



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.

Diabetes

New York State Adults, 2023



Introduction

Diabetes is a chronic disease in which blood sugar (glucose) levels are above normal. Insulin, a hormone made by the pancreas, helps blood sugar enter the body's cells for use as energy. In type 1 diabetes, the pancreas fails to produce insulin. In type 2 diabetes, the cells of the body become resistant to insulin.¹ Type 2 diabetes accounts for about 90%-95% of all diagnosed cases and type 1 diabetes accounts for about 5%-10%.²

Diabetes is complicated and can be overwhelming to manage in everyday life. Poorly managed diabetes can lead to complications such as heart disease, stroke, kidney disease, vision loss, and nerve damage.³ Diabetes is also a very costly disease. Medical spending for people with diagnosed diabetes is more than double compared to those without diabetes.⁴

Diabetes self-management education and support is an evidence-based program covered by Medicare, New York State Medicaid, and commercial health insurance. Participation in diabetes self-management education and support programs can help people build the confidence to manage their diabetes, prevent or delay complications, and live longer and healthier lives.⁵

Health Equity

The burden of diabetes in the population is not equitable. Rates of diabetes are higher among non-Hispanic Black adults and Hispanic adults. Diabetes is also more common among adults with lower income, adults with less educational attainment, and adults living with a disability. Social drivers of health, including lack of access to healthy food and safe places for physical activity and housing instability, contribute to disparities in the burden of diabetes. These social drivers of health are often the result of structural racism, laws, policies, institutional practices, and entrenched norms that lead to the inequitable treatment of people based on race.⁶ The New York State Department of Health remains committed to achieving equity in diabetes outcomes by improving diabetes detection and increasing access to and participation in diabetes self-management education and support programs so that those with diabetes can achieve optimal health.

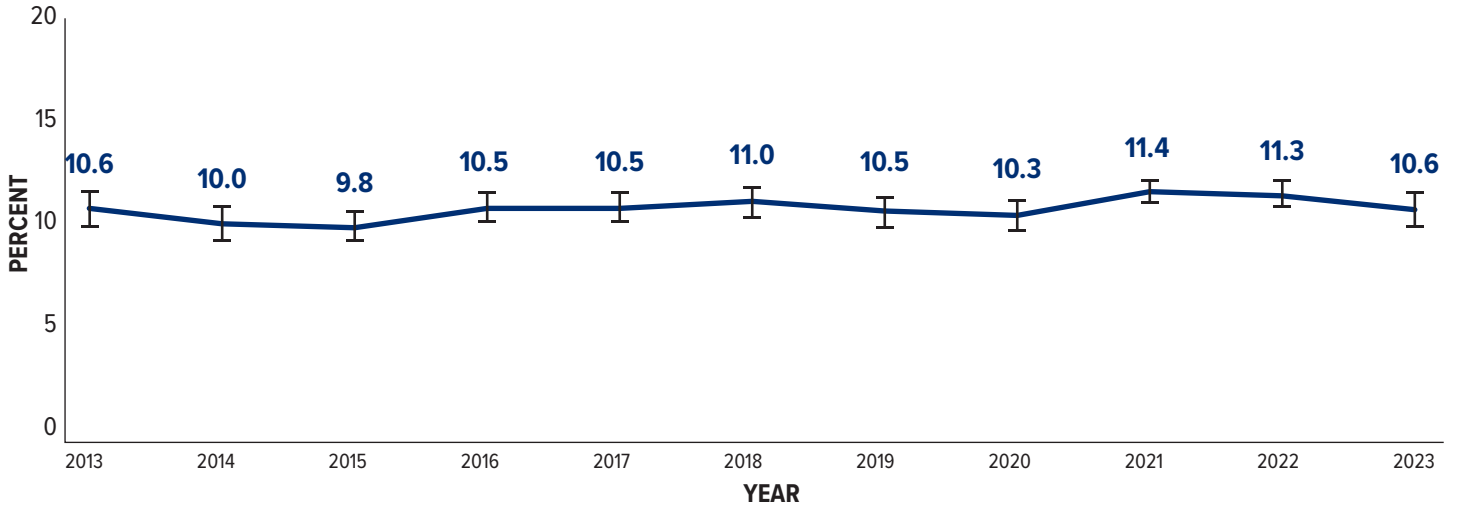


Key Findings

- An estimated 1.7 million adult New Yorkers (10.6%) have diagnosed diabetes (Figure 1).
- The prevalence of diabetes is higher among Hispanic adults (12.9%) and Black, non-Hispanic adults (12.3%) compared to White, non-Hispanic adults (8.9%) (Figure 2).
- The prevalence of diabetes decreases as annual household income or educational attainment increases. Adults with an annual household income of less than \$25,000 (17.1%) or adults with less than a high school education (18.1%) are most likely to be diagnosed with diabetes (Figure 3).
- Diabetes prevalence increases with age and is most common among adults aged 65 years and older (21.7%).
- Adults with obesity are more likely to have diabetes (18.3%) compared to adults with overweight (9.6%) or those with neither overweight nor obesity (5.8%).
- Diabetes is more prevalent among adults enrolled in Medicare (18.6%) and those enrolled in Medicaid (11.6%) compared to those with private insurance (6.9%).
- The prevalence of diabetes among adults living with disability (19.2%) is two and a half times more than those living without disability (7.5%).

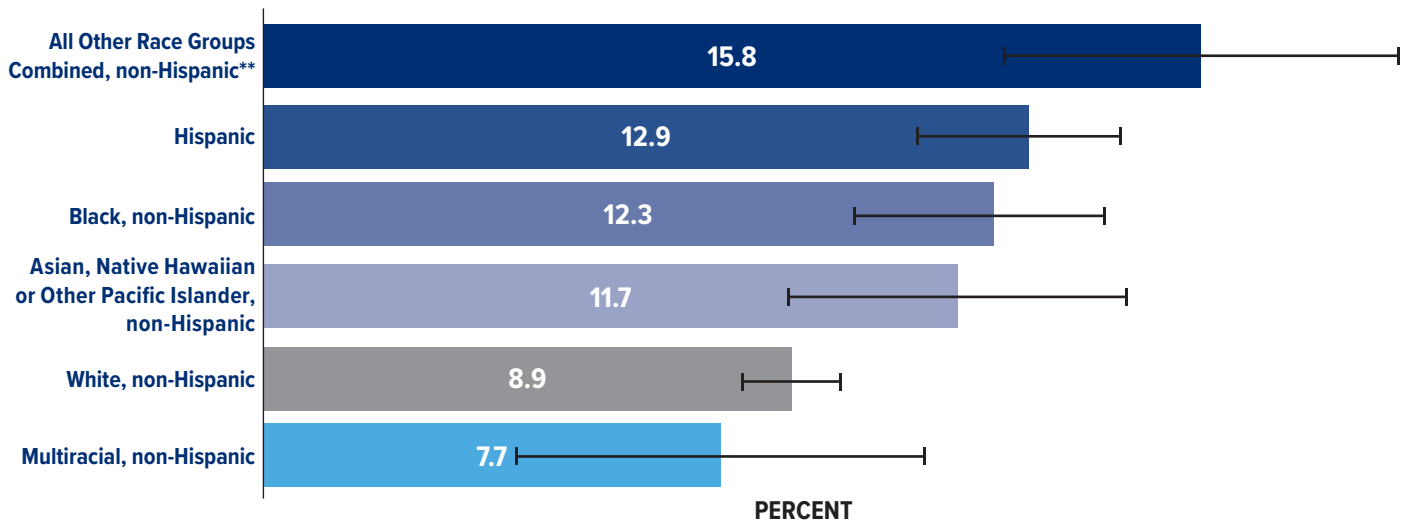


Figure 1. Percent of Diagnosed Diabetes* Among New York State Adults, Behavioral Risk Factor Surveillance System, 2013-2023



*Excludes reported gestational diabetes, prediabetes, or borderline diabetes. Error bars represent 95% Confidence Interval.

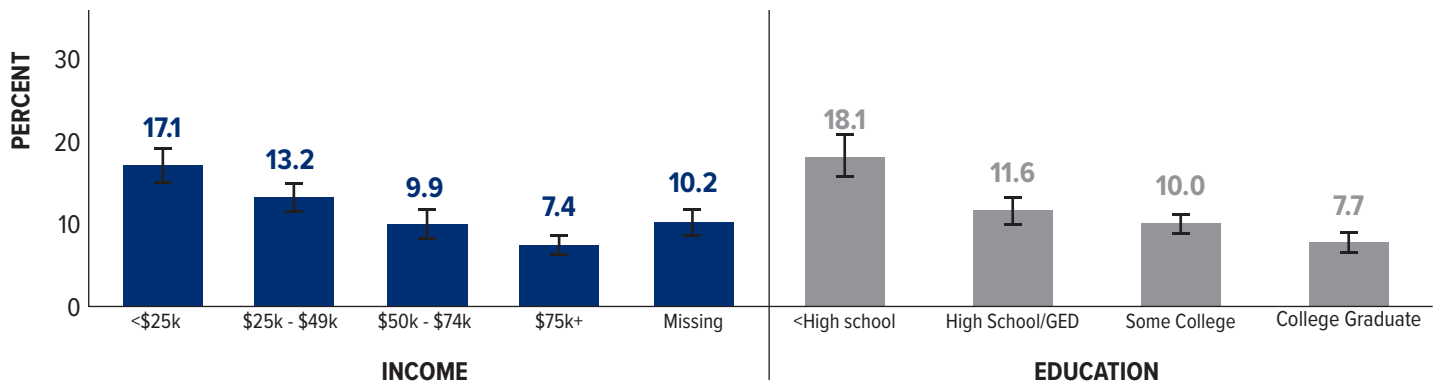
Figure 2. Percent of Diagnosed Diabetes* Among New York State Adults by Race/Ethnicity, Behavioral Risk Factor Surveillance System, 2023



*Excludes reported gestational diabetes, prediabetes, or borderline diabetes. Error bars represent 95% Confidence Interval.

**All other race groups combined, non-Hispanic includes American Indian or Alaska Native.

Figure 3. Percent of Diagnosed Diabetes* Among New York State Adults by Annual Household Income and Educational Attainment, Behavioral Risk Factor Surveillance System, 2023



*Excludes reported gestational diabetes, prediabetes, or borderline diabetes. Error bars represent 95% Confidence Interval.

Table 1. Diagnosed Diabetes^a Among New York State Adults, Behavioral Risk Factor Surveillance System, 2023

	% ^b	Diabetes ^a 95% Confidence Interval ^b
New York State [n=17,349]	10.6	9.9 – 11.3
Sex^c		
Female	9.9	8.9 - 10.8
Male	11.5	10.4 - 12.5
Age (Years)		
18-24	1.4	0.5 - 2.2
25-34	1.2	0.7 - 1.6
35-44	5.5	4.3 - 6.7
45-54	10.1	8.5 -11.6
55-64	17.8	15.7 - 19.9
65+	21.7	19.6 - 23.7
Race/Ethnicity		
Asian, Native Hawaiian or Other Pacific Islander, non-Hispanic ^d	11.7	8.9 - 14.6
Black, non-Hispanic	12.3	10.2 - 14.3
Hispanic	12.9	11.2 - 14.6
Multiracial, non-Hispanic	7.7	4.2 - 11.1
White, non-Hispanic	8.9	8.1 - 9.7
All Other Race Groups Combined, non-Hispanic ^e	8.9	8.1 - 9.7
Annual Household Income		
Less than \$25,000	17.1	14.9 - 19.3
\$25,000-\$49,999	13.2	11.3 - 15.0
\$50,000-\$74,999	9.9	7.9 - 11.8
\$75,000 and greater	7.4	6.5 - 8.3
Missing ^f	10.2	8.5 - 11.8
Educational Attainment		
Less than High School	18.1	15.3 - 20.9
High school or GED	11.6	10.2 - 13.1
Some Post-High School	10.0	8.8 - 11.2
College Graduate	7.7	6.7 - 8.7
Weight Status		
Neither Overweight nor Obese	5.8	4.9 - 6.7
Overweight	9.6	8.3 - 10.8
Obese	18.3	16.6 - 20.0
Health Care Coverage Type		
Private	6.9	6.1 - 7.7
Medicare	18.6	16.4 - 20.7
Medicaid	11.6	9.7 - 13.5
Other insurance ^g	10.7	7.6 - 13.8
No coverage	5.6	3.7 - 7.5
Disability Status^h		
Yes	19.2	17.4 - 20.9
No	7.5	6.8 - 8.2
Region		
New York City	11.5	10.3 - 12.7
New York State exclusive of New York City	10.0	9.2 - 10.8

Notes: ^aDoes not include reported gestational diabetes, prediabetes, or borderline diabetes. ^b% = Weighted Percentage;. When comparing estimates, the 95% confidence interval 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. ^cBased 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. ^dPursuant to Chapter 745 of 2021 of the Laws of New York, this report does not include separate tabulations for the required Asian or Pacific Islander ethnic groups and languages. The data were determined to be insufficient for publication due to small cell sizes that result in unstable estimates and/or are vulnerable to patient identifiability. ^eAll Other Race Groups Combined, non-Hispanic includes American Indian or Alaska Native. ^f"Missing" category included because more than 10% of the sample did not report income. ^gOther insurance includes Children's Health Insurance Plan (CHIP), TRICARE, VA/Military, Indian Health Service, state sponsored health plan, or other government plan. ^hAll respondents who reported at least one type of disability (cognitive, mobility, vision, self-care, independent living, or deafness).



References

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6. Churchwell K, Elkind MSV, Benjamin RM et al. Call to Action: Structural Racism as a Fundamental Driver of Health Disparities: A Presidential Advisory From the American Heart Association. *Circulation*. 2020;142(24):e454-e468. Accessed August 7, 2025. doi.org/10.1161/CIR.0000000000000936.



Behavioral Risk Factor Surveillance System Questions

Diagnosed Diabetes

1. Has a doctor, nurse, or other health professional ever told you had diabetes?
[If “Yes” and respondent is female, ask:]
2. Was this only when you were pregnant?
Gestational (pregnancy-related) diabetes, prediabetes, and borderline diabetes were not counted as diabetes cases in the calculation of prevalence estimates.



Suggested Citation

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Program Contributions



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