



Colorado Department
of Public Health
and Environment



Obesity and Overweight Among Colorado Adults

Cause for Concern

The proportion of obese and overweight adults in the United States has increased steadily over the past 20 years, to the point that obesity is now considered an epidemic. Obesity plays a role in the leading causes of death and disability, including cardiovascular disease, diabetes, cancer, and asthma. Unhealthy eating and lack of adequate physical activity are primary factors that contribute to obesity, overweight, and related health problems.

The U.S. Department of Health and Human Services has developed national health objectives designed to identify the most significant preventable threats to health and to establish national goals to reduce these threats. All states are working toward achieving *Healthy People 2010* (HP 2010) objectives as a way of improving health over the first decade of the new century.

Obesity in Colorado

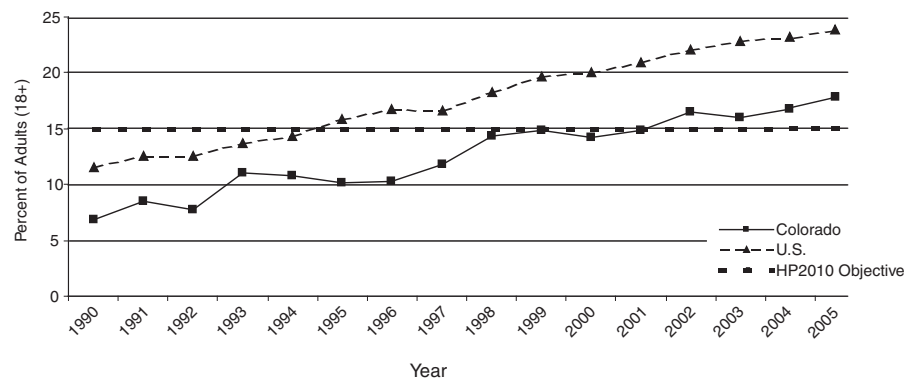
In 2005, 17.8% of Coloradans were obese (vs. 24.4% nationwide). Women were more likely to be obese (18.0%) than men (17.7%). Both Hispanics (25.8%) and Blacks (20.4%) were more likely to be obese than Whites (16.4%)¹.

Overweight in Colorado

In 2005, 36.7% of Coloradans were overweight (vs. 36.7% nationwide). Men were much more likely to be overweight (44.7%) than women (28.2%). Whites were more likely to be overweight (37.1%) than Hispanics (35.5%). Estimates for Blacks in Colorado are not available for 2005.

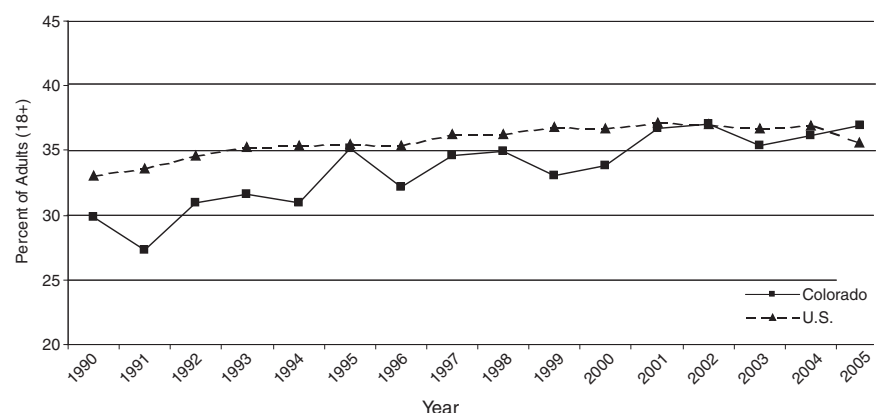
Overall, 45.5% of Coloradans were at a healthy weight (not obese, overweight, or underweight). The U.S. Surgeon General has set a *Healthy People 2010* objective of having at least 60 percent of adults at a healthy weight.

Figure 1. Obesity* prevalence among adults ages 18 and older: Colorado and U.S. BRFSS, 1990-2005



* Obese=Body Mass Index 30+

Figure 2. Overweight* prevalence among adults ages 18 and older: Colorado and U.S. BRFSS, 1990-2005



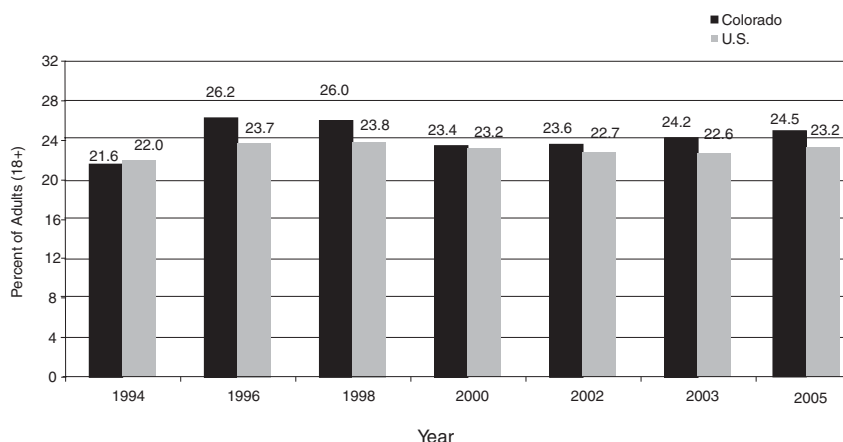
* Overweight=Body Mass Index 25.0-29.9

Consumption of Fruits and Vegetables

In 2005, 24.5% of Coloradans were eating at least 5 servings of fruits and vegetables daily, compared with 23.2 percent nationally. Women (30.0%) were more likely to reach the 5-serving mark compared to men (18.9%). Whites were most likely to eat 5 servings of fruits and vegetables per day (25.7%) followed by Hispanics (19.6%) and Blacks (17.9%).

The *Healthy People 2010* objective is to have 75 percent of those age 2 and older consume a minimum of 2 servings of fruits daily and 50 percent consume at least 3 daily servings of vegetables, with at least one-third being dark green or orange vegetables.

Figure 3. Adult Consumption of 5 Servings of Fruits and Vegetables Per Day: Colorado and U.S. BRFSS, 1994-2005



Physical Activity

In 2005, 54.4% of Coloradans met recommended guidelines for moderate physical activity (30 minutes per day, 5 or more days per week) or vigorous physical activity (20 minutes per day, 3 or more days per week). This compares with 49.1% nationally.

Slightly more men (55.2%) met the physical activity guidelines compared to women (53.6%). Whites were more likely to meet the physical activity guidelines (55.9%) than Hispanics (46.3%). Estimates for Blacks in Colorado in 2005 are not available.

The *Healthy People 2010* objective for moderate and vigorous physical activity is set at 30 percent.

What is BMI?

Obesity and overweight categories are defined by the BMI, or *Body Mass Index*. It is a number that shows body weight adjusted for height. For adults ages 20 years and older, BMI falls into one of these categories: underweight (below 18.5), normal weight (18.5-24.9), overweight (25.0-29.9), and obese (30.0 and above).

The formula to calculate BMI is:

$$\left(\frac{\text{Weight in Pounds}}{(\text{Height in inches}) \times (\text{Height in inches})} \right) \times 703$$

Notes

¹ The Health Statistics Section joins the Centers for Disease Control and Prevention in recognizing that race and ethnicity do not represent valid biological or genetic categories but are social constructs with cultural and historical meaning.

Additional Information

For more information about state and local efforts to prevent obesity in Colorado, contact the Colorado Physical Activity and Nutrition (COPAN) Program at the Colorado Department of Public Health and Environment: (303) 692-2441 or cdphe.pscopan@state.co.us. Visit the COPAN website at <http://www.cdphe.state.co.us/pp/COPAN/COPAN.html>. This factsheet was developed by the Health Statistics Section, Colorado Department of Public Health and Environment, in cooperation with the Colorado Physical Activity and Nutrition Program, Colorado Department of Public Health and Environment.

About BRFSS

All the data in this report come from the Behavioral Risk Factor Surveillance System (BRFSS). The BRFSS includes all fifty states, three territories, and the District of Columbia, making it the largest ongoing telephone health survey in the world. The Colorado BRFSS was initiated in 1990 as a joint project of the Colorado Department of Public Health and Environment and the Centers for Disease Control and Prevention. The BRFSS is designed to monitor the prevalence of health behaviors and preventive health practices associated with the leading causes of premature death, disability, and disease. Data collected over an entire year are combined and weighted to the age and sex distribution of the state to develop statewide estimates of various health behaviors.