

## Journal Pre-proof

Fostering wellbeing and healthy lifestyles through conviviality and commensality: Underappreciated benefits of the Mediterranean Diet.

Elisabetta Bernardi , Francesco Visioli

PII: S0271-5317(24)00040-X  
DOI: <https://doi.org/10.1016/j.nutres.2024.03.007>  
Reference: NTR 8538



To appear in: *Nutrition Research*

Received date: 24 January 2024  
Revised date: 16 March 2024  
Accepted date: 18 March 2024

Please cite this article as: Elisabetta Bernardi , Francesco Visioli , Fostering wellbeing and healthy lifestyles through conviviality and commensality: Underappreciated benefits of the Mediterranean Diet., *Nutrition Research* (2024), doi: <https://doi.org/10.1016/j.nutres.2024.03.007>

This is a PDF file of an article that has undergone enhancements after acceptance, such as the addition of a cover page and metadata, and formatting for readability, but it is not yet the definitive version of record. This version will undergo additional copyediting, typesetting and review before it is published in its final form, but we are providing this version to give early visibility of the article. Please note that, during the production process, errors may be discovered which could affect the content, and all legal disclaimers that apply to the journal pertain.

© 2024 Published by Elsevier Inc.

## Highlights

- Often-neglected features of healthy diets is the preparing and sharing of meals.
- Conviviality can be distinguished from commensality.
- Conviviality is the quality of being friendly and lively.
- Commensality is the practice of eating together.
- Conviviality is a mediator of health benefits.
- The release of neurochemicals, such as oxytocin and endorphins, might explain such benefits.
- We call for public health initiatives to promote the sharing of meals.

Journal Pre-proof

Fostering wellbeing and healthy lifestyles through conviviality and commensality:

Underappreciated benefits of the Mediterranean Diet.

Elisabetta Bernardi<sup>1</sup>, Francesco Visioli<sup>2,3</sup>

<sup>1</sup>Department of Biosciences, Biotechnologies and Environment, University of Bari "Aldo Moro" - Bari, Italy; <sup>2</sup>Department of Molecular Medicine, University of Padova, Italy; <sup>3</sup>IMDEA-Food, Madrid, Spain

Correspondence to:

Francesco Visioli

Department of Molecular Medicine

University of Padova

Viale G. Colombo 3

35121 Padova, Italy

Email: francesco.visioli@unipd.it

**ORCID** Francesco VISIOLI 0000-0002-1756-1723

**ORCID** Elisabetta BERNARDI 0000-0002-7550-7485

### **Sources of support**

This research was partially supported by Barilla G. e R. Fratelli S.p.A, Parma, Italy and by PRIN 2022NZNZH8.

### **Competing Interests**

None

**Abstract**

Among the often-neglected features of healthy diets, such as the Mediterranean one is the preparation and sharing of food, which is (or was) done in a social environment governed by social rules rather than by time constraints. The act of eating is a daily human practice that is not limited to meeting nutritional and energy needs but also involves a constructed social dimension of sharing meals that is part of the process of human civilisation and food cultures around the world.

In this narrative review we outline the importance of conviviality in driving part of the health effects of healthful diets, with special reference to the Mediterranean diet. Based on the available evidence, we suggest that public health initiatives (such as nudging to promote conviviality) to improve people's eating and living styles, reduce loneliness, and promote the sharing of meals could improve health. Interventions aimed at directly increasing/improving people's social relationships, networking, and conviviality can - directly and indirectly - improve both psychological well-being and general health.

**Keywords:** Mediterranean diet; conviviality; commensality; health; heritage, culture; joy.

## 1. Introduction

A healthy and sustainable diet is an important contributor to human health [1]. Therefore, much research is devoted to investigating what would be the optimal nutritional profile that increases longevity and minimizes morbidity [1]. The Mediterranean diet is an example of an adequate proportion of plant-based proteins, healthy fats, fruits and vegetables, and high-quality carbohydrates, encompassing a diverse range of grains, including whole grains, legumes as well as other complex carbohydrates like pasta [2, 3]. In addition, the Mediterranean one is sustainable [2] and has been linked with longevity of the inhabitants of the Mediterranean basin, due also to other lifestyle factors such as physical activity (field work and other day to day physical activities), lower exposure to pollution typical of industrial cities [4], or the use of daytime naps (in Spanish: siesta) [5]. Adherence to the Mediterranean one has been positively related to low prevalence of chronic degenerative diseases and to psychological well-being [6, 7] and those who have a higher level of adherence to Mediterranean one also had lower levels of both anxiety and depression [8]. Indeed, among the features of the traditional Mediterranean one [9] is the preparation and sharing of food, which is (or was) done in a social environment governed by social rules rather than by time constraints [10].

The act of eating is a daily human practice that is not limited to meeting nutritional and energy needs but also involves a constructed social dimension of sharing meals that is part of the process of human civilisation and food cultures around the world. This phenomenon, also known as commensality, is defined as the act of eating together, the act of sharing a meal, with reference to the etymological origin of the Latin word "*mensa*", which precisely means living together at the table [11]. Commensality is a term widely used in the literature and can be defined as the act of eating with other people or, more literally, eating at the same table [12, 13]. The term encompasses any form of sharing food: from a formal dinner party to a festive gathering to an ordinary family meal [14]. Across the continuum of human evolution, communal dining has remained a deeply rooted social practice. This phenomenon can be traced back to our primate predecessors who

engaged in the sharing of sustenance. In the early stages of human development, the synergistic pursuit of hunting and the communal preparation and consumption of meals emerged as a key factor in enhancing group success and security [12]. Additionally, agricultural communities have historically demonstrated collaborative efforts, ranging from collective farming to the formation of labour groups aimed at facilitating various tasks, thereby rendering them more feasible and enjoyable [15]. Eating together serves as a multi-dimensional and intricate mode of expressive and meaningful communication. It transcends mere food consumption derived from the immediate environment and rather represents a highly intricate social phenomenon. Its effectiveness lies in its dual role as both a social tool and a mnemonic tool [16]. Also, eating together is often preceded with cooking together at least some parts of the meal - taking an active part in meal preparation.

Conviviality can be distinguished from commensality, which in some of its more formal forms can also be an expression of hierarchy and dependence rather than altruistic and universal reciprocity. In this narrative review we outline the importance of conviviality in driving part of the health effects of healthful diets, with special reference to the Mediterranean diet.

## **2. Conviviality in the Mediterranean diet. Health benefits of eating together.**

Conviviality and pleasure play a role in contributing to its health benefits yet are often overlooked (by the most employed scores, i.e. the MEDAS [17, 18] and the Mediterranean Diet Score [19]) features of the Mediterranean diet. This emphasis on the enjoyment of meals distinguishes the Mediterranean diet from other dietary traditions, categorising it not only as 'convenient' but distinctly 'appetising'. For this reason, other methods of assessing adherence to the Mediterranean diet consider conviviality, e.g. the widely used MEDLIFE index, which is based on the Pyramid of the Mediterranean Diet proposed by the Spanish Foundation for the Mediterranean Diet [20]. The Mediterranean Diet Pyramid is interpreted from a total of 28 MEDLIFE index entries, divided into three blocks, with each entry receiving a score of 0 or 1 [21]. While the second block of the MEDLIFE analyses seven questions on Mediterranean dietary habits, the first block

assesses 15 items on the frequency of food consumption in the portions provided. Six elements related to relaxation, social habits, physical activity, and conviviality are evaluated in the third block. Extending this perspective, palatability and pleasure are key components that significantly support the promotion of conviviality within the framework of this diet. In line with this view, commensality is recognised as an intrinsic cornerstone of the Mediterranean diet. The act of sharing meals around a table and eating together has been recognised by various scholars as a fundamental social phenomenon that is inseparable from the contemporary interpretation of the Mediterranean diet [7]. The Mediterranean food model is, thus, at least in part characterised by the cultural value of conviviality, which emphasises the pleasure derived from shared food experiences. Mediterranean dietary habits refer to following customs and habits around meals, such as physical activity, rest, and social habits and conviviality (see above). In a study [22], the authors report a negative correlation between mortality risk and adherence to the Mediterranean dietary habits. It was discovered that, in comparison to those with lower MEDLIFE scores, those with higher scores had a 29% lower risk of all-cause mortality and a 28% lower risk of cancer mortality [22]. Lower risk of death from all causes and cancer was linked to independent adherence to each MEDLIFE category. The category that was most closely linked to these reduced risks - as well as a lower risk of cardiovascular disease mortality - was "physical activity, rest, and social habits and conviviality [22].

The Mediterranean diet is often praised for its 'tastiness', with a strong emphasis on the use of local ingredients and adherence to traditional recipes [23]. From a public health perspective, this diet recognises that sustainable dietary recommendations must be inherently enjoyable. This approach stands in stark contrast to dietary advice in some countries, for example, where prevailing guidelines often revolve around rigid rules, reductions in food groups and a sense of deprivation, with minimal regard for aspects of taste, culinary heritage, shared meals or the simple pleasure of eating [24]. A higher adherence to the Mediterranean one has been associated with higher levels of happiness in a cohort of Spanish adolescents [6], which could be partially attributed to sharing and

conviviality [6] in addition to the high consumption of fruits and vegetables [25, 26]. Similarly, another meta-analysis of 22 studies reported that higher adherence to a Mediterranean one in Mediterranean and non-Mediterranean countries was associated with a lower incidence of a series of mental issues, including a 30% reduced risk for depression and a 40% reduced risk for cognitive impairment [27]. Experimentally, sharing meals can also be an efficacious and accessible treatment strategy for the management of depression [28]. These data dovetail with those of Reddy et al., which add further, experimental evidence of the beneficial and even therapeutic actions of the Mediterranean diet [29].

In fact, a lunch/dinner table is the place where social bonds are strengthened, where cultural exchange continues [30], and where meeting others allows intergenerational exchange. Sharing meals at the same table is indeed a significant cultural occasion that can foster complementing understandings between generations [30]. These symbolic aspects are particularly evident in the rituals associated with festivals and community events [14]. From UNESCO, *"Eating together is the foundation of the cultural identity and continuity of communities throughout the Mediterranean basin. It is a moment of social exchange and communication, an affirmation and renewal of family, group, or community identity. The Mediterranean diet emphasises values of hospitality, neighbourliness, intercultural dialogue and creativity, and a way of life guided by respect for diversity. It plays a vital role in cultural spaces, festivals, and celebrations, bringing together people of all ages, conditions, and social classes"* [31].

The sharing of food and conviviality is particularly evident in the sacred and ritual dimensions of celebrations, religious festivals, rites of passage, pilgrimages, and secular collective celebrations [32]. Festivals are very popular events, an opportunity to share a meal in an atmosphere of celebration, laughter, and conviviality [32].

Commensality and conviviality, essential aspects of human dietary practices, manifest in diverse forms across the globe, reflecting cultural, social, and ecological nuances. In traditional Mediterranean diets, commensality serves as a cornerstone of social cohesion. Research indicates



that shared meals in this context are associated with increased adherence to the Mediterranean diet, fostering a sense of conviviality that positively influences dietary patterns [24, 33]. In contrast, the Western diet and lifestyle are often characterized by fragmented eating patterns, leading to an overall low nutritional quality: the prevalence of individualized, fast-paced eating habits in Western societies has been linked to a decline in commensality and diminished conviviality, contributing to adverse health outcomes [34]. Adherence to a Mediterranean-type diets is moderate with, unfortunately, a notable reduction over the past ten years. Compared to other regions, European countries - primarily those in the Mediterranean - exhibited higher levels of adherence. Geographical analysis showed that, globally, adherence to a Mediterranean-type diets is correlated with socioeconomic class and geographic location [35].

In the Asian context, particularly in Japan, the traditional dietary model emphasizes communal dining and a variety of nutrient-dense foods such as fish, rice, and vegetables. Commensality in Japanese culture is intricately woven into daily life, promoting conviviality and reinforcing social bonds [36]. Epidemiological investigations into the so-called Blue Zones, regions with exceptional longevity, reveal a common thread of robust commensality and conviviality [37]. The dietary patterns in these regions, characterized by high prevalence of plant-based foods, emphasize the importance of shared meals and communal engagement, contributing to overall well-being [37].

### **3. Conviviality and health**

Fostering appropriate social connection has important implications for human well-being, conferring protective factors that are associated with increased survival odds (by 50% as reported in some studies [38]). The negative effects of social isolation (exemplified by the Covid-19 lockdowns [39, 40]) led the World Health Organization to declare loneliness a major health concern, especially among the elderly [41] and the U.S. Surgeon General published an advisory underscoring loneliness as of epidemic proportions in the United States of America in 2023 [42, 43].

Conviviality and health are closely related concepts, as social connections and positive interactions with others can have a significant impact on overall well-being [44]; it involves building and maintaining strong relationships, fostering a sense of community, and creating a supportive environment where individuals can thrive. Conviviality can be beneficial to health in many ways, including reducing stress, improving mood, improving nutrient intake, and increasing feelings of happiness and well-being. Hence, food conviviality can have a significant impact on health, as social interactions/social facilitation and positive experiences around food can lead to better dietary choices and improved overall well-being. It is necessary to mention that although some evidence suggests that eating together may increase portion size [45, 46], the possibility of compensation of energy intake throughout the rest of the day should be considered.

In 2013, a comprehensive review [47] reported that the Mediterranean diet was associated with a reduced risk of cancer, and suggested that conviviality and social interaction during meals may partially explain this association, although experimental evidence is lacking. Indeed, sharing meals with family and friends was a key aspect of the original Mediterranean diet and may have contributed to its health effects. A recent study [48] investigated the relationship between the Mediterranean diet and cardiovascular disease in the Spanish population, and confirmed that adherence to the Mediterranean diet was associated with a lower risk of cardiovascular disease and that lifestyle factors, including conviviality, may contribute to this association.

People who have strong social connections and a sense of community are generally healthier than those who are socially isolated [49]. Social support has been linked to a lower risk of depression, anxiety, and other mental health conditions, as well as a lower risk of physical health problems such as heart disease, stroke, and diabetes [49].

Of course, what we discussed above is not specific to the Mediterranean diet and can be observed worldwide when strong social bonds are formed at mealtime. In addition, conviviality can also promote healthy behaviours such as physical activity, healthy eating, and obtaining sufficient sleep. When people are surrounded by others who prioritize health and wellness, they are more

likely to adopt these behaviours themselves. Additionally, when people eat with others, they tend to consume a greater amount of fruits and vegetables [50] suggesting that increasing fruits and vegetables may displace unhealthy foods from the diet.

In addition, food conviviality can also encourage people to try new and healthy foods. Sharing meals with others can expose individuals to different cultural cuisines and promote a diverse and balanced diet.

There is a growing body of research supporting the connection between food conviviality and health outcomes (Table 1). For example, but not limited to, Chae et al. [51] found that adults who eat alone tend to consume fewer fruits and vegetables and more fast food than those who eat with others.

Social context exerts a profound influence on eating behaviour. When in the company of others, our dietary choices and patterns diverge significantly from those when we dine in solitude. Additionally, our food preferences tend to converge with those of our immediate social network. This inclination can be attributed to the adaptive nature of conforming to social norms, which is inherently rewarding. The norms governing appropriate eating practices are established not only by observing the behaviour of peers but are also shaped by shared cultural expectations and environmental cues. In this context, social eating norms offers a novel avenue for interventions aimed at fostering healthier eating habits [52].

#### **4. Family meals**

As discussed above, the behavioral and physiological issues associated with social isolation underscore the importance of connecting with others and maintaining healthy social bonds [53], including mealtimes. The family is the most fundamental commensal unit and families that eat meals together tend to have healthier diets and their members are less likely to be overweight or obese [54]. Mounting evidence has shown that the family environment is essential for the proper development of eating behaviour in children and adolescents [55]. In the context of a child's dietary

habits, an increased consumption of fruits and vegetables can be attributed to parents' preferences for including these food items in family meals, leading to an upsurge in their intake. This inquiry becomes particularly significant since a child's dietary choices tend to mirror their overall nutritional intake [56]. According to the philosopher Byung-Chul Han, the diminishing inter-individual relationships typical of modern industrialized societies mostly unleashes a gratification crisis [57], characterized by individuals compensating the lack of social relationships/ social connectedness by consuming high fat, high salt, and high sugar foods.

Moreover, the reported positive long-term effects of carbohydrates on mood [58] might be at least in part due to the customary way of eating them, e.g. pasta, couscous, etc. together with family and friends as opposed to, e.g. eating on-the-go foods while engaging in other activities.

Food conviviality can also promote healthy eating habits in children. Studies have shown that children who eat family meals together have a lower risk of obesity [59], better academic performance, and improved mental health outcomes [60]. Family meals can also be an opportunity for parents to model healthy eating habits and encourage their children to try new foods [61-63]. Children who eat dinner with their families on a regular basis have a lower risk of developing unhealthy weight control practices, such as skipping meals or fasting [64].

Furthermore, research has shown that conviviality with food can promote positive mental health outcomes. A study found that regular family meals were associated with fewer symptoms of depression and anxiety in adolescents [59]. Social eating behaviour exhibits an association with reduced likelihood of reporting symptoms indicative of anxiety and this observation aligns with existing literature, as several studies have previously documented an inverse correlation between partaking in family meals and the manifestation of anxiety symptoms. Establishing and adhering to family routines and rituals appears to foster stable family bonds, a cornerstone for the healthy psychological development of adolescents. Moreover, the act of partaking in meals with friends and family creates a conducive environment for the exchange of experiences, concerns, and other matters, thereby enhancing the quality of communication within these social circles. In line with

this concept, it is worth noting that reduced communication quality has demonstrated an association with social anxiety in the adolescent population [65].

## **5. New forms of conviviality in the digital era**

The rise of digital technologies and their integration into our daily lives has led to the emergence of novel modes of social interaction. Among these, digital commensality stands out as a multifaceted concept, encompassing the sharing of meals and dining experiences in digital spaces. Digital technology has emerged indeed as a new platform for promoting different forms of commensality that go beyond physical proximity. Food is now shared in the digital space and the use of electronic devices to share meals remotely is increasing. It encompasses a wide array of online activities, including virtual cooking sessions, food blogging, live-streamed communal meals, and culinary exchange within social media platforms. These activities have given rise to a new dimension of shared dining experiences, transcending geographical boundaries and cultural divides. Social media platforms have become dynamic arenas for digital commensality. Here, individuals share their culinary creations, dining experiences, and culinary expertise with a global audience. This virtual dining table fosters a sense of community and cultural exchange, centred around food. Examples include the exaltation of the aesthetic values of food, also trivially known as “food porn”; the creation of virtual communities whose central theme is food. These digital forms of commensality enable people to connect, share meals, and engage in eating-related activities remotely [11].

Digital platforms such as videoconferencing, social media, and mobile applications enable people to connect, share meals, and engage in eating related activities facilitating dining experiences and eating-related interactions between people who are physically separated, as shown by the recent Covid-19 pandemic and related lockdowns [66]. This includes activities such as virtual meals, cooking classes, recipe sharing and online food communities [67].

One study aimed to determine how different forms of social presence, might influence sensory and emotional responses to meals eaten in three different commensality conditions: (1) physically together ("physical commensality"), (2) virtually together ("digital commensality"), and (3) alone ("eating alone"). Participants liked physical commensality the most, followed by digital commensality, while they liked eating alone the least. There was no significant difference in overall meal enjoyment between the physical and digital commensality conditions. This study highlights the great potential for improving eating environments by incorporating technological improvements in commensality, especially when physical commensality is not possible [68].

Like its traditional version, digital commensality also has the potential to foster social connectedness, allowing individuals to overcome geographic barriers and connect with others who share similar food preferences, cultural backgrounds, or health goals. This can have a positive impact on mental well-being and reduce social isolation, particularly among vulnerable populations. However, several approaches to using technology to connect those who are alone such as Mukbang, artificial dining assistants, and "skeating", even if they appear potentially promising, more suitable research is needed before any strong conclusions can be drawn concerning the merits, in terms of health and well-being impact of these digital commensality solutions [69].

While digital commensality may lack the physical presence of shared meals, it still provides an opportunity for people to engage in collective dining experiences. Virtual cooking classes, recipe sharing, and online food communities can promote healthier eating habits by providing access to nutritious recipes, dietary advice, and social support to make healthier food choices. These platforms can introduce people to new and creative ways to prepare meals that prioritise whole foods, fruits, vegetables, lean proteins, and healthy fats. Digital commensality can influence eating behaviour through the presence of others during virtual meals leading to increased mindfulness and slower eating, potentially reducing the risk of overeating, provided that the overuse of telephones and TV do not distract from the virtual meal.

## **6. Potential mechanisms of action of conviviality on well-being.**

### **6.1 Sociological hypotheses.**

The mechanisms of action that link physical activity, conviviality, and happiness with a better prognosis are poorly understood. The state of happiness exerts a direct influence on various biological mechanisms, such as inflammatory responses, blood pressure levels, heart rate, and cortisol levels (26, 27). These effects potentially contribute to explaining the causal relationship between happiness and its impact on health. The very act of eating could trigger the endorphin system and promote bonding, and doing so socially could lead to the same kind of enhanced endorphin effects from behavioral synchrony that have been seen with physical exercise. Conviviality, characterized by joyful and harmonious social interactions, exerts a profound influence on individual and collective well-being. Therefore, it might be expected that people who eat together more often would have larger social networks, experience greater happiness and satisfaction with their lives, and demonstrate increased engagement in their communities [30]. Healthy diets, whose effects on health are established (*vide infra*) [70], appear to correlate with greater happiness; there are published data linking the intake of fruits and vegetables with greater happiness [25, 71]. Other poorly identified determinants of happiness (social recognition, high overall socioeconomic level, etc.) also have an indirect major influence on life expectancy and health: happiness, therefore, would or could simply be a "marker" of conditions with favourable effects on health itself. Finally, social relationships, networking, and conviviality are likely to reinforce each other in a virtuous cycle in which a sense of "belongingness" [72] acts as a nudge to support healthier lifestyles [73] and a buffer to support healthy lifestyles (Figure 1).

### **6.2 Biochemical hypotheses**

Anatomically, social rewards are mainly processed in the brain by corticostriatal circuits similar to primary and secondary rewards such as food or money [74, 75]. It is also noteworthy that a low

frequency of social contacts or a high degree of loneliness have anatomical consequences e.g. smaller hippocampus and amygdala leading to cognitive impairment as reported by fMRI studies with a high number of participants [76]. Speculatively, shared mealtimes might alleviate such symptoms.

From a biochemical viewpoint, the mechanisms of action underlying the effects of conviviality (and loneliness) on food consumption are still to be elucidated and form part of the “exposome” [4, 77]. Theoretically, a homeostatic need for social contact is modulated by reward-related processes mostly based on dopamine’s concentrations [78]. At least in mice, optogenetic activation of GABAergic neurons in the amygdala drives the release of dopamine in the ventral striatum and promotes more social behaviors such as increasing volitional decisions to seek interaction with novel littermates [79]. Moreover, a preliminary, yet sound investigation in humans demonstrated that a period of 10-h social isolation led to increases in social “craving” following presentation of socially conditioned cues. This behavior closely resembles food craving after fasting [80]. In keeping with the aforementioned, some self-reports of craving for food and social contact correlated with activation of dopaminergic midbrain regions, consistent with reports in mice [79, 81].

Further proof of the involvement of the dopaminergic system in social cooperation comes from rodent data on the activation of dopamine neurons during social interactions, which has been found to be increased in the ventral tegmental area [82] and released in the nucleus accumbens during interactions with littermates. In agreement with these data, human fMRI studies have consistently shown activation of the striatum in experiments where rewarding social interactions occur, e.g. cooperative games [83]. This activation is even stronger when interactions involve an existing social bond, e.g. families and friends during shared meals, likely because it represents an opportunity to further strengthen such connection [84]. Interactions within convivial settings trigger the release of neurochemicals, such as oxytocin and endorphins, associated with social bonding and



pleasure. These neurobiological responses are believed to enhance overall well-being and mitigate stress levels [85].

Additionally, positive memories of prior social interactions with relatives or close friends do impact decisions to pursue further connection with such individuals [86]. Cogent with this hypothesis, the traditional yet disappearing habit of eating together often brings about new opportunities for festive celebrations.

What we discussed above is being exploited in neuromarketing [87], which will greatly help deciphering the neural circuits involved in conviviality and food choices.

## **7. Concluding remarks**

A healthy diet and adequate physical activity promote health. In addition to the mere components of the former, i.e. macro [88] and micronutrients [89], nutrition and physical activity can facilitate the creation of networks of connection between people, which, in turn, can promote, as a characterizing and unifying element of the group, lifestyles aimed at (or perceived as aimed at) the pursuit of well-being. Because the modern society is increasingly characterized by social isolation and loneliness [90] as highlighted by the US Surgeon General [91] and the WHO [92], appropriate research should be directed toward less parametric contributors to health, such as conviviality and social interactions. One paradigmatic, yet not exclusive example is the traditional Mediterranean diet, which is, unfortunately, increasingly less commonplace [93, 94].

Based on the available evidence, which is expected to accumulate to a greater extent with targeted investigation, it is reasonable to heighten public awareness and encourage sharing of meals to improve health and wellbeing. Interventions aimed at directly increasing/improving people's social relationships, networking, and conviviality can - directly and indirectly - improve both psychological well-being and general health.

## Acknowledgement

None. We dedicate this paper to the memory of Dr. Andrea Ghiselli (CREA-Nut).

## Sources of support

This research was partially supported by Barilla G. e R. Fratelli S.p.A, Parma, Italy and by PRIN 2022NZNZH8.

## Author Contributions

FV and EB conceived the idea and wrote the paper.

## Author Declarations

The authors declare no conflict of interest associated with this publication.

## References

- [1] Visioli F, Bodereau V, van der Kamp M, Clegg M, Guo J, Del Castillo MD, et al. Educating health care professionals on the importance of proper diets. An online course on nutrition, health, and sustainability. *Int J Food Sci Nutr* 2022;73:1091-5. doi: 10.1080/09637486.2022.2123908
- [2] Dernini S, Berry EM, Serra-Majem L, La Vecchia C, Capone R, Medina FX, et al. Med diet 4.0: The Mediterranean diet with four sustainable benefits. *Public Health Nutr* 2017;20:1322-30. doi: 10.1017/S1368980016003177
- [3] Tessier S, Gerber M. Comparison between Sardinia and Malta: The Mediterranean diet revisited. *Appetite* 2005;45:121-6. doi: 10.1016/j.appet.2005.03.015
- [4] Montone RA, Camilli M, Calvieri C, Magnani G, Bonanni A, Bhatt DL, et al. Exposome in ischaemic heart disease: Beyond traditional risk factors. *Eur Heart J* 2024;45:419-38. doi: 10.1093/eurheartj/ehae001
- [5] Dominguez LJ, Di Bella G, Veronese N, Barbagallo M. Impact of Mediterranean diet on chronic non-communicable diseases and longevity. *Nutrients* 2021;13. doi: 10.3390/nu13062028
- [6] Ferrer-Cascales R, Albaladejo-Blazquez N, Ruiz-Robledillo N, Clement-Carbonell V, Sanchez-SanSegundo M, Zaragoza-Marti A. Higher adherence to the Mediterranean diet is related to more subjective happiness in adolescents: The role of health-related quality of life. *Nutrients* 2019;11. doi: 10.3390/nu11030698
- [7] Minelli P, Montinari MR. The Mediterranean diet and cardioprotection: Historical overview and current research. *J Multidiscip Healthc* 2019;12:805-15. doi: 10.2147/JMDH.S219875
- [8] Jasmin GA, Fusco KN, Petrosky SN. Cross-sectional analysis of the relationship between adherence to the Mediterranean diet and mental wellness. *Cureus* 2023;15:e34878. doi: 10.7759/cureus.34878

- [9] Bonaccio M, Iacoviello L, Donati MB, de Gaetano G. The tenth anniversary as a UNESCO world cultural heritage: An unmissable opportunity to get back to the cultural roots of the mediterranean diet. *Eur J Clin Nutr* 2022;76:179-83. doi: 10.1038/s41430-021-00924-3
- [10] Medina FX. Looking for commensality: On culture, health, heritage, and the Mediterranean diet. *Int J Environ Res Public Health* 2021;18. doi: 10.3390/ijerph18052605
- [11] Pereira-Castro MR, Pinto AG, Caixeta TR, Monteiro RA, Bermudez XPD, Mendonca AVM. Digital forms of commensality in the 21st century: A scoping review. *Int J Environ Res Public Health* 2022;19. doi: 10.3390/ijerph192416734
- [12] Fischler C. Commensality, society and culture. *Soc Sci Info* 2011;50:528-48.
- [13] Jonsson H, Michaud M, Neuman N. What is commensality? A critical discussion of an expanding research field. *Int J Environ Res Public Health* 2021;18. doi: 10.3390/ijerph18126235
- [14] Sobal J, Nelson MK. Commensal eating patterns: A community study. *Appetite* 2003;41:181-90. doi: 10.1016/s0195-6663(03)00078-3
- [15] Jones M. *Feast: Why humans share food*. Oxford, UK: Oxford University Press; 2007.
- [16] Ermidoro E. *Commensality and ceremonial meals in the neo-assyrian period*. Venice, Italy: Edizioni Ca' Foscari - Digital Publishing; 2015.
- [17] Schroder H, Fito M, Estruch R, Martinez-Gonzalez MA, Corella D, Salas-Salvado J, et al. A short screener is valid for assessing mediterranean diet adherence among older spanish men and women. *J Nutr* 2011;141:1140-5. doi: 10.3945/jn.110.135566
- [18] Poklar Vatovec T, Jenko Praznikar Z, Petelin A. Adherence and sociodemographic determinants of adherence to the mediterranean diet among slovenian adults and the elderly. *Nutrients* 2023;15. doi: 10.3390/nu15143219
- [19] Trichopoulou A, Costacou T, Bamia C, Trichopoulos D. Adherence to a Mediterranean diet and survival in a greek population. *N Engl J Med* 2003;348:2599-608. doi: 10.1056/NEJMoa025039
- [20] Fundación Dieta Mediterránea. *Mediterranean diet pyramid: A lifestyle for today.*, [https://dietamediterranea.com/piramidedm/piramide\\_INGLES.pdf](https://dietamediterranea.com/piramidedm/piramide_INGLES.pdf); 2010 [accessed 24 February 2024].
- [21] Sotos-Prieto M, Moreno-Franco B, Ordoñas JM, Leon M, Casasnovas JA, Penalvo JL. Design and development of an instrument to measure overall lifestyle habits for epidemiological research: The Mediterranean lifestyle (MEDLIFE) index. *Public Health Nutr* 2015;18:959-67. doi: 10.1017/S1368980014001360
- [22] Maroto-Rodriguez J, Delgado-Velandia M, Ortola R, Perez-Cornago A, Kales SN, Rodriguez-Artalejo F, Sotos-Prieto M. Association of a Mediterranean lifestyle with all-cause and cause-specific mortality: A prospective study from the UK biobank. *Mayo Clin Proc* 2023. doi: 10.1016/j.mayocp.2023.05.031
- [23] Visioli F, Bogani P, Grande S, Galli C. Mediterranean food and health: Building human evidence. *J Physiol Pharmacol* 2005;56 Suppl 1:37-49.
- [24] Phull S, Wills W, Dickinson A. Is it a pleasure to eat together? Theoretical reflections on conviviality and the mediterranean diet. *Soc Compass* 2015;9:977-86.
- [25] Mujcic R, Oswald JA. Evolution of well-being and happiness after increases in consumption of fruit and vegetables. *Am J Public Health* 2016;106:1504-10. doi: 10.2105/AJPH.2016.303260
- [26] Lopez-Gonzalez L, Becerra-Tomas N, Babio N, Martinez-Gonzalez MA, Nishi SK, Corella D, et al. One-year changes in fruit and vegetable variety intake and cardiometabolic risk factors changes in a middle-aged Mediterranean population at high cardiovascular risk. *Eur J Clin Nutr* 2022;76:1393-402. doi: 10.1038/s41430-022-01124-3
- [27] Psaltopoulou T, Sergentanis TN, Panagiotakos DB, Sergentanis IN, Kosti R, Scarmeas N. Mediterranean diet, stroke, cognitive impairment, and depression: A meta-analysis. *Ann Neurol* 2013;74:580-91. doi: 10.1002/ana.23944

- [28] Jacka FN, O'Neil A, Opie R, Itsiopoulos C, Cotton S, Mohebbi M, et al. Correction to: A randomised controlled trial of dietary improvement for adults with major depression (the 'smiles' trial). *BMC Med* 2018;16:236. doi: 10.1186/s12916-018-1220-6
- [29] Reddy A, Gatta PD, Mason S, Nicoll AJ, Ryan M, Itsiopoulos C, et al. Adherence to a Mediterranean diet may improve serum adiponectin in adults with nonalcoholic fatty liver disease: The MEDINA randomized controlled trial. *Nutr Res* 2023;119:98-108. doi: 10.1016/j.nutres.2023.09.005
- [30] Dunbar RIM. Breaking bread: The functions of social eating. *Adapt Human Behav Physiol* 2017;3:198-211. doi: 10.1007/s40750-017-0061-4
- [31] UNESCO. Nomination file no. 00884, 2013 [accessed 25 November 2023].
- [32] Markowitz F, Avieri N. Eating religiously: Food and faith in the 21st century. *Food, Culture & Society* 2022;25:640-6. doi: 10.1080/15528014.2022.2116195
- [33] Bach-Faig A, Berry EM, Lairon D, Reguant J, Trichopoulou A, Dernini S, et al. Mediterranean diet pyramid today. Science and cultural updates. *Public Health Nutr* 2011;14:2274-84. doi: 10.1017/S1368980011002515
- [34] Mancino L, Todd J, Biing-Hwan L. Separating what we eat from where: Measuring the effect of food away from home on diet quality,. *Food Policy* 2009;34:557-62. doi: 10.1016/j.foodpol.2009.09.003
- [35] Damigou E, Faka A, Kouvari M, Anastasiou C, Kostis RI, Chalkias C, Panagiotakos D. Adherence to a Mediterranean type of diet in the world: A geographical analysis based on a systematic review of 57 studies with 1,125,560 participants. *Int J Food Sci Nutr* 2023;74:799-813. doi: 10.1080/09637486.2023.2262781
- [36] Traphagan JW, Brown LK. Fast food and intergenerational commensality in Japan: New styles and old patterns. *Ethnology* 2002;41:119-34. doi: 10.2307/4153002
- [37] Buettner D, Skemp S. Blue zones: Lessons from the world's longest lived. *Am J Lifestyle Med* 2016;10:318-21. doi: 10.1177/1559827616637066
- [38] Holt-Lunstad J, Smith TB, Layton JB. Social relationships and mortality risk: A meta-analytic review. *PLoS Med* 2010;7:e1000316. doi: 10.1371/journal.pmed.1000316
- [39] Bzdok D, Dunbar RIM. Social isolation and the brain in the pandemic era. *Nat Hum Behav* 2022;6:1333-43. doi: 10.1038/s41562-022-01453-0
- [40] Meda N, Pardini S, Slongo I, Bodini L, Zordan MA, Rigobello P, et al. Students' mental health problems before, during, and after Covid-19 lockdown in Italy. *J Psychiatr Res* 2021;134:69-77. doi: 10.1016/j.jpsychires.2020.12.045
- [41] World Health Organization. Social isolation and loneliness among older people: Advocacy brief. Geneva, Switzerland: WHO; 2021.
- [42] In: Our epidemic of loneliness and isolation: The U.S. Surgeon General's advisory on the healing effects of social connection and community, Washington (DC): 2023.
- [43] Jaffe S. US Surgeon General: Loneliness is a public health crisis. *Lancet* 2023;401:1560. doi: 10.1016/S0140-6736(23)00957-1
- [44] Utter J, Larson N, Berge JM, Eisenberg ME, Fulkerson JA, Neumark-Sztainer D. Family meals among parents: Associations with nutritional, social and emotional wellbeing. *Prev Med* 2018;113:7-12. doi: 10.1016/j.ypmed.2018.05.006
- [45] Ruddock HK, Brunstrom JM, Vartanian LR, Higgs S. A systematic review and meta-analysis of the social facilitation of eating. *Am J Clin Nutr* 2019;110:842-61. doi: 10.1093/ajcn/nqz155
- [46] Ruddock HK, Brunstrom JM, Higgs S. The social facilitation of eating: Why does the mere presence of others cause an increase in energy intake? *Physiol Behav* 2021;240:113539. doi: 10.1016/j.physbeh.2021.113539
- [47] Grosso G, Buscemi S, Galvano F, Mistretta A, Marventano S, La Vela V, et al. Mediterranean diet and cancer: Epidemiological evidence and mechanism of selected aspects. *BMC Surg* 2013;13 Suppl 2:S14. doi: 10.1186/1471-2482-13-S2-S14

- [48] Sotos-Prieto M, Ortola R, Ruiz-Canela M, Garcia-Esquinas E, Martinez-Gomez D, Lopez-Garcia E, et al. Association between the Mediterranean lifestyle, metabolic syndrome and mortality: A whole-country cohort in Spain. *Cardiovasc Diabetol* 2021;20:5. doi: 10.1186/s12933-020-01195-1
- [49] Coyte A, Perry R, Papacosta AO, Lennon L, Whincup PH, Wannamethee SG, Ramsay ASE. Social relationships and the risk of incident heart failure: Results from a prospective population-based study of older men. *Eur Heart J Open* 2022;2:oeab045. doi: 10.1093/ehjopen/oeab045
- [50] Dallacker M, Knobl V, Hertwig R, Mata J. Effect of longer family meals on children's fruit and vegetable intake: A randomized clinical trial. *JAMA Netw Open* 2023;6:e236331. doi: 10.1001/jamanetworkopen.2023.6331
- [51] Chae W, Ju YJ, Shin J, Jang SI, Park EC. Association between eating behaviour and diet quality: Eating alone vs. Eating with others. *Nutr J* 2018;17:117. doi: 10.1186/s12937-018-0424-0
- [52] Higgs S. Social norms and their influence on eating behaviours. *Appetite* 2015;86:38-44. doi: 10.1016/j.appet.2014.10.021
- [53] Delgado MR, Fareri DS, Chang LJ. Characterizing the mechanisms of social connection. *Neuron* 2023. doi: 10.1016/j.neuron.2023.09.012
- [54] Utter J, Scragg R, Schaaf D, Mhurchu CN. Relationships between frequency of family meals, BMI and nutritional aspects of the home food environment among new zealand adolescents. *Int J Behav Nutr Phys Act* 2008;5:50. doi: 10.1186/1479-5868-5-50
- [55] Scaglioni S, De Cosmi V, Ciappolino V, Parazzini F, Brambilla P, Agostoni C. Factors influencing children's eating behaviours. *Nutrients* 2018;10. doi: 10.3390/nu10060706
- [56] Robson SM, McCullough MB, Rex S, Munafò MR, Taylor G. Family meal frequency, diet, and family functioning: A systematic review with meta-analyses. *J Nutr Educ Behav* 2020;52:553-64. doi: 10.1016/j.jneb.2019.12.012
- [57] Han BC. Die müdigkeitsgesellschaft. Spain: Herder; 2016.
- [58] Brinkworth GD, Buckley JD, Noakes M, Clifton PM, Wilson CJ. Long-term effects of a very low-carbohydrate diet and a low-fat diet on mood and cognitive function. *Arch Intern Med* 2009;169:1873-80. doi: 10.1001/archinternmed.2009.329
- [59] Agathao BT, Cunha DB, Sichieri R, Lopes CS. The role of family meal frequency in common mental disorders in children and adolescents over eight months of follow-up. *PLoS One* 2021;16:e0243793. doi: 10.1371/journal.pone.0243793
- [60] Harrison ME, Norris ML, Obeid N, Fu M, Weinstangel H, Sampson M. Systematic review of the effects of family meal frequency on psychosocial outcomes in youth. *Can Fam Physician* 2015;61:e96-106.
- [61] Cho MS, Kim M, Cho W. Relationships of adolescent's dietary habits with personality traits and food neophobia according to family meal frequency. *Nutr Res Pract* 2014;8:476-81. doi: 10.4162/nrp.2014.8.4.476
- [62] Eisenberg ME, Olson RE, Neumark-Sztainer D, Story M, Bearinger LH. Correlations between family meals and psychosocial well-being among adolescents. *Arch Pediatr Adolesc Med* 2004;158:792-6. doi: 10.1001/archpedi.158.8.792
- [63] Larson NI, Neumark-Sztainer D, Hannan PJ, Story M. Family meals during adolescence are associated with higher diet quality and healthful meal patterns during young adulthood. *J Am Diet Assoc* 2007;107:1502-10. doi: 10.1016/j.jada.2007.06.012
- [64] Loth K, Fulkerson JA, Neumark-Sztainer D. Food-related parenting practices and child and adolescent weight and weight-related behaviors. *Clin Pract (Lond)* 2014;11:207-20. doi: 10.2217/cpr.14.5
- [65] Victoria-Montesinos D, Jimenez-Lopez E, Mesas AE, Lopez-Bueno R, Garrido-Miguel M, Gutierrez-Espinoza H, et al. Are family meals and social eating behaviour associated with depression, anxiety, and stress in adolescents? The ehdl study. *Clin Nutr* 2023;42:505-10. doi: 10.1016/j.clnu.2023.01.020

- [66] Mitchell ES, Yang Q, Behr H, Deluca L, Schaffer P. Adherence to healthy food choices during the Covid-19 pandemic in a U.S. population attempting to lose weight. *Nutr Metab Cardiovasc Dis* 2021;31:2165-72. doi: 10.1016/j.numecd.2021.03.009
- [67] Herman DR, Kimmel R, Shodahl S, Vargas JH. Examination of an online cooking education program to improve shopping skills, attitudes toward cooking, and cooking confidence among wic participants. *Nutrients* 2023;15. doi: 10.3390/nu15194177
- [68] Pramuyda RC, Singh A, Patterson AH, Ngo NK, Seo H. Power of presence: Effects of physical or digital commensality on consumer perception and acceptance of meals. *Food Qual Pref* 2022;100:104601.
- [69] Spence C, Mancini M, Huisman G. Digital commensality: Eating and drinking in the company of technology. *Front Psychol* 2019;10:2252. doi: 10.3389/fpsyg.2019.02252
- [70] Li Y, Schoufour J, Wang DD, Dhana K, Pan A, Liu X, et al. Healthy lifestyle and life expectancy free of cancer, cardiovascular disease, and type 2 diabetes: Prospective cohort study. *BMJ* 2020;368:l6669. doi: 10.1136/bmj.l6669
- [71] Blanchflower DG, Oswald AJ, Stewart-Brown S. Is psychological well-being linked to the consumption of fruit and vegetables? *Soc Indic Res* 2013;114:785–801.
- [72] Pillow DR, Malone GP, Hale WJ. The need to belong and its association with fully satisfying relationships: A tale of two measures. *Pers Individ Dif* 2015;74:259-64. doi: 10.1016/j.paid.2014.10.031
- [73] Poli A, Agostoni C, Graffigna G, Bosio C, Donini LM, Marangoni F. The complex relationship between diet, quality of life and life expectancy: A narrative review of potential determinants based on data from Italy. *Eat Weight Disord* 2019;24:411-9. doi: 10.1007/s40519-018-0582-2
- [74] Bartra O, McGuire JT, Kable JW. The valuation system: A coordinate-based meta-analysis of bold fmri experiments examining neural correlates of subjective value. *Neuroimage* 2013;76:412-27. doi: 10.1016/j.neuroimage.2013.02.063
- [75] Bhanji JP, Delgado MR. The social brain and reward: Social information processing in the human striatum. *Wiley Interdiscip Rev Cogn Sci* 2014;5:61-73. doi: 10.1002/wcs.1266
- [76] Hirabayashi N, Honda T, Hata J, Furuta Y, Shibata M, Ohara T, et al. Association between frequency of social contact and brain atrophy in community-dwelling older people without dementia: The jpsc-ad study. *Neurology* 2023;101:e1108-e17. doi: 10.1212/WNL.0000000000207602
- [77] Bowirrat A, Elman I, Dennen CA, Gondre-Lewis MC, Cadet JL, Khalsa J, et al. Neurogenetics and epigenetics of loneliness. *Psychol Res Behav Manag* 2023;16:4839-57. doi: 10.2147/PRBM.S423802
- [78] Lee CR, Chen A, Tye KM. The neural circuitry of social homeostasis: Consequences of acute versus chronic social isolation. *Cell* 2021;184:2794-5. doi: 10.1016/j.cell.2021.04.044
- [79] Hu RK, Zuo Y, Ly T, Wang J, Meera P, Wu YE, Hong W. An amygdala-to-hypothalamus circuit for social reward. *Nat Neurosci* 2021;24:831-42. doi: 10.1038/s41593-021-00828-2
- [80] Tomova L, Wang KL, Thompson T, Matthews GA, Takahashi A, Tye KM, Saxe R. Acute social isolation evokes midbrain craving responses similar to hunger. *Nat Neurosci* 2020;23:1597-605. doi: 10.1038/s41593-020-00742-z
- [81] Matthews GA, Nieh EH, Vander Weele CM, Halbert SA, Pradhan RV, Yosafat AS, et al. Dorsal raphe dopamine neurons represent the experience of social isolation. *Cell* 2016;164:617-31. doi: 10.1016/j.cell.2015.12.040
- [82] Solie C, Girard B, Righetti B, Tapparel M, Bellone C. VTA dopamine neuron activity encodes social interaction and promotes reinforcement learning through social prediction error. *Nat Neurosci* 2022;25:86-97. doi: 10.1038/s41593-021-00972-9
- [83] Rilling J, Gutman D, Zeh T, Pagnoni G, Berns G, Kilts C. A neural basis for social cooperation. *Neuron* 2002;35:395-405. doi: 10.1016/s0896-6273(02)00755-9
- [84] Fareri DS, Niznikiewicz MA, Lee VK, Delgado MR. Social network modulation of reward-related signals. *J Neurosci* 2012;32:9045-52. doi: 10.1523/JNEUROSCI.0610-12.2012

- [85] Uvnas-Moberg K, Handlin L, Petersson M. Self-soothing behaviors with particular reference to oxytocin release induced by non-noxious sensory stimulation. *Front Psychol* 2014;5:1529. doi: 10.3389/fpsyg.2014.01529
- [86] Ross LP, Inagaki TK. Recalling prior experiences with a close other can fulfill the need for social connection. *Emotion* 2023;23:321-31. doi: 10.1037/emo0001103
- [87] Gomez-Carmona D, Munoz-Leiva F, Paramio A, Liebana-Cabanillas F, Cruces-Montes S. What do you want to eat? Influence of menu description and design on consumer's mind: An fmri study. *Foods* 2021;10. doi: 10.3390/foods10050919
- [88] Mozaffarian D, Aspry KE, Garfield K, Kris-Etherton P, Seligman H, Velarde GP, et al. "Food is medicine" strategies for nutrition security and cardiometabolic health equity: JACC state-of-the-art review. *J Am Coll Cardiol* 2024;83:843-64. doi: 10.1016/j.jacc.2023.12.023
- [89] Visioli F, Hagen TM. Nutritional strategies for healthy cardiovascular aging: Focus on micronutrients. *Pharmacol Res* 2007;55:199-206. doi: 10.1016/j.phrs.2007.01.008
- [90] Surkalim DL, Luo M, Eres R, Gebel K, van Buskirk J, Bauman A, Ding D. The prevalence of loneliness across 113 countries: Systematic review and meta-analysis. *BMJ* 2022;376:e067068. doi: 10.1136/bmj-2021-067068
- [91] The U.S. Surgeon General's Advisory on the Healing Effects of Social Connection and Community. Our epidemic of loneliness and isolation. 2023.
- [92] World Health Organization International Telecommunications Union, United Nations Department of Economic and Social Affairs, United Nations Department of Economic and Social Affairs,. Social isolation and loneliness among older people: Advocacy brief, <https://www.who.int/publications/i/item/9789240030749>; 2021.
- [93] Serra-Majem L, Roman-Vinas B, Sanchez-Villegas A, Guasch-Ferre M, Corella D, La Vecchia C. Benefits of the mediterranean diet: Epidemiological and molecular aspects. *Mol Aspects Med* 2019;67:1-55. doi: 10.1016/j.mam.2019.06.001
- [94] Cuschieri S, Libra M. Adherence to the Mediterranean diet in maltese adults. *Int J Environ Res Public Health* 2020;18. doi: 10.3390/ijerph18010010
- [95] de la Torre-Moral A, Fabregués S, Bach-Faig A, Fornieles-Deu A, Medina FX, Aguilar-Martinez A, Sanchez-Carracedo D. Family meals, conviviality, and the Mediterranean diet among families with adolescents. *Int J Environ Res Public Health* 2021;18. doi: 10.3390/ijerph18052499

## Figure Legend



Fostering wellbeing: conviviality, commensality, and diets as cornerstones of healthy lifestyles.

Conviviality likely reduces stress via dopaminergic-related pathways [78], thereby increasing fruit and vegetable intake [50]. Eating together greatly lowers cardiovascular risk [49] and should be part of a healthy lifestyle.



## Mini review

Table 1. Main studies on conviviality and commensality

Authors, year, and country [reference number]	Population size and age group of study population	Type of study	Method of determining dietary intake or patterns	Outcomes reported	Key findings
Sobal and Nelson, 2003, USA [14]	97,000 rural, suburban and city consumers and included a diversity of ethnic and class groups.	Cross-sectional survey examined the prevalence and patterns of commensality in one US county in 1999	Mail questionnaire	Contemporary work-oriented society may lead people to eat alone during the day, but share evening meals with family	Peoples' social worlds appear to be focused on the nuclear family, and family members are also the people they usually eat with.
Larson et al., 2007, USA [63]	946 female students and 764 male students in high school classrooms	Survey	Surveys and food frequency questionnaires	Family meal frequency during adolescence predicted higher intakes of fruit, vegetables, dark-green and orange vegetables, and key nutrients and lower intakes of soft drinks during young adulthood.	Family meals during adolescence may have a lasting positive influence on dietary quality and meal patterns in young adulthood
Utter et al., 2008, New Zealand [54] [38]	3245 ethnically diverse students	Analytical study	Survey	Adolescents who regularly ate family meals were as likely to have less healthy snack foods available at home and regularly eat them as adolescents who do not have family meals.	Positive associations between family meals and improved adolescent nutrition

## Mini review

Phull et al., 2015, United Kingdom [24]		Review	Sociological and anthropological literature	Perceived benefits of eating together as well as the social constraints on pleasurable meals	Conviviality – the pleasure of eating together – was recognized as the cornerstone of food culture in the region
Dunbar, 2017, United Kingdom [30]	Panel sample of 2000 adults aged over 18 years	Analytical survey	Recall	People who eat socially are more likely to feel better about themselves and to have a wider social network capable of providing social and emotional support. Eating with someone in the evening makes one feel closer to them than eating with them at midday - evening meals at which laughter and reminiscences occur and alcohol is drunk are especially likely to enhance feelings of closeness.	Eating together may have health and survival benefits both directly and, through bigger and better social networks, indirectly.
Chae et al., 2018, Korea [51]	The final population for this study is 3365 men and 5158 women who are age 19 to 64 years old.	Analytical study	Health survey, nutrition survey, dietary Reference Intakes	Many Korean adults are experiencing low diet quality when they eat alone. The number of people who eat alone is increasing along with the changes	People who eat alone have nutrition intake below the recommended amount.

## Mini review

				of lifestyle.	
Utter et al., 2018, USA [44]	Sample of parents in the United States (n= 889, mean age 31 years) that responded to the fourth wave of the Project EAT study in 2015–16.	Longitudinal study of dietary intake, physical activity, weight control behaviors, weight status	Population-based survey data	Approximately 50% of parents report frequent family meals	Frequent family meals were associated with higher levels of family functioning, greater self-esteem, and lower levels of depressive symptoms and stress, and greater fruit and vegetable consumption
Ruddock et al., 2019, United Kingdom [45]		Systematic review and meta-analysis	Naturalistic observation methods and diary or ecological momentary assessment methods.	Eating with familiar others has a powerful effect of increasing food intakes, relative to eating alone.	Social facilitation of eating has evolved as a strategy that ensures the procurement of maximum personal food intake in the context of food sharing
Ferrer-Cascales et al., 2019, Spain [6]	527 high school students (54.5% females; 45.5% males) ranging in age from 12 to 17 years	A large-scale study on Mediterranean diet, well-being and bullying victimization carried out in schools in the Mediterranean city of Alicante (Spain)	Mediterranean Diet Quality Index for children and teenagers (KIDMED) - The Subjective Happiness Scale (SHS) - The KIDSCREEN-52 questionnaire measuring health-related quality of life	High adherence to the Mediterranean diet was associated with better health-related quality of life and more subjective happiness in adolescents	Protective effects of Mediterranean Diet adherence and its relationship with health status and subjective happiness and well-being.

## Mini review

de la Torre-Moral et al., 2021, Spain [95]	Sixteen adolescents, 12 participant families	Assessment with Mediterranean diet pyramid score and MEDAS methods	A qualitative descriptive approach was used in this study to describe the perspectives and practices of families regarding conviviality	Families with a less clear pattern of conviviality (i.e., spent less time on family meals, meals were not at the table, had digital distractions, did not enjoy meals through pleasant conversations) have a lower Mediterranean diet adherence.	Conviviality is an element of the Mediterranean diet as an intangible cultural heritage, which relates to the pleasure associated with eating together, or a particular attitude towards shared meals.
Medina, 2021, Spain [10]		Review	Health, sociological and anthropological literature	Commensality as an interdisciplinary perspective to the very definition of the Mediterranean diet.	Conviviality plays in favor of sustainability and nutrition.
Ruddock et al., 2021, United Kingdom [46]		Review		People eat more when eating with friends and family, relative to when eating alone.	Social facilitation of eating reflects a behavioral strategy that optimizes the evolutionary fitness of individuals who share a common food resource

## Mini review

Maroto-Rodriguez et al., 2023, Spain, United Kingdom, USA [22]	110,799 members of the UK Biobank cohort	Prospective	Higher adherence to the Mediterranean lifestyle was associated with lower all-cause and cancer mortality in British middle-aged and older adults in a dose-response manner		The “physical activity, rest, and social habits and conviviality” category was most strongly associated with lowered risks of all-cause mortality, and associated with a lower risk of cardiovascular disease mortality
Dallacker et al., 2023 Germany [50]	50 parent-child dyads participated in the trial	A Randomized Clinical Trial	Parent-child pairs had two meals in a laboratory setting. In the control condition they have as much time as usual. In the intervention condition they have 50% more time than usual.	This is known as the ‘social facilitation of eating’.	Family meals are a formative learning environment that shapes children’s food choices and preferences

Mini review

### Graphical Abstract

Schematic representation of conviviality and its various health-promoting activities. As modern society is increasingly characterized by social isolation and loneliness, research should focus on less parametric factors that contribute to health, such as sociability and social interactions. Public health interventions aimed at improving people's social relationships, networking and sociability can improve both mental well-being and overall health.

