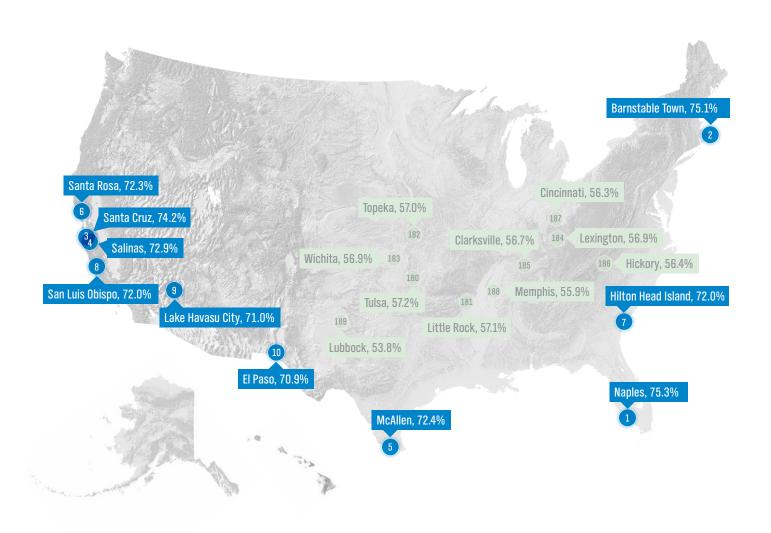


2016 Community Rankings WELL-BEING for Healthy Eating



Highest and Lowest Healthy Eating U.S. Communities, 2015/2016 Based on the question: 'Did you eat healthy all day [the previous day]?'



Healthy Eating in Communities Across the Nation

Communities around the country are changing the trajectory of the health and well-being of their residents, for the better. They are implementing evidence-based strategies, and adopting proven food policies to make healthy choices easier and nutritious foods more accessible. And we're seeing the results—better health, lower costs, and people who feel more connected to their community.

Michael Acker,
 General Manager,
 Blue Zones Project,
 Sharecare

This report, part of the Gallup-Sharecare *State of American Well-Being* series, examines healthy eating across the nation, ranking 189 communities based on the question *'Did you eat healthy all day yesterday?'* The rankings show a wide range of results – with the highest communities having more than three quarters of their citizens report eating healthy all day the previous day compared to just over half among the lowest healthy eating communities.

In 2016, many of the top healthy eating communities are located in California, with ten California-based communities in the top 25. Florida has four communities in the top 25, and Texas and Arizona each claim two top spots. The highest healthy eating community in the country is Naples-Immokalee-Marco Island, FL, a community that also had the highest well-being in the country for the last two years. Barnstable Town, MA was number two in healthy eating, followed by Santa Cruz-Watsonville, CA, Salinas, CA, McAllen-Edinburg-Mission, TX, and Santa Rosa, CA – all of which had more than 72% of their citizens report healthy eating.

The lowest rates of healthy eating come from states such as Ohio, Texas, Oklahoma, Kansas, and Louisiana – with each of these states having two communities in the lowest 25. Lubbock, TX, Memphis, TN, Cincinnati, OH, Hickory-Lenoir-Morganton, NC, Clarksville, KY, Lexington-Fayette, KY, and Wichita, KS each have less than 57% of their citizens eating healthy. Seven of the ten lowest healthy eating communities are also among the lowest communities for overall well-being.

Healthy Eating in U.S. Communities, 2015/2016

Percentages indicate those who ate healthy all day the previous day.

Communities with the Highest Rates of Healthy Eating

1. Naples-Immokalee-Marco Island, FL	75.3
2. Barnstable Town, MA	75.1
3. Santa Cruz-Watsonville, CA	74.2
4. Salinas, CA	72.9
5. McAllen-Edinburg-Mission, TX	72.4
6. Santa Rosa, CA	72.3
7. Hilton Head Island-Bluffton-Beaufort, SC	72.0
8. San Luis Obispo-Paso Robles, CA*	72.0
9. Lake Havasu City-Kingman, AZ	71.0
10. El Paso, TX	70.9

^{*}San Luis Obispo-Paso Robles-Arroyo Grande, CA

Communities with the Lowest Rates of Healthy Eating

180. Tulsa, OK	57.2
181. Little Rock-N Little Rock-Conway, AR	57.1
182. Topeka, KS	57.0
183. Wichita, KS	56.9
184. Lexington-Fayette, KY	56.9
185. Clarksville, TN-KY	56.7
186. Hickory-Lenoir-Morganton, NC	56.4
187. Cincinnati, OH-KY-IN	56.3
188. Memphis, TN-MS-AR	55.9
189. Lubbock, TX	53.8

Influencers and Outcomes of Healthy Eating

We know that proven policy and systems changes can go a long way in developing healthy, prosperous communities. Local leaders can make a big difference by putting health at the center of their policymaking, ensuring healthy food environments where residents work, live, learn, and play.

Supportive policy can also foster healthy food skills, a robust local food culture, and a robust healthy food infrastructure. It's time for communities to create this recipe for positive, lasting change.

Maggie Adamek, Ph.D.,
 National Food Policy Expert

In the first table below, Gallup and Sharecare show the relationship between healthy eating and various chronic diseases. For obesity, diabetes, heart disease, depression and stress, those who ate healthy all day the previous day had lower disease burden than those who did not eat healthy all day the previous day.

The second table shows key items of well-being that influence healthy eating. Social well-being items such as having someone encourage you to be healthy, having relationships that are stronger than ever, and receiving positive energy from friends and family have a strong correlation with eating right. Purpose and financial well-being items such as reaching personal goals, learning or doing something interesting each day, having a leader who makes you enthusiastic about the future, and having enough money to do everything you want to do are also important antecedents to eating healthy.

The Relationship Between Healthy Eating and Health Outcomes* Part										
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	obesity	o diable	ies high	and Pressure Lot	ad Press	indesterd curr	Jestero. Hear	httack Dept	ssion curent	sin lifetine
Ate Healthy All Day the Previous Day	24.8%	7.1%	14.2%	21.7%	8.2%	15.9%	1.5%	8.1%	14.0%	36.0%
Did Not Eat Healthy All Day the Previous Day	32.8%	7.9%	16.4%	26.0%	9.7%	19.6%	1.9%	12.3%	20.5%	49.6%
Percentage Point Difference**	8.1	0.8	2.2	4.2	1.5	3.6	0.3	4.2	6.6	13.5

Lifetime: Have you ever been told by a physician or nurse that you have any of the following, or not? How about ______?

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Current: Do you currently have, or are you currently being treated for _____?

Key Aspects of Well-Being That Influence Healthy Eating*

First two columns indicate the percentage who ate healthy all day the previous day based on 'agree' or 'not agree' with each statement	Agree	Not agree	Percentage Po Difference**
In the last 12 months, I have reached most of my goals	69.1%	54.3%	14.8
Relationship with my spouse, partner, or closest friend is stronger than ever	65.2%	52.4%	12.8
Your friends and family give you positive energy every day	66.1%	50.2%	15.8
There is a leader in your life who makes you enthusiastic about the future	67.1%	54.6%	12.5
Someone in your life always encourages you to be healthy	67.0%	47.9%	19.1
You learn or do something interesting every day	67.2%	53.3%	13.9
You have enough money to do everything you want to do	68.9%	57.4%	11.4

^{*}Analyses are based on generalized linear regression, controlling for age, gender, marital status, race, income, education, region and employment **Data reflects point difference prior

to rounding

Best Practices to Improve Healthy Eating in U.S. Communities

At NCH, we look at better health and well-being not only as our mission, but as our promise to those we serve. That's why we're making substantive changes on our campus – improving the foods we serve in our cafeteria, eliminating sugarbased beverages from our campuses, and working with local producers to have onsite farmers markets. Each action like this reinforces that healthy doesn't have to be hard – creating success for patients, employees and the community at large.

Alan S. Weiss, M.D.,
 President and CEO,
 NCH Healthcare System,
 Naples, FL

Communities around the country are taking an active approach to population health by implementing food policies that foster healthy eating. Best practices include making fresh fruits and vegetables more accessible through farmers markets, community gardens, and grocery stores. Other strategies include eliminating food deserts, educating citizens on healthy ingredients and portion sizes, and positioning unhealthy options less prominently in government facilities, schools, worksites, grocery stores and restaurants. When implemented successfully, these policies help lower the rates of obesity and the prevalence of other chronic conditions across populations.

Best-in-class programs coordinate efforts across multiple stakeholders to include schools, employers, hospitals, restaurants, grocers, faith-based organizations, and city government. And as shown on the following page, food policy changes are happening in both large and small communities around the country, measurably and sustainably improving residents' health and well-being.

Improve Access to Healthy Foods



Communities can put in place policies that protect and promote farmer's markets, establish community gardens in vacant city-owned lots, eliminate sales tax on healthy produce or food items, and provide incentives to attract healthy food retailers to underserved areas.

Reduce Access to, and Marketing of, Unhealthy Fast Food



Through zoning regulations, communities can prohibit fast food restaurants from operating within 500 feet of public schools and public playgrounds and/or can limit food marketing space on billboards and store windows. Policies can also be enacted to require labeling of high-sodium items and sugar-sweetened beverages.

Start with Government Facilities and Schools



Establishing a local Food Policy Council to provide ongoing advice to government policymakers is an effective place to start to help enact healthy food system resolutions. Effective policies include implementing nutrition standards for vending machines and all food served at government facilities and schools; increasing the number of local drinking fountains community-wide; implementing local and healthy food procurement for schools and government; and establishing food rescue programs in conjunction with schools, government facilities and local businesses to distribute food to those most in need.

Educate Citizens on Healthy Eating



Health systems and hospitals can play an active role in providing nutrition and cooking classes to employees, patients and caregivers, as well as opening these resources up to the public. Schools can offer free adult education classes on nutrition and healthy eating, and can add these subjects to their curriculum to educate students.



Fort Worth, Texas – Working to Eliminate Food Deserts

Blue Zones Project Fort Worth is increasing residents' access to fresh fruits and vegetables in areas that are considered food deserts; places located a mile or more from a full-service grocery store. The Blue Zones Project initiative collaborates with city and community leaders to remove barriers for residents to access healthy food options. Efforts include eliminating permit fees for cart vendors selling fruits and vegetables; amending an ordinance to allow mobile markets to sell fresh, uncut produce on private property; and the creation of an urban agriculture ordinance that now allows vacant lots within the city to be used for the development of urban farms. These efforts directly support goals to improve healthy eating, increase fresh produce consumption, decrease obesity rates, and lower the prevalence of other chronic conditions.



Klamath Falls, Oregon – Pursuing Numerous Innovative Food Policies

Klamath Falls, a small city in southern Oregon with a population of approximately 20,000, is pursuing an active food policy through Blue Zones Project Klamath Falls. Initiatives include distributing food to individuals in the community, supporting local growers, and collaborating with local city and county officials. In the Spring of 2016, a Food Policy Council was formed to advise local officials on food-related and agricultural issues. Also in 2016, Blue Zones Project volunteers helped staff two Food Bank "Produce Connection" sites where community members received 600,000 pounds of free fruits and vegetables, up from 205,000 pounds the previous year.

Additionally, a new online food hub hosted a "Find Your Farmer" kick-off event where Klamath Falls farmers and ranchers made connections with local commercial food buyers. Eighty percent of attendees reported making a business relationship at the event. One future initiative that will kick off later this year is the Klamath Food Project, a neighborhood food collection project that improves food access for those with food insecurity.



Naples, Florida – Making Healthy Choices Easier for Hospital Employees, Patients and The Public

NCH Healthcare System in Naples, Florida is working to become a Certified Blue Zones Worksite. In 2016, NCH removed all sugar-sweetened beverages from their cafeterias and vending machines, leading to a \$7,000 drop in soda sales each month, which equates to 500 pounds of sugar eliminated from each month's sales. Other enhancements in their hospitals' cafeterias include offering half portion-sized entrées, removing unhealthy items from the salad bar and introducing healthy checkout lanes that feature fruit, as opposed to cookies. From the fourth quarter of 2015 to the fourth quarter of 2016, the cafeteria saw a 72 percent increase in vegetable sales and a 25 percent drop in fried food sales.

The healthcare system added a regular farmers market rotating between three locations. Employees are pleased with the fresh produce and a new and ready-to-go, healthy lunch option. Another key benefit of the farmers market is the strengthening of colleague relationships. Walking and Potluck *Moais*, or small groups, have been formed. Success stories abound, with members learning to cook new items, losing weight, connecting more deeply with teammates and supporting each other. One Potluck *Moai* member said she didn't just learn how to cook, she "learned how to eat."

2015/2016 Community Healthy Eating Rankings, Highest and Second Quintile

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2015/2016 Rank		e II Day us Da	2015/2016 Rank		e II Day
5/201		ho At thy Al revio	5/201		ho At thy Al
2018		% Who Ate Healthy All Day the Previous Day	2015		% Who Ate Healthy All Day
1.	Naples-Immokalee-Marco Island, FL	75.3	39.	Modesto, CA	66.7
2.	Barnstable Town, MA	75.1	40.	Stockton-Lodi, CA	66.7
3.	Santa Cruz-Watsonville, CA	74.2	41.	Rochester, NY	66.7
4.	Salinas, CA	72.9	42.	Boston-Cambridge-Newton, MA-NH	66.5
5.	McAllen-Edinburg-Mission, TX	72.4	43.	Scranton-Wilkes-Barre-Hazleton, PA	66.4
6.	Santa Rosa, CA	72.3	44.	New Haven-Milford, CT	66.2
7.	Hilton Head Island-Bluffton-Beaufort, SC	72.0	45.	Tampa-St. Petersburg-Clearwater, FL	66.2
8.	San Luis Obispo-Paso Robles-Arroyo Grande, CA	72.0	46.	Albany-Schenectady-Troy, NY	66.1
9.	Lake Havasu City-Kingman, AZ	71.0	47.	Urban Honolulu, HI	66.1
10.	El Paso, TX	70.9	48.	Tucson, AZ	65.9
11.	Miami-Fort Lauderdale-West Palm Beach, FL	70.5	49.	Lakeland-Winter Haven, FL	65.9
12.	Bridgeport-Stamford-Norwalk, CT	70.0	50.	Trenton, NJ	65.8
13.	Ocala, FL	69.9	51.	Albuquerque, NM	65.5
14.	Boulder, CO	69.9	52.	Seattle-Tacoma-Bellevue, WA	65.5
15.	Prescott, AZ	69.7	53.	Palm Bay-Melbourne-Titusville, FL	65.3
16.	North Port-Sarasota-Bradenton, FL	69.6	54.	Salisbury, MD-DE	65.3
17.	Santa Maria-Santa Barbara, CA	69.4	55.	Norwich-New London, CT	65.2
18.	San Diego-Carlsbad, CA	69.4	56.	San Antonio-New Braunfels, TX	65.2
19.	San Francisco-Oakland-Hayward, CA	69.3	57.	Riverside-San Bernardino-Ontario, CA	65.2
20.	San Jose-Sunnyvale-Santa Clara, CA	69.2	58.	Bakersfield, CA	65.1
21.	Charlottesville, VA	68.7	59.	Youngstown-Warren-Boardman, OH-PA	65.1
22.	Durham-Chapel Hill, NC	68.7	60.	Bremerton-Silverdale, WA	65.1
23.	Vallejo-Fairfield, CA	68.5	61.	Orlando-Kissimmee-Sanford, FL	65.0
24.		68.5	62.		65.0
25.	Daphne-Fairhope-Foley, AL	68.4	63.	Lancaster, PA	65.0
26.	Cape Coral-Fort Myers, FL	68.3	64.	South Bend-Mishawaka, IN-MI	65.0
27.	Visalia-Porterville, CA	68.3	65.	Houston-The Woodlands-Sugar Land, TX	64.9
28.	Medford, OR	68.2	66.	Reading, PA	64.8
29.	Fresno, CA	68.2	67.	Hartford-West Hartford-East Hartford, CT	64.8
30.	Los Angeles-Long Beach-Anaheim, CA	68.0	68.	Mobile, AL	64.6
31.	Utica-Rome, NY	67.9	69.	Ann Arbor, MI	64.6
32.	Portland-South Portland, ME	67.7	70.	Denver-Aurora-Lakewood, CO	64.6
33.	Port St. Lucie, FL	67.6	71.	Fayetteville-Springdale-Rogers, AR-MO	64.5
34.	Burlington-South Burlington, VT	67.3	72.	Washington-Arlington-Alexandria, DC-VA-MD-WV	64.5
35.	Providence-Warwick, RI-MA	67.2	73.	Phoenix-Mesa-Scottsdale, AZ	64.4
36.	Asheville, NC	67.2	74.	Deltona-Daytona Beach-Ormond Beach, FL	64.3
37.	Eugene, OR	66.9	75.	Salt Lake City, UT	64.2
	New York-Newark-Jersey City, NY-NJ-PA	66.9		Sacramento–Roseville–Arden-Arcade, CA	64.1

2015/2016 Community Healthy Eating Rankings, Third & Fourth Quintile

Rank		Jay s Day	Rank		Jay Day
2015/2016 Rank		% Who Ate Healthy All Day the Previous Day	2015/2016 Rank		% Who Ate Healthy All Day
2015		% WN Healt the P	2015,		% Wh Healt
77.	Buffalo-Cheektowaga-Niagara Falls, NY	64.0	114.	Pensacola-Ferry Pass-Brent, FL	62.2
78.	Roanoke, VA	64.0	115.	Detroit-Warren-Dearborn, MI	62.1
79.	Las Vegas-Henderson-Paradise, NV	64.0	116.	Jacksonville, FL	62.1
80.	Salem, OR	63.9	117.	Evansville, IN-KY	62.1
81.	Worcester, MA-CT	63.8	118.	Myrtle Beach-Conway-North Myrtle Beach, SC-NC	62.1
82.	Kennewick-Richland, WA	63.8	119.	Dallas-Fort Worth-Arlington, TX	62.1
83.	Portland-Vancouver-Hillsboro, OR-WA	63.8	120.	Charleston-North Charleston, SC	62.0
84.	Pittsburgh, PA	63.6	121.	Madison, WI	62.0
85.	Minneapolis-St. Paul-Bloomington, MN-WI	63.5	122.	St. Louis, MO-IL	61.9
86.	Spokane-Spokane Valley, WA	63.5	123.	Harrisburg-Carlisle, PA	61.9
87.	Fort Collins, CO	63.4	124.	Crestview-Fort Walton Beach-Destin, FL	61.7
88.	Reno, NV	63.4	125.	Des Moines-West Des Moines, IA	61.7
89.	Allentown-Bethlehem-Easton, PA-NJ	63.4	126.	Virginia Beach-Norfolk-Newport News, VA-NC	61.6
90.	Corpus Christi, TX	63.4	127.	Chattanooga, TN-GA	61.6
91.	Baltimore-Columbia-Towson, MD	63.4	128.	Greeley, CO	61.5
92.	York-Hanover, PA	63.2	129.	Rockford, IL	61.2
93.	Huntington-Ashland, WV-KY-OH	63.1	130.	Greensboro-High Point, NC	61.1
94.	Anchorage, AK	63.1	131.	Kingsport-Bristol-Bristol, TN-VA	61.0
95.	Peoria, IL	62.8	132.	Winston-Salem, NC	61.0
96.	Charlotte-Concord-Gastonia, NC-SC	62.8	133.	Savannah, GA	61.0
97.	Colorado Springs, CO	62.7	134.	Cedar Rapids, IA	60.9
98.	Milwaukee-Waukesha-West Allis, WI	62.7	135.	Wilmington, NC	60.9
99.	Austin-Round Rock, TX	62.7	136.	Greenville-Anderson-Mauldin, SC	60.9
100.	Fayetteville, NC	62.6	137.	New Orleans-Metairie, LA	60.8
101.	Duluth, MN-WI	62.6	138.	Kansas City, MO-KS	60.8
102.	Cleveland-Elyria, OH	62.5	139.	Ogden-Clearfield, UT	60.7
103.	Syracuse, NY	62.5	140.	Louisville-Jefferson County, KY-IN	60.6
104.	Philadelphia-Camden-Wilmington, PA-NJ-DE-MD	62.4	141.	Atlanta-Sandy Springs-Roswell, GA	60.5
105.	Dayton, OH	62.4	142.	Birmingham-Hoover, AL	60.4
106.	Chicago-Naperville-Elgin, IL-IN-WI	62.4	143.	Boise City-Nampa, ID	60.4
107.	Raleigh, NC	62.4	144.	Gainesville, FL	60.4
108.	Manchester-Nashua, NH	62.3	145.	Gulfport-Biloxi-Pascagoula, MS	60.4
109.	Grand Rapids-Wyoming, MI	62.3	146.	Spartanburg, SC	60.3
110.	Kalamazoo-Portage, MI	62.2	147.	Olympia, WA	60.2
111.	Green Bay, WI	62.2	148.	Columbus, GA-AL	60.1
112.	Davenport-Moline-Rock Island, IA-IL	62.2	149.	Fort Smith, AR-OK	60.0
113.	Lynchburg, VA	62.2	150.	Provo-Orem, UT	59.9
			151.	Lansing-East Lansing, MI	59.9

2015/2016 Community Healthy Eating Rankings, Fifth Quintile

2015/2016 Rank		% Who Ate Healthy All Day the Previous Day
152.	Fort Wayne, IN	59.9
153.	Baton Rouge, LA	59.8
154.	Toledo, OH	59.8
155.	Beaumont-Port Arthur, TX	59.7
156.	Akron, OH	59.7
157.	Chico, CA	59.6
158.	Flint, MI	59.5
159.	Huntsville, AL	59.5
160.	Binghamton, NY	59.4
161.	Richmond, VA	59.4
162.	Knoxville, TN	59.3
163.	Nashville-Davidson-Murfreesboro-Franklin, TN	59.0
164.	Lincoln, NE	58.8
165.	Columbus, OH	58.7
166.	Tallahassee, FL	58.7
167.	Omaha-Council Bluffs, NE-IA	58.6
168.	Columbia, SC	58.5
169.	Erie, PA	58.5
170.	Indianapolis-Carmel-Anderson, IN	58.5
171.	Killeen-Temple, TX	58.4
172.	Jackson, MS	58.2
173.	Canton-Massillon, OH	58.1
174.	Lafayette, LA	58.0
175.	Oklahoma City, OK	57.8
176.	Shreveport-Bossier City, LA	57.7
177.	Springfield, MO	57.7
178.	Montgomery, AL	57.5
179.	Augusta-Richmond County, GA-SC	57.4
180.	Tulsa, OK	57.2
181.	Little Rock-N Little Rock-Conway, AR	57.1
182.	Topeka, KS	57.0
183.	Wichita, KS	56.9
184.	Lexington-Fayette, KY	56.9
185.	Clarksville, TN-KY	56.7
186.	Hickory-Lenoir-Morganton, NC	56.4
187.	Cincinnati, OH-KY-IN	56.3
188.	Memphis, TN-MS-AR	55.9
189.	Lubbock, TX	53.8

- Highest Quintile (75.3% 66.9%)
- 2nd Quintile (66.7% 64.1%)
- 3rd Quintile (64.0% 62.2%)
- 4th Quintile (62.2% 59.9%)
- 5th Quintile (59.9% 53.8%)

Methodology

These data are based on a subset of 354,473 telephone interviews with U.S. adults across all 50 states and the District of Columbia, conducted from January 2, 2015 to December 30, 2016. In 2015, 177,281 interviews were conducted nationally; in 2016, 177,192 were conducted nationally. Gallup conducts 500 telephone interviews daily, resulting in a sample that projects to an estimated 95 percent of all U.S. adults. Metropolitan Statistical Areas (MSAs) are based on the U.S. Office of Management and Budget definitions. Only MSAs with at least 300 completed interviews are reported, and results for each MSA are uniquely weighted according to Nielsen Claritas demographic targets. The rankings data for this specific report is based on the survey item: Did you eat healthy all day yesterday? Gallup conducts interviews in both English and Spanish. For data collected prior to September 1, 2015, each sample of national adults includes a minimum quota of 50% cellphone respondents and 50% landline respondents. For data collected between September 1, 2015 and December 30, 2016 each sample of national adults includes a minimum quota of 60% cellphone respondents and 40% landline respondents. Additional minimum quotas by time zone and within region are included in the sampling

Some communities will depict the same score when rounded to a single decimal. Ranks are based on the unrounded score.

Read more about community healthy eating trends at: http://www.gallup.com/poll/209000/healthy-eating-linked-lower-likelihood-depression.aspx

About the Gallup-Sharecare Well-Being Index™

The partnership between Gallup and Sharecare 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.

The Gallup-Sharecare Well-Being Index is the world's largest data set on well-being, with over 2.5 million surveys fielded to date. The Well-Being Index provides unmatched, in-depth insight into the well-being of populations, is frequently cited by national media, and has been leveraged by Nobel laureates and academicians for peer-review and scholarly articles. Gallup interviews 500 people every day; the result is a sample that projects to an estimated 95% of U.S. adults.

Previously known as the Gallup-Healthways Well-Being Index, the Gallup-Sharecare Well-Being Index[™] was recently rebranded following Sharecare's 2016 acquisition of Healthways. This rebrand signifies a new and exciting union of the powerful insights generated by Gallup and the meaningful health engagement fostered by Sharecare, to create a healthier world through knowledge, information and action.

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