1. Introduction

There is now international acceptance amongst medical authorities that physical activity is a key element of healthy living. Since the seminal work of Jeremy Morris establishing a link between physical inactivity and chronic disease (Morris, Heady, & Raffle, 1953) and the early studies of Paffenbarger and colleagues (1975, 1978), numerous investigations have continued to confirm and extend the understanding of health hazards associated with a sedentary lifestyle. The evidence clearly highlights that physical inactivity has a significant negative effect on both individual and public health (Blair, Lamonte & Nichaman, 2004). Insufficient physical activity is identified by the UK’s Chief Medical Officer in a report ’At least five a week’ (DH, 2004), as a major causal factor in a broad range of chronic diseases such as coronary heart disease, stroke, diabetes type II and some cancers. Despite the evidence, only a minority of the adults in England meet the current recommendations of 30 minutes or more of moderate to vigorous activity on at least five days a week (DH, 2004). Recent figures published by the NHS (2008) suggested that in 2006 only 28% of women and 40% of men met these recommendations, with many people attributing their failure to a lack of time to exercise, (Health Survey for England, 2006).

For over a decade, national government campaigns have been launched to promote exercise and activity at all ages using substantial amounts of public health funds. These have included Active for Life, 1996, Choosing Health, 2004, Standard 8 – the promotion of activity in older age, 2005, Choosing
Activity, 2005, LEAP, 2007, and most recently Healthy Weight - Healthy Lives, 2008. Each of these campaigns illustrate the importance given, at a government policy making level, to increasing activity levels as a means of improving the health of the nation.

Although the main aim of these programmes is to improve the physical health of individuals, increased activity is also associated with improved psychological well-being (Hassmén, Koivula & Uutela, 2000). Mental health problems are among the most common of all health conditions in the UK and range from day to day worries experienced by everyone to serious long term conditions (Fox, Boutcher, Faulkner & Biddle, 2000). However, compared to the volume of research investigating the association between activity and physical health, there are considerably fewer studies into the relationship between activity and mental health, (Bauman, 2004). There is, however, growing evidence that activity and exercise can be an effective treatment for mental ill health and may also be important in improving the wellbeing of many people. (Fox, 1999; Crone, Smith and Gough, 2005).

The ONS (2000) suggests that one in six adults suffer from ‘significant’ mental distress at any one time. Prevalence of the two most common mental health conditions, depression and anxiety, increased from 7.8% in 1993 to 9.3% in 2000. In 2007, compulsory admissions into hospital for mental illness reached a record high after increasing year on year since 1983 (MIND). The DH white paper ‘Saving Lives: Our Healthier Nation’ (1999) acknowledged the growing problem of poor mental well-being within society.
and included mental health as one of the four targets for health improvement to be addressed by 2010. Although the focus of mental health strategy in the UK is placed on identified symptoms such as depression, it has been suggested by Fox, Boutcher, Faulkner and Biddle, (2000) that there are more widespread, undiagnosed mental health issues as stress, low self-esteem and an individual’s inability to cope with everyday life. The DH (2004) state that almost one third of adults have sleep problems and a survey published by the Health and Safety Executive (HSE, 2000) states that 20% of the working population report very high or extremely high occupational stress. Treatment for such conditions is difficult but there is increasing opinion that physical activity should be considered for both its preventative and therapeutic effects. (Bekhet, Zauszniewski & Nakhla, 2008). In a review of Physical Activity and Mental Health, Paluska & Schwenk (2000) suggest that exercise can play an important role in the management of mental health problems, such as depression and anxiety. In a review of research investigating the link between exercise and depression, Mutrie (2000) concluded that aerobic and resistance exercise could be effective in treating depression. Although past research has focused heavily on the associations between exercise and negative mental health conditions, more recent studies have considered the ability of physical activity to produce positive mood and emotions. (Biddle, 2000; Peluso & Guerra de Andrade, 2005; Thøgersen-Ntoumani, Fox, & Ntoumanis, 2005; Stubbe, de Moor, Boomsma, de Geus, 2007). In 2004, the DH Report “At least five a week” stated that there was reliable evidence confirming that activity ‘makes people feel better and, feel better about themselves’. One element of positive emotion is the feeling of happiness. Defined as ‘the
ultimate goal' by Cornelisse-Vermatt, Antonides, Van Ophem, and Maassen Van Den Brink, (2006) it has been acknowledged as been vital and important in maintaining health (Cohen, 2002; as cited by Bekhet, Zauszniewski & Nakhla, 2008)

Despite this, very few studies relating to happiness can be found outside the field of psychology and even fewer relating to happiness and physical health (Brown, Bekhet et al, 2008). The link between activity and its potential to produce happy emotions, and thus improve mental health status appears to have been overlooked. A common theme for happiness research is its causes in relation to dimensions of mental, spiritual and social health variables including relationships, income, education, religion and personality. (Argyle, 1997; Cornelisse-Vermatt et al., 2006; Jayasvasti & Kanchanatawan, 2005; Lewis, Maltby & Day, 2004; Francis, Brown, Lester and Philichalk, 1998).

However, the association between improved physical health and happiness remains inconclusive. Based on existing evidence linking activity and positive mood, this study aims to explore the possibility that active people are happier. The study will therefore investigate if there is association between physical activity levels and individual happiness, not only in relation to exercise but encompassing all aspects of daily activity.