving a hope or an aspiration) and one prevention-relevant goal (involving a responsibility or a challenge to overcome) that he or she wanted to attain. We assessed individuals' perceptions of attainability for each goal they chose, as well as their current partner approach tendency with regard to each goal. Couples then engaged in four separate videotaped discussions, taking turns discussing each partner's two goals. Immediately after each discussion, individuals whose goal was discussed reported again on their partner approach tendency, and also on the degree of their partner's responsiveness, the degree to which they felt self-efficacious with regard to the goal, and the extent to which they believed their goal could disrupt the relationship. Independent observers then rated the four discussions for various theoretically relevant behaviors.

Predictions Involving Promotion Focus

First, we predicted that highly promotion-focused individuals would report increased partner approach tendencies during the discussion of their promotion-relevant goals when they believe these goals are less attainable (Hypothesis 1). Second, highly promotion-focused individuals should perceive more partner responsiveness during the discussions of their promotion-relevant goals when they believe these goals are less attainable (Hypothesis 2). Third, if these perceptions are anchored in reality, independent observers should rate the *partners* of highly promotion-focused individuals as being more responsive during the discussions of promotion-relevant goals when highly promotion-focused individuals believe that these goals are less attainable (Hypothesis 3). Fourth, highly promotion-focused individuals should report greater self-efficacy regarding their promotion-relevant goals when they perceive less partner responsiveness (Hypothesis 4a). To conceptually replicate this prediction, we examined whether highly promotion-focused individuals would also report greater self-efficacy regarding their promotion-relevant goals when their partners were *rated* as less responsive during the discussion of these goals (Hypothesis 4b).

Predictions Involving Prevention Focus

We predicted that highly prevention-focused individuals would perceive greater partner responsiveness during the discussions of their prevention-relevant goals when their partners displayed less distancing behavior while discussing these goals (Hypothesis 5). In addition, when highly prevention-focused individuals perceive greater partner responsiveness during the discussions of their prevention-relevant goals, they should perceive these goals as less disruptive to the relationship (Hypothesis 6).

METHOD

Participants

Participants were 95 heterosexual couples (190 individuals) recruited from a metropolitan area via online advertisements posted on Craigslist.org and through flyers posted on a large midwestern university campus. To participate, partners had to be involved in an exclusive romantic relationship for at least 6 months. Each couple was paid \$50 for participating. If participants were enrolled in psychology courses, they were given extra credit for their participation. Women's average age was 22.51 years ($SD = 3.59$; range = 18–34), and men's average age was 23.91 years ($SD = 4.19$; range = 18–38). Most participants (78%) were White/Caucasian, 10% were Asian/Asian American, 3% were African/African American, 2% were Latino/Latino American, and 7% were multiracial. The average relationship length was 31.22 months ($SD = 24.73$; range = 6–142 months). Most couples were in dating relationships (78%), but some were engaged (10%) or married (12%); 44% were cohabitating.

Phase 1: Questionnaires

During Phase 1, participants completed questionnaires that included measures relevant to the hypotheses in this study (described below) as well as other measures not relevant to this study. Both partners in each relationship completed the questionnaires at home (privately and independently) 1–4 weeks before the laboratory visit.

Regulatory focus. Participants completed the 11-item Regulatory Focus Questionnaire (RFQ; Higgins et al., 2001), a well-validated measure that assesses perceived histories of self-regulation with respect to prevention concerns ($\alpha = .85$; $M = 16.79$, $SD = 3.93$) and promotion concerns ($\alpha = .71$; $M = 22.58$, $SD = 3.16$). Six items measured chronic promotion concerns (e.g., “How often do you feel like you have made progress toward being successful in life?”), and five items measured chronic prevention concerns (e.g., “Not being careful enough has gotten me into trouble at times” [reverse keyed]). Each item was answered on a 5-point Likert-type scale anchored 1 (*strongly disagree*) to 5 (*strongly agree*).

Relationship satisfaction. To ensure the hypothesized effects were not due to global relationship evaluations, participants also completed a relationship satisfaction measure (adapted from Hendrick, 1988; e.g., “In general, how satisfied are you with your relationship?”). Items were rated on a scale anchored 1 (*not at all*) to 7 (*extremely*; $\alpha = .82$; $M = 5.04$, $SD = 1.25$).

Phase 2: Videotaped Goal Discussions

Each couple visited the laboratory for a 2-hour session. Each partner was first led to a separate room where he or she identified a promotion-relevant goal (e.g., an aspiration) and a prevention-relevant goal (e.g., a responsibility). Each partner then completed pre-discussion measures (see below). When both partners were finished, the experimenter led them to the camera room, where they were seated across from each other at a table. Each couple had four separate discussions (lasting 7–8 min each) that were videotaped. Immediately after each discussion, both partners completed post-discussion measures in a separate room (see below). Finally, participants were debriefed, compensated, and thanked for participating. The order of the discussions was randomly assigned and counter-balanced. Possible order effects were controlled by alternating the gender of the “initiator” of each discussion. Inspection of mean differences of the dependent measures revealed no significant differences based on the order in which topics were discussed (all $ps < .05$).

Prevention-relevant goals. Before discussing their prevention-relevant goals, partners were separated and asked to identify one important goal in this category. Prevention-relevant goals were described as “goals involving responsibilities and obligations you need to meet, challenges you need to overcome, or stressors you are trying to eliminate from your life.” Participants were told to “choose any personal goal you would *very much* like to attain, no matter how big or small it might be.” It was emphasized that the goal should not be one they shared in common with their partner or one that involved a relationship concern. Participants were given a form and asked to describe the goal they chose. Examples of prevention-relevant goals included financial goals (e.g., getting out of debt), work-related or academic goals (e.g., studying for exams, finding a job), and health-related goals (e.g., quitting smoking, managing illnesses).

Promotion-relevant goals. Before discussing their promotion-relevant goals, participants underwent the same procedure. Promotion-relevant goals were described as “goals involving hopes and aspirations, dreams for the future, or personal growth goals.” The remaining instructions were identical to those described above. Examples of promotion-relevant goals included career advancement goals (e.g., getting a promotion), fitness-related goals (e.g., running a marathon),

and personal development goals (e.g., learning a foreign language, learning how to meditate).

Goal attainability and approach tendency. For each goal, participants rated how attainable the goal was on a scale ranging from 1 (*not at all*) to 7 (*extremely*). To assess participants' current partner approach tendency, they also answered the item "To what extent are you focused on discussing this goal openly and thoroughly with your partner?" on a scale ranging from 1 (*not at all*) to 7 (*a great deal*; adapted from Feeney, 2004).

After completing these measures, participants were led to the camera room and given instructions adapted from Gable, Gonzaga, and Strachman (2006). Participants were told they would first "discuss a goal involving [*description of either prevention-relevant or promotion-relevant goal*] that [*name of partner*] currently has." The process was then repeated, with the next discussion being about the other partner's goal. Participants were instructed to talk freely about anything related to the goal, such as the circumstances surrounding it, how they feel and think about it, and any other issues or details deemed relevant. With regard to their partner's goal, participants were asked "to respond to, add to, or talk about as much or as little as you would under normal circumstances." Immediately after each discussion, each partner completed the following post-discussion measures in separate rooms:

Perceived partner responsiveness. Participants who disclosed their goal (i.e., those who were potential recipients of support from their partners) completed an adapted version of Reis's Responsiveness Scale (2003; $\alpha = .95$; e.g., "My partner was responsive to my needs"). Partners answered each item on a scale ranging from 1 (*not at all true*) to 9 (*completely true*).

Self-efficacy, perceived relationship disruption, and post-discussion approach tendency. To assess self-efficacy, participants rated how confident they currently were that they could achieve the goal (Bandura, 1997, 2006) on a scale ranging from 0 (*cannot attain at all*) to 10 (*highly certain I can do it*). To assess perceived relationship disruption, participants rated the item "How much does your goal that you just discussed disrupt your relationship?" on a scale ranging from 1 (*not at all*) to 7 (*a great deal*). They also rated their partner approach tendency by answering the item "During the discussion you just had, to what extent were you focused on discussing your goal openly and thoroughly with your partner?" on a 1 (*not at all*) to 7 (*a great deal*) scale.

Phase 3: Behavioral Coding of Discussions

The videotaped discussions (four per couple) were coded by eight trained observers who were blind to the hypotheses and participants' other data. Two independent coding teams rated the behaviors displayed during each discussion. Specifically,

four coders rated each couple's two prevention-oriented goal discussions, and four other coders rated the two promotion-oriented goal discussions. Development of the coding scheme was informed by Feeney's (2004) research on responsive support of goal strivings, and by behavioral coding schemes used in previous research (e.g., Winterheld & Simpson, 2011).

Before rating the discussions, coders were given instructions and training on each rated construct. Each coder independently rated each support provider's (i.e., the individual who could provide support to the partner who disclosed his or her goal) behavior using Likert-type scales ranging from 1 (*not at all*) to 9 (*a great deal*). Specifically, the behavioral ratings assessed the extent to which support providers (a) extended *sensitive and responsive support* (e.g., encouraging the partner's goals, being sympathetic to the partner's concerns) and (b) appeared *withdrawn and distancing* (e.g., showed little interest in the partner's goal/concern, were distracted or disengaged). Inter-rater reliabilities ranged from .70 to .75 in the prevention-oriented goal discussion condition, and from .65 to .80 in the promotion-oriented goal discussion condition.

RESULTS

Descriptive statistics for the primary variables in each discussion condition are presented in Table 1, and zero-order correlations are shown in Table 2. Partners' scores were significantly correlated for several variables, indicating some degree of dyadic interdependence within couples. Therefore, the data were analyzed using the actor-partner interdependence model (APIM; Kashy & Kenny, 2000), which uses the dyad as the unit of analysis and properly models the covariance and statistical dependency that naturally exist in dyads. All APIM analyses were conducted using the MIXED program in SPSS (Version 19.0). Actor and partner effects are reported as regression coefficients. All predictor variables were centered on the grand sample mean (Aiken & West, 1991). All of the significant effects are reported below.

Overview of Hypothesis Testing

All models used to test our hypotheses included a base APIM regression model that contained the following predictor variables: discussion condition (effect coded), actors' scores on promotion focus and prevention focus, and partners' scores on promotion focus and prevention focus. Interactions were plotted using one standard deviation above and below the mean, representing high and low values for continuous predictors (Aiken & West, 1991).

In preliminary analyses, we tested for interactions with gender. Only one interaction involving gender, discussion condition, actors' promotion focus, and actors' perceived partner responsiveness predicting self-efficacy was found, $b = .05$, $t(294) = 2.41$, $p = .02$. Because at least one of the predicted

Table 1 Means and Standard Deviations of Primary Study Variables by Discussion Condition

	Discussions of Promotion Goals			Discussions of Prevention Goals		
	Men	Women	Paired Samples t-tests	Men	Women	Paired Samples t-tests
Self-reported variables						
Goal attainability	5.63 (1.36)	5.74 (1.03)	$t = -.76, p = .45$	5.38 (1.54)	4.80 (1.74)	$t = 2.54, p = .01$
Relationship disruption by goal	2.27 (1.49)	2.25 (1.57)	$t = .10, p = .92$	2.83 (1.69)	3.13 (1.89)	$t = -1.38, p = .17$
Self-efficacy	8.28 (1.77)	8.19 (1.68)	$t = -.04, p = .96$	7.73 (2.02)	6.84 (2.57)	$t = 3.06, p = .003$
Partner responsiveness	7.81 (1.28)	7.78 (1.36)	$t = .15, p = .88$	7.56 (1.38)	7.74 (1.27)	$t = -1.05, p = .30$
Approach tendency (post-discussion)	5.10 (1.81)	5.53 (1.50)	$t = -1.87, p = .06$	5.04 (1.76)	5.15 (1.69)	$t = -.48, p = .63$
Observer-rated variables						
Responsive support	6.50 (.95)	6.91 (.67)	$t = -4.35, p < .001$	6.88 (.92)	6.91 (.95)	$t = -.25, p = .80$
Distancing/withdrawal	2.68 (.83)	2.31 (.73)	$t = 4.52, p < .001$	1.75 (.85)	1.74 (.81)	$t = -.04, p = .97$

Note. $N = 95$ men, and 95 women. Standard deviations are in parentheses.

Table 2 Correlations Among Variables

	A	B	C	D	E	F	G	H	I	J	K	L	M	N	O	P	Q	R
A	—	.04	-.03	-.14	-.14	.08	-.03	.16	-.28**	.21*	.03	.02	-.06	.02	.14	.06	.07	-.01
B	.04	—	.20	.32**	.04	.37**	.36**	.19	-.14	.13	-.06	.17	-.04	-.10	-.01	.07	.06	-.12
C	.12	.22*	—	.63**	-.10	.40**	.24*	.05	.02	-.05	.08	.26*	-.27**	-.15	.03	.27**	.09	-.05
D	-.12	.31**	.61**	—	-.22*	.49**	.39**	.06	.02	-.02	.04	.13	.14	-.10	-.04	.13	.01	.01
E	-.23*	-.30**	-.13	-.10	—	-.30*	-.41**	.01	.08	-.11	-.03	-.05	-.11	-.17	-.05	-.02	-.24*	.02
F	.18	.29**	.26*	.32**	-.31**	—	.49*	.27**	-.18	.16	.09	.11	.23*	-.24*	.20	.17	.28**	-.23*
G	.12	.25*	.13	.19	-.16	.50*	—	.12	-.14	.04	.13	.03	.01	-.16	.02	.14	.11	-.12
H	.29**	.14	-.01	.11	-.17	.39**	.39**	—	-.70**	.11	.19	.15	.22*	-.26**	.43**	.11	.40**	-.40**
I	-.18	-.14	.08	-.10	.07	-.18	-.08	-.66**	—	-.21*	-.21*	-.12	-.17	.28**	-.28**	-.16	-.26*	.45**
J	.21*	.13	.09	-.05	-.37**	.29**	.09	.22*	-.13	—	.09	.10	.15	-.11	.08	-.03	.04	-.06
K	.03	-.06	.15	.18	-.09	.07	.05	.18	-.17	.09	—	.29**	.23*	-.18	.08	.06	.28**	-.29**
L	.15	.32**	.08	.16	-.14	.05	.12	-.01	.09	.06	.16	—	.58**	-.37**	.24*	.23*	.16	-.14
M	.18	.24*	.08	.27**	-.19	.26*	.14	.14	-.03	.15	.19	.60**	—	-.31**	.29**	.31**	.26*	-.18
N	-.20	-.08	-.04	-.04	.33**	-.26*	-.15	-.39**	.24*	-.21*	-.20	.10	-.20	—	-.29**	-.19	-.24*	.25*
O	.14	.02	.09	.02	-.09	.31**	.19	.32**	-.11	.16	.11	.03	.23*	-.36**	—	.29**	.14	-.04
P	.12	.03	-.03	.03	-.04	.22*	.24*	.10	.01	.08	-.01	.13	.31**	-.04	.35**	—	.07	-.01
Q	.21*	.14	.02	.14	-.10	.37**	.20	.43**	-.34*	.17	.18	.14	.27*	-.26*	.33**	.21*	—	-.54**
R	-.18	.05	-.05	-.08	.10	-.23*	-.01	-.18	.13	-.28**	-.30**	-.04	-.12	.12	-.13	-.08	-.53**	—

Note. $N = 95$ women, 95 men. The correlations for promotion goal discussions appear above the diagonal, and the correlations for prevention goal discussions appear below the diagonal. A = male prevention focus; B = male promotion focus; C = male perceived goal attainability; D = male self-efficacy; E = male perceived relationship disruption; F = male perceived partner responsiveness; G = male approach tendency; H = male responsive support (rated); I = male distancing behavior (rated); J = female prevention focus; K = female promotion focus; L = female perceived goal attainability; M = female self-efficacy; N = female perceived relationship disruption; O = female perceived partner responsiveness; P = female approach tendency; Q = female responsive support (rated); R = female distancing behavior (rated).

* $p < .05$. ** $p < .01$.

effects should be moderated by gender due merely to chance, gender is not discussed further.¹

Predictions Involving Promotion Focus

We predicted that highly promotion-focused actors would increase their partner approach tendencies during the discussions of their promotion-relevant goals (but not their prevention-relevant goals) when they believed these goals were less attainable (Hypothesis 1). To test this prediction, we used the base model (described above) and added actors' perceived goal attainability scores as a moderator. We also included the predicted three-way interaction among actors' promotion focus scores, actors' perceived goal attainability scores, and discussion condition, plus all two-way interactions that composed the three-way interaction.² To determine whether actors' promotion focus predicted a change (an increase) in approach tendency during the discussions of promotion-relevant goals, we also entered actors' approach tendency prior to the discussions as a control variable.³

Not surprisingly, actors' approach tendency prior to the discussions predicted greater approach tendency after the discussions, $b = .48$, $t(359) = 6.67$, $p < .0001$. A main effect showed that greater promotion focus predicted increased approach tendency after the discussions, $b = .07$, $t(193) = 2.24$, $p = .03$, but this effect was qualified by the predicted three-way interaction among actors' promotion focus, actors' perceived goal attainability, and discussion condition, $b = -.04$, $t(317) = -2.15$, $p = .03$. As expected, the two-way interaction between actors' promotion focus scores and actors' perceived goal attainability scores was significant for promotion-relevant goal discussions, $b = -.06$, $t(173) = -2.20$, $p = .03$, but not for prevention-relevant goal discussions, $b = .01$, $t(178) = .57$, $p = .57$. As shown in the top panel of Figure 1, simple slopes analyses confirmed that when actors' perceived attainability of their promotion-relevant goals was low, highly promotion-focused actors reported stronger approach tendencies, $b = .16$, $t = 2.71$, $p = .008$, but when actors' perceived attainability of these goals was high, their promotion focus was not associated with approach tendency, $b = -.002$, $t = -.04$, $p = .97$.⁴

To test whether highly promotion-focused actors perceived greater partner responsiveness during discussions of their promotion-relevant goals when they believed these goals were less attainable (Hypothesis 2), we repeated the same model reported above, but excluded prediscussion approach tendency scores and used actors' perceived partner responsiveness as the dependent variable. Main effects indicated that highly promotion-focused actors perceived greater responsiveness, $b = .09$, $t(157) = 3.39$, $p = .001$, as did actors who perceived greater goal attainability, $b = .13$, $t(335) = 2.88$, $p = .004$. A two-way interaction between actors' goal attainability perceptions and discussion condition, $b = .11$, $t(315) = 2.52$, $p = .01$, was qualified by a three-way interaction among actors' promotion focus, actors' perceived goal attainability, and discussion

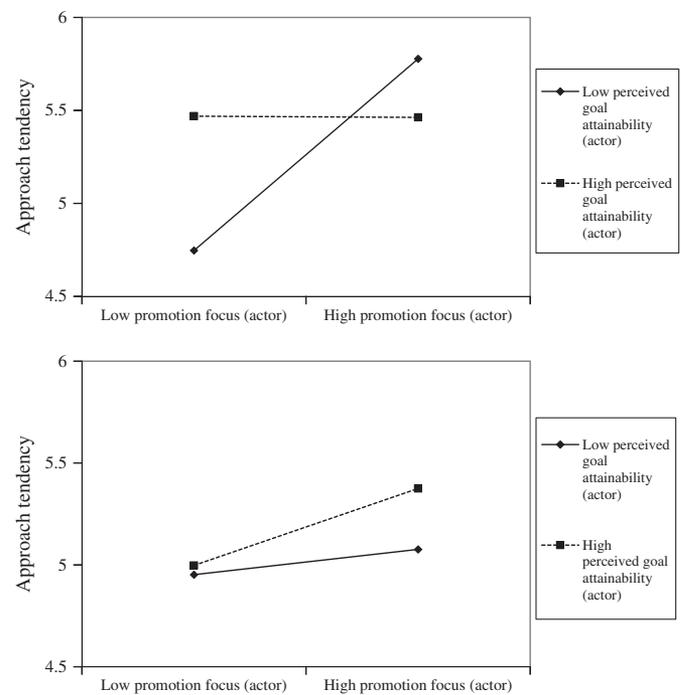


Figure 1 Approach tendency as a function of chronic promotion focus and perceived attainability of promotion-relevant goals (top panel) and prevention-relevant goals (bottom panel).

condition, $b = -.04$, $t(302) = -2.97$, $p = .003$. As expected, a two-way interaction between actors' promotion focus and actors' perceived goal attainability emerged for promotion-relevant goal discussions, $b = -.07$, $t(167) = -3.29$, $p = .001$, but not for prevention-relevant goal discussions, $b = .02$, $t(175) = 1.00$, $p = .32$. As shown in the top panel of Figure 2, when actors' perceived attainability of their promotion-relevant goals was low, greater actor promotion focus predicted higher perceptions of partner responsiveness, $b = .20$, $t = 3.81$, $p < .001$; in contrast, when perceived attainability of promotion-relevant goals was high, actors perceived more responsiveness overall, but promotion focus was not associated with perceptions of responsiveness, $b = -.02$, $t = -.43$, $p = .67$. Finally, a main effect for partner prevention focus showed that actors perceived greater responsiveness when their partners were more prevention focused, $b = .05$, $t(183) = 2.80$, $p = .006$.

When highly promotion-focused individuals thought their promotion-relevant goals were less attainable, we expected that their partners (treated as actors in this analysis) would be rated as more responsive during the discussions of promotion-relevant goals (but not prevention-relevant goals). To test this prediction (Hypothesis 3), we repeated the model reported above, but treated actors' observer-rated responsive behavior as the dependent variable. Moreover, we used partners' perceived goal attainability scores as a moderator as well as the predicted three-way interaction among partners' promotion focus scores, partners' perceived goal attainability, and discussion condition. The model also included all two-way

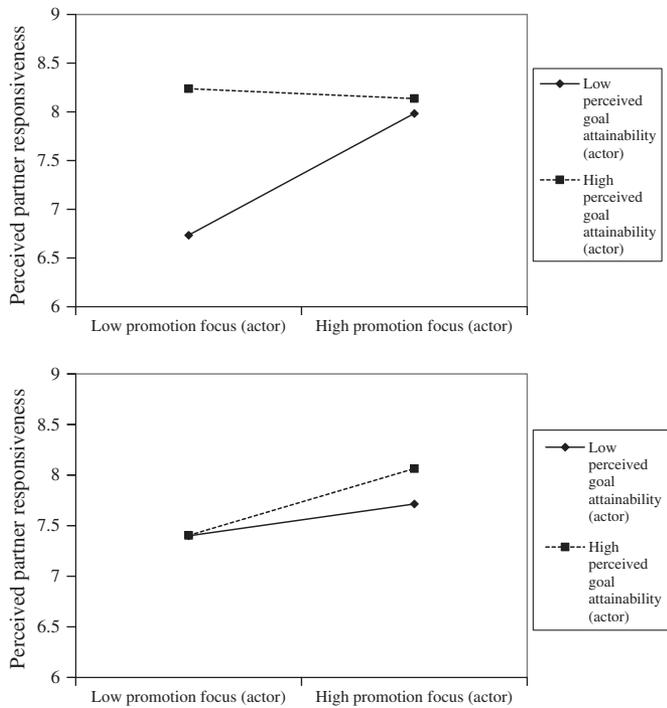


Figure 2 Perceived partner responsiveness as a function of chronic promotion focus and perceived attainability of promotion-relevant goals (top panel) and prevention-relevant goals (bottom panel).

interactions that composed the three-way interaction. A main effect of partner promotion focus showed that actors were rated as more responsive when they had highly promotion-focused partners, $b = .05$, $t(165) = 2.71$, $p = .007$. This effect was qualified by a three-way interaction among partners' promotion focus, partners' perceived goal attainability, and discussion condition, $b = -.02$, $t(307) = -2.16$, $p = .03$. As expected, partners' promotion focus and perceived goal attainability interacted only in the promotion-relevant goal discussion condition to predict actors' responsive support behavior, $b = -.03$, $t(164) = -2.38$, $p = .02$, but not in the prevention-relevant goal condition, $b = .02$, $t(171) = 1.28$, $p = .20$. As shown in the top panel of Figure 3, simple slopes analyses confirmed that actors were rated as more responsive when their partners were highly promotion focused and when these partners thought their promotion-relevant goals were less attainable, $b = .10$, $t = 2.89$, $p = .004$; when partners perceived their promotion-relevant goals as more attainable, partners' promotion focus did not predict actors' responsive support, $b = -.002$, $t = -.10$, $p = .92$. Three additional main effects emerged: Both highly promotion-focused actors, $b = .05$, $t(154) = 3.26$, $p = .001$, and highly prevention-focused actors, $b = .03$, $t(193) = 2.42$, $p = .02$, were rated as more responsive, as were actors who had highly prevention-focused partners, $b = .02$, $t(192) = 1.98$, $p = .05$.

We further predicted that highly promotion-focused actors would report greater self-efficacy (Hypothesis 4a) regarding

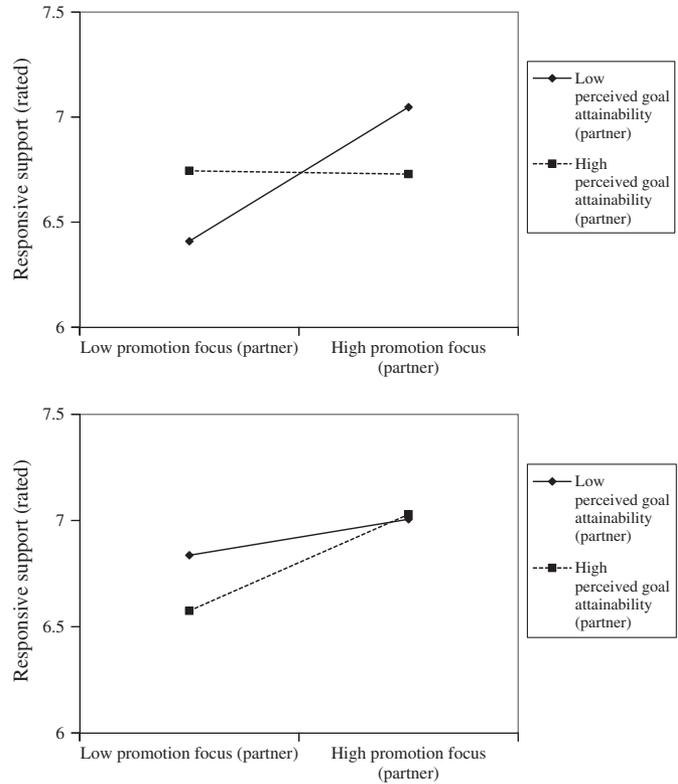


Figure 3 Responsive support (observer-rated) as a function of partners' chronic promotion focus and partners' perceived attainability of promotion-relevant goals (top panel) and prevention-relevant goals (bottom panel).

attainment of their promotion-relevant goals when they perceived their partners as less responsive to these goals. To test this prediction, we used the base model and added actors' perceived partner responsiveness scores as a moderator along with the predicted three-way interaction among actors' promotion focus, actors' perceived partner responsiveness, and discussion condition, and its associated two-way interactions. The model revealed a condition main effect, such that actors reported greater self-efficacy after discussing promotion-oriented goals than after discussing prevention-oriented goals, $b = .50$, $t(273) = 5.40$, $p < .001$. Highly promotion-focused actors reported greater self-efficacy after both discussions, $b = .15$, $t(198) = 4.30$, $p < .0001$, as did actors who perceived more responsiveness, $b = .37$, $t(319) = 4.54$, $p < .0001$. However, these main effects were qualified by a significant three-way interaction among actors' promotion focus, actors' perceived partner responsiveness, and discussion condition, $b = -.07$, $t(298) = -3.28$, $p = .001$. As anticipated, the two-way interaction between actors' promotion focus and perceived responsiveness was significant only for promotion-relevant goal discussions, $b = -.09$, $t(175) = -3.86$, $p < .0001$, and not for prevention-relevant goal discussions, $b = .06$, $t(167) = 1.53$, $p = .13$. As depicted in the top panel of Figure 4a, when perceived responsiveness for their promotion-relevant goals was low, highly promotion-focused actors

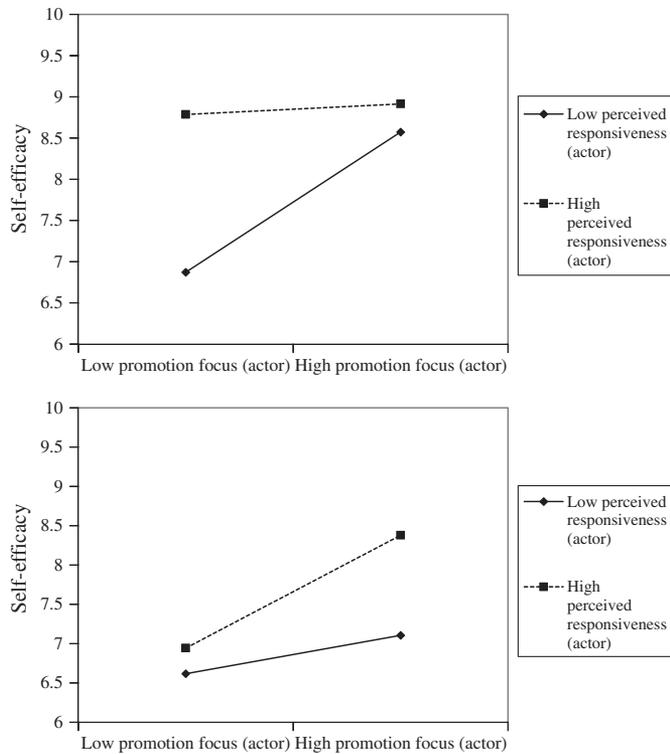


Figure 4a Self-efficacy as a function of actors' chronic promotion focus and perceived partner responsiveness during discussions of promotion-relevant goals (top panel) and prevention-relevant goals (bottom panel).

reported greater self-efficacy with respect to these goals, $b = .27$, $t = 5.50$, $p < .0001$; when perceived partner responsiveness for promotion-relevant goals was high, actors reported greater self-efficacy overall, but this association was not related to actors' level of promotion focus, $b = .02$, $t = -.43$, $p = .67$. The model also revealed that actors reported greater self-efficacy when their partners were more promotion focused, $b = .10$, $t(194) = 2.95$, $p = .004$.

We next tested whether highly promotion-focused actors responded with greater self-efficacy regarding their promotion-relevant goals when their partners were *rated* as being less responsive while discussing these goals (Hypothesis 4b). We used the same model that tested Hypothesis 4a, but replaced actors' perceived partner responsiveness with partners' observer-rated responsiveness as a moderator. Once again, the model revealed the predicted three-way interaction among actors' promotion focus, partners' rated responsiveness, and discussion condition, $b = -.13$, $t(302) = -3.59$, $p = .0001$. A two-way interaction between actors' promotion focus and partners' responsiveness emerged in the promotion-relevant goal discussion only, $b = -.16$, $t(179) = -3.15$, $p = .002$, and the same interaction was marginal in the prevention-relevant goal discussion, $b = .11$, $t(156) = 1.89$, $p = .06$. As shown in the top panel of Figure 4b, when partners displayed less responsive behavior during discussions of promotion-relevant goals, highly promotion-focused actors reported greater self-

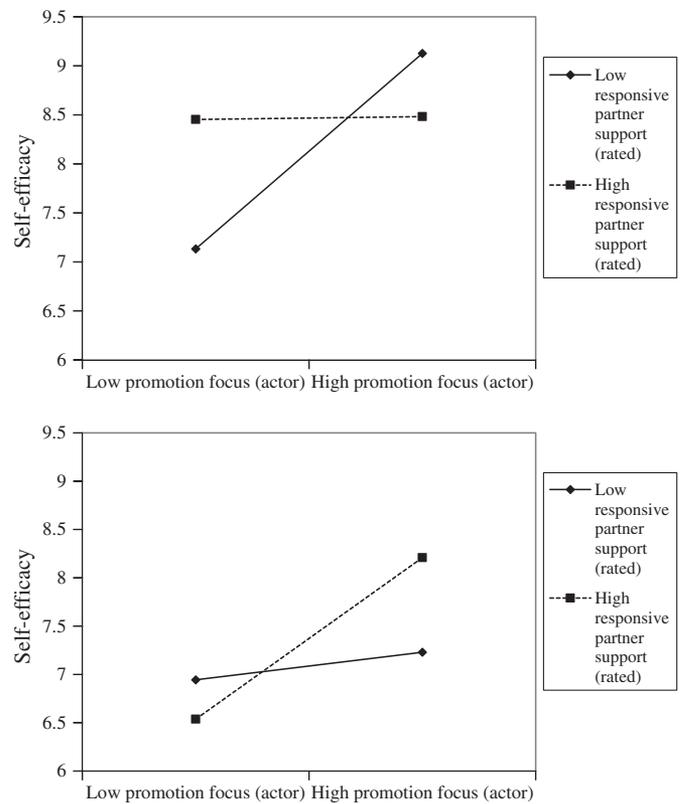


Figure 4b Self-efficacy as a function of actors' chronic promotion focus and partners' responsive support (observer rated) during discussions of promotion-relevant goals (top panel) and prevention-relevant goals (bottom panel).

efficacy with regard to these goals, $b = .32$, $t = 5.32$, $p < .0001$; when partners' rated responsiveness during these discussions was high, actors' promotion focus was not associated with their self-efficacy, $b = .005$, $t = .07$, $p = .94$.⁵

Predictions Involving Prevention Focus

We predicted that highly prevention-focused actors would perceive their partners as more responsive when their partners were less distancing during discussions of prevention-relevant goals (but not promotion-relevant goals; Hypothesis 5). To test this hypothesis, we ran the base model and added partners' observer-rated distancing scores as a moderator along with the three-way interaction among actors' prevention focus, partners' distancing scores, discussion condition, and all two-way interactions composing the three-way interaction.⁶ The model revealed a condition main effect indicating that actors perceived greater responsiveness during discussions of their promotion-relevant goals than during discussions of prevention-relevant goals, $b = .16$, $t(290) = 2.71$, $p = .007$, along with a main effect indicating that lower partner distancing predicted greater perceived responsiveness, $b = -.20$, $t(341) = -2.54$, $p = .01$. The predicted three-way interaction

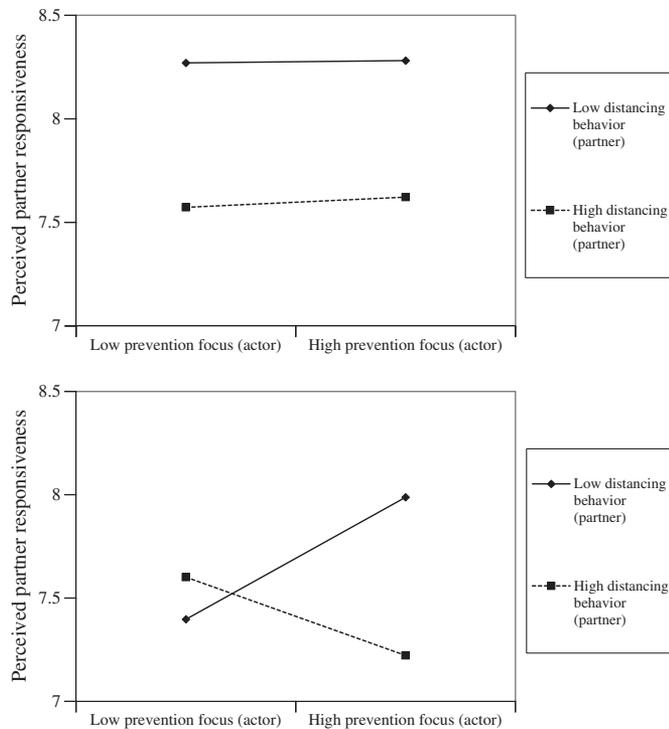


Figure 5 Perceived partner responsiveness as a function of actors' chronic prevention focus, partners' distancing behavior (observer rated), and discussion of promotion-relevant goals (top panel) and prevention-relevant goals (bottom panel).

between actors' prevention focus, partners' distancing, and discussion condition was marginally significant, $b = .03$, $t(310) = 1.84$, $p = .07$. As expected, the two-way interaction between actors' prevention focus and partners' distancing behavior was confined to prevention-relevant goal discussions, $b = -.07$, $t(160) = -2.49$, $p = .01$, and was not significant for discussions of promotion-relevant goals, $b = .005$, $t(163) = .02$, $p = .98$. As shown in the bottom panel of Figure 5, simple slopes analyses confirmed that when partners were rated as less distancing, highly prevention-focused actors perceived them as more responsive, $b = .08$, $t = 2.70$, $p = .008$; when partners were rated as highly distancing, actors' prevention focus did not predict perceptions of responsiveness, $b = -.05$, $t = -1.22$, $p = .23$. Two additional main effects showed that highly promotion-focused actors perceived more responsiveness, $b = .07$, $t(141) = 3.12$, $p = .002$, and that actors perceived greater responsiveness when their partners were more prevention focused, $b = .04$, $t(181) = 2.25$, $p = .03$.

We also predicted that highly prevention-focused actors would perceive their prevention-relevant goals as less disruptive to the relationship when they perceived greater partner responsiveness while discussing these goals (Hypothesis 6). To test this prediction, we used the base model and added actors' perceived partner responsiveness scores as a moderator along with the predicted three-way interaction (and all associated two-way interactions) among actors' prevention focus, actors'

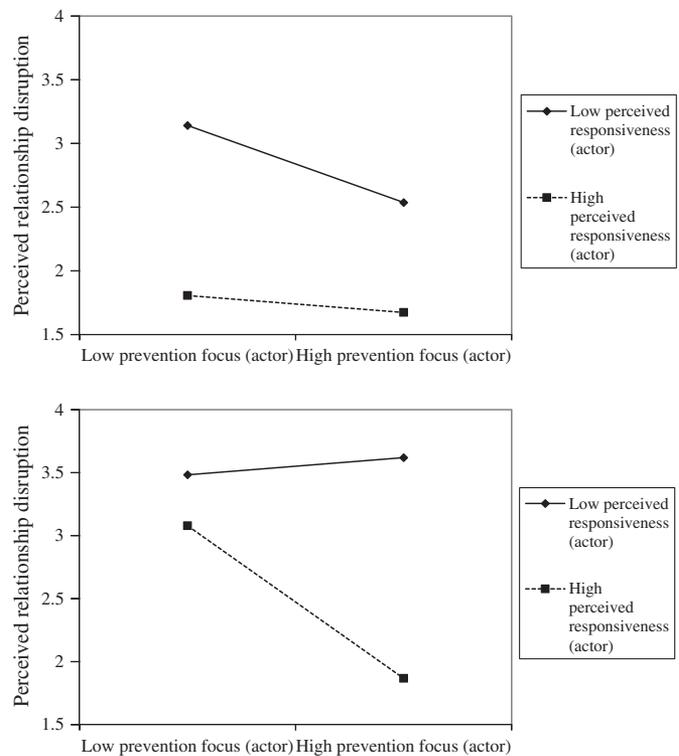


Figure 6 Perceived relationship disruption as a function of actors' chronic prevention focus, actors' perceived partner responsiveness, and discussion of promotion-relevant goals (top panel) and prevention-relevant goals (bottom panel).

perceived partner responsiveness, and discussion condition. A condition main effect revealed that actors perceived their prevention-relevant goals to be more disruptive to the relationship than their promotion-oriented goals, $b = -.36$, $t(270) = -4.83$, $p < .0001$. Two additional main effects showed that highly prevention-focused actors perceived their goals to be less disruptive, $b = -.06$, $t(248) = -2.56$, $p = .01$, as did actors who perceived greater partner responsiveness, $b = -.30$, $t(332) = -4.54$, $p < .0001$. These effects, however, were qualified by a significant three-way interaction involving actors' prevention focus, actors' perceived partner responsiveness, and discussion condition, $b = .03$, $t(290) = 2.58$, $p < .01$. As predicted, the two-way interaction between actors' prevention focus and perceived partner responsiveness was significant only for discussions of prevention-relevant goals, $b = -.05$, $t(165) = -2.28$, $p = .02$, but not for discussions of promotion-relevant goals, $b = .02$, $t(179) = .82$, $p = .41$. As shown in the bottom panel of Figure 6, simple slopes tests confirmed that highly prevention-focused actors believed their prevention-relevant goals were less disruptive to the relationship when they perceived greater partner responsiveness, $b = -.15$, $t = -2.97$, $p = .001$; when perceived responsiveness was low, actors perceived their prevention-relevant goals to be more disruptive overall, but the association was not affected by actors' level of prevention focus, $b = .02$, $t = .34$, $p = .74$. The

model also revealed that highly promotion-focused actors perceived their goals (both types) to be less disruptive, $b = -.06$, $t(177) = -2.07$, $p = .04$.

Discriminant Analyses

To discount the possibility that relationship satisfaction explains the effects reported above, we repeated all of the analyses, statistically controlling for both actors' and partners' relationship satisfaction scores. When we did, all of the hypothesized effects remained significant at $p < .05$, except for one effect, which became marginally significant, $p = .07$. Furthermore, because perceived support for promotion- and prevention-relevant goals could be differentially related to interpersonal outcomes at different relationship stages (Molden et al., 2009), we repeated all of the analyses reported above with relationship status as a control variable. When we did, all of the predicted effects remained significant (all $ps < .05$).

GENERAL DISCUSSION

Guided by regulatory focus theory, we conducted a behavioral observation study to examine whether and how chronic concerns with promotion and prevention are systematically associated with interpersonal dynamics during couples' goal discussions in different yet theoretically consistent ways. To our knowledge, this is the first study in which romantic partners discussed two goals relevant to promotion and prevention concerns and then tested how partners' chronic promotion and prevention orientations statistically interact with these goals to predict interpersonal outcomes during actual couple conversations. As expected, the findings indicate that chronic concerns with promotion and prevention orient people to their partners in ways that are in line with these distinct motivational needs, especially when they discuss goals that are congruent with, and increase the salience of, these needs. Broadly speaking, our findings are consistent with a person-by-situation approach to the understanding of interpersonal behavior (see Simpson & Winterheld, 2012).

Summary and Discussion of Primary Findings

Promotion Focus. When highly promotion-focused people's goals were both motivationally relevant (i.e., represented as aspirations) and high in motivational priority (i.e., perceived as challenging to attain), these individuals discussed these goals more openly with their partners (Hypothesis 1) and perceived greater partner responsiveness (Hypothesis 2). Perceptions of partner responsiveness were not just "in the heads" of highly promotion-focused people; highly promotion-focused people who perceived their aspirations as being less attainable actually *received* more responsive support from their partners

(as rated by independent observers; Hypothesis 3). Importantly, these results were confined to discussions of promotion-relevant goals. When discussing their *less* motivationally relevant goals (prevention-relevant goals), people's level of promotion focus and perceived goal attainability did *not* interact to predict interpersonal outcomes. Moreover, when partners were less responsive (as rated by their partners and independent observers) to promotion-relevant goals, highly promotion-focused people reported greater self-efficacy about attaining these goals (Hypothesis 4a and 4b).

Viewed as a whole, these findings suggest that highly promotion-focused people view their social environments as opportunities to be seized upon for goal advancement, especially when the motivational relevance and priority of their personal goals increase. Highly promotion-focused people's quest for and perceptual sensitivity to partner support sharply increase when goals that promise fulfillment of growth and advancement needs are more motivationally pressing (i.e., perceived as less attainable). And when partners are less supportive of their aspirations, highly promotion-focused people flexibly adjust: they increase their beliefs that they can marshal the resources necessary to attain these goals "no matter what," which ought to sustain the eagerness of promotion-focused goal pursuit.

Prevention Focus. The interpersonal dynamics during discussions of their personal goals were quite different for highly prevention-focused people. Highly prevention-focused people did not discuss their goals as openly with their partners, regardless of motivational relevance or motivational priority. Moreover, their tendency to discuss goals openly actually decreased when their goals were *less* motivationally relevant (i.e., promotion-relevant). Given their concerns about maintaining harmonious interactions with others, highly prevention-focused people might be less inclined to view and rely on their partners as a means to advance their goals.

Highly prevention-focused people were, however, sensitive to their partners' responsiveness to goals that were motivationally relevant to them. Highly prevention-focused people perceived more partner responsiveness when their partners were rated as less distancing during discussions of prevention-relevant goals (Hypothesis 5). When they perceived greater partner responsiveness, highly prevention-focused people also felt that their prevention-relevant goals were less disruptive to the relationship (Hypothesis 6). One additional finding further bolsters the premise that highly prevention-focused people are concerned with interdependence and relationship maintenance: the *partners* of highly prevention-focused people perceived them as more responsive support providers during discussions of *both* types of goals, which was confirmed by independent observers.

Considered together, these findings suggest that highly prevention-focused people might be more aware of the potential interpersonal costs of their personal goal pursuits and may treat perceptions of partner responsiveness as a barometer to

gauge such costs. Doing so is consistent with the vigilance and non-loss strivings associated with prevention concerns; it should help prevention-focused people identify the negative relationship implications that their personal goal pursuits might have, allowing them to detect and avert potential threats to relationship stability.

Contributions and Implications

Regulatory Focus in Relationships. The current research expands upon previous studies of regulatory focus in relationships in several important ways. While our findings involving promotion focus are consistent with previous work showing that promotion focus predicts greater seeking of and receptiveness to others' support (Komissarouk & Nadler, 2014; Righetti & Kumashiro, 2012), we extend this work by documenting (a) *when* and *how* highly promotion-focused people are most likely to mobilize their partner's support, and (b) how they adjust when their partners behave less responsively. For example, our findings reveal that having a promotion focus allows people to deal more effectively with changing social environments and adaptively regulate behavior and perceptions to sustain the eagerness needed to pursue promotion-focused goals. Highly promotion-focused people turned to their partners with optimistic beliefs about their partner's responsiveness, and then successfully mobilized their partner's support when their valued goals were more motivationally pressing. When their partners were less responsive to these goals, however, highly promotion-focused people directed their attention toward themselves, as indexed by their heightened self-efficacy. Future research should explore the functions that these perceptions serve in interpersonal contexts. Previous work has found that having a promotion focus is associated with illusions of control, which buffers promotion-focused people from feeling negative emotions commonly associated with failure (Langens, 2007). While promotion-focused people's increased self-efficacy in response to low partner support for their valued goals should ensure that goal advancement is not forestalled by deficient partner support, it may also enable promotion-focused people to maintain positive partner perceptions, even when their partners are not fully supportive of their aspirations.

Highly prevention-focused people in our study were less inclined to discuss their goals openly with their partners. This is consistent with prior research showing that prevention focus predicts less seeking of and less receptivity to support from others (Komissarouk & Nadler, 2014; Righetti, Finkenauer, & Rusbult, 2011; Righetti & Kumashiro, 2012). However, highly prevention-focused people perceived greater partner responsiveness when their partners were less distancing during discussions of goals that were motivationally relevant to them. Thus, highly prevention-focused people's sensitivity may be confined to situations in which security needs are salient. Although highly prevention-focused people are less likely to seek support for their personal goals, it is unlikely that they

never do so. Komissarouk and Nadler (2014), for example, found that having a prevention focus predicted dependency-oriented help seeking (rather than autonomy-oriented help seeking). An important avenue for future research is to identify the interpersonal conditions under which prevention-focused people *do* seek support from their partners.

Broader Implications. Theoretical perspectives in the social support literature suggest that support provision tends to be most effective when it matches the dominant needs of the support recipient (Cutrona, 1990). Although research has documented that partners' support for personal goals promotes individual and relational well-being (e.g., Brunstein et al., 1996), we still know relatively little about the specific interpersonal processes involved in the support of others' goal strivings. Considering the broader motivational concerns that underlie people's goals and that influence how they represent and pursue them could provide unique insights into these processes and how they enhance or undermine individual and relational well-being. For example, awareness of how one's partner characteristically represents and pursues goals might be important when calibrating responsiveness during communications about his or her goals because effective responses to a partner's most cherished goals may provide special opportunities to promote closeness and relationship well-being. Bolstering this assumption is work by Hui et al. (2013), who found that promotion-focused people evaluate their relationships more favorably when they believe their autonomy needs are supported. For prevention-focused people, on the other hand, perceived autonomy support is unrelated to perceptions of relationship well-being, but perceived support for relatedness needs does predict more favorable relationship evaluations.

The current research also contributes to the emerging body of work on self-regulation in social contexts (see Fitzsimons & Finkel, 2010), which suggests that people strategically adjust their interpersonal perceptions and behaviors to advance goal attainment (e.g., Fitzsimons & Fishbach, 2010). For example, when people perceive that a goal is not progressing well, they feel closer to and directly approach others who can help with the goal (Fitzsimons & Fishbach, 2010). Our findings suggest that people differ in the extent to which they rely on interpersonal processes for self-regulatory success, and that promotion focus may be one important individual difference variable that forecasts reliance on interpersonal self-regulatory strategies for goal advancement. More broadly, our study contributes to this body of work by examining how factors *external* to relationships (personal goals) interact with partners' personality-related characteristics to affect interpersonal dynamics in close relationships in different ways.

LIMITATIONS AND UNANSWERED ISSUES

There are, of course, some limitations and unaddressed issues associated with this study. First, our correlational findings do

not permit causal inferences. Second, although many of the couples in our study were cohabitating, most were relatively young, so our findings may not necessarily generalize to older people or more established relationships. Third, we are not claiming that promotion-focused people are always insensitive to their partner's support for their prevention-relevant goals, nor are we suggesting that prevention-focused people are always insensitive to support for their promotion-relevant goals. People are likely to pursue multiple goals at any point in time, and the priority of these goals and/or their relevance to people's promotion and prevention concerns is likely to fluctuate to some extent over time. Such shifts might affect people's sensitivity to support for these goals and temporarily heighten sensitivity to support for goals that are incongruent with their chronic promotion and prevention concerns. Fourth, concerns with both promotion and prevention can potentially both enhance or erode personal and interpersonal well-being as people pursue their individual goals. Promotion-focused people, for instance, might capitalize effectively on support from partners and thereby advance their personal agendas and goal attainment; having a promotion focus might undermine closeness, however, when individuals become overly concerned about meeting their own needs for accomplishment with little regard for the demands of the relationship. Prevention-focused people may be effective and reliable caregivers when their partners pursue important goals outside the relationship, especially when their partners encounter heavy demands. If doing so, however, comes frequently at the expense of prevention-focused people's own personal needs, resentment toward their partners might build and negatively affect their relationships over time.

Notes

1. Repeating all of the analyses with gender as a control variable did not change the statistical significance of any of the reported effects.
2. To ensure that the predicted effects were unique to promotion focus, we repeated each model testing Hypotheses 1–4 and added the parallel three-way interaction involving *prevention* focus (and its associated two-way interactions). None of the three-way interactions involving prevention focus were statistically significant, $ps > .55$ –.90.
3. We also created residualized scores in which approach tendency scores collected immediately before the discussion (Time 1) were partialled out from the approach tendency scores collected immediately after the discussion (Time 2; Cohen & Cohen, 1983). Using these change scores as the dependent variable yielded nearly identical results.
4. When we repeated the model used to test Hypothesis 1, but replaced promotion focus scores with prevention focus scores, the three-way interaction involving prevention focus, perceived goal attainability, and discussion condition was not significant, $b = .01$, $t(329) = .59$, $p = .55$. The model did, however, reveal a two-way interaction between prevention focus and discussion condition, $b = -.04$, $t(269) = -2.19$, $p = .03$, showing that highly prevention-focused

actors' approach tendency decreased when they discussed their promotion-relevant goals, $b = -.05$, $t(178) = -2.04$, $p = .04$.

5. The model also revealed the same pattern of main effects of discussion condition, actors' promotion focus, and partners' promotion focus that emerged when testing Hypothesis 4a.

6. To ensure that the predicted effects were unique to prevention focus, we repeated each model testing Hypotheses 5 and 6 and added the parallel three-way interaction involving *promotion* focus (and its associated two-way interactions). None of the three-way interactions involving promotion focus were statistically significant, $ps = .18$ –.65.

Declaration of Conflicting Interests

The authors declared no potential conflicts of interests with respect to the research, authorship, and/or publication of this article.

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