RURAL & KEY FACTS SHEET MINORTY March 2022

Health Research Center

Rates and Trends of Childhood Overweight/Obesity in the United States and South Carolina

<u>GOAL</u>

To estimate childhood overweight/obesity rates across the U.S. at the region, state and county level, as well as for various sociodemographic groups

BACKGROUND

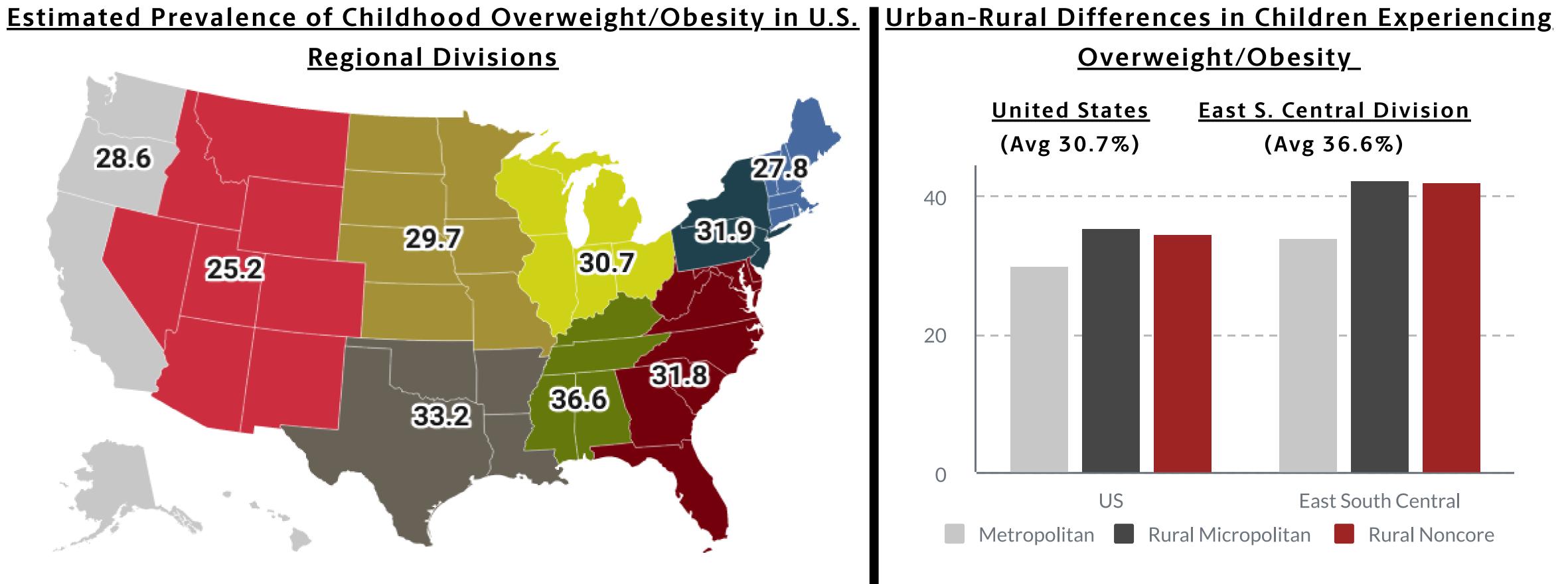
Identifying areas and groups with high rates of childhood overweight/obesity can be used percentile classified as overweight. to design and implement programs specific to community needs. The data presented here can help inform decisions to determine where resources will have the highest

METHODS

We used the 2016 National Survey of Children's Health (NSCH), including persons 10-17 years old (n=24,162). A Body Mass Index (BMI)* \geq 95th percentile is classified as obese; 85th up to the 95th

* BMI was originally developed among White men and has notable limitations for people of color and

women.



KEY FACT

The national childhood overweight/obesity prevalence was 30.7%. Four of the nine U.S. regional divisions had prevalence rates higher than the average with the highest prevalence in the East South Central Division.

KEY FACT

Rural micropolitan and noncore areas had higher overweight/obesity prevalence rates in the U.S. overall and the East South Central Division.

ABOUT US

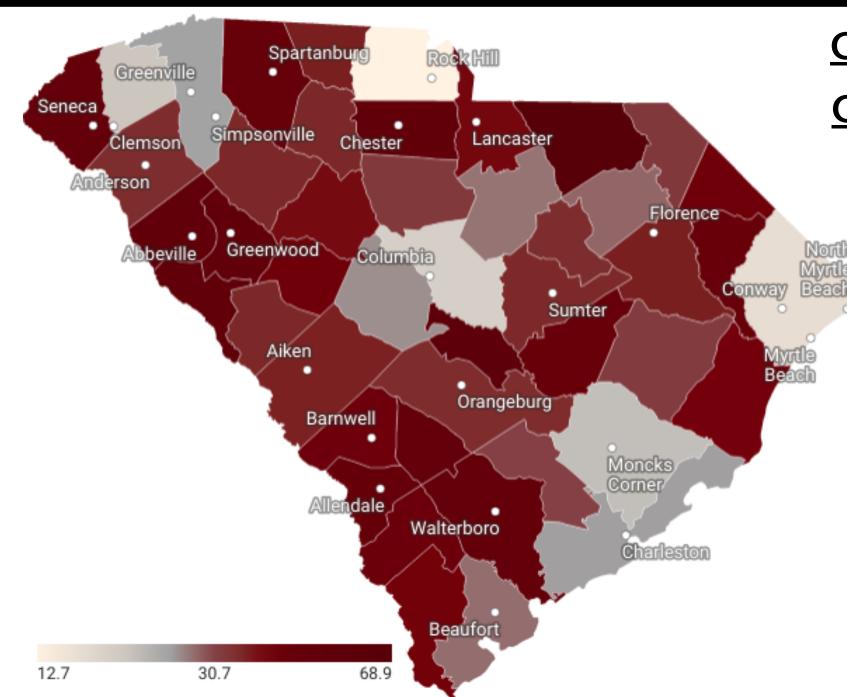


The Rural and Minority Health Research Center's mission is to illuminate and address the problems experienced by rural and minoritized populations in order to guide research, policy, and related advocacy.

CONTACT

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County Childhood Obesity/

Overweight Prevalence, S.C.

KEY FACT

Children in rural South Carolina have higher rates of overweight/obesity (47.9%) than children in South Carolina's urban areas (28.7%).