

Overweight and Obesity in North Carolina **2020 UPDATE**

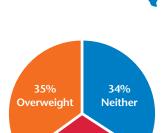




Prevalence of overweight or obesity among adults in North Carolina:

68%

(BRFSS, 2018)



31%

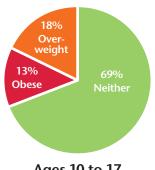
Obese

Ages 18 and Older

Prevalence of overweight or obesity among adults in the United States:

66%

(BRFSS, 2018)

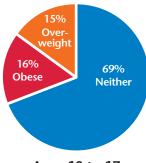


Ages 10 to 17

Prevalence of overweight or obesity among children and youth ages 10 to 17 in **North Carolina:**

31%

(NSCH, 2016-17)



Ages 10 to 17

Prevalence of overweight or obesity among children and youth ages 10 to 17 in the **United States:**

31%

(NSCH, 2016-17)

True for both North Carolina and the United States:



Adults with overweight or obesity: 2 out of 3

Children and youth with overweight or obesity: 3 out of 10

(NSCH, 2016-17)

(BRFSS, 2018)



Balance how we eat, drink, and move.

EAT

"A healthy eating pattern includes a variety of vegetables from all of the subgroups—dark green, red and orange, legumes (beans and peas), starchy, and other."

—Key Recommendation from the Dietary Guidelines for Americans 2015–2020

"A healthy eating pattern includes fruits, especially whole fruits."

—Key Recommendation from the *Dietary Guidelines for Americans 2015–2020*

DRINK

"Consume less than 10 percent of calories per day from added sugars."

—Key Recommendation from the *Dietary Guidelines for Americans 2015–2020*

MOVE

"Adults should move more and sit less throughout the day. Some physical activity is better than none."

— Executive Summary: Physical Activity Guidelines for Americans, 2nd edition

"For substantial health benefits, adults should do at least 150 minutes to 300 minutes a week of moderate-intensity, or 75 minutes to 150 minutes a week of vigorous-intensity aerobic physical activity. Adults should also do muscle-strengthening activities that involve all major muscle groups on two or more days a week."

- Executive Summary: Physical Activity Guidelines for Americans, 2nd edition

"Children and adolescents ages 6 through 17 years should do 60 minutes (1 hour) or more of moderate-to-vigorous physical activity daily."

- Executive Summary: Physical Activity Guidelines for Americans, 2nd edition

Spotlight on Breastfeeding

The prevalence of overweight and obesity is increased among children who are not breastfed. The duration (length of time a child is breastfed) and exclusivity (not feeding other foods or drinks while breastfeeding) are both associated with lower rates of overweight and obesity.

The American Academy of Pediatrics recommends that infants be exclusively breastfed for the first 6 months and continued breastfeeding with complementary foods through 12 months.

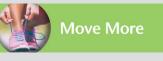


82.5% of infants in North Carolina, compared to **83.8%** of infants in the US (NIS 2019).

46.2% of North Carolina children are breastfed exclusively through three months of age, compared to **47.5%** in the US (NIS 2019).

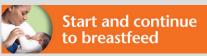
23.4% of North Carolina children are breastfed exclusively through six months of age, compared to 25.4% in the US (NIS 2019).

The Eat Smart, Move More Core Behaviors are eight evidence-based lifestyle behaviors that can improve overall health.









Adults in North Carolina



consume vegetables less than one time per day 16% (BRFSS 2017).

consume fruit less than one time per day (BRFSS 2017).

drink regular soda or pop that contains sugar one or more times per day (NC BRFSS 2017).

do not participate in 150 minutes or more of aerobic physical activity per week (BRFSS 2017).

do not participate in muscle strengthening exercises % two or more times per week (BRFSS 2017).

had not participated in any physical activities in the past month when surveyed (BRFSS 2018).

High School Students in **North Carolina**



eat vegetables less than one time per day (NC YRBS 2017).

eat fruit or drink 100% fruit juice less than one time 43% per day (NC YRBS 2017).

drink a can, bottle, or glass of soda or pop one or more times per day (NC YRBS 2017).

do not meet the recommendation to be active for at least an hour per day, seven days per week (NC YRBS 2017).

play video or computer games or use a computer for something other than school work for three or more hours on an average school day (NC YRBS 2017).



Eat more fruits and vegetables



Drink more water





Manage stress

Children and Youth Ages 0 to 17 in North Carolina

of children and youth ages 41% 1 to 17 eat one serving or less of vegetables per day, not including French fries (NC CHAMP 2016-17).

of children and youth ages 30% 1 to 17 eat one serving or less of fruit per day (NC CHAMP 2016-17).

of children and youth ages of children and youlli ay
1 to 17 drink sweetened beverages, such as soda pop, sweet tea, fruit punch, Kool-aid, sports drinks or fruit drinks one or more times per day (NC CHAMP 2016-17).

of children and youth ages 47% 0 to 17 spend two or more hours on an average weekday in front of a TV watching TV programs, videos, or playing video games (NSCH 2016-17).

of children and youth ages 41% 0 to 17 spend two or more hours on an average weekday with computers, cell phones, handheld video games, and other electronic devices, doing things other than schoolwork (NSCH 2016–17).

of children and youth ages 6 to 17 had not exercised, played a sport, or participated in physical activity for at least 60 minutes every day in the past week when surveyed (NSCH 2016-17).

FAT





Be Part of the SOLUTION >



The places we go—
our homes,
communities,
worksites,
schools,
child care centers—

affect our lifestyle.
Let's shift norms and expectations, rules and policies, and even physical surroundings to make it possible for children and adults to eat smart and move more wherever they go.

We can all be part of the solution.



Do community members have opportunities to eat smart and move more?

When asked whether their community has trails, greenways, bike paths, or sidewalks for biking, walking or other activities, 70% of North Carolina adults responded "yes" (NC BRFSS 2017).

58% of children and youth live in a neighborhood that contains a park or playground area, based on parent report (NSCH 2016–17).

57% of children and youth live in a neighborhood that contains sidewalks

or walking paths, based on parent report (NSCH 2016–17).

85% of North Carolina adults report that it is easy to purchase healthy foods in their neighborhood (NC BRFSS 2017).

15% of farmers markets in North Carolina accept WIC Farmers Market Nutrition Program Vouchers (CDC Fruit and Vegetable Indicator Report 2018).

Do middle and high school students have opportunities to eat smart and move more?

97% of middle and high schools in North Carolina offer a free source of drinking water in the cafeteria during lunch, making it possible for all students to choose a healthy beverage (NC Profiles 2018).

13% of middle and high schools in North Carolina offer a self-serve salad bar to students (NC Profiles 2018).

64% of middle and high schools in North Carolina offer opportunities for all students to participate in intramural sports programs or physical activity clubs (NC Profiles 2018).

75% of middle and high schools in North Carolina have a joint use agreement for shared use of school or community physical activity or sports facilities (NC Profiles 2018).

Do families have opportunities to breastfeed their children?

27 maternity centers in
North Carolina are currently
designated as NC Maternity
Center BreastfeedingFriendly Facilities
as of October
2019.

17 maternity centers in North Carolina are designated as Baby-Friendly by Baby-Friendly USA as of October 2019. 26 child care centers
in North Carolina are
currently recipients of the
NC Breastfeeding-Friendly
Child Care
Designation
as of October
2019.

Reastfeeding-Friendly
Child Care Designation

Data on Policies and Environments

Our choices about food, beverages, and physical activity are affected by the norms and environments around us. This page offers just a few examples of data that show how places—through policies and physical surroundings—can influence our choices and thus our health.

Data Sources

The data in this report comes from national and state-level surveillance systems, listed below. Many of these data sources collect information through self-report and parent-report. This is not an exhaustive list. Given the brief nature of this report, it is likely that other data sources exist, as well as other relevant indicators within the data sources listed below.

Behavioral Risk Factor Surveillance System (BRFSS): The BRFSS is the nation's premier system of health-related telephone surveys that collect state data about US residents regarding their health-related risk behaviors, chronic health conditions, and use of preventive services.

Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion, Division of Population Health. Behavioral Risk Factor Surveillance System (BRFSS) Prevalence & Trends Data [online]. 2018. Available at cdc.gov/brfss/brfssprevalence. Accessed on 09/23/2019.

NC Behavioral Risk Factor Surveillance System (NC BRFSS): The State Center for Health Statistics conducts North Carolina's BRFSS telephone survey, as part of the nationwide BRFSS. BRFSS telephone interviews are conducted monthly, and data are analyzed annually.

North Carolina State Center for Health Statistics. North Carolina Behavioral Risk Factor Surveillance System (BRFSS). 2017. North Carolina Department of Health and Human Services, Division of Public Health. Available at schs.dph.ncdhhs.gov/data/brfss/2017/nc/all/topics.htm. Accessed on 08/19/2019.

National Immunization Surveys (NIS): The NIS are a group of phone surveys used to monitor vaccination coverage among children as well as breastfeeding rates. The surveys are sponsored and conducted by the National Center for Immunization and Respiratory Diseases (NCIRD) of the Centers for Disease Control and Prevention (CDC) and authorized by the Public Health Service Act [Sections 306].

National Immunization Surveys 2019. Centers for Disease Control and Prevention. Available at cdc.gov/breastfeeding/data/nis_data/results.html. Accessed on 08/19/2019.

National Survey of Children's Health (NSCH): The NSCH provides rich data on multiple, intersecting aspects of children's lives—including physical and mental health, access to quality health care, and the child's family, neighborhood, school, and social context. It collects data from parents about the health of their children via mail and internet.

Child and Adolescent Health Measurement Initiative. 2016–2017 National Survey of Children's Health (NSCH) data query. Data Resource Center for Child and Adolescent Health supported by Cooperative Agreement U59MC27866 from the U.S. Department of Health and Human Services, Health Resources and Services Administration's Maternal and Child Health Bureau (HRSA MCHB). Available at **childhealthdata.org**. Accessed on 08/19/2019.

North Carolina Child Health Assessment and Monitoring Program (NC CHAMP): Eligible children for th NC CHAMP survey are drawn each month from the NC BRFSS. All adult respondents with children living in their households are invited to participate. One child is randomly selected from the household, and the adult most knowledgeable about the health of the selected child is interviewed in a follow-up telephone survey.

North Carolina Child Health Assessment and Monitoring Program (NC CHAMP). North Carolina State Center for Health Statistics. 2016–2017. North Carolina Department of Health and Human Services, Division of Public Health. Available at schs.dph.ncdhhs.gov/data/champ. Accessed on 08/19/2019.

School Health Profiles (Profiles): The School Health Profiles is a system of surveys assessing school health policies and practices. Nationally, it is coordinated by the Centers for Disease Control and Prevention (CDC) through the Division of Adolescent and School Health (DASH).

NC School Health Profiles (NC Profiles): The NC School Health Profiles survey is conducted by NC Healthy Schools. Surveys are conducted biennially among middle and high school principals and lead health education teachers. The data in this report come specifically from the NC School Health Profiles.

NC Department of Public Instruction, NC Healthy Schools. North Carolina School Health Profiles. Available at nchealthyschools.org/data/profiles. Accessed on 08/19/2019.

Youth Risk Behavior Surveillance System (YRBSS): The YRBSS includes national, state, territorial, tribal government, and local school-based surveys of representative samples of 9th through 12th grade students. These surveys are conducted every two years, usually during the spring semester. The national survey is conducted by the Centers for Disease Control and Prevention (CDC), through its Division of Adolescent and School Health (DASH).

NC Youth Risk Behavior Survey (NC YRBS): The North Carolina Youth Risk Behavior Survey is conducted by NC Healthy Schools. The data in this report come specifically from the NC YRBS.

NC Department of Public Instruction, NC Healthy Schools. North Carolina Youth Risk Behavior Survey (YRBS). Available at nchealthyschools.org/data/yrbs. Accessed on 08/19/2019.

References

American Academy of Pediatrics. Breastfeeding and the use of human milk. Pediatrics. 2012; 129(3). DOI: 10.1542/peds. 2011-3552. Accessed on 8/19/2019.

Baby-Friendly USA. Available at **babyfriendlyusa.org**. Alphabetical listing of Baby-Friendly facilities in North Carolina available at **babyfriendlyusa.org/for-parents/baby-friendly-facilities-by-state**. Accessed on 08/19/2019.

CDC Fruit and Vegetable Indicator Report 2018: Centers for Disease Control and Prevention (CDC). *State Indicator Report on Fruits and Vegetables, 2018.* Atlanta, GA: Centers for Disease Control and Prevention, U.S. Department of Health and Human Services; 2018. Available at cdc.gov/nutrition/downloads/fruits-vegetables/2018/2018-fruit-vegetable-report-508.pdf. Accessed on 08/19/2019.

Dietary Guidelines for Americans: U.S. Department of Health and Human Services and U.S. Department of Agriculture. 2015–2020 Dietary Guidelines for Americans. 8th Edition. December 2015. Available at health.gov/dietaryguidelines/2015/guidelines. Accessed on 08/19/2019.

NC Breastfeeding-Friendly Child Care Designation. North Carolina Department of Health and Human Services, Division of Public Health. Available at **nutritionnc.com/breastfeeding/bf-childcare.htm**. Accessed on 08/19/2019.

NC Maternity Center Breastfeeding-Friendly Designation Program. North Carolina Department of Health and Human
Services, Division of Public Health. Available at **nutritionnc.com/ breastfeeding/bf-mat-center.htm**. Accessed on 08/19/2019.

Physical Activity Guidelines for Americans: U.S. Department of Health and Human Services. Physical Activity Guidelines for Americans, 2nd edition. Washington, DC: U.S. Department of Health and Human Services; 2018. Available at health.gov/paguidelines/second-edition. Accessed on 08/19/2019.

Data Review Team

Jenni Albright, MPH, RDN, LDN Eat Smart, Move More NC Coordinator

Catherine Hill, MS, RDN, LDN
Healthy Eating and Communications Coordinator
NC Division of Public Health, Community and
Clinical Connections for Prevention and Health
Branch

Sam Hoeffler, MS
Data Analysis & Food Systems Associate
NC State University SNAP-Ed: Steps to Health

Essete Kebede, MPH, MA Lead Evaluator

NC Division of Public Health, Community and Clinical Connections for Prevention and Health Branch

Chiara Phillips, MS, RD, LDN, IBCLC State Breastfeeding Coordinator NC Division of Public Health, Nutrition Services Branch

Les Spell

Data and Policy Consultant NC Healthy Schools North Carolina Department of Public Instruction

