



New York State Behavioral Risk Factor Surveillance System Brief

The Behavioral Risk Factor Surveillance System is an annual telephone survey of adults developed by the Centers for Disease Control and Prevention conducted in all 50 States, the District of Columbia, and several United States Territories. The New York Behavioral Risk Factor Surveillance System is administered by the New York State Department of Health to provide statewide and regional information on behaviors, risk factors, and use of preventive health services related to the leading causes of chronic and infectious diseases, disability, injury, and death.

Overweight and Obesity

New York State Adults, 2023

Introduction

Obesity risk factors are complex, involving health behaviors, stress, sleep, health conditions, medications, genetics, and environmental factors. Environmental factors include access to healthy, affordable foods and beverages and access to safe places for physical activity.¹ Many adults with obesity also have chronic conditions like diabetes and heart disease.¹

Health Equity

Obesity disproportionately affects certain groups in the United States, including non-Hispanic Black adults, Hispanic adults, and adults with lower education levels.¹ These disparities are driven by [social determinants of health](#), including racism, poverty, and affordable and quality housing.² Being labelled as ‘overweight’ or ‘obese’ can stigmatize individuals, leading to harmful physical, social, economic, and emotional effects.^{3,4}

To advance health and health equity in New York, communities can:

- Shift public health messaging and action toward ‘promoting healthy behaviors by improving the environments shaping them.’ This can help reduce stigma.
- Focus public health interventions (policy, system, and environmental changes) on risk factors for chronic diseases (poor nutrition, physical inactivity, and social determinants), a key focus of the Department’s [Prevention Agenda](#) and [Health Equity Plan](#).



Key Findings

- Approximately 2 out of every 3 adult New Yorkers have either overweight (36.1%) or obesity (28.0%). These two conditions affect over 8.8 million adults in New York State.
- Disparities in obesity prevalence exist based on age, race and ethnicity, educational attainment, disability status, and place of residence.
- Obesity is more prevalent among adults living with a disability (36.4%), and adults living outside of New York City (30.8%).
- Obesity is less prevalent among adults aged 18-24 years (15.8%), adults who are Asian or Pacific Islander/Native Hawaiian (13.9%), and adults with a college degree (22.2%).



Figure 1. Obesity Among United States and New York State Adults, Behavioral Risk Factor Surveillance System, 2023

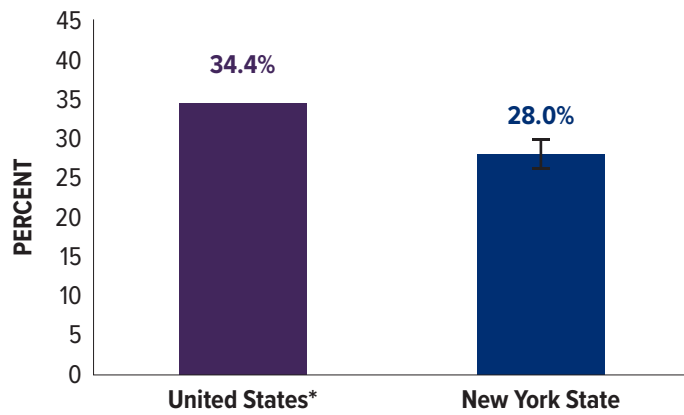
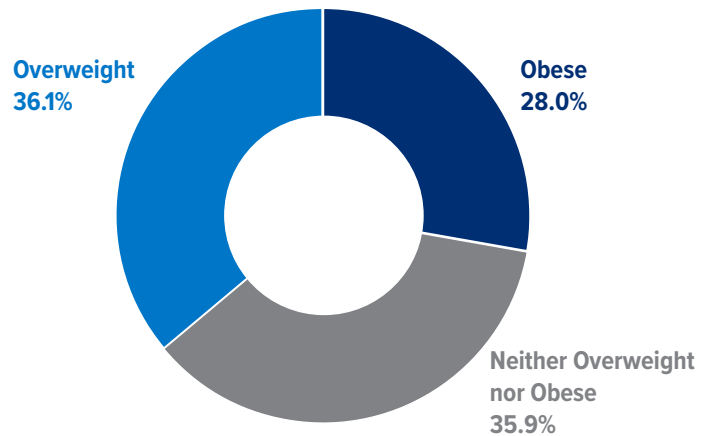


Figure 2. Weight Status Among New York State Adults, Behavioral Risk Factor Surveillance System, 2023



*Median percent; includes data from all States, the District of Columbia and several Territories

Figure 3. Prevalence of Overweight and Obesity Among New York State Adults, Behavioral Risk Factor Surveillance System, 2014-2023

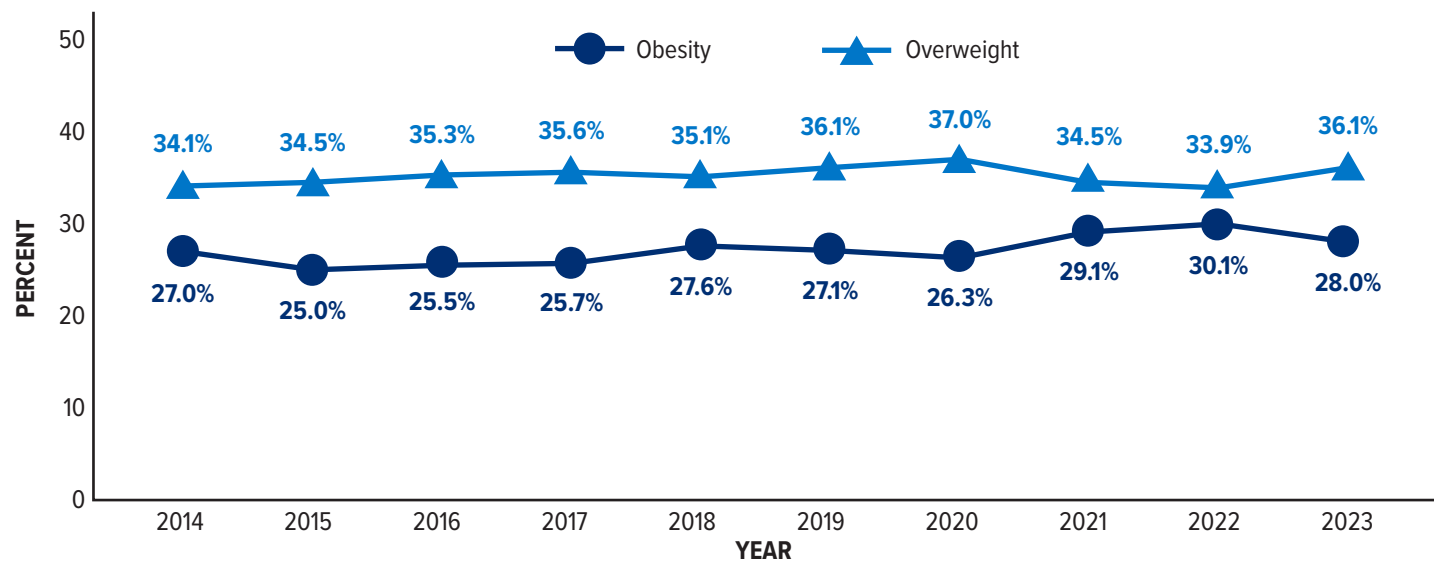


Table 1. Overweight and Obesity^a, Behavioral Risk Factor Surveillance System, 2023

	Neither Overweight nor Obese ^b		Overweight ^c		Obese ^d	
	% ^e	95% CI ^e	%	95% CI	%	95% CI
New York State [n=17,349]	35.9	34.7-37.1	36.1	34.9-37.3	28.0	26.9-29.1
Sex^f						
Female	40.9	39.2-42.6	30.5	28.8-32.1	28.7	27.1-30.2
Male	30.8	29.2-32.4	41.9	40.2-43.6	27.3	25.9-28.8
Age (Years)						
18-24	56.2	52.1-60.2	28	24.3-31.7	15.8	13.0-18.7
25-34	41.5	38.6-44.4	32.0	29.3-34.8	26.5	23.9-29.1
35-44	31.0	28.2-33.8	37.2	34.3-40.1	31.8	29.1-34.5
45-54	26.7	23.9-29.4	39.2	36.1-42.3	34.2	31.3-37.1
55-64	28.2	25.5-30.9	37.8	34.8-40.9	33.9	31.2-36.7
65+	34.8	32.5-37.2	39.0	36.6-41.5	26.1	24.0-28.2
Race/Ethnicity						
Asian or Pacific Islander/ Native Hawaiian, non-Hispanic	53.4	48.5-58.3	32.7	28.1-37.3	13.9	10.2-17.5
Black, non-Hispanic	30.0	26.4-33.5	34.5	30.9-38.1	35.6	32.1-39.0
Hispanic	32.1	29.5-34.6	37.2	34.5-39.9	30.7	28.2-33.2
Multiracial, non-Hispanic	39.1	30.8-47.4	32.6	24.1-41.2	28.3	21.4-35.2
White, non-Hispanic	35.5	34.0-37.0	36.3	34.8-37.8	28.2	26.8-29.6
All other race groups combined, non-Hispanic ^g	32.7	25.2-40.3	44.3	36.2-52.4	22.9	15.9-30.0
Annual household income						
Less than \$25,000	32.8	29.9-35.7	34.7	31.7-37.6	32.5	29.7-35.4
\$25,000-\$49,999	34.3	31.5-37.1	33.5	30.7-36.3	32.2	29.5-34.8
\$50,000-\$74,999	34.3	30.7-37.9	35.8	32.3-39.3	29.9	26.6-33.2
\$75,000 and greater	35.7	33.9-37.6	38.0	36.1-39.9	26.3	24.6-27.9
Missing ^h	40.8	37.7-43.8	36.1	33.0-39.1	23.2	20.7-25.6
Educational attainment						
Less than high school	31.1	27.2-35.1	38.0	34.1-42.0	30.8	27.2-34.4
High school or GED	33.7	31.2-36.2	34.8	32.3-37.4	31.4	29.1-33.8
Some college	32.7	30.3-35.1	35.6	33.2-38.0	31.7	29.5-34.0
College graduate	40.9	39.2-42.7	36.8	35.1-38.5	22.2	20.8-23.6
Disability Statusⁱ						
Yes	31.7	29.5-34.0	31.9	29.7-34.2	36.4	34.1-38.6
No	37.6	36.1-39.0	37.4	36.0-38.8	25.1	23.9-26.3
Urban-Rural^j						
Rural	31.7	24.7-38.8	37.9	30.8-44.9	30.4	24.5-36.3
Urban	36.0	34.8-37.2	36.1	34.9-37.3	28.0	26.9-29.0
Region						
New York City	39.9	38.0-41.8	35.9	34.0-37.8	24.2	22.6-25.8
New York State exclusive of New York City	33.0	31.5-34.5	36.2	34.7-37.8	30.8	29.3-32.2

Notes: ^aBased on categories of body mass index (BMI), calculated as weight in kilograms divided by the square of height in meters. ^bNeither overweight nor obese is defined as a BMI of less than 25. ^cOverweight is defined as a BMI of greater than or equal to 25, but less than 30. ^dObesity is defined as a BMI of greater than or equal to 30. ^e% = weighted percentage; CI = confidence interval; When comparing estimates, the 95% confidence interval (95% CI) provides the statistical range containing the true population percentage with a 95% probability. Although a 95% confidence interval is not a test of statistical significance, categories whose 95% confidence intervals do not overlap can be considered significantly different. ^fBased on the respondent's sex at birth. If sex at birth is missing, then the respondent's sex is based on gender identity at time of the interview. ^gAll other race groups combined, non-Hispanic includes: American Indian or Alaska Native, and other race. ^hMissing category included because more than 10% of the sample did not report income. ⁱAll respondents who reported at least one type of disability (cognitive, mobility, vision, self-care, independent living, or deafness). ^jBased on county of residence and the 2013 National Center for Health Statistics' Urban-Rural Classification Scheme for Counties.

References



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Behavioral Risk Factor Surveillance System Questions



1. About how much do you weigh without shoes?
2. About how tall are you without shoes?

In this report, weight status is based on categories of body mass index, calculated as weight in kilograms divided by the square of height in meters. Neither overweight nor obese is defined as a body mass index of less than 25. Overweight is defined as a body mass index of greater than or equal to 25, but less than 30. Obesity is defined as a body mass index of greater than or equal to 30.

Body Mass Index (BMI) has strengths and limitations as a measure of obesity.⁵ It relies on a calculation based on a person's height and weight not body fat. BMI is also correlated with factors that do not reflect individual health or metabolic function, including race, ethnicity, age and body shape. Despite its limitations, BMI remains a simple, non-invasive, objective tool for screening for obesity and overweight. Measuring obesity and overweight in the population using BMI remains a useful tool for describing differences in weight status among groups in the population and monitoring changes over time.

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Program Contributions



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