Community Well-Being Index

Sleep

(X) Diet • Enter today's data

> Steps 4290 step

Fitness Good

Weight Severely off your ideal BAII Medications Serve med casions due took



Albert Lea, MN

2019 Community Well-Being Results





Ten years ago, Sharecare pioneered the concept of well-being, inspired by the WHO definition of health as "a state of complete physical, mental, and social well-being and not merely the absence of disease and infirmity. Well-being continues to be the foundational construct as we evolve our

measurement capabilities.



PURPOSE

Liking what you do each day and being motivated to achieve your goals



SOCIAL

Having supportive relationships and love in your life



FINANCIAL

Managing your economic life to reduce stress and increase security



COMMUNITY

Liking where you live, feeling safe and having pride in your community



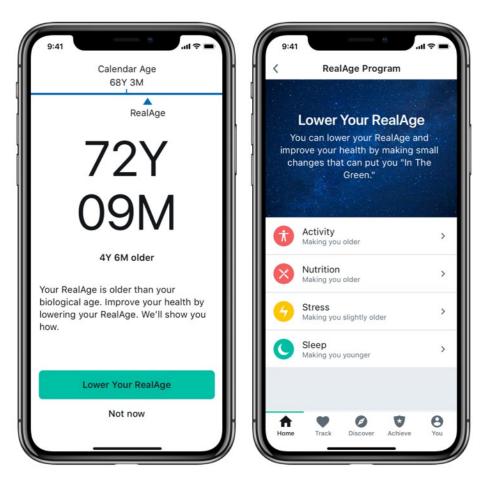
PHYSICAL

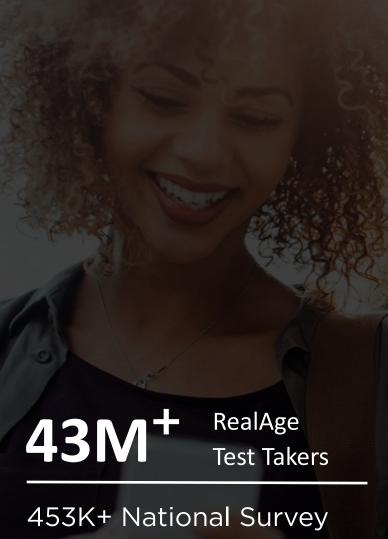
having good health and enough energy to get things done daily



Real Age Data Collection Instrument

2019 Well-Being data was collected through mail WBI surveys and digital RAT surveys





Completes in 2020

SOCIAL DETERMINANTS OF HEALTH

In partnership with **BOSTON UNIVERSITY**

Our SDOH framework mirrors and expands upon concepts established by the CDC and DHHS's Healthy People 2020 as critical factors impacting the health of communities. Sharecare and Boston University examined over 600 unique measures from peerreviewed research to create five SDOH indices with measures that are valid and reliable predictors of well-being.





HEALTHCARE ACCESS

- Unemployment rate (20-64)
- Labor force participation

ECONOMIC SECURITY

- Income above poverty
- Insurance coverage

- Active MDs
- OBGYN specialists
- Pediatric specialists

RESOURCE ACCESS

- Food access at 20 miles
- Libraries, religious institutions per 10K residents
- Percentage over 65 who work



FOOD ACCESS

 Children, black, senior food access at 1 mile



HOUSING & TRANSPORTATION

- Home value to income >4:1
- Homes \$500K and up
- Use of public transit

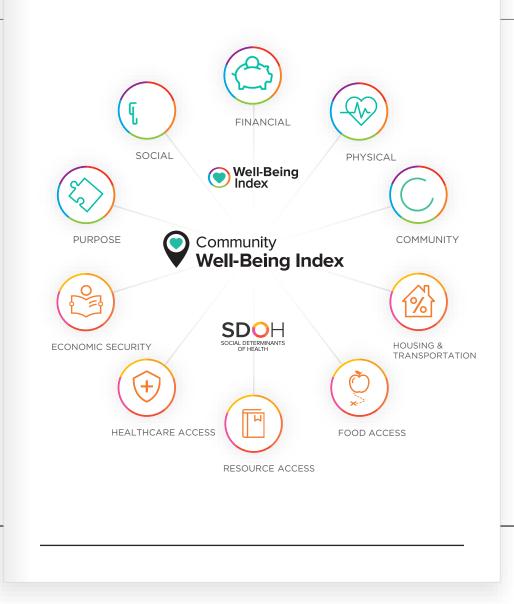


In partnership with BOSTON UNIVERSITY

Sharecare Community Well-Being Index

THE WORLD'S MOST DEFINITIVE MEASURE OF WELL-BEING

The Index merges decades of clinical research, health care leadership and behavioral economics expertise to track and understand the key factors that drive greater well-being for individuals and populations – providing an in-depth, nearly real-time view of Americans' well-being.



Survey Methodology

- WBI Campaign Period for 2019: July 25-August 26, 2019
- RealAge Test (RAT) Campaign Period for 2019: August 1- September 10, 2019
- 682 total completed surveys from zip codes 56007 in 2019. Of these, 397 of these surveys are WBI surveys and 285 are RAT surveys.
- In 2019, 3,000 WBI surveys and RAT postcards mailed to random address-based sample plus digital recruitment through partner organizations, social media, and print channels
- Weighting targets based on Claritas (Nielsen) demographic statistics, results are weighted to correct for the imperfectness of the randomness of the sample. Results are weighted on demographic characteristics of age, gender, race, income, marital status.
- Albert Lea results are compared with 2019 national results (N=306K surveys), state results (N=23,384), and a like communities group (N=350)

	Margin of Error			
Final Sample Size	For Responses Near 10% or 90% (in percentage points)	For Responses Near 50% (in percentage points)	For Well-Being Index Score and Element Scores	
682	2.25	3.75	1.22	⊘sha ∶

Summary of Key Findings



63.2 **Overall Wellbeing** Score¹



Physical and Financial Well-Being are **Strongest Areas**



Stress, BMI, FV **Consumption**, are **Opportunity Areas**



Higher rates of bike commuting compared to the nation and state



- **Stress** 1.
- **BMI** 2.
- 3. Low rate of exercise with weights
- Low fruit and vegetable 4. consumption
- Long periods of sitting 5.



Grocery store access within 1 mile is a challenge for many demographic groups





1. Overall measure of the population's wellbeing across physical, social, community, financial, and purpose wellbeing dimensions.

Selection of "Like Communities"

- We are interested in assessing how our BZP communities compare to communities with similar population characteristics.
- 'Like' communities are defined as counties, and we sought to match them based on age, race, income, educational attainment, population size and urban/rural status. Demographic information for this search comes from the U.S. Census American Community Survey.
- For Albert Lea, we identified 16 counties spanning Iowa, Illinois, Kansas, Michigan, Minnesota and Nebraska who resemble Albert Lea's unique characteristics.
- These counties comprise the "like communities" group in the subsequent slides.

County	State
Mower	MN
Warren	IL
Emmet	IA
Franklin	IA
Taylor	IA
Wright	IA
Barton	KS
Ness	KS
Reno	KS
Sherman	KS
Stafford	KS
Oceana	MI
Deuel	NE
Dodge	NE
Kimball	NE
Morrill	NE



Overall, Social, Purpose, and Physical Well-Being Up in Albert Lea

Well-Being Domain	Nation 2019	State 2019	Like Communities 2019	Albert Lea 2014 WBI	Albert Lea 2019 WBI/eRAT	Albert Lea 2019-2014
Overall Well-Being	60.3	61.2	58.7	59.2	63.2	4.0*
Community	60.7	61.8	59.6	60.1	60.5	0.4
Social	57.4	56.6	55.2	58.3	62.5	4.2*
Purpose	59.0	57.7	56.0	56.1	61.4	5.3*
Physical	60.7	62.0	58.4	58.5	63.5	5.0*
Financial	60.5	63.5	58.1	58.7	62.8	4.1

* Indicates statistically significant change

Note: Well-being element scores are out of 100. Higher scores are better.



Thriving in Life Evaluation Rose Significantly in Albert Lea Since 2014

	Nation 2019	State 2019	Like Communities 2019	Albert Lea 2014 WBI	Albert Lea 2019 WBI/eRAT	Albert Lea 2019-2014
Thriving in Life Evaluation	66.7%	70.2%	66.2%	44.6%	57.2%	12.6%*
Community Well-Being						
Received recognition for helping to improve the area where you live	20.4%	22.0%	21.6%	18.3%	19.4%	1.1%
The city/area where you live is a perfect place for you	52.4%	54.3%	52.8%	61.5%	51.1%	-10.4%*
Financial Well-Being						
I have enough money to do everything I want to do	28.5%	32.4%	27.2%	44.6%	43.3%	-1.3%
In the last seven days I have worried about money	31.3%	29.0%	32.8%	35.5%	33.2%	-2.3%
Purpose Well-Being						
You learn or do something interesting every day	53.3%	54.3%	50.1%	58.8%	52.8%	-6.0%
You like what you do every day	59.4%	61.3%	59.3%	77.2%	64.4%	-12.8%*
Social Well-Being						
Friends/family give you positive energy	59.1%	59.8%	58.2%	73.3%	58.1%	-15.2%*
Someone in your life always encourages you to be healthy	62.5%	62.3%	61.7%	73.4%	53.5%	-19.9%*

Tobacco Use Down Significantly in Albert Lea

Physical Well-Being	Nation 2019	State 2019	Like Communities 2019	Albert Lea 2014 WBI	Albert Lea 2019 WBI/eRAT	Albert Lea 2019-2014
Obese	45.8%	44.8%	48.8%	27.8%	35.2%	7.4%
Obese plus overweight	75.8%	75.1%	78.2%	64.4%	68.3%	3.9%
Tobacco use	18.6%	17.1%	21.7%	21.2%	10.4%	-10.8%*
Exercised 30+ minutes 3+ days in last week	59.3%	62.4%	56.6%	56.7%	61.6%	4.9%
Had 5+ servings of fruits and vegetables 4+ days in the last week	30.5%	29.8%	29.0%	54.6%	48.6%	-6.0%
Current high blood pressure	26.9%	23.3%	24.3%	24.7%	26.2%	1.5%
Current high cholesterol	5.3%	5.5%	7.2%	18.0%	21.1%	3.1%
Felt active and productive in the last 7 days	54.5%	56.5%	54.7%	71.7%	58.9%	-12.8%*

Tobacco Use in Albert Lea

	2014 WBI	2019 WBI/ eRAT
Currently uses: Cigarettes	21.2%	7.4%
Currently uses: Chewing tobacco or snuff	2.5%	2.1%
Currently uses: Cigars	0.0%	0.0%
Currently uses: E-cigarettes or other vaping device	0.0%	0.0%
Currently uses: Pipes	0.0%	0.0%

Age	Current use: cigarettes	Current use: chewing tobacco or snuff
18-29	2.4% 2.3%	
30-44	10.3%	3.2%
45-64	45-64 9.1% 1.7%	
65+	6.7%	0.0%



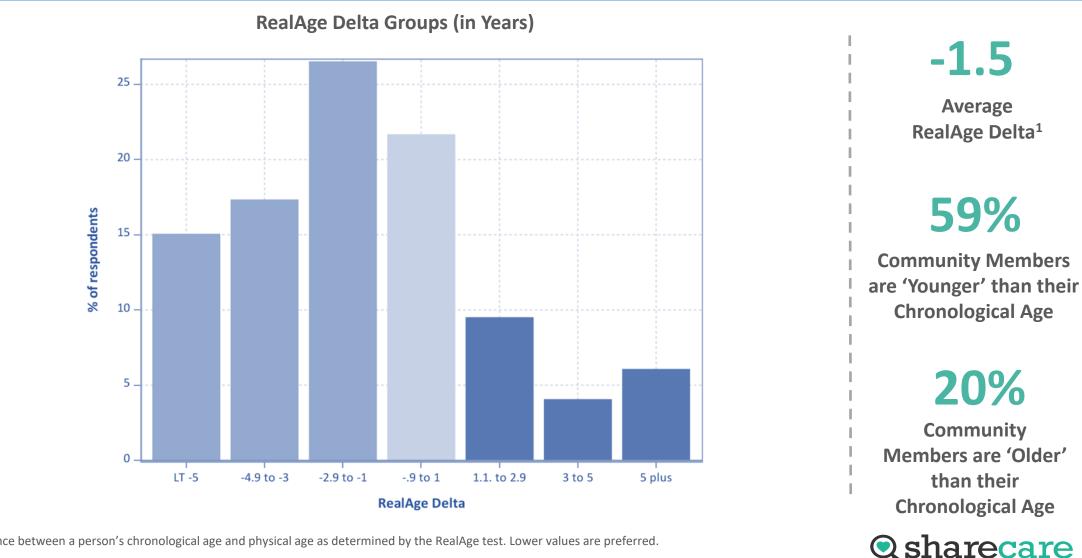
Alcohol Use in Albert Lea

2019 WBI/eRAT Number of Weekly Drinks	0	1 to 5	6 to 10	> 10
Females: How many alcoholic drinks do you have in a typical week?	50.0%	37.6%	10.3%	2.2%
Males: How many alcoholic drinks do you have in a typical week?	42.0%	32.6%	17.0%	8.4%

2019 WBI/eRAT Binge Drinking	Never	Less than monthly	Monthly	Weekly or more
Females: How often do you have 4 or more drinks in one setting?	93.7%	1.9%	1.9%	2.5%
Males: How often do you have 5 or more drinks in one setting?	89.8%	0.0%	8.4%	1.8%



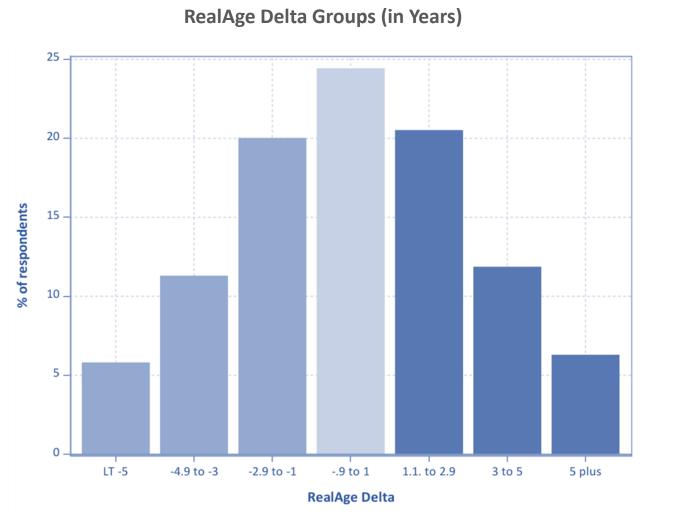
Albert Lea RealAge Distribution



¹RealAge Delta – The difference between a person's chronological age and physical age as determined by the RealAge test. Lower values are preferred.

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Like Community RealAge Distribution



0.1

Average RealAge Delta¹

37%

Participants are 'Younger' than their Chronological Age

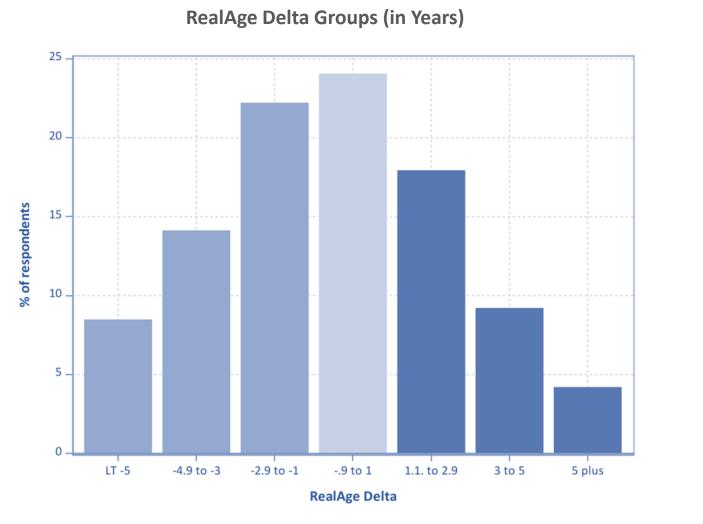
39%

Participants are 'Older' than their Chronological Age

⊘sharecare

¹RealAge Delta – The difference between a person's chronological age and physical age as determined by the RealAge test. Lower values are preferred.

State RealAge Distribution



-0.6

Average RealAge Delta¹

45%

Participants are 'Younger' than their Chronological Age

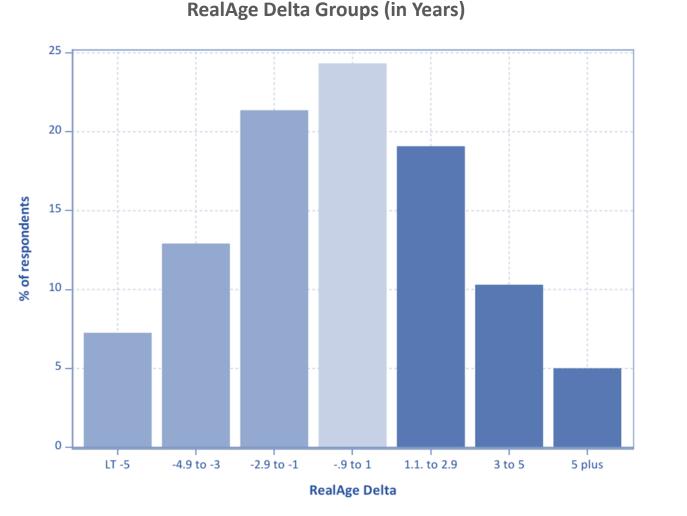
31%

Participants are 'Older' than their Chronological Age

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¹RealAge Delta – The difference between a person's chronological age and physical age as determined by the RealAge test. Lower values are preferred.

National RealAge Distribution



-0.3

Average RealAge Delta¹

41%

Participants are 'Younger' than their Chronological Age

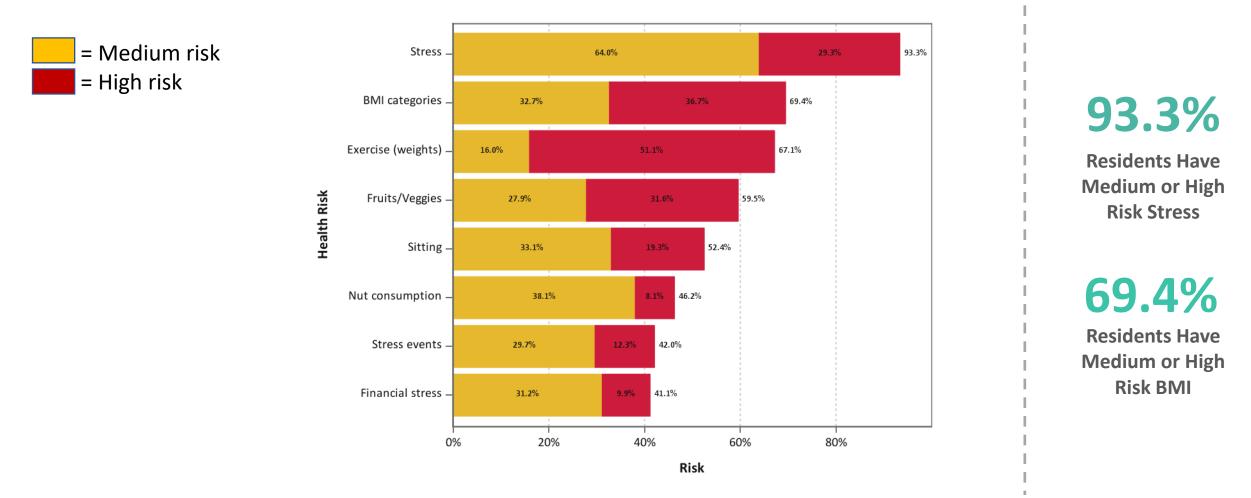
34%

Participants are 'Older' than their Chronological Age

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¹RealAge Delta – The difference between a person's chronological age and physical age as determined by the RealAge test. Lower values are preferred.

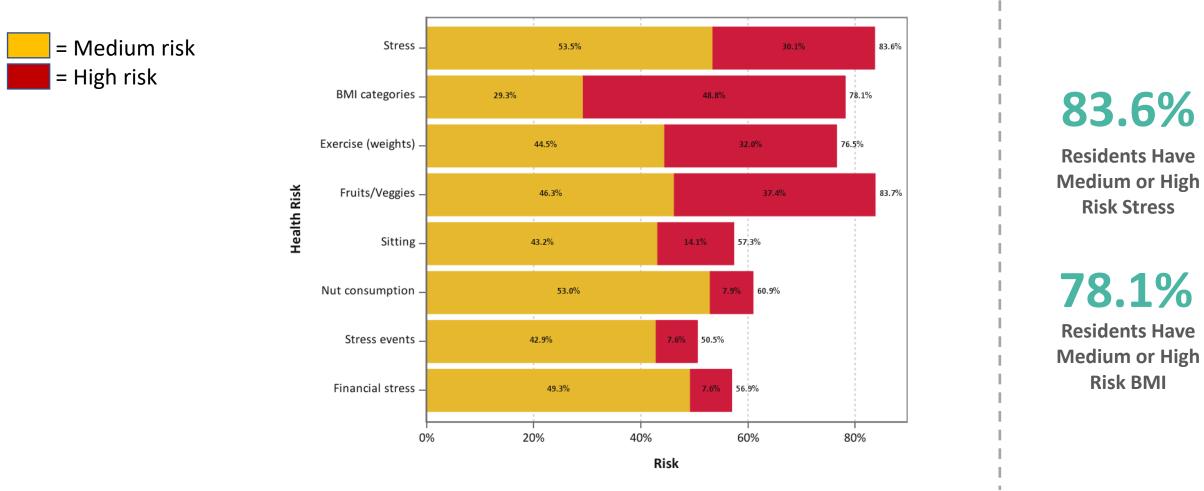
Albert Lea Health Risk Prevalence





Factor risks are assigned Red / Yellow / Green categories, commensurate with expected risk levels of each respondent's given answers. Yellow represents moderate risk and red represents high risk.

Like Community Health Risk Prevalence

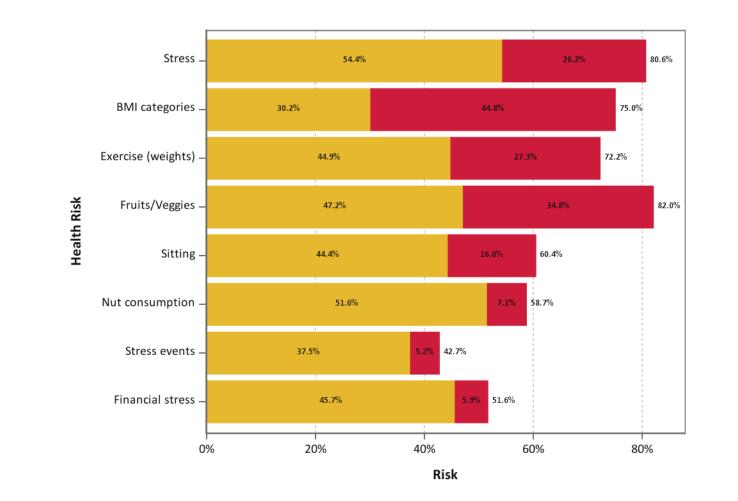


BLUE ZONES PROJECT

by sharecare

Factor risks are assigned Red / Yellow / Green categories, commensurate with expected risk levels of each respondent's given answers. Yellow represents moderate risk and red represents high risk.

State Health Risk Prevalence



80.6%

Residents Have Medium or High Risk Stress

75% Residents Have Medium or High Risk BMI

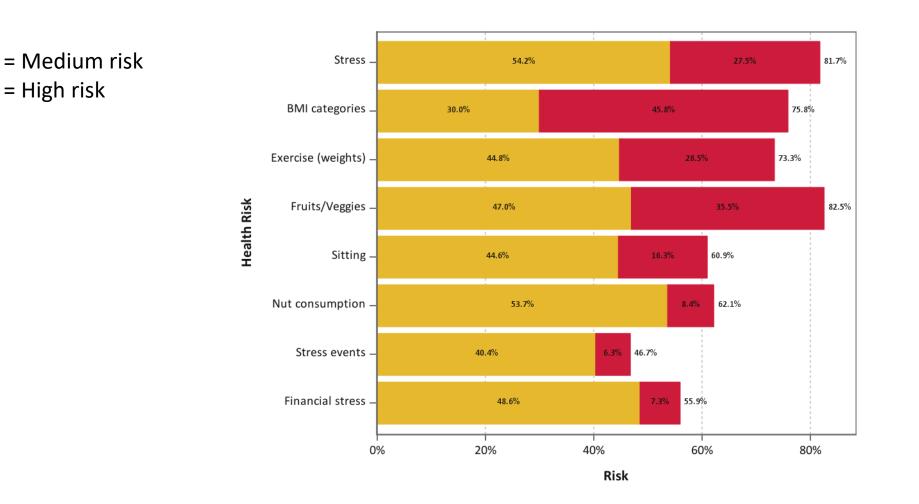


Factor risks are assigned Red / Yellow / Green categories, commensurate with expected risk levels of each respondent's given answers. Yellow represents moderate risk and red represents high risk.

= Medium risk

= High risk

National Health Risk Prevalence



81.7%

Residents Have Medium or High **Risk Stress**

75.8%

Residents Have Medium or High **Risk BMI**



Factor risks are assigned Red / Yellow / Green categories, commensurate with expected risk levels of each respondent's given answers. Yellow represents moderate risk and red represents high risk.

= High risk

Most Prevalent Health Risks in Albert Lea

Health Risk	Nation 2019	State 2019	Like Communities 2019	Albert Lea 2019
Stress	49.5%	46.4%	49.5%	93.3%
BMI categories	75.8%	75.1%	78.2%	69.4%
Lack of Exercise (weights)	73.3%	72.1%	76.5%	67.1%
Low Fruit & Vegetable Consumption	82.4%	81.9%	83.7%	59.5%
Long periods of sitting	61.0%	60.4%	57.3%	52.4%
Low nut consumption	62.0%	58.7%	60.9%	46.2%
Stress events	46.7%	42.6%	50.5%	42.0%
Financial stress	55.9%	51.6%	57.0%	41.1%
Lack of Exercise (aerobic)	59.3%	62.4%	56.6%	36.5%

See appendix for risk definitions



Most Prevalent Health Risks in Albert Lea

	Nation	State	Like Communities	Albert Lea
Health Risk	2019	2019	2019	2019
Depressed	47.8%	43.5%	49.0%	30.2%
Group activities	52.7%	50.0%	52.7%	30.0%
Alcohol (male)	33.3%	33.1%	34.0%	18.0%
Hypertension	26.9%	23.3%	24.3%	12.8%
Alcohol (females)	27.0%	26.1%	27.3%	11.2%
Smoking	18.6%	17.1%	21.7%	9.5%
Asthma	6.5%	5.5%	7.0%	7.6%
Cholesterol	5.3%	5.5%	7.2%	6.3%
Diabetes	14.0%	10.9%	13.3%	1.7%

See appendix for risk definitions



SDoHi: Albert Lea's SDoHi overall score lags somewhat behind that of the state and nation but is similar to those of 'like' communities. Albert Lea's stable economic landscape and access to community places, however, are reflected well in their scores.

Healthcare Access: Albert Lea lags behind the state and nation in regard to healthcare provider availability. However, this community strongly out-performs 'like' communities.

Resource Access: Albert Lea excels in terms of access to libraries, places of worship, and green space.

Food access: Fewer people in Albert Lea have food access at 1 mile in comparison to average state and national values. This trend appears to impact seniors less than other groups.

Housing and Transportation: Albert Lea enjoys more affordable homes and more economically diverse neighborhoods than the state or nation. It is also an active community where many residents walk or bike to work.

Economic security: Albert Lea's workforce participation and unemployment rates are similar to those of the state and nation. SNAP usage, poverty rates and public health coverage for individuals under age 65 are marginally higher in Albert Lea than in Minnesota as a whole.



How to read social determinant of health (SDoH) tables:

Characteristic	What to look for
Data year	* = 2018
	** = 2017
	*** = 2016
	**** = 2015
Directionality of SDOH Variables	Higher values are preferred
	Values are direction-neutral or dependent on context
	Lower values are preferred
Albert Lea Data Point	Values in green are those where Albert Lea is doing well compared to the state. Values in red are areas for improvement. Neutral values are in black. Values highlighted in yellow are above/below one standard deviation from national mean value



SDOH Measure	National Values	State Values	Like Community Values	Albert Lea
SDoHi	55.66	55.44	51.20	50.48
Healthcare access	59.89	59.19	45.78	53.96
Food access	61.17	57.87	55.38	48.58
Housing and transportation	58.42	55.82	45.66	46.84
Economic security	52.47	57.76	54.79	53.36
Resource access	46.36	46.57	54.37	49.67

Note: Scores are based out of 100, higher scores indicate better health. Green color coding for Albert Lea data indicates the community is doing well on an SDOH variable compared to the state of Minnesota. Red color coding indicates that there is room for improvement.



Healthcare Access

Healthcare Access	National Values	State Values	Like Community Values	Albert Lea
Active non-federal MDs per 1,000 residents**	2.82	3.17	0.52	1.08
Non-federal OBGYNs per 1,000 residents**	0.12	0.12	0.02	0.10
Non-federal pediatrics specialists per 1,000 residents**	0.18	0.16	0.03	0.13



Resource Access

Resource Access*	National Values	State Values	Like Community Values	Albert Lea
The number of religious institutions per 10,000 residents*	1.55	1.12	2.20	10.55
The number of libraries per 10,000 residents*	0.54	0.66	3.84	0.74
Percent over 65 who work [*]	3.97	4.39	6.50	5.06
Normalized Difference Vegetation Index (greenness measure)*	0.68	0.86	0.76	0.81
Percent of county area that is national/state park land*	13.44	12.87	1.90	0.31



Food Access

Food access	National Values	State Values	Like Community Values	Albert Lea
Percent of black population with low grocery access at 1 mile	31.98	35.63	44.84	60.96
Percent of population ages 0-17 with low grocery access at 1 mile	40.48	50.04	51.36	64.51
Percent of seniors with low grocery access at 1 mile	39.27	46.54	52.82	56.15
Percent of Hispanic population with low grocery access at 1 mile	32.31	36.51	37.65	60.93
Percent of Native Hawaiian/Pacific Islander population with low grocery access at 1 mile	35.41	43.35	53.50	66.24
Percent of households receiving SNAP with low grocery access at 1 mile	32.71	36.68	46.74	59.59
Percent of households with no vehicle access at low grocery access at 1 mile	27.48	29.60	35.01	50.78
Percent of low-income population with low grocery access at 1 mile	34.86	40.33	49.93	63.89
Percent of population with low grocery access at 1 mile	39.75	48.29	53.04	61.80
Proportion of tracts flagged for low supermarket access (0.5 mile urban, 10 mile rural)	0.69	0.71	0.67	0.59



Housing & Transportation

Housing & Transportation	National Values	State Values	Like Community Values	Albert Lea
Percent of homes valued \$500K and up*	14.50	6.71	1.25	1.34
Percent of homes with home-value-to-income ratio of 4.0 and up*	25.86	16.94	9.88	10.71
Percent of the population with an income that spends 20-29% of income on housing (mortgaged homes)*	43.48	49.64	52.75	55.86
Median home value*	\$277,958	\$228,418	\$97,734	\$108,901
Median household income*	\$67,232	\$73,556	\$50,331	\$48,641
Residential economic segregation*	0.46	0.45	0.25	0.40
Percent who walk to work*	2.66	2.74	3.57	2.48
Percent who bike to work*	0.53	0.71	0.45	0.95
Percent who take public transit to work*	4.90	3.52	0.45	0.91



Economic Security

Economic Security	National Values	State Values	Like Community Values	Albert Lea
Percent of the population age 19-64 with public health insurance	17.84	17.49	15.05	26.37
Percent of the population age 65+ with public health insurance	95.57	96.94	97.89	97.67
Unemployment rate (age 20-64)	5.63	3.64	4.35	4.19
Percent of population in the labor force	63.53	69.84	63.30	63.57
Percent living in poverty/income below poverty	14.25	10.32	12.69	14.89
Percent of population that is employed, age 16 to 54	71.29	80.65	76.13	79.04
Percent of population that is employed, age 55 to 74	47.25	53.66	53.26	52.64
Percent of households recieving SNAP	12.49	8.29	10.36	13.43
Percent of the population who gets some of their income from public assistance	2.52	3.42	2.38	2.30

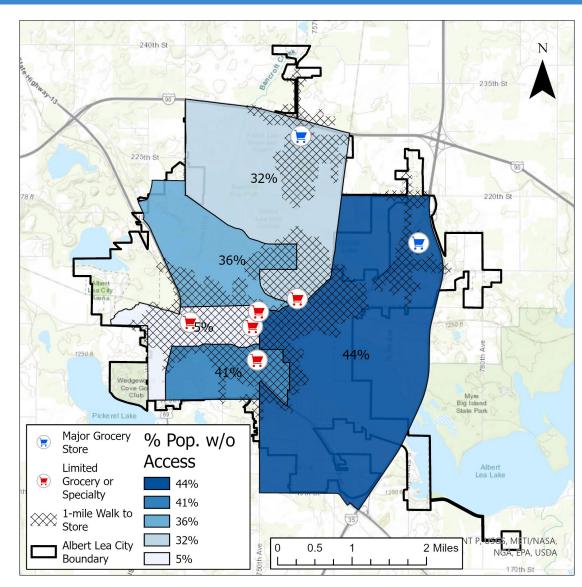
East Albert Lea has Highest Percent of Individuals without Access to Grocery Store within 1 Mile

Location of grocery stores

VS.

Areas within 1 mile walk of grocery stores vs.

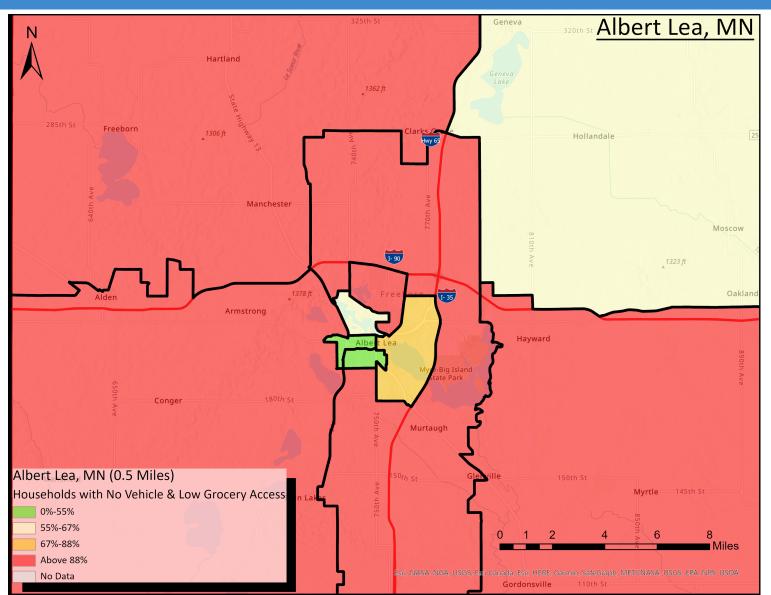
% Population in census tract without access to grocery store within 1 mile





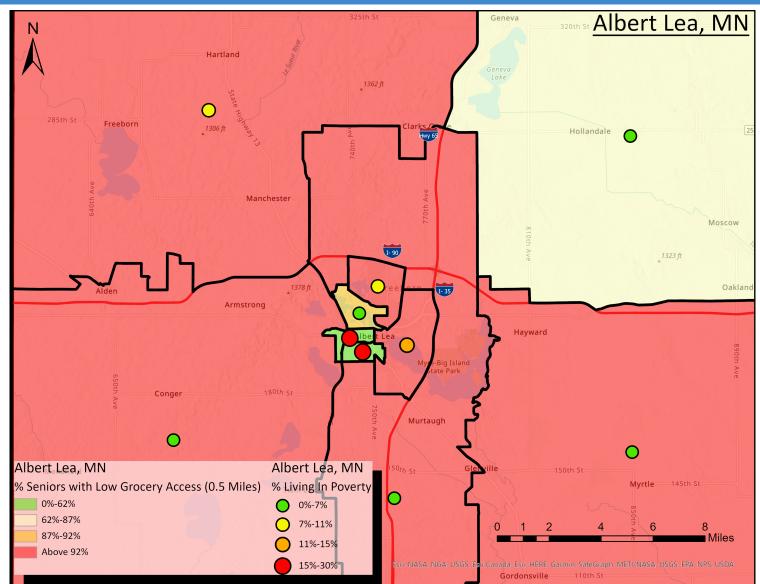
Western Albert Lea Has Better Grocery Store Access within 0.5 Miles for Households with No Vehicle Access

% Households with no vehicle and low grocery access within 0.5 miles



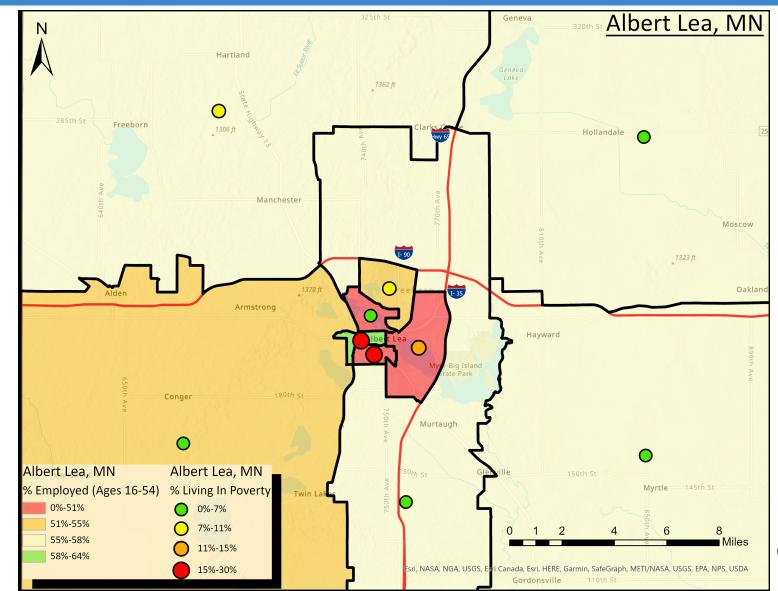
Areas of Greatest Poverty Have Better Grocery Stores Access within 0.5 Miles for Seniors

% Seniors with low grocery access within 0.5 miles vs. % Living in poverty



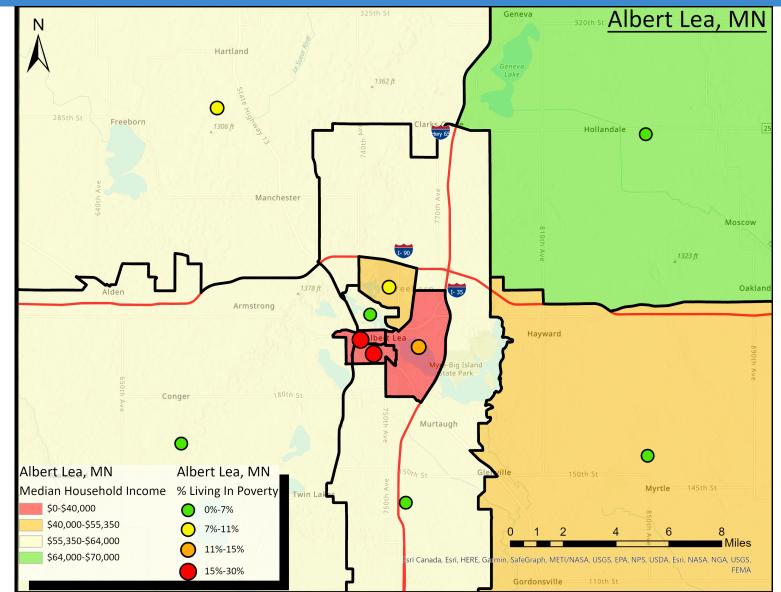
Southeast Albert Lea has Higher Levels of Poverty and Lower Employment Rates

% Employed vs. % Living in poverty



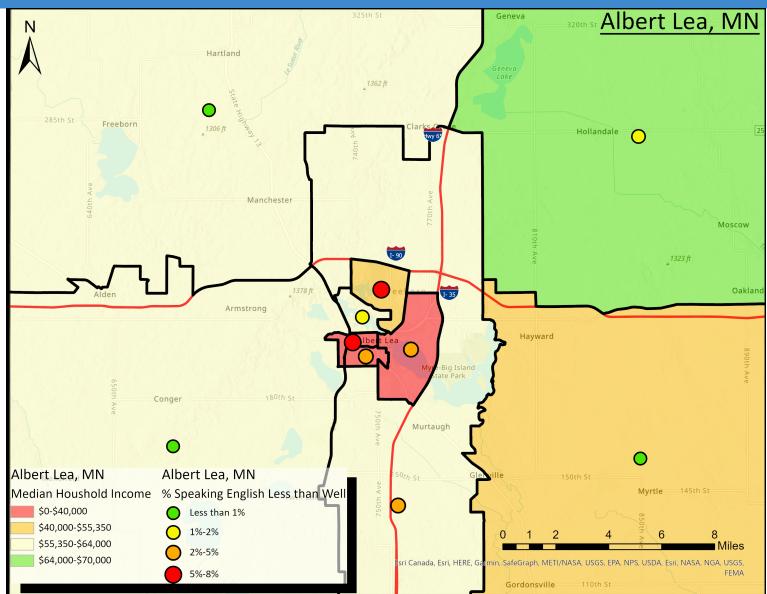
Southern Albert Lea Has Higher Levels of Poverty and Lower Household Income

Median household income vs. % Living in poverty



Central Albert Lea Has Higher % of Individuals Who Speak English less than Well and Lower Household Income

Median household income vs. % Speak English less than well



Appendix

Respondent Profile

Age				Gender			Marital Sta	tus			
	18-29	30-44	45-64	65+		Male	Female		Never Married	Married	Other
Albert Lea	7.5%	21.3%	39.0%	32.2%	Albert Lea	31.5%	68.5%	Albert Lea	12.8%	62.7%	24.5%
Census	12.4%	17.1%	25.0%	22.8%	Census	48.3%	51.7%	Census	28.4%	51.8%	20.9%

Education

Race/Ethnicity

Hispanic or Grade/ White Black Asian Other High Post-Latino Middle College School Graduate School Albert Lea 92.5% 0.7% 0.6% 1.5% 2.2% 89.5% 2.9% Census 1.4% 3.0% 12.8% Income 2.1% 38.5% 40.9% 18.6% Albert Lea \$25,000-\$50,000-<\$25,000 \$100,000+ \$49,999 \$99,999 Albert Lea 13.5% 23.3% 35.4% 27.9% 0.0% 48.2% 35.8% 16.0% Census Median household income: \$49,953 Census

May not add to 100% due to "Don't Know" responses or refusals to answer. Data source: 2019 Census ACS 5 Year Estimates

Respondents are able to select more than one race which is why percentages do not sum up to 100%.

Risk Definitions

Risk/Condition	Green Definition	Yellow Definition (moderately at-risk)	Red Definition (at-risk)
Cancer Test (Colon) (age 50 - 85)	Up-to-date with screenings		Not up-to-date with screenings
Cancer Test (Breast) (women age 50-74)	Up-to-date with screenings		Not up-to-date with screenings
Cancer Test (Cervical) (women 21-65)	Up-to-date with screenings		Not up-to-date with screenings
Asthma(both Male and female)	Rare or never symptoms or never had asthma or does not have asthma currently or FEV1 result rare/none		Moderate or severe symptoms or has asthma currently or FEV1 result rare/none
Sleep	7-9 hours	4-6 hours	<4 or 9+ hours
Diabetes	No diabetes or A1c <=7%	A1c 7.1% - 7.9%	A1c >=8% or "not sure"
Alcohol (Female)	No alcohol, quit, <1/month - 1 daily,1-2daily	2 daily, 3-5 daily	Binge (>=4) or 6+ daily
Alcohol (Male)	No alcohol, quit, <1/month - 1-2 daily, >1/month - <1/day	3-5 daily	Binge (>=5) or 6+ daily
Smoking	None or quit, never second hand smoker	Secondhand	Any current
Fruits Veggies	>=5 servings/day	3-4/day	<=2/day
Nuts	>=2 servings/week	>0 - 1/day	0/day
Vitamin - D (age 70+ or female)	Taking supplement (600+ recommended (800+ for age 70+))	No supplement	No supplement and female or 70+
Exercise (Weights)	30+ minutes/week	1-30 minutes/week	0 minutes/week
Group Activities	Sometimes or greater	Seldom	Never



Risk Definitions

Risk/Condition	Green Definition	Yellow Definition (moderately at-risk)	Red Definition (at-risk)
Employment	Employed full time, student, or homemaker or employed student	Retired (expected time), temporarily unemployed, working 2 jobs or >5h/week overtime, works part time	Unemployed, retired early
Stress Events	None	1	>=2
Financial Stress	Little or none	Moderate	High or severe
Stress	Little or none	Moderate	High or severe
Depressed	None or don't have depression condition, or not depressed in last two week or PHQ2 < 3		Yes or PHQ2>=3
Falls (age 60+)	None	1	>=2
Sitting	Almost never, <25% of day	50% of day	>=75% of day
Cholesterol	Better than equivalent risk of TC 200, HDL 40(If male, female,cholesterol delta risk < = 0)	If male, cholesterol delta risk > 0 and <= 0.407. If female, cholesterol delta risk > 0 and <= 0.3083	If male, cholesterol delta risk >0.407. If female, cholesterol delta risk >0.3083
Hypertension	Better than equivalent risk of 120/80 (If male, female, hypertension delta risk < = 0)	Risk between 120/80 and 140/90(If male, hypertension delta risk > 0 and <= 1.3154. If female, cholesterol delta risk > 0 and <= 0.9749)	Risk greater than 140/90(If male, hypertension delta risk > 1.3154. If female, cholesterol delta risk > 0.9749)
Self-reported Health Status (SRHS)	Better than average for age(SRHS delta <0)	Average for age(SRHS delta >0 <1)	Worse than average for age(SRHS delta >1)
Aspirin	Taking aspirin if cardiac risk >10% or not taking it if risk <10%(Aspirin delta <0.2)		Not taking aspirin if cardiac risk >10% or taking it if risk <10%(Aspirin delta >=0.2)
Bmi/Waist	Risk is less than average for BMI and waist circumference	Risk is 0-1 SD above average for BMI and waist circumference	Risk is >1 SD above average for BMI and waist circumference
Exercise	Risk is less than average for combined aerobics and walking	Risk is 0 - 1 SD greater than average for combined aerobics and walking	Risk is >1 SD greater than average for combined aerobics and walking

