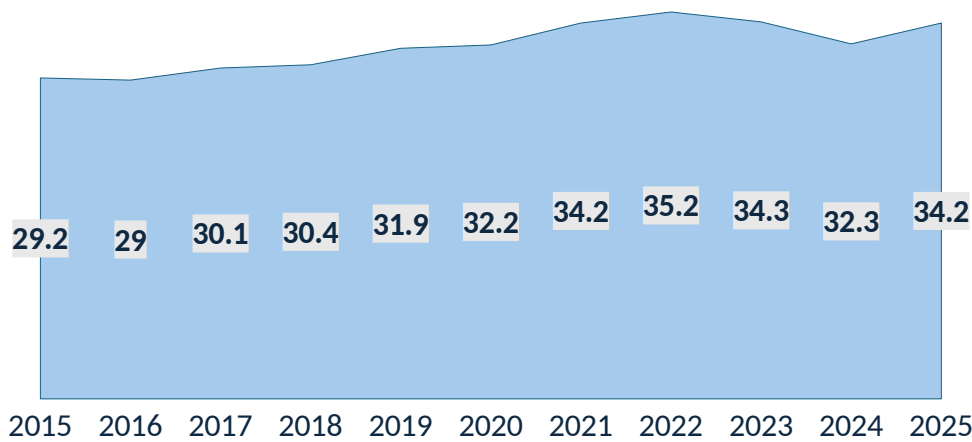


The State of Obesity 2026: Better Policies for a Healthier America

Virginia Adult Obesity Rates 2015-2025



Source: TFAH Analysis of BRFSS data

Fast Facts about Obesity in the United States

- 40.3%** National Adult Obesity Rate, 2021-2023
- + 32%** Change in Adult Obesity Rate from 1999-2000 to 2021-2023
- 21.1%** National Youth Obesity Rate, 2021-2023
- +52%** Change in Youth Obesity Rate from 1999-2000 to 2021-2023

Source: TFAH Analysis of NHANES data

- 21** States with Adult Obesity Rates Above 35 percent, 2025
- 4** States with Adult Obesity Rates Above 35 percent, 2015

Source: TFAH Analysis of BRFSS data

Key Report Takeaways

- ✓ Obesity and other chronic conditions continue to be an urgent public health challenge – influenced by dietary trends, as well as social, economic and environmental conditions. Successfully reducing obesity related chronic disease will require sustained systematic efforts across all levels of government.
- ✓ Proposed FY 2027 budget changes would eliminate the Division of Nutrition, Physical Activity, and Obesity within CDC's National Center for Chronic Disease Prevention and Health Promotion, threatening cornerstone obesity and chronic disease prevention programs.
- ✓ Provisions in OBBBA have reduced access to healthy, affordable meals. An estimated 5 million people – including 1.5 million children – have already lost access to the Supplemental Nutrition Assistance Program (SNAP), a critical source of food and nutrition security for many Americans.

Special Feature: How the Dietary Guidelines for American's Shape Food and Nutrition Programs

- ✓ When new Dietary Guideline are released, USDA develops guidance for federal food and nutrition programs for alignment with the Guidelines. This includes programs like the National School Lunch Program, WIC, and the Child and Adult Care Food Program (CACFP).
- ✓ A School Nutrition Association survey found 99 percent of school programs needed more funding to expand scratch cooking and reduce reliance on processed foods. Almost all school meal programs report that they would need more staff (94%), training (95%), and equipment and infrastructure (94%) to reach dietary goals like those set out in the newest Dietary Guidelines.

Policy Recommendations



Congress should support public health infrastructure by increasing investments in CDC's National Center for Chronic Disease Prevention and Health Promotion and the Division of Nutrition, Physical Activity, and Obesity to support prevention activities across the country.



The administration should ensure federal public health agencies are fully staffed to carry out their missions.



Congress should support programs that address the root causes of poor health, including economic opportunity, housing, transportation, and education. For example, sustained investments in complete streets and other programs that support active mobility in transportation reauthorization help make physical activity safe and accessible.



Congress should work to improve nutritional quality and nutrition security by reversing the changes to the SNAP program that have led to reduced SNAP access for families in need.



Federal and state policymakers should expand access to healthy school meals for all schoolchildren and, in the interim, ensure all eligible schools participate in the Community Eligibility Provision.



The U.S. Food and Drug Administration should create and implement a mandatory front-of-package nutrition label system for packaged foods to help consumers make informed choices.



Congress should close tax loopholes and eliminate business-cost deductions related to the advertising of unhealthy food and beverages to children.



Policymakers should support programs like Academic Enrichment Grants and Every Kid Outdoors that encourage physical activity in childhood, setting children up with a foundation for a healthy, active lifestyle.