

The Weight of Our Children

New Mexico Childhood Obesity 2025 Update

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2025



Bike at School Event in Colfax County

Introduction: Childhood Obesity in Context

Obesity in New Mexico (NM) is a public health problem that starts in childhood and can affect later life health outcomes. Weight bias and stigma, socioeconomic status, food insecurity, and community infrastructure are all factors that influence childhood obesity rates.¹ Nearly one-in-four (21.3%) school-aged children in NM live in poverty, compared to nearly one-in-six (15.1%) nationally, making NM children more at risk for obesity than children in other states.² The chances of developing high cholesterol, type 2 diabetes, hypertension, heart disease, stroke,³ fatty liver disease, sleep apnea,⁴ and depression⁵ are higher for children in larger bodies. Weight and body size alone should not be considered the only measure of health. The terms “obese” and “overweight” can be a source of weight stigma but are used here to describe CDC BMI-for-age-percentiles.⁶ Rates of obesity and overweight can be used to assess exposure to weight bias⁶ and unequal access to healthy eating and physical activity opportunities.¹

NM families experience additional economic hardship, increased food insecurity, and reduced transportation access, especially in rural and underserved communities. These communities often lack access to nutritious food and safe places to be physically active. Creating healthy communities involves grassroots organizing, urban planning, state and local investment, and statewide policies like Healthy Universal School Meals that increase healthy food access in an equitable way.



Deming Health Science students helped with measurements

Summary

This report provides the frequency of childhood obesity and overweight in New Mexico in fall 2025. Reduced involvement in the metro area is a limitation of this data. This report includes data from 4,579 students measured at 49 schools across 15 counties in fall 2025.

Key Findings:

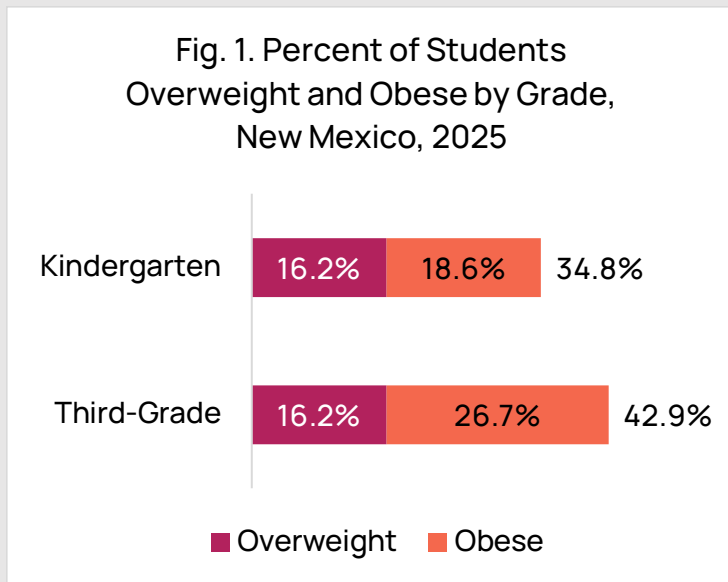
- Obesity has increased for the first time in four years for third-grade students. Obesity for kindergarten students has increased this year but has fluctuated over the past four years.
- As in previous years, obesity significantly increased between kindergarten and third-grade, suggesting the years between kindergarten and third-grade may be a key intervention point in the development of obesity.
- Boys are more likely to have obesity than girls for both kindergarten and third-grade students. In 2025, the difference between boys and girls who have obesity is 5.4%.
- American Indian students continue to have the highest obesity prevalence compared to their Hispanic, White, Asian, and African American counterparts. In 2025, the percent of American Indian students with obesity was 32.3%.



The New Mexico Department of Health (NMDOH) established its Statewide Childhood Obesity Surveillance System in 2010 to understand the extent of obesity among the elementary school-age population in NM. The system uses body mass index (BMI) percentile and a standardized measurement protocol to monitor childhood obesity over time, identify at-risk groups, guide state and local prevention efforts, and inform appropriate resource allocation. NMDOH collects and reports childhood obesity data on kindergarten and third-grade students annually across the state with support from schools, nursing programs, and volunteers. Public

elementary schools are selected randomly for data collection. We evaluated statistical significance using Mann Whitney tests in R. Statistical significance indicates that the difference between groups has not occurred by chance. The COVID-19 pandemic reduced school participation and for data collection, there are lasting effects in the largest metro school district. Studies comparing weight status found rural areas had higher rates of obesity than urban areas and our data is missing a large portion of urban data from the metro region.⁷ This limits how representative the 2025 findings are of the whole state.

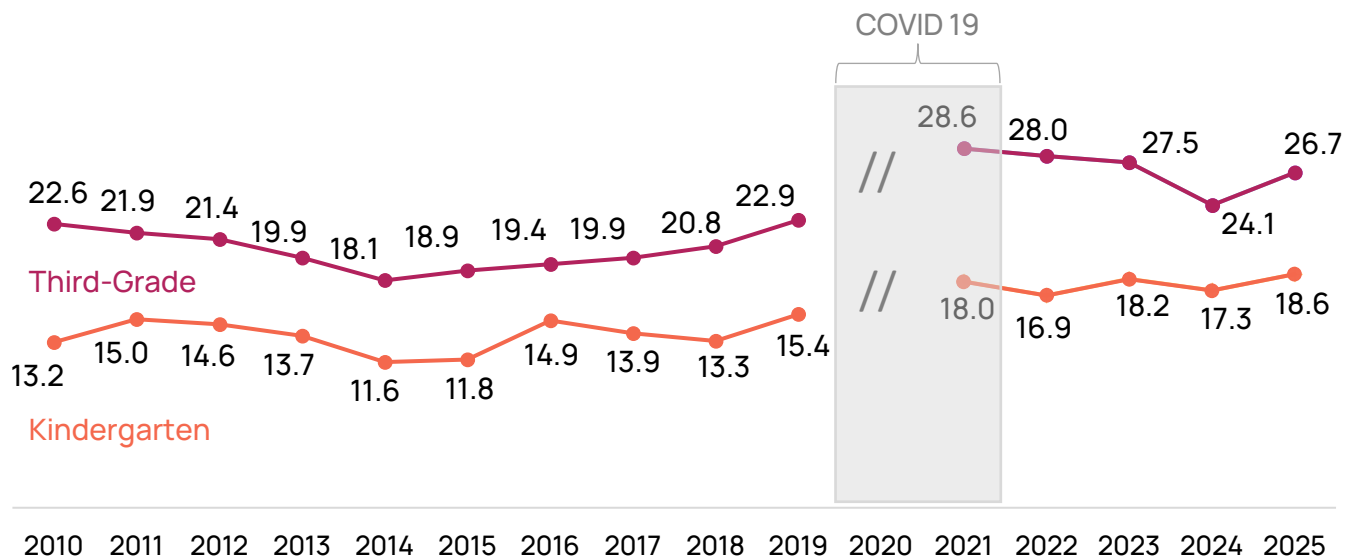
Childhood Overweight and Obesity Prevalence



By Grade

In 2025, 34.8% of kindergarten students and 42.9% of third-grade students had BMIs that met criteria for overweight or obesity (Fig. 1). The prevalence of obesity was higher among third-grade students compared to kindergarten students, which was statistically significant. The percent of third-grade students who have obesity has increased for the first time in four years (Fig. 2). This change may be due to the random sampling protocol or an increase in the number of students measured, which makes it easier to detect smaller changes in the population. The percent of kindergarten students who have obesity has fluctuated from 2024 to 2025 (Fig. 2). Obesity rates have not yet returned to pre-pandemic levels for the schools measured pre and post pandemic.

Fig. 2. Percent of Students Obese by Grade, New Mexico, 2010-2025



* Due to the pandemic and school closures, data was not collected in 2020 and participation rates in the metro area were greatly reduced in 2021 through 2025, making the 2021–2025 data consistent across years.

Fig. 3. Percent of Students Overweight and Obese by Gender, New Mexico, 2025

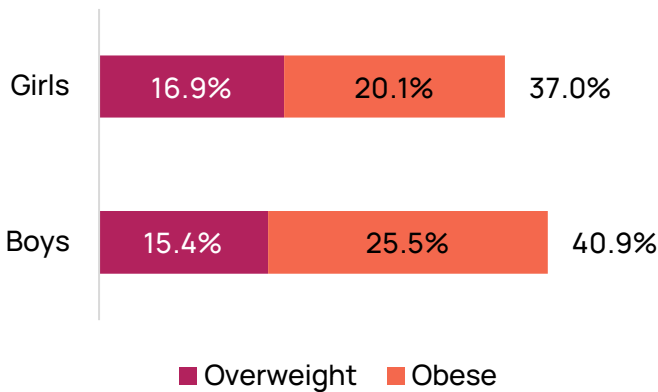
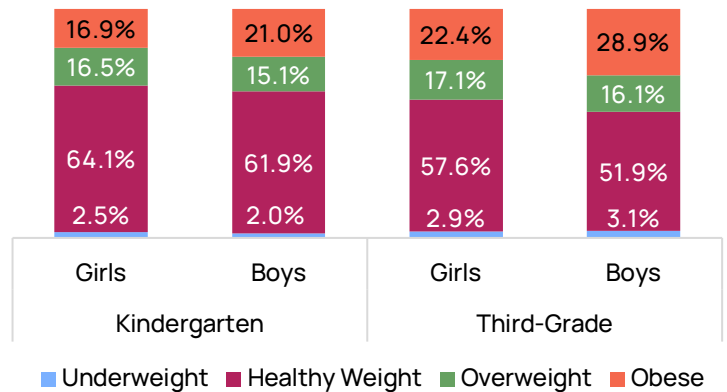


Fig. 4. Percent of Students in Weight Categories by Grade and Gender, New Mexico, 2025



By Gender

The combined group of kindergarten and third-grade boys had a significantly higher obesity prevalence than the combined group of kindergarten and third-grade girls. Obesity was 25.5% among boys and 20.1% among girls (Fig. 3). Additionally, when breaking the data out by grade and gender, kindergarten boys (21.0%) had higher rates of obesity than girls (16.9%), and third-grade boys (28.9%) had higher rates of obesity than girls (22.4%) (Fig. 4).

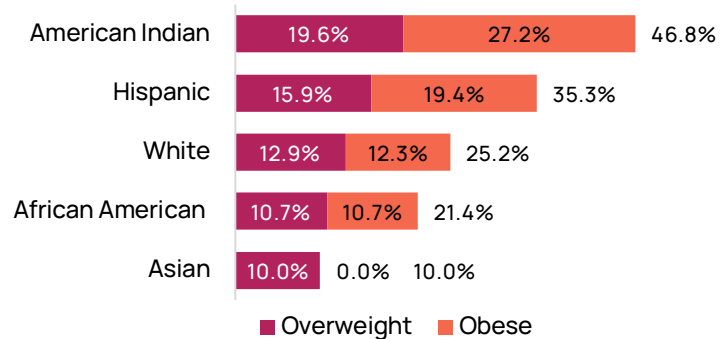
By Race/Ethnicity

American Indian, Hispanic, and White students had higher rates of obesity than African American and Asian students in 2025 (Fig. 5). 27.2% of American Indian kindergarten students had obesity compared to 19.4% among Hispanic kindergarten students and 12.3% among White kindergarten students. For third-graders, 37.0% of American Indian students, 25.4% of Hispanic students, and 18.0% of White students had obesity in 2025. Due to small sample sizes for African American and Asian kindergarten and third-grade students, the comparisons across race/ethnicity should be interpreted with care. The differences across race/ethnicity were significant for kindergarten and third-grade.

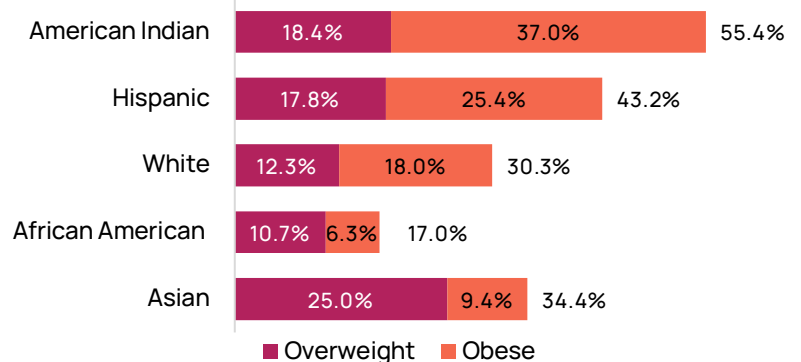
These results reflect inequities in our communities that unfairly burden the health of historically underserved New Mexicans. Health outcomes are often linked to lack of access to services, and these obstacles have a significant impact on the well-being of children across NM.

Fig. 5. Percent of Students Overweight and Obese by Race/Ethnicity, New Mexico, 2025

A. Kindergarten



B. Third-Grade



What the State Is Doing to Address Childhood Obesity in 2025

NMDOH's Obesity, Nutrition, and Physical Activity Program (ONAPA) partners with about 530 state and local organizations and community coalitions in six counties and one Tribal community including eighty-three preschools across NM to expand healthy eating and physical activity opportunities where children and adults live, learn, play, work, eat, and shop.

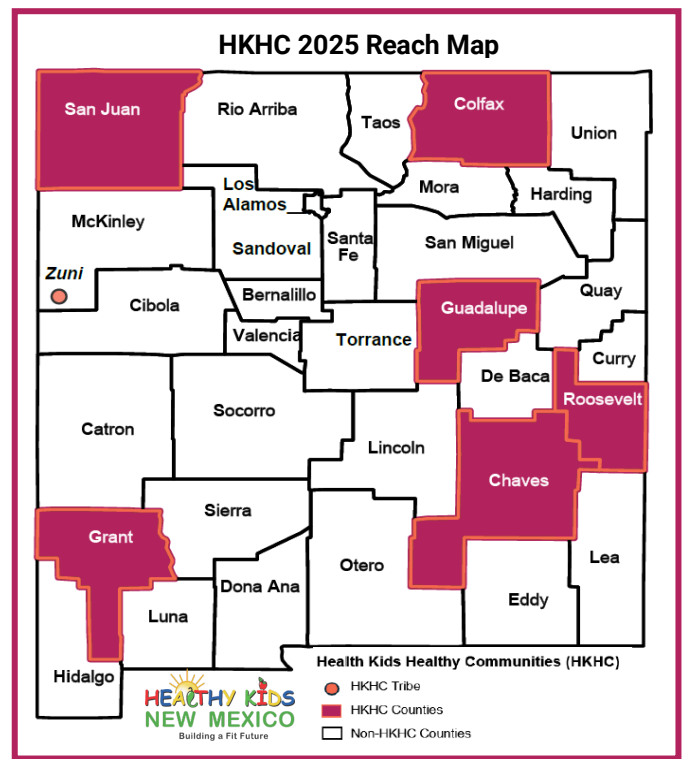
ONAPA and its partners implement sustainable policy, systems, and environmental changes based on the Centers for Disease Control and Prevention's (CDC) best practices for preventing obesity. Despite successes and community transformation, more resources are needed to continue increasing ONAPA's reach and to have a meaningful impact on childhood obesity in NM. ONAPA aims to expand our reach in preschools, schools, and communities. Please click [here](#) for an up-to-date map.

Key Strategies

School Environment

Increasing opportunities for healthy eating and physical activity before, during, and after school.

Healthy Kids Healthy Communities (HKHC) coordinators work in schools on various strategies, such as establishing salad bars, edible gardens, nutrition education, in-school walking programs, after-school bike clubs, and farm to school programs. They integrate locally grown produce into snacks and meals through the NM Grown program, promote opening school yards for community use during non-school hours, healthy fundraisers, Healthy Kids 5-2-1-0 Challenge, and participating in Walk and Roll to School, as well as strengthening wellness policies to prioritize healthy eating, physical activity, and staff wellness.



Food and Built Environment

Increasing access to healthy, affordable food and places to be physically active in low-income, rural, and Tribal communities.

HKHC coordinators work in communities on establishing community gardens and farmers' markets, expanding healthy options and nutrition education in food distribution sites and senior centers, creating active outdoor spaces for community use, and establishing safe walking and biking routes that connect neighborhoods to everyday destinations.

For more information about ONAPA's programs, please visit the website ([Healthy Kids Healthy Communities \(nmhealth.org\)](https://nmhealth.org)) or contact Rita Condon, ONAPA Director, at rita.condon@doh.nm.gov.



4H seed planting (San Juan County)



Bike club (Grant County)



Shucking local corn (Chaves County)

Methods

What Was Done and Why

Each year, NMDOH's Statewide Childhood Obesity Surveillance System uses stratified cluster sampling to select 70 public elementary schools from across the state to collect height and weight measurements from kindergarten and third-grade students. Measurements are collected by trained nursing students and volunteers from August to November using a standard protocol.

BMI is calculated from height and weight measurements and categorized based on sex-specific CDC BMI-for-age percentiles, which are defined as underweight (<5th percentile), healthy weight (≥5th to <85th percentile), overweight (≥85th to <95th percentile), and obese (≥95th percentile).⁸ Survey weights were not used. Data is analyzed using R (Version 4.3.3). Statistical significance is defined as $p < 0.05$.

The COVID-19 pandemic has had a lasting impact on BMI data collection. Obesity rates for third-graders increased for the first time in four years, however, they did not reach their post-pandemic high of 28.6%. Kindergarten obesity rates have fluctuated post-pandemic, going down slightly in 2024 and then increasing in 2025.

There were 49 schools that opted to participate in measurements this year, but participation from the largest metro school district has lagged since the COVID-19 pandemic. The metro region represents about 24.3% of all public school students in NM. The low metro participation rate is a limitation of this dataset. Prior to the COVID-19 pandemic, survey weights were used to produce estimates of weight status that were representative of students measured statewide. These limitations prevent us from full statewide representation, thus our data need to be interpreted with caution.



Flag football (Zuni Youth Enrichment Project)



Tips to Help Kids Eat Healthy & Stay Active



Every day is a new chance to improve your kids' health habits. Try out the Healthy Kids 5-2-1-0 Challenge and live healthier day by day!

- 5 Eat 5 or more fruits and vegetables a day.** Keep cut-up fruits and veggies in the fridge for handy, healthy snacks.
- 2 Trim screen time to less than 2 hours a day.** Select TV shows or computer games ahead of time so children have a plan for how they will use their screen time.
- 1 Be active at least 1 hour a day.** Where can you go today? Plan a safe walking route to a school, park, or another place in your neighborhood with your child – then walk!
- 0 Drink lots of H₂O every day.** Make water your first drink of choice! Give your child a water bottle to carry with them so it's always handy when they are thirsty.

References

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