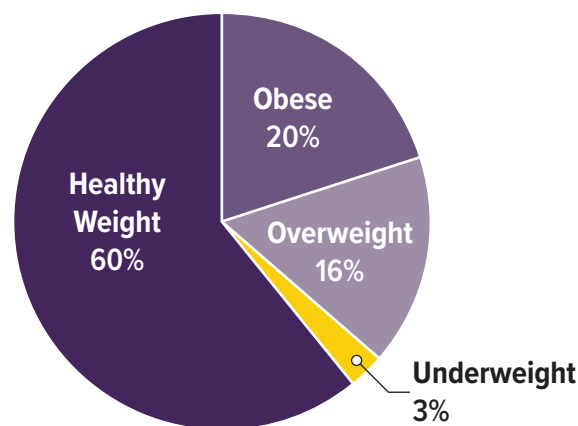


## Prevalence of Obesity Among Students in New York (excluding New York City)

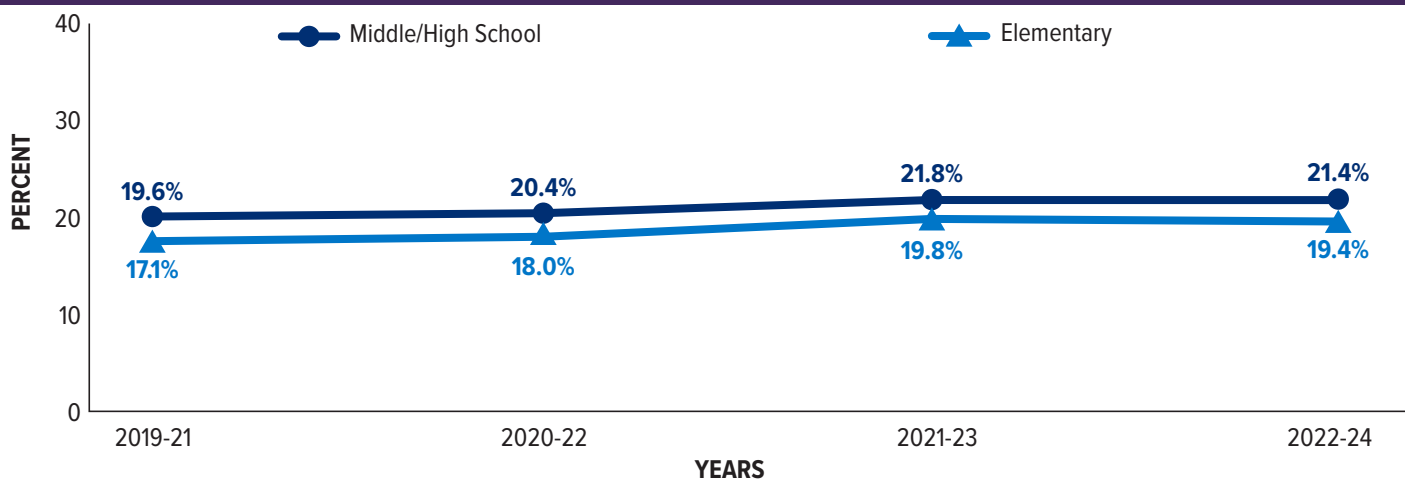


Childhood obesity is a complex disease caused by multiple medical, cultural, socioeconomic, genetic and lifestyle factors. It is a significant risk factor for type 2 diabetes, eating disorders, respiratory problems, depression and low self-esteem. For children ages 2 to 18, obesity is defined as having a body mass index (BMI) at or above the 95th percentile for their age and sex. Overall, 20% of children in New York State (NYS) (excluding New York City) have obesity, and rates of obesity in public school districts have increased 11% since the COVID-19 pandemic.

**FIGURE 1.** 1 in 3 Students in New York are Categorized as Obese or Overweight



**FIGURE 2.** Obesity Rates are on the Rise and are Higher Among Middle and High School Students



**Data Source:** Student Weight Status Category Reporting System 2022-2024. This data includes students who attend public-school in grades pre-K, 1, 3, 5 (Elementary), 7, 9, and 11 (Middle/High School), and excludes students who attend school in the five boroughs of New York City.

BMI has strengths and limitations as a measure of obesity. 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. (See: National Academies of Sciences, Engineering, and Medicine (2023) [doi.org/10.17226/27185](https://doi.org/10.17226/27185))

## Public Health Opportunity



### State and Regional Leaders can:

- Educate state and local decision-makers on the successes of **physical activity and nutrition grant programs** in school and community settings and encourage support for future endeavors.



### School Staff can:

- Promote **school environments that increase physical activity**.
- Implement policies and improve school environments that support at least 60 minutes of physical activity a day.
- Increase **student access** to healthy and affordable foods and beverages.
- Increase **skills and knowledge of students** to support healthy food and beverage choices.



### Health Care Providers can:

- **Regularly measure children's height and weight** and assess body mass index (BMI) during check-ups.
- Teach healthy eating habits.
- Provide nutritional guidance.
- Encourage physical activity.
- **Use evidence-based guidelines** for screening, evaluating, and treating child obesity and related chronic diseases.
- **Use strategies for reducing weight stigma**, including modeling non-biased behaviors, using person-first language, and counseling using empathetic techniques.

## Resources for Improvement

### Student Weight Data Explorer

View data for an individual school district, compare multiple districts, or examine statewide, regional and county-level trends.

<https://nyshc.health.ny.gov/web/nyapd/student-weight-data-explorer>

### Student Weight Status Category Reporting System (SWSCRS)

[www.health.ny.gov/prevention/obesity/statistics\\_and\\_impact/student\\_weight\\_status\\_data.htm](http://www.health.ny.gov/prevention/obesity/statistics_and_impact/student_weight_status_data.htm)

### New York State Center for School Health (NYSCSH)

[www.schoolhealthny.com/](http://www.schoolhealthny.com/)

### New York State Obesity Prevention Program

[www.health.ny.gov/prevention/obesity/](http://www.health.ny.gov/prevention/obesity/)

### Evidence-Based Guidelines for Child Obesity

[Evidence-Based Guidelines for Child Obesity | Obesity | CDC](https://www.cdc.gov/obesity/evidence-based-guidelines-for-child-obesity/)



**Department  
of Health**