CHAPTER 33

# Physical Activity (PA)

## Lead Agencies

Centers for Disease Control and Prevention
President's Council on Fitness, Sports, and Nutrition

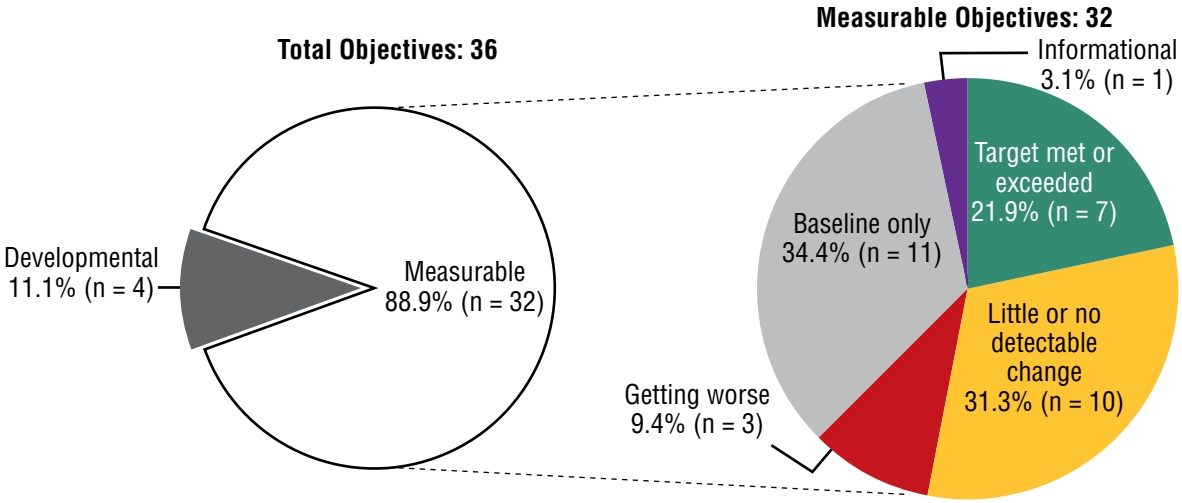
## Contents

# Goal: Improve health, fitness, and quality of life through daily physical activity.

This chapter includes objectives that monitor improvement in physical activity engagement among adults and children; physical education in schools; screen time among children and adolescents; and expansion of physical activity programs in schools, communities, and worksite settings. 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 33–1. Midcourse Status of the Physical Activity Objectives




Of the 36 objectives in the Physical Activity Topic Area, 4 objectives were developmental,[2] and 32 were measurable[3] (Figure 33–1, Table 33–1). The midcourse status of the measurable objectives (Table 33–2) was as follows:

- 7 objectives had met or exceeded their 2020 targets,[4]
- 10 objectives had demonstrated little or no detectable change,[5]
- 3 objectives were getting worse,[6]
- 11 objectives had baseline data only,[7] and
- 1 objective was informational.[8]

## Selected Findings

### Adult Physical Activity

The five objectives monitoring adult physical activity levels had achieved their 2020 targets at midcourse (Table 33–2).

- The age-adjusted proportion of **adults aged 18 and over who did not engage in any leisure-time physical activity** (PA-1) decreased from 36.2% in 2008 to 30.0% in 2014, exceeding the 2020 target (Table 33–2).
  - » In 2013, the proportion of adults aged 18 and over who did not engage in any leisure-time physical activity varied by state (Map 33–1).[9]
  - » In 2014, there were statistically significant disparities by sex, race and ethnicity, education, family income, disability status, and geographic location in the proportion of adults who did not engage in any leisure-time physical activity (Table 33–3, PA-1).
- Between 2008 and 2014, the age-adjusted proportion of **adults aged 18 and over who engaged in aerobic physical activity of light/moderate intensity for 150 minutes or more per week, vigorous intensity for 75 minutes or more per week**, or an equivalent combination[10] (PA-2.1), increased from 43.5% to 49.9%. The age-adjusted proportion of **adults aged 18 and over who engaged in aerobic physical activity of**

**light/moderate intensity for 300 minutes or more per week, vigorous intensity for 150 minutes or more per week**, or an equivalent combination (PA-2.2), increased from 28.4% to 34.0%. The age-adjusted proportion of **adults aged 18 and over who performed muscle-strengthening activities** (such as lifting weights or doing calisthenics) **2 or more days a week** (PA-2.3) increased from 21.9% to 24.4%, all exceeding their respective 2020 targets (Table 33–2).

- » In 2014, there were statistically significant disparities by sex, race and ethnicity, education, family income, disability status, and geographic location in the proportion of adults who engaged in aerobic physical activity of light/moderate intensity for 150 minutes or more per week, vigorous intensity for 75 minutes or more per week, or an equivalent combination (Table 33–3, PA-2.1).
- » In 2014, there were statistically significant disparities by sex, education, family income, disability status, and geographic location in the proportion of adults who engaged in aerobic physical activity of light/moderate intensity for 300 minutes or more per week, vigorous intensity for 150 minutes or more per week, or an equivalent combination (PA-2.2), and in the proportion of adults who performed muscle-strengthening activities at least twice a week (Table 33–3, PA-2.3). The disparities for these objectives by race and ethnicity were not statistically significant.

- The age-adjusted proportion of **adults aged 18 and over who met the physical activity guidelines for both aerobic physical activity** (150 minutes or more of light/moderate physical activity per week, 75 minutes or more of vigorous physical activity per week, or an equivalent combination) **and muscle-strengthening** (at least twice a week) (PA-2.4) increased from 18.2% in 2008 to 21.3% in 2014, exceeding the 2020 target (Table 33–2).
  - » In 2013, the proportion of adults aged 18 and over who met the guidelines for both aerobic exercise and muscle-strengthening physical activity varied by state (Map 33–2).[9]
  - » In 2014, there were statistically significant disparities by sex, education, family income, disability status, and geographic location in the proportion of adults who met the physical activity guidelines for both aerobic physical activity and muscle-strengthening (Table 33–3, PA-2.4). The disparity by race and ethnicity was not statistically significant.

## Adolescent Physical Activity

Two of the three objectives monitoring adolescent physical activity demonstrated little or no detectable change at midcourse, and one had worsened (Table 33–2).

- There was little or no detectable change in the proportion of **students in grades 9–12 who met the physical activity guidelines for aerobic physical activity** (Table 33–2, PA-3.1: 28.7% in 2011 and 27.1% in 2013).
  - » The proportion of students in grades 9–12 who met the guidelines for aerobic physical activity varied by state. Forty-one states and the District of Columbia had data for this objective in 2013. Of these, two states, Nebraska and Oklahoma, met the national target (Map 33–3, PA-3.1).
  - » In 2013, there was a statistically significant disparity by sex in the proportion of students in grades 9–12 who met the guidelines for aerobic physical activity (Table 33–3, PA-3.1). The disparity by race and ethnicity was not statistically significant.
- The proportion of **students in grades 9–12 who met the physical activity guidelines for muscle-strengthening activities** (PA-3.2) decreased from 55.6% in 2011 to 51.7% in 2013, moving away from the baseline and 2020 target (Table 33–2).
  - » In 2013, there was a statistically significant disparity by sex in the proportion of students in grades 9–12 who met the guidelines for muscle-strengthening activities (Table 33–3, PA-3.2). The disparity by race and ethnicity was not statistically significant.
- There was little or no detectable change in the proportion of **students in grades 9–12 who met the physical activity guidelines for both aerobic physical activity and muscle-strengthening activities** (Table 33–2, PA-3.3: 21.9% in 2011 and 21.6% in 2013).
  - » In 2013, there was a statistically significant disparity by sex in the proportion of students in grades 9–12 who met the guidelines for aerobic physical activity and muscle-strengthening activities (Table 33–3, PA-3.3). The disparity by race and ethnicity was not statistically significant.

## School Physical Education Requirements and Participation

One of the seven objectives monitoring schools meeting physical education requirements as well as states and districts that require scheduled elementary school recess had achieved the 2020 target at midcourse, four objectives showed little or no detectable change, one had worsened, and one had baseline data only (Table 33–2).

- The proportion of **middle and junior high schools requiring daily physical education for all students** (PA-4.2) decreased from 10.5% in 2006 to 3.4% in 2014, moving away from its baseline and 2020 target (Table 33–2).
- The proportion of **senior high schools requiring daily physical education for all students** (PA-4.3) increased from 2.1% in 2006 to 4.0% in 2014, exceeding the 2020 target (Table 33–2).
- There was little or no detectable change in the proportion of **students in grades 9–12 who participated in daily school physical education** (Table 33–2, PA-5: 33.3% in 2009 and 29.4% in 2013).
  - » In 2013, there was a statistically significant disparity by sex in the proportion of students in grades 9–12 who participated in daily school physical education (Table 33–3, PA-5). The disparity by race and ethnicity was not statistically significant.

## Screen Time: Children and Adolescents

Two of the seven objectives monitoring screen-time activities of children and adolescents demonstrated little or no detectable change, one objective had worsened, three had baseline data only, and one objective was informational (Table 33–2).

- Data beyond the baseline (40.6% in 2007) were not available for the proportion of **children aged 0–2 years who viewed no television or videos on weekdays** (PA-8.1), so progress toward the 2020 target could not be assessed (Table 33–2).
  - » In 2007, disparities by sex, race and ethnicity, and family income in the proportion of children aged 0–2 years who viewed no television or videos on weekdays (PA-8.1) were not statistically significant (Table 33–3).
- There was little or no detectable change (75.6% in 2005–2008 and 76.2% in 2009–2012) in the proportion of **children aged 2–5 years who viewed television or videos or played video games for no more than 2 hours per day** (Table 33–2, PA-8.2.1).
  - » In 2009–2012, there were statistically significant disparities by race and ethnicity and family income in the proportion of children aged 2–5 years who viewed television or videos or played video games for no more than 2 hours per day (Table 33–3, PA-8.2.1). The disparity by sex was not statistically significant.
- Data beyond the baseline (78.9% in 2007) were not available for the proportion of **children and adolescents aged 6–14 years who viewed television or videos or played video games for no more than 2 hours per day** (PA-8.2.2), so progress toward the 2020 target could not be assessed (Table 33–2).
  - » In 2007, there were statistically significant disparities by sex, race and ethnicity, and family income in the proportion of children and adolescents aged 6–14 years who viewed television or videos or played video games for no more than 2 hours per day (Table 33–3, PA-8.2.2).
- There was little or no detectable change (67.2% in 2009 and 67.5% in 2013) in the proportion of **students in grades 9–12 who viewed television or videos or played video games for no more than 2 hours per day** (Table 33–2, PA-8.2.3).
  - » In 2013, there was a statistically significant disparity by race and ethnicity in the proportion of students in grades 9–12 who viewed television or videos or played video games for no more than 2 hours per day (Table 33–3, PA-8.2.3). The disparity by sex was not statistically significant.
- A target was not set for the proportion of **children aged 2–5 years who used a computer for nonschool work for no more than 2 hours per day** (PA-8.3.1: 97.4% in 2005–2008 and 97.5% in 2009–2012) (Table 33–2).
  - » In 2009–2012, there were statistically significant disparities by race and ethnicity and family income in the proportion of children aged 2–5 years who used a computer for nonschool work for no more than 2 hours per day (Table 33–3, PA-8.3.1). The disparity by sex was not statistically significant.
- Data beyond the baseline (93.3% in 2007) were not available for the proportion of **children and adolescents aged 6–14 years who used a computer for nonschool work for no more than 2 hours per day** (PA-8.3.2), so progress toward the 2020 target could not be assessed (Table 33–2).

» In 2007, there was a statistically significant disparity by family income in the proportion of children and adolescents aged 6–14 years who used a computer for nonschool work for no more than 2 hours per day (Table 33–3, PA-8.3.2). The disparities by sex and race and ethnicity were not statistically significant.

- The proportion of **students in grades 9–12 who used a computer for nonschool work for no more than 2 hours per day** (PA-8.3.3) declined from 75.1% in 2009 to 58.7% in 2013, moving away from the baseline and 2020 target (Table 33–2).
  - » In 2013, there was a statistically significant disparity by race and ethnicity in the proportion of students in grades 9–12 who used a computer for nonschool work for no more than 2 hours per day (Table 33–3, PA-8.3.3). The disparity by sex was not statistically significant.

## Physician Counseling About Physical Activity

- There was little or no detectable change (13.0% in 2007 and 12.3% in 2010) in the age-adjusted proportion of **physician office visits by adults aged 20 and over with a diagnosis of cardiovascular disease, diabetes, or hyperlipidemia that included exercise counseling** (Table 33–2, PA-11.1).
  - » In 2010, disparities in the proportion of physician office visits by adults aged 20 and over for cardiovascular disease, diabetes, or hyperlipidemia that included exercise counseling (PA-11.1) by sex, race and ethnicity, and provider's geographic location were not statistically significant (Table 33–3).
- The age-adjusted proportion of **physician office visits by all children and adults that included exercise counseling** (PA-11.2) increased from 7.9% in 2007 to 9.2% in 2010, exceeding the 2020 target (Table 33–2, PA-11.2).
  - » In 2010, disparities by sex, race and ethnicity, and provider's geographic location in the proportion of physician office visits by all children and adults that included exercise counseling (PA-11.2) were not statistically significant (Table 33–3).

## Use of Alternate Transportation

- Data beyond the baseline were not available for the proportions of **transportation trips by adults aged 18 and over of 1 mile or less that were completed by walking** (Table 33–2, PA-13.1: 33.4% in 2009), **trips of 1 mile or less to school by children and adolescents aged 5–15 years that were completed by walking** (PA-13.2: 28.8% in 2009), and **trips of 5 miles or less by adults aged 18 and over that were completed by bicycle** (PA-14.1: 1.0% in 2009), so progress toward the 2020 targets could not be assessed (Table 33–2).
  - » In 2009, there were statistically significant disparities by sex, race and ethnicity, education, and geographic location in the proportion of transportation trips of 1 mile or less by adults aged 18 and over that were completed by walking (Table 33–3, PA-13.1).
  - » In 2009, there was a statistically significant disparity by geographic location in the proportion of trips to school of 1 mile or less by children and adolescents aged 5–15 years that were completed by walking (Table 33–3, PA-13.2). Disparities by sex and race and ethnicity were not statistically significant.
  - » In 2009, there were statistically significant disparities by sex and education in the proportion of transportation trips of 5 miles or less by adults aged 18 and over that were completed by bicycle (Table 33–3, PA-14.1). Disparities by race and ethnicity and geographic location were not statistically significant.

# More Information

Readers interested in more detailed information about the objectives in this topic area are invited to visit the HealthyPeople.gov website, where extensive substantive and technical information is available:

- For the background and importance of the topic area, see: http://www.healthypeople.gov/2020/topics-objectives/topic/physical-activity
- For data details for each objective, including definitions, numerators, denominators, calculations, and data limitations, see: http://www.healthypeople.gov/2020/topics-objectives/topic/physical-activity/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: http://www.healthypeople.gov/2020/topics-objectives/topic/physical-activity/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/
- National Ambulatory Medical Care Survey: http://www.cdc.gov/nchs/ahcd/
- National Health and Nutrition Examination Survey: http://www.cdc.gov/nchs/nhanes/
- National Health Interview Survey: http://www.cdc.gov/nchs/nhis.htm
- National Household Travel Survey: http://nhts.ornl.gov/
- National Resource Center for Health and Safety in Child Care and Early Education: http://cfoc.nrckids.org/
- National Survey of Children's Health: http://childhealthdata.org/learn/NSCH
- School Health Policies and Practices Study: http://www.cdc.gov/healthyyouth/data/shpps/index.htm
- Youth Risk Behavior Surveillance System: http://www.cdc.gov/HealthyYouth/data/yrbs/index.htm

## Footnotes

[1]The 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]**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.

[6]**Getting worse**—One of the following, as specified in the Midcourse Progress Table:
» Movement was away from the baseline and target, standard errors were available, and the percentage change relative to the baseline was statistically significant.
» 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.

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

[8]**Informational**—A target was not set for this objective, so progress toward target attainment could not be assessed.

[9]The state data shown are from the Behavioral Risk Factor Surveillance System, while the national data, used to set the national target, are from the National Health Interview Survey. National and state data may not be directly comparable, and therefore the national target may not be applicable to the state data.

[10]Vigorous physical activities are defined as those that cause heavy sweating or large increases in breathing or heart rate. Light or moderate leisure-time physical activities are activities that cause only light sweating or a slight to moderate increase in breathing or heart rate.

## Suggested Citation

National Center for Health Statistics. Chapter 33: Physical Activity. Healthy People 2020 Midcourse Review. Hyattsville, MD. 2016.

## Table 33–1. Physical Activity 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 |
|---|---|---|---|
| PA-1 | Reduce the proportion of adults who engage in no leisure-time physical activity | National Health Interview Survey (NHIS), CDC/NCHS | |
| PA-2.1 | Increase the proportion of adults who engage in aerobic physical activity of at least moderate intensity for at least 150 minutes per week, 75 minutes per week of vigorous intensity, or an equivalent combination | National Health Interview Survey (NHIS), CDC/NCHS | |
| PA-2.2 | Increase the proportion of adults who engage in aerobic physical activity of at least moderate intensity for more than 300 minutes per week, more than 150 minutes per week of vigorous intensity, or an equivalent combination | National Health Interview Survey (NHIS), CDC/NCHS | |
| PA-2.3 | Increase the proportion of adults who perform muscle-strengthening activities on 2 or more days of the week | National Health Interview Survey (NHIS), CDC/NCHS | |
| PA-2.4 | Increase the proportion of adults who meet the objectives for aerobic physical activity and for muscle-strengthening activity | National Health Interview Survey (NHIS), CDC/NCHS | |
| PA-3.1 | Increase the proportion of adolescents who meet current federal physical activity guidelines for aerobic physical activity | Youth Risk Behavior Surveillance System (YRBSS), CDC/NCHHSTP | |
| PA-3.2 | Increase the proportion of adolescents who meet current federal physical activity guidelines for muscle-strengthening activity | Youth Risk Behavior Surveillance System (YRBSS), CDC/NCHHSTP | |
| PA-3.3 | Increase the proportion of adolescents who meet current federal physical activity guidelines for aerobic physical activity and muscle-strengthening activity | Youth Risk Behavior Surveillance System (YRBSS), CDC/NCHHSTP | |
| PA-4.1 | Increase the proportion of the country's public and private elementary schools that require daily physical education for all students | School Health Policies and Practices Study (SHPPS), CDC/NCHHSTP | |
| PA-4.2 | Increase the proportion of the country's public and private middle and junior high schools that require daily physical education for all students | School Health Policies and Practices Study (SHPPS), CDC/NCHHSTP | |

## Table 33–1. Physical Activity 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 |
|---|---|---|---|
| PA-4.3 | Increase the proportion of the country's public and private senior high schools that require daily physical education for all students | School Health Policies and Practices Study (SHPPS), CDC/NCHHSTP | |
| PA-5 | Increase the proportion of adolescents who participate in daily school physical education | Youth Risk Behavior Surveillance System (YRBSS), CDC/NCHHSTP | |
| PA-6.1 | Increase the number of states that require regularly scheduled elementary school recess | School Health Policies and Practices Study (SHPPS), CDC/NCHHSTP | |
| PA-6.2 | Increase the proportion of school districts that require regularly scheduled elementary school recess | School Health Policies and Practices Study (SHPPS), CDC/NCHHSTP | |
| PA-7 | Increase the proportion of school districts that require or recommend elementary school recess for an appropriate period of time | School Health Policies and Practices Study (SHPPS), CDC/NCHHSTP | |
| PA-8.1 | Increase the proportion of children aged 0–2 years who view no television or videos on an average weekday | National Survey of Children's Health (NSCH), HRSA/MCHB and CDC/NCHS | |
| PA-8.2.1 | Increase the proportion of children aged 2–5 years who view television or videos or play video games for no more than 2 hours a day | National Health and Nutrition Examination Survey (NHANES), CDC/NCHS | |
| PA-8.2.2 | Increase the proportion of children and adolescents aged 6–14 years who view television or videos or play video games for no more than 2 hours a day | National Survey of Children's Health (NSCH), HRSA/MCHB and CDC/NCHS | |
| PA-8.2.3 | Increase the proportion of adolescents in grades 9–12 who view television or videos or play video games for no more than 2 hours a day | Youth Risk Behavior Surveillance System (YRBSS), CDC/NCHHSTP | |
| PA-8.3.1 | Increase the proportion of children aged 2–5 years who use a computer or play computer games outside of school (for nonschool work) for no more than 2 hours a day | National Health and Nutrition Examination Survey (NHANES), CDC/NCHS | |

## Table 33–1. Physical Activity 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 |
|---|---|---|---|
| PA-8.3.2 | Increase the proportion of children and adolescents aged 6–14 years who use a computer or play computer games outside of school (for nonschool work) for no more than 2 hours a day | National Survey of Children's Health (NSCH), HRSA/MCHB and CDC/NCHS | |
| PA-8.3.3 | Increase the proportion of adolescents in grades 9–12 who use a computer or play computer games outside of school (for nonschool work) for no more than 2 hours a day | Youth Risk Behavior Surveillance System (YRBSS), CDC/NCHHSTP | |
| PA-9.1 | Increase the number of states with licensing regulations for physical activity in child care that require activity programs providing large muscle or gross motor activity, development, or equipment | National Resource Center for Health and Safety in Child Care and Early Education | |
| PA-9.2 | Increase the number of states with licensing regulations for physical activity in child care that require children to engage in vigorous or moderate physical activity | National Resource Center for Health and Safety in Child Care and Early Education | |
| PA-9.3 | Increase the number of states with licensing regulations for physical activity in child care that require a number of minutes of physical activity per day or by length of time in care | National Resource Center for Health and Safety in Child Care and Early Education | |
| PA-10 | Increase the proportion of the country's public and private schools that provide access to their physical activity spaces and facilities for all persons outside of normal school hours (that is, before and after the school day, on weekends, and during summer and other vacations) | School Health Policies and Practices Study (SHPPS), CDC/NCHHSTP | |
| PA-11.1 | Increase the proportion of office visits made by patients with a diagnosis of cardiovascular disease, diabetes, or hyperlipidemia that include counseling or education related to exercise | National Ambulatory Medical Care Survey (NAMCS), CDC/NCHS | |
| PA-11.2 | Increase the proportion of physician visits made by all child and adult patients that include counseling about exercise | National Ambulatory Medical Care Survey (NAMCS), CDC/NCHS | |

## Table 33–1. Physical Activity 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 |
|---|---|---|---|
| PA-12 | (Developmental) Increase the proportion of employed adults who have access to and participate in employer-based exercise facilities and exercise programs | (Potential) National Health Interview Survey (NHIS), CDC/NCHS | Not Applicable |
| PA-13.1 | Increase the proportion of trips of 1 mile or less made by walking by adults aged 18 and over | National Household Travel Survey (NHTS), DOT/FHA |  |
| PA-13.2 | Increase the proportion of trips of 1 mile or less made to school by walking by children and adolescents aged 5–15 years | National Household Travel Survey (NHTS), DOT/FHA |  |
| PA-14.1 | Increase the proportion of trips of 5 miles or less made by bicycling by adults aged 18 and over | National Household Travel Survey (NHTS), DOT/FHA |  |
| PA-14.2 | Increase the proportion of trips of 2 miles or less made to school by bicycling by children and adolescents aged 5–15 years | National Household Travel Survey (NHTS), DOT/FHA |  |
| PA-15.1 | (Developmental) Increase community-scale policies for the built environment that enhance access to and availability of physical activity opportunities | To be determined | Not Applicable |
| PA-15.2 | (Developmental) Increase street-scale policies for the built environment that enhance access to and availability of physical activity opportunities | To be determined | Not Applicable |
| PA-15.3 | (Developmental) Increase transportation and travel policies for the built environment that enhance access to and availability of physical activity opportunities | To be determined | Not Applicable |

## Table 33–2. Midcourse Progress for Measurable[1] Physical Activity 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] |
|---|---|---|---|---|---|---|
| [2] **PA-1** Adults engaging in no leisure-time physical activity (age-adjusted, percent, 18+ years) | 36.2% (2008) | 30.0% (2014) | 32.6% | 172.2% | | Yes |
| [2] **PA-2.1** Adults engaging in regular physical activity—Light or moderate for 150+ minutes/week, vigorous for 75+ minutes/week, or an equivalent combination (age-adjusted, percent, 18+ years) | 43.5% (2008) | 49.9% (2014) | 47.9% | 145.5% | | Yes |
| [2] **PA-2.2** Adults engaging in regular physical activity—Light or moderate for 300+ minutes/week, vigorous for 150+ minutes/week, or an equivalent combination (age-adjusted, percent, 18+ years) | 28.4% (2008) | 34.0% (2014) | 31.3% | 193.1% | | Yes |
| [2] **PA-2.3** Adults performing muscle-strengthening activities 2+ days/week (age-adjusted, percent, 18+ years) | 21.9% (2008) | 24.4% (2014) | 24.1% | 113.6% | | Yes |
| [2] **PA-2.4** Adults meeting physical activity and muscle-strengthening objectives (age-adjusted, percent, 18+ years) | 18.2% (2008) | 21.3% (2014) | 20.1% | 163.2% | | Yes |
| [8] **PA-3.1** Adolescents meeting guidelines for aerobic physical activity (percent, grades 9–12) | 28.7% (2011) | 27.1% (2013) | 31.6% | | 5.6% | No |
| [11] **PA-3.2** Adolescents meeting guidelines for muscle-strengthening activity (percent, grades 9–12) | 55.6% (2011) | 51.7% (2013) | 61.2% | | 7.0% | Yes |
| [8] **PA-3.3** Adolescents meeting guidelines for aerobic physical activity and muscle-strengthening activity (percent, grades 9–12) | 21.9% (2011) | 21.6% (2013) | 24.1% | | 1.4% | No |
| [8] **PA-4.1** Elementary schools requiring daily physical education (percent) | 4.4% (2006) | 3.6% (2014) | 4.8% | | 18.2% | No |
| [11] **PA-4.2** Middle and junior high schools requiring daily physical education (percent) | 10.5% (2006) | 3.4% (2014) | 11.5% | | 67.6% | Yes |
| [2] **PA-4.3** Senior high schools requiring daily physical education (percent) | 2.1% (2006) | 4.0% (2014) | 2.3% | 950.0% | | |
| [8] **PA-5** Adolescents participating in daily school physical education (percent, grades 9–12) | 33.3% (2009) | 29.4% (2013) | 36.6% | | 11.7% | No |
| [13] **PA-6.1** States requiring regular elementary school recess (number) | 7 (2006) | | 17 | | | |

## Table 33–2. Midcourse Progress for Measurable[1] Physical Activity 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] |
|---|---|---|---|---|---|---|
| [6] **PA-6.2** School districts requiring regular elementary school recess (percent) | 57.1% (2006) | 58.9% (2012) | 62.8% | 31.6% | | No |
| [6] **PA-7** School districts requiring regular elementary school recess for 20+ minutes (percent) | 61.5% (2006) | 63.3% (2012) | 67.7% | 29.0% | | No |
| [13] **PA-8.1** Children viewing no television or videos or playing video games on weekdays (percent, 0–2 years) | 40.6% (2007) | | 44.7% | | | |
| [6] **PA-8.2.1** Children viewing television or videos or playing games for no more than 2 hours a day (percent, 2–5 years) | 75.6% (2005–2008) | 76.2% (2009–2012) | 83.2% | 7.9% | | No |
| [13] **PA-8.2.2** Children and adolescents viewing television or videos or playing games for no more than 2 hours a day (percent, 6–14 years) | 78.9% (2007) | | 86.8% | | | |
| [6] **PA-8.2.3** Adolescents viewing television, videos, or video games for no more than 2 hours a day (percent, grades 9–12) | 67.2% (2009) | 67.5% (2013) | 73.9% | 4.5% | | No |
| [14] **PA-8.3.1** Children using a computer for nonschool work for no more than 2 hours a day (percent, 2–5 years) | 97.4% (2005–2008) | 97.5% (2009–2012) | | | | |
| [13] **PA-8.3.2** Children and adolescents using a computer for nonschool work for no more than 2 hours a day (percent, 6–14 years) | 93.3% (2007) | | 100% | | | |
| [11] **PA-8.3.3** Adolescents using a computer for nonschool work for no more than 2 hours a day (percent, grades 9–12) | 75.1% (2009) | 58.7% (2013) | 82.6% | | 21.8% | Yes |
| [13] **PA-9.1** State child care licensing regulations requiring activity programs for large muscle or gross motor activity (number of states) | 25 (2006) | | 35 | | | |
| [13] **PA-9.2** State child care licensing regulations requiring child participation in vigorous or moderate physical activity (number of states) | 3 (2006) | | 13 | | | |
| [13] **PA-9.3** State child care licensing regulations requiring child participation in physical activity for a specified time period (number of states) | 1 (2006) | | 11 | | | |

## Table 33–2. Midcourse Progress for Measurable[1] Physical Activity 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] |
|---|---|---|---|---|---|---|---|
| [8] | **PA-10** Schools provlding access to physical activity facilities during nonschool time (percent) | 28.8% (2006) | 25.9% (2014) | 31.7% | | 10.1% | No |
| [8] | **PA-11.1** Office visits for cardiovascular disease, diabetes, or hyperlipidemia that include exercise counseling (age-adjusted, percent, 20+ years) | 13.0% (2007) | 12.3% (2010) | 14.3% | | 5.4% | No |
| [2] | **PA-11.2** Physician visits by child or adult patients that include exercise counseling (age-adjusted, percent) | 7.9% (2007) | 9.2% (2010) | 8.7% | 162.5% | | No |
| [13] | **PA-13.1** Walking for transportation—Adults—Trips of 1 mile or less (age-adjusted, percent, 18+ years) | 33.4% (2009) | | 36.7% | | | |
| [13] | **PA-13.2** Walking to school—Children and Adolescents—Trips of 1 mile or less (percent, 5–15 years) | 28.8% (2009) | | 31.7% | | | |
| [13] | **PA-14.1** Bicycling for transportation—Adults—Trips of 5 miles or less (age-adjusted, percent, 18+ years) | 1.0% (2009) | | 3.0% | | | |
| [13] | **PA-14.2** Bicycling to school—Children and Adolescents—Trips of 2 miles or less (percent, 5–15 years) | 1.4% (2009) | | 3.4% | | | |

## Table 33–2. Midcourse Progress for Measurable[1] Physical Activity Objectives—Continued

NOTES

See HealthyPeople.gov for all Healthy People 2020 data. The Technical Notes provide more information on the measures of progress.

FOOTNOTES

[1]**Measurable** objectives had a national baseline value.

**Target met or exceeded:**

[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%.)

[3]The baseline and midcourse values were equal to or exceeded the target. (The percentage of targeted change achieved was not assessed.)

**Improving:**

[4]Movement was toward the target, standard errors were available, and the percentage of targeted change achieved was statistically significant.

[5]Movement was toward the target, standard errors were not available, and the objective had achieved 10% or more of the targeted change.

**Little or no detectable change:**

[6]Movement was toward the target, standard errors were available, and the percentage of targeted change achieved was not statistically significant.

[7]Movement was toward the target, standard errors were not available, and the objective had achieved less than 10% of the targeted change.

[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.

[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.

[10]There was no change between the baseline and the midcourse data point.

**Getting worse:**

[11]Movement was away from the baseline and target, standard errors were available, and the percentage change relative to the baseline was statistically significant.

[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.

[13]**Baseline only:** The objective only had one data point, so progress toward target attainment could not be assessed.

[14]**Informational:** A target was not set for this objective, so progress toward target attainment could not be assessed.

[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):

$$\text{Percentage of targeted change achieved} = \frac{\text{Midcourse value} - \text{Baseline value}}{\text{HP2020 target} - \text{Baseline value}} \times 100$$

[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:

$$\text{Magnitude of percentage change from baseline} = \frac{|\ \text{Midcourse value} - \text{Baseline value}\ |}{\text{Baseline value}} \times 100$$

[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.

DATA SOURCES

| | |
|---|---|
| PA-1 | National Health Interview Survey (NHIS), CDC/NCHS |
| PA-2.1 | National Health Interview Survey (NHIS), CDC/NCHS |
| PA-2.2 | National Health Interview Survey (NHIS), CDC/NCHS |
| PA-2.3 | National Health Interview Survey (NHIS), CDC/NCHS |
| PA-2.4 | National Health Interview Survey (NHIS), CDC/NCHS |
| PA-3.1 | Youth Risk Behavior Surveillance System (YRBSS), CDC/NCHHSTP |
| PA-3.2 | Youth Risk Behavior Surveillance System (YRBSS), CDC/NCHHSTP |
| PA-3.3 | Youth Risk Behavior Surveillance System (YRBSS), CDC/NCHHSTP |
| PA-4.1 | School Health Policies and Practices Study (SHPPS), CDC/NCHHSTP |
| PA-4.2 | School Health Policies and Practices Study (SHPPS), CDC/NCHHSTP |
| PA-4.3 | School Health Policies and Practices Study (SHPPS), CDC/NCHHSTP |
| PA-5 | Youth Risk Behavior Surveillance System (YRBSS), CDC/NCHHSTP |
| PA-6.1 | School Health Policies and Practices Study (SHPPS), CDC/NCHHSTP |
| PA-6.2 | School Health Policies and Practices Study (SHPPS), CDC/NCHHSTP |
| PA-7 | School Health Policies and Practices Study (SHPPS), CDC/NCHHSTP |
| PA-8.1 | National Survey of Children's Health (NSCH), HRSA/MCHB and CDC/NCHS |
| PA-8.2.1 | National Health and Nutrition Examination Survey (NHANES), CDC/NCHS |
| PA-8.2.2 | National Survey of Children's Health (NSCH), HRSA/MCHB and CDC/NCHS |
| PA-8.2.3 | Youth Risk Behavior Surveillance System (YRBSS), CDC/NCHHSTP |
| PA-8.3.1 | National Health and Nutrition Examination Survey (NHANES), CDC/NCHS |
| PA-8.3.2 | National Survey of Children's Health (NSCH), HRSA/MCHB and CDC/NCHS |
| PA-8.3.3 | Youth Risk Behavior Surveillance System (YRBSS), CDC/NCHHSTP |
| PA-9.1 | National Resource Center for Health and Safety in Child Care and Early Education |
| PA-9.2 | National Resource Center for Health and Safety in Child Care and Early Education |
| PA-9.3 | National Resource Center for Health and Safety in Child Care and Early Education |
| PA-10 | School Health Policies and Practices Study (SHPPS), CDC/NCHHSTP |
| PA-11.1 | National Ambulatory Medical Care Survey (NAMCS), CDC/NCHS |
| PA-11.2 | National Ambulatory Medical Care Survey (NAMCS), CDC/NCHS |
| PA-13.1 | National Household Travel Survey (NHTS), DOT/FHA |
| PA-13.2 | National Household Travel Survey (NHTS), DOT/FHA |
| PA-14.1 | National Household Travel Survey (NHTS), DOT/FHA |
| PA-14.2 | National Household Travel Survey (NHTS), DOT/FHA |

# Table 33–3. Midcourse Health Disparities[1] for Population-based Physical Activity Objectives

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

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 | 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]** |
| **PA-1** Adults engaging in no leisure-time physical activity (age-adjusted, percent, 18+ years) (2014) | | | 1.118* | | | | | | | | 1.423* | | | | | | | 2.283* | | | | | | 2.233* | | | 1.770* | | | 1.234* |
| **PA-2.1** Adults engaging in regular physical activity—Light or moderate for 150+ minutes/week, vigorous for 75+ minutes/week, or an equivalent combination (age-adjusted, percent, 18+ years) (2014) | | | 1.132* | | | | | | | | 1.196* | | | | | | | 1.405* | | | | | | 1.498* | | | 1.608* | | | 1.142* |
| **PA-2.2** Adults engaging in regular physical activity—Light or moderate for 300+ minutes/week, vigorous for 150+ minutes/week, or an equivalent combination (age-adjusted, percent, 18+ years) (2014) | | | 1.256* | | | | | | | | 1.140 | | | | | | | 1.432* | | | | | | 1.600* | | | 1.632* | | | 1.174* |
| **PA-2.3** Adults performing muscle-strengthening activities 2+ days/week (age-adjusted, percent, 18+ years) (2014) | | | 1.380* | | | | | | | | 1.206 | | | | | | | 1.668* | | | | | | 1.863* | | | 1.448* | | | 1.345* |
| **PA-2.4** Adults meeting physical activity and muscle-strengthening objectives (age-adjusted, percent, 18+ years) (2014) | | | 1.435* | | | | | | | | 1.225 | | | | | | | 1.765* | | | | | | 2.033* | | | 1.642* | | | 1.405* |
| **PA-3.1** Adolescents meeting guidelines for aerobic physical activity (percent, grades 9–12) (2013) | | | 2.063* | | | | | | | | 1.216 | | | | | | | | | | | | | | | | | | | |
| **PA-3.2** Adolescents meeting guidelines for muscle-strengthening activity (percent, grades 9–12) (2013) | | | 1.485* | | | | | | | | 1.056 | | | | | | | | | | | | | | | | | | | |

# Table 33–3. Midcourse Health Disparities[1] for Population-based Physical Activity 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

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 | 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]** |
| **PA-3.3** Adolescents meeting guidelines for aerobic physical activity and muscle-strengthening activity (percent, grades 9–12) (2013) | | | 2.319* | | | | | | | | 1.180 | | | | | | | | | | | | | | | | | | | |
| **PA-5** Adolescents participating in daily school physical education (percent, grades 9–12) (2013) | | | 1.454* | | | | | | | | 1.311 | | | | | | | | | | | | | | | | | | | |
| **PA-8.1** Children viewing no television or videos or playing video games on weekdays (percent, 0–2 years) (2007) | | | 1.015 | | | | | | | | 1.294 | | | | | | | | | | | a | | 1.149 | | | | | | |
| **PA-8.2.1** Children viewing television or videos or playing video games for no more than 2 hours a day (percent, 2–5 years) (2009–2012) | | | 1.001 | | | | | | | | 1.130* | | | | | | | | | | | b | c | 1.154* | | | | | | |
| **PA-8.2.2** Children and adolescents viewing television or videos or playing video games for no more than 2 hours a day (percent, 6–14 years) (2007) | | | 1.044* | | | | | | | | 1.222* | | | | | | | | | | | a | | 1.160* | | | | | | |
| **PA-8.2.3** Adolescents viewing television or videos or playing video games for no more than 2 hours a day (percent, grades 9–12) (2013) | | | 1.008 | | | | | | | | 1.243* | | | | | | | | | | | | | | | | | | | |
| **PA-8.3.1** Children using a computer for nonschool work for no more than 2 hours a day (percent, 2–5 years) (2009–2012) | | | 1.009 | | | | | | | | 1.043* | | | | | | | | | | | b | c | 1.023* | | | | | | |
| **PA-8.3.2** Children and adolescents using a computer for nonschool work for no more than 2 hours a day (percent, 6–14 years) (2007) | | | 1.009 | | | | | | | | 1.032 | | | | | | | | | | | a | | 1.022* | | | | | | |

# Table 33–3. Midcourse Health Disparities[1] for Population-based Physical Activity 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

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 | 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]** |
| **PA-8.3.3** Adolescents using a computer for nonschool work for no more than 2 hours a day (percent, grades 9–12) (2013) | | | 1.034 | | | | | | | | 1.177* | | | | | | | | | | | | | | | | | | | |
| **PA-11.1** Office visits for cardiovascular disease, diabetes, or hyperlipidemia that include exercise counseling (age-adjusted, percent, 20+ years) (2010) | | | 1.112 | | | | | | | | 1.268 | | | | | | | | | | | | | | | | d | d | 1.145 |
| **PA-11.2** Physician visits by child or adult patients that include exercise counseling (age-adjusted, percent) (2010) | | | 1.133 | | | | | | | | 1.107 | | | | | | | | | | | | | | | | d | d | 1.429 |
| **PA-13.1** Walking for transportation—Adults—Trips of 1 mile or less (age-adjusted, percent, 18+ years) (2009) | | | 1.092* | | | | | | | | 1.448* | | | e | | | | 1.189* | | | | | | | | | f | g | 1.202* |
| **PA-13.2** Walking to school—Children and Adolescents—Trips of 1 mile or less (percent, 5–15 years) (2009) | | | 1.032 | | | | | | | | 1.231 | | | | | | | | | | | | | | | | f | g | 1.583* |
| **PA-14.1** Bicycling for transportation—Adults—Trips of 5 miles or less (age-adjusted, percent, 18+ years) (2009) | | | 4.278* | | | | | | | | 1.320 | | | e | | | | 1.899* | | | | | | | | | f | g | 1.311 |

## Table 33–3. Midcourse Health Disparities[1] for Population-based Physical Activity Objectives—Continued

NOTES

See HealthyPeople.gov for all Healthy People 2020 data. The Technical Notes provide more information on the measures of disparities.

FOOTNOTES

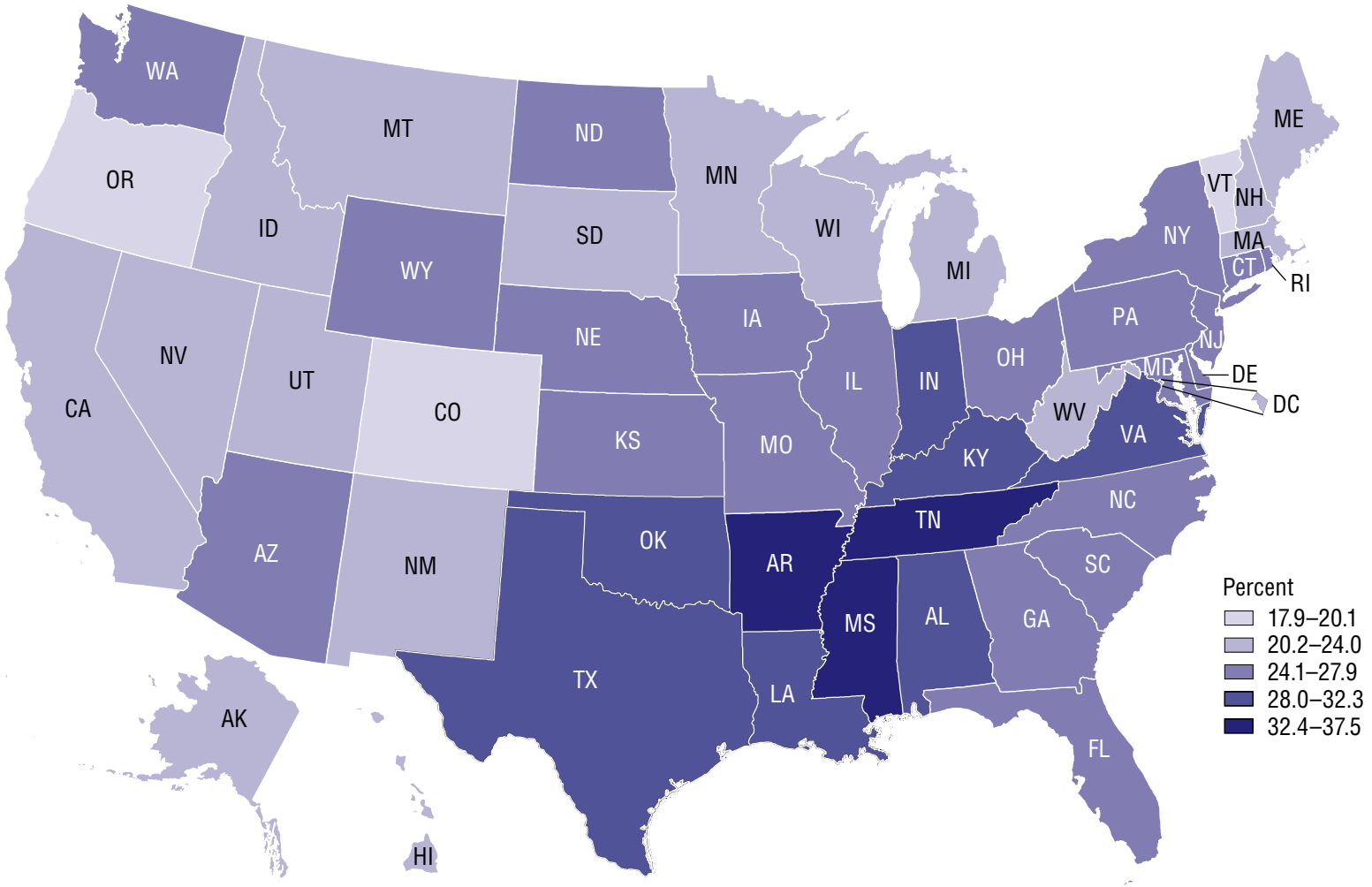
[1]**Health disparities** were assessed among population groups within specified demographic characteristics (sex, race and ethnicity, educational attainment, etc.). This assessment did not include objectives that were not population-based, such as those based on states, worksites, or those monitoring the number of events.
[2]When there were only two groups (e.g., male and female), the **summary disparity ratio** was the ratio of the higher to the lower rate.
[3]When there were three or more groups (e.g., white non-Hispanic, black non-Hispanic, Hispanic) and the most favorable rate ($R_b$) was the highest rate, the **summary disparity ratio** was calculated as $R_b/R_a$, 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 $R_a/R_b$.
[4]Unless otherwise footnoted, data do not include persons under age 25 years.
[5]Unless 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.
*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.
[a]Data are for persons whose family income was 400% or more of the poverty threshold.
[b]Data are for persons whose family income was 400% to 499% of the poverty threshold.
[c]Data are for persons whose family income was 500% or more of the poverty threshold.
[d]Location of the healthcare provider.
[e]Data are for persons who completed some college or received an associate's degree.
[f]Data are for urban locations.
[g]Data are for rural locations.

DATA SOURCES

| | |
|---|---|
| PA-1 | National Health Interview Survey (NHIS), CDC/NCHS |
| PA-2.1 | National Health Interview Survey (NHIS), CDC/NCHS |
| PA-2.2 | National Health Interview Survey (NHIS), CDC/NCHS |
| PA-2.3 | National Health Interview Survey (NHIS), CDC/NCHS |
| PA-2.4 | National Health Interview Survey (NHIS), CDC/NCHS |
| PA-3.1 | Youth Risk Behavior Surveillance System (YRBSS), CDC/NCHHSTP |
| PA-3.2 | Youth Risk Behavior Surveillance System (YRBSS), CDC/NCHHSTP |
| PA-3.3 | Youth Risk Behavior Surveillance System (YRBSS), CDC/NCHHSTP |
| PA-5 | Youth Risk Behavior Surveillance System (YRBSS), CDC/NCHHSTP |
| PA-8.1 | National Survey of Children's Health (NSCH), HRSA/MCHB and CDC/NCHS |
| PA-8.2.1 | National Health and Nutrition Examination Survey (NHANES), CDC/NCHS |
| PA-8.2.2 | National Survey of Children's Health (NSCH), HRSA/MCHB and CDC/NCHS |
| PA-8.2.3 | Youth Risk Behavior Surveillance System (YRBSS), CDC/NCHHSTP |
| PA-8.3.1 | National Health and Nutrition Examination Survey (NHANES), CDC/NCHS |
| PA-8.3.2 | National Survey of Children's Health (NSCH), HRSA/MCHB and CDC/NCHS |
| PA-8.3.3 | Youth Risk Behavior Surveillance System (YRBSS), CDC/NCHHSTP |
| PA-11.1 | National Ambulatory Medical Care Survey (NAMCS), CDC/NCHS |
| PA-11.2 | National Ambulatory Medical Care Survey (NAMCS), CDC/NCHS |
| PA-13.1 | National Household Travel Survey (NHTS), DOT/FHA |
| PA-13.2 | National Household Travel Survey (NHTS), DOT/FHA |
| PA-14.1 | National Household Travel Survey (NHTS), DOT/FHA |

## Map 33–1. Adults (18+ years) Who Engaged in No Leisure-time Physical Activity, by State: 2013

Healthy People 2020 Objective PA-1 ● Related State Data

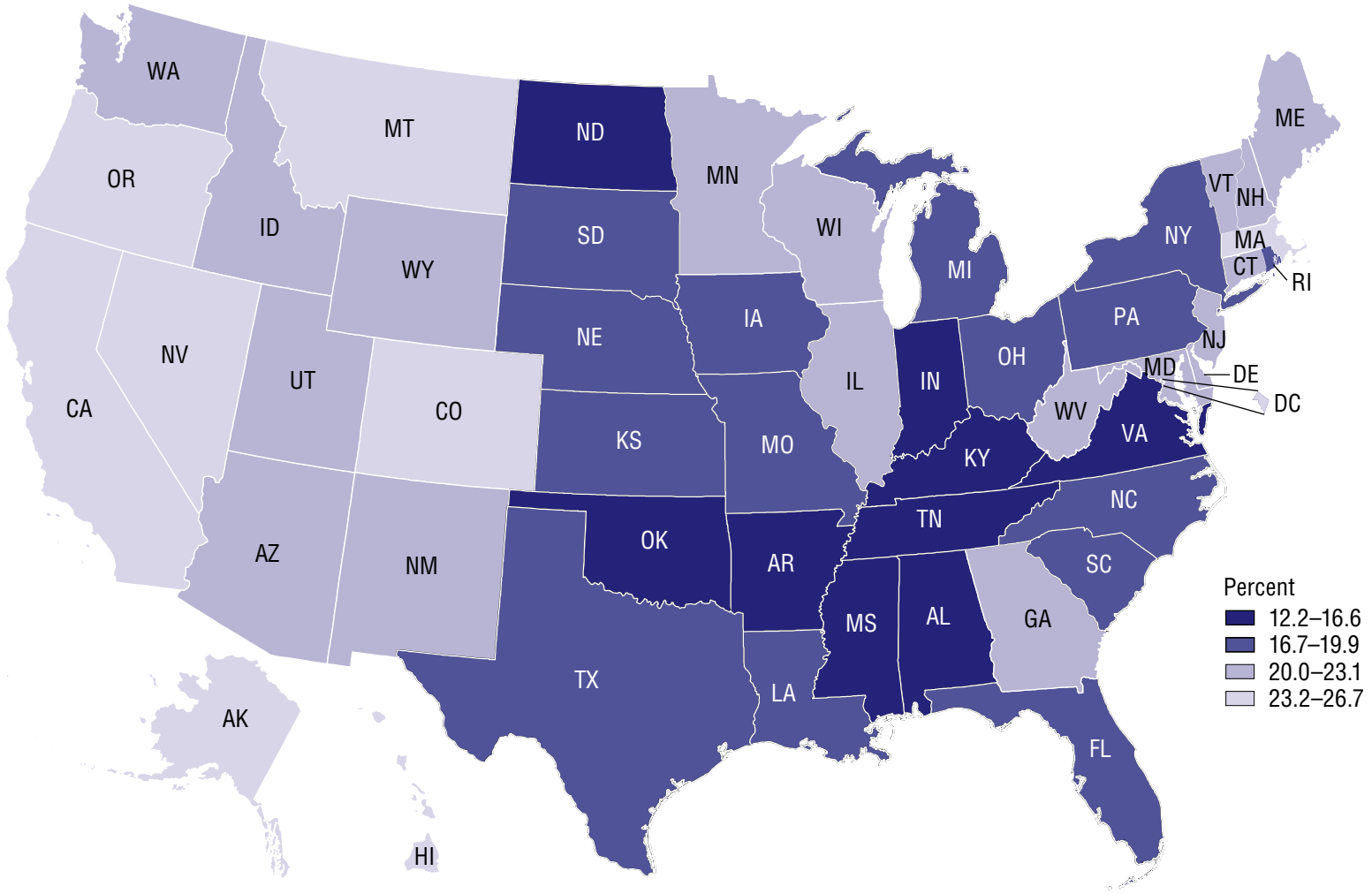



NOTES: Data are for persons aged 18 and over who did not engage in leisure-time physical activity, and are age-adjusted to the 2000 standard population. National data for the objective are based on self-reported leisure-time physical activity from the National Health Interview Survey (NHIS) and are the basis for setting the national target of 32.6%. State data from the Behavioral Risk Factor Surveillance System (BRFSS) are based on self-reported leisure-time physical activity. Data from the NHIS (30.3% in 2013) may not be directly comparable to the all-states combined data from the BRFSS (25.9% 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 33–2. Adults (18+ years) Who Met Guidelines for Aerobic and Muscle-strengthening Physical Activity, by State: 2013

Healthy People 2020 Objective PA-2.4 ● Related State Data

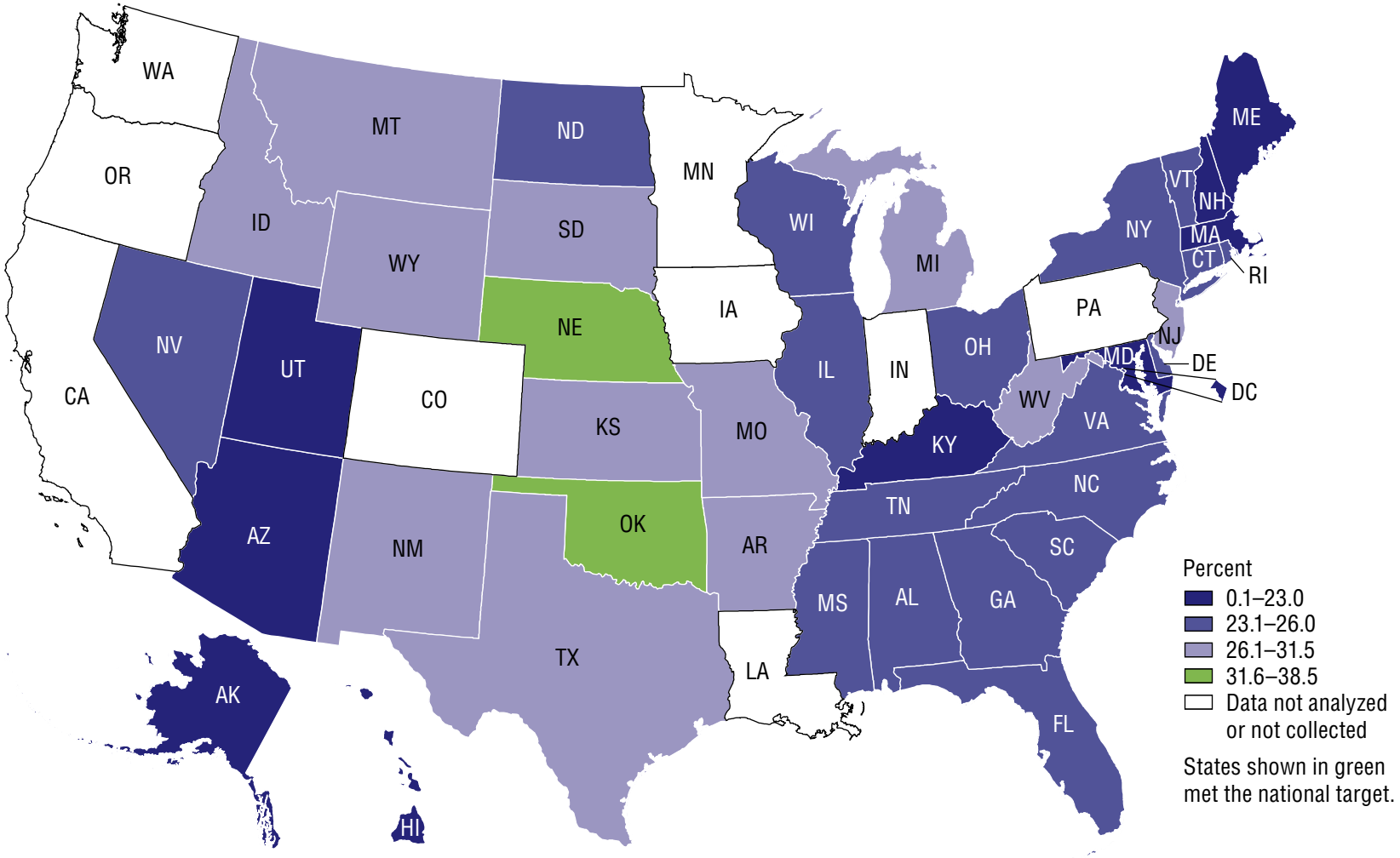



NOTES: Data are for adults aged 18 and over who reported light or moderate leisure-time physical activity for at least 150 minutes per week, vigorous physical activity for at least 75 minutes per week, or an equivalent combination of moderate and vigorous-intensity activity and reported doing muscle-strengthening physical activity at least twice per week. Data are age-adjusted to the 2000 standard population. National data for the objective are based on self-reported physical activity from the National Health Interview Survey (NHIS) and are the basis for setting the national target of 20.1%. State data from the Behavioral Risk Factor Surveillance System (BRFSS) are based on self-reported leisure-time physical activity. Data from the NHIS (20.8% in 2013) may not be directly comparable to the all-states combined data from the BRFSS (20.2% 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 33–3. Adolescents (grades 9–12) Who Met Guidelines for Aerobic Physical Activity, by State: 2013

Healthy People 2020 Objective PA-3.1 ● National Target = 31.6% ● National Rate = 27.1%




NOTES: Data are for students in grades 9–12 who were physically active for a total of at least 60 minutes per day on seven of the past seven days. Data were collected but not analyzed for California, Colorado, Indiana, Iowa, and Pennsylvania. Data were not collected for Louisiana, Minnesota, Oregon, and Washington. Data are displayed by a modified 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: Youth Risk Behavior Surveillance System (YRBSS), CDC/NCHHSTP