Number 2025-27

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.

Testing for High Blood Sugar

New York State Adults, 2023

Introduction

Early detection and treatment of prediabetes and diabetes are critical. The Centers for Disease Control and Prevention estimates that 97.6 million (38.0%) adults in the United States have prediabetes and 38.4 million people, or 11.6%, have diabetes but many don't know it.[1] Without intervention, many people with prediabetes will develop type 2 diabetes within five years and are also at increased risk of developing heart disease and stroke.[2,3] Fortunately, lifestyle change programs have been demonstrated to prevent or delay the development of type 2 diabetes in people with prediabetes.[4,5] Diabetes self-management education and support programs have been demonstrated to help individuals learn to manage and better control diabetes.[6]

The American Diabetes Association recommends blood glucose testing (also referred to as blood sugar testing) to screen for type 2 diabetes and prediabetes for all adults over age 35 and for younger adults with overweight or obesity who also have one or more risk factors such as hypertension, elevated blood cholesterol or family history of type 2 diabetes.[7] Health care providers are encouraged to recommend participation in a National Diabetes Prevention Program lifestyle change programs for their adult patients with prediabetes and diabetes self-management education and support programs for their adult patients with diabetes.

More information on prediabetes and diabetes can be found in the Brief Reports Prediabetes, New York State Adults, 2023 and Diabetes, New York State Adults, 2023.

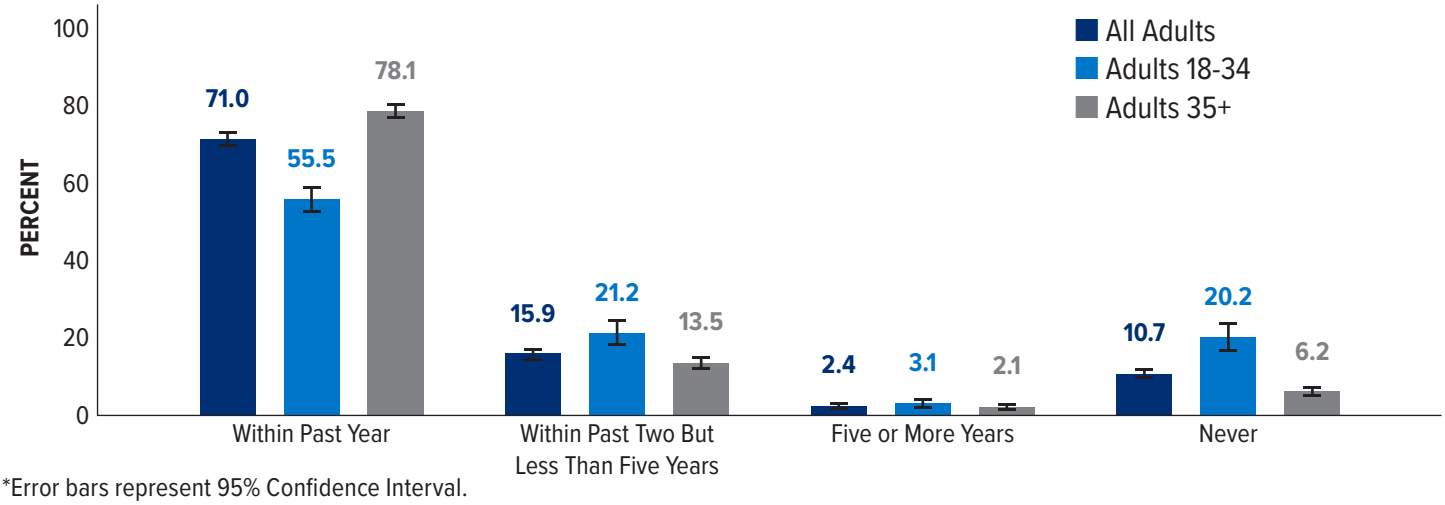
Health Equity

Adults who have a personal health care provider and adults who have an annual physical are more likely to be tested for high blood sugar within the past year than those who have not. While testing rates do not vary by race/ethnicity, American Indian and Alaska Native adults, non-Hispanic Black adults and adults of Hispanic origin are more likely to be diagnosed with diabetes.[1] American Indian and Alaska Native adults and non-Hispanic Black adults are also more likely to experience and die from diabetes-related complications.[8] Social drivers of health such as lack of access to healthy food, lack of safe places for physical activity, housing instability, and lack of access to affordable and quality medical care, contribute to disparities in the burden of prediabetes and diabetes by increasing the likelihood of developing these conditions and influencing their management. 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.[9] The New York State Department of Health remains committed to achieving equity in health outcomes by improving prediabetes and diabetes detection, and increasing access to evidence-based type 2 diabetes prevention programs and diabetes self- management programs in communities where disparities exist.

Key Findings

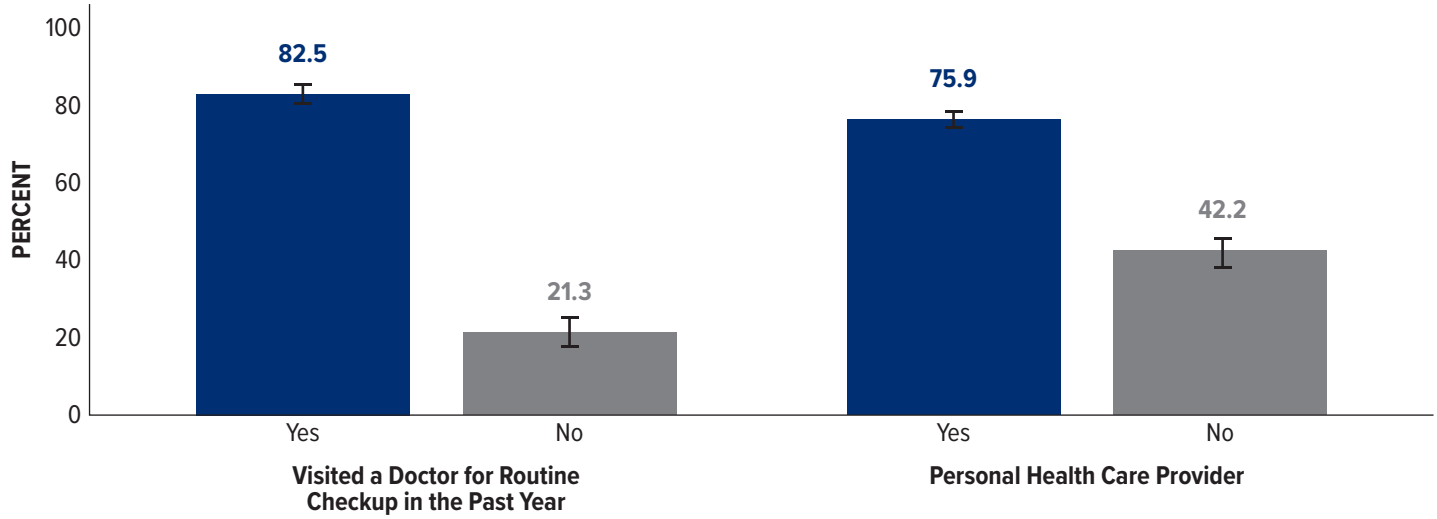
- More than two-thirds of adult New Yorkers (71.0%) report having been tested for high blood sugar within the past year.
- Adults over the age of 35 are more likely to report getting tested for high blood sugar in the past year compared to adults between ages of 18 to 34 (78.1% vs. 55.5%) (Figure 1).
- Adults who have not seen their doctor for a routine checkup in the past year (21.3%) and those who do not have a personal health care provider (42.2%) are less likely to report getting tested for high blood sugar (Figure 2).
- Adults with prediabetes (89.1%), history of cardiovascular disease (88.8%), hypertension (85.4%), or high cholesterol (83.6%) are more likely to report having been tested for high blood sugar in the past year than adults without those conditions (Figure 3).
- Females are more likely to get tested for high blood sugar compared to males (74.4% vs. 67.1%).
- Adults with no health care coverage are less likely to report getting tested for high blood sugar in the past year (39.7%) compared to adults with health care coverage.

Figure 1. Testing for High Blood Sugar Among New York State Adults, Behavioral Risk Factor Surveillance System, 2023



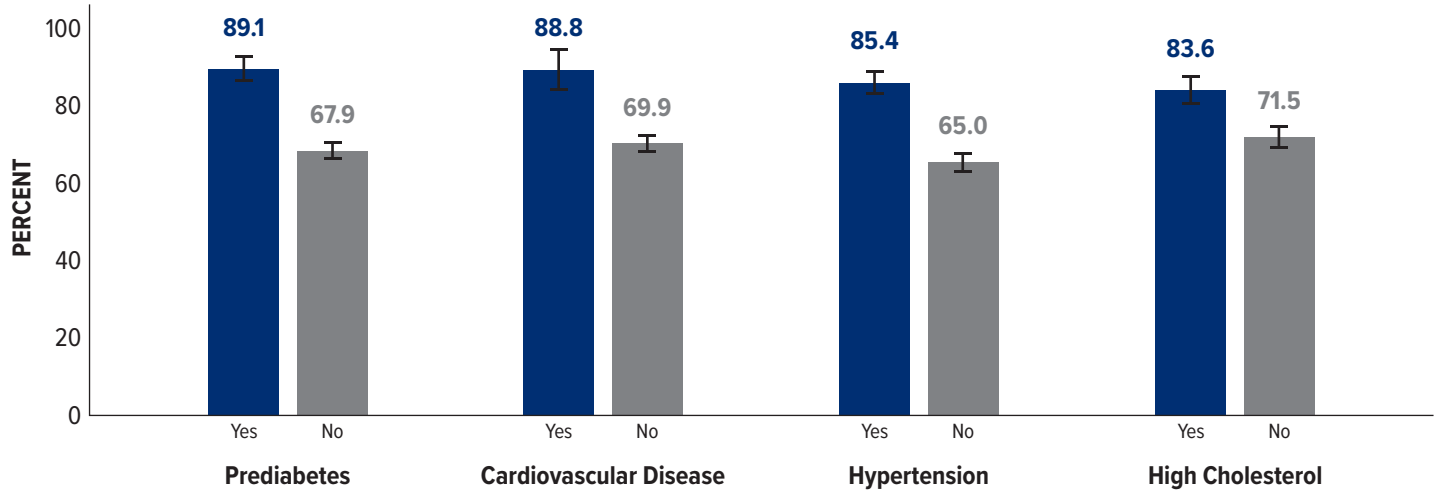
*Error bars represent 95% Confidence Interval.

Figure 2. Percent of New York State Adults Who Tested for High Blood Sugar in the Past Year by Select Health Care Access, Behavioral Risk Factor Surveillance System, 2023



*Error bars represent 95% Confidence Interval.

Figure 3. Percent of New York State Adults Who Tested for High Blood Sugar in the Past Year by Select Health Conditions, Behavioral Risk Factor Surveillance System, 2023



*Error bars represent 95% Confidence Interval.

Table 1. Testing for High Blood Sugar in the Past Year Among New York State Adults, Behavioral Risk Factor Surveillance System, 2023

	Testing for High Blood Sugar in the Past Year	
	%[a]	95% CI[a]
New York State [n=5,408]	**71.0**	**69.0 – 73.1**
Sex[b]		
Female	74.4	71.6 – 77.3
Male	67.1	64.1 – 70.2
Age (Years)		
18-24	46.5	38.7 – 54.4
25-34	61.2	55.9 – 66.5
35-44	62.4	57.2 – 67.6
45-54	78.1	74.0 – 82.1
55-64	81.7	77.5 – 85.8
65+	88.1	85.1 – 91.1
Race/Ethnicity		
Asian, Native Hawaiian or Other Pacific Islander, non-Hispanic	71.6	63.5 – 79.7
Black, non-Hispanic	74.0	67.4 – 80.5
Hispanic	67.0	62.5 – 71.5
White, non-Hispanic	71.4	68.6 – 74.2
All Other Race Groups Combined, non-Hispanic[c]	73.6	63.8 – 83.3
Annual Household Income		
Less than $25,000	71.1	66.2 – 76.1
$25,000-$49,999	68.0	62.8 – 73.2
$50,000-$74,999	74.0	68.1 – 79.9
$75,000 and Greater	73.0	69.6 – 76.4
Missing[d]	68.7	63.8 - 73.6
Education Attainment		
Less than High School	65.8	59.0 – 72.7
High School or GED	67.6	62.8 – 72.4
Some Post-High School	71.8	67.3 – 76.4
College Graduate	74.7	72.3 – 77.1
Health Care Coverage Type		
Private	70.8	67.6 – 74.0
Medicare[e]	85.6	81.9 – 89.2
Medicaid	65.9	59.8 - 72.0
Other Insurance[f]	74.0	64.6 – 83.4
No Coverage	39.7	32.2 – 47.3
Weight Status		
Neither Overweight nor Obese	68.4	64.7 – 72.2
Overweight	72.3	68.5 - 76.1
Obese	74.8	70.9 - 78.8
Disability Status[g]		
Yes	72.7	68.1 – 77.3
No	70.1	67.7 – 72.5
Region		
New York City	72.3	69.2 – 75.4
New York State exclusive of New York City	70.3	67.5 – 73.1

Notes: [a]% = Weighted percentage; 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. [b]Based 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. [c]All other race groups combined, non-Hispanic combined includes American Indian or Alaska Native and Multiracial. [d]Missing category included because more than 10% of the sample did not report income. [e]Medicare includes Medigap. [f]Other insurance includes Children's Health Insurance Plan (CHIP), TRICARE, VA/Military, Indian Health Service, State sponsored health plan, or other government programs. [g]All respondents who reported at least one type of disability (cognitive, mobility, vision, self-care, independent living, or deafness).

Table 2. Testing for High Blood Sugar in the Past Year Among New York State Adults by Selected Access and Health Conditions, Behavioral Risk Factor Surveillance System, 2023

	Testing for High Blood Sugar in the Past Three Years	
	%[a]	95% CI[a]
New York State [n=5,408]	**71.0**	**69.0 – 73.1**
Visited a Doctor for Routine Checkup in the Past Year		
Yes	82.5	80.4 – 84.5
No	21.3	16.8 – 25.8
Personal Health Care Provider		
Yes (At Least One)	75.9	73.7 – 78.1
No	42.2	36.3 – 48.1
Prediabetes		
Yes	89.1	85.1 – 93.0
No	67.9	65.5 – 70.2
History of Cardiovascular Disease		
Yes	88.8	83.3 – 94.2
No	69.9	67.7 – 72.0
Hypertension		
Yes	85.4	82.8 – 88.1
No	65.0	62.4 – 67.7
High Cholesterol		
Yes	83.6	80.2 – 87.0
No	71.5	68.8 – 74.2

Notes: [a]% = Weighted percentage; 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.

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Behavioral Risk Factor Surveillance System Questions

Testing for High Blood Sugar

When was the last time you had a blood test for high blood sugar or diabetes by a doctor, nurse, or other health professional?

Note: These questions are only asked of those not responding "Yes" to having ever been diagnosed with diabetes.

Suggested Citation

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Program Contributions

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