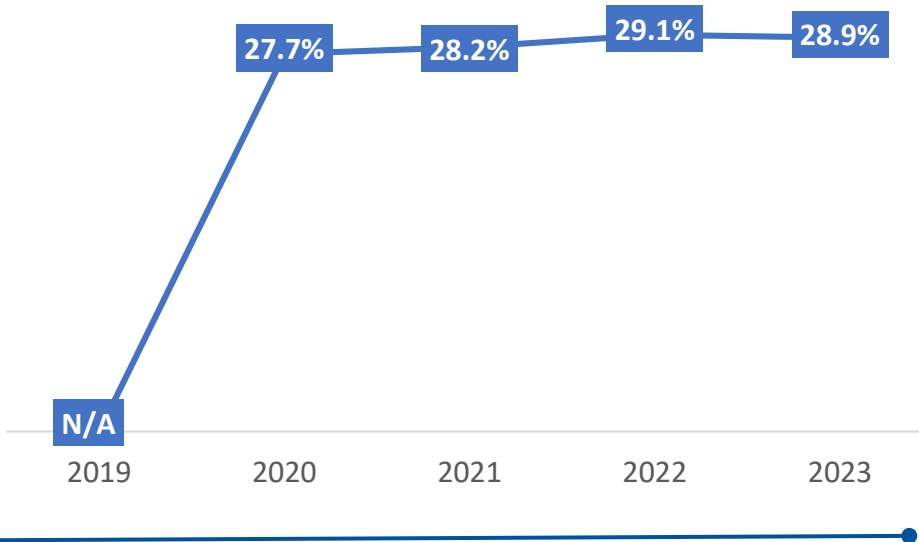


# The State of Obesity 2024: Better Policies for a Healthier America

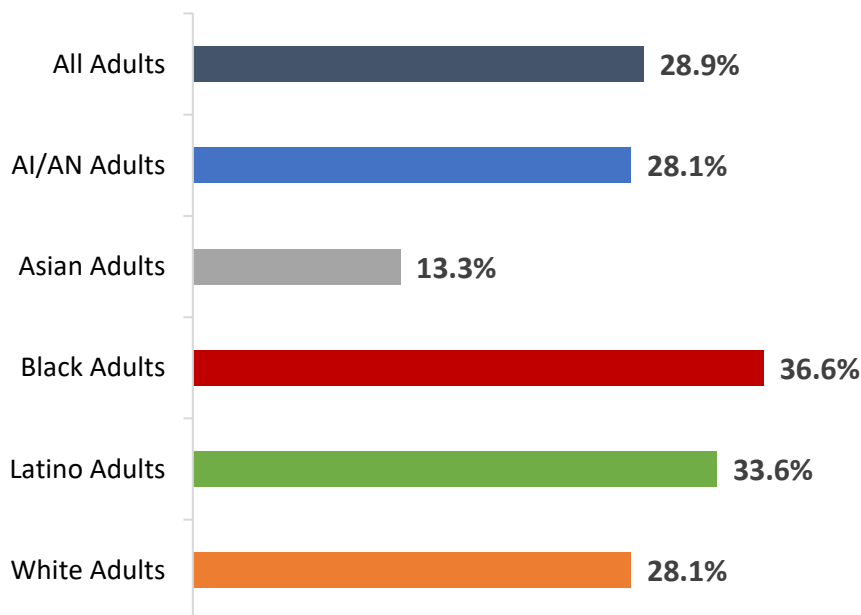
## Special Feature: Food Environment and Systems

New Jersey Obesity Rates Over Time, 2019-2023



New Jersey Obesity Rates by Ethnic and Racial Group, 2021-2023

Adult obesity rates by race/ethnicity is calculated over a three-year period (2021-2023) to obtain a sufficient sample size.



### Key Report Takeaways

- ✓ Nationwide, the adult obesity rate is 42 percent.
- ✓ The rate of obesity among U.S. children ages 2 to 19 is nearly 20 percent.
- ✓ Over the past 20 years, adult obesity increased 37 percent, and childhood obesity increased 42 percent.
- ✓ Continuous increases in obesity rates across population groups underscore that obesity is caused by a combination of factors, including societal, biological, genetic, and environmental, which are often beyond personal choice.
- ✓ 23 states have adult obesity rates over 35 percent, but in 2012 zero states were in that category.
- ✓ Factors such as poverty, food insecurity, housing instability, and lack of access to quality healthcare are key drivers of the differences in obesity rates across racial and ethnic groups.

### Special Feature: Food Environment and Systems

- ✓ The 2024 Special Feature focuses on the country's food environment and factors that affect food consumption such as food policy, supply, access, and pricing, and the influence of food advertising on what people eat.

For the full report, go to:

<https://www.tfah.org/report-details/state-of-obesity-2024/>

## Policy Recommendations



Increase funding for the CDC's National Center for Chronic Disease Prevention and Health Promotion, including the Racial and Ethnic Approaches to Community Health (REACH), Healthy Tribes, and State Physical Activity and Nutrition (SPAN) programs.



Decrease food insecurity for children, infants, and adults by expanding access and increasing benefits for the Supplemental Nutrition Assistance Program (SNAP) and the Special Supplemental Nutrition Program for Women, Infants, and Children (WIC).



Implement a mandatory front-of-package label (FOPL) system for packaged food to help consumers make informed choices.



Improve students' nutrition by making healthy school meals for all a permanent policy, maintain updated school nutrition standards, and increase reimbursement rates for school meals.



Expand public health efforts to address structural drivers of chronic disease, like access to transportation and healthy food, by passing the Improving Social Determinants of Health Act.



Re-implement the Childhood Obesity Research Demonstration (CORD) to inform how to translate USPSTF recommendations into lifestyle interventions and clinical interventions.



Broaden access to affordable healthcare by further extending the ACA Marketplace tax credits and requiring coverage with no cost sharing for U.S. Preventive Services Task Force recommended obesity prevention programs under all insurance types, regardless of legal challenges.



Impose a national excise tax on sugary drinks and devote the revenue to chronic disease prevention, in addition to changing tax law to limit unhealthy food marketing to children by eliminating business cost deductions related to advertising of unhealthy food and beverages to young people.



Expand support for maternal and child health and increase rates of breastfeeding by increasing funding for the Title V Maternal and Child Health (MCH) Block Grant Program and WIC breastfeeding peer counselors.



Convene an inter-agency working group to study how best to limit children's exposure to unhealthy food marketing in online spaces, both in school and outside of school.