

CHAPTER 29

Nutrition and Weight Status (NWS)

Lead Agencies

Centers for Disease Control and Prevention
Food and Drug Administration
National Institutes of Health

Contents

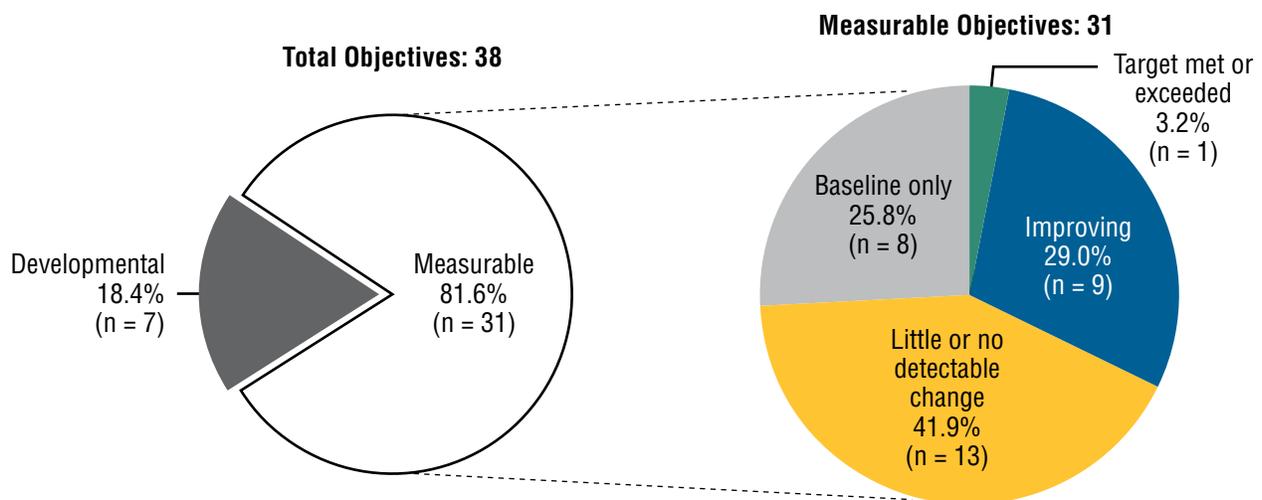
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Goal: Promote health and reduce chronic disease risk through the consumption of healthful diets and achievement and maintenance of healthy body weights.

This chapter includes objectives that monitor access to healthier foods, weight reduction and nutritional counseling in health care and worksite settings, weight status, food insecurity, food and nutrient consumption, and iron deficiency. The *Reader's Guide* provides a step-by-step explanation of the content of this chapter, including criteria for highlighting objectives in the Selected Findings.¹

Status of Objectives

Figure 29–1. Midcourse Status of the Nutrition and Weight Status Objectives



Of the 38 objectives in the Nutrition and Weight Status Topic Area, 7 were developmental² and 31 were measurable³ (Figure 29–1, Table 29–1). The midcourse status of the measurable objectives was as follows (Table 29–2):

- 1 objective had met or exceeded its 2020 target,⁴
- 9 objectives were improving,⁵
- 13 objectives had demonstrated little or no detectable change,⁶ and
- 8 objectives had baseline data only.⁷

Selected Findings

Healthier Food Access

One of the four measurable objectives monitoring healthier food access had achieved its 2020 target, two had improved, and one had baseline data only (Table 29–2).

- The proportion of **public and private elementary, middle, and high schools that did not offer calorically sweetened beverages to their students** (NWS-2.1) increased from 9.3% in 2006 to 25.6% in 2014, exceeding the 2020 target (Table 29–2).
- The proportion of **school districts that required schools to offer fruits or vegetables to students** (NWS-2.2) increased from 6.6% in 2006 to 9.6% in 2012, moving toward the 2020 target (Table 29–2).
- The number of **states that had state-level policies to incentivize food retail outlets to provide foods encouraged by the Dietary Guidelines for Americans** (NWS-3) increased from 8 states in 2009 to 10 states in 2011, moving toward the 2020 target (Table 29–2).

Health Care and Worksite Settings

Three of the five measurable objectives monitoring health care and worksite settings demonstrated little or no detectable change; data beyond the baseline were not available for the remaining two objectives (Table 29–2).

- Between 2007 and 2010, there was little or no detectable change in the age-adjusted proportion of **physician office visits by adults aged 20 and over with cardiovascular disease, diabetes, or hyperlipidemia that included diet or nutrition counseling** (NWS-6.1: 20.8% and 19.1%); in the age-adjusted proportion of **physician office visits by adults aged 20 and over with obesity that included weight reduction, nutrition, or physical activity counseling** (NWS-6.2: 28.9% and 28.0%); or in the age-adjusted proportion of **physician office visits by children and adults that included nutrition and diet counseling** (NWS-6.3: 12.2% and 13.8%) (Table 29–2).
 - » In 2010, the disparities by sex, race and ethnicity, and provider’s geographic location in the age-adjusted proportion of physician office visits by adults aged 20 and over with cardiovascular disease, diabetes, or hyperlipidemia that included diet or nutrition counseling (NWS-6.1) were not statistically significant (Table 29–3).
 - » In 2010, the disparities by sex, race and ethnicity, and provider’s geographic location in the age-adjusted proportion of physician office visits by adults aged 20 and over with obesity that included weight reduction, nutrition, or physical activity counseling (NWS-6.2) were not statistically significant (Table 29–3).
 - » In 2010, the disparities by sex, race and ethnicity, and provider’s geographic location in the age-adjusted proportion of physician office visits by children and adults that included nutrition and diet counseling (NWS-6.3) were not statistically significant (Table 29–3).

Weight Status

All six of the measurable objectives monitoring weight status demonstrated little or no detectable change (Table 29–2).

- There was little or no detectable change between 2005–2008 and 2009–2012 in the age-adjusted proportion of **adults aged 20 and over who had a healthy weight** (NWS-8: 30.8% and 29.5%) (Table 29–2).
 - » In 2009–2012, there were statistically significant disparities by sex, race and ethnicity, education, family income, and activity limitations in the age-adjusted proportion of adults who had a healthy weight (Table 29–3, NWS-8).
- From 2005–2008 to 2009–2012, there was little or no detectable change in the age-adjusted proportion of

adults aged 20 and over with obesity (NWS-9: 33.9% and 35.3%) (Table 29–2).

- » In 2013, age-adjusted self-reported obesity⁸ rates for adults aged 20 and over varied by state. States with the lowest adult obesity rates were in the West and Northeast (Map 29–1).
- » In 2009–2012, there were statistically significant disparities by race and ethnicity, education, family income, and activity limitations in the age-adjusted proportion of adults with obesity (NWS-9). The disparity by sex was not statistically significant (Table 29–3).
- There was little or no detectable change between 2005–2008 and 2009–2012 in the proportion of **children aged 2–5 years with obesity** (NWS-10.1: 10.4% and 10.2%); of **children aged 6–11 years with obesity** (NWS-10.2: 17.4% and 17.9%); of **adolescents aged 12–19 with obesity** (NWS-10.3: 17.9% and 19.4%); and of **children and adolescents aged 2–19 years with obesity** (NWS-10.4: 16.1% and 16.9%) (Table 29–2).
 - » In 2009–2012, there were statistically significant disparities by sex and race and ethnicity in the proportion of children aged 2–5 years with obesity (NWS-10.1). The disparity by family income was not statistically significant (Table 29–3).
 - » In 2009–2012, there were statistically significant disparities by race and ethnicity and family income in the proportion of children aged 6–11 years with obesity (NWS-10.2). The disparity by sex was not statistically significant (Table 29–3).
 - » In 2009–2012, there was a statistically significant disparity by race and ethnicity in the proportion of adolescents aged 12–19 with obesity (NWS-10.3). The disparities by sex and family income were not statistically significant (Table 29–3).
 - » In 2009–2012, there were statistically significant disparities by race and ethnicity and family income in the proportion of children and adolescents aged 2–19 with obesity (NWS-10.4). The disparity by sex was not statistically significant (Table 29–3).

Food Insecurity

One of the two measurable objectives monitoring food insecurity⁹ had improved, and one demonstrated little or no detectable change (Table 29–2).

- The proportion of **U.S. households with very low food security among children in the past 12 months** (NWS-12) declined from 1.3% in 2008 to 0.9% in 2013, moving toward the 2020 target (Table 29–2).

- » In 2013, there were statistically significant disparities by race and ethnicity of the household reference person, education of the most highly educated adult, and family income in the proportion of U.S. households with very low food security among children in the past 12 months (NWS-12). The disparity by geographic location was not statistically significant (Table 29–3).
- There was little or no detectable change in the proportion of **households with food insecurity in the past 12 months** (NWS-13: 14.6% in 2008 and 14.3% in 2013) (Table 29–2).
 - » In 2011–2013, no state had achieved the national target for the proportion of households reporting food insecurity in the past 12 months (Map 29–2, NWS-13).
 - » In 2013, there were statistically significant disparities by race and ethnicity of the household reference person, education of the most highly educated adult, and family income in the proportion of U.S. households with food insecurity in the past 12 months (NWS-13). The disparity by geographic location was not statistically significant (Table 29–3).
- » family income, and disability status in the mean daily intake of total vegetables (Table 29–3, NWS-15.1).
- » In 2009–2012, there were statistically significant disparities by sex, race and ethnicity, education, family income, and disability status in the mean daily intake of dark green vegetables, red and orange vegetables, and beans and peas (Table 29–3, NWS-15.2).
- The age-adjusted **mean daily intake of whole grains by persons aged 2 years and over** (NWS-16) increased from 0.34 ounce equivalents per 1,000 calories in 2005–2008 to 0.44 in 2009–2012, moving toward the 2020 target (Table 29–2).
 - » In 2009–2012, there were statistically significant disparities by sex, race and ethnicity, education, and family income in the age-adjusted mean daily intake of whole grains (NWS-16). The disparity by disability status was not statistically significant (Table 29–3).
- From 2005–2008 to 2009–2012, in persons aged 2 years and over, the age-adjusted **mean percent of total daily calorie intake from solid fats** (NWS-17.1) decreased from 16.6% to 15.2%; the age-adjusted **mean percent of total daily calorie intake from added sugars** (NWS-17.2) decreased from 15.1% to 14.4%; the age-adjusted **mean percent of total daily calorie intake from solid fats and added sugars** (NWS-17.3) decreased from 31.7% to 29.6%; and the age-adjusted **mean percent of total daily calorie intake from saturated fats** (NWS-18) decreased from 11.3% to 10.8%, moving toward their respective 2020 targets (Table 29–2).
 - » In 2009–2012, there were statistically significant disparities by race and ethnicity, education, and disability status in the age-adjusted mean percent of total daily calorie intake from solid fats (NWS-17.1). The disparities by sex and family income were not statistically significant (Table 29–3).
 - » In 2009–2012, there were statistically significant disparities by race and ethnicity, education, family income, and disability status in the age-adjusted mean percent of total daily calorie intake from added sugars (NWS-17.2). The disparity by sex was not statistically significant (Table 29–3).
 - » In 2009–2012, there were statistically significant disparities by race and ethnicity, education, family income, and disability status in the age-adjusted mean percent of total daily calorie intake from solid fats and added sugars (NWS-17.1). The disparity by sex was not statistically significant (Table 29–3).

Food and Nutrient Consumption

Six of the 10 measurable objectives monitoring food and nutrient consumption had improved, 3 demonstrated little or no detectable change, and data beyond the baseline were not available for the remaining objective (Table 29–2).

- There was little or no detectable change between 2005–2008 and 2009–2012 in the age-adjusted **mean daily intake of fruits by persons aged 2 years and over** (NWS-14: 0.53 and 0.56 cup equivalents per 1,000 calories); in the age-adjusted **mean daily intake of total vegetables by persons aged 2 years and over** (NWS-15.1: 0.76 and 0.77 cup equivalents per 1,000 calories); or in the age-adjusted **mean daily intake of dark green vegetables, red and orange vegetables, and beans and peas by persons aged 2 years and over** (NWS-15.2: 0.29 and 0.30 cup equivalents per 1,000 calories) (Table 29–2).
 - » In 2009–2012, there were statistically significant disparities by sex, race and ethnicity, education, and family income in the mean daily intake of fruits (NWS-14). The disparity by disability status was not statistically significant (Table 29–3).
 - » In 2009–2012, there were statistically significant disparities by sex, race and ethnicity, education,

- » In 2009–2012, there were statistically significant disparities by race and ethnicity and education in the age-adjusted mean percent of total daily calorie intake from saturated fats (NWS-18). The disparities by sex, family income, and disability status were not statistically significant (Table 29–3).
- Data beyond the baseline were not available for the age-adjusted **mean daily total sodium intake by persons aged 2 years and over** (NWS-19) (3,658 mg in 2009–2012), so progress toward the 2020 target could not be assessed (Table 29–2).
 - » In 2009–2012, there were statistically significant disparities by sex, race and ethnicity, family income, and disability status in the age-adjusted mean total sodium intake (NWS-19). The disparity by education was not statistically significant (Table 29–3).
- The age-adjusted **mean total daily calcium intake by persons aged 2 years and over** (NWS-20) increased from 1,099 mg in 2005–2008 to 1,143 mg in 2009–2012, moving toward the 2020 target (Table 29–2).
 - » In 2009–2012, there were statistically significant disparities by sex, race and ethnicity, education, and family income in the age-adjusted mean total daily calcium intake (NWS-20). The disparity by disability status was not statistically significant (Table 29–3).

Iron Deficiency

Data beyond the baseline were not available for the four measurable objectives monitoring iron deficiency, so progress toward the 2020 targets could not be assessed (Table 29–2).

- In 2005–2008, the proportion of **children aged 1–2 years who experienced iron deficiency** (NWS-21.1) was 15.9% and the proportion of **females aged 12–49 who had iron deficiency** (NWS-21.3) was 10.5% (Table 29–2).
 - » In 2005–2008, there was a statistically significant disparity by family income in the proportion of children aged 1–2 years with iron deficiency (NWS-21.1). The disparity by race and ethnicity was not statistically significant (Table 29–3).
 - » In 2005–2008, there were statistically significant disparities by race and ethnicity and family income in the proportion of females aged 12–49 with iron deficiency (NWS-21.3). The disparities by education and disability status were not statistically significant (Table 29–3).
- In 2003–2006, the proportion of **pregnant females with iron deficiency** (NWS-22) was 16.1% (Table 29–2).
 - » In 2003–2006, there were statistically significant disparities by race and ethnicity and family income in the proportion of pregnant females with iron deficiency (NWS-22). The disparity by education was not statistically significant (Table 29–3).

More Information

Readers interested in more detailed information about the objectives in this topic area are invited to visit the [HealthyPeople.gov](http://www.healthypeople.gov) website, where extensive substantive and technical information is available:

- For the background and importance of the topic area, see: <https://www.healthypeople.gov/2020/topics-objectives/topic/nutrition-and-weight-status>
- For data details for each objective, including definitions, numerators, denominators, calculations, and data limitations, see: <https://www.healthypeople.gov/2020/topics-objectives/topic/nutrition-and-weight-status/objectives>
Select an objective, then click on the “Data Details” icon.
- For objective data by population group (e.g., sex, race and ethnicity, or family income), including rates, percentages, or counts for multiple years, see: <https://www.healthypeople.gov/2020/topics-objectives/topic/nutrition-and-weight-status/objectives>
Select an objective, then click on the “Data2020” icon.

Data for the measurable objectives in this chapter were from the following data sources:

- Behavioral Risk Factor Surveillance System: <http://www.cdc.gov/brfss/>
- Current Population Survey-Food Security Supplement: <http://www.ers.usda.gov/data-products/food-security-in-the-united-states.aspx>
- National Ambulatory Medical Care Survey: <http://www.cdc.gov/nchs/ahcd.htm>
- National Health and Nutrition Examination Survey: <http://www.cdc.gov/nchs/nhanes.htm>
- National Resource Center for Health and Safety in Child Care and Early Education: <http://nrckids.org/>
- National Survey of Energy Balance-related Care among Primary Care Physicians: http://healthcaredelivery.cancer.gov/energy_balance/
- School Health Policies and Practices Study: <http://www.cdc.gov/healthyyouth/data/shpps/index.htm>

- State Indicator Report on Fruits and Vegetables: <http://www.cdc.gov/nutrition/downloads/State-Indicator-Report-Fruits-Vegetables-2013.pdf>

Footnotes

¹The **Technical Notes** provide more information on Healthy People 2020 statistical methods and issues.

²**Developmental** objectives did not have a national baseline value.

³**Measurable** objectives had a national baseline value.

⁴**Target met or exceeded**—One of the following, as specified in the Midcourse Progress Table:

- » At baseline the target was not met or exceeded and the midcourse value was equal to or exceeded the target. (The percentage of targeted change achieved was equal to or greater than 100%.)
- » The baseline and midcourse values were equal to or exceeded the target. (The percentage of targeted change achieved was not assessed.)

⁵**Improving**—One of the following, as specified in the Midcourse Progress Table:

- » Movement was toward the target, standard errors were available, and the percentage of targeted change achieved was statistically significant.
- » Movement was toward the target, standard errors were not available, and the objective had achieved 10% or more of the targeted change.

⁶**Little or no detectable change**—One of the following, as specified in the Midcourse Progress Table:

- » Movement was toward the target, standard errors were available, and the percentage of targeted change achieved was not statistically significant.
- » Movement was toward the target, standard errors were not available, and the objective had achieved less than 10% of the targeted change.
- » Movement was away from the baseline and target, standard errors were available, and the percentage change relative to the baseline was not statistically significant.
- » Movement was away from the baseline and target, standard errors were not available, and the objective had moved less than 10% relative to the baseline.
- » There was no change between the baseline and the midcourse data point.

⁷**Baseline only**—The objective only had one data point, so progress toward target attainment could not be assessed.

⁸The obesity rates shown for states in the map are based on self-reported weight and height and are from the Behavioral Risk Factor Surveillance System. The national data for NWS-9 are based on measured weight and height from the National Health and Nutrition Examination Survey and are the basis for setting the national target. National and state data may not be directly comparable, and therefore the national target may not be applicable to the state data.

⁹Food insecurity results from inadequate household resources. Very low food security among children is a severe range of food insecurity in which children's eating patterns are disrupted and food intake is reduced below levels considered adequate by the adult respondent.

Suggested Citation

National Center for Health Statistics. Chapter 29: Nutrition and Weight Status. Healthy People 2020 Midcourse Review. Hyattsville, MD. 2016.

Table 29–1. Nutrition and Weight Status Objectives

LEGEND



Data for this objective are available in this chapter's Midcourse Progress Table.



Disparities data for this objective are available, and this chapter includes a Midcourse Health Disparities Table.



A state or county level map for this objective is available at the end of the chapter.

Not Applicable

Midcourse data availability is not applicable for developmental and archived objectives. **Developmental** objectives did not have a national baseline value. **Archived** objectives are no longer being monitored due to lack of data source, changes in science, or replacement with other objectives.

| Objective Number | Objective Statement | Data Sources | Midcourse Data Availability |
|--|---|---|-----------------------------|
| Healthier Food Access | | | |
| NWS-1 | Increase the number of states with nutrition standards for foods and beverages provided to preschool-aged children in child care | National Resource Center for Health and Safety in Child Care and Early Education; State Child Care Licensing Websites | |
| NWS-2.1 | Increase the proportion of schools that do not sell or offer calorically sweetened beverages to students | School Health Policies and Practices Study (SHPPS), CDC/NCHHSTP | |
| NWS-2.2 | Increase the proportion of school districts that require schools to make fruits or vegetables available whenever other food is offered or sold | School Health Policies and Practices Study (SHPPS), CDC/NCHHSTP | |
| NWS-3 | Increase the number of states that have state-level policies that incentivize food retail outlets to provide foods that are encouraged by the Dietary Guidelines for Americans | State Indicator Report on Fruits and Vegetables, CDC | |
| NWS-4 | (Developmental) Increase the proportion of Americans who have access to a food retail outlet that sells a variety of foods that are encouraged by the Dietary Guidelines for Americans | To be determined | Not Applicable |
| Health Care and Worksite Settings | | | |
| NWS-5.1 | Increase the proportion of primary care physicians who regularly assess body mass index (BMI) in their adult patients | National Survey of Energy Balance-related Care among Primary Care Physicians, FDA and NIH/NCI/APR | |
| NWS-5.2 | Increase the proportion of primary care physicians who regularly assess body mass index (BMI) for age and sex in their child or adolescent patients | National Survey of Energy Balance-related Care among Primary Care Physicians, FDA and NIH/NCI/APR | |
| NWS-6.1 | Increase the proportion of physician office visits made by patients with a diagnosis of cardiovascular disease, diabetes, or hyperlipidemia that include counseling or education related to diet or nutrition | National Ambulatory Medical Care Survey (NAMCS), CDC/NCHS | |
| NWS-6.2 | Increase the proportion of physician office visits made by adult patients who are obese that include counseling or education related to weight reduction, nutrition, or physical activity | National Ambulatory Medical Care Survey (NAMCS), CDC/NCHS | |

Table 29–1. Nutrition and Weight Status Objectives—Continued

LEGEND

| | | | | | |
|--|---|---|--|---|--|
|  | Data for this objective are available in this chapter's Midcourse Progress Table. |  | Disparities data for this objective are available, and this chapter includes a Midcourse Health Disparities Table. |  | A state or county level map for this objective is available at the end of the chapter. |
|--|---|---|--|---|--|

Not Applicable Midcourse data availability is not applicable for developmental and archived objectives. **Developmental** objectives did not have a national baseline value. **Archived** objectives are no longer being monitored due to lack of data source, changes in science, or replacement with other objectives.

| Objective Number | Objective Statement | Data Sources | Midcourse Data Availability |
|--|--|---|---|
| Health Care and Worksite Settings—Continued | | | |
| NWS-6.3 | Increase the proportion of physician office visits made by all child or adult patients that include counseling about nutrition or diet | National Ambulatory Medical Care Survey (NAMCS), CDC/NCHS |   |
| NWS-7 | (Developmental) Increase the proportion of worksites that offer nutrition or weight management classes or counseling | To be determined | Not Applicable |
| Weight Status | | | |
| NWS-8 | Increase the proportion of adults who are at a healthy weight | National Health and Nutrition Examination Survey (NHANES), CDC/NCHS |   |
| NWS-9 | Reduce the proportion of adults who are obese | National Health and Nutrition Examination Survey (NHANES), CDC/NCHS |    |
| NWS-10.1 | Reduce the proportion of children aged 2 to 5 years who are considered obese | National Health and Nutrition Examination Survey (NHANES), CDC/NCHS |   |
| NWS-10.2 | Reduce the proportion of children aged 6 to 11 years who are considered obese | National Health and Nutrition Examination Survey (NHANES), CDC/NCHS |   |
| NWS-10.3 | Reduce the proportion of adolescents aged 12 to 19 years who are considered obese | National Health and Nutrition Examination Survey (NHANES), CDC/NCHS |   |
| NWS-10.4 | Reduce the proportion of children and adolescents aged 2 to 19 years who are considered obese | National Health and Nutrition Examination Survey (NHANES), CDC/NCHS |   |
| NWS-11.1 | (Developmental) Prevent inappropriate weight gain in children aged 2 to 5 years | (Potential) National Health and Nutrition Examination Survey (NHANES), CDC/NCHS | Not Applicable |
| NWS-11.2 | (Developmental) Prevent inappropriate weight gain in children aged 6 to 11 years | (Potential) National Health and Nutrition Examination Survey (NHANES), CDC/NCHS | Not Applicable |
| NWS-11.3 | (Developmental) Prevent inappropriate weight gain in adolescents aged 12 to 19 years | (Potential) National Health and Nutrition Examination Survey (NHANES), CDC/NCHS | Not Applicable |

Table 29–1. Nutrition and Weight Status Objectives—Continued

LEGEND



Data for this objective are available in this chapter's Midcourse Progress Table.



Disparities data for this objective are available, and this chapter includes a Midcourse Health Disparities Table.



A state or county level map for this objective is available at the end of the chapter.

Not Applicable

Midcourse data availability is not applicable for developmental and archived objectives. **Developmental** objectives did not have a national baseline value. **Archived** objectives are no longer being monitored due to lack of data source, changes in science, or replacement with other objectives.

| Objective Number | Objective Statement | Data Sources | Midcourse Data Availability |
|--------------------------------------|---|---|-----------------------------|
| Weight Status—Continued | | | |
| NWS-11.4 | (Developmental) Prevent inappropriate weight gain in children and adolescents aged 2 to 19 years | (Potential) National Health and Nutrition Examination Survey (NHANES), CDC/NCHS | Not Applicable |
| NWS-11.5 | (Developmental) Prevent inappropriate weight gain in adults aged 20 years and older | (Potential) National Health and Nutrition Examination Survey (NHANES), CDC/NCHS | Not Applicable |
| Food Insecurity | | | |
| NWS-12 | Eliminate very low food security among children | Current Population Survey-Food Security Supplement (CPS-FSS), U.S. Census Bureau and Department of Agriculture, Economic Research Service (Census and USDA/ERS) | |
| NWS-13 | Reduce household food insecurity and in doing so reduce hunger | Current Population Survey-Food Security Supplement (CPS-FSS), U.S. Census Bureau and Department of Agriculture, Economic Research Service (Census and USDA/ERS) | |
| Food and Nutrient Consumption | | | |
| NWS-14 | Increase the contribution of fruits to the diets of the population aged 2 years and older | National Health and Nutrition Examination Survey (NHANES), CDC/NCHS | |
| NWS-15.1 | Increase the contribution of total vegetables to the diets of the population aged 2 years and older | National Health and Nutrition Examination Survey (NHANES), CDC/NCHS | |
| NWS-15.2 | Increase the contribution of dark green vegetables, red and orange vegetables, and beans and peas to the diets of the population aged 2 years and older | National Health and Nutrition Examination Survey (NHANES), CDC/NCHS | |
| NWS-16 | Increase the contribution of whole grains to the diets of the population aged 2 years and older | National Health and Nutrition Examination Survey (NHANES), CDC/NCHS | |
| NWS-17.1 | Reduce consumption of calories from solid fats | National Health and Nutrition Examination Survey (NHANES), CDC/NCHS | |
| NWS-17.2 | Reduce consumption of calories from added sugars | National Health and Nutrition Examination Survey (NHANES), CDC/NCHS | |

Table 29–1. Nutrition and Weight Status Objectives—Continued

LEGEND

| | | | | | |
|--|---|---|--|---|--|
|  | Data for this objective are available in this chapter's Midcourse Progress Table. |  | Disparities data for this objective are available, and this chapter includes a Midcourse Health Disparities Table. |  | A state or county level map for this objective is available at the end of the chapter. |
|--|---|---|--|---|--|

| | |
|----------------|---|
| Not Applicable | Midcourse data availability is not applicable for developmental and archived objectives. Developmental objectives did not have a national baseline value. Archived objectives are no longer being monitored due to lack of data source, changes in science, or replacement with other objectives. |
|----------------|---|

| Objective Number | Objective Statement | Data Sources | Midcourse Data Availability |
|--|--|---|---|
| Food and Nutrient Consumption—Continued | | | |
| NWS-17.3 | Reduce consumption of calories from solid fats and added sugars | National Health and Nutrition Examination Survey (NHANES), CDC/NCHS |   |
| NWS-18 | Reduce consumption of saturated fat in the population aged 2 years and older | National Health and Nutrition Examination Survey (NHANES), CDC/NCHS |   |
| NWS-19 | Reduce consumption of sodium in the population aged 2 years and older | National Health and Nutrition Examination Survey (NHANES), CDC/NCHS |   |
| NWS-20 | Increase consumption of calcium in the population aged 2 years and older | National Health and Nutrition Examination Survey (NHANES), CDC/NCHS |   |
| Iron Deficiency | | | |
| NWS-21.1 | Reduce iron deficiency among children aged 1 to 2 years | National Health and Nutrition Examination Survey (NHANES), CDC/NCHS |   |
| NWS-21.2 | Reduce iron deficiency among children aged 3 to 4 years | National Health and Nutrition Examination Survey (NHANES), CDC/NCHS |   |
| NWS-21.3 | Reduce iron deficiency among females aged 12 to 49 years | National Health and Nutrition Examination Survey (NHANES), CDC/NCHS |   |
| NWS-22 | Reduce iron deficiency among pregnant females | National Health and Nutrition Examination Survey (NHANES), CDC/NCHS |   |

Table 29–2. Midcourse Progress for Measurable¹ Nutrition and Weight Status Objectives

LEGEND

| | | | | | |
|--|--|--|--|---|---|
|  Target met or exceeded ^{2,3} |  Improving ^{4,5} |  Little or no detectable change ^{6–10} |  Getting worse ^{11,12} |  Baseline only ¹³ |  Informational ¹⁴ |
|--|--|--|--|---|---|

| Objective Description | Baseline Value (Year) | Midcourse Value (Year) | Target | Movement Toward Target ¹⁵ | Movement Away From Baseline ¹⁶ | Movement Statistically Significant ¹⁷ |
|--|-----------------------|------------------------|--------|--------------------------------------|---|--|
| Healthier Food Access | | | | | | |
|  ¹³ NWS-1 States with food and beverage nutrition standards for preschool children in child care (number of states and D.C.) | 24 (2006) | | 34 | | | |
|  ² NWS-2.1 Schools not offering calorically sweetened beverages (percent) | 9.3% (2006) | 25.6% (2014) | 21.3% | 135.8% | | Yes |
|  ⁴ NWS-2.2 School districts requiring schools to offer fruit and vegetables to students (percent) | 6.6% (2006) | 9.6% (2012) | 18.6% | 25.0% | | Yes |
|  ⁵ NWS-3 States with policies to incentivize food retail outlets to provide foods encouraged by the Dietary Guidelines for Americans (number) | 8 (2009) | 10 (2011) | 18 | 20.0% | | |
| Health Care and Worksite Settings | | | | | | |
|  ¹³ NWS-5.1 Primary care physicians assessing body mass index in adult patients aged 18 and over (percent) | 48.7% (2008) | | 53.6% | | | |
|  ¹³ NWS-5.2 Primary care physicians assessing body mass index in child or adolescent patients aged 2–17 years (percent) | 49.7% (2008) | | 54.7% | | | |
|  ⁸ NWS-6.1 Physician office visits for cardiovascular disease, diabetes, or hyperlipidemia that include diet and nutrition counseling (age-adjusted, percent, 20+ years) | 20.8% (2007) | 19.1% (2010) | 22.9% | | 8.2% | No |
|  ⁸ NWS-6.2 Physician office visits by adults with obesity that include weight reduction, nutrition, or physical activity counseling (age-adjusted, percent, 20+ years) | 28.9% (2007) | 28.0% (2010) | 31.8% | | 3.1% | No |
|  ⁶ NWS-6.3 Physician office visits by child or adult patients that include nutrition and diet counseling (age-adjusted, percent) | 12.2% (2007) | 13.8% (2010) | 15.2% | 53.3% | | No |

Table 29–2. Midcourse Progress for Measurable¹ Nutrition and Weight Status Objectives—Continued

| LEGEND | | | | | | | | | | | |
|--|---------------------------------------|---|--------------------------|---|--|---|--------------------------------|---|-----------------------------|---|-----------------------------|
|  | Target met or exceeded ^{2,3} |  | Improving ^{4,5} |  | Little or no detectable change ^{6–10} |  | Getting worse ^{11,12} |  | Baseline only ¹³ |  | Informational ¹⁴ |
| Objective Description | Baseline Value (Year) | Midcourse Value (Year) | Target | Movement Toward Target ¹⁵ | Movement Away From Baseline ¹⁶ | Movement Statistically Significant ¹⁷ | | | | | |
| Weight Status | | | | | | | | | | | |
|  ⁸ NWS-8 Healthy weight among adults (age-adjusted, percent, 20+ years) | 30.8% (2005–2008) | 29.5% (2009–2012) | 33.9% | | 4.2% | No | | | | | |
|  ⁸ NWS-9 Obesity among adults (age-adjusted, percent, 20+ years) | 33.9% (2005–2008) | 35.3% (2009–2012) | 30.5% | | 4.1% | No | | | | | |
|  ⁶ NWS-10.1 Obesity among children (percent, 2–5 years) | 10.4% (2005–2008) | 10.2% (2009–2012) | 9.4% | 20.0% | | No | | | | | |
|  ⁸ NWS-10.2 Obesity among children (percent, 6–11 years) | 17.4% (2005–2008) | 17.9% (2009–2012) | 15.7% | | 2.9% | No | | | | | |
|  ⁸ NWS-10.3 Obesity among adolescents (percent, 12–19 years) | 17.9% (2005–2008) | 19.4% (2009–2012) | 16.1% | | 8.4% | No | | | | | |
|  ⁸ NWS-10.4 Obesity among children and adolescents (percent, 2–19 years) | 16.1% (2005–2008) | 16.9% (2009–2012) | 14.5% | | 5.0% | No | | | | | |
| Food Insecurity | | | | | | | | | | | |
|  ⁴ NWS-12 Very low food security among children in the past 12 months (percent of households) | 1.3% (2008) | 0.9% (2013) | 0.2% | 36.4% | | Yes | | | | | |
|  ⁶ NWS-13 Households with food insecurity in the past 12 months (percent) | 14.6% (2008) | 14.3% (2013) | 6.0% | 3.5% | | No | | | | | |
| Food and Nutrient Consumption | | | | | | | | | | | |
|  ⁶ NWS-14 Mean daily intake of fruits (age-adjusted, cup equivalents per 1,000 calories, 2+ years) | 0.53 (2005–2008) | 0.56 (2009–2012) | 0.93 | 7.5% | | No | | | | | |
|  ⁶ NWS-15.1 Mean daily intake of total vegetables (age-adjusted, cup equivalents per 1,000 calories, 2+ years) | 0.76 (2005–2008) | 0.77 (2009–2012) | 1.16 | 2.5% | | No | | | | | |
|  ⁶ NWS-15.2 Mean daily intake of dark green vegetables, red and orange vegetables, and beans and peas (age-adjusted, cup equivalents per 1,000 calories, 2+ years) | 0.29 (2005–2008) | 0.30 (2009–2012) | 0.53 | 4.2% | | No | | | | | |
|  ⁴ NWS-16 Mean daily intake of whole grains (age-adjusted, ounce equivalents per 1,000 calories, 2+ years) | 0.34 (2005–2008) | 0.44 (2009–2012) | 0.66 | 31.3% | | Yes | | | | | |

Table 29–2. Midcourse Progress for Measurable¹ Nutrition and Weight Status Objectives—Continued

| LEGEND | | | | | | | | | | | |
|--|---------------------------------------|---|--------------------------|---|--|---|--------------------------------|---|-----------------------------|---|-----------------------------|
|  | Target met or exceeded ^{2,3} |  | Improving ^{4,5} |  | Little or no detectable change ^{6–10} |  | Getting worse ^{11,12} |  | Baseline only ¹³ |  | Informational ¹⁴ |
| Objective Description | Baseline Value (Year) | Midcourse Value (Year) | Target | Movement Toward Target ¹⁵ | Movement Away From Baseline ¹⁶ | Movement Statistically Significant ¹⁷ | | | | | |
| Food and Nutrient Consumption—Continued | | | | | | | | | | | |
|  ⁴ NWS-17.1 Mean percent of total daily calorie intake from solid fats (age-adjusted, 2+ years) | 16.6 (2005–2008) | 15.2 (2009–2012) | 14.2 | 58.3% | | Yes | | | | | |
|  ⁴ NWS-17.2 Mean percent of total daily calorie intake from added sugars (age-adjusted, 2+ years) | 15.1 (2005–2008) | 14.4 (2009–2012) | 9.7 | 13.0% | | Yes | | | | | |
|  ⁴ NWS-17.3 Mean percent of total daily calorie intake from solid fats and added sugars (age-adjusted, 2+ years) | 31.7 (2005–2008) | 29.6 (2009–2012) | 25.5 | 33.9% | | Yes | | | | | |
|  ⁴ NWS-18 Mean percent of total daily calorie intake from saturated fats (age-adjusted, 2+ years) | 11.3 (2005–2008) | 10.8 (2009–2012) | 9.9 | 35.7% | | Yes | | | | | |
|  ¹³ NWS-19 Mean total daily sodium intake (age-adjusted, mg, 2+ years) | 3,658 (2009–2012) | | 2,300 | | | | | | | | |
|  ⁴ NWS-20 Mean total daily calcium intake (age-adjusted, mg, 2+ years) | 1,099 (2005–2008) | 1,143 (2009–2012) | 1,384 | 15.4% | | Yes | | | | | |
| Iron Deficiency | | | | | | | | | | | |
|  ¹³ NWS-21.1 Iron deficiency in children (percent, 1–2 years) | 15.9% (2005–2008) | | 14.3% | | | | | | | | |
|  ¹³ NWS-21.2 Iron deficiency in children (percent, 3–4 years) | 5.3% (2005–2008) | | 4.3% | | | | | | | | |
|  ¹³ NWS-21.3 Iron deficiency in females (percent, 12–49 years) | 10.5% (2005–2008) | | 9.4% | | | | | | | | |
|  ¹³ NWS-22 Iron deficiency in pregnant females (percent) | 16.1% (2003–2006) | | 14.5% | | | | | | | | |

Table 29–2. Midcourse Progress for Measurable¹ Nutrition and Weight Status Objectives—Continued

| NOTES | DATA SOURCES |
|--|--|
| See HealthyPeople.gov for all Healthy People 2020 data. The Technical Notes provide more information on the measures of progress. | NWS-1 National Resource Center for Health and Safety in Child Care and Early Education; State Child Care Licensing Websites |
| FOOTNOTES | NWS-2.1 School Health Policies and Practices Study (SHPPS), CDC/NCHHSTP |
| ¹ Measurable objectives had a national baseline value. | NWS-2.2 School Health Policies and Practices Study (SHPPS), CDC/NCHHSTP |
| Target met or exceeded: | NWS-3 State Indicator Report on Fruits and Vegetables, CDC |
| ² At baseline the target was not met or exceeded and the midcourse value was equal to or exceeded the target. (The percentage of targeted change achieved was equal to or greater than 100%.) | NWS-5.1 National Survey of Energy Balance Related Care among Primary Care Physicians, FDA and NIH/NCI/APR |
| ³ The baseline and midcourse values were equal to or exceeded the target. (The percentage of targeted change achieved was not assessed.) | NWS-5.2 National Survey of Energy Balance Related Care among Primary Care Physicians, FDA and NIH/NCI/APR |
| ⁴ Movement was toward the target, standard errors were available, and the percentage of targeted change achieved was statistically significant. | NWS-6.1 National Ambulatory Medical Care Survey (NAMCS), CDC/NCHS |
| ⁵ Movement was toward the target, standard errors were not available, and the objective had achieved 10% or more of the targeted change. | NWS-6.2 National Ambulatory Medical Care Survey (NAMCS), CDC/NCHS |
| Improving: | NWS-6.3 National Ambulatory Medical Care Survey (NAMCS), CDC/NCHS |
| ⁶ Movement was away from the baseline and target, standard errors were available, and the percentage change relative to the baseline was not statistically significant. | NWS-8 National Health and Nutrition Examination Survey (NHANES), CDC/NCHS |
| ⁷ Movement was toward the target, standard errors were not available, and the objective had achieved less than 10% of the targeted change. | NWS-9 National Health and Nutrition Examination Survey (NHANES), CDC/NCHS |
| ⁸ Movement was away from the baseline and target, standard errors were available, and the percentage change relative to the baseline was not statistically significant. | NWS-10.1 National Health and Nutrition Examination Survey (NHANES), CDC/NCHS |
| ⁹ Movement was away from the baseline and target, standard errors were not available, and the objective had moved less than 10% relative to the baseline. | NWS-10.2 National Health and Nutrition Examination Survey (NHANES), CDC/NCHS |
| ¹⁰ There was no change between the baseline and the midcourse data point. | NWS-10.3 National Health and Nutrition Examination Survey (NHANES), CDC/NCHS |
| Getting worse: | NWS-10.4 National Health and Nutrition Examination Survey (NHANES), CDC/NCHS |
| ¹¹ Movement was away from the baseline and target, standard errors were available, and the percentage change relative to the baseline was statistically significant. | NWS-12 Current Population Survey–Food Security Supplement (CPS–FSS), U.S. Census Bureau and Department of Agriculture, Economic Research Service (Census and USDA/ERS) |
| ¹² Movement was away from the baseline and target, standard errors were not available, and the objective had moved 10% or more relative to the baseline. | NWS-13 Current Population Survey–Food Security Supplement (CPS–FSS), U.S. Census Bureau and Department of Agriculture, Economic Research Service (Census and USDA/ERS) |
| ¹³ Baseline only: The objective only had one data point, so progress toward target attainment could not be assessed. | NWS-14 National Health and Nutrition Examination Survey (NHANES), CDC/NCHS |
| ¹⁴ Informational: A target was not set for this objective, so progress toward target attainment could not be assessed. | NWS-15.1 National Health and Nutrition Examination Survey (NHANES), CDC/NCHS |
| ¹⁵ For objectives that moved toward their targets, movement toward the target was measured as the percentage of targeted change achieved (unless the target was already met or exceeded at baseline): | NWS-15.2 National Health and Nutrition Examination Survey (NHANES), CDC/NCHS |
| $\text{Percentage of targeted change achieved} = \frac{\text{Midcourse value} - \text{Baseline value}}{\text{HP2020 target} - \text{Baseline value}} \times 100$ | NWS-16 National Health and Nutrition Examination Survey (NHANES), CDC/NCHS |
| ¹⁶ For objectives that moved away from their baselines and targets, movement away from the baseline was measured as the magnitude of the percentage change from baseline: | NWS-17.1 National Health and Nutrition Examination Survey (NHANES), CDC/NCHS |
| $\text{Magnitude of percentage change from baseline} = \frac{ \text{Midcourse value} - \text{Baseline value} }{\text{Baseline value}} \times 100$ | NWS-17.2 National Health and Nutrition Examination Survey (NHANES), CDC/NCHS |
| ¹⁷ Statistical significance was tested when the objective had a target and at least two data points, standard errors of the data were available, and a normal distribution could be assumed. Statistical significance of the percentage of targeted change achieved or the magnitude of the percentage change from baseline was assessed at the 0.05 level using a normal one-sided test. | NWS-17.3 National Health and Nutrition Examination Survey (NHANES), CDC/NCHS |
| | NWS-18 National Health and Nutrition Examination Survey (NHANES), CDC/NCHS |
| | NWS-19 National Health and Nutrition Examination Survey (NHANES), CDC/NCHS |
| | NWS-20 National Health and Nutrition Examination Survey (NHANES), CDC/NCHS |
| | NWS-21.1 National Health and Nutrition Examination Survey (NHANES), CDC/NCHS |
| | NWS-21.2 National Health and Nutrition Examination Survey (NHANES), CDC/NCHS |
| | NWS-21.3 National Health and Nutrition Examination Survey (NHANES), CDC/NCHS |
| | NWS-22 National Health and Nutrition Examination Survey (NHANES), CDC/NCHS |

Table 29–3. Midcourse Health Disparities¹ for Population-based Nutrition and Weight Status Objectives—Continued

Most favorable (least adverse) and least favorable (most adverse) group rates and summary disparity ratios^{2,3} for selected characteristics at the midcourse data point

| LEGEND | | Characteristics and Groups | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|--|--|--|--------|--------------------------------------|--|-------|---|---|--------------------|------------------------|---|--------------------------------------|-----------------------|----------------------|----------------------------|--------------------|-----------------------|-----------------|--------------------------------------|----------|-----------|--------|-----------|------|--------------------------------------|---------------------------|------------------------------|--------------------------------------|--------------|-----------------|--------------------------------------|-------|
| At the midcourse data point | | Group with the most favorable (least adverse) rate | | | Group with the least favorable (most adverse) rate | | | Data are available, but this group did not have the highest or lowest rate. | | | Data are not available for this group because the data were statistically unreliable, not collected, or not analyzed. | | | | | | | | | | | | | | | | | | | | | |
| Population-based Objectives | | Sex | | Race and Ethnicity | | | | | | Education ⁴ | | | | | Family Income ⁵ | | | Disability | | Location | | | | | | | | | | | | |
| | | Male | Female | Summary Disparity Ratio ² | American Indian or Alaska Native | Asian | Native Hawaiian or other Pacific Islander | Two or more races | Hispanic or Latino | Black, not Hispanic | White, not Hispanic | Summary Disparity Ratio ³ | Less than high school | High school graduate | At least some college | Associate's degree | 4-year college degree | Advanced degree | Summary Disparity Ratio ³ | Poor | Near-poor | Middle | Near-high | High | Summary Disparity Ratio ³ | Persons with disabilities | Persons without disabilities | Summary Disparity Ratio ² | Metropolitan | Nonmetropolitan | Summary Disparity Ratio ² | |
| Weight Status—Continued | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| NWS-10.3 Obesity among adolescents (percent, 12–19 years) (2009–2012) | | | | 1.058 | | | | | | | 1.284* | | | | | | | | | | | | | | 1.617 | | | | | | | |
| NWS-10.4 Obesity among children and adolescents (percent, 2–19 years) (2009–2012) | | | | 1.096 | | | | | | | | 1.565* | | | | | | | | | | | | | 1.481* | | | | | | | |
| Food Insecurity | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| NWS-12 Very low food security among children in the past 12 months (percent of households) (2013) | | | | | | | | | | | | 2.808* | | | | | | | | 4.027* | | | | | | 2.086* | | | | | | 1.193 |
| NWS-13 Households with food insecurity in the past 12 months (percent) (2013) | | | | | | | | | | | | 2.912* | | | | | | | | 4.935* | | | | | 20.906* | | | | | | 1.065 | |
| Food and Nutrient Consumption | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| NWS-14 Mean daily intake of fruits (age-adjusted, cup equivalents per 1,000 calories, 2+ years) (2009–2012) | | | | 1.218* | | | | | | | 1.163* | | | | | | | | 1.397* | | | | | | 1.188* | | | | | | 1.047 | |
| NWS-15.1 Mean daily intake of total vegetables (age-adjusted, cup equivalents per 1,000 calories, 2+ years) (2009–2012) | | | | 1.160* | | | | | | | 1.115* | | | | | | | | 1.221* | | | | | | 1.091* | | | | | | 1.149* | |
| NWS-15.2 Mean daily intake of dark green vegetables, red and orange vegetables, and beans and peas (age-adjusted, cup equivalents per 1,000 calories, 2+ years) (2009–2012) | | | | 1.207* | | | | | | | 1.204* | | | | | | | | 1.364* | | | | | | 1.127* | | | | | | 1.165* | |

Table 29–3. Midcourse Health Disparities¹ for Population-based Nutrition and Weight Status Objectives—Continued

Most favorable (least adverse) and least favorable (most adverse) group rates and summary disparity ratios^{2,3} for selected characteristics at the midcourse data point

| Population-based Objectives | | Characteristics and Groups | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|--|--------|--------------------------------------|----------------------------------|--------------------|---|-------------------|--------------------|---------------------|---------------------|--------------------------------------|-----------------------|----------------------|-----------------------|--------------------|----------------------------|-----------------|--------------------------------------|--------|-----------|------------|-----------|----------|--------------------------------------|---------------------------|------------------------------|--------------------------------------|--------------|-----------------|--------------------------------------|
| | | Sex | | Race and Ethnicity | | | | | | Education ⁴ | | | | | Family Income ⁵ | | | | | Disability | | Location | | | | | | | |
| Male | Female | Summary Disparity Ratio ² | American Indian or Alaska Native | Asian | Native Hawaiian or other Pacific Islander | Two or more races | Hispanic or Latino | Black, not Hispanic | White, not Hispanic | Summary Disparity Ratio ³ | Less than high school | High school graduate | At least some college | Associate's degree | 4-year college degree | Advanced degree | Summary Disparity Ratio ³ | Poor | Near-poor | Middle | Near-high | High | Summary Disparity Ratio ³ | Persons with disabilities | Persons without disabilities | Summary Disparity Ratio ² | Metropolitan | Nonmetropolitan | Summary Disparity Ratio ² |
| NWS-16 Mean daily intake of whole grains (age-adjusted, ounce equivalents per 1,000 calories, 2+ years) (2009–2012) | | | | 1.139* | | | | | | | | 1.298* | | | | | | 1.514* | | | | | | 1.242* | | | 1.095 | | |
| NWS-17.1 Mean percent of total daily calorie intake from solid fats (age-adjusted, 2+ years) (2009–2012) | | | | 1.015 | | | | | | | | 1.070* | | | | | | 1.051* | | | | | | 1.018 | | | 1.039* | | |
| NWS-17.2 Mean percent of total daily calorie intake from added sugars (age-adjusted, 2+ years) (2009–2012) | | | | 1.026 | | | | | | | | 1.135* | | | | | | 1.347* | | | | | | 1.200* | | | 1.208* | | |
| NWS-17.3 Mean percent of total daily calorie intake from solid fats and added sugars (age-adjusted, 2+ years) (2009–2012) | | | | 1.005 | | | | | | | | 1.101* | | | | | | 1.181* | | | | | | 1.100* | | | 1.120* | | |
| NWS-18 Mean percent of total daily calorie intake from saturated fats (age-adjusted, 2+ years) (2009–2012) | | | | 1.001 | | | | | | | | 1.047* | | | | | | 1.063* | | | | | | 1.013 | | | 1.004 | | |
| NWS-19 Mean total daily sodium intake (age-adjusted, mg, 2+ years) (2009–2012) | | | | 1.346* | | | | | | | | 1.037* | | | | | | 1.037 | | | | | | 1.037* | | | 1.042* | | |
| NWS-20 Mean total daily calcium intake (age-adjusted, mg, 2+ years) (2009–2012) | | | | 1.146* | | | | | | | | 1.213* | | | | | | 1.143* | | | | | | 1.155* | | | 1.035 | | |

Table 29–3. Midcourse Health Disparities¹ for Population-based Nutrition and Weight Status Objectives—Continued

Most favorable (least adverse) and least favorable (most adverse) group rates and summary disparity ratios^{2,3} for selected characteristics at the midcourse data point

| Population-based Objectives | | Characteristics and Groups | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|---|--------|--------------------------------------|----------------------------------|--------------------|---|-------------------|--------------------|---------------------|---------------------|--------------------------------------|-----------------------|----------------------|-----------------------|--------------------|-----------------------|----------------------------|--------------------------------------|------|-----------|------------|-----------|----------|--------------------------------------|---------------------------|------------------------------|--------------------------------------|--------------|-----------------|--------------------------------------|
| | | Sex | | Race and Ethnicity | | | | | | Education ⁴ | | | | | | Family Income ⁵ | | | | Disability | | Location | | | | | | | |
| Male | Female | Summary Disparity Ratio ² | American Indian or Alaska Native | Asian | Native Hawaiian or other Pacific Islander | Two or more races | Hispanic or Latino | Black, not Hispanic | White, not Hispanic | Summary Disparity Ratio ³ | Less than high school | High school graduate | At least some college | Associate's degree | 4-year college degree | Advanced degree | Summary Disparity Ratio ³ | Poor | Near-poor | Middle | Near-high | High | Summary Disparity Ratio ³ | Persons with disabilities | Persons without disabilities | Summary Disparity Ratio ² | Metropolitan | Nonmetropolitan | Summary Disparity Ratio ² |
| Iron Deficiency | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| NWS-21.1 Iron deficiency in children (percent, 1–2 years) (2005–2008) | | | | | | | | k | | 1.765 | | | | | | | | | | | | | | | | | | | |
| NWS-21.3 Iron deficiency in females (percent, 12–49 years) (2005–2008) | | | | | | | | k | | 1.907* | | | | b | | | 1.380 | | | | | | | | f | | g | | 1.142 |
| NWS-22 Iron deficiency in pregnant females (percent) (2003–2006) | | | | | | | | k | | 2.649* | | | | | | | 1.052 | | | | | | | | | | g | | |

Table 29–3. Midcourse Health Disparities¹ for Population-based Nutrition and Weight Status Objectives—Continued

NOTES

See [HealthyPeople.gov](https://www.healthypeople.gov) for all Healthy People 2020 data. The **Technical Notes** provide more information on the measures of disparities.

FOOTNOTES

¹**Health disparities** were assessed among population groups within specified demographic characteristics (sex, race and ethnicity, educational attainment, etc.). This assessment did not include objectives that were not population-based, such as those based on states, worksites, or those monitoring the number of events.

²When there were only two groups (e.g., male and female), the **summary disparity ratio** was the ratio of the higher to the lower rate.

³When there were three or more groups (e.g., white non-Hispanic, black non-Hispanic, Hispanic) and the most favorable rate (R_i) was the highest rate, the **summary disparity ratio** was calculated as R_i/R_a , where R_a = the average of the rates for all other groups. When there were three or more groups and the most favorable rate was the lowest rate, the summary disparity ratio was calculated as R_a/R_i .

⁴Unless otherwise footnoted, data do not include persons under age 25 years.

⁵Unless otherwise footnoted, the poor, near-poor, middle, near-high, and high income groups are for persons whose family incomes were less than 100%, 100%–199%, 200%–399%, 400%–599%, and at or above 600% of the poverty threshold, respectively.

^aLocation of the health care provider.

^bData are for persons who completed some college or received an associate's degree.

^cData are for persons who graduated from college or above.

^dData are for persons whose family income was 400% to 499% of the poverty threshold.

^eData are for persons whose family income was 500% or more of the poverty threshold.

^fData are for persons with activity limitations.

^gData are for persons without activity limitations.

^hRace/ethnicity of the reference person of the household.

ⁱEducation level of the most highly educated adult in the household.

^jData do not include persons under age 20 years.

^kData are for Mexican-American persons.

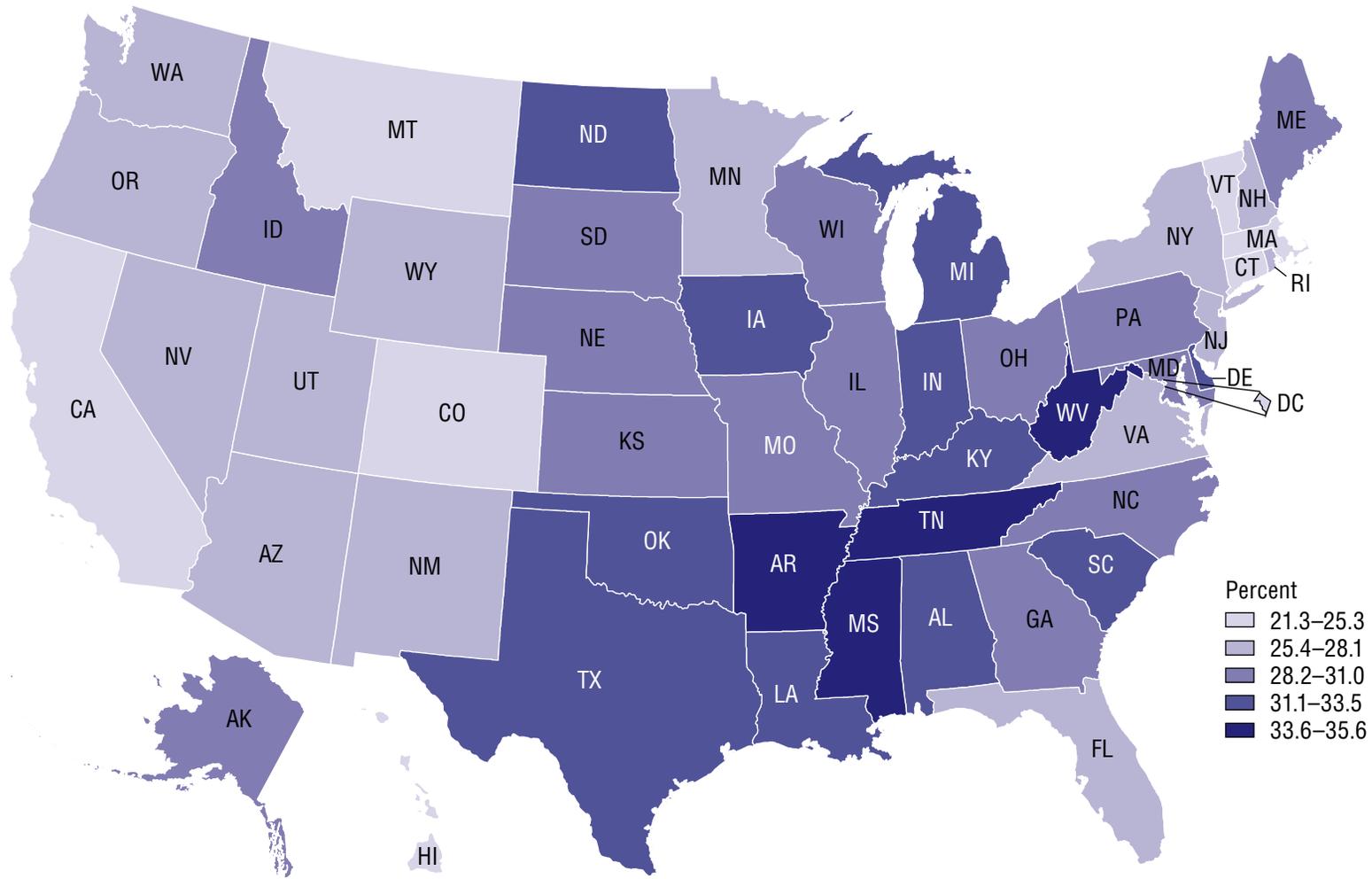
*The summary disparity ratio was significantly greater than 1.000. Statistical significance was assessed at the 0.05 level using a normal one-sided test on the natural logarithm scale.

DATA SOURCES

| | |
|----------|---|
| NWS-6.1 | National Ambulatory Medical Care Survey (NAMCS), CDC/NCHS |
| NWS-6.2 | National Ambulatory Medical Care Survey (NAMCS), CDC/NCHS |
| NWS-6.3 | National Ambulatory Medical Care Survey (NAMCS), CDC/NCHS |
| NWS-8 | National Health and Nutrition Examination Survey (NHANES), CDC/NCHS |
| NWS-9 | National Health and Nutrition Examination Survey (NHANES), CDC/NCHS |
| NWS-10.1 | National Health and Nutrition Examination Survey (NHANES), CDC/NCHS |
| NWS-10.2 | National Health and Nutrition Examination Survey (NHANES), CDC/NCHS |
| NWS-10.3 | National Health and Nutrition Examination Survey (NHANES), CDC/NCHS |
| NWS-10.4 | National Health and Nutrition Examination Survey (NHANES), CDC/NCHS |
| NWS-12 | Current Population Survey-Food Security Supplement (CPS-FSS), U.S. Census Bureau and Department of Agriculture, Economic Research Service (Census and USDA/ERS) |
| NWS-13 | Current Population Survey-Food Security Supplement (CPS-FSS), U.S. Census Bureau and Department of Agriculture, Economic Research Service (Census and USDA/ERS) |
| NWS-14 | National Health and Nutrition Examination Survey (NHANES), CDC/NCHS |
| NWS-15.1 | National Health and Nutrition Examination Survey (NHANES), CDC/NCHS |
| NWS-15.2 | National Health and Nutrition Examination Survey (NHANES), CDC/NCHS |
| NWS-16 | National Health and Nutrition Examination Survey (NHANES), CDC/NCHS |
| NWS-17.1 | National Health and Nutrition Examination Survey (NHANES), CDC/NCHS |
| NWS-17.2 | National Health and Nutrition Examination Survey (NHANES), CDC/NCHS |
| NWS-17.3 | National Health and Nutrition Examination Survey (NHANES), CDC/NCHS |
| NWS-18 | National Health and Nutrition Examination Survey (NHANES), CDC/NCHS |
| NWS-19 | National Health and Nutrition Examination Survey (NHANES), CDC/NCHS |
| NWS-20 | National Health and Nutrition Examination Survey (NHANES), CDC/NCHS |
| NWS-21.1 | National Health and Nutrition Examination Survey (NHANES), CDC/NCHS |
| NWS-21.3 | National Health and Nutrition Examination Survey (NHANES), CDC/NCHS |
| NWS-22 | National Health and Nutrition Examination Survey (NHANES), CDC/NCHS |

Map 29–1. Adult (20+ years) Obesity Based on Self-reported Weight and Height, by State: 2013

Healthy People 2020 Objective NWS-9 • Related State Data

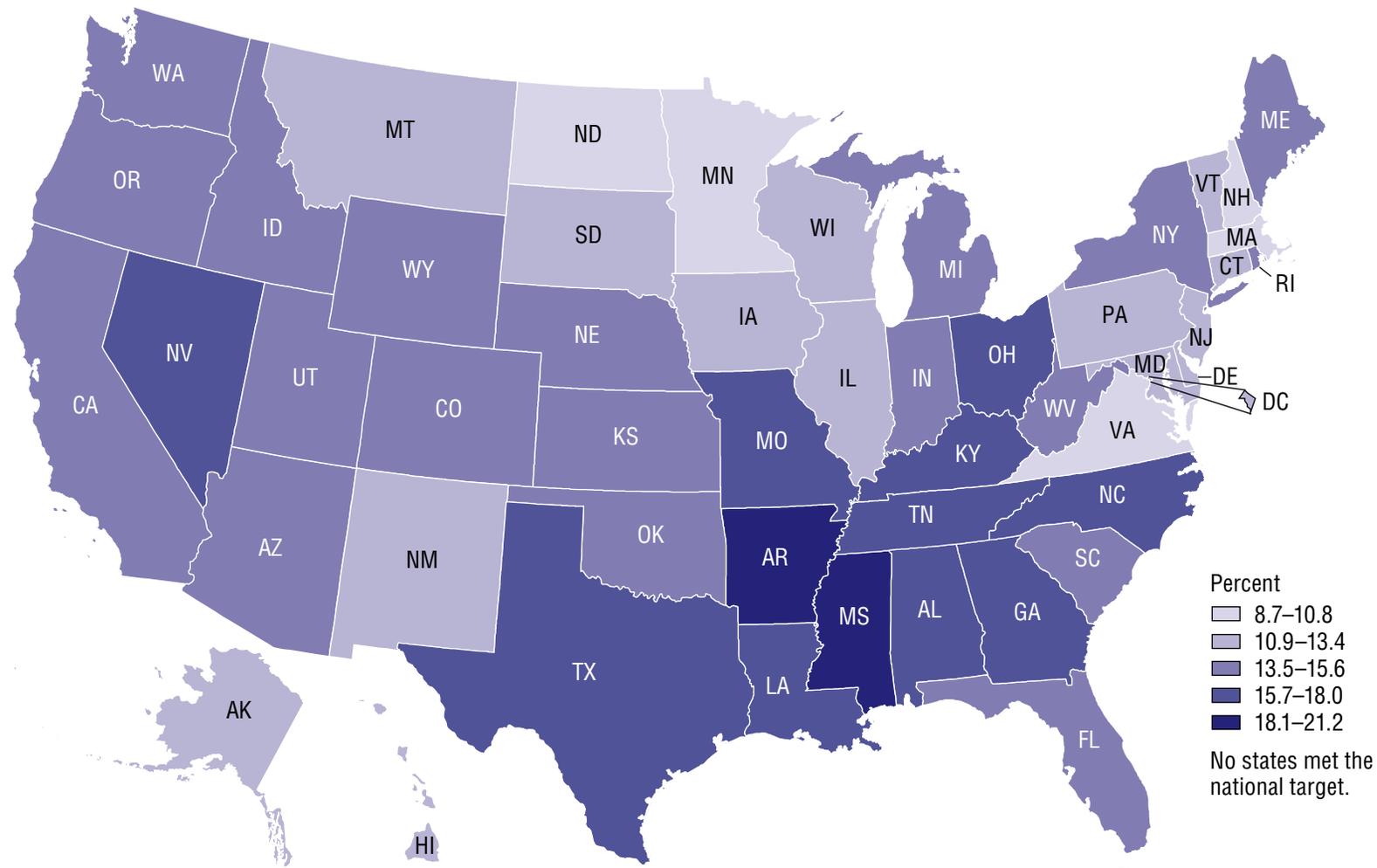


NOTES: Data are for adults aged 20 and over with obesity, defined as a body mass index at or above 30.0 kg/m², and are age-adjusted to the 2000 standard population. National data for the objective are based on measured weight and height from the National Health and Nutrition Examination Survey (NHANES) and are the basis for setting the national target of 30.5%. State data from the Behavioral Risk Factor Surveillance System (BRFSS) are based on self-reported weight and height. Data from the NHANES (35.3% in 2009–2012) may not be directly comparable to the all-states combined data from the BRFSS (28.6% in 2013), and therefore the national target may not be applicable to individual states. Data are displayed by a Jenks classification for U.S. states which creates categories that minimize within-group variation and maximize between-group variation. The [Technical Notes](#) provide more information on the data and methods.

DATA SOURCE: Behavioral Risk Factor Surveillance System (BRFSS), CDC/NCCDPHP

Map 29–2. Households with Food Insecurity in Past 12 Months, by State: 2011–2013

Healthy People 2020 Objective NWS-13 • National Target = 6.0% • National Rate = 14.6%



NOTES: Data are for U.S. households that reported experiencing food insecurity at least some time in the past 12 months, based on providing an affirmative answer to at least 3 of 18 core questions regarding food inadequacy and insufficiency that result from inadequate household resources. Data are displayed by a Jenks classification for U.S. states which creates categories that minimize within-group variation and maximize between-group variation. The [Technical Notes](#) provide more information on the data and methods.

DATA SOURCE: Current Population Survey-Food Security Supplement (CPS-FSS), Census and USDA/ERS