



THE
WELLBEING
LAB

COMMUNITY
REPORT

THE STATE OF WELLBEING IN ANTELOPE VALLEY

JULY 2021

THEWELLBEINGLAB

FROM THE MICHELLEMCQUAID GROUP

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ABOUT THIS STUDY

The Wellbeing Lab Survey was first conducted in the USA in February 2019 when a sample of 1,026 randomly selected workers representative of the U.S. national workforce completed the survey. This study used a variant of the PERMAH Wellbeing Survey (www.permahsurvey.com), developed by **Dr. Peggy Kern** from the University of Melbourne's Center for Wellbeing Science.

In early May 2020, with non-essential workplaces shut down due to the COVID-19 pandemic, another sample of 1,073 representative American workers was gathered. And then in March 2021, with COVID-19 vaccinations beginning to roll out, an additional set of questions was added to capture families and communities. 1,492 randomly selected adults representative of the state of Michigan completed an expanded version of the survey.

This same community survey was used during late June and early July 2021 to gather data from 503 Antelope Valley residents to gauge the state of wellbeing in the community. Located in Northern Los Angeles County, Antelope Valley is home to over 475,000 people. An independent data collection company helped share the survey across the community.

According to 2020 U.S. Census data, our sample is representative by age, ethnicity, income, and work status, but skews more heavily towards women and is not representative by location, as 64% of this sample was from Palmdale. 14% of the respondents took the survey in Spanish and the rest in English.

| GENDER | |
|-----------|-----|
| Men | 148 |
| Women | 354 |
| Nonbinary | 1 |

| AGE GROUPS | |
|---------------|-----|
| 18 - 24 years | 66 |
| 25 - 34 years | 130 |
| 35 - 44 years | 124 |
| 45 - 54 years | 92 |
| 55 - 99 years | 91 |

| ETHNICITY | |
|------------------------|-----|
| Hispanic/Latinex | 227 |
| White/Caucasian | 151 |
| Black/African American | 71 |
| Other People of Color | 54 |

| HOUSEHOLD SIZE | |
|--------------------|-----|
| Just me | 40 |
| 2-4 people | 325 |
| 5 -8 people | 122 |
| More than 9 people | 8 |

| INCOME LEVEL | |
|------------------------|-----|
| Under \$20,000 | 88 |
| \$20,001 to \$50,000 | 165 |
| \$50,001 to \$100,000 | 131 |
| \$100,001 to \$150,000 | 54 |
| Over \$150,000 | 33 |

| WORK STATUS | |
|--------------------------|-----|
| Full-time work 30+ hours | 239 |
| Part-time work <30 hours | 67 |
| Self Employed/Freelance | 45 |
| Student | 16 |
| Carer | 7 |
| Retired | 28 |
| Currently unemployed | 65 |
| Unable to work | 24 |

If you would like more information about this report or additional findings by gender, age, location, job role, or industry (not reported), please contact **chelle@thewellbeinglab.com**.

1.

CURRENT STATE: WELLBEING IN ANTELOPE VALLEY COMMUNITIES

Wellbeing, simply put, refers to the ability to feel good and function effectively as we navigate the inevitable highs and lows of life. Studies – including ours – find that how we feel (physically, mentally, and socially) and how we interact with our families, workplaces, and communities have a mutually reinforcing impact. Community involvement provides opportunities for ongoing learning and development, meaningful achievement, and connection with others, which nourish our wellbeing. And when we feel physically, mentally, and socially well, we are able to bring more energy, focus, and motivation to our interactions with others. Thriving occurs not only when we feel and function well but when we also experience a high sense of wellbeing. We might assume that thriving would only occur in good times. However, our findings have consistently demonstrated that it is possible to thrive despite struggle, and that sustaining high levels of wellbeing is less dependent on our situations and more dependent on our abilities to effectively navigate both the good times and the challenging times that occur.



18.9%

OF ANTELOPE VALLEY RESIDENTS
WERE CONSISTENTLY
THRIVING.

THRIVING ≠ STRUGGLE FREE

Wellbeing ranges from languishing (low levels of wellbeing) to thriving (high levels of wellbeing). Across seven different surveys with thousands of Americans, Canadians, and Australians, we have replicated the findings that people who reported that they were *consistently thriving* as well as workers who reported that they were *living well, despite struggles* were statistically more likely to have higher levels of satisfaction, engagement, and performance.

Antelope Valley residents who were *consistently thriving* or *living well, despite struggles* reported higher levels of satisfaction with their lives, their families, and their communities. Meanwhile, those who were *not feeling bad, just getting by*, or *really struggling* reported lower levels of satisfaction.

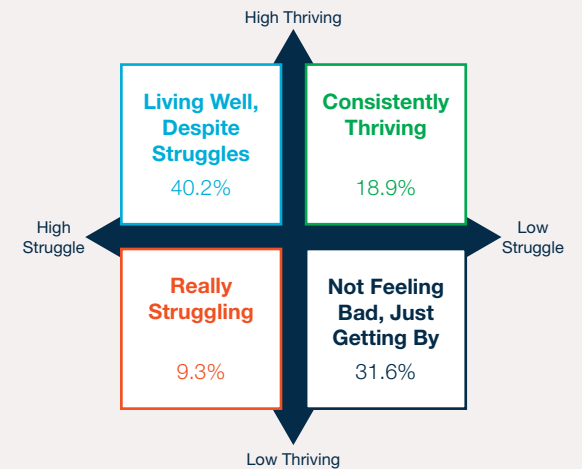
Even when facing a global pandemic, a changing political and economic landscape, and numerous personal and professional challenges, it appears that it is possible to thrive despite struggle.

However, the statistical significance varies for some Antelope Valley residents compared to other populations we have studied. For example, Hispanic/Latinx residents who were *living well, despite struggles* were significantly more likely to feel satisfied with their lives, families, and community than Hispanic/Latinx residents who were *not feeling bad, just getting by*, or *really struggling*. But for White/Caucasian, African American or BIPOC (Black, Indigenous, and People of Color) residents the difference was not significant.

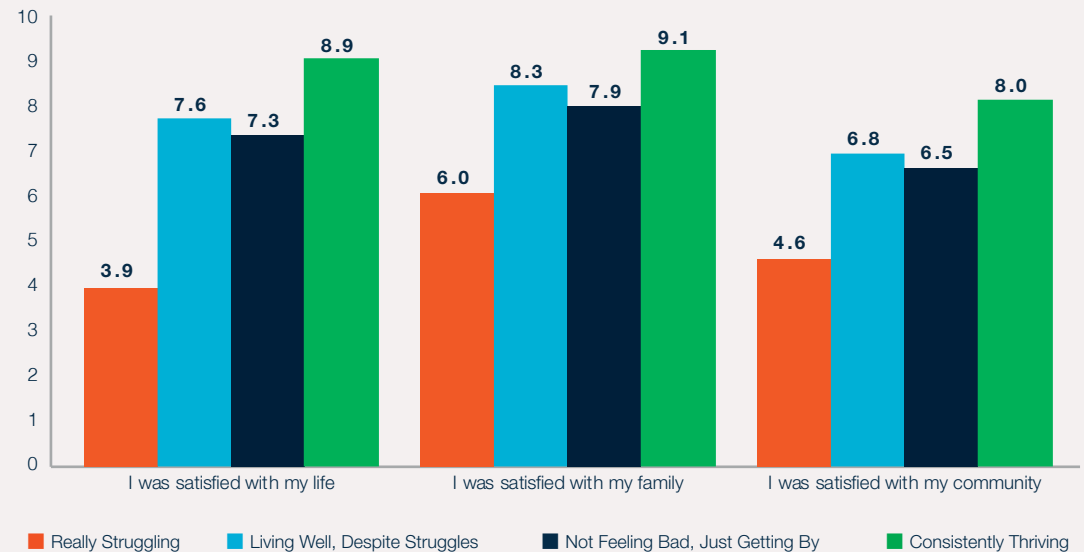
STATE OF WELLBEING



STATES OF WELLBEING – ANTELOPE VALLEY %



STATES OF WELLBEING BY SATISFACTION (MEANS)



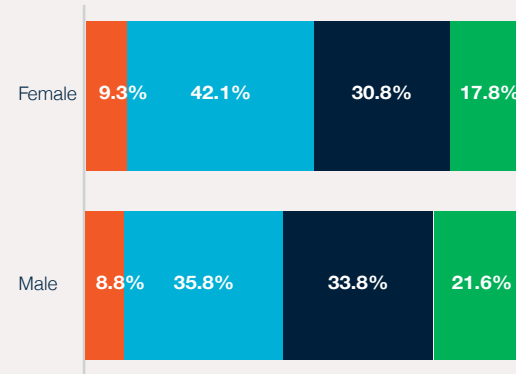
OUR PERSONAL CONTEXT MATTERS

As we have seen across other surveys, men in Antelope Valley were more likely to report they were *consistently thriving* than women, however women were significantly more likely to report they were *living well, despite struggles*.

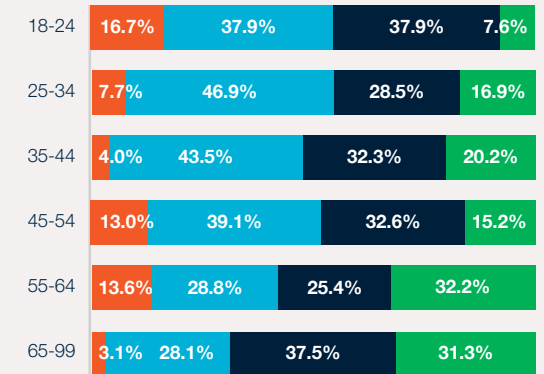
Researchers have suggested that from the age of 18 to 50 people's overall levels of wellbeing tend to decline, then slowly increases to surpass previous levels from the age of 70 onwards. However, young people in Antelope Valley were the most likely age group to report that they were *really struggling* and the least likely to be *consistently thriving*. This finding is consistent with other studies over the past 12 months that have also identified the unique wellbeing challenges young people are facing due to the global pandemic.

While White/Caucasians and Black/African Americans were significantly more likely to report they were *consistently thriving*, Hispanic/Latinx and BIPOC were more likely to be *living well, despite struggles*. Researchers often find that ethnic minorities are at risk for greater struggle, so it is worth restating here that due to self-selection in the survey this sample is not ethnically representative of Antelope Valley residents as it has a much higher percentage of Hispanic/Latinx participants. However, we were curious to understand why White/Caucasians in this sample were significantly more likely to report they were *really struggling* and found that these 25 residents were more likely to be single, without a college education, and living in households earning less than \$50,000.

STATES OF WELLBEING BY GENDER %

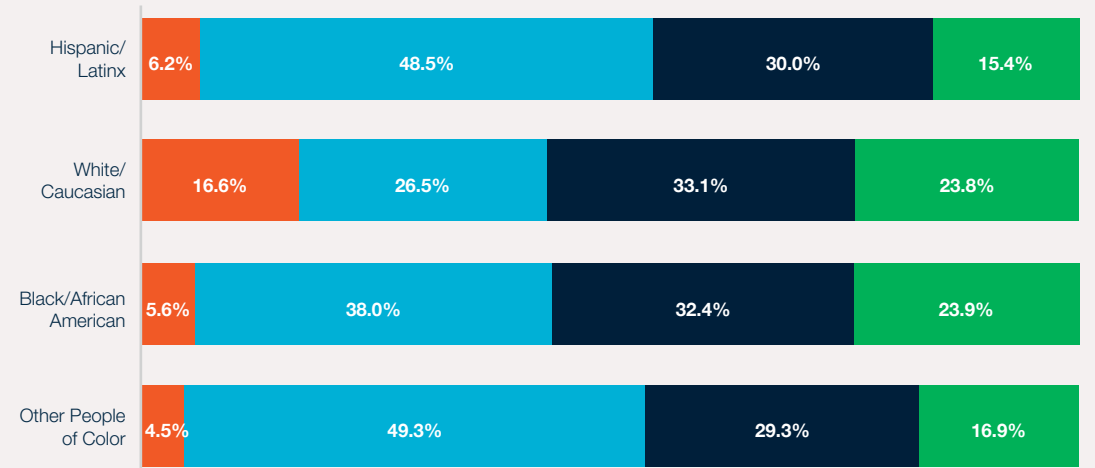


STATES OF WELLBEING BY AGE %



Really Struggling Living Well, Despite Struggles Not Feeling Bad, Just Getting By Consistently Thriving

STATES OF WELLBEING BY ETHNICITY %



Really Struggling Living Well, Despite Struggles Not Feeling Bad, Just Getting By Consistently Thriving

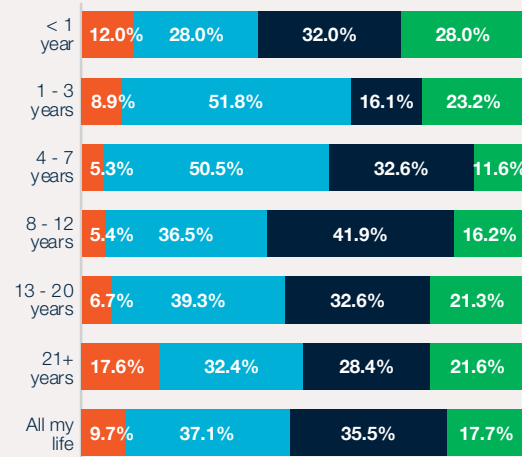
OUR EXPERIENCES MATTERS

Communities often provide an important form of stability and support. However, people who have been living in Antelope Valley for less than four years were significantly more likely to be *consistently thriving*. Notably, residents who have lived in the community for 21+ years were the most likely to be *really struggling*, which suggests that something is happening within this population that warrants further exploration.

Employment increases people’s financial, psychological, and social capital, so it is not surprising that Antelope Valley residents unable to work were the most likely to be *really struggling*. While retirees were the most likely to be *consistently thriving*, it is worth noting this was a small sample of 11 people. More reliably, residents who were employed in full time work or self-employed/freelance were also more likely to be *consistently thriving* than other people. Demonstrating that it is possible to thrive even when struggling, residents who were currently unemployed were the most likely to be *living well, despite struggles*.

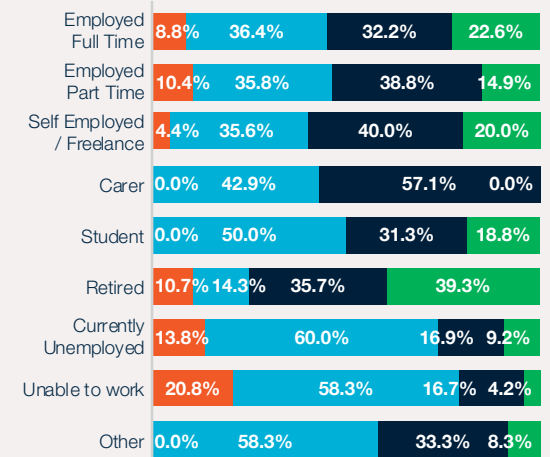
Studies have repeatedly found that having sufficient income to meet the needs of one’s family is an important component of wellbeing, and this was true for this sample. The more household income Antelope Valley residents reported, the more likely they were to be *consistently thriving*. Again demonstrating that it is possible to thrive even when struggling, residents living in households earning less than \$20,000 per annum were significantly more likely to report they were *living well, despite struggles*.

STATES OF WELLBEING BY TIME IN COMMUNITY %

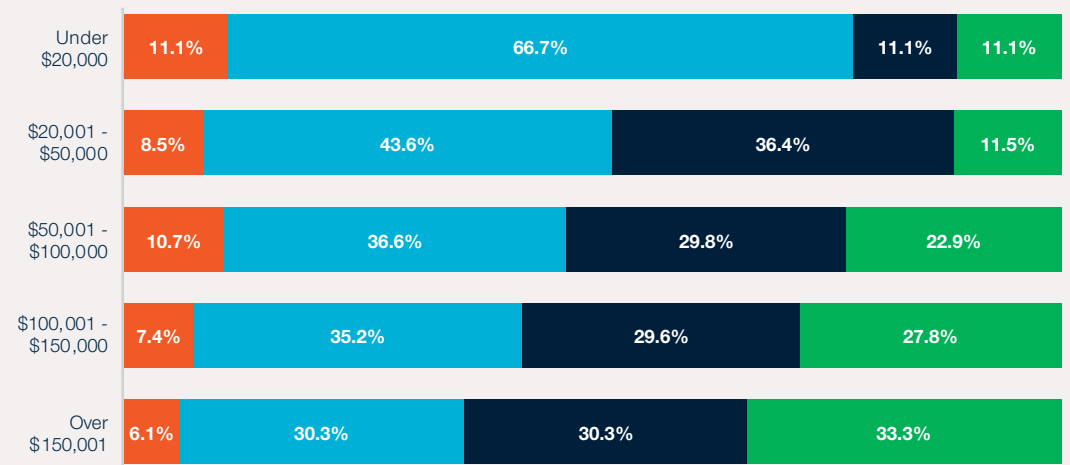


Really Struggling Living Well, Despite Struggles Not Feeling Bad, Just Getting By Consistently Thriving

STATES OF WELLBEING BY EMPLOYMENT STATUS %



STATES OF WELLBEING BY HOUSEHOLD INCOME %



Really Struggling Living Well, Despite Struggles Not Feeling Bad, Just Getting By Consistently Thriving

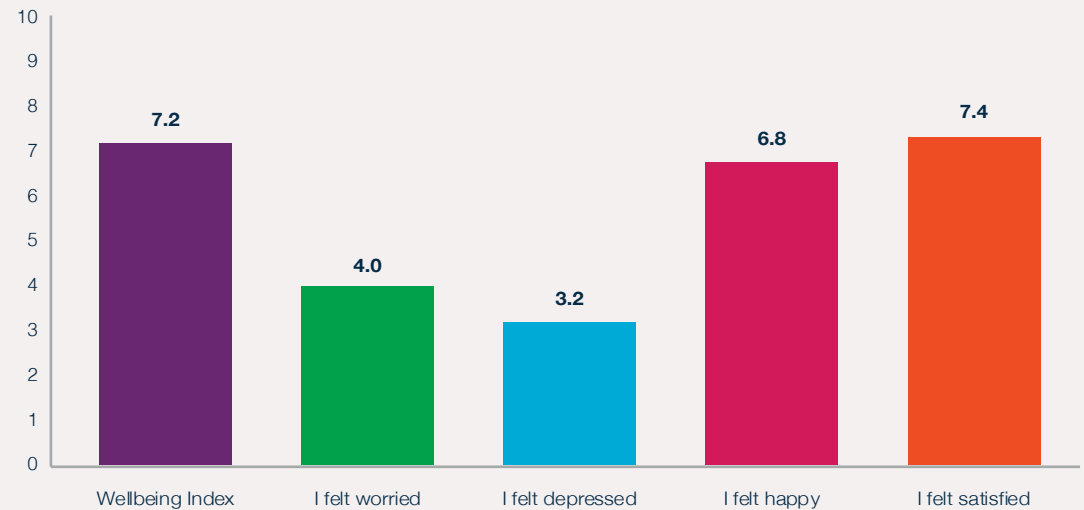
OUR FEELINGS COUNT

Being able to measure people’s quality of life is fundamental when assessing the progress of communities and societies and informing policy in positive ways. The four items used to calculate the Organization for Economic Cooperation and Development (OECD) Better Life Index are measures for which there is the strongest evidence for validity and relevance. The first three questions address how respondents have been feeling lately and the fourth question is on overall life satisfaction, which is intended to capture the respondent’s evaluative judgement of how their life is going in general these days.

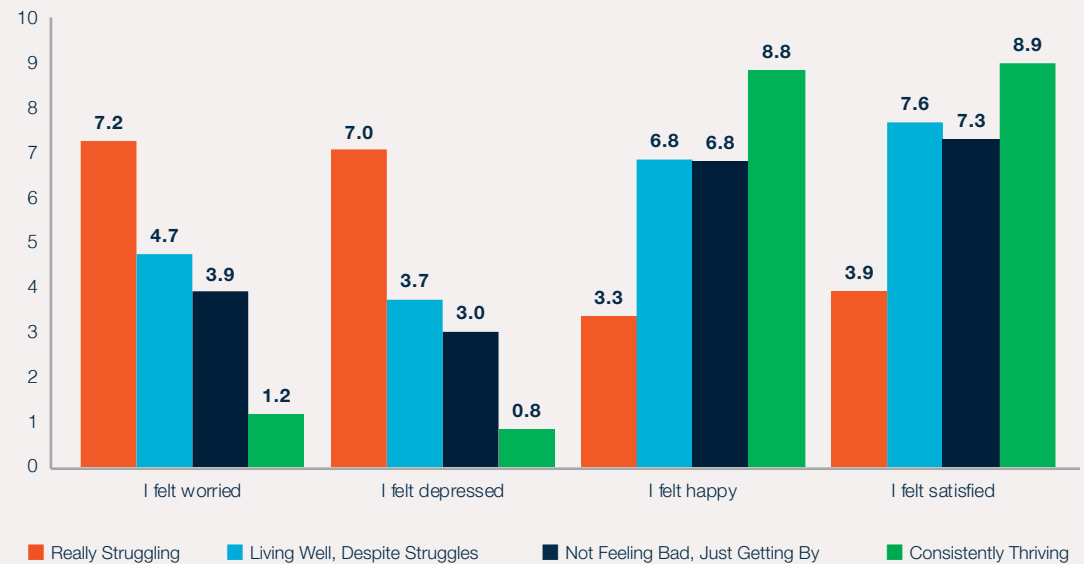
In general, Americans and Antelope Valley residents are more satisfied with their lives than the OECD average. When asked to rate their general satisfaction with life on a scale from 0 to 10, people in the United States gave it a 6.9 grade on average, higher than the OECD average of 6.5. In this sample, Antelope Valley residents’ satisfaction rated 7.4, ranking high alongside countries like Australia (7.3) and Denmark, Finland, Iceland, Norway, and Switzerland (each 7.5).

People who were *consistently thriving* or *living well, despite struggles* statistically were more likely to report lower levels of worry and depression than people who were *not feeling bad, just getting by*, or *really struggling*. However, people who were *consistently thriving* were significantly more likely to report feeling happier and more satisfied than other residents in Antelope Valley.

WELLBEING INDEX (MEANS)



STATES OF WELLBEING BY WELLBEING INDEX (MEANS)



AN AH-HA MOMENT



Our findings continue to make it clear that even when struggle and stress occur, many people are still able to feel and function well. Stress is seen as a challenge to overcome, rather than something to simply get through or be defeated by. In fact, when people have the knowledge, tools, and support to respond to stressful periods, then such times bring opportunities for learning and growth, fueling our resilience even amid uncertainty and upheaval. This is particularly true in this sample for women, ethnic minorities, people currently unemployed or unable to work, and people living in households earning less than \$20,000 per annum.

Still, more than 40% of Antelope Valley residents are struggling or simply getting by. The community needs to continue considering how they can support the wellbeing of those who are *not feeling bad, just getting by, or really struggling*. This is particularly true in this sample for young people, those who are new to the community or have been living in the community for more than 21 years, those who are carers, and those living in households earning less than \$50,000 per annum.

What can we learn from the most resilient members of our community about caring for wellbeing? Do we have formal and informal strategies in place to help people navigate struggle during challenging periods?

2.

OUR ASSETS: THE WELLBEING AMPLIFIERS

Community wellbeing is more than just the sum of how individuals within the community are feeling and functioning. Studies suggest community wellbeing is shaped by multiple interacting factors – personal, social, environmental, economic, political, and/or cultural. Influential factors can be grouped into three separate but inter-related dimensions: the Me Level – factors internal to the individual person (e.g., personality, skills, motivation); the We Level – interpersonal factors that occur between two or more people (e.g., our interactions with and relationships with others); and the Us Level – broader external factors (e.g., housing quality, education levels, access to resources). Each of these become important areas to identify factors that support or hinder how individuals and the community on the whole are functioning.



52.9%

OF PEOPLE IN ANTELOPE VALLEY FELT
VERY MOTIVATED TO IMPROVE
THEIR WELLBEING.

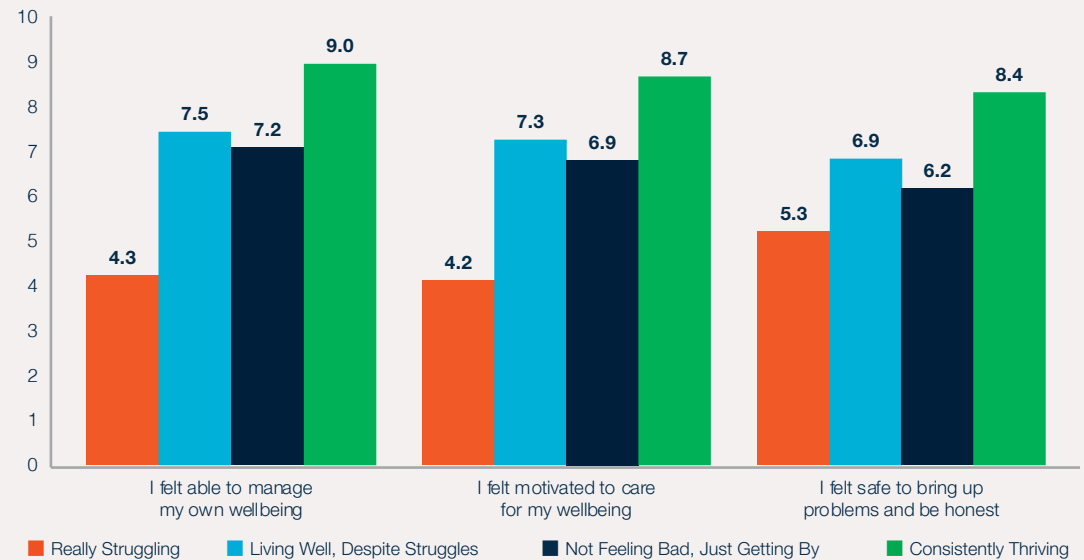
ME LEVEL: WELLBEING AMPLIFIERS

We have consistently found in our studies that people who were *consistently thriving* or *living well, despite struggles*, reported significantly higher levels of **A**bility and **M**otivation to care for their own wellbeing and a sense of **P**sychological safety – being able to acknowledge mistakes and bring up problems as needed. We call these the wellbeing AMPlifiers, as they help build up and support thriving. Antelope Valley residents reported this same overall trend; however, when it came to levels of wellbeing **A**bility for those who were *living well, despite struggles* and those *not feeling bad, just getting by*, the difference was not significant.

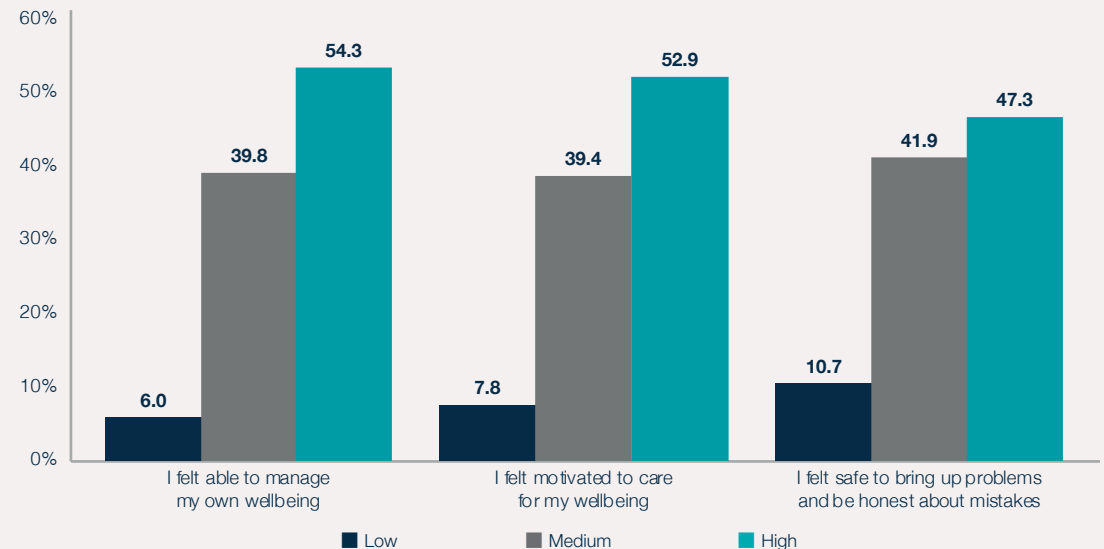
54.3% of Antelope Valley residents – particularly those aged 65+ years, living in households earning less than \$20,000 and who were Black/African American or Asian – felt able to manage their wellbeing effectively, suggesting they have the wellbeing knowledge, tools, and opportunities they need. 52.9% of the residents surveyed felt highly motivated to care for their wellbeing, and this was particularly true the older people got. Meanwhile, 47.3% of the residents felt psychologically safe – particularly those who were White/Caucasian or older – stating that their community was a safe place to bring up problems and talk about mistakes.

What might be possible for community wellbeing in Antelope Valley if these percentages improved?

STATE OF WELLBEING BY ABILITY, MOTIVATION, & PSYCHOLOGICAL SAFETY (MEANS)



% WELLBEING ABILITY, WELLBEING MOTIVATION & PSYCHOLOGICAL SAFETY



WE LEVEL: WELLBEING CONNECTORS

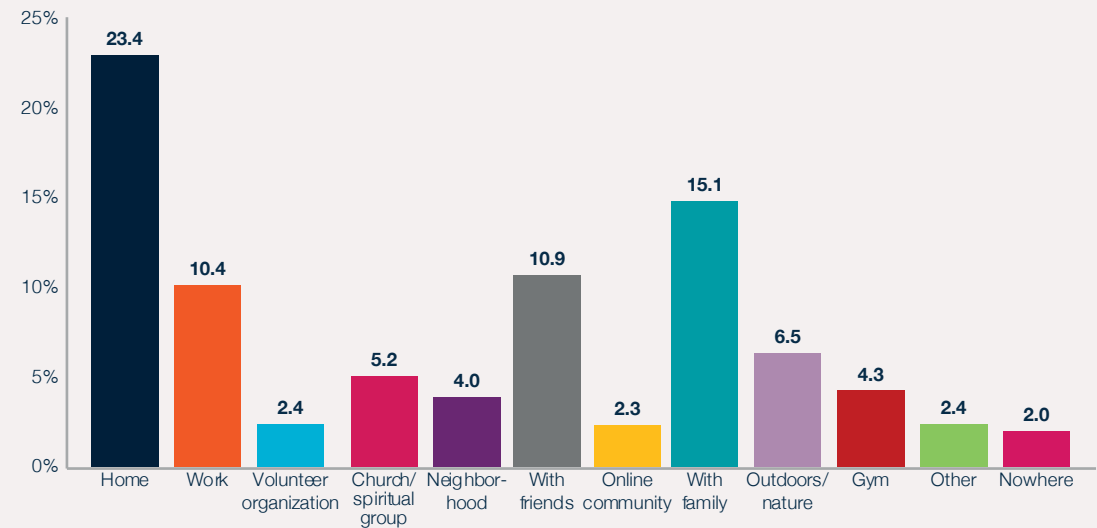
Community implies a sense of connectedness with others with whom we may share geographical boundaries (e.g., a local neighborhood), common interests (e.g., a religious or sporting association), or other values. Studies suggest that our sense of connectedness within a community relies not only on the relationships that exist between people, but also on the quality of the interactions that occur with those people, feeling supported by others, and feeling a sense of belonging.

Over the last month, Antelope Valley residents felt like they most belonged at home (23.4%), with their families (15.1%), with friends (10.9%), at work (10.4%), and outdoors/in nature (6.5%).

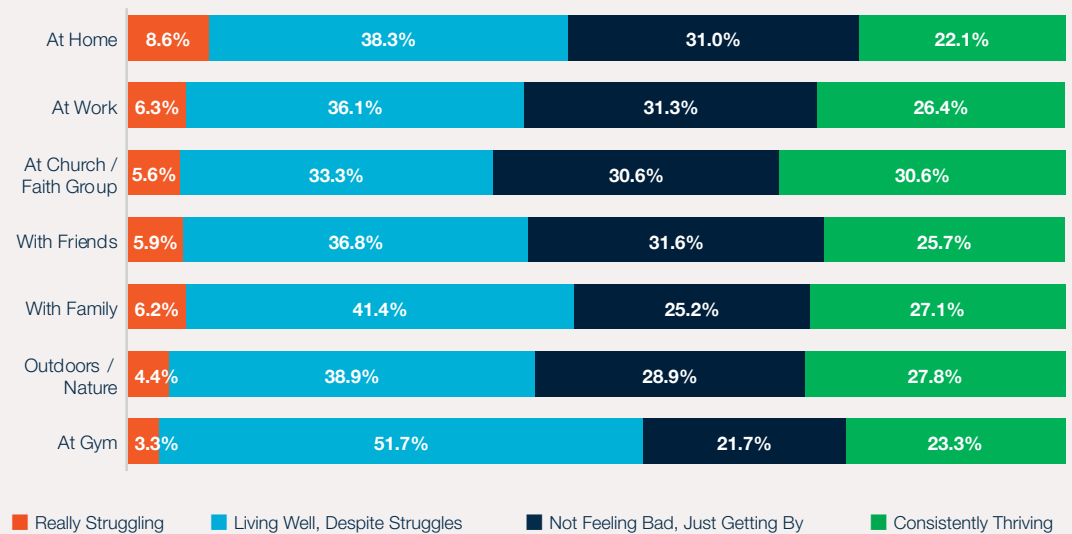
43.5% of residents felt like they only belonged in one place; however, those who were thriving were significantly more likely to feel they belonged to three or more places.

People who were *consistently thriving* were more likely to feel a sense of belonging with their church/faith group, while people who were *living well, despite struggles* were more likely to feel a sense of belonging at the gym. Antelope Valley residents who felt like they belonged nowhere were the most likely to be *really struggling*.

PLACES WHERE I MOST FELT I BELONGED IN MY COMMUNITY OVER THE LAST MONTH (%)



STATE OF WELLBEING BY TOP 7 PLACES I FELT I BELONGED IN MY COMMUNITY



US LEVEL: COMMUNITY SUPPORT

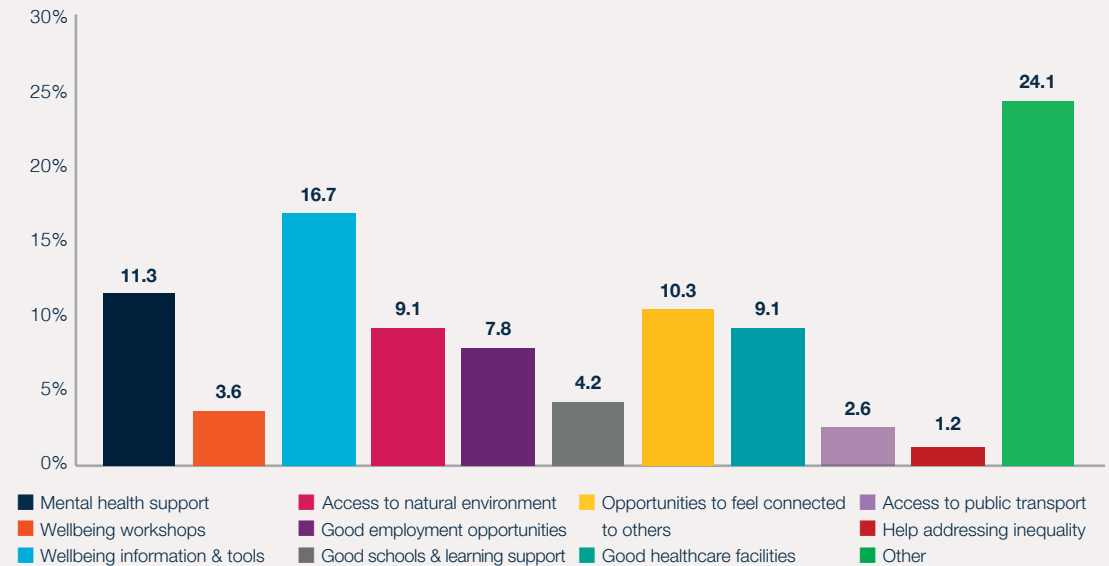
Researchers have identified 43 different community supports for wellbeing, including health care, economic conditions, services and infrastructure, and the local environment. In our data, the most valuable forms of community support were: *other* (24.1%), *wellbeing information and tools* (16.7%), *mental health support* (11.3%), and *opportunities for connection* (10.3%). Addressing inequalities was more important for Hispanic/Latinx and BIPOC residents than for Whites but remained less critical than other aspects.

Antelope Valley residents who were *really struggling* were significantly more likely to value *other* and *mental health support* than other residents. Other residents valued a diverse mix of community support to care for their wellbeing.

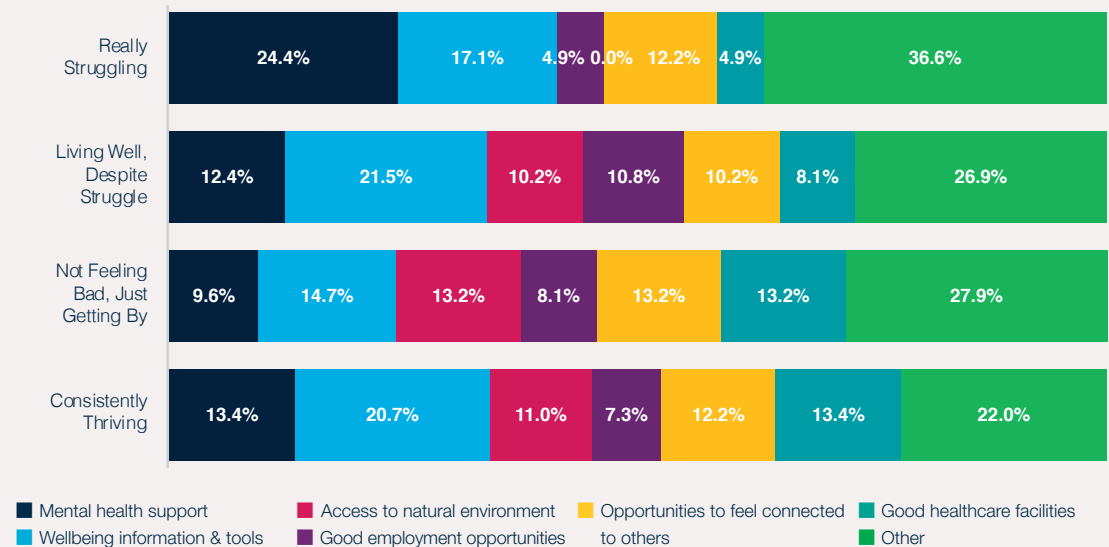
Residents aged 18–24 years were the most likely to value *mental health support* and *opportunities for connection*. In addition, people living in households earning less than \$20,000 per annum were also the most likely of all income groups to value *mental health support*.

People aged 55 years and over, those who are Hispanic/Latinx, and those who were living in households earning \$50,000–\$100,000 per annum were the most likely to value *wellbeing information and tools*.

% MOST VALUED FORM COMMUNITY WELLBEING SUPPORT



STATE OF WELLBEING BY % MOST VALUED COMMUNITY WELLBEING SUPPORT (TOP 7 FACTORS ONLY)



AN AH-HA MOMENT

Caring for our wellbeing is not a solo endeavor. Our wellbeing perceptions, experiences, and behaviors are diverse, and are shaped by personal factors (the *Me*), social factors (the *We*), and community factors (the *Us*) that interconnect and work together to dynamically impact positive changes. The often overlooked but common factor across these findings is our driving need as human beings for quality connections with others. At the *Me* level, this appears in the need for and valuing of a sense of belonging. At the *We* level, this appears in the quality of relationships that people have with others in the community, including their family, friends, and colleagues. At the *Us* level, this appears in the diverse external wellbeing supports that care for the unique needs that people have.

How is our community amplifying people's opportunities for safe, healthy connection at the Me, We, and Us levels when it comes to caring for their wellbeing?



3.

BOOSTING THRIVING: WELLBEING IS MULTIFACETED

Wellbeing is not a one-dimensional concept, but a multifaceted construct composed of different factors. There is no one number that tells us how well a person, family, workplace, or community is doing, but several factors together give a good picture. Professor Martin Seligman suggests that we think of measuring wellbeing like the dashboard that allows a pilot to fly a plane – there is no one dial that indicates how an airplane is functioning. Rather, the fuel gauge, the airspeed indicator, the altimeter, and the interaction of those provide all the information needed. What matters is our ability to gather and understand the dashboard of data to help us continue learning and intelligently prioritizing the next actions we take individually and collectively.



39.4%

SAID ANTELOPE VALLEY WAS
COMMITTED TO SUPPORTING THE
WELLBEING OF ITS RESIDENTS.

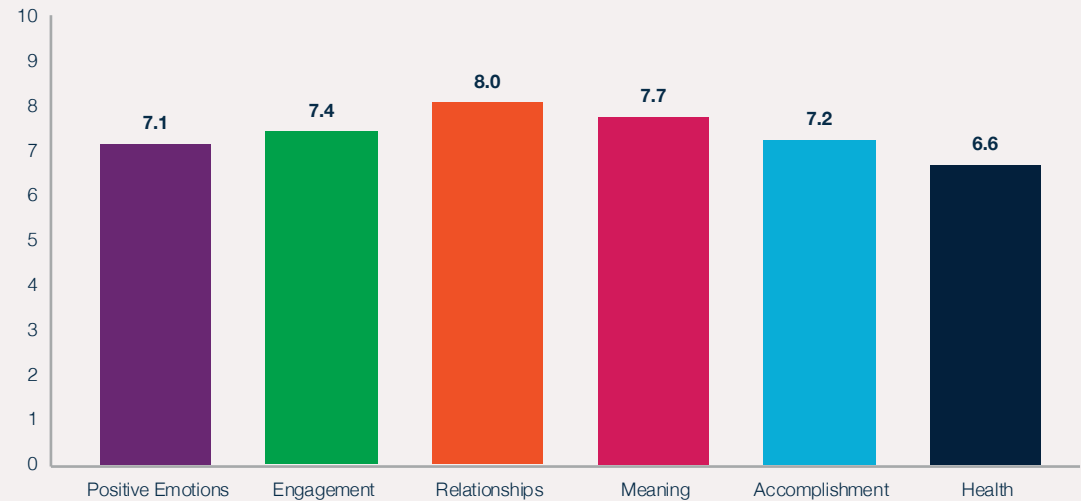
THE INDIVIDUAL FACTORS

One way to understand, measure, and act on evidence-based approaches for improving wellbeing is by drawing on Professor Martin Seligman’s PERMAH Framework, which points to six factors of feeling and functioning: *Positive Emotions, Engagement, Relationships, Meaning, Accomplishment, and Health*. Depending on one’s values and preferences, different numbers and profiles are best for different people. But as the six factors are interconnected and influence one another, feeling poorly in one area often results in feeling poorly in other areas as well.

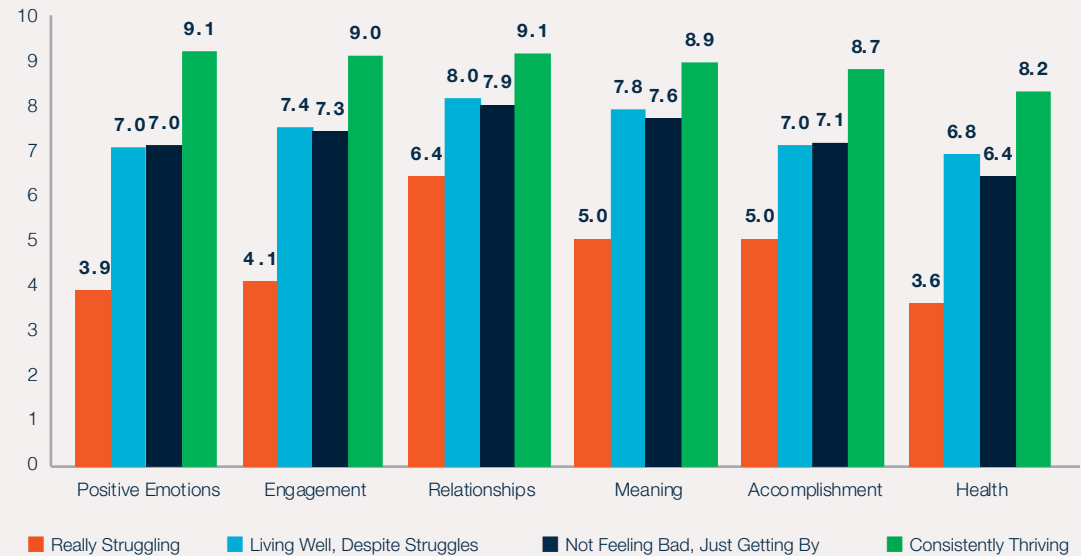
While how we feel and function across these factors varies across time, situations, and experiences, studies have found that generally most people’s wellbeing is relatively healthy and stable over time, even when circumstances are challenging. While this is true for the PERMAH factor scores gathered in this study, people aged 18–24 years were significantly lower on all PERMAH factors.

Antelope Valley residents who were *consistently thriving* were significantly more likely to report higher individual scores on all the PERMAH factors. In contrast to other samples, residents who were *living well, despite struggles* and those *not feeling bad, just getting by* reported similar PERMAH scores. Those who were *really struggling* reported significantly lower scores on all PERMAH factors.

PERMAH WELLBEING FACTORS (MEANS)



STATE OF WELLBEING BY PERMAH WELLBEING FACTORS (MEANS)



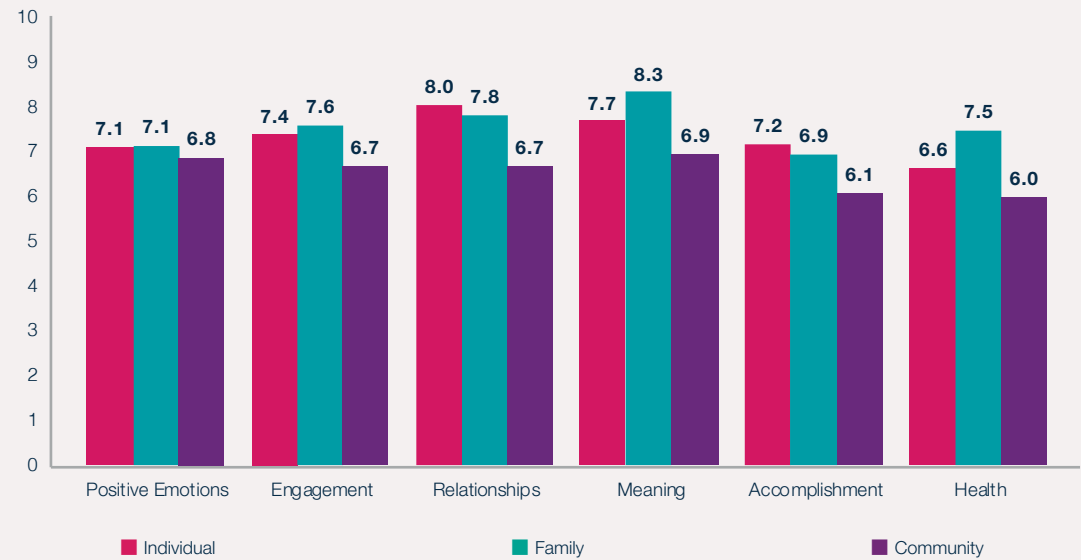
THE COMMUNITY FACTORS

Professor Seligman also suggests that the PERMAH factors can be used to provide a measure of community wellbeing. For examples, communities should be places where people can find positive emotions through parks and public spaces; engagement in cultural institutions and events; better relationships through social interactions with family and friends; meaning through church, faith, volunteering, and interest groups; accomplishment through work and school; and health through sporting groups and gyms.

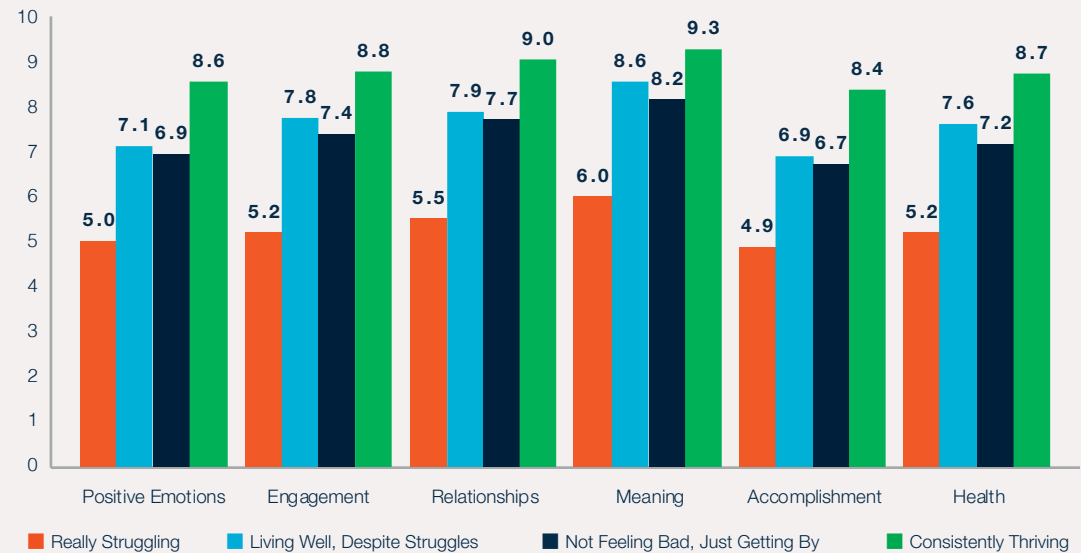
Overall families were an important source of PERMAH support for Antelope Valley residents, and this was particularly true for *Meaning* and physical *Health*. People who were *consistently thriving* reported significantly higher scores on all family PERMAH factors. As we have seen previously, residents who were *living well, despite struggles* and those *not feeling bad, just getting by* reported similar PERMAH scores. Those who were *really struggling* reported significantly lower scores on all PERMAH factors.

Community was also providing an important source of PERMAH support for many Antelope Valley residents. However, the scores for *Accomplishment* and physical *Health* are lower than our studies suggest is ideal and should be prioritized as part of community wellbeing efforts.

COMMUNITY PERMAH WELLBEING FACTORS (MEANS)



STATE OF WELLBEING BY FAMILY PERMAH FACTOR (MEANS)



THE NEED FOR SAFETY

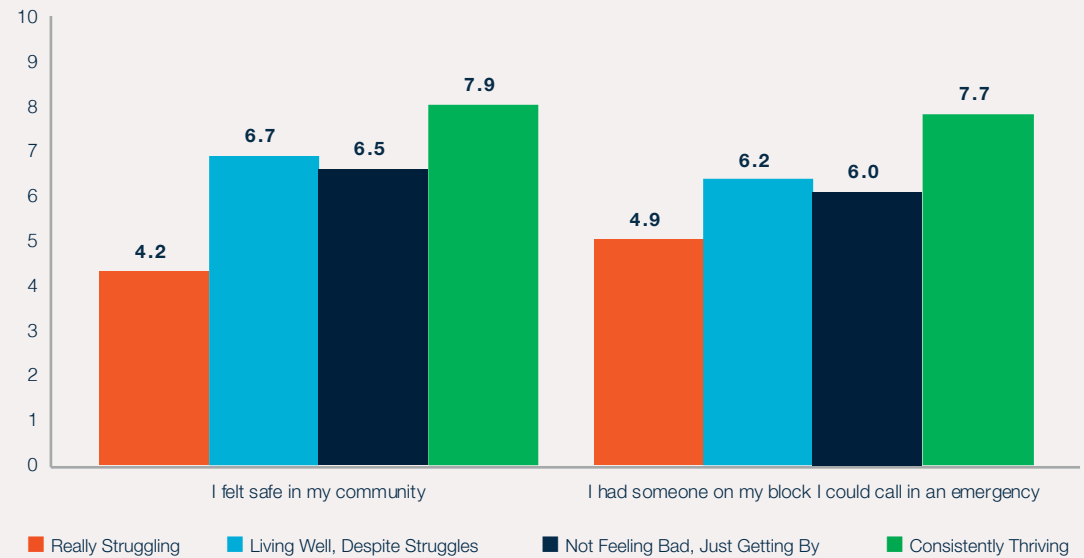
Feeling safe in our community is a reflection of how it feels to be in our neighborhoods: the absence of crime, addiction, violence, poverty, homelessness, and other social harms. Numerous studies have found that efforts to mitigate that which undermines individual and community safety is of primary importance to our individual and collective wellbeing.

Overall, 44% of Antelope Valley residents reported feeling very safe in their communities. However, women, people aged 35–44 and 55–64 years, Whites, and BIPOC residents were less likely to feel safe in Antelope Valley.

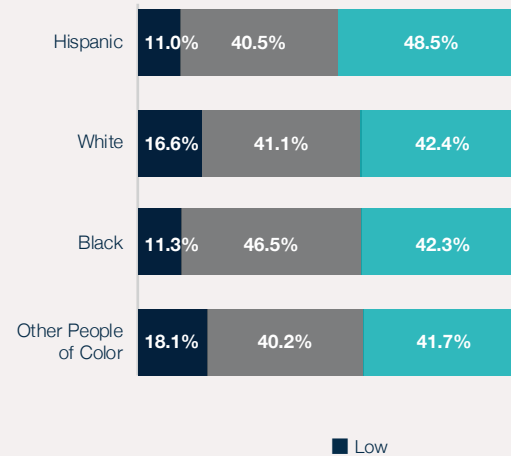
Overall, 43.6% of Antelope Valley residents reported always having a neighbor they could call in an emergency. However, people aged 18–24 years and Asian residents were less likely to have this support on their block.

Residents who were *consistently thriving* were significantly more likely to report that they felt safe in their community, and that they had someone on their block they could call in an emergency, than those who were *living well, despite struggles* and those *not feeling bad, just getting by*. Residents who were *really struggling* were significantly less likely to feel safe in their community or have someone on their block they could call in an emergency.

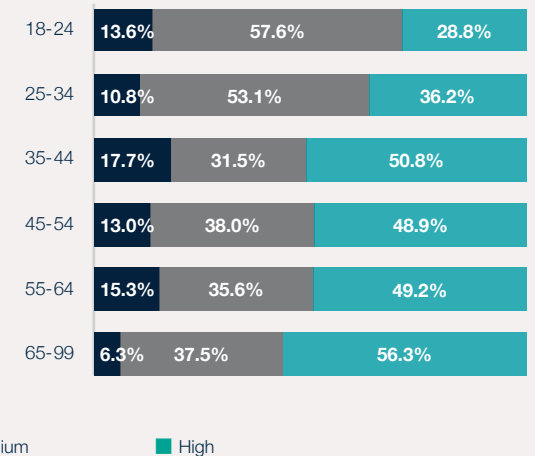
STATE OF WELLBEING BY COMMUNITY SAFETY (MEANS)



LEVELS OF COMMUNITY SAFETY BY ETHNICITY %



LEVELS OF COMMUNITY SAFETY BY AGE %



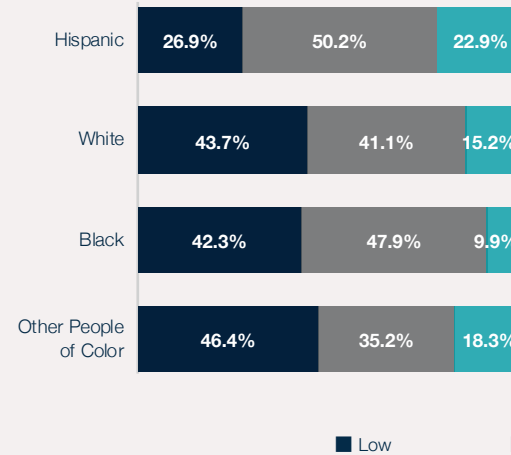
THE NEED FOR ECONOMIC SECURITY

Researchers define economic security as the impact that the perception of income, medical spending, and financial savings has on wellbeing. While studies have suggested varying accounts of the relationship between income and wellbeing, researchers agree that feeling economically secure is crucial to wellbeing.

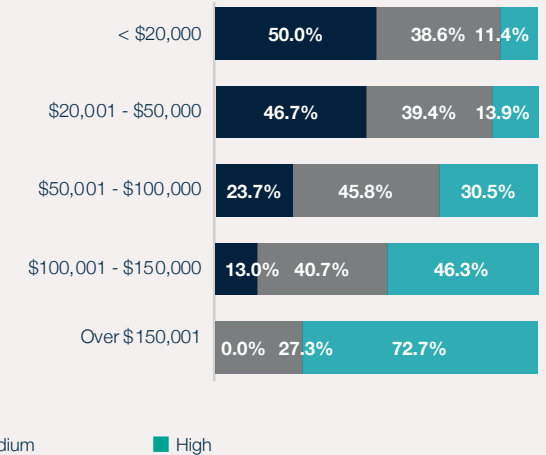
Overall, 64.8% of Antelope Valley residents reported feeling worried or anxious about the economy (this was particularly true for White/Caucasians and Black/African Americans), 42.2% felt worried or anxious about losing their jobs (this was particularly true for people aged 35–54 years), and 33.4% reported not being comfortable with their current income (this was the least true for people in households earning less than \$50,000 per annum).

Residents who were *consistently thriving* were significantly more likely to report that they were comfortable with their current income and less likely to be anxious about the economy or losing their job. Those who reported *not feeling bad, just getting by* and those *really struggling* were significantly more likely to report that they felt worried or anxious about the economy and losing their jobs than other residents.

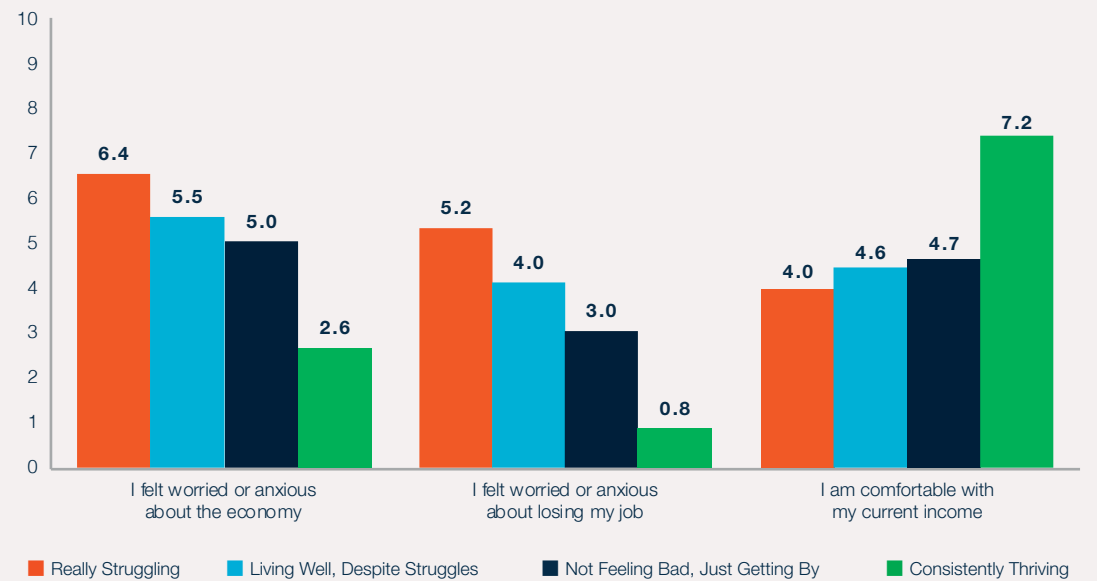
LEVELS OF ECONOMIC ANXIETY BY ETHNICITY %



FINANCIAL COMFORT BY HOUSEHOLD INCOME %



STATE OF WELLBEING BY FINANCIAL WELLBEING (MEANS)



AN AH-HA MOMENT

Professor Seligman has hypothesized that while the PERMAH factors are highly predictive of wellbeing, they are not exhaustive, and our data and research by others, including Dr. Scott Donaldson, support his hypothesis. When it comes to gauging ways to boost wellbeing at a community level, we recommend also including the perceptions of safety and economic security. It is also important to remember that while each of these factors appears to positively impact thriving, wellbeing is not a one-size-fits-all proposition. Different people in the community clearly have different needs when it comes to intelligently prioritizing ways to help them care for their wellbeing.

How does our community gauge and intelligently prioritize the factors that shape wellbeing for different people in our community?



4.

REDUCING STRUGGLE: MAKING IT SAFE TO STRUGGLE

Feelings of struggle, anxiety, and stress are signs that something important for us is unfolding that needs our attention and action. When we have the confidence to navigate struggle, rather than undermining thriving, it fuels learning, growth, and resilience in our community. But when struggle is perceived to be a sign of failure, is ignored, or is avoided for too long, it can create stress and pressures that place people and their communities at risk for exhaustion and breakdown. To unnecessarily avoid prolonged struggle, people need to feel safe talking about the individual and collective challenges we are experiencing – particularly during uncertain and disruptive periods.



67.2%

OF ANTELOPE VALLEY RESIDENTS
SAID THEIR LEVELS OF
STRUGGLE HAD INCREASED
RECENTLY.

BIGGEST CAUSES OF STRUGGLE

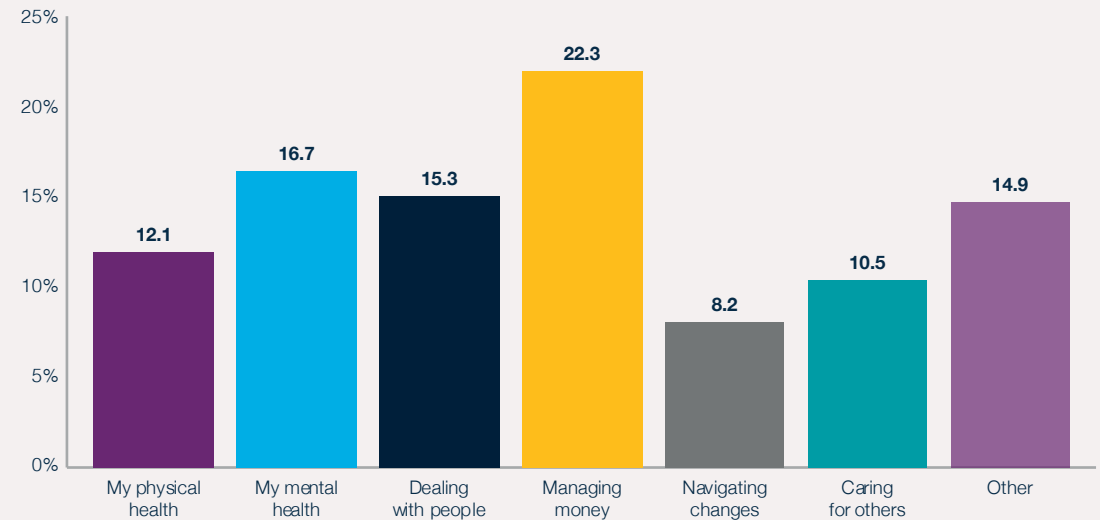
Managing money was the leading cause of struggle for Antelope Valley residents (22.3% of all respondents), followed by *my mental health* (16.7%), *dealing with people* (15.3%), *other* (14.9%) and *my physical health* (12.1%).

Not surprisingly, *managing money* was particularly challenging for Antelope Valley residents living in households with an income less than \$50,000. For people in households earning \$50,001–\$100,000 *dealing with people* was the biggest struggle. And for people in households earning more than \$100,000 *caring for others* was the biggest struggle.

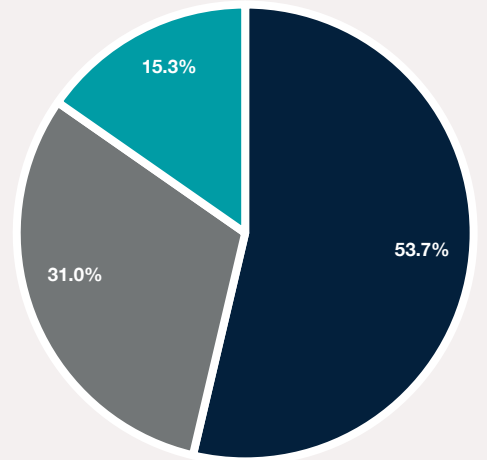
Studies have consistently found that feeling lonely and isolated is detrimental to our mental and physical wellbeing. Given the restrictions mandated by Antelope Valley to try and minimize the spread of COVID-19 – from stay-at-home orders to physical distancing requirements – it is not surprising that four out of every ten Antelope Valley residents (46%) reported feeling lonely and isolated.

Residents who were *really struggling* were the most likely to feel alone and isolated. In addition, people aged 18–24 years and those in households where the income was less than \$50,000 were also more likely to report that they had felt alone and isolated over the past two weeks.

BIGGEST CAUSES OF STRUGGLE BY % RESPONDENTS

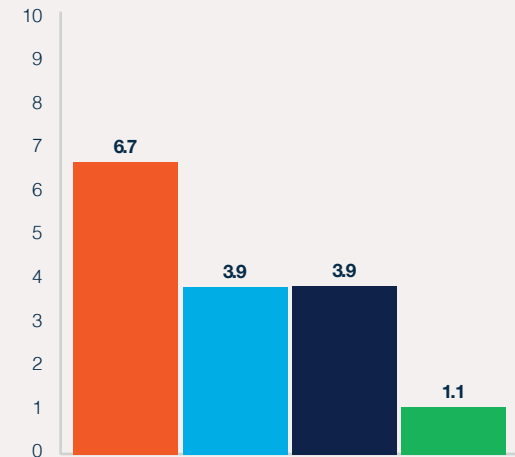


I FELT ALONE & ISOLATED %



■ Not Lonely ■ Somewhat Lonely ■ Very Lonely

STATE OF WELLBEING BY I FELT ALONE & ISOLATED (MEANS)



■ Really Struggling ■ Consistently Thriving
 ■ Living Well, Despite Struggles ■ Not Feeling Bad, Just Getting By

SHARING OUR STRUGGLES

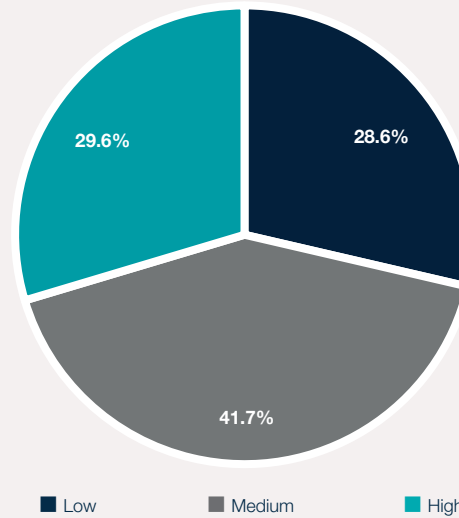
Researchers have suggested that one of the primary goals of all human behavior is the feeling of belonging and of being significant or mattering in the eyes of others. The fear that others may reject us as a result of our struggles is why we often feel it is best to keep our struggles to ourselves.

For example, three out of every ten (29.6%) Antelope Valley residents felt that it was best to keep their struggles to themselves even though the data suggest that this is significantly more likely to negatively impact their wellbeing. In contrast, people who felt it best to share their struggles with others were more likely to be *consistently thriving*.

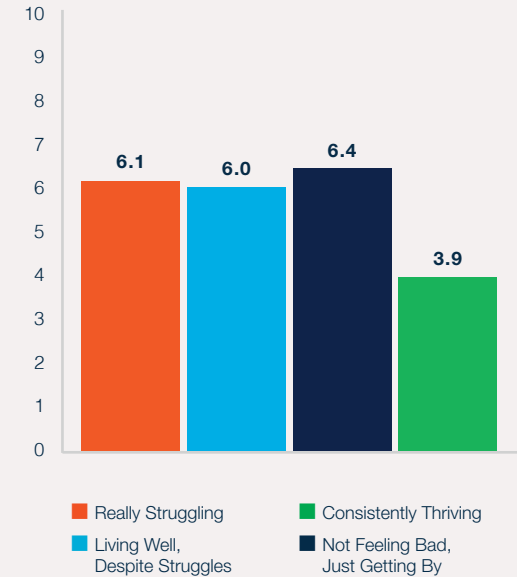
When residents did reach out to others when they were struggling to care for their wellbeing, the first person they were most likely to speak to was someone at home (53.3%).

Not surprisingly, not telling anyone was the least effective approach in terms of amplifying people's levels of wellbeing ability, motivation, or psychological safety required to help ourselves struggle well. Residents who were *not feeling bad, just getting by* were the most likely to never tell anyone.

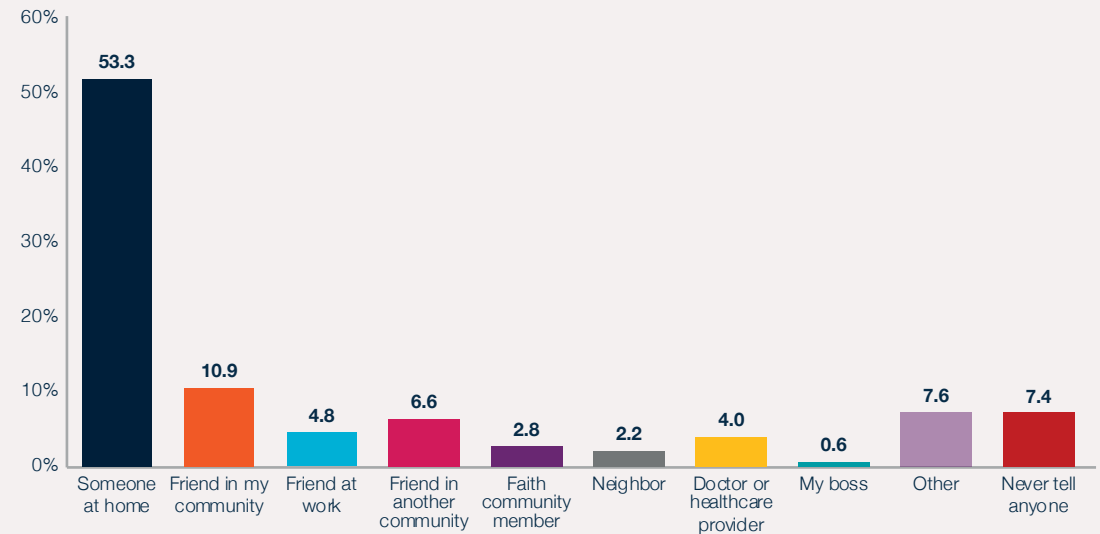
BEST TO KEEP MY STRUGGLES TO MYSELF %



STATE OF WELLBEING BY KEEP MY STRUGGLES TO MYSELF (MEANS)



FIRST PERSON I REACH OUT TO WHEN STRUGGLING %

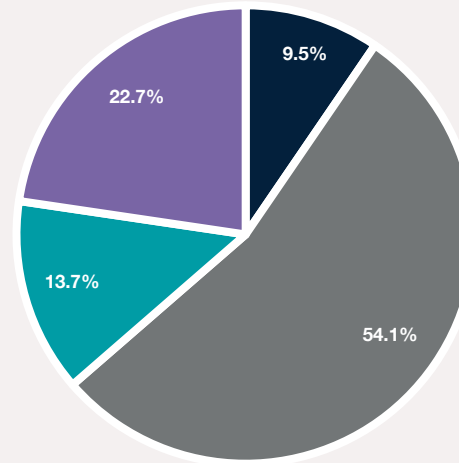


COVID-19 VACCINATIONS

At the time the data was gathered, Antelope Valley businesses were reopening at full capacity, even indoors. People no longer needed to physically distance from each other – and if they’re vaccinated, they no longer need to wear mask. As of June 27, more than 10,439,634 doses of COVID-19 vaccine had been administered to people across Los Angeles County. Among L.A. County residents 16 and over, 68% have received one dose of vaccine and 59% have been fully vaccinated.

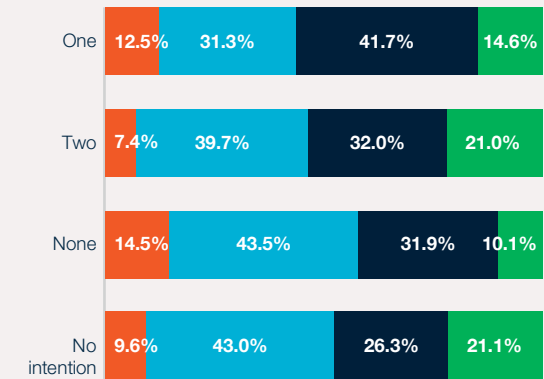
54.1% of the respondents in this sample were fully vaccinated, 9.5% had received their first shots, 13.7% had not received any shot yet, and 22.7% had no intention of receiving a COVID-19 vaccination. Notably, residents who have received both vaccination shots and those with no intention of being vaccinated reported similar levels of wellbeing and levels of anxiety about catching COVID – perhaps both feeling they have made the right choice.

COVID-19 VACCINATION STATUS %



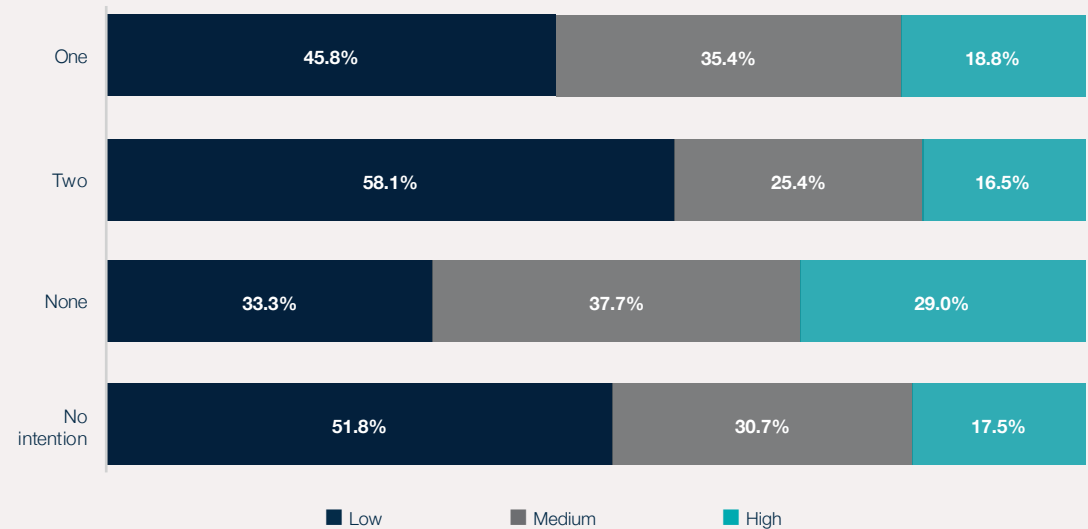
■ One dose ■ Two doses ■ No doses ■ No intention

STATE OF WELLBEING BY COVID-19 VACCINATION STATUS %



■ Really Struggling ■ Living Well, Despite Struggles ■ Not Feeling Bad, Just Getting By ■ Consistently Thriving

LEVELS OF ANXIETY ABOUT CATCHING COVID %



■ Low ■ Medium ■ High

AN AH-HA MOMENT

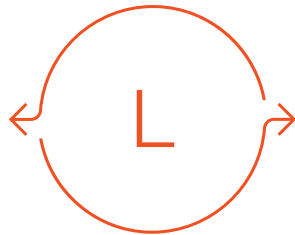
Making it acceptable to talk about struggle, anxiety, and worry can help all members of the community to feel less lonely and isolated – particularly as they navigate the ongoing uncertainty of COVID-19 and the “new normal” many communities and workplaces are navigating. Members of our community need to know that there is no shame in struggling; rather it is a neurological, physical, and social invitation for learning and growth through which we can all help to support each other learn how to struggle well.

How are we making it safe to talk about struggles across our community?



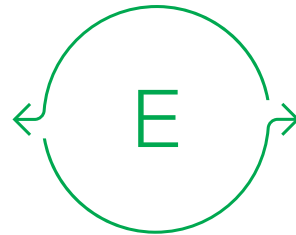
HOW CAN YOU HELP OUR COMMUNITY THRIVE?

As we've seen throughout this report, wellbeing habits, attitudes, and actions spread through a complicated web of social connections around us at the levels of Me, We, and Us. When it comes to caring for wellbeing in your community, we recommend rallying diverse leaders and energizers across your community to create a shared vision and strategy to help them to LEAD the way on wellbeing:



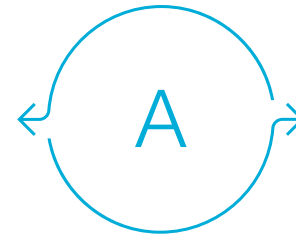
LITERACY

Having a shared language about caring for wellbeing enables your people across your community to have conversations that can positively shape people's thoughts, feelings, and actions about their wellbeing.



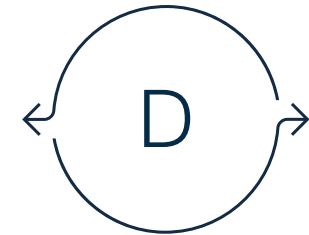
EVALUATION

Having high-quality, meaningful, and timely data gives people the insights they need to make more intelligent decisions and effective wellbeing investments. This doesn't mean your community's wellbeing scores always needs to go up, but you do need to easily and regularly gauge the impact of your efforts together so you can keep learning how to better care for wellbeing.



ACTIVATION

There is no one magic wellbeing strategy that will help every person in the community to be well. Instead, people need the freedom to playfully experiment and activate individual and collective wellbeing behaviors that align with their interests, values, resources, and desired outcomes.



DETERMINATION

Caring for wellbeing is never one-and-done! In order to improve our abilities and sustain our motivation, we need to create a psychologically safe space to talk with others about what's working well, where we're struggling, and what we're learning when it comes to caring for our wellbeing.

You may wish to consider these LEAD Factors as different "lenses" or "approaches" as you think about how to help people in your community care for their wellbeing. Keep in mind that you may wish to use one, some, or all of these factors, depending on your unique context.

WANT MORE?



TAKE THE FREE PERMAH WELLBEING SURVEY

Measure your wellbeing and see how you're doing when it comes to your levels of thriving and struggle, and your abilities and motivation to care for your wellbeing, at www.permahsurvey.com. You can even create a free personal wellbeing plan, drawing on more than 200 evidence-based wellbeing actions. You can also use this tool for teams or entire workplaces.



BOOK A FREE COMMUNITY OR WORKPLACE WELLBEING STRATEGY BRIEFING

Take a deeper dive into the community or workplace wellbeing research. Drawing on an appreciative, human-centered design process tailored to meet your needs, this briefing is designed to give you and others the confidence, support, and actions you need to improve wellbeing across your school or workplace. [Click here to learn more about booking your session.](#)



JOIN OUR CERTIFICATE IN APPLIED POSITIVE PSYCHOLOGY

Unlock the power of caring for wellbeing in your community, workplace, or school. Based on Professor Martin Seligman's PERMAH theory of wellbeing, the program includes live training classes and coaching calls with our globally sought-after coaches to put the latest wellbeing research and tools at your fingertips so you can become accredited to help others thrive, even in times of struggle. Our first cohort of this program in Antelope Valley **starts in Fall 2021 with scholarships available.**

ABOUT THE WELLBEING LAB RESEARCHERS



DR. PEGGY KERN

Dr. Peggy Kern is an associate professor at the Centre for Positive Psychology at the University of Melbourne's Graduate School of Education. Her research draws on a variety of methodologies to examine questions around who thrives in life and why, including understanding and measuring healthy functioning, identifying individual and social factors impacting life trajectories, and systems-informed approaches to wellbeing. She has published three books and more than 100 peer-reviewed articles and chapters. You can find out more about Peggy's work at www.peggykern.org.



LOUIS ALLORO

Louis Alloro is social entrepreneur creating and facilitating highly sought-after, evidence-based learning experiences helping teams and entire organizations and communities dig deeper and reach higher, thereby creating a collective impact. Since 2018, he's collaborated with the Michelle McQuaid group in creating content for The Change Lab and The Wellbeing Lab. Since 2008, he has trained and certified thousands of practitioners, companies, and communities in applied positive psychology and wellbeing science. He is currently pursuing his PhD in the School of Leadership and Change at Antioch University, where he studies systems-informed positive psychology and community development. He is also a senior fellow at the Center for the Advancement of Wellbeing at George Mason University. You can learn more about Louis' work at www.LouisAlloro.com



DR. MICHELLE MCQUAID

Dr. Michelle McQuaid is a best-selling author, workplace wellbeing teacher, and playful change activator. An honorary fellow at the University of Melbourne's Graduate School of Education, in addition to hosting the highly acclaimed weekly podcast, *Making Positive Psychology Work*, which features leading researchers and practitioners from around the world, Michelle blogs for *Psychology Today*, *The Huffington Post* and *Thrive*, and her work has been featured in *Forbes*, *The Harvard Business Review*, *The Wall Street Journal*, *Boss Magazine*, *The Age* and more. You can find more of Michelle's work at www.michellemcquaid.com.



JESSICA TAYLOR

Jessica Taylor is an educator, possibilitizer, presenter, and researcher who helps schools, communities, and organizations place wellbeing at the heart of their vision and practice. Jessica is the Michelle McQuaid Research Leader, and a member of the Systems Informed Positive Psychology (SIPP) and Wellbeing Literacy research team, and a teaching specialist at the University of Melbourne's Centre for Wellbeing Science. Jessica loves co-creating spaces that support individuals and communities to build awareness of the interdependent nature of wellbeing, generating wellbeing approaches that create thriving social systems. Her latest publication looks at wellbeing and resilience education during COVID-19. You can find more about Jessica's work at <https://www.linkedin.com/in/jessica-taylor-012430ab/>

ABOUT ADDITIONAL RESEARCHERS



DR. LINDSEY GODWIN

A professor, practitioner, and possibilizer, Dr. Lindsey Godwin has a passion for helping individuals and organizations leverage their potential through strength-based change. She holds the Robert P. Stiller Endowed Chair of Management in the Stiller School of Business at Champlain College (Vermont, USA), where she serves as the Academic Director of the David L. Cooperrider Center for Appreciative Inquiry (AI). An international speaker, consultant, and facilitator, her work has been published in a variety of journals and books, and she is currently a managing editor for the AI Practitioner Journal. You can find out more about Lindsey's work at: <https://lindseygodwin.com>.



Dr. Meg Warren

LDr. Meg A. Warren, a positive psychologist and diversity and inclusion scholar, is an Assistant Professor at Western Washington University. She is the Founding President of the Work & Organizations Division of IPPA, Co-Founder of the Western Positive Psychology Association, and Co-Editor of the International Journal of Wellbeing. Her award-winning research uses a positive psychology approach to study how individuals from relatively privileged groups can serve as allies to marginalized outgroups. To access publications and resources on her work, please visit www.megwarren.com.



DR. SCOTT DONALDSON

Dr Scott Donaldson is a Postdoctoral Scholar in Evaluation, Statistics, and Measurement at the University of California, San Diego School of Medicine, Moores Cancer Center. Scott received his PhD in Psychology with a concentration in Evaluation and Applied Research Methods and a co-concentration in Positive Organizational Psychology from Claremont Graduate University. He received an MS in Organizational Psychology from the University of Southern California, and his BA in Psychology from the University of California, Los Angeles. His research focuses on the design, measurement, and evaluation of individual, workplace, and community-based wellbeing interventions. You can find out more about Scott's work at: <https://www.scottdonaldsonphd.com/>.



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Donald is a data science consultant, technologist, and entrepreneur focused on the future of technology, work, and flourishing. He completed his postdoctoral research on the psychology of work and flourishing at The Human Flourishing Program at Harvard University's Institute for Quantitative Social Science. He holds a PhD in Psychology from The University of Chicago. He also holds master's degrees in computer science and divinity, also from Chicago. You can find out more on his website <https://neurofoo.com>.