

Hawaii State Factsheet ⁱ

Key Points

- Hawaii ranked 3rd for protective factors against childhood obesity and 20th for healthy neighborhood environments. ⁱⁱⁱ
- Obesity among low-income, preschool-aged children lowered from 10 percent in 1998 to 9 percent in 2008.
- Among adults, the prevalence of obesity did not reach 30 in any of 5 counties by 2007.
- 35 percent of adults in Hawaii are overweight and 23 percent are obese.
- Hawaii will spend over 1.5 billion dollars annually by 2018 on health care costs attributable to obesity.

There are many interacting determinants of childhood obesity. Physical activity and media time are important contributors which may have a greater impact on certain groups such as young children

POSITIVE BEHAVIORS BY RACE, INCOME, INSURANCE		HI (%)	Nation (%)	Best state(%)	
% of children ages 6-17 who are physically active at least 4 days a week					
overall		69.1	64.3	72.8	VT
by race/ ethnicity	White non-Hispanic	73	69	74.7	NC
	Hispanic	71	51.8	72.2	MT
by household income	0-99% FPL	69.7	53.8	78.6	MN
	400% +	73.4	70.9	77.6	AL
by insurance status	None	81.1	54.5	81.1	HI
	Public	69.8	60	74.3	AK
	Private	68.6	67.6	75.2	VT
% of children ages 6-17 with 2 hours or less or no daily screen time					
overall		80.1	78.1	87.7	VT
by race/ ethnicity	White non-Hispanic	87.7	82.9	96.9	DC
	Hispanic	80	75.2	93.3	UT
by household income	0-99% FPL	64.2	68.8	82.4	UT
	400% +	88.1	86	92.5	WA
by insurance status	None	72.8	72.4	89.3	UT
	Public	70.8	70.1	86.1	WY
	Private	82.8	82.4	90.3	VT

Parent physical activity is a strong predictor of the activity of their children

% OF PARENTS PHYSICALLY ACTIVE, 4 or more days/ week		HI (%)	Nation (%)	Best state(%)	
Mother		39.9	32.9	42.9	VT
Father		57.6	44.9	57.6	HI

i. The first factsheet can be found at: <http://www.nichq.org/pdf/Hawaii.pdf>. It contains other data, including the obesity prevalence for all children

ii. Obesity defined as Body Mass Index (BMI) at or above the 95th percentile.

iii. For rankings, 1st is best and 50th is worst. Rankings are based on cumulative percents from 2007 National Survey of Children's Health. Protective factors = % reporting positive social skills + % always engaging in school + % in families which eat meals together every day. Neighborhood environment = % living in supportive neighborhoods + % in neighborhoods with no detracting elements (litter, graffiti, etc.) + % living in neighborhoods with parks, recreation centers and sidewalks

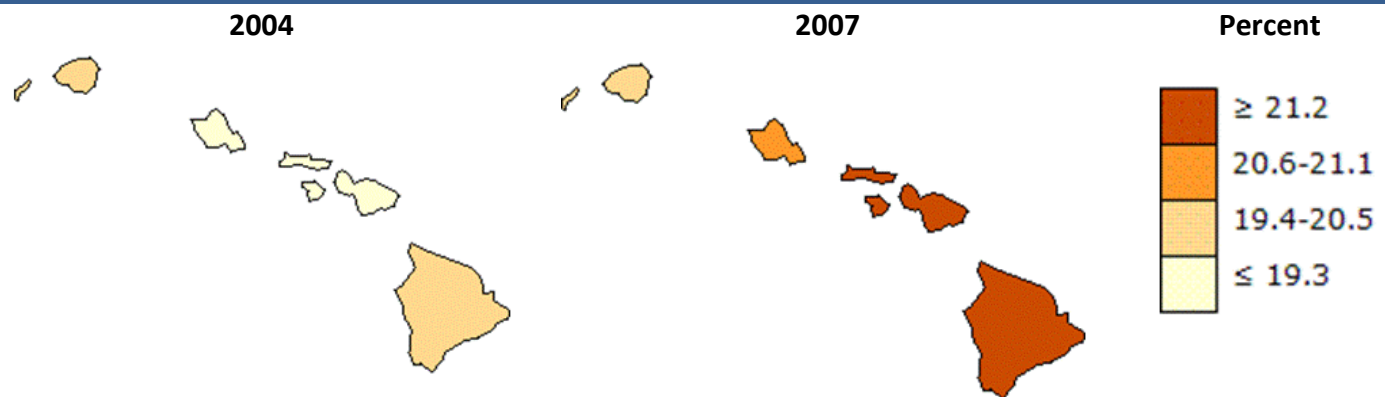
The community in which a child lives influences their daily access to healthy food and physical activity

LIVING IN HEALTHY NEIGHBORHOOD ENVIRONMENTS		HI (%)	Nation (%)	Best state(%)	
% of children living in supportive neighborhoods					
overall		86.1	83.2	92.9	UT
by race/ ethnicity	White non-Hispanic	89.1	88.8	94.7	UT
	Hispanic	86.8	76.1	90.6	VT
by household income	0-99% FPL	85.1	70.7	89.2	UT
	400% +	92.2	91.1	98	UT
% of children living in neighborhoods with NO graffiti, dilapidated housing or litter					
overall		60	71.4	78	MA
by race/ ethnicity	White non-Hispanic	68.7	75.6	81.9	CT
	Hispanic	53.5	66.5	86.8	AL
by household income	0-99% FPL	51	57.4	72.9	CO
	400% +	69.3	83.2	90.5	FL
% of children living in neighborhoods with parks, recreation centers, and sidewalks					
overall		79.1	65.1	87.4	UT
by race/ ethnicity	White non-Hispanic	81.2	62.6	95.2	DC
	Hispanic	77.7	62.7	82.1	SD
by household income	0-99% FPL	65	57.6	88.2	MA
	400% +	83.3	73.4	92.4	DC

Other factors in the social environment may also protect against obesity

PROTECTIVE FACTORS	HI (%)	Nation (%)	Best state(%)	
Positive social skills	94.9	93.6	97.1	MN
Usually or always engages in school	79.6	80.5	86	MA
Involved in at-least one after-school activity	86.8	80.7	90.5	MN
Family eats meals together every day	52.7	45.8	54.2	ID

AGE-ADJUSTED ESTIMATES OF THE PERCENT OF ADULTS WHO ARE OBESE IN HAWAII



Data from Centers for Disease Control and Prevention: National Diabetes Surveillance System. Available online at: <http://www.cdc.gov/diabetes/statistics/index.htm>.

COST OF ADULT OBESITY IN HAWAII, MILLIONS OF DOLLARS

2000 (actual)	2008 (projected)	2013 (projected)	2018 (projected)
290	307	601	1,576

Source: 2000 data are from Finkelstein, et al: "State-level estimates of annual medical expenditures attributable to obesity". 2008 - 2018 projected estimates are from Thorpe: "The Future Costs of Obesity: National and State Estimates of the Impact of Obesity on Direct Health Care Expenses"