BRFSS Brief

Number 1310

The Behavioral Risk Factor Surveillance System (BRFSS) is an annual statewide telephone survey of adults developed by the Centers for Disease Control and Prevention and administered by the New York State Department of Health. The BRFSS is designed to provide information on behaviors, risk factors, and utilization of preventive services related to the leading causes of chronic and infectious diseases, disability, injury, and death among the noninstitutionalized, civilian population aged 18 years and older.

Sugar Sweetened Beverages

New York State Adults, 2011

Introduction and Key Findings

Sugary drinks or sugar-sweetened beverages (SSBs), including regular soda, sports drinks, fruit drinks, energy drinks, and caloric sweetened water, are the largest source of added sugar in the diets of Americans.¹ SSBs provide only empty calories; they are of no nutritional value.¹ Increased consumption of SSBs is associated with weight gain and increased risk for diabetes and cardiovascular disease.^{2,3}

Consumption of SSBs among adults has increased dramatically over the past two decades in the United States. During 2005-06, adults in the United States consumed, on average, an estimated 46 gallons per year of SSBs.⁴ Increases in SSB consumption among adults and children are likely to have contributed to increases in the prevalence of obesity and diabetes observed nationally and in New York State.

The New York State Prevention Agenda 2013-2017 established a goal to decrease the percentage of adults ages 18 years and older who consume one or more sugary drink per day by 5% among all adults and by 10% among adults with an annual household income of less than \$25,000.⁵

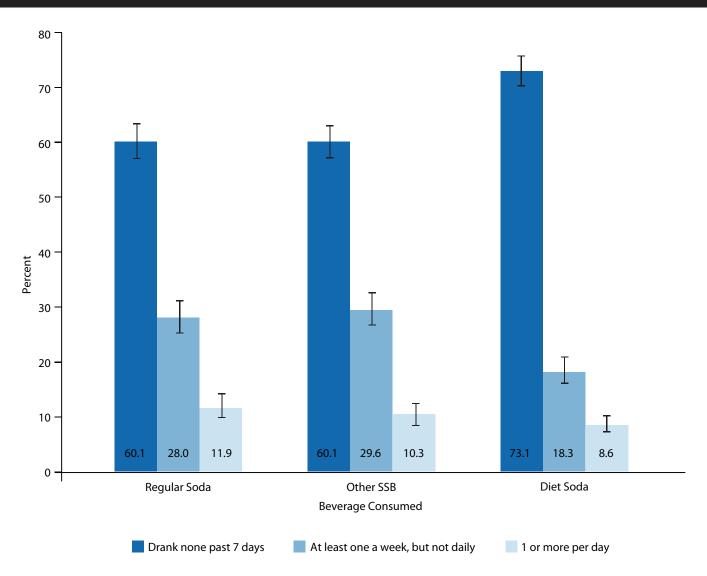
KEY FINDINGS

In New York State, nearly one in five adults (19.7%) drinks at least one or more soda or other SSB per day. Daily consumption of soda or other SSBs is more prevalent among non-Hispanic black adults (29.3%) and those with a household income of less than \$25,000 (24.1%) and less prevalent among adults over 65 years of age (12.1%) and those with a college degree (12.0%).

BRFSS questions

- During the past 7 days, how many times did you drink a can, bottle or glass of regular soda, such as Coke, Pepsi, or Sprite? Do not include diet soda, seltzer, club soda.
- 2. During the past 7 days, how many times did you drink a can, bottle or glass of diet soda, such as Diet Coke, Diet Pepsi, or Diet Sprite? Do not include regular soda.
- 3. During the past 7 days, how many times did you drink a can, bottle or glass of sweetened beverage, such as Snapple, Gatorade, SunnyD, Hawaiian Punch, Hi-C, Kool-Aid, lemonade, or sugar sweetened iced tea?

Figure 1. Frequency of consumption of regular soda, other sugar-sweetened beverages (SSBs) and diet soda among New York State adults, 2011 BRFSS



Note: Error bars represent 95% confidence intervals.

Changes to BRFSS Methodology

Beginning in 2011, BRFSS data includes data from interviews completed by people with cell phones in addition to interviews completed by people with landlines. The data also reflect changes in how the Centers for Disease Control and Prevention (CDC) weight the data. Weighting ensures that the data collected are as representative of New York's population as possible. The new method of weighting enables more demographic information about the respondents to be incorporated into the weighting. While these two changes improve the accuracy of the BRFSS, they may result in prevalence estimates that are significantly different from those previously calculated. **Because of the differences in data collection, it is not appropriate to compare 2011 data to prior years and the BRFSS 2011 prevalence data should be considered a baseline year for data analysis.**

Daily Consumption of Soda and Sugar-Sweetened Beverages (SSBs) among New York State adults: 2011 BRFSS

	Consumed at Least One Regular Soda Per Day ^a		Consumed at Least One Other SSB Per Day ^b		Consumed at Least One Regular Soda or SSB Per Day ^{a,b}	
	% ^c	95% Ci ^c	%	95% Ci	%	95% Ci
New York State (NYS) [n= 3,058]	11.9	9.9-14.3	10.3	8.5-12.3	19.7	17.2-22.4
Sex						
Male	14.2	10.7-18.5	11.7	8.9-15.3	22.7	18.7-27.4
Female	9.8	7.8-12.3	8.9	7.1-11.2	16.9	14.3-19.9
Age (years)						
18-24	15.8	8.4-27.8	11.5	5.2-23.5	26.5	16.2-40.2
25-34	14.7	9.0-23.1	12.4	7.8-19.3	22.2	15.6-30.7
35-44	15.2	10.3-22.1	12.3	8.1-18.3	23.1	17.1-30.3
45-54	11.5	8.1-15.9	11.3	8.3-15.1	20.3	16.1-25.4
55-64	9.5	6.1-14.7	7.7	5.3-11.1	17.1	12.8-22.5
65+	6.3	4.6-8.7	7.0	5.1-9.5	12.1	9.6-15.1
Race/ethnicity						
White non-Hispanic	10.5	8.4-13.2	8.0	6.2-10.1	16.7	14.0-19.7
Black non-Hispanic	13.9	8.5-21.9	18.8	13.1-26.2	29.3	21.9-38.0
Hispanic	13.4	8.0-21.6	12.7	7.9-19.7	22.9	15.9-31.8
Other non-Hispanic	16.6	8.5-29.7	12.3	5.9-23.9	24.3	14.9-37.0
Income						
<\$15,000	14.4	8.9-22.4	11.4	6.6-19.1	23.2	15.9-32.6
\$15,000-\$24,999	13.0	8.4-19.6	14.9	10.3-21.2	24.6	18.5-32.0
\$25,000-\$34,999	12.5	7.6-19.8	12.9	8.2-19.7	23.5	16.6-32.1
\$35,000-\$49,99"	12.1	7.2-19.7	10.5	6.5-16.6	20.6	14.3-28.7
\$50,000-\$74,999	13.4	7.6-22.5	8.4	4.1-16.3	19.0	12.5-27.7
\$75,000 and greater	6.9	4.5-10.4	6.4	4.4-9.3	11.4	8.4-15.2
Missing ^d	16.4	10.0-25.9	11.9	6.9-19.9	25.6	17.6-35.6
Educational attainment						
Less than high school (HS)	20.6	13.6-30.0	10.1	6.4-15.6	27.2	19.5-36.7
High school or GED	13.0	9.3-17.8	9.9	7.0-13.9	21.2	16.6-26.6
Some post-HS	12.7	8.7-18.1	13.9	9.8-19.2	23.5	18.4-29.6
College graduate	6.6	4.5-9.4	7.6	5.5-10.4	12.0	9.3-15.4
Region						
New York City (NYC)	10.2	7.8-13.4	13.1	10.1-16.7	19.1	16.0-22.6
NYS exclusive of NYC	12.7	10.0-16.0	8.9	6.8-11.4	20.9	17.3-25.1

a Includes sugar-sweetened soda only

 $b\ Other\ sugar-sweetened\ beverages\ include\ sugar-sweetened\ drinks\ like\ iced\ tea, sports\ drinks\ or\ fruit\ punch.$

c % = weighted percentage; CI = confidence interval.

d "Missing" category included because more than 10% of the sample did not report income.

References

- 1. Guthrie JF, Morton JF. Food sources of added sweeteners in the diets of Americans. *J Am Diet Assoc*. 2000; 100:43-51.
- 2. Apovian CM. Sugar-sweetened soft-drinks, obesity, and Type 2 diabetes. *JAMA*, 2004;292(8): 978-979.
- 3. Vartanian LR, Schwartz MB, Brownell KD. Effects of soft drink consumption on nutrition and health: A systematic review and meta-analysis. *Am J Public Health*. 2007; 97(4):667-675.
- Bleich, SN, Wang YC, Wang Y, Gortmaker SL: Increasing consumption of sugar-sweetened beverages among US adults: 1988–1994 to 1999–2004. Am J Clin Nutr 2009;89: 372-381.
- New York State Prevention Agenda Preventing Chronic Diseases Action Plan available at: http://www.health.ny.gov/ prevention/prevention_agenda/2013-2017/docs/prevent_ chronic_diseases.pdf

Program Contributions

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Order Information

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