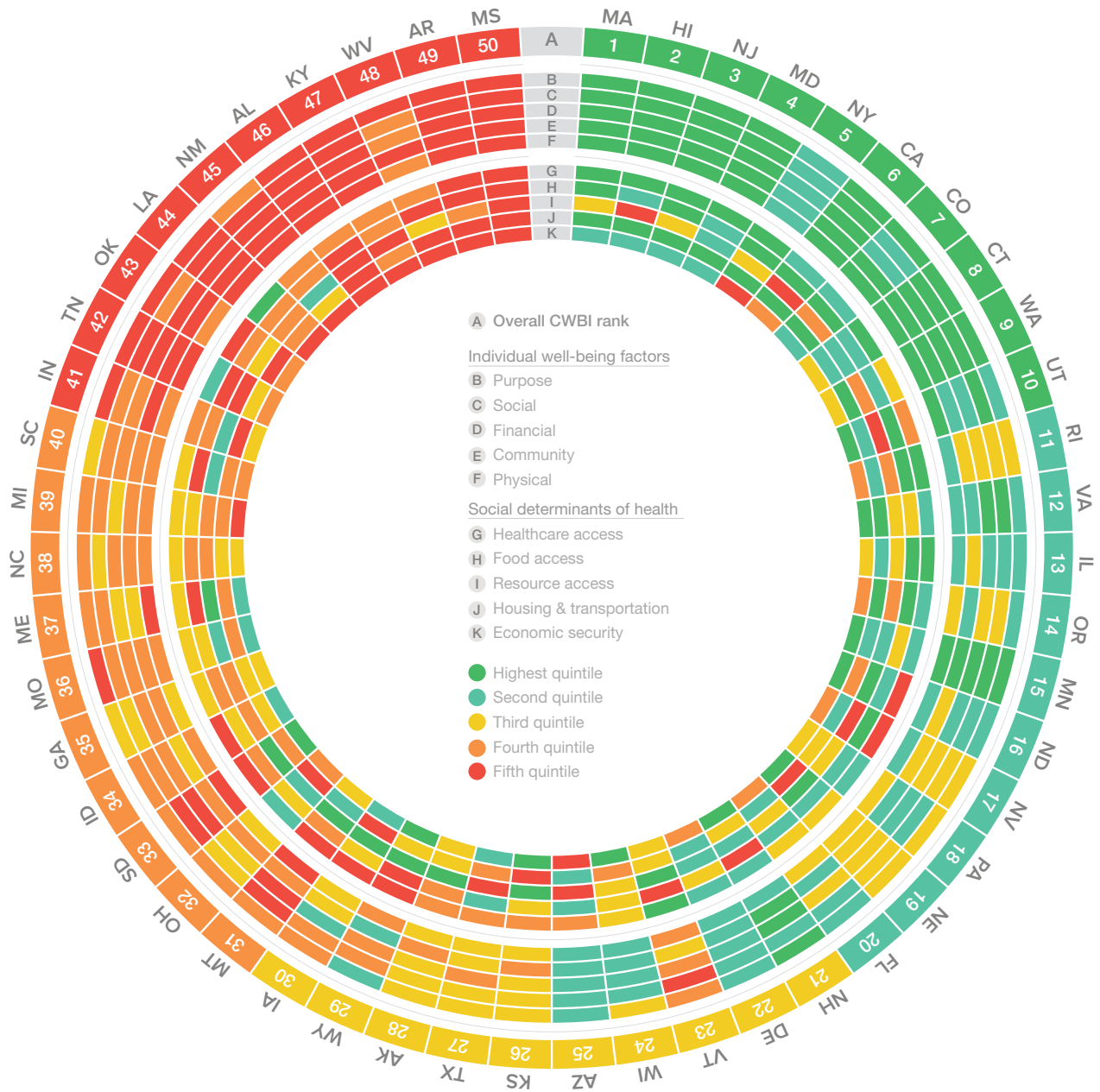


# Community Well-Being Index

2021 state rankings report



## Vision

During the height of the COVID-19 pandemic and throughout 2020, many generations experienced – for the first time in their lives – government and institutional mandates that restricted our geographic freedoms; required strict safety measures in public places; and, in many scenarios, dictated where, how, and if we worked. While necessary in the face of a pandemic, downstream implications for individual, community, and public health soon came to bear, including but not limited to widespread declines in financial well-being discovered in Sharecare’s 2020 analyses, declines in mental health measured by our partners at Boston University School of Public Health (BUSPH) throughout the pandemic, and the widely reported exacerbation of inequities in access to healthy foods, healthcare, and resources.

However, in late 2020 and into early 2021, the COVID-19 vaccine rollout allowed various “reopenings” around the nation, easing restrictions that affected everyday activities and enabling individuals to rediscover their communities and senses of purpose – momentum that accelerated movements across the country, from the “Great Resignation” to an urban exodus from metropolitan cities.

The last two years of the COVID-19 pandemic have given Americans the opportunity to reshape traditional ideas of what work, leisure, and community life entails. We have seen the effects of this in demands on healthcare providers to adopt telemedicine practices, on government organizations to provide community and financial supports, and also on workplaces, where myriad changes occurred across every level of occupational category. Working populations witnessed firsthand efforts to advance diversity and inclusion efforts, expanded vacation and benefits offerings, enhanced transparency from leadership, the provision of new resources and flexibility in how work can be done, and so much more.

In this report, we evaluate how these shifts coincide with well-being across 10 domains and throughout the country, examining not only the states with the highest and lowest levels of individual health, but also findings that demonstrate a renewed sense of individual purpose and connection to community nationwide.

In addition to nationwide trends, we also explore the growing gap in overall well-being scores measured across states. Although national averages appeared to increase across select domains of well-being and social determinants of health, the differences in scores demonstrate that inequities across our country continue to increase.

As each year brings new circumstances impacting well-being across U.S. communities, Sharecare’s approach to measurement and intervention remains consistent. The approach includes:

- Measuring well-being comprehensively in a way that captures health risk and opportunity across both people and places;
- Combining this holistic measure with research-backed protocols and interventions that enable people to thrive, meet individuals where they are in their health journey, and empower communities by making the healthy choice the easy choice; and
- Continuing to expand upon opportunities to apply this data toward improving well-being within communities, including contextualizing health equity and social determinant circumstances for employers, identifying individual and population-wide social determinant care gaps for providers, providing platforms founded in the intersection of holistic health and member engagement for health plans, and more.

As we build upon a decade and a half of measuring well-being across U.S. states, metro areas, and counties, we are honored to share these results through a collaboration between Sharecare and BUSPH, anchored in its Biostatistics and Epidemiology Data Analytics Center (BEDAC). It is our hope and mission that these findings enable stakeholders across the healthcare ecosystem and beyond to discover and build targeted interventions that enhance health, access, and opportunity for all.

**Jeff Arnold**

Chairman and CEO, Sharecare

**Sandro Galea, MD, DrPH**

Dean, Boston University School of Public Health



## Overview

The Sharecare Community Well-Being Index 2021 state rankings report provides an overview of the nation's well-being in 2021, highlighting areas of progress and opportunity across the country. With various measures represented in the Index, the data is broken down to expose differences in health tied to people and places through comparisons between neighboring counties, cities, and states.

For the 2021 ranking, Sharecare and BUSPH collected nearly 500,000 surveys in order to achieve representation, reflecting an increase over the number of surveys collected during 2020. Through a combination of data collection at scale and advanced methods, the Index continues to provide visibility into scores and rankings for 3,142 U.S. counties, 383 Census-designated metropolitan statistical areas (MSAs), and all 50 states, ensuring demographic coverage for these geographies.

Based on Sharecare's history of contextualizing the role of place in individual and community health efforts, the Sharecare Community Well-Being Index 2021 state rankings report delivers an overarching metric that provides insights for a next-generation of community-driven care, affording the opportunity to evaluate health risk across multiple dimensions, and enabling new data-driven interventions tailored to populations and their environments.

For more information on the Sharecare Community Well-Being Index, visit our [methods page](#).

495,783 surveys collected in 2021, 30,000 more than our 2020 rankings report. As we continue to refine our data collection process each year, we are able to collect more survey responses.



**Overview:** In partnership with Boston University School of Public Health (BUSPH), anchored in their Biostatistics and Epidemiology Data Analytics Center (BEDAC), the Sharecare Community Well-Being Index measures well-being domains across physical, financial, social, community, and purpose, as well as social determinant domains across food access, resources, healthcare, economic security, and housing and transportation.

Through comprehensive coverage and measures across tracts, counties, metro areas and states, as well as subpopulations and underserved healthcare communities, these data and peer-reviewed research have been applied to:

1. Amplify the message around the importance of community health through rankings and research
2. Demonstrate the significance of these measures when it comes to outcomes from healthcare expenditure to workforce productivity and more, resulting in over 80 peer-reviewed publications generated to date
3. Cultivate a diagnostic capability for intervention, including insights and paired interventions for addressing individual health risk, social needs and risks, systemic and population-based inequities, social determinants, and more

## Approach and evolution

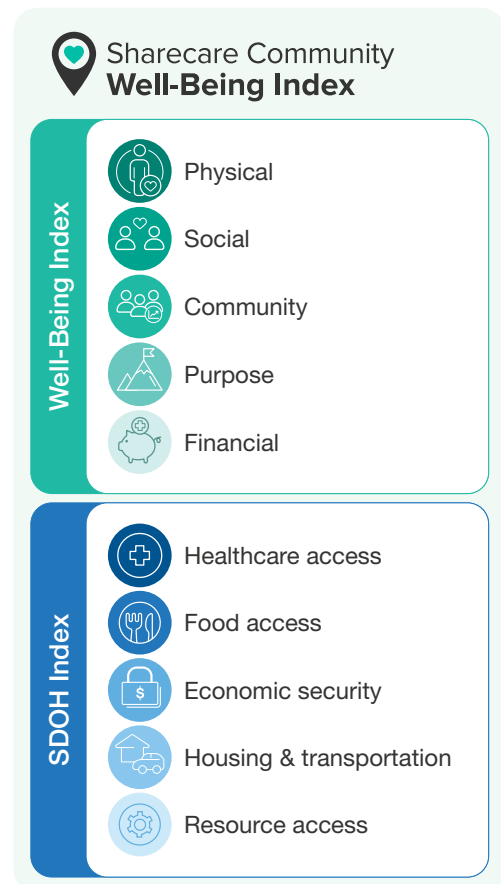
The Sharecare Community Well-Being Index is comprised of two underlying indices that cover 10 domains; they combine to drive understanding of individual health risk and opportunity as well as risks associated with an individual’s surroundings and environment (social determinants):

**Sharecare Well-Being Index:** Based on over 4 million surveys collected since 2008 and nearly 500,000 surveys collected in 2021, the Sharecare Well-Being Index is one benchmark of our nation’s health, enabling states and communities to understand health risks and opportunities across domains such as physical and financial resilience, social and community context, and everyday purpose.

- **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 increase security and reduce stress
- **Community:** Liking where you live and having pride in your community
- **Physical:** Having good health and enough energy to get things done daily

**Sharecare Social Determinants of Health Index:** Derived from over 600 elements of social determinants of health (SDOH) data from sources including American Community Survey (ACS), United States Department of Agriculture (USDA), Area Health Resources, National Park Service, Centers for Disease Control and Prevention (CDC), National Aeronautics and Space Administration (NASA), and more, the Sharecare SDOH Index focuses on health risks associated with an individual’s surroundings. This Index is comprised of five domains across healthcare and food access, housing and transportation, economic security, and access to key community resources, and more deeply examines 17 elements among the original 600 that carry the greatest “explanatory power” with respect to key outcomes.

- **Healthcare access:** Concentration of doctors of medicine (MDs), obstetrician gynecologists (OBGYNs), and pediatric specialists per 1,000 residents
- **Food access:** Presence of grocery stores within one mile of underserved populations, including children, seniors, and Black individuals
- **Resource access:** Quantity of libraries and religious institutions per 10,000 residents, employment rates for people over 65, and presence of grocery stores within 20 miles
- **Housing & transportation:** Home values, ratio of home value to income, and public transit use
- **Economic security:** Rates of employment, labor force participation, individuals with health insurance coverage, and household income above poverty level



## Key nationwide trends

Measured on a scale of 0 to 100, with 100 representing the greatest possible well-being, the nation’s average Sharecare Community Well-Being Index score for 2021 was 60.9, suggesting year-to-year consistency from the 2020 Index average of 60.5.

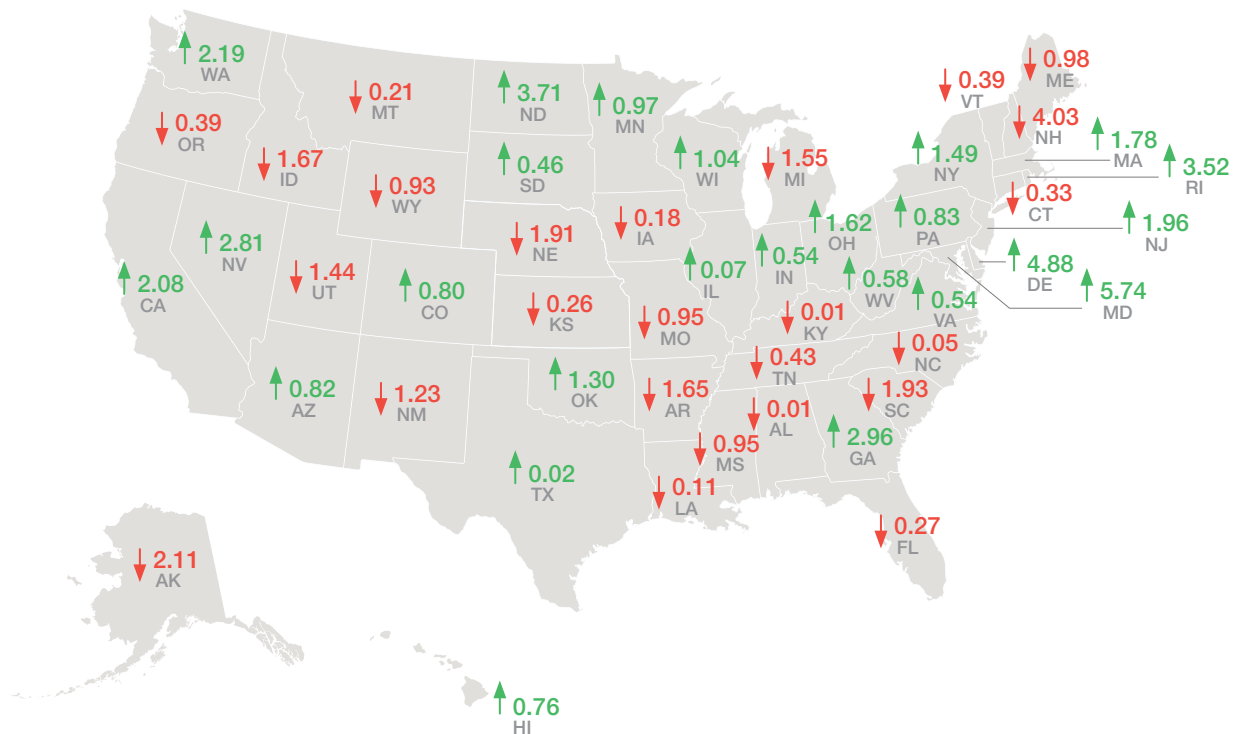
Across the domains, nationwide trends that emerged throughout the year are as follows:

- Purpose, achievement, and motivation at work became more important drivers in 2021. Defined as “liking what you do each day and feeling motivated to achieve your goals,” **purpose well-being** is paramount in sustaining a productive and motivated workforce, as well as fostering healthy

homes, classrooms, senior living centers, volunteerism, and more. Purpose well-being improved by 5.7 points from 2019 to 2021, moving from 59.0 in 2019 to 64.7 in 2021.

- Aligned to U.S. Consumer Financial Protection Bureau findings tied to improvements in financial well-being for populations under age 40, the Index showed a nationwide increase in the **financial well-being** domain, shifting from 58.4 in 2020 to 60.6 in 2021 and representing restored nationwide financial health levels compared to those measured pre-pandemic in 2019.

Change in Sharecare Community Well-Being Index score by state, 2019 – 2021



- This year’s state-level analysis also noted an increase in the **community well-being** domain. Pride and feeling connected to your community serve a critical role in overall individual well-being, especially in the face of hardship. To experience positive interactions with your surroundings and feel that your community is the perfect place for you also is linked with better financial well-being and lower health risks.

Compared to 2020 reporting, 2021 Index scores reflect relative stability across domains.

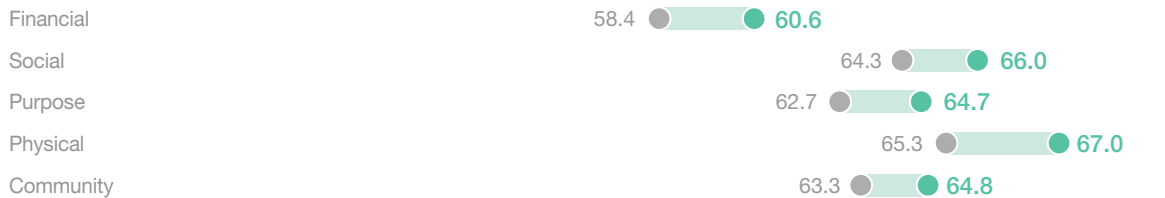
- Of the 10 lowest ranked states in 2020, each remained in the bottom quintile in 2021 despite some score improvements. Similarly, all top 10 states for the 2020 Index maintained top 10 positions in 2021.
- Six states shifted five rankings or more in this year’s Index report. States that saw a decline of five ranking spots or more included Alaska (-5), Maine (-8), and New Hampshire (-5); states that saw an improvement of five ranking positions or more included Idaho (+5), Iowa (+6), and Texas (+8).

### Change in national score, 2020 – 2021

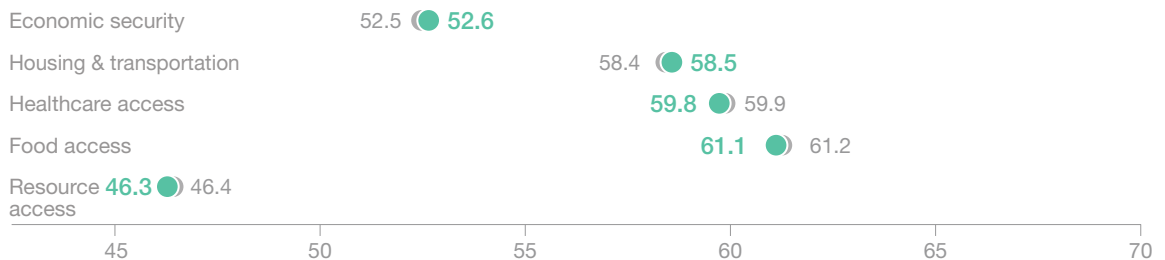
● 2020 score ● 2021 score

#### Sharecare Community Well-Being Index

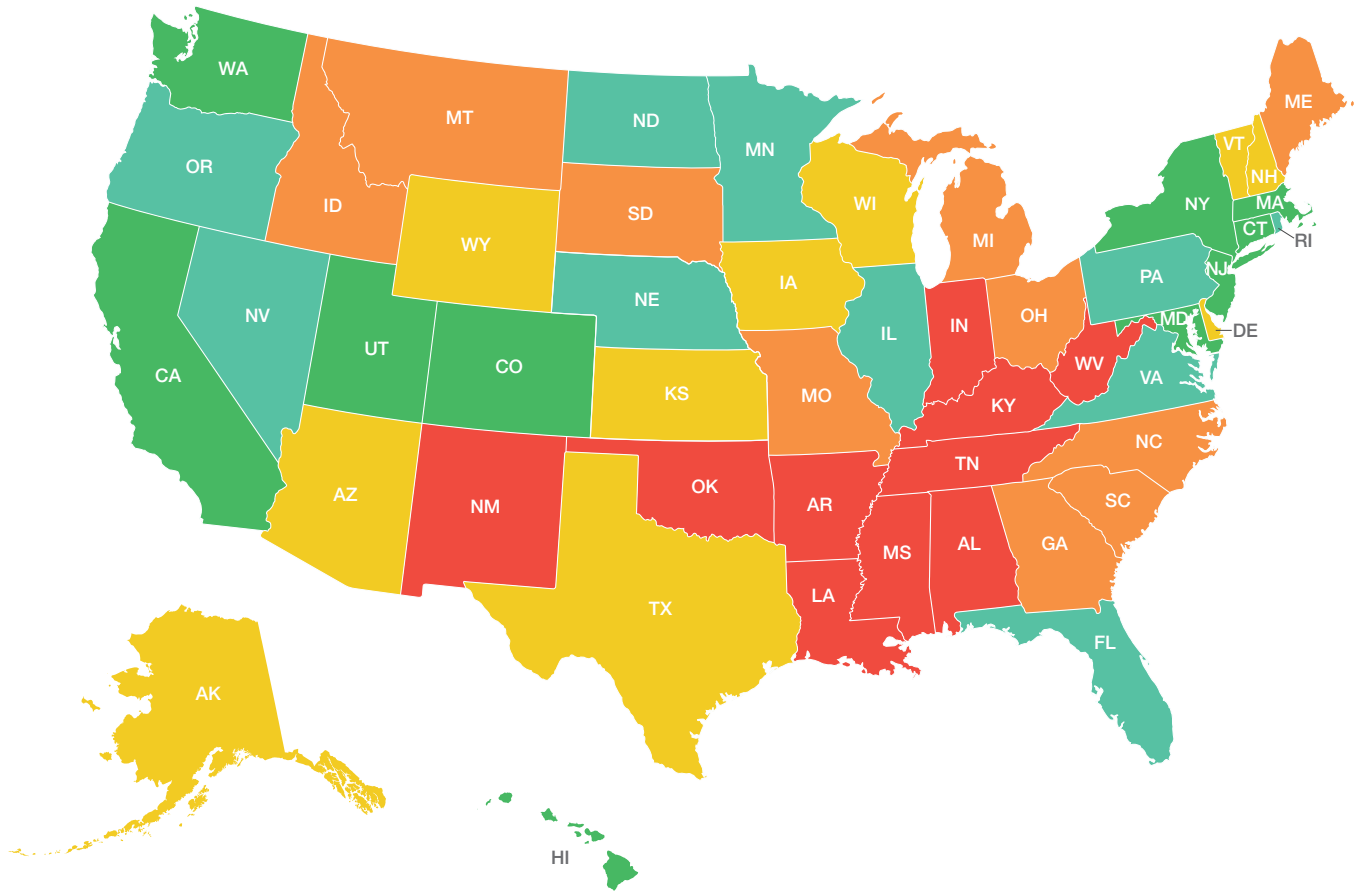
##### Well-Being Index



##### Social Determinants of Health Index



# Sharecare Community Well-Being Index, 2021 state rankings



Top quintile	2 <sup>nd</sup> quintile	3 <sup>rd</sup> quintile	4 <sup>th</sup> quintile	5 <sup>th</sup> quintile
1. Massachusetts	11. Rhode Island	21. New Hampshire	31. Montana	41. Indiana
2. Hawaii	12. Virginia	22. Delaware	32. Ohio	42. Tennessee
3. New Jersey	13. Illinois	23. Vermont	33. South Dakota	43. Oklahoma
4. Maryland	14. Oregon	24. Wisconsin	34. Idaho	44. Louisiana
5. New York	15. Minnesota	25. Arizona	35. Georgia	45. New Mexico
6. California	16. North Dakota	26. Kansas	36. Missouri	46. Alabama
7. Colorado	17. Nevada	27. Texas	37. Maine	47. Kentucky
8. Connecticut	18. Pennsylvania	28. Alaska	38. North Carolina	48. West Virginia
9. Washington	19. Nebraska	29. Wyoming	39. Michigan	49. Arkansas
10. Utah	20. Florida	30. Iowa	40. South Carolina	50. Mississippi

## Rankings overview

In 2021, Massachusetts earned the title of the “healthiest state in the country” for the second year in a row, including strong scores across both social determinants of health and individual well-being measures. The Bay State achieved top-ten scores in eight of 10 domains measured: healthcare access (#2), housing & transportation (#2), purpose well-being (#3), financial (#3), physical (#4), social (#5), community (#5), and food access (#8).

Hawaii—a consistent top performer in Index rankings since 2008, as well as a top 5 state for overall social determinants of health—placed at #2 on the Sharecare Community Well-Being Index. Appearing at the top of domain-level state rankings for physical (#1), financial (#1), social (#1), purpose (#1), and community (#1), Hawaii continues to demonstrate best-in-nation performance across all individual well-being measures.

Other “well-being elite” states appearing

at the top of the Sharecare Community Well-Being Index include New Jersey (#3), Maryland (#4), and New York (#5).

For the third year in a row, Mississippi earned the lowest overall score, joined by four other Southern states that comprise the bottom 10. Mississippi ranked #50 in the 2021 Index based on lowest-in-nation measures in all but four domains: purpose (#49), healthcare access (#43), economic security (#48), and resource access (#45).

Other states in the bottom quintile in 2021 include Arkansas (#49), West Virginia (#48), Kentucky (#47), and Alabama (#46). Alabama fell from #44 in 2020 to #46 in 2021, while Oklahoma moved up from #45 in 2020 to #43 in 2021.

Nine of the bottom 10 states have remained in the lowest quintile since 2019, with Tennessee (#42) appearing among the bottom 10 for the second consecutive year.

## Relationship between purpose well-being and condition burden

According to our research, having a strong sense of purpose is linked to greater emotional resilience and lower risk of developing a range of chronic conditions. Compared to states

with the lowest levels of purpose, those with the highest exhibited:

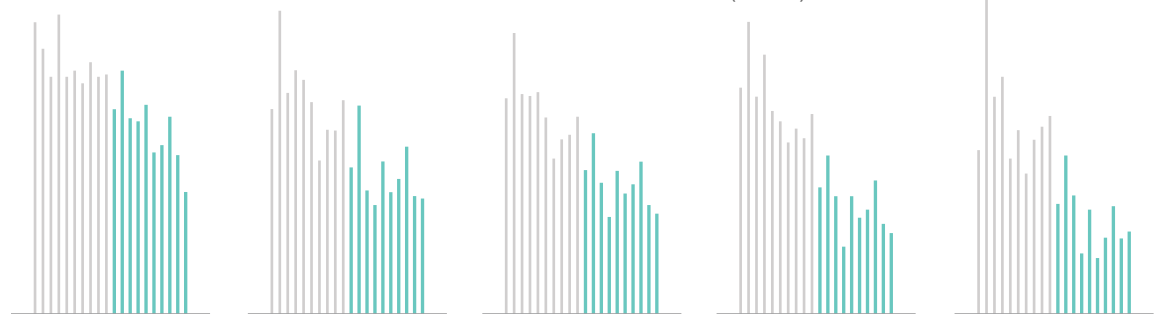
**1.4 times lower**  
rates of clinical depression

**1.5 times lower**  
rates of heart attacks

**1.6 times lower**  
rates of coronary artery disease (CAD)

**Nearly 2 times lower**  
rates of chronic obstructive pulmonary disease (COPD)










**2.1 times lower**  
rates of chronic kidney disease (CKD)



■ States with lowest levels of purpose ■ States with highest levels of purpose



## Ranking of top and bottom five states by domain

	Top 5 states	Bottom 5 states		Top 5 states	Bottom 5 states
<b>Well-Being Index</b>	1. Hawaii 2. New Jersey 3. California 4. Massachusetts 5. Maryland	46. Alabama 47. Louisiana 48. Kentucky 49. Arkansas 50. Mississippi	<b>Social Determinants of Health Index</b>	1. Massachusetts 2. New York 3. New Jersey 4. Maryland 5. Hawaii	46. Kentucky 47. Alabama 48. Arkansas 49. West Virginia 50. Mississippi
<b>Physical</b> 	1. Hawaii 2. New Jersey 3. California 4. Massachusetts 5. Maryland	46. Alabama 47. Louisiana 48. Kentucky 49. Arkansas 50. Mississippi	<b>Healthcare access</b> 	1. Rhode Island 2. Massachusetts 3. Connecticut 4. Vermont 5. New York	46. Wyoming 47. Nevada 48. Oklahoma 49. Iowa 50. Idaho
<b>Social</b> 	1. Hawaii 2. New Jersey 3. Maryland 4. California 5. Massachusetts	46. New Mexico 47. Kentucky 48. Louisiana 49. Arkansas 50. Mississippi	<b>Food access</b> 	1. California 2. New York 3. Nevada 4. New Jersey 5. Rhode Island	46. Maine 47. Vermont 48. New Hampshire 49. West Virginia 50. Mississippi
<b>Community</b> 	1. Hawaii 2. New Jersey 3. New Hampshire 4. California 5. Massachusetts	46. New Mexico 47. Kentucky 48. Arkansas 49. Louisiana 50. Mississippi	<b>Economic security</b> 	1. North Dakota 2. Utah 3. Nebraska 4. New Hampshire 5. Minnesota	46. Kentucky 47. Louisiana 48. Mississippi 49. New Mexico 50. West Virginia
<b>Purpose</b> 	1. Hawaii 2. New Jersey 3. Massachusetts 4. California 5. Maryland	46. Alabama 47. Kentucky 48. Louisiana 49. Mississippi 50. Arkansas	<b>Housing &amp; transportation</b> 	1. Hawaii 2. Massachusetts 3. California 4. New York 5. New Jersey	46. Iowa 47. Arkansas 48. Kansas 49. Oklahoma 50. Mississippi
<b>Financial</b> 	1. Hawaii 2. New Jersey 3. Massachusetts 4. Maryland 5. California	46. New Mexico 47. Kentucky 48. Louisiana 49. Arkansas 50. Mississippi	<b>Resource access</b> 	1. South Dakota 2. Vermont 3. North Dakota 4. Montana 5. Nebraska	46. Alabama 47. Texas 48. Hawaii 49. Nevada 50. Utah

## Strengths and weaknesses of the highest and lowest ranking states

Massachusetts (#1), Hawaii (#2), and New Jersey (#3) scored among the nation’s top 5 states within all individual well-being domains and one social determinant of health domain, housing & transportation. The three states were also among the top 10 for healthcare access.

Nine of the top 10 ranked states for the Index also garnered top 10 positions for the physical well-being domain; the exception, New York, ranked #15. Eight of the top 10 states for the 2021 Index ranked among the top 10 for housing & transportation; Connecticut and Utah barely missed the cutoff, ranking #11 and #12, respectively.

Utah (#10 overall) assumed the #2 ranking for the economic security domain, being the only top-ranked state for the 2021 Index to achieve a top-10 ranking for economic security.

There were no top-ranked states among the top 10 for resource access, demonstrating that communities across the country can and are able to thrive in areas with less access to institutions per capita – in particular, in areas with high population density.

In contrast, each of the 10 lowest ranked states on the Index landed a bottom 10

ranking for the community well-being domain, reinforcing the importance of liking where you live and having pride in your community. Similarly, nine of the 10 lowest ranked states landed in the bottom quintile for purpose, an essential domain for sustaining a productive and motivated workforce, as well as fostering healthy homes, classrooms, senior living centers, volunteerism, and more.

Louisiana – landing at #44 in the 2021 state-level measurement – was the only bottom-quintile state to land a top 10 position in any domain. The Bayou State ranked #9 in healthcare access, defined by community members’ ability to find healthcare facilities or resources.

Overall, 2021 Index rankings differed between the top 10 and bottom 10 by 17.7 points, compared to 17.0 points in 2020 and 16.1 points in 2019. While the year-over-year shift in scores is minimal, the subtle shifts continue to divide the top from the bottom, demonstrating increased inequities for states and communities across the country.

Sharecare Community Well-Being Index rank	State	Well-Being Index rank						Social Determinants of Health Index rank					
		Well-Being Index rank	Purpose	Social	Financial	Community	Physical	Social Determinants of Health Index rank	Food access	Healthcare access	Resource access	Housing & transportation	Economic security
1	Massachusetts	4	3	5	3	5	4	1	8	2	26	2	18
2	Hawaii	1	1	1	1	1	1	5	19	8	48	1	14
49	Arkansas	49	50	49	49	48	49	48	43	41	32	47	45
50	Mississippi	50	49	50	50	50	50	50	50	43	45	50	48

## Key differences across top- vs. bottom- ranked states

Differentiators between top- and bottom-ranked states include:

- **Diagnosed depression:** Compared to the top-ranked states, states in the bottom 10 represent nearly 1.4 times higher rates of diagnosed depression.
- **Condition burden:** When compared to the top 10 states, those in the bottom quintile bear 1.2 times higher rates of diabetes; nearly 1.6 times higher rate of heart attacks and coronary artery disease rates, 2.0 times higher rates of COPD, and 1.4 times higher rates of back pain.
- **Commute culture:** As observed within the housing and transportation domain, when averaged across states within the top and bottom quintile groups, the top quintile states measured 12.2 times more residents who take public transportation compared to states ranked in the bottom 10.
- **Financial well-being:** States with the 10 highest overall well-being scores represent 1.3 times higher rates of residents indicating they have enough money to do what they like to do daily and nearly 1.3 times fewer residents indicating they worry about money compared to the bottom 10 states. States in the bottom 10 also represent almost 1.6 times higher rates of severe risk for financial stress compared with states in the top 10.

- **Smoking & tobacco risk:** Compared to the 10 highest performing states, those in the bottom 10 represent on average 1.4 times more tobacco users and 1.4 times more residents at risk for smoking.
- **Home values:** Compared to states ranked in the bottom quintile, the highest-ranked states bear 7.9 times higher the rate of homes valued \$500K or more.
- **MDs & healthcare resources:** States in the top quintile of this year's measurement represent greater access to healthcare resources compared to states ranked in the bottom quintile. This includes 1.5 times more MDs, 1.3 times more OBGYNs, and 1.5 times more pediatricians per capita.

Overall, these trends further reinforce stark differences in community well-being across the nation, including high variability across key individual well-being factors and social determinants that define the environments, infrastructure, resources, health behaviors, and overall circumstance of where individuals live, work, and play.

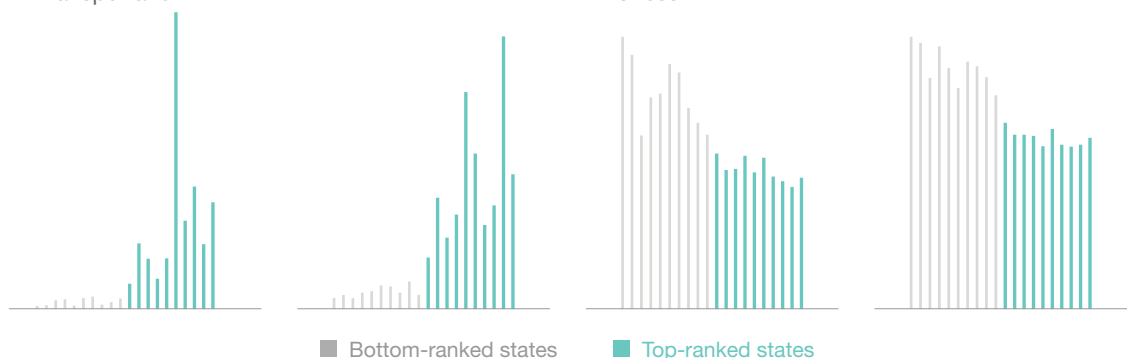
### Differentiators between top- and bottom-ranked states

Top-ranked states measured **12.2 times more** residents who take public transportation

Top-ranked states bear **7.9 times higher** the rate of homes valued \$500K or more

Top-ranked states represent almost **1.6 times lower** rates of severe risk for financial stress

Top-ranked states average **1.4 times fewer** tobacco users



## Relationship between Sharecare Community Well-Being Index & 2021 employee resignation rates

COVID-19 led to questions about where, how, and why we work—and has forced Americans to re-evaluate priorities from work-life balance to equity, mental health, and institutional alignment to personal values. For seven months straight—March to December 2021—workers quit at near-record high rates.

This high resignation rate is attributed to wage stagnation despite increasing cost of living; widespread employee re-evaluation tied to individual purpose, including opportunities to make an impact in the workplace and being recognized for contributions; and the desire for a more flexible schedule and work environments that value the well-being of their employees.

Industries hit the hardest by the “Great Resignation” in 2021 included restaurants, bars, hotels, healthcare and social assistance, retail, and entertainment—all often low-wage positions with little flexibility and requiring high levels of interpersonal encounters.

These trends align to research from the Sharecare Community Well-Being Index 2021 rankings, including states with higher rates of resignation – measured through WalletHub’s 2021 workforce resignation rates and trends – representing broadly lower levels of social determinants of health and individual well-being.

“Workspaces should be places that *generate* health, places that are every bit as supportive of health as homes.”

– Dr. Sandro Galea,  
*The Contagion Next Time*

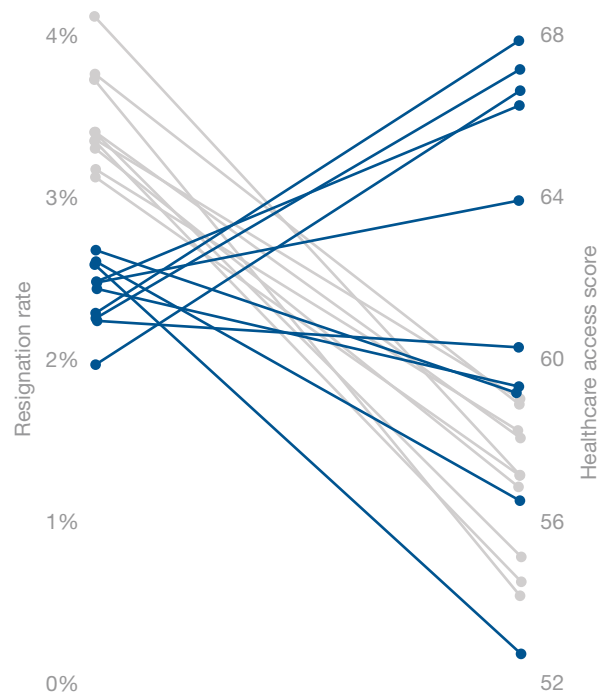
Compared to states with the lowest resignation rates,\* states with the highest resignation rates represent:

- **Less access to healthcare facilities or resources:** States with the highest resignation rates average 18.1 ranks lower in healthcare access than states with the lowest resignation rates, with 1.5 times fewer MDs per capita and nearly 1.3 times fewer OBGYNs.



### Resignation rate and healthcare access score

- States with *lowest* resignation rates
- States with *highest* resignation rates



\*This analysis compares states in the bottom quintile and top quintile for resignation rates.

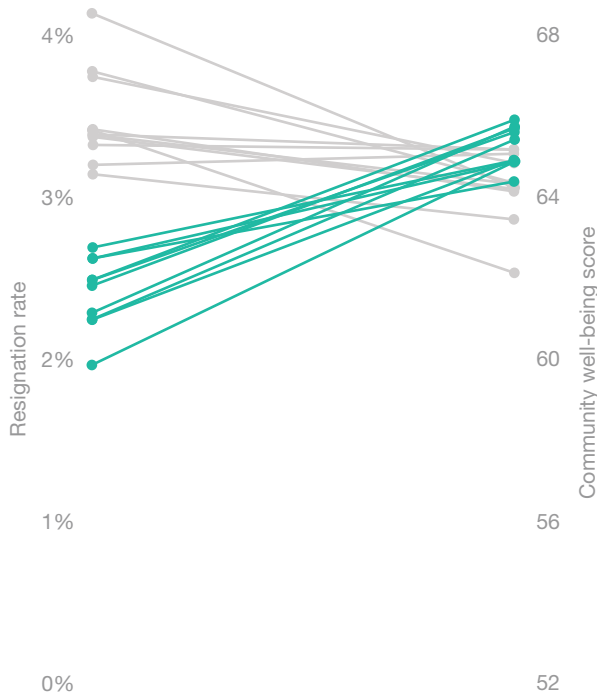
- **Weaker ties to the community:** States with the highest resignation rates average 16.7 ranks lower in the community well-being domain than states with the lowest resignation rates, reflecting the importance of liking where you live, feeling safe, and having pride in your community for job retention.
- **Lower financial well-being:** States with the highest resignation rates average 18.9 ranks lower in financial well-being than states with the lowest resignation rates, with nearly 1.2 times more residents indicating they do not have enough money to do what they like to do daily and 1.3 times more residents demonstrating severe financial stress risk.

Trends tied to financial well-being, as well as connections between workforce measures and measures of overall individual and community health, lend to the importance of employer strategies that address a combination of employee mental health, social risk and equity, and corporate responsibility – representative of an advanced workforce that values what their work means for their lives and for the next generation.



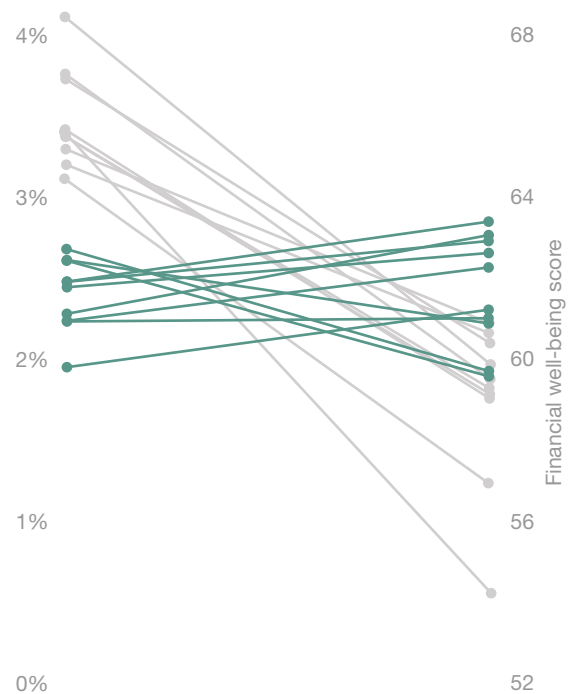
Resignation rate and community well-being score

- States with *lowest* resignation rates
- States with *highest* resignation rates



Resignation rate and financial well-being score

- States with *lowest* resignation rates
- States with *highest* resignation rates



## Conclusion

Through data scale and best in class methods, Sharecare's Community Well-Being Index continues to surface trends in health outcomes and well-being, and how these two concepts interplay with the social determinants of health, for every state, metro area, and county in the United States. Our rankings reports have shown the impact of community, financial stability, physical health, and community resources in driving people to achieve their greatest levels of health and well-being, and how, collectively, we can support communities to enhance targeted interventions that enhance both individual and population-wide health.

For the future, we are focused on topics across the importance of environmental health, social value analyses and projections, peer-reviewed results demonstrating the importance of behavioral interventions, and more – and we look forward to advancing our methods to reduce risk and enhance health for each person in America and the communities in which they live, work, play, and pray.