



New Mexico *State Nutrition, Physical Activity, and Obesity Profile*

Obesity has important consequences on our nation's health and economy. It is linked to a number of chronic diseases, including coronary heart disease, stroke, diabetes, and some cancers (NIH Clinical Guidelines, 1998). Among adults, the medical costs associated with obesity are estimated at 147 billion dollars (Finkelstein, 2009). Many American communities are characterized by unhealthy options when it comes to diet and physical activity. We need public health approaches that make healthy options available, accessible, and affordable for all Americans.

New Mexico - State Nutrition, Physical Activity, and Obesity Profile

CDC's Division of Nutrition and Physical, and Obesity (DNPAO) supports the nation's capacity to address public health in all policies and establish successful and sustainable interventions to support healthy eating and active living. The Division provides support (i.e., implementation and evaluation guidance, technical assistance, training, surveillance and applied research, translation and dissemination, and partnership development) to states, communities and national partners to implement policy, system, and environmental strategies. The goal is to improve dietary quality, increase physical activity and reduce obesity across multiple settings—such as child care facilities, workplaces, hospitals and medical care facilities, schools, and communities.

State Population of New Mexico

- Estimated Total Population 2010⁽¹⁾
= 2,059,179
- Adults age 18 and over⁽²⁾
= 74.8% of the total population in 2010
- Youth under 18 years of age⁽¹⁾
= 25.2% of the total population in 2010

⁽¹⁾ U.S. Census Bureau. State and County QuickFacts. 2011. Available online at <http://quickfacts.census.gov/qfd/index.html>

⁽²⁾ Calculated estimated = 100% minus percent of the total population under 18 years old, using State and County QuickFacts, 2010 data from the U.S. Census.

Adult Overweight and Obesity

Overweight and Obesity⁽³⁾

- 59.8% were overweight, with a Body Mass Index of 25 or greater.
- 25.1% were obese, with a Body Mass Index of 30 or greater.

Dietary Behaviors⁽⁴⁾

- 29.8% of adults reported having consumed fruits at the recommended level of 2 or more times per day.
- 27.3% of adults reported having consumed vegetables at the recommended level of 3 or more times per day.

Physical Activity⁽⁵⁾

- 48.6% of adults achieved at least 300 minutes a week of moderate-intensity aerobic physical activity or 150 minutes a week of vigorous-intensity aerobic activity (or an equivalent combination).
- 22.4% of New Mexico's adults reported that during the past month, they had not participated in any physical activity.

Source of Adult Obesity Data:

⁽³⁾ CDC. Behavioral Risk Factor Surveillance System: Prevalence and Trend Data—Overweight and Obesity, U.S. Obesity Trends, Trends by State 2010. Available online at http://nccd.cdc.gov/NPAO_DTM/

Source of Adult Fruit and Vegetable Data:

⁽⁴⁾ CDC. *MMWR* September 2010 State-Specific Trends in Fruit and Vegetable Consumption Among Adults United States, 2000–2009. Available online at <http://www.cdc.gov/mmwr/pdf/wk/mm5935.pdf>

Source of Adult Physical Activity Data:

⁽⁵⁾ CDC. BRFSS Behavioral Risk Factor Surveillance System: Prevalence and Trend Data—Physical Activity, U.S. Physical Activity Trends by State 2009–2010. Available online at http://nccd.cdc.gov/NPAO_DTM/

Adolescent Overweight and Obesity

Overweight and Obesity⁽⁶⁾

- 14.6% were overweight ($\geq 85^{\text{th}}$ and $< 95^{\text{th}}$ percentiles for BMI by age and sex, based on reference data)
- 13.5% were obese ($\geq 95^{\text{th}}$ percentile BMI by age and sex, based on reference data)

Unhealthy Dietary Behaviors⁽⁶⁾

- **Fruit consumption:** 73.1% ate fruits or drank 100% fruit juice less than 2 times per day during the 7 days before the survey (100% fruit juice or fruit).
- **Vegetable consumption:** 83.3% ate vegetables less than 3 times per day during the 7 days before the survey (green salad; potatoes, excluding French fries, fried potatoes, or potato chips; carrots; or other vegetables).
- **Sugar-sweetened beverage consumption:** 30.4% drank a can, bottle, or glass of soda or pop (not including diet soda or diet pop) at least one time per day during the 7 days before the survey.

New Mexico - State Nutrition, Physical Activity, and Obesity Profile

Physical Activity⁽⁶⁾

- **Achieved recommended level of activity:** Only 23.4% were physically active* for a total of at least 60 minutes per day on each of the 7 days prior to the survey.
- **Participated in daily physical education:** 30.2% of adolescents attended daily physical education classes in an average week (when they were in school).

Physical Inactivity⁽⁶⁾

- **No activity:** 15.5% did not participate in at least 60 minutes of physical activity on any day during the 7 days prior to the survey.
- **Television viewing time:** 32.6% watched television 3 or more hours per day on an average school day.

The 2010 New Mexico School Health Profiles assessed the school environment, indicating that among high schools⁽⁷⁾

- 52.3% did not sell less nutritious foods and beverages anywhere outside the school food service program.
- 11% always offered fruits or non-fried vegetables in vending machines and school stores, canteens, or snack bars, and during celebrations whenever foods and beverages were offered.
- 57.4% prohibited all forms of advertising and promotion of candy, fast food restaurants, or soft drinks in all locations. All school-related locations were defined as in school buildings; on school grounds, including on the outside of the school building, on playing fields, or other areas of the campus; on school buses or other vehicles used to transport students; and in school publications.

Sources of Adolescent Obesity, Fruit and Vegetable, Sugar-sweetened Beverages, and Physical Activity Data:

* Physical activity defined as "any kind of physical activity that increases your heart rate and makes you breathe hard some of the time."

⁽⁶⁾ CDC, Division of Adolescent and School Health. The 2009 Youth Risk Behavior Survey. Available online at <http://www.cdc.gov/HealthyYouth/yrbs/index.htm>

⁽⁷⁾ CDC, Division of Adolescent and School Health. The 2010 School Health Profiles. Available online at <http://www.cdc.gov/healthyyouth/profiles/index.htm>

Child Overweight and Obesity

Breastfeeding⁽⁸⁾

Increasing breastfeeding initiation, duration, and exclusivity is a priority strategy in CDC's efforts to decrease the rate of childhood obesity throughout the United States.

- 73.1% of infants were Ever Breastfed.
- 51.8% of infants were Breastfed for at least 6 months.

Body Mass Index^{(9)*}

Among New Mexico's children aged 2 years to less than 5 years *

- 13.7% were overweight (85th to < 95th percentile BMI-for-Age).
- 11.7% were obese (\geq 95th percentile BMI-for-Age).

Sources of Breastfeeding Data:

⁽⁸⁾ CDC. Division of Nutrition, Physical Activity, and Obesity Breastfeeding Report Card 2011. Centers for Disease Control and Prevention National Immunization Survey, Provisional Data, 2008births. Available online at <http://www.cdc.gov/breastfeeding/data/reportcard2.htm>

Sources of Child Obesity Data:

⁽⁹⁾ CDC. Division of Nutrition, Physical Activity, and Obesity. 2010 Pediatric Nutrition Surveillance System, Table 6 (PedNSS). http://www.cdc.gov/pednss/pednss_tables/tables_health_indicators.htm

* BMI data only includes low-income children from the PedNSS sample and do not represent all children.

* BMI data is based on 2000 CDC growth chart percentiles for BMI-for-age for children 2 years of age and older.

New Mexico's Response to Obesity

Healthy Kids Healthy Communities (HKHC)

Healthy Kids Healthy Communities is a community-driven effort bringing local leaders and community members together to develop collaborative one-year and five-year action plans with the goal of reducing childhood obesity. Based on a socio-ecological framework, HKHC connects multiple programs across six community settings: built-environment, community-at-large, education, food system, healthcare system and the workplace. The program

New Mexico - State Nutrition, Physical Activity, and Obesity Profile

began in the town of Las Cruces in 2007, expanding each year to additional areas, including numerous Tribal communities. The HKHC model has dual approach of creating healthy environments and motivating kids to make healthy choices. In 2009, the Healthy Kids Las Cruces was named by the HSC Foundation as one of the top 10 models in the nation for helping to reduce childhood obesity Physical Activity in afterschool/child care facilities

Healthy Kids NM Community Grants

The New Mexico Department of Health's program, Healthy Kids NM, is working to create healthy environments and policies that will empower children, families and communities to make healthier food choices, increase physical activity, and achieve healthy weights. In 2009/2010, 33 community organizations across the state were awarded \$5,000 grants to support implementation of innovative childhood obesity prevention programs.

Healthy Kids NM - BMI Surveillance

During the 2010/2011 school year, Healthy Kids NM collected population-based BMI surveillance data on kindergarten and 3rd grade students.

Healthy Kids in Schools

Healthy Kids in Schools is a pilot program that brings together state and local partners to assist elementary schools integrate wellness policies that promote healthy eating and physical activity into daily school life.

Nutrition and Fitness 5.2.1.0 Challenge

The 5.2.1.0 Challenge calls on elementary students to promise that each day they will eat at least 5 servings of fruit and vegetables, spend no more than 2 hours watching television or playing videos, get at least 1 hour of exercise, and eliminate soda pop from their diets. The challenge continues for a set period of time and recognizes children for their achievements.

Farm to School Program Example: Healthy Eating By Design

Since 2001, the New Mexico Farm to School Program has linked New Mexico's farmers to local school districts, helping them to sell on average \$400,000 annually in fresh produce. With help from the Robert Wood Johnson Foundation and the Albuquerque Alliance for Active Living, the Healthy Eating by Design Initiative at Valle Vista School puts fresh fruits grown by local farmers into the hands of more than 500 children twice each week. The initiative provides bilingual nutrition and wellness information for the children and their parents.

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Finkelstein, EA, Trogon, JG, Cohen, JW, and Dietz, W. Annual medical spending attributable to obesity: Payer- and service-specific estimates. Health Affairs 2009; 28(5): w822-w831.

