

ORIGINAL RESEARCH

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PEER REVIEWED

Conclusion

Introduction

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Data sources

Statistical analysis

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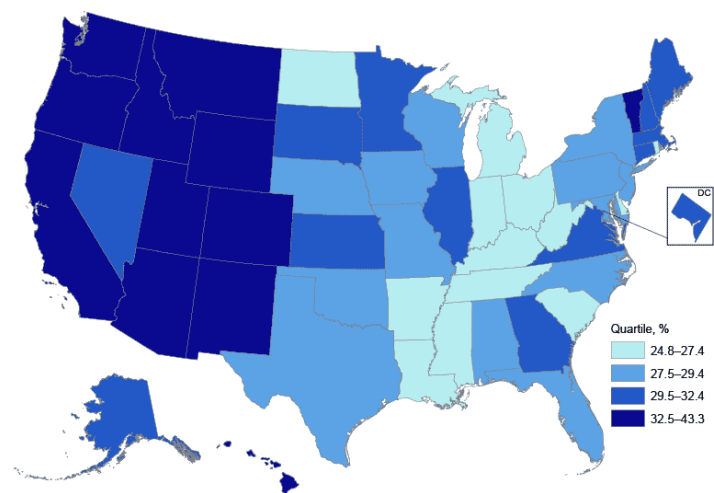


Figure 2. Age-adjusted prevalence of adults aged 21 years or older self-reporting 4 or 5 health-related behaviors, by state and quartile, Behavioral Risk Factor Surveillance System, 2013.

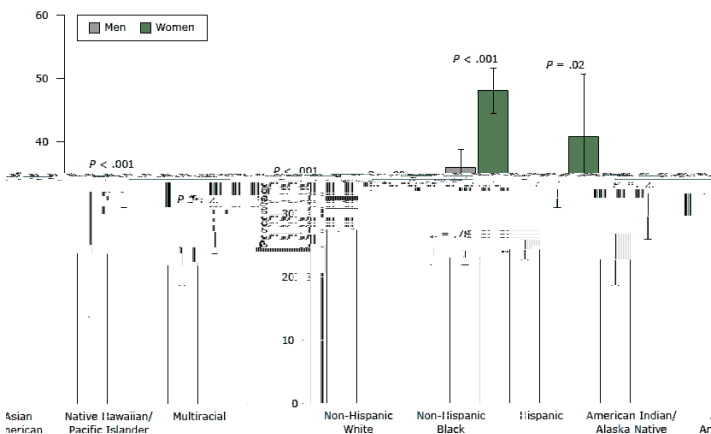


Figure 1. Age-adjusted prevalence of engaging in 4 or 5 health-related behaviors among adults aged 21 years or older, Behavioral Risk Factor Surveillance System, 2013. Error bars indicate 95% confidence intervals.

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Table 1. Age-Specific and Age-Adjusted Percentage^a of Adults Aged ≥21 Years Reporting Health-Related Behaviors, by Selected Characteristics, Behavioral Risk Factor Surveillance System, United States, 2013

Characteristic	No. of Survey Respondents ^b	Weighted % (95% CI), by No. of Behaviors Reported					
		0	1	2	3	4	5
Total, crude	395,343	1.4 (1.3–1.5)	8.4 (8.2–8.6)	24.3 (24.0–24.6)	35.4 (35.1–35.7)	24.3 (24.0–24.5)	6.3 (6.1–6.4)
Total, age-adjusted	395,343	1.5 (1.4–1.6)	8.7 (8.5–8.9)	24.5 (24.2–24.8)	35.2 (34.9–35.5)	24.0 (23.7–24.3)	6.2 (6.0–6.3)
Age, y							
21–24	12,944	2.2 (1.8–2.7)	9.5 (8.7–10.3)	24.2 (23.0–25.4)	32.8 (31.5–34.2)	24.9 (23.7–26.1)	6.4 (5.6–7.1)
25–34	39,546	2.0 (1.8–2.3)	11.2 (10.7–11.7)	27.2 (26.4–28.0)	34.1 (33.3–35.0)	20.3 (19.6–21.0)	5.2 (4.8–5.6)
35–44	49,106	1.8 (1.6–2.0)	10.1 (9.6–10.6)	26.1 (25.3–26.8)	34.9 (34.1–35.7)	21.9 (21.2–22.7)	5.2 (4.8–5.5)
45–54	70,152	1.7 (1.5–1.9)	10.3 (9.8–10.7)	27.2 (26.5–27.9)	34.4 (33.7–35.1)	21.5 (20.9–22.1)	5.0 (4.6–5.3)
55–64	90,411	1.0 (0.8–1.1)	7.8 (7.4–8.1)	24.6 (24.0–25.2)	36.8 (36.1–37.5)	24.3 (23.7–24.9)	5.6 (5.3–5.8)
≥65	133,184	0.2 (0.2–0.3)	2.9 (2.7–3.1)	17.2 (16.7–17.6)	37.5 (36.9–38.0)	32.1 (31.6–32.6)	10.1 (9.8–10.4)
Sex							
Men	166,193	1.7 (1.6–1.9)	9.9 (9.6–10.2)	26.3 (25.8–26.7)	35.0 (34.5–35.5)	22.3 (21.9–22.7)	4.8 (4.6–5.0)
Women	229,150	1.2 (1.1–1.3)	7.4 (7.1–7.6)	22.7 (22.3–23.1)	35.4 (35.0–35.9)	25.7 (25.3–26.2)	7.6 (7.3–7.8)
Race/ethnicity							
White, non-Hispanic	314,964	1.4 (1.3–1.5)	8.8 (8.5–9.0)	24.2 (23.9–24.5)	34.9 (34.6–35.3)	24.2 (23.9–24.6)	6.4 (6.3–6.6)
Black, non-Hispanic	29,901	2.2 (1.8–2.5)	11.1 (10.4–11.7)	28.0 (27.0–28.9)	35.7 (34.6–36.8)	19.7 (18.8–20.6)	3.5 (3.1–3.8)
Hispanic	22,379	1.3 (1.1–1.6)	7.6 (7.0–8.2)	26.4 (25.3–27.6)	36.4 (35.2–37.6)	23.3 (22.2–24.4)	4.9 (4.4–5.5)
American Indian/Alaska Native	5,990	2.0 (1.2–2.8)	12.1 (10.3–13.9)	27.9 (25.3–30.5)	32.2 (29.6–34.8)	21.4 (18.7–24.1)	4.4 (3.3–5.6)
Asian	6,935	0.6 (0.3–0.9)	4.3 (3.4–5.2)	17.9 (15.7–20.1)	35.3 (32.9–37.6)	30.4 (28.3–32.5)	11.6 (10.0–13.1)
Native Hawaiian/Pacific Islander	654	1.3 (0.3–2.3) ^c	16.5 (9.7–23.3)	22.3 (16.7–27.8)	26.5 (20.5–32.5)	27.7 (20.6–34.9)	5.7 (2.7–8.8)
Multiracial, non-Hispanic	7,243	2.0 (1.2–2.8)	12.0 (10.0–14.1)	25.9 (23.6–28.2)	35.6 (32.9–38.3)	19.4 (17.3–21.5)	5.1 (3.8–6.4)
Education							
Less than high school graduate	29,648	2.3 (1.9–2.7)	11.9 (11.2–12.7)	29.1 (28.0–30.2)	34.6 (33.4–35.9)	18.7 (17.7–19.6)	3.4 (2.9–3.8)
High school graduate or GED	110,984	2.1 (1.9–2.2)	10.9 (10.4–11.3)	26.7 (26.1–27.3)	34.5 (33.9–35.1)	21.0 (20.4–21.5)	4.9 (4.6–5.2)
Some college	108,707	1.6 (1.5–1.8)	9.1 (8.8–9.5)	25.3 (24.7–25.8)	35.1 (34.5–35.7)	22.9 (22.4–23.5)	5.9 (5.6–6.2)
College graduate	145,521	0.5 (0.4–0.5)	4.9 (4.7–5.1)	19.6 (19.2–20.0)	35.8 (35.3–36.3)	30.3 (29.8–30.8)	8.9 (8.6–9.1)

Abbreviations: CI, confidence interval, GED, general educational development.

^a Age-adjusted to the 2000 projected US population, except for age groups.

^b Unweighted sample of respondents. Categories might not sum to survey total because of respondents with missing data on characteristics.

^c Estimates are unreliable because relative standard error >0.3 or n < 50.

Table 2. Age-Adjusted Percentage^a of Adults Aged ≥21 Years Reporting Health-Related Behaviors, by State, Behavioral Risk Factor Surveillance System, United States, 2013

State	No. ^b	Weighted % (95% CI), by No. of Behaviors Reported					
		0	1	2	3	4	5
Alabama	5,411	1.0 (0.6–1.4)	8.4 (7.3–9.6)	26.5 (24.5–28.4)	35.5 (33.5–37.5)	23.2 (21.5–24.9)	5.4 (4.5–6.3)
Alaska	3,792	2.0 (1.2–2.8)	9.8 (8.2–11.3)	24.6 (22.6–26.6)	34.0 (31.8–36.1)	23.6 (21.7–25.4)	6.1 (5.0–7.1)
Arizona	3,430	0.8 (0.4–1.1)	8.0 (6.2–9.9)	22.9 (20.1–25.6)	34.8 (31.8–37.8)	26.7 (24.1–29.4)	6.8 (5.5–8.1)
Arkansas	4,273	2.3 (1.5–3.1)	10.6 (9.0–12.2)	27.3 (25.2–29.5)	34.7 (32.5–36.9)	20.9 (19.1–22.7)	4.2 (3.4–4.9)
California	8,893	0.9 (0.6–1.1)	6.3 (5.6–7.1)	21.5 (20.2–22.8)	35.5 (34.1–37.0)	27.8 (26.5–29.1)	7.9 (7.1–8.7)
Colorado	11,043	1.1 (0.8–1.5)	6.6 (5.9–7.3)	19.5 (18.4–20.5)	34.6 (33.4–35.8)	29.8 (28.7–30.9)	8.4 (7.8–9.1)
Connecticut	6,351	1.7 (1.1–2.3)	9.5 (8.3–10.7)	24.7 (23.0–26.4)	33.7 (31.9–35.6)	23.8 (22.2–25.4)	6.5 (5.6–7.4)
Delaware	4,327	1.5 (1.0–2.0)	8.6 (7.3–9.9)	27.4 (25.3–29.4)	35.5 (33.4–37.6)	21.5 (19.7–23.2)	5.6 (4.5–6.7)
District of Columbia	3,927	1.9 (1.0–2.9)	7.9 (6.5–9.4)	20.7 (18.7–22.7)	37.0 (34.6–39.4)	26.2 (24.1–28.3)	6.2 (5.2–7.2)
Florida	26,727	1.1 (0.8–1.3)	8.3 (7.4–9.2)	25.2 (23.8–26.6)	36.4 (34.9–38.0)	23.4 (22.1–24.7)	5.5 (4.8–6.3)
Georgia	6,488	1.5 (1.0–1.9)	8.9 (7.9–10.0)	24.1 (22.6–25.6)	35.0 (33.4–36.7)	24.4 (23.0–25.9)	6.0 (5.3–6.7)
Hawaii	6,775	1.0 (0.6–1.5)	6.3 (5.3–7.2)	21.3 (19.7–22.8)	35.1 (33.3–36.8)	27.1 (25.5–28.7)	9.2 (8.2–10.3)
Idaho	4,651	2.3 (1.3–3.3)	7.3 (6.1–8.5)	20.3 (18.6–22.1)	35.5 (33.4–37.7)	25.9 (24.1–27.7)	8.6 (7.4–9.9)
Illinois	4,981	1.4 (0.9–1.9)	8.2 (7.0–9.4)	26.1 (24.2–28.0)	34.8 (32.8–36.8)	23.5 (21.7–25.2)	6.0 (5.1–7.0)
Indiana	8,357	1.5 (1.1–1.9)	11.1 (10.1–12.2)	26.2 (24.8–27.6)	35.0 (33.6–36.5)	21.1 (19.9–22.3)	5.0 (4.5–5.5)
Iowa	6,845	1.8 (1.2–2.3)	10.8 (9.6–12.0)	25.0 (23.5–26.5)	34.6 (33.0–36.2)	22.4 (21.0–23.7)	5.5 (4.8–6.1)
Kansas	19,438	1.3 (1.0–1.5)	8.2 (7.7–8.8)	23.5 (22.7–24.3)	35.4 (34.5–36.3)	25.4 (24.6–26.2)	6.2 (5.8–6.6)
Kentucky	8,967	1.5 (1.1–2.0)	10.7 (9.6–11.9)	27.1 (25.6–28.7)	34.9 (33.3–36.6)	20.6 (19.3–21.9)	5.0 (4.3–5.7)
Louisiana	4,332	2.0 (1.1–2.9)	9.9 (8.3–11.6)	27.4 (25.0–29.8)	34.8 (32.5–37.2)	21.0 (19.0–23.0)	4.8 (3.9–5.8)
Maine	6,922	1.6 (1.0–2.2)	8.3 (7.3–9.4)	26.2 (24.6–27.8)	34.0 (32.3–35.6)	23.7 (22.3–25.1)	6.2 (5.4–6.9)
Maryland	10,145	1.2 (0.8–1.5)	8.9 (7.9–10.0)	25.7 (24.2–27.1)	35.0 (33.5–36.5)	23.3 (22.0–24.7)	5.9 (5.1–6.6)
Massachusetts	11,900	1.3 (0.9–1.8)	8.0 (7.1–8.8)	24.6 (23.2–25.9)	34.8 (33.4–36.2)	24.3 (23.1–25.5)	7.0 (6.4–7.7)
Michigan	10,887	2.0 (1.6–2.4)	9.8 (8.8–10.7)	27.0 (25.7–28.3)	33.9 (32.6–35.2)	21.8 (20.6–22.9)	5.6 (5.0–6.2)
Minnesota	11,827	1.7 (1.2–2.2)	9.4 (8.4–10.4)	24.3 (22.8–25.8)	33.9 (32.3–35.5)	23.8 (22.4–25.3)	6.9 (6.0–7.7)
Mississippi	6,025	1.6 (1.0–2.1)	10.7 (9.4–12.0)	27.4 (25.6–29.2)	34.6 (32.8–36.4)	21.5 (19.9–23.1)	4.3 (3.4–5.1)
Missouri	5,999	1.9 (1.0–2.8)	8.5 (7.4–9.7)	23.8 (22.1–25.6)	36.3 (34.4–38.3)	23.6 (22.0–25.2)	5.8 (5.0–6.7)
Montana	8,317	1.0 (0.7–1.3)	8.7 (7.7–9.6)	22.3 (21.0–23.6)	34.3 (32.7–35.8)	26.5 (25.0–27.9)	7.3 (6.5–8.1)
Nebraska	14,585	1.8 (1.3–2.2)	9.9 (8.9–10.8)	24.3 (23.1–25.5)	36.0 (34.6–37.4)	22.6 (21.4–23.7)	5.5 (4.9–6.0)
Nevada	4,250	1.3 (0.8–1.9)	7.8 (6.3–9.3)	24.8 (22.3–27.3)	35.9 (33.0–38.8)	24.5 (22.0–26.9)	5.8 (4.6–6.9)
New Hampshire	5,314	1.4 (0.9–1.9)	7.8 (6.7–8.9)	23.4 (21.7–25.2)	36.3 (34.4–38.3)	24.2 (22.6–25.8)	6.8 (5.8–7.8)
New Jersey	10,313	1.4 (1.0–1.8)	8.7 (7.8–9.6)	24.7 (23.4–26.0)	36.5 (35.0–38.0)	23.0 (21.7–24.3)	5.7 (5.0–6.3)
New Mexico	7,625	1.3 (0.9–1.7)	7.0 (6.1–7.8)	22.4 (20.9–23.9)	33.6 (31.9–35.2)	27.7 (26.1–29.3)	8.1 (7.2–9.0)
New York	6,991	1.6 (1.1–2.1)	8.7 (7.7–9.7)	26.2 (24.8–27.7)	35.3 (33.8–36.9)	22.4 (21.1–23.6)	5.7 (5.0–6.4)
North Carolina	7,143	1.2 (0.8–1.5)	8.7 (7.7–9.7)	24.3 (22.9–25.8)	36.4 (34.8–38.0)	22.8 (21.5–24.2)	6.6 (5.8–7.3)
North Dakota	6,479	1.7 (1.2–2.2)	11.2 (10.0–12.5)	27.5 (25.8–29.1)	34.9 (33.2–36.6)	20.6 (19.2–22.0)	4.2 (3.5–4.8)

Abbreviations: CI, confidence interval; NA, not applicable.

^a Age-adjusted to the 2000 projected US population.

^b Unweighted sample of respondents.

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Table 2. Age-Adjusted Percentage^a of Adults Aged ≥21 Years Reporting Health-Related Behaviors, by State, Behavioral Risk Factor Surveillance System, United States, 2013

State	No. ^b	Weighted % (95% CI), by No. of Behaviors Reported					
		0	1	2	3	4	5
Ohio	9,797	2.3 (1.7–2.9)	10.4 (9.4–11.3)	27.3 (25.9–28.7)	33.4 (31.9–34.9)	21.1 (19.9–22.3)	5.5 (4.8–6.2)
Oklahoma	7,025	1.8 (1.3–2.3)	10.1 (9.1–11.2)	25.1 (23.6–26.5)	34.9 (33.4–36.4)	22.7 (21.4–24.0)	5.4 (4.8–6.1)
Oregon	4,744	1.0 (0.5–1.5)	6.3 (5.2–7.5)	20.2 (18.6–21.9)	34.2 (32.3–36.1)	29.2 (27.4–31.0)	9.0 (7.9–10.1)
Pennsylvania	9,182	2.5 (1.9–3.0)	10.9 (9.9–11.9)	24.8 (23.5–26.1)	34.1 (32.7–35.5)	22.3 (21.1–23.6)	5.4 (4.8–6.1)
Rhode Island	5,226	1.7 (1.1–2.3)	10.5 (9.2–11.8)	26.6 (24.8–28.3)	34.9 (33.0–36.8)	21.7 (20.1–23.3)	4.7 (4.0–5.4)
South Carolina	8,788	1.8 (1.3–2.2)	10.0 (8.9–11.0)	24.7 (23.3–26.1)	36.3 (34.7–37.8)	22.2 (20.9–23.5)	5.1 (4.4–5.7)
South Dakota	5,842	1.6 (0.9–2.2)	8.3 (6.9–9.6)	22.9 (21.0–24.9)	35.5 (33.3–37.8)	26.1 (24.2–28.1)	5.6 (4.6–6.5)
Tennessee	4,510	1.5 (0.9–2.0)	10.5 (9.1–12.0)	26.2 (24.2–28.2)	36.2 (34.1–38.3)	21.2 (19.5–23.0)	4.3 (3.6–5.1)
Texas	8,459	1.8 (1.3–2.2)	8.6 (7.7–9.6)	24.4 (22.9–25.9)	36.2 (34.6–37.9)	23.4 (21.9–24.8)	5.6 (4.8–6.4)
Utah	10,532	0.7 (0.4–0.9)	4.8 (4.3–5.4)	17.5 (16.6–18.5)	33.7 (32.5–34.8)	32.0 (30.9–33.1)	11.3 (10.6–12.0)
Vermont	5,406	0.8 (0.5–1.2)	7.7 (6.6–8.8)	22.3 (20.7–24.0)	35.2 (33.4–37.0)	26.1 (24.5–27.7)	7.9 (7.0–8.8)
Virginia	6,851	1.4 (1.0–1.8)	8.9 (7.9–9.9)	24.7 (23.3–26.2)	35.0 (33.4–36.6)	23.7 (22.4–25.1)	6.2 (5.5–7.0)
Washington	9,518	1.1 (0.8–1.4)	7.9 (7.0–8.7)	22.3 (21.1–23.5)	34.6 (33.3–36.0)	26.5 (25.3–27.7)	7.5 (6.8–8.3)
West Virginia	5,106	1.9 (1.3–2.5)	10.6 (9.4–11.8)	25.2 (23.7–26.8)	35.5 (33.8–37.2)	21.5 (20.1–22.9)	5.3 (4.5–6.0)
Wisconsin	5,259	1.3 (0.8–1.7)	10.0 (8.6–11.5)	25.2 (23.3–27.2)	35.3 (33.1–37.5)	23.7 (21.8–25.6)	4.4 (3.6–5.3)
Wyoming	5,368	1.1 (0.6–1.6)	7.7 (6.6–8.9)	24.1 (22.2–26.0)	33.0 (31.1–34.9)	26.4 (24.7–28.1)	7.6 (6.7–8.6)
Total U.S.	395,343	1.5 (1.4–1.6)	8.7 (8.5–8.9)	24.5 (24.2–24.8)	35.2 (34.9–35.5)	24.0 (23.7–24.3)	6.2 (6.0–6.3)
U.S. median	NA	1.5	8.7	24.7	35.0	23.6	5.8

Abbreviations: CI, confidence interval; NA, not applicable.

^a Age-adjusted to the 2000 projected US population.

^b Unweighted sample of respondents.

Table 3. Examples of Strategies to Support Selected Healthy People 2020 Objectives

Healthy People 2020 Objective	Epidemiology and Surveillance	Environmental Approaches	Health System Strategies	Community–Clinical Linkages
	Collect, analyze, and share data to help identify and solve problems, evaluate public health efforts, and guide and monitor programs and interventions, research, and policies to improve public health.	Promote health and support and reinforce healthy behaviors in schools and child care settings, work sites, and communities.	Improve the delivery and use of clinical and other preventive services that are designed to prevent disease or detect it early, reduce risk factors, and manage complications.	Link community and clinical services to ensure that people with or at high risk of chronic diseases have access to the resources they need to prevent or manage these diseases.
Tobacco Use–1.1: Reduce cigarette smoking among adults	Conduct routine surveillance in BRFSS (adults), YRBSS (adolescents), NYTS (youth), NATS (adults), and YTS (youth) (http://www.cdc.gov/tobacco/data_statistics/index.htm).	- Implement comprehensive tobacco control programs (19). - Support increases in the price of tobacco products (19). - Conduct mass-reach tobacco counter-marketing campaigns (19). - Support tobacco-free policies in schools, work sites, public places, multiunit housing, and health care settings (www.thecommunityguide.org/tobacco). - Support community mobilization with additional interventions to restrict minors' access to tobacco products (19). - Support state quitline capacity (19).	- Expand insurance coverage so that all evidence-based cessation treatments are covered with no barriers to accessing coverage (19). - Inform tobacco users and their health care providers of their comprehensive cessation treatment insurance benefits (19). - Promote health systems changes including electronic health records with provider reminder systems that integrate tobacco screening and interventions into routine clinical care (19). - Promote screening for tobacco use and tobacco cessation treatments (counseling and medication) (19).	- Link health care systems with tobacco quitlines and other community-based cessation programs in the state through electronic health records (19). - Promote tobacco cessation in chronic disease self-management programs (19).
Physical Activity–2.1: Increase the proportion of adults engaged in aerobic physical activity of at least a moderate intensity for at least 150 min/week or 75 min/week of vigorous intensity, or an equivalent combination	Conduct routine surveillance in BRFSS (adults) and YRBSS (adolescents); SHPPS and Profiles (www.cdc.gov/healthyyouth/data/index.htm).	- Promote adoption of physical education/physical activity in schools (20). - Promote adoption of physical activity in child care programs and work sites (21). - Promote physical activity access and outreach (20). - Design streets and communities for safe physical activity (20).	Promote physical activity as a vital sign (www.uspreventiveservicestaskforce.org/Page/Document/RecommendationStatementFinal/healthy-diet-and-physical-activity-counseling-adults-with-high-risk-of-cvd).	Promote physical activity in chronic disease self-management programs (22).
Substance Abuse–15: Reduce the proportion of adults who drank excessively in the previous 30 days	Conduct routine surveillance in BRFSS (adults) and YRBSS (adolescents).	Support Community Guide–recommended strategies (23), such as alcohol-pricing strategies, regulating alcohol density,	Promote alcohol screening and brief interventions for adults during routine medical visits (24).	Promote adherence to the Dietary Guidelines on alcohol in chronic disease self-management programs (12).

Abbreviations: BRFSS, Behavioral Risk Factor Surveillance System; YRBSS, Youth Risk Behavior Surveillance System; NYTS, National Youth Tobacco Survey; NATS, National Adult Tobacco Survey; YTS, Youth Tobacco Survey; SHPPS, School Health Policies and Practices Study.

^a STOP–BANG sleep apnea questionnaire. STOP includes the following questions: 1) Do you SNORE loudly? 2) Do you often feel TIRED, fatigued, or sleepy during daytime? 3) Has anyone OBSERVED you stop breathing during your sleep? 4) Do you have or are you being treated for high blood PRESSURE? BANG includes the following questions: 1) BMI more than 35 kg/m²? 2) AGE over 50 years old? 3) NECK circumference greater than 16 inches (40 cm)? 4) GENDER is male?

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Table 3. Examples of Strategies to Support Selected Healthy People 2020 Objectives

Healthy People 2020 Objective	Epidemiology and Surveillance	Environmental Approaches	Health System Strategies	Community–Clinical Linkages
	Collect, analyze, and share data to help identify and solve problems, evaluate public health efforts, and guide and monitor programs and interventions, research, and policies to improve public health.	Promote health and support and reinforce healthy behaviors in schools and child care settings, work sites, and communities.	Improve the delivery and use of clinical and other preventive services that are designed to prevent disease or detect it early, reduce risk factors, and manage complications.	Link community and clinical services to ensure that people with or at high risk of chronic diseases have access to the resources they need to prevent or manage these diseases.
		dram shop liability, and preventing illegal sales.		
Nutrition and Weight Status–8: Increase the proportion of adults who are at a healthy weight (18.5–24.9 kg/m ²)	Conduct routine surveillance in BRFSS (adults) and YRBSS (adolescents).	- Promote adoption of food service guidelines/nutrition standards (including competitive foods) in schools, childcare programs, and work sites (20,21), including cafeterias, vending, and snack bars. - Promote policies and programs that expand access to healthy food and beverages in community settings, including food retailers, farmers markets, and restaurants (20).	- Promote a brief dietary assessment as part of annual examination. - Promote screening to measure the body mass index of patients during medical visits (www.uspreventiveservicestaskforce.org/Page/Document/UpdateSummaryFinal/obesity-in-adults-screening-and-management).	Promote physical activity, nutrition, and weight loss in chronic disease self-management programs.
Sleep Health–4: Increase the proportion of adults who get sufficient sleep	- Conduct routine surveillance in BRFSS (adults) and YRBSS (adolescents). - Conduct routine surveillance of school start times in school health profiles.	- Promote later school start policies for adolescents (25–27). - Promote healthy work shift schedules (27,28).	Promote sleep health screening and referrals to sleep specialists during medical visits (STOP–BANG^a) (27,29).	Promote sleep health awareness in chronic disease self-management programs.

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