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remain possible. We discuss the strengths and weaknesses of our analysis, how government policy-makers might wish to react to it, and what kinds of further research—especially randomized trials—would be valuable.

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3 **Is Psychological Well-Being Linked to the Consumption**
4 **of Fruit and Vegetables?**

5 **David G. Blanchflower · Andrew J. Oswald · Sarah Stewart-Brown**

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8 **Abstract** Little is known about the influence of people's diet on their psychological well-
9 being. This study provides evidence of a link between the consumption of fruit and veg-
10 etables and high well-being. In cross-sectional data, happiness and mental health rise in an
11 approximately dose–response way with the number of daily portions of fruit and vegeta-
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19 might wish to react to it, and what kinds of further research—especially randomized
20 trials—would be valuable.

21 **Keywords** Subjective well-being · Healthy food · GHQ · Diet · Mental health ·
22 Depression · Happiness · WEMWBS

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23 1 Introduction

24 Thousands of papers have been published on the important topic of what determines
25 people's subjective well-being and psychological health. Little is known, however, about
26 the potential influence of the different kinds of foods that people eat. The well-known
27 review papers of Diener (1994), Diener et al. (1999), Clark et al. (2008) and Dolan et al.
28 (2008), for example, do not mention the role of human diet.

29 An electronic search on the history of the journal *Social Indicators Research* uncovers
30 only one research article (Farnworth 2009) in which the consumption of fruit and vege-
31 tables is mentioned in the Abstract or Key Words. That article is not concerned with
32 potential links to subjective well-being or mental health. Similar searches on the journals
33 *Psychological Medicine* and the *Journal of Health Economics* produce only one article
34 (Capacci and Mazzocchi 2011), and that article is not about the consequences of healthy
35 eating but rather how that might be advertised to the public. In the journal *Social Science*
36 *and Medicine* there is a larger number of published articles (approximately 30), but almost
37 none deals with connections between well-being and healthy food. One partial exception is
38 the interesting work of Dave and Kelly (2012). However, its focus is on how movements in
39 the business cycle affect both people's consumption of fruit and vegetables and their
40 mental health. Carter et al. (2011) examines the influence of 'food security', rather than the
41 direct consumption of healthy food, upon psychological distress. Recently, a small liter-
42 ature in public health has begun to find results suggestive of some form of correlation
43 between depression and lack of fruit and vegetables (for example, Piqueras et al. 2011;
44 Jacka et al. 2010; Tsai et al. 2012).

45 One reason why this lacuna in the well-being literature is paradoxical is that so much
46 attention has been paid—in sub-literatures across science and social science—to possible
47 links between physical well-being and human diet. That is reflected in policy. For more
48 than 20 years, western governments have recommended a diet in which people are advised
49 to eat five portions of fruit and vegetables a day. This policy stemmed originally from a
50 proposal in 1988 by the California Department of Health Services. The objective was to
51 reduce the incidence of cancer among Americans who, at that time, were eating fewer than
52 3 portions a day (Ness and Powles 1997). A 5-a-day policy for physical health has become
53 part of World Health Organization guidelines and been adopted by many nations. To our
54 knowledge, no government has advocated fruit and vegetables as part of a mental-health
55 policy.

56 Could the nature of food have an important potential role in humans' psychological, and
57 not just bodily, well-being? The background is that there is current interest among gov-
58 ernments in the measurement of psychological well-being (an official project is being run,
59 for example, by the UK's Office for National Statistics entitled Measuring Subjective
60 Well-being in the UK, with large-scale data collection currently being undertaken). There
61 is a still-burgeoning statistical literature on the determinants of human happiness and
62 mental well-being (Diener et al. 1999; Easterlin 2003; Graham 2005; Layard 2005; Propper
63 et al. 2005; Shields and Wheatley Price 2005; Blanchflower and Oswald 2008). Never-
64 theless, with some important exceptions, such as Graham (2008) and Powdthavee (2009),
65 there has been less work on exactly how happiness interacts with health, although it is
66 known that people's physical health conditions enter significantly in well-being equations.
67 There has been particularly little research in the modern well-being literature on the
68 consequences of people's dietary choices (except indirectly as part of research into the
69 effects of obesity).



70 The present study lies at the borders between a number of areas of social science. Its
71 specific focus is the role of fruit-and-vegetable consumption in well-being regression
72 equations. By using recent data, this study provides evidence of a positive association with
73 psychological well-being, and one that often reaches a peak at or above 5 portions a day or
74 more (in many of our equations, at approximately 7–8 portions of fruit and vegetables per
75 day). We explore the nature of this relationship in a number of data sets and for a range of
76 measures of human well-being—life satisfaction, WEMWBS mental well-being, General
77 Health Questionnaire GHQ mental disorders, self-reported health, happiness, nervousness,
78 and feeling low. We show the relationship is robust to controls for a large set of possible
79 confounders. That is important in this setting, because so many ‘healthy’ attributes,
80 including high levels of education and income, are likely to be correlated with the eating of
81 fruit and vegetables.

82 The study employs a variety of measures—they are defined individually in the
83 [Appendix](#)—under the umbrella of subjective well-being. This is to make the point that a
84 statistical link with healthy eating appears a rather general one and does not depend on the
85 use of one particular well-being variable.

86 A limitation of our analysis should be made clear from the beginning. Our data sets are
87 cross-sectional. This implies that, as in some other parts of the well-being literature, we
88 cannot draw firm inferences about causality. It is perhaps natural, nevertheless, to begin
89 with cross-sectional associations. Here these are sufficiently marked, and robust to a
90 plethora of controls for confounding influences, that the associations seem to us potentially
91 of interest to a range of researchers in well-being, and to suggest that it will be valuable to
92 create future longitudinal data sets in which fruit-and-vegetable portions are measured.

93 2 Methods

94 Many social-science surveys do not record people’s consumption of fruit and vegetables.
95 That is probably one reason why, on this issue, the well-being literature remains small. To
96 try to make progress, we obtained a number of British data sets in which dietary variables
97 have become available.

98 The data sets used are the Welsh Health Survey of 2007–2010, the Scottish Health
99 Survey of 2008, and the Health Survey of England in 2008. Each is a random sample of the
100 adult population so is representative of the respective nations. Together these samples,
101 which are cross-sectional, provide information on approximately 80,000 randomly selected
102 individuals.

103 We follow a now-long tradition—surveyed in for example Dolan et al. [2008](#)—in well-
104 being research of estimating regression equations on observational data. In such equations,
105 the dependent variable is a measure of subjective well-being or mental health. Much is
106 known about the kinds of variables that enter statistically significantly in such equations
107 (for example, Blanchflower and Oswald [2004](#) and Clark et al. [2008](#)). To allow for these
108 possible confounding effects, we incorporate independent variables and estimate equations
109 of the general form:

Psychological well-being

$$= f(\text{daily portions of fruit and vegetables consumed, age, gender, education, income, etc})$$

111 and we are then interested in the size and level of statistical significance on the variable for
112 fruit and vegetable consumption.



113 The means and standard deviations of the study's dependent variables are given in the
114 [Appendix](#) of the paper. A long set of independent variables is included in the regression
115 equations. Because they are standard in the research literature, they are not defined in full
116 each time, and vary slightly from one data set to another, but they include banded dummy
117 variables for variables such as the age of the person and his or her level of education and
118 marital status. Body mass index is represented by the acronym BMI. Income is entered in
119 the regressions in a way that has been normalized (it is so-called equivalized income) for
120 the number of people living in the household. To check robustness, many other personal
121 characteristics are included in the equations.

122 3 Results from a Range of Well-Being Regression Equations

123 The first results, given in Table 1, are for a sample of approximately 14,000 individuals
124 from the Scottish Health Surveys of 2008 and 2009. Table 1 reports regression equations—
125 one in each of three columns—in which the dependent variable is a person's life satis-
126 faction on an eleven point integer scale from zero to ten. This estimation method treats the
127 data as cardinal; switching to an ordinal estimator makes no substantive difference. The
128 mean of life satisfaction is 7.6 and its standard deviation is 1.9. The question's wording is
129 given in [Appendix](#).

130 As independent variables in the fullest life-satisfaction equation of Table 1, we include
131 7 banded-dummy variables for people's age; 1 gender dummy; 4 dummies for different
132 racial groups; 6 dummies for people's different labour force status, such as unemployed or
133 retired; 5 marital-status dummies; dummy variables for the number of children, whether
134 the person has a long-standing illness, is sexually active, is a non-smoker, is religious;
135 variables for the person's BMI and the log of their income. These variables are known from
136 the literature to enter significantly in well-being equations, so we do not comment in detail
137 on each one.

138 In its first column, Table 1 provides estimates of the raw unadjusted correlation between
139 life satisfaction and the daily number of portions of fruit and vegetables. A strong positive,
140 and almost monotonic, correlation is evident. Those people who eat 8+ portions a day have
141 a life-satisfaction score approximately 0.9 points higher than those who eat almost no
142 portions (all the fruit-and-vegetable coefficients, in this and later tables, are normalized
143 relative to the base case of eating fewer than 1–2 portions per day). Column 2 of Table 1
144 then corrects for a range of demographic characteristics: this regression equation incor-
145 porates variables for a person's age, gender, and race. There is evidence here of a strong
146 U-shape in age, in accordance with earlier literature (such as Blanchflower and Oswald
147 2008), and of low levels of life satisfaction among black people. The fruit-and-vegetable
148 gradient, however, is almost unchanged from that in column 1.

149 In column 3 of Table 1, a larger set of variables are included. These are designed to
150 correct for possible confounding factors. Importantly, because it is to be expected that fruit
151 and vegetable consumption is correlated with many aspects of socioeconomic advantage,
152 we choose to control here (and throughout later tables) for, among others, factors such as:

- 153 *Disability*
- 154 *Being unemployed*
- 155 *Marital status*
- 156 *Having children*
- 157 *Major illness*



Table 1 Life-satisfaction regression equations—Scotland, 2008/2009

1–2 portions fruit and veg	0.2735 (4.58)	0.2689 (4.52)	0.0107 (0.17)
2–3 portions fruit and veg	0.5272 (8.94)	0.5328 (9.05)	0.1315 (2.08)
3–4 portions fruit and veg	0.6406 (10.64)	0.6572 (10.91)	0.2101 (3.21)
4–5 portions fruit and veg	0.7071 (11.19)	0.7298 (11.53)	0.1977 (2.89)
5–6 portions fruit and veg	0.8243 (11.92)	0.8481 (12.24)	0.2264 (2.99)
6–7 portions fruit and veg	0.7576 (9.56)	0.7826 (9.86)	0.1738 (2.04)
7–8 portions fruit and veg	0.8568 (9.10)	0.8830 (9.38)	0.2802 (2.85)
8+ portions fruit and veg	0.8578 (10.06)	0.8960 (10.50)	0.2743 (2.94)
16–24		0.5002 (7.66)	0.4251 (4.73)
25–34		0.2986 (5.13)	0.0178 (0.27)
35–44		0.1098 (2.07)	–0.1212 (2.09)
55–64		0.1664 (3.15)	0.4015 (6.63)
65–74		0.4601 (8.27)	0.7750 (8.74)
75+		0.2582 (4.27)	0.8798 (8.32)
Male		0.0654 (2.05)	–0.0452 (1.20)
Mixed		–0.2698 (0.87)	–0.2167 (0.68)
Asian		–0.2369 (1.72)	–0.2802 (1.68)
Black		–0.8466 (3.01)	–1.0920 (3.40)
Other race		–0.3835 (1.62)	–0.4147 (1.67)
Student			0.1770 (1.54)
Disabled			–1.4861 (16.43)
Unemployed			–0.9089 (–8.02)
Retired			0.0152 (0.21)
Home worker			–0.2238 (3.01)
Other LF status			0.0329 (0.17)
Married			0.3611 (5.74)
Living together			0.2382 (3.28)
Separated			–0.2083 (2.00)
Divorced			–0.1737 (2.01)
Widowed			–0.0741 (0.82)
# kids age 2+			0.0666 (2.57)
# kids age < 2			0.2972 (3.89)
Long standing illness			–0.4368 (11.67)
Sexually active			0.5294 (11.84)
Exercise			0.0087 (4.68)
Non-smoker			0.1945 (5.55)
BMI			–0.0050 (1.53)
Non-religious			–0.1553 (4.22)
Log equivalized income			0.1752 (6.46)
Constant	7.0946 (155.34)	6.8374 (116.20)	5.3943 (16.48)
Adjusted R ²	0.0195	0.0279	0.1898
N	13,938	13,898	9,761

The dependent variable is a 10-point life satisfaction score. This and later dependent variables are explained in the [Appendix](#)

Source: Scottish Health Survey, 2008–2009. Equation 3, in the third column, also includes 8 social-class dummy variables, 6 level-of-education dummy variables and 13 region dummy variables. Base categories: age 45–54; <1 portion fruit and vegetables; and employed

t statistics are given in parentheses



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158 *Being sexually active*
159 *The amount of exercise*
160 *Smoking*
161 *Body mass index (BMI)*
162 *Being religious*
163 *Income*
164 *Social class*
165 *Education*
166 *Region.*

167 These variables again enter the study's equations with coefficients that are familiar from
168 the broader well-being literature. The role of region in Scotland's consumption of fruit and
169 vegetables has been studied before, for example by Shelton (2009), although with a pri-
170 mary emphasis on cardiovascular disease.

171 What emerges in the third column of Table 1 is that even after adjustments a marked
172 fruit-and-vegetable gradient is visible in people's scores for life satisfaction. Those indi-
173 viduals consuming 8+ portions a day have an adjusted life satisfaction score approxi-
174 mately 0.27 points higher (the exact coefficient is 0.2743 with a *t* statistic, testing against
175 the null of zero, of 2.85) than those who eat almost no fruit and vegetables.

176 It might be thought that the coefficient of 0.2743 is small. However, its size is best seen in
177 perspective of the whole regression equation. From the coefficients of column 3 of Table 1,
178 we can observe that this corresponds to a larger life-satisfaction increment than being a non-
179 smoker (0.1945), is only a little less than that from being married (0.3611), and in absolute
180 size is more than half the coefficient of having a longstanding illness (−0.4368). Being
181 unemployed, which is known from well-being research to have routinely one of the largest
182 effects in happiness equations, is associated with approximately −0.9 points.

183 Might there be confounding with the consumption of other foods? Perhaps there is no
184 beneficial effect from eating fruit and vegetables, but rather it is simply that large numbers
185 of portions signal that someone eats less meat and drinks less alcohol, and that meat and
186 alcohol, say, are somehow harmful to well-being. Later we use a further data set to adjust
187 for other dietary factors. That check is not possible in these Scottish data.

188 Table 2 moves to an equation that uses the new WEMWBS well-being measure. This is
189 closer to a positive well-being score and includes hedonic and eudaimonic perspectives.
190 The constituent parts (such as "I have been feeling optimistic" and "I have been feeling
191 useful") are discussed in Tennant et al. (2007) and the Appendix.

192 The mean of the dependent variable in Table 2 is 49.8 with a standard deviation of 8.5.
193 Once again, there is a positive association between eating fruit and vegetables and having
194 high mental well-being. In the fully adjusted estimates of column 3 of Table 2, those
195 people who eat 7–8 portions a day have a well-being score approximately 3 points greater
196 than those who eat tiny amounts of fruit and vegetables. In absolute size, this is notably
197 large. It exceeds the coefficient on being unemployed (−2.4302) and is almost half that
198 from being disabled (−6.4178). This intriguing result suggests that further research with
199 WEMWBS measures is desirable.

200 Table 3 moves to a psychiatric ill-being measure, a General Health Questionnaire GHQ
201 score. This has been widely used in the mental health literature as an indicator of psy-
202 chological morbidity (Goldberg et al. 1997; Hu et al. 2007). It is scored here on a 36-point
203 scale and has a mean of 10.8 and a standard deviation of 5.0.

204 In each column of Table 3, there is again a fruit-and-vegetable gradient. In this case,
205 mental health runs fairly flat once a person reaches 5 or more fruit and vegetable portions



Table 2 Well-being regression equations (WEMWBS measure)—Scotland, 2008/2009

1–2 portions fruit and veg	1.4959 (5.30)	1.5005 (5.33)	0.9325 (3.14)
2–3 portions fruit and veg	2.7988 (10.03)	2.8405 (10.18)	1.3958 (4.71)
3–4 portions fruit and veg	3.3428 (11.77)	3.3961 (11.95)	1.5513 (5.06)
4–5 portions fruit and veg	3.6087 (12.11)	3.6772 (12.31)	1.7527 (5.46)
5–6 portions fruit and veg	4.3548 (13.38)	4.4074 (13.50)	2.2156 (6.26)
6–7 portions fruit and veg	4.3878 (11.82)	4.4434 (11.95)	1.9799 (4.99)
7–8 portions fruit and veg	5.0435 (11.56)	5.0459 (11.55)	3.0272 (6.62)
8+ portions fruit and veg	5.3713 (13.57)	5.3553 (13.52)	2.4416 (5.63)
16–24		1.1266 (3.71)	0.7737 (1.86)
25–34		0.5433 (2.01)	–0.3234 (1.04)
35–44		0.4765 (1.94)	–0.2591 (0.96)
55–64		0.7040 (2.86)	1.8415 (6.54)
65–74		1.5851 (6.07)	3.1320 (7.58)
75+		–0.5655 (1.93)	2.1010 (4.24)
Male		0.4977 (3.33)	–0.0059 (0.03)
Mixed		0.1356 (0.10)	0.3521 (0.24)
Asian		0.9885 (1.50)	1.1099 (1.43)
Black		0.1393 (0.10)	–0.5405 (0.37)
Other race		0.1909 (0.17)	–0.4467 (0.38)
Student			0.0770 (0.14)
Disabled			–6.4178 (15.24)
Unemployed			–2.4302 (4.59)
Retired			–0.0096 (0.03)
Home worker			–0.8578 (2.46)
Other LF status			2.2840 (2.50)
Married			0.6202 (2.12)
Living together			0.6193 (1.84)
Separated			–0.5815 (1.19)
Divorced			–0.4959 (1.23)
Widowed			–0.6714 (1.58)
# kids age 2+			–0.1104 (0.92)
# kids age <2			–0.6315 (1.78)
Long standing illness			–1.9021 (10.91)
Sexually active			2.5330 (12.18)
Exercise hours			0.0755 (8.73)
Non-smoker			0.6271 (3.84)
BMI			–0.0029 (0.19)
Non-religious			–0.6021 (3.52)
Log equivalized income			0.5461 (4.29)
Constant	46.9420 (216.67)	46.1228 (167.34)	41.8787 (27.35)
Adjusted R ²	0.0304	0.0357	0.1673
N	12,667	12,661	9,559

Source: Scottish Health Survey, 2008–2009. Equation 3 also includes 8 social-class dummy variables, 6 level-of-education dummy variables and 13 region dummy variables. Base categories: age 45–54; <1 portion fruit and vegetables; and employed

t statistics are given in parentheses



Table 3 GHQ Psychological Morbidity Regression Equations—Scotland, 2008/2009

1–2 portions fruit and veg	−0.5927 (3.55)	−0.5726 (3.45)	−0.1602 (0.91)
2–3 portions fruit and veg	−1.0699 (6.47)	−1.0770 (6.54)	−0.3864 (2.19)
3–4 portions fruit and veg	−1.1731 (6.96)	−1.2155 (7.24)	−0.3377 (1.85)
4–5 portions fruit and veg	−1.1739 (6.65)	−1.2354 (7.01)	−0.3876 (2.04)
5–6 portions fruit and veg	−1.6559 (8.58)	−1.7236 (8.96)	−0.6770 (3.22)
6–7 portions fruit and veg	−1.6892 (7.69)	−1.7478 (7.97)	−0.5792 (2.46)
7–8 portions fruit and veg	−1.4662 (5.64)	−1.5447 (5.97)	−0.5801 (2.13)
8+ portions fruit and veg	−1.6961 (7.19)	−1.7734 (7.54)	−0.6394 (2.47)
16–24		−1.1628 (6.46)	−0.5764 (2.32)
25–34		−0.8098 (5.06)	−0.1119 (0.61)
35–44		−0.3741 (2.57)	0.0686 (0.43)
55–64		−0.7147 (4.90)	−1.1497 (6.84)
65–74		−1.3380 (8.67)	−1.7410 (7.07)
75+		−0.9125 (5.29)	−1.8838 (6.37)
Male		−0.9000 (10.17)	−0.7417 (7.07)
Mixed		−0.2124 (0.25)	−0.1558 (0.18)
Asian		0.1001 (0.26)	0.3298 (0.71)
Black		−0.6167 (0.76)	−0.0025 (0.00)
Other race		0.9521 (1.42)	0.9954 (1.43)
Student			0.3042 (0.96)
Disabled			4.6055 (18.24)
Unemployed			2.4640 (7.86)
Retired			−0.0513 (0.25)
Home worker			0.6220 (3.00)
Other Labour Force status			−0.2046 (0.37)
Married			0.1707 (0.98)
Living together			0.3136 (1.56)
Separated			1.2622 (4.36)
Divorced			0.7991 (3.32)
Widowed			1.0274 (4.04)
# kids age2+			0.0122 (0.17)
#kids age <2			−0.0356 (0.17)
Long standing illness			1.4743 (14.19)
Sexually active			−0.9862 (7.95)
Exercise hours per week			−0.0143 (2.78)
Non-smoker			−0.2856 (2.93)
BMI			−0.0026 (0.29)
Non-religious			0.1860 (1.82)
Log equivalized income			−0.3011 (3.99)
Constant	11.8229 (92.22)	12.9271 (79.40)	15.2779 (16.79)
Adjusted R ²	0.0096	0.0247	0.1446
N	12,770	12,763	9,592

Source: Scottish Health Survey, 2008–2009. Equation 3 also includes 8 social-class dummy variables, 6 level-of-education dummy variables, and 13 region dummy variables. Base categories: age 45–54; <1 portion fruit and vegetables; and employed

t statistics are given in parentheses



206 per week (at a coefficient in the third column, after full adjustment, of approximately 0.6).
207 The estimated effect is slightly smaller in size, when compared to coefficients on variables
208 such as unemployment (4.6055), than in equations with the earlier well-being measures.

209 The final set of regressions using Scottish data is in Table 4. Here, for completeness, the
210 dependent variable is self-reported health (*How is your health in general? Would you say it*
211 *was Very Good, Good, Fair, Bad, or Very Bad*). Its mean is 4.0 and its standard deviation is
212 0.96. In column 2 of Table 4, where there is a limited set of controls for confounding
213 influences, those who eat large amounts of fruit and vegetables have a better self-reported
214 health score than other people by a substantial amount, namely, by approximately one half
215 a point out of a possible five. Column 3 of Table 4 adjusts for the other possible con-
216 founders. Now self-reported health reaches its maximum at 7–8 portions of fruit and
217 vegetables a day. Its coefficient is rather lower at 0.1650, with a *t* statistic of 3.84, but again
218 an approximately monotonic relationship exists.

219 4 Controlling for Meat, Fish and Alcohol Consumption

220 People who are healthy in one kind of behaviour are likely to be healthy in others. A
221 potential criticism of the equations so far is that the data set makes it impossible to control
222 for other dietary factors such as fish- and meat-eating.

223 To check whether this is a difficulty, Table 5 switches to a different source of data, the
224 2008 Health Survey of England, in which more information about food intake is available.
225 This HSE provides a sample of approximately 14,000 individuals who report, among other
226 things, both their daily consumption of other foods and their alcohol intake.

227 Table 5 estimates GHQ mental distress equations for England. The key finding is that
228 the existence of a fruit-and-vegetable gradient in mental well-being is unaffected by the
229 inclusion of variables for the consumption of fish, meat and alcohol. For example, in
230 column 3 of Table 5, those consuming 6–7 portions of fruit and vegetables a week have the
231 best mental health (the coefficient is -0.8576 with a *t* statistic of 3.56). The meat and fish
232 dummy variables are not as strong in a well-being equation as might have been anticipated.
233 Eating no fish whatsoever, however, is associated with worse mental well-being. We tried
234 various specifications, and all of them left the fruit-and-vegetable gradient essentially
235 unaffected.

236 As perhaps might be expected, there is a non-linear relationship between mental well-
237 being and the consumption of alcohol. Those who drink on 1–2 days a week have the
238 lowest level of GHQ psychological disorders (in Table 5's final column). There is no
239 statistically significant difference between the GHQ score of a non-drinker and someone
240 who drinks alcohol almost every day.

241 5 Further Replication Using other Kinds of Well-Being Measures

242 Table 6 offers evidence from a third source of data. Here the sample is approximately
243 50,000 men and women who live in Wales, using merged data from the 4 years 2007–2010
244 of the Welsh Health Survey. Three new dependent variables are employed in Table 6.
245 They are coded from people's answers to: *How much of the time during the past 4 weeks...*
246 *(1) Have you been happy? (2) Have you been very nervous? (3) Have you felt downhearted*
247 *and low? - None of the time; a little of the time; some of the time; most of the time; all of*



Table 4 Self-reported health regression equations—Scotland, 2008/2009

1–2 portions fruit and veg	0.1344 (4.45)	0.1596 (5.48)	0.0429 (1.55)
2–3 portions fruit and veg	0.2421 (8.12)	0.2929 (10.16)	0.0798 (2.88)
3–4 portions fruit and veg	0.2997 (9.84)	0.3616 (12.28)	0.0954 (3.34)
4–5 portions fruit and veg	0.3460 (10.82)	0.4277 (13.81)	0.0912 (3.05)
5–6 portions fruit and veg	0.4129 (11.80)	0.4923 (14.52)	0.1362 (4.12)
6–7 portions fruit and veg	0.4097 (10.22)	0.4935 (12.71)	0.1042 (2.80)
7–8 portions fruit and veg	0.4934 (10.34)	0.5486 (11.90)	0.1650 (3.84)
8+ portions fruit and veg	0.5103 (11.82)	0.5450 (13.05)	0.1641 (4.02)
16–24		0.3486 (10.91)	–0.0283 (0.72)
25–34		0.2902 (10.18)	0.0224 (0.77)
35–44		0.1791 (6.89)	0.0204 (0.81)
55–64		–0.1682 (6.50)	0.0976 (3.69)
65–74		–0.2755 (10.11)	0.0766 (1.98)
75+		–0.4811 (16.29)	0.0079 (0.17)
Male		0.0128 (0.82)	–0.0404 (2.45)
Mixed		0.0085 (0.06)	0.0160 (0.12)
Asian		–0.1056 (1.57)	–0.1463 (2.00)
Black		0.0423 (0.31)	0.1242 (0.88)
Other race		–0.0481 (0.41)	–0.0921 (0.85)
Student			0.0581 (1.16)
Disabled			–0.9582 (24.25)
Unemployed			–0.1705 (3.44)
Retired			–0.1293 (4.06)
Home worker			–0.1634 (5.02)
Other LF status			–0.0596 (0.69)
Married			–0.0786 (2.86)
Living together			–0.0764 (2.41)
Separated			–0.0923 (2.03)
Divorced			–0.1072 (2.83)
Widowed			0.0040 (0.10)
# kids age 2+			0.0362 (3.19)
# kids age <2			0.1334 (4.00)
Long standing illness			–0.6585 (40.27)
Sexually active			0.1087 (5.56)
Exercise			0.0095 (11.67)
Non-smoker			0.1668 (10.88)
BMI			–0.0131 (9.11)
Non-religious			–0.0370 (2.30)
Log equivalized income			0.0780 (6.59)
Constant	3.7244 (161.24)	3.6954 (128.38)	3.8432 (26.88)
Adjusted R ²	0.0219	0.0944	0.3935
N	13,984	13,940	9,776

Source: Scottish Health Survey, 2008–2009. Equation 3 also includes 8 social-class dummy variables, 6 level-of-education dummy variables, and 13 region dummy variables. Base categories: age 45–54; <1 portion fruit and vegetables; and employed

t statistics are given in parentheses



Table 5 GHQ psychological morbidity regression equations—England, 2008

1–2 portions fruit and veg	–0.7800 (4.41)	–0.7947 (9.70)	–0.3977 (2.02)
2–3 portions fruit and veg	–1.0267 (5.99)	–0.7838 (4.46)	–0.5674 (2.94)
3–4 portions fruit and veg	–1.1661 (6.81)	–1.0406 (6.09)	–0.5740 (2.94)
4–5 portions fruit and veg	–1.3231 (7.52)	–1.2211 (7.14)	–0.6268 (3.10)
5–6 portions fruit and veg	–1.5454 (8.18)	–1.4173 (8.06)	–0.7943 (3.64)
6–7 portions fruit and veg	–1.4924 (7.11)	–1.6550 (8.77)	–0.8576 (3.56)
7–8 portions fruit and veg	–1.2936 (5.37)	–1.6024 (7.65)	–0.4554 (1.65)
8+ portions fruit and veg	–1.4545 (6.68)	–1.4572 (6.06)	–0.6783 (2.70)
1–4		–1.4901 (9.40)	–1.5041 (6.34)
25–34		–0.7724 (5.25)	–0.6028 (3.46)
35–44		–0.4748 (3.43)	–0.2766 (1.79)
55–64		–0.5632 (4.01)	–0.7860 (4.68)
65–74		–1.0672 (6.99)	–1.5458 (6.36)
75+		–0.5590 (3.45)	–1.4561 (5.16)
Mixed		–1.5607 (7.17)	–0.2399 (0.53)
Asian		0.2641 (0.64)	–0.3374 (1.11)
Black		0.0517 (0.27)	–1.1567 (3.41)
Other race		–0.8193 (2.95)	–0.8880 (1.60)
Male		–0.3770 (0.84)	–0.3748 (3.65)
Current smoker			0.5702 (4.32)
Past smoker			0.1155 (1.07)
Married			–0.5314 (3.34)
Civil partner			2.3068 (1.11)
Separated			1.6532 (4.87)
Divorced			0.6127 (2.66)
Widowed			–0.3719 (1.47)
Living together			0.0429 (0.23)
# days vigorous exercise in week			–0.0442 (9.79)
BMI			0.0388 (4.10)
Unemployed			1.3448 (5.03)
Retired			0.7952 (4.00)
OLF			2.6407 (16.08)
Drink alcohol almost every day			–0.0050 (0.03)
Drink 5 or 6 days/week			–0.1139 (0.52)
Drink 3 or 4 days/week			–0.2000 (1.37)
Drink once or twice/week			–0.3243 (2.72)
No meat			0.1534 (0.83)
No fish			0.4096 (2.55)
Log equivalized income			–0.3966 (5.60)
Constant	11.5932 (82.61)	12.6723 (73.90)	14.8910 (17.03)
Adjusted R ²	0.0064	0.0204	0.0898
N	14,220	14,211	10,320

Source: Health Survey of England, 2008. Equation 3 also includes 7 social-class dummy variables, 7 level-of-education dummy variables, and 8 region dummy variables. Base categories: age 45–54; <1 portion fruit and vegetables; and employed

t statistics are given in parentheses



Table 6 Regression equations for happiness, nervousness and ‘downhearted and low’—Wales, 2007–2010

	Happy	Nervous	Downhearted/low
1–2 portions fruit and veg	0.0377 (2.16)	−0.0342 (1.86)	−0.0577 (3.02)
2–3 portions fruit and veg	0.0688 (4.07)	−0.0725 (4.06)	−0.1018 (5.52)
3–4 portions fruit and veg	0.1088 (6.55)	−0.1065 (6.07)	−0.1455 (8.01)
4–5 portions fruit and veg	0.1393 (8.32)	−0.1263 (7.14)	−0.1741 (9.52)
5–6 portions fruit and veg	0.1549 (8.89)	−0.1083 (5.89)	−0.1438 (7.55)
6–7 portions fruit and veg	0.1638 (8.74)	−0.0840 (4.24)	−0.1614 (7.88)
7–8 portions fruit and veg	0.1797 (8.71)	−0.1226 (5.63)	−0.1784 (7.91)
8+ portions fruit and veg	0.1716 (9.85)	−0.0487 (2.65)	−0.1303 (6.84)
16–24	0.1360 (7.83)	0.1227 (6.69)	−0.0342 (1.80)
25–34	0.0557 (3.80)	0.1119 (7.22)	0.0436 (2.72)
35–44	0.0046 (0.36)	0.0642 (4.63)	0.0642 (4.47)
55–64	0.1140 (8.55)	−0.1467 (10.41)	−0.1654 (11.34)
65–74	0.2239 (12.73)	−0.2625 (14.10)	−0.2946 (15.31)
75+	0.2307 (11.74)	−0.2649 (12.74)	−0.2978 (13.85)
Male	0.0911 (11.39)	−0.1834 (21.69)	−0.1870 (21.35)
Limiting illness	−0.4254 (41.86)	0.3511 (32.68)	0.4324 (38.89)
# days vigorous exercise	0.0316 (12.88)	−0.0161 (6.21)	−0.0216 (8.05)
Qualification dk/NA	−0.0418 (2.06)	0.0700 (3.24)	0.0437 (1.96)
Other qualification	0.0121 (0.60)	−0.0659 (3.08)	−0.0581 (2.63)
Degree	−0.0119 (0.55)	−0.0360 (1.56)	−0.0725 (3.03)
LF no answer	−0.1316 (4.25)	0.2270 (6.90)	0.1595 (4.69)
School	0.0586 (2.82)	0.2503 (11.39)	0.0401 (1.76)
Government scheme	0.0188 (0.29)	0.1700 (2.51)	0.0817 (1.16)
Unpaid work	−0.1663 (3.55)	0.1664 (3.34)	0.2007 (3.91)
Waiting take up work	−0.1216 (1.81)	0.2967 (4.16)	0.3028 (4.10)
Unemployed	−0.1926 (6.14)	0.2719 (8.21)	0.2847 (8.29)
Temp sick	−0.5525 (8.98)	0.6227 (9.64)	0.7497 (11.11)
Long-term sick	−0.5460 (30.41)	0.7564 (39.80)	0.7284 (37.14)
Retired	−0.0268 (1.82)	0.1159 (7.43)	0.0657 (4.07)
Home worker	−0.0449 (2.89)	0.1215 (7.39)	0.0971 (5.71)
LF other	−0.0660 (2.67)	0.2269 (8.70)	0.1092 (4.04)
BMI	−0.0022 (2.96)	−0.0004 (0.50)	0.0058 (7.02)
SE Wales	0.0400 (4.48)	−0.0487 (5.15)	−0.0490 (5.01)
Mid and West Wales	0.0710 (7.48)	−0.0568 (5.66)	−0.0670 (6.45)
Smokes now	−0.1026 (9.11)	0.0920 (7.73)	0.1365 (11.08)
Smoked ever; not now	−0.0393 (4.30)	0.0238 (2.46)	0.0636 (6.35)
Constant	3.6942 (106.64)	1.7002 (46.37)	1.8650 (49.23)
Adjusted R ²	0.1293	0.1239	0.1424
N	49,972	49,835	49,946

Source: Welsh Health Survey, 2007–2010. All equations also include 3 year-dummy variables, 7 social-class dummy variables, and 4 smoking dummy variables. Base categories: age 45–54; no qualifications; North Wales; <1 portion fruit and vegetables; and employed

t statistics are given in parentheses



248 *the time?* Here the means and standard deviations are, for the three well-being measures, as
 249 follows:

<i>Happiness</i>	Mean = 3.7, SD = 0.91
<i>Nervous</i>	Mean = 1.7, SD = 0.97
<i>Downhearted and low</i>	Mean = 1.9, SD = 1.01.

251 Despite the fact that these are different well-being dependent variables from those
 252 employed earlier, the three columns of Table 6 reveal a fruit-and-vegetables gradient of the
 253 previous kind. Well-being peaks at 7–8 portions for the happiness variable, at 4–5 portions
 254 for the nervousness variable, and at 7–8 portions for the downhearted variable.
 255

256 6 Conclusions

257 Human beings, like all animals, are fuelled by the food and liquid they consume. Yet the
 258 literature on well-being has largely ignored the nature of people’s diets.

259 This study is an examination of the possible connections between healthy eating and
 260 human well-being. In each of three data sets, and for seven different measures of mental
 261 well-being, we have found evidence for the existence of a positive association between
 262 well-being and fruit-and-vegetable consumption. This relationship holds both before and
 263 after correction for a large number of possible confounders. Our data sets come from Great
 264 Britain and it will be important to check such findings in a wide range of other nations (a
 265 start on that is made in US data in Blanchflower and Oswald 2011, Table 2).

266 This study complements a large literature on, and evidence of a long-known connection
 267 between, physical health and the consumption of fruit and vegetables. For well-being
 268 researchers, a contribution of the current study is to direct attention towards the potentially
 269 important area of variety in food consumption—and especially to the nature of different
 270 foods. In retrospect, such a point might appear a natural and even obvious one. Never-
 271 theless, as explained earlier, it has not figured in the tradition of research on subjective
 272 well-being stretching back to, for example, the writings of Edward Diener and Richard
 273 Easterlin.

274 The estimated coefficients in our study are substantial. When comparing small and large
 275 levels of fruit and vegetable consumption per day, the effect corresponds—for example in
 276 the third column of Table 1—to between one quarter and one third of a life-satisfaction
 277 point. To put that in perspective, the known (huge) effect of being unemployed corre-
 278 sponds to -0.9 of a life-satisfaction point. Some of our estimated effects are larger.

279 For policy-makers and researchers, various reactions are possible. One way to respond
 280 to this evidence is to argue that the present results act to buttress the importance of the
 281 status-quo policy of so-called 5-a-day healthy-eating targets. Our findings are consistent
 282 with the need for high levels of fruit-and-vegetable consumption for mental health and not
 283 merely for physical health. In some of our regression equations, the coefficients continue to
 284 increase up to 7–8 portions a day. In a few they flatten off at, or above, 5 portions a day. In
 285 particular instances in our regression-equation tables, it is not possible to reject the null
 286 hypothesis that the coefficients in a well-being regression equation are the same between,
 287 for example, 5 portions a day and 7 portions a day. More research will be required here.
 288 Another potential response, and one that the authors of this study would themselves favour,
 289 is to argue that the present study is suggestive, that there are grounds for informing health
 290 professionals of the strength of this correlation (with caveats about the lack here of



Author Proof

291 clinching causal evidence), and that the pattern deserves scrutiny in longitudinal data. A
 292 further potential reaction, and one consistent with the third, is to argue that there seem
 293 grounds here for the funding of randomized trials to explore the consequences for mental
 294 health of different levels of fruit-and-vegetable consumption.

295 Because of the cross-sectional nature of our data, it is sensible to emphasize, first, the
 296 need for caution in the interpretation of this study's findings, and, second, the likely
 297 desirability in the long-run of randomized controlled trials of different kinds of diets. Our
 298 findings can be at best only suggestive of any causal relationship. Nevertheless, the general
 299 avenue explored here—that of thinking harder about the types of foods consumed by
 300 human beings—appears to be a potentially valuable one for well-being researchers and
 301 perhaps also eventually for governments concerned with the ultimate happiness of their
 302 citizens. These issues merit future inquiry.

303 Appendix: Data Description

305 Scottish Health Survey
 306

	Mean	Standard deviation
307 Life satisfaction	7.6266	1.8858
308 Warwick-Edinburgh	49.8446	8.4733
309 GHQ mental ill-being	10.7911	5.0023
310 Self-reported health	3.9902	0.9572

311 One portion of fruit and vegetables is 80 g of any fruit or vegetable as defined by the
 312 Department of Health. A portion of fruit includes orange juice.

314 Life Satisfaction Question

315 *All things considered, how satisfied are you with your life as a whole nowadays?*

316 *0—Extremely dissatisfied*

317 *1*

318 *2*

319 *3*

320 *4*

321 *5*

322 *6*

323 *7*

324 *8*

325 *9*

326 *10—Extremely satisfied*

327 Self-Reported Health Question

328 *How is your health in general? Would you say it was*

329 *5...very good,*



Consumption of Fruit and Vegetables

330 *4 good,*
 331 *3 fair,*
 332 *2 bad, or*
 333 *1 very bad?*

336 Welsh Health Survey 2008

	Mean	Standard deviation
337 Happiness	3.7181	0.9086
338 Nervous	1.6889	0.9738
339 Downhearted and low	1.9329	1.0136

341 Survey Question

340
 342 These questions are about how you feel and how things have been with you during the past
 343 4 weeks. For each question, please give the one answer that comes closest to the way you
 344 have been feeling. How much of the time during the past 4 weeks. (1) Have you been
 345 happy? (2) Have you been very nervous? (3) Have you felt downhearted and low?—none
 346 of the time; a little of the time; some of the time; most of the time; all of the time?

348 Health Survey of England, 2008

	Mean	Standard deviation
349 GHQ	10.4975	4.89

350 **GHQ Definition**

352 In the GHQ measure, individuals answer 12 separate mental-distress questions: “Have you
 353 lost much sleep over worry?”; “Been able to concentrate on things?”; “Felt you are
 354 playing a useful part in things?”; “Felt capable of making decisions about things?”; “Felt
 355 constantly under strain?”; “Felt you could not overcome your difficulties?”; “Been able to
 356 enjoy your normal day-to-day activities?”; “Been able to face up to your problems?”; “Been
 357 feeling unhappy and depressed?”; “Been losing confidence in yourself?”; “Been thinking
 358 of yourself as a worthless person?”; “Been feeling reasonably happy all things consid-
 359 ered?”. People in the surveys are asked to answer on a scale from ‘much more than usual’
 360 down to ‘much less than usual’.

362 Portions of fruit and vegetables per day (% of the population)

363 None	0.054
364 >0 portion but less than 2	0.171
365 2 portions or more but less than 3	0.166
366 3 portions or more but less than 4	0.169
367 4 portions or more but less than 5	0.139
368 5 portions or more but less than 6	0.116
369 6 portions or more but less than 7	0.072
370 7 portions or more but less than 8	0.043
371 8 portions or more	0.070



Below are some statements about feelings and thoughts.
 Please tick the box that best describes your experience of each over the last 2 weeks

STATEMENTS	None of the time	Rarely	Some of the time	Often	All of the time
I've been feeling optimistic about the future	1	2	3	4	5
I've been feeling useful	1	2	3	4	5
I've been feeling relaxed	1	2	3	4	5
I've been feeling interested in other people	1	2	3	4	5
I've had energy to spare	1	2	3	4	5
I've been dealing with problems well	1	2	3	4	5
I've been thinking clearly	1	2	3	4	5
I've been feeling good about myself	1	2	3	4	5
I've been feeling close to other people	1	2	3	4	5
I've been feeling confident	1	2	3	4	5
I've been able to make up my own mind about things	1	2	3	4	5
I've been feeling loved	1	2	3	4	5
I've been interested in new things	1	2	3	4	5
I've been feeling cheerful	1	2	3	4	5

Author Proof

374

375
376

References

378 Blanchflower, D. G., & Oswald, A. J. (2004). Well-being over time in Britain and the USA. *Journal of*
 379 *Public Economics*, 88, 1359–1386.
 380 Blanchflower, D. G., & Oswald, A. J. (2008). Is well-being U-shaped over the life cycle? *Social Science and*
 381 *Medicine*, 66, 1733–1749.
 382 Blanchflower, D. G., & Oswald, A. J. (2011). International happiness: A new view on the measure of
 383 performance. *Academy of Management Perspectives*, 25, 6–22.
 384 Capacci, S., & Mazzocchi, M. (2011). Five a day, a price to pay: An evaluation of the UK program impact
 385 accounting for market forces. *Journal of Health Economics*, 30, 87–98.
 386 Carter, K. N., Krus, K., Blakely, T., & Collings, S. (2011). The association of food security with psycho-
 387 logical distress in New Zealand and any gender differences. *Social Science and Medicine*, 72,
 388 1463–1471.
 389 Clark, A. E., Frijters, P., & Shields, M. A. (2008). Relative income, happiness, and utility: An explanation
 390 for the Easterlin Paradox and other puzzles. *Journal of Economic Literature*, 46, 95–144.
 391 Dave, D. M., & Kelly, I. R. (2012). How does the business cycle affect eating habits? *Social Science and*
 392 *Medicine*, 74, 254–262.
 393 Diener, E. (1994). Assessing subjective well-being: progress and opportunities. *Social Indicators Research*,
 394 31, 103–157.
 395 Diener, E., Suh, E. M., Lucas, R. E., & Smith, H. L. (1999). Subjective well-being: Three decades of
 396 progress. *Psychological Bulletin*, 125(2), 276–302.



- 397 Dolan, P., Peasgood, T., & White, M. (2008). Do we really know what makes us happy? A review of the
398 economic literature on the factors associated with subjective well-being. *Journal of Economic*
399 *Psychology*, 29, 94–122.
- 400 Easterlin, R. A. (2003). Explaining happiness. *Proceedings of the National Academy of Sciences of the USA*,
401 100, 11176–11183.
- 402 Farnworth, C. R. (2009). Well-being is a process of becoming: Respondent-led research with organic
403 farmers in Madagascar. *Social Indicators Research*, 90, 89–106.
- 404 Goldberg, D. P., Gater, T., Sartorius, N., Ustun, T. B., Piccinelli, M., Gureje, O., et al. (1997). The validity
405 of two versions of the GHQ in the WHO study of mental illness in general health care. *Psychological*
406 *Medicine*, 27, 191–197.
- 407 Graham, C. (2005). Insights on development from the economics of happiness. *World Bank Research*
408 *Observer*, 20, 201–231.
- 409 Graham, C. (2008). Happiness and health: Lessons—and questions—for public policy. *Health Affairs*, 27,
410 72–87.
- 411 Hu, Y. J., Stewart-Brown, S., Twigg, L., & Weich, S. (2007). Can the 12-item General Health Questionnaire
412 be used to measure positive mental health? *Psychological Medicine*, 37, 1005–1013.
- 413 Jacka, F. N., Pasco, J. A., Myletun, A., et al. (2010). Association of western and traditional diets with
414 depression and anxiety in women. *American Journal of Psychiatry*, 167, 305–311.
- 415 Layard, R. (2005). *Happiness: Lessons from a new science*. London: Allen Lane.
- 416 Ness, A. R., & Powles, J. W. (1997). Fruit and vegetables, and cardiovascular disease: A review. *Inter-*
417 *national Journal of Epidemiology*, 26, 1–13.
- 418 Piqueras, J. A., Kuhne, W., Vera-Villaruel, P., van Straten, A., & Cuijpers, P. (2011). Happiness and health
419 behaviours in Chilean college students: A cross-sectional survey. *BMC Public Health*, 11, Article
420 number: 443. doi:10.1186/1471-2458-11-443.
- 421 Powdthavee, N. (2009). What happens to people before and after disability? Focusing effects, lead effects,
422 and adaptation in different areas of life. *Social Science and Medicine*, 69, 1834–1844.
- 423 Proper, C., Jones, K., Bolster, A., Burgess, S., Johnston, R., & Sarker, R. (2005). Local neighbourhood and
424 mental health: Evidence from the UK. *Social Science and Medicine*, 61, 2065–2083.
- 425 Shelton, N. J. (2009). Regional risk factors for health inequalities in Scotland and England and the “Scottish
426 effect”. *Social Science and Medicine*, 69, 761–767.
- 427 Shields, M. A., & Wheatley Price, S. (2005). Exploring the economic and social determinants of psycho-
428 logical well-being and perceived social support in England. *Journal of the Royal Statistical Society*
429 *(Series A)*, 168, 513–537.
- 430 Tennant, R., Hiller, L., Fishwick, R., Platt, S., Joseph, S., Weich, S., et al. (2007). The Warwick-Edinburgh
431 mental well-being scale (WEMWBS): Development and UK validation. *Health and Quality of Life*
432 *Outcomes*, 5, 1477–7527.
- 433 Tsai, A. C., Chang, T. L., & Chi, S. H. (2012). Frequent consumption of vegetables predicts lower risk of
434 depression in older Taiwanese—results of a prospective population-based study. *Public Health*
435 *Nutrition*, 15, 1087–1092.
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