

New Report Finds Obesity Epidemic Increases, Mississippi Weighs in as Heaviest State
Experts recommend addressing obesity through health reform, national strategy.

Adult obesity rates increased in 23 states and did not decrease in a single state in the past year, according to *F as in Fat: How Obesity Policies Are Failing in America 2009*, a report released today by the Trust for America's Health (TFAH) and the Robert Wood Johnson Foundation (RWJF). In addition, the percentage of obese and overweight children is at or above 30 percent in 30 states.

“Our health care costs have grown along with our waist lines,” said Jeff Levi, Ph.D., executive director of TFAH. “The obesity epidemic is a big contributor to the skyrocketing health care costs in the United States. How are we going to compete with the rest of the world if our economy and workforce are weighed down by bad health?”

Mississippi had the highest rate of adult obesity at 32.5 percent, making it the fifth year in a row that the state topped the list. Four states now have rates above 30 percent, including Mississippi, West Virginia (31.2 percent), Alabama (31.1 percent) and Tennessee (30.2 percent). Eight of the 10 states with the highest percentage of obese adults are in the South. Colorado continued to have the lowest percentage of obese adults at 18.9 percent.

Adult obesity rates now exceed 25 percent in 31 states and exceed 20 percent in 49 states and Washington, D.C. Two-thirds of American adults are either obese or overweight. In 1991, no state had an obesity rate above 20 percent. In 1980, the national average for adult obesity was 15 percent. Sixteen states experienced an increase for the second year in a row, and 11 states experienced an increase for the third straight year.

Mississippi also had the highest rate of obese and overweight children (ages 10 to 17) at 44.4 percent. Minnesota and Utah had the lowest rate at 23.1 percent. Eight of the 10 states with the highest rates of obese and overweight children are in the South. Childhood obesity rates have more than tripled since 1980.

“Reversing the childhood obesity epidemic is a critical ingredient for delivering a healthier population and making health reform work,” said Risa Lavizzo-Mourey, M.D., M.B.A., RWJF president and CEO. “If we can prevent the current generation of young people from developing the serious and costly chronic conditions related to obesity, we can not only improve health and quality of life, but we can also save billions of dollars and make our health care systems more efficient and sustainable.”

The *F as in Fat* report contains rankings of state obesity rates and a review of federal and state government policies aimed at reducing or preventing obesity. Some additional key findings from *F as in Fat 2009* include:

- The current economic crisis could exacerbate the obesity epidemic. Food prices, particularly for more nutritious foods, are expected to rise, making it more difficult for families to eat healthy foods. At the same time, safety-net programs and services are becoming increasingly overextended as the numbers of unemployed, uninsured and underinsured continue to grow. In addition, due to the

- strain of the recession, rates of depression, anxiety and stress, which are linked to obesity for many individuals, also are increasing.
- Nineteen states now have nutritional standards for school lunches, breakfasts and snacks that are stricter than current USDA requirements. Five years ago, only four states had legislation requiring stricter standards.
 - Twenty-seven states have nutritional standards for competitive foods sold a la carte, in vending machines, in school stores or in school bake sales. Five years ago, only six states had nutritional standards for competitive foods.
 - Twenty states have passed requirements for body mass index (BMI) screenings of children and adolescents or have passed legislation requiring other forms of weight-related assessments in schools. Five years ago, only four states had passed screening requirements.
 - A recent analysis commissioned by TFAH found that the Baby Boomer generation has a higher rate of obesity compared with previous generations. As the Baby Boomer generation ages, obesity-related costs to Medicare and Medicaid are likely to grow significantly because of the large number of people in this population and its high rate of obesity. And, as Baby Boomers become Medicare-eligible, the percentage of obese adults age 65 and older could increase significantly. Estimates of the increase in percentage of obese adults range from 5.2 percent in New York to 16.3 percent in Alabama.

Key report recommendations for addressing obesity within health reform include:

- Ensuring every adult and child has access to coverage for preventive medical services, including nutrition and obesity counseling and screening for obesity-related diseases, such as type 2 diabetes;
- Increasing the number of programs available in communities, schools, and childcare settings that help make nutritious foods more affordable and accessible and provide safe and healthy places for people to engage in physical activity; and
- Reducing Medicare expenditures by promoting proven programs that improve nutrition and increase physical activity among adults ages 55 to 64.

The report also calls for a *National Strategy to Combat Obesity* that would define roles and responsibilities for federal, state and local governments and promote collaboration among businesses, communities, schools and families. It would seek to advance policies that

- Provide healthy foods and beverages to students at schools;
- Increase the availability of affordable healthy foods in all communities;
- Increase the frequency, intensity, and duration of physical activity at school;
- Improve access to safe and healthy places to live, work, learn, and play;
- Limit screen time; and
- Encourage employers to provide workplace wellness programs.

The full report with state rankings in all categories is available on TFAH's Web site at www.healthyamericans.org and RWJF's Web site at www.rwjf.org. The report was supported by a grant from RWJF.

State-by-State Adult Obesity Rankings

Note: 1 = Highest rate of adult obesity, 51 = lowest rate of adult obesity. Rankings are based on combining three years of data (2006-2008) from the U.S. Centers for Disease Control and Prevention's Behavioral Risk Factor Surveillance System to "stabilize" data for comparison purposes. This methodology, recommended by the CDC, compensates for any potential anomalies or usual changes due to the specific sample in any given year in any given state. States with a statistically significant ($p < 0.05$) increase for one year are noted with an asterisk (), states with statistically significant increases for two years in a row are noted with two asterisks (**), states with statistically significant increases for three years in a row are noted with three asterisks (***). Additional information about methodologies and confidence interval is available in the report. Adults with a body mass index, a calculation based on weight and height ratios, of 30 or higher are considered obese.*

1. Mississippi*** (32.5%); 2. Alabama* (31.2%); 3. West Virginia (31.1%); 4. Tennessee*** (30.2%); 5. South Carolina (29.7%); 6. Oklahoma*** (29.5%); 7. Kentucky (29.0%); 8. Louisiana (28.9%); 9. Michigan*** (28.8%) 10. (tie) Arkansas (28.6%) and Ohio* (28.6%); 12. North Carolina*** (28.3%); 13. Missouri (28.1%); 14. (tie) Georgia (27.9%) and Texas (27.9%); 16. Indiana (27.4%); 17. Delaware*** (27.3%); 18. (tie) Alaska (27.2%) and Kansas*** (27.2%) 20. (tie) Nebraska (26.9%) and South Dakota*** (26.9%); 22. (tie) Iowa (26.7%) and North Dakota* (26.7%) and Pennsylvania** 26.7%; 25. (tie) Maryland*** (26.0%) and Wisconsin (26.0%); 27. Illinois 25.9%; 28. (tie) Oregon (25.4%) and Virginia (25.4) and Washington*** (25.4%); 31. Minnesota (25.3%); 32. Nevada* 25.1%; 33. (tie) Arizona** (24.8%) and Idaho (24.8%); 35. Maine* (24.7%); 36. New Mexico*** (24.6%); 37. New York** (24.5%) 38. Wyoming (24.3%); 39. (tie) Florida* (24.1%) and New Hampshire (24.1%); 41. California (23.6%); 42. New Jersey (23.4%); 43. Montana** (22.7%); 44. Utah (22.5%); 45. District of Columbia (22.3%); 46. Vermont** (22.1%); 47. Hawaii* (21.8%); 48. Rhode Island (21.7%); 49. Connecticut (21.3%); 50. Massachusetts (21.2%); 51. Colorado (18.9%)

State-by-State Obese and Overweight Children Ages 10-17 Rankings

Note: 1 = Highest rate of childhood overweight, 51 = lowest. Rankings are based on the National Survey of Children's Health, a phone survey of parents with children ages 10-17 conducted in 2007 by the U.S. Department of Health and Human Services. Additional information about methodologies and confidence intervals is available in the report. Children with a body mass index, a calculation based on weight and height ratios, at or above the 95th percentile for their age are considered obese and children at or above the 85th percentile are considered overweight. States with statistically significant ($p < 0.05$) increases in combined obesity and overweight since the NSCH was last issued in 2003 are noted with an asterisk ().*

1. Mississippi* (44.4%); 2. Arkansas (37.5%); 3. Georgia (37.3%); 4. Kentucky (37.1%) 5. Tennessee (36.5%) 6. Alabama (36.1%); 7. Louisiana (35.9%); 8. West Virginia (35.5%); 9. District of Columbia (35.4%); 10. Illinois (34.9%); 11. Nevada* (34.2%); 12. Alaska (33.9%); 13. South Carolina (33.7%); 14. North Carolina (33.5%); 15. Ohio (33.3%); 16. Delaware (33.2%); 17. Florida (33.1%); 18. New York (32.9%); 19. New Mexico (32.7%) 20. Texas (32.2%) 21. Nebraska (31.5%); 22. Kansas (31.1%); 23. (tie) Missouri (31.0%) and New Jersey (31.0%) and Virginia (31.0%); 26. (tie) Arizona (30.6%) and Michigan (30.6%); 28. California (30.5%); 29. Rhode Island (30.1%); 30. Massachusetts (30.0%) 31. Indiana (29.9%) 32.

Pennsylvania (29.7%); 33. (tie) Oklahoma (29.5%) and Washington (29.5%); 35. New Hampshire (29.4%); 36. Maryland (28.8%); 37. Hawaii (28.5%); 38. South Dakota (28.4%); 39. Maine (28.2%); 40. Wisconsin (27.9%); 41. Idaho (27.5%); 42. Colorado (27.2%); 43. Vermont (26.7%); 44. Iowa (26.5%); 45. (tie) Connecticut (25.7%) and North Dakota (25.7%) and Wyoming (25.7%); 48. Montana (25.6%); 49. Oregon (24.3%); 50. (tie) Minnesota (23.1%) and Utah (23.1%)

Trust for America's Health is a non-profit, non-partisan organization dedicated to saving lives by protecting the health of every community and working to make disease prevention a national priority. www.healthyamericans.org

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