

BRFSS Brief

Number 1804

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, 2016

Introduction and Key Findings

Sugary drinks or sugar-sweetened beverages (SSBs), including regular soda, fruit drinks, sports 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 little to no nutritional value. Studies have found that sugar-sweetened beverage consumption is linked to weight gain, metabolic syndrome, dental caries, and type 2 diabetes in adults.²

Consumption of SSBs has decreased over the past 20 years, but Americans still consume an average of 138 calories from SSBs on a given day.^{3,4} The 2015-2020 Dietary Guidelines for Americans recommend consuming less than 10 percent of calories from added sugars,⁵ and choosing beverages with no added sugars can help individuals to achieve a healthy diet. Consuming more than recommended levels can increase the risk of obesity, which has reached epidemic proportions in New York State and across the nation.

The New York State Prevention Agenda 2013-2018 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 due to higher baseline levels of sugary drink consumption.⁶

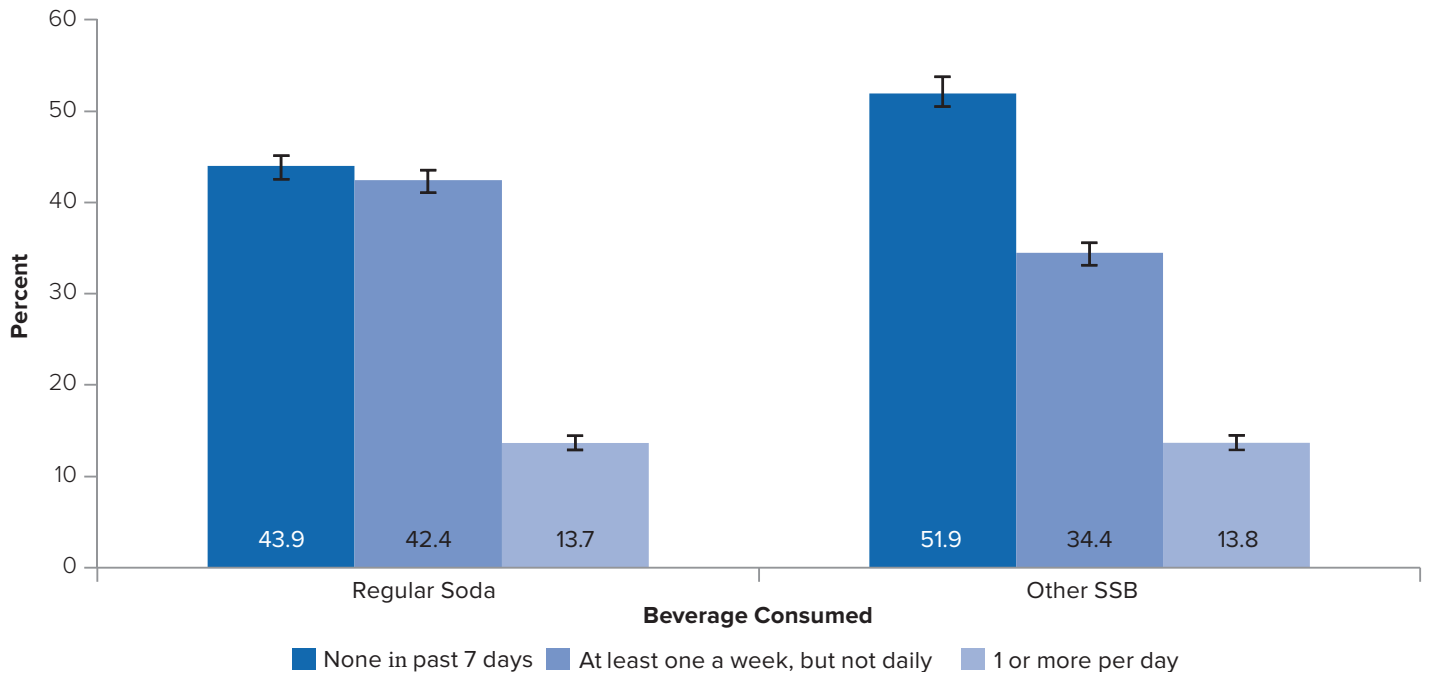
Key Findings

In New York State, more than one in five adults (23.2%) drinks at least one soda or other SSB per day. Daily consumption of soda or other SSBs is more prevalent among males (27.3%), 18- to 24-year-olds (32.3%), non-Hispanic black adults (31.3%), Hispanic adults (28.9%), those with a household income of less than \$25,000 (31.7%), and those living with disability (28.2%). Daily consumption of soda or other SSBs is less prevalent among adults with a college degree (13.5%).

BRFSS questions

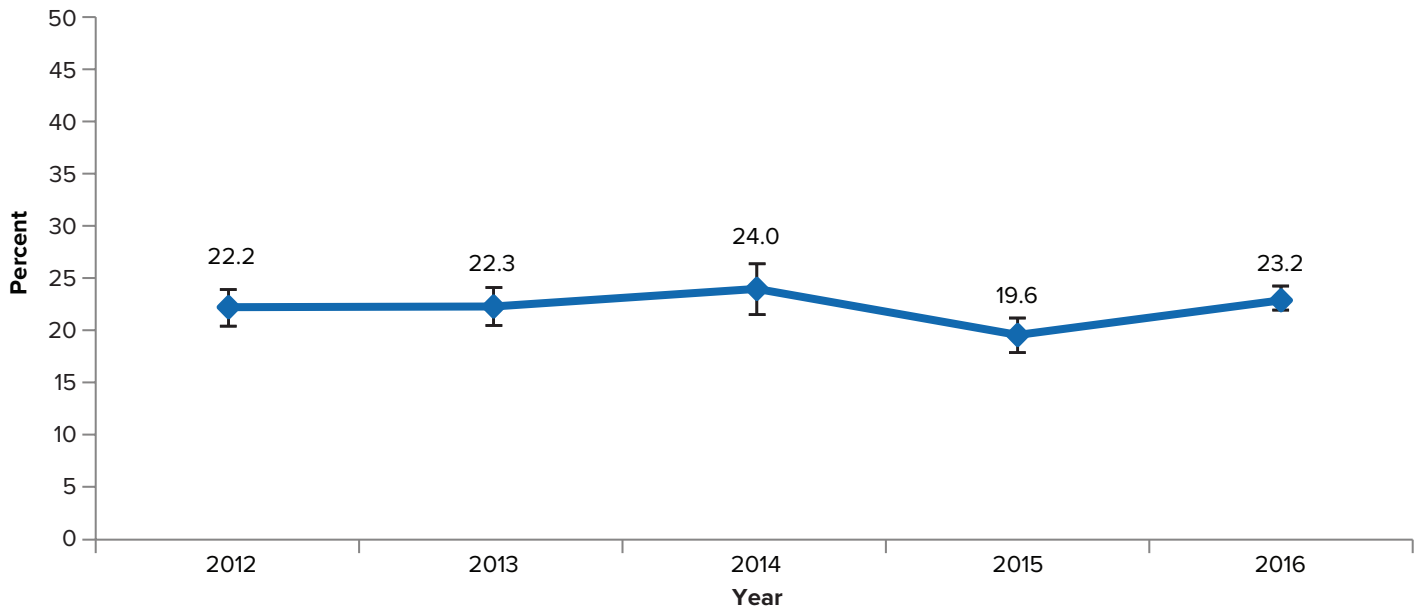
1. During the past 30 days, how often did you drink regular soda or pop that contains sugar?
Do not include diet soda or diet pop.
2. During the past 30 days, how often did you drink sugar-sweetened fruit drinks (such as Kool-aid and lemonade), sweet tea, and sports or energy drinks (such as Gatorade and Red Bull)? Do not include 100% fruit juice, diet drinks, or artificially sweetened drinks.

Figure 1. Frequency of consumption of regular soda and other sugar-sweetened beverages (SSBs) among New York State adults, 2016 BRFSS



Note: Error bars represent 95% confidence intervals.

Figure 2. Daily consumption of regular soda or other sugar-sweetened beverages* among New York State adults, by BRFSS survey year



Note: Error bars represent 95% confidence intervals.

*In 2012, the other sugar-sweetened beverage category included sweetened fruit drinks such as Koolaid, fruit juice cocktails and lemonade. In 2013, the category was broadened to include sweet tea, sports and energy drinks.

Daily consumption of soda and sugar-sweetened beverages (SSBs) among New York State adults, 2016 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}	
	% ^d	95% CI ^c	%	95% CI	%	95% CI
New York State (NYS) [n=34,190]	13.7	12.8-14.5	13.8	12.9-14.6	23.2	22.2-24.2
Sex						
Male	15.8	14.5-17.0	16.2	14.9-17.5	27.3	25.7-28.8
Female	11.8	10.6-12.9	11.6	10.5-12.7	19.6	18.2-20.9
Age (years)						
18-24	18.0	14.8-21.2	19.9	16.4-23.5	32.3	28.2-36.4
25-34	17.9	15.5-20.4	18.2	15.8-20.5	30.3	27.4-33.2
35-44	15.2	13.1-17.4	17.1	14.7-19.5	27.1	24.3-29.8
45-54	13.7	11.8-15.5	13.8	11.7-15.9	23.0	20.6-25.4
55-64	10.8	8.9-12.7	9.4	7.8-10.9	17.3	15.1-19.4
65+	9.2	7.8-10.6	8.1	6.9-9.3	15.0	13.3-16.6
Race/ethnicity						
White non-Hispanic	12.0	11.1-12.8	11.2	10.4-12.1	19.9	18.8-21.0
Black non-Hispanic	16.4	13.5-19.2	22.5	19.3-25.7	31.3	27.8-34.8
Hispanic	18.8	16.3-21.2	15.4	13.3-17.6	28.9	26.1-31.7
Other non-Hispanic	10.6	7.2-14.0	12.9	9.0-16.7	20.8	16.3-25.3
Income						
<\$25,000	20.2	18.2-22.2	18.1	16.1-20.0	31.7	29.4-34.1
\$25,000-\$49,999	14.9	12.9-16.9	14.9	13.0-16.8	25.2	22.8-27.5
\$50,000 and greater	9.2	8.1-10.2	10.6	9.4-11.7	17.2	15.8-18.6
Missing ^d	14.7	12.2-17.2	14.8	12.1-17.4	24.5	21.4-27.6
Educational attainment						
Less than high school (HS)	24.2	20.9-27.5	16.5	13.9-19.2	33.3	29.8-36.9
High school or GED	17.6	15.9-19.3	18.1	16.2-20.1	29.3	27.1-31.5
Some post-HS	13.3	11.7-14.8	13.8	12.2-15.4	23.2	21.3-25.2
College graduate	6.1	5.2-7.0	8.9	7.8-10.0	13.5	12.2-14.8
Disability^e						
Yes	18.4	16.5-20.3	15.7	13.9-17.5	28.2	26.0-30.5
No	12.3	11.4-13.3	13.2	12.2-14.2	21.8	20.6-22.9
Region						
New York City (NYC)	12.8	11.3-14.4	14.7	13.0-16.3	23.0	21.1-24.9
NYS exclusive of NYC	14.2	13.3-15.2	13.1	12.2-14.1	23.3	22.2-24.5

a Includes sugar-sweetened soda only.

b Other sugar-sweetened beverages include sugar-sweetened drinks like sweet tea, sports or energy drinks or fruit drinks such as lemonade..

c % = weighted percentage; CI = confidence interval.

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

e All respondents who reported having at least one type of disability (cognitive, mobility, vision, self-care, independent living or deafness)

References

1. Sources of Calories from Added Sugars among the U.S. Population, 2005-06. Epidemiology and Genomics Research Program website. National Cancer Institute. http://epi.grants.cancer.gov/diet/foodsources/added_sugars/. Updated April 22, 2016.
2. Malik VS, Hu FB. Fructose and Cardiometabolic Health: What the Evidence from Sugar-Sweetened Beverages Tells Us. *J Am Coll Cardiol*. 2015 Oct 6;66(14):1615-24
3. Kit BK, Fakhouri TH, Park S, Nielsen SJ, Ogden CL: Trends in sugar-sweetened beverage consumption among youth and adults in the United States: 1999-2010. *Am J Clin Nutr* 2013;98:180-8.
4. Bleich SN, Vercammen KA, Koma JW, Li Z: Trends in Beverage Consumption Among Children and Adults, 2003-2014. *Obesity* (2018) 26: 432-441.
5. U.S. Department of Health and Human Services, U.S. Department of Agriculture. 2015-2020 *Dietary Guidelines for Americans*. 8th ed. 2015.
6. New York State Prevention Agenda Preventing Chronic Diseases Action Plan available at: https://www.health.ny.gov/prevention/prevention_agenda/2013-2017/plan/chronic_diseases/focus_area_1.htm#sector

Program Contributions

New York State Department of Health
Bureau of Chronic Disease Evaluation and Research
Bureau of Community Chronic Disease Prevention

Order Information

Copies may be obtained by contacting:

BRFSS Coordinator
New York State Department of Health
Bureau of Chronic Disease Evaluation and Research
Empire State Plaza
Corning Tower, Rm. 1070
Albany, NY 12237-0679

Or by phone or electronic mail:

(518) 473-0673
or
BRFSS@health.ny.gov
or
www.health.ny.gov



Department
of Health