



- Self-reported health is one of the factors most closely related to wellbeing.
- The average life satisfaction rating of unemployed people is 6.6 out of 10 compared with 7.6 for employed people.
- Good quality relationships with partners have been found to be a strong correlate of happiness.
- Caring responsibilities for someone with a disability or in poor health is associated with lower happiness ratings, and more depressive symptoms.
- Patients with small social networks (i.e. socially isolated) have been found to have lower levels of wellbeing.
- People with educational qualifications tend to have higher levels of wellbeing, however its effects are primarily indirect through factors such as income and employment.

1. Background

Evidence suggests wellbeing has a distinctive ‘U-shaped pattern’ across the lifecourse (see Figures 1 and 2). From ages 16-54 there is a negative trend of self-reported wellbeing, with average levels of life satisfaction, worthwhile activities and happiness levels being lowest (and anxiety highest) for people at aged 45 to 54¹. It is suggested that a) personal wellbeing may change as we move through life and have different experiences, responsibilities and circumstances which change our perspectives; and b) there could be generational effects on wellbeing¹. There are a number of associations which influence people’s levels of wellbeing in this age range including health, economy, relationships, space and place and education.

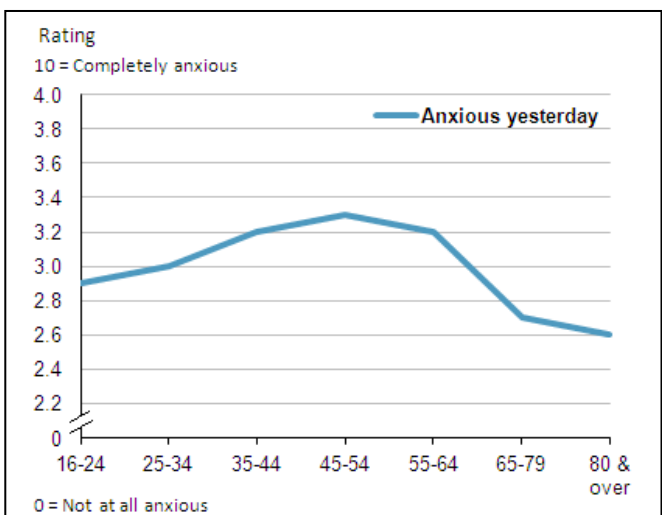
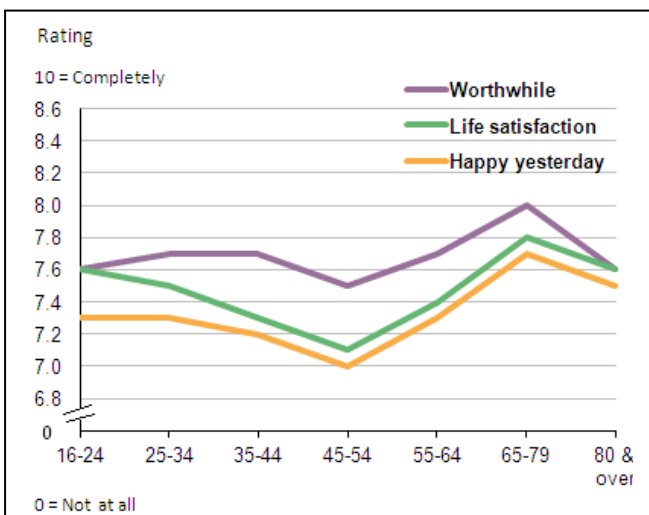


Figure 1: Self-Reported Wellbeing by Age: Life Satisfaction, Feeling Worthwhile and Happy Yesterday

Figure 2: Self-Reported Wellbeing by Age: Anxious Yesterday. Source: ONS 2013

2. Health

- **Self-reported health is one of the factors most closely related to wellbeing^{2,3,4,5}** (see Figure 3), even more so than objective health³.
- Although both forms of objective health are influential, **mental health has a stronger association with wellbeing than physical health^{3,6}**.
- **Mental health is fundamental to wellbeing, and is an essential component of social cohesion, productivity, and peace and stability in the living environment⁷**. It can be affected by a variety of different factors, including life events such as relationship breakdowns, bereavement and work stress as well as conditions such as depression or anxiety⁸.
 - **Mental ill-health affects about 16% of adults and 10% of children** (common mental disorders) at any one time, and it is often accompanied by major disability⁹.
- **People who report having a disability tend to rate their life satisfaction, sense of worthwhile and happiness all as lower than those who do not report having a disability**. The anxiety levels of people with a disability are higher on average than those who do not have a disability⁴.
- **Some health behaviours have been found to be associated with wellbeingⁱ**. For example, not smoking and eating more portions of fruit and vegetables per day have been found to be associated with higher levels of wellbeing⁵.
- Just as health affects wellbeing, **wellbeing also affects health**: many studies have noted interactions between psychological processes and the nervous and immune systems^{10,11,12,13,14,15} e.g., improved recovery from wounds and diseases.

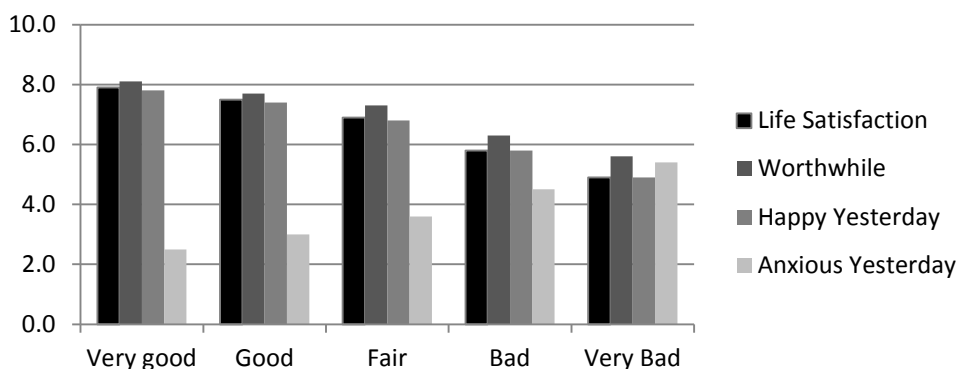


Figure 3: Average personal wellbeing, by self-reported health, 2012/13. Source: ONS 2013

ⁱ See Health Behaviours and Wellbeing factsheet for further detail

3. Economic

- Employment has been found to be associated with life-satisfaction^{4,16,17}.
 - The **average life satisfaction rating of unemployed people is 6.6 out of 10 compared with 7.6 for employed people**¹. This is a substantially stronger negative predictor of happiness than can be accounted for by the implied loss of income¹⁸.
 - However, it must be noted that **individuals who have low levels of wellbeing may be more likely to become unemployed**⁶.
- **Unemployment rates can affect wellbeing**, possibly due to the fear of personal unemployment⁶
 - One study found **very large negative regional spill over effects of unemployment that reduce the subjective wellbeing of those who are still employed** but who live in regions with higher general unemployment rates^{19,20}.
- **Higher income has been found to be related to higher wellbeing**^{4,18}. However, in terms of income it has been found that **relative income is the key factor** – although wealthier individuals within a society are happier than poorer individuals, average levels of subjective wellbeing remain constant as all members become wealthier^{6,18}.
 - It is also important to consider wealth alongside income; **factors such as home ownership, shares and savings can influence the impact of changes in income.**
- **Low levels of job satisfaction are linked to lower levels of wellbeing**⁴. Job satisfaction, much like overall wellbeing, has been described as ‘U-shaped’^{21,22}. Household income has also been linked with levels of job satisfaction⁵.
- **Commuting is associated with lower levels of wellbeing.** Despite this, some elements of commuting serve as enhancements to wellbeing, such as privacy, protected time, plus symbolic values of personal vehicles and freedom²³.
 - If the method of **commuting is more active** (e.g., walking or cycling) this could **influence wellbeing via positive health effects** (both physical and mental health)²⁴.

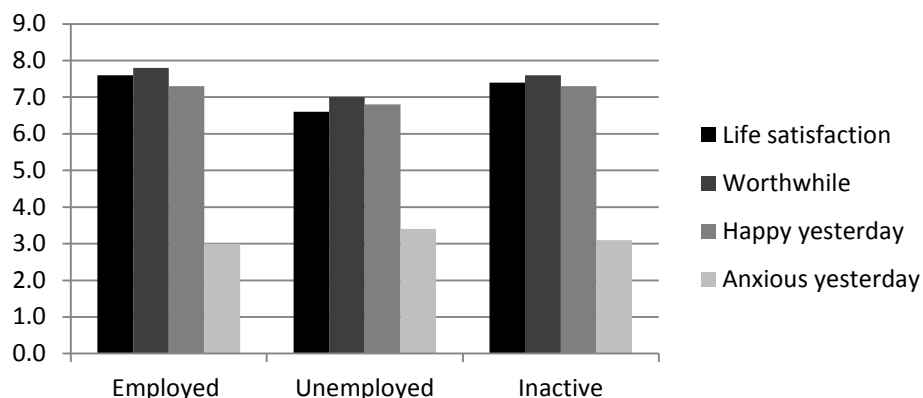


Figure 4: Average personal wellbeing, by employment status, 2012/13. (Source: ONS 2013)

4. Relationships

- **Good quality relationships with a partner has been found to be a strong correlate of happiness¹⁸**, ONS data has stated that being married increases both life satisfaction and happiness, especially where the alternative is being separated, divorced or widowed²⁵.
 - **Married people have the highest life satisfaction scores at 7.8/10, compared with 7.6 for cohabiters, 7.2 for singles, 7.3 for widowers and 6.8 for divorcees¹.**
- The frequency of contact with family and friends and the quality of those personal relationships are crucial determinants of people’s wellbeing¹¹ (see Figure 4). **People with no friends have 13% lower probability of being very satisfied with their lives compared with those who have at least one friend².**
 - The same ONS study found that the quality of a person’s social life could have an even greater impact than diet and exercise on their health and wellbeing, with **social isolation being strongly associated with low levels of subjective wellbeing.**
- **Living with children has a weak association with personal wellbeing, primarily with feeling our activities are ‘worthwhile’.** However, it correlates negatively with happiness, suggesting that while living with and looking after children is linked to a high level of day-to-day stress, it is also associated with an enhanced perception that what we are doing in life is worthwhile⁴.
- **The extent to which our social contacts make us happy is correlated with how close we are to those contact.** The happiness of an immediate social contact increases an individual’s chances of becoming happy by 15%; a second-degree contact by 10%; a third-degree contact by 6%²⁶.
- **More time spent caring for others is associated with lower happiness, and more depressive symptoms¹⁹.**
 - The 2011 Census shows that there were approximately 3.34 million females and 2.44 million males providing some level of unpaid care in England and Wales²⁷.
 - **Younger and middle aged adults (35-54) reported lower levels of wellbeing if they cared for someone outside of the household.** The wellbeing of those caring for someone inside the household did not differ greatly from those who did not provide care (see Figure 5)⁵.
 - It has been found that **illness in an individual’s partner can lead to lower levels of wellbeing²⁸.**

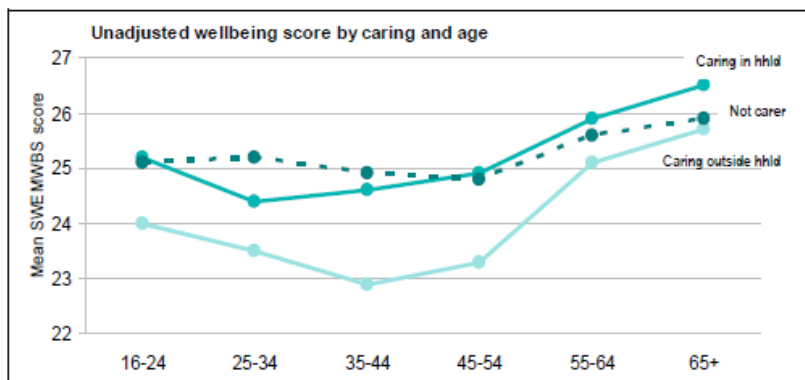


Figure 5: Wellbeing in carers by age (Source: *Predicting Wellbeing, 2013*)

5. Space and Place

- **Green spaces have been linked to physical and psychological health benefits through, amongst other factors, space for physical activity²⁹.** The benefits measured positive effects on psychological, emotional and mental health, stress, and quality of life.
- Evidence suggests **living in densely populated cities is detrimental to life satisfaction and health**, whilst living in rural areas is found to be beneficial to life satisfaction^{19,30}.
 - **Individuals living in more disadvantaged neighbourhoods lacked access to parks they considered safe** and as a result were less likely to participate in physical activities than those in more affluent neighbourhoods³⁰.
 - These sites provide opportunities for tourism, recreation, inspiration and education, which can positively affect mental health, cultural capital and social integration³¹.
- **There is considerable evidence that long-term exposure to air pollutants (mainly due to transport) affects our physical health**, and long-term exposure has been shown to decrease life expectancy²⁴.
 - Studies have found a sizeable and statistically significant **relationship of subjective wellbeing to ambient concentrations of nitrogen dioxide³²** (see Figure 6).
- **Transport is also the leading cause of noise pollution**, which has been shown to impact on sleep quality, the cardiovascular system (including an increase in blood pressure), mental health, and school performance in children²⁴.
- **A strong negative relationship has been found between rates of violent crime in an area and the wellbeing of residents living there¹⁹.**

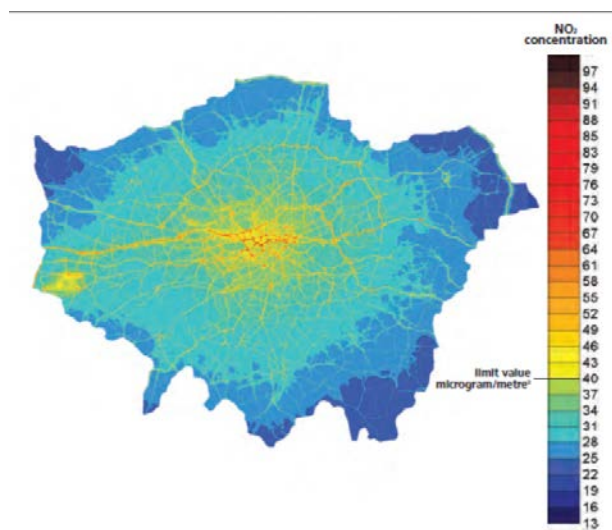


Figure 6: Modelled London nitrogen dioxide (NO₂) average concentration, 2011. Source: British Medical Association

6. Education

- **19% of the population aged 25 to 64 were participating in education and training in 2010**, compared with an EU-27 average of 9%³³.
- **Those who have spent less time in education have been found to have higher levels of depression and anxiety**, and lower levels of enjoyment, hope, happiness, fitness, and energy³⁴.
- ONS report that **higher levels of qualifications and continued formal and informal learning have been found to be associated with greater levels of wellbeing**³⁴.
 - Those who had a qualification, particularly when it had been obtained at the conventional age, have been shown to have greater levels of wellbeing than those who did not³⁴.
 - **Those with higher qualifications have higher ratings on average for feeling 'worthwhile'**, but lower life-satisfaction ratings and higher anxiety ratings⁴.
- ONS also report that **those who had undertaken part-time education at some point in the previous year reported a greater level of wellbeing** than those who had not³⁴.
- **Adult learning promotes skills, particularly non-cognitive skills such as confidence, which can have positive effects upon wellbeing**³⁵.
 - Other benefits of adult learning, including economic benefits such as higher earnings and employability, influence wellbeing indirectly³⁶.
- **Education has been found to be a strong correlate of wellbeing**, although the correlation is often small, or even absent, when other variables are accounted for. This suggests education may act mainly through its effects on health, income, employment³⁶.

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Department of Health

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