Underweight, overweight and obesity, self-reported (NHC) – *per cent, standardised*

Year		2015	2019
Geography	Weight category		
Nordland	underweight (BMI below 18.5)	:	:
	overweight or obese (BMI above 25)	55	57
	overweight (BMI 25-29)	38	39
	obese (BMI above 30)	17	19
Troms og Finnmark	underweight (BMI below 18.5)	:	:
	overweight or obese (BMI above 25)	52	55
	overweight (BMI 25-29)	38	38
	obese (BMI above 30)	15	17

CellMark Legend

..   Missing data
.   Not possible to calculate
:   Hidden value
     County level is not available before 2015

Description

Proportion of survey respondents who are underweight, overweight or obese. Based on self-reported height and weight. Age- and gender standardized figures.

To change the table, open "change selection of...".
Two measures are available. Use the Measure button to select:
1. per cent, standardized = percentage within the same gender and age group, standardized for age and gender composition.
2. Standardized ratio (Norway = 100) = Ratio between the Health region standardized rate and the national rate for a given year. Examples; ratio = 130 means that the Health region standardized rate is 30% higher than the national level. A ratio of 87 means that the Health region rate is 13% lower than the national level.

The following questions have been included in Statistics Norway's survey of level of living, health conditions since 1998:
- How tall are you, without shoes?
- How much do you weigh, without clothes or shoes? (for pregnant women, ask about their weight prior to pregnancy)

Body mass index (BMI) is calculated as body weight (kg) divided by height (m) squared. BMI is then classified according to WHO's definitions for the adult population:

- BMI below 18.5: underweight
- BMI 25.0-29.9: overweight
- BMI 30.0+: obese

For children and young people under 18 years IOTF's age- and gender-specific threshold values are used to classify overweight and obesity. These values are used to calculate the proportion of overweight for those younger than 18 years.

Rationale for indicator

Overweight and obesity increase the risk of type 2 diabetes, cardiovascular disease, hypertension, osteoarthritis of the knees and hips and some cancers such as colon cancer. Overweight and obesity can also have serious mental health consequences. There is no clear BMI threshold for when disease risks increases or decreases, the transitions are gliding.

Experience shows that for most people it is difficult to achieve lasting weight loss once you've been overweight. Prevention of obesity is therefore of great importance. Measures that can affect food and activity habits will be of particular importance.

At the population level, changes in the environment and lifestyle can explain the increase in the prevalence of overweight and obesity over the last decade. We live in a society that encourages physical inactivity, with a wide and tempting range of food. These are two factors that increase the risk of overweight and obesity.

Source

Statistics Norway

Collection

Data is collected every 3-4 years from Statistics Norway's survey on living conditions. People 16 years or older who are not living in institutions are included. Each survey provides an indication of the population's health at a given point in time (cross-sectional survey). Repetition of the survey provides an indication of developments in health over time. Data are nationally representative for people living outside institutions. Starting 2015, the survey is merged with the European Health Interview Survey (EHIS).

Interpretation and sources of error

Due to age and gender standardization, the figures are not comparable with data from the survey published by Statistics Norway.

Data quality

The health survey is a stable and regular source of data about different aspects of the population's health. In recent years, the survey has had a stable participation rate of around 60%, which is good compared with other health surveys in Norway. The questions concerning height and weight have remained unchanged and are comparable over time.

Statistical analysis

The method used for age standardisation is indirect standardisation using a fixed population reference. The reference is the sum of men and women in 5-year age groups in Norway in 2015.

When numbers are missing

Statistics based on fewer than 3 cases is hidden to protect the identity of the patients. Figures are also hidden when the population group in which the cases originate, is smaller than 30 persons. If more than 20 per cent of the cases in a time series are hidden due to the abovementioned reasons, the complete time series is hidden to avoid giving a skewed impression.

Some values are hidden to prevent their use in calculating a value hidden for privacy reasons.

The complete time series is also hidden if more than 50 per cent of the values in the series are based on fewer than 10 cases. This is because of reduced reliability.

Time periods

1998, 2002, 2005, 2008, 2012, 2015 and 2019

Geographical level

Country, health regions and counties (starting 2015)

Gender

Both genders

Age groups

16-79 years

Frequency of updates

Every 3-4 years

Last updated

3/3/21

Keywords

Click on a keyword to search for similar indicators.

- Overweight
- Underweight
- Obesity
- Body mass index
- BMI
- Self-reported
- Weight
- Kroppsmasseindeks
- KMI

Fact sheets

Below are links to relevant fact sheets, articles and reports. These may describe trends over time in the Norwegian population or differences by sex, age group, geographical region or socioeconomic status:

- [Overweight and obesity i Norway](#)
- [Topic: Overweight and obesity](#)