OBESITY RISES TO TOP HEALTH CONCERN FOR AMERICANS, BUT Misperceptions Persist

According to a new, nationally representative survey from the American Society for Metabolic and Bariatric Surgery (ASMBS) and NORC at the University of Chicago, most Americans view obesity as tied with cancer as the most serious health issue facing the country – an even greater threat than heart disease, the leading cause of death in the United States.

The country’s understanding of the health risks of obesity have significantly improved, with more Americans than ever recognizing the links between obesity and diabetes and certain types of cancer, and the seriousness with which Americans take the problem of obesity has risen over the years. But, many still hold major misperceptions about both the nature of the disease and how to address it.

Further, significant numbers battle obesity without consultation with a medical professional or the use of some of the most effective treatments (see the companion report: New Insights into Americans’ Perceptions and Misperceptions of Obesity Treatments, and the Struggles Many Face).¹ The poll shows that more than a third of Americans with obesity report they have not spoken with a doctor or health professional about their weight. The lack of consultation with the medical community is not because Americans with obesity feel healthy; only 1 in 5 Americans

¹ [http://www.norc.org/Research/Projects/Pages/the-asmbsnorc-obesity-poll.aspx](http://www.norc.org/Research/Projects/Pages/the-asmbsnorc-obesity-poll.aspx)
with obesity rate their health positively and half report being diagnosed with two or more chronic conditions.\(^2\)

Paradoxically, the survey reveals that while Americans consider obesity to be a more serious health problem than diabetes, heart disease, mental illness, and HIV/AIDS and believe in very high numbers that it causes premature death, many with obesity do not look to the health system for help or treatment and try to manage it on their own – in many cases, unsuccessfully.

Part of the issue may be that the public thinks about obesity differently than the medical community. While the medical community has generally reached consensus that obesity is a disease (the American Medical Association and other medical groups declared it so in 2013), little more than one-third of Americans agree, with most considering it simply a risk factor for other diseases.\(^3\)

According to the latest figures for 2011-2014 from the Centers for Disease Control and Prevention (CDC), 37 percent of U.S. adults and 17 percent of youth have obesity.\(^4\) The high prevalence of obesity and the increased risk it poses for dozens of chronic health conditions, including heart disease, stroke, type 2 diabetes, joint disease, and certain types of cancer, combine to have a high economic impact: the annual medical cost of obesity is estimated to be $149.4 billion.\(^5\)

A poll by The Associated Press-NORC Center for Public Affairs Research in 2013 explored the public’s opinions on obesity and obesity-related health issues in the United States.\(^6\) Key findings included Americans’ knowledge of the health impacts of obesity and their support for policies to prevent obesity.

This new poll builds and expands upon those original findings by focusing on the influence that obesity has on individuals’ lives, including their struggles with weight loss, what motivates people to attempt to lose weight, perceived barriers to weight loss, and their concerns about health and other impacts.

Obesity in America is a struggle for many adults filled with worry, denial, and health concerns. Nearly all Americans with obesity (94 percent) have tried to lose the weight at some point, reporting that their weight is a significant obstacle to work, family, and relationships. They are more likely to say their weight interferes with their romantic relationships (21 percent vs. 9 percent), aspirations and goals (20 percent vs. 11 percent), and family life (11 percent vs. 5 percent) than those who are not obese.

While 1 in 3 Americans worry about gaining weight all or a good deal of the time, those with obesity are twice as likely to report being chronically worried (54 percent) than those who are not obese (20 percent). Of those who worry at least a little about their weight, the majority are extremely or very concerned about health consequences, such as increased risk of developing diabetes and other diseases.

Despite the public’s evolving knowledge of the increased risk of premature death and other health conditions linked to obesity, many Americans still believe that obesity is caused by a person’s lifestyle choices, their eating and exercise habits, and that the biggest barrier to weight loss is an individual’s lack of willpower. The consensus of medical experts, however, is that obesity is caused by a

\(^2\) Survey respondents were categorized as obese based on their self-reported height and weight, which was then used to calculate their Body Mass Index (BMI).
\(^3\) [http://www.heart.org/HEARTORG/HealthyLiving/WeightManagement/Obesity/Treating-Obesity-as-a-Disease_UCM_459957_Article.jsp](http://www.heart.org/HEARTORG/HealthyLiving/WeightManagement/Obesity/Treating-Obesity-as-a-Disease_UCM_459957_Article.jsp)
\(^4\) [https://www.cdc.gov/nchs/data/databriefs/db219.pdf](https://www.cdc.gov/nchs/data/databriefs/db219.pdf)
combination of genetic, environmental, behavioral, and emotional factors. Additionally, a majority of Americans with obesity according to their BMI don’t recognize their clinical condition and consider themselves to be overweight, but not obese.

Obesity isn’t perceived the same by all Americans. While the severity of obesity is widely recognized across demographic groups, Hispanics (87 percent) are more likely to say that it is a serious health problem compared to whites (80 percent) or African Americans (81 percent). Additionally, those from different racial and ethnic backgrounds hold different views on the most significant outcomes of obesity. For example, whites (63 percent) are more likely than African Americans (46 percent) or Hispanics (48 percent) to say that heart disease is one of the most significant outcomes.

Men and women also hold differing opinions on obesity, and men are less likely to recognize obesity in themselves. Nearly two-thirds of men who are overweight or obese underestimate their weight, whereas fewer than half of women who are overweight or obese underestimate their weight.

Additionally, women are more likely to consider obesity itself to be a disease. 46 percent say it is compared to just 29 percent of men who say the same. Women are also more likely to say that obesity results from many different factors (60 percent of women vs. 40 percent of men) and are less likely to say that it results from a person’s lifestyle alone (39 percent of women vs. 58 percent of men).

The nationally representative survey of 1,509 adults included oversamples of African Americans and Hispanics. It was funded by ASMBS and used AmeriSpeak®, the probability-based panel of NORC at the University of Chicago. Interviews were conducted between August 11 and September 21, 2016, online and using landlines and cell phones.

Other key findings from the poll include:

- More Americans are aware of the links between obesity and other chronic conditions. Knowledge of the increased risk that obesity poses for developing diabetes jumped from 88 percent to 98 percent from 2003 to 2016, and knowledge of the increased risk for developing certain types of cancer jumped from 52 percent to 82 percent from 2003 to 2016.

- Americans are less clear on the causes of obesity: 50 percent view obesity as resulting from many different genetic, environmental, and social factors, whereas 48 percent say it is mostly a lifestyle choice resulting from a person’s eating and exercise habits. Those who view obesity primarily as a lifestyle issue are more likely than those who attribute it to multiple factors to say individuals, not the health care system, are responsible for taking action on obesity and to feel in control of their weight, while they are less likely to talk to a doctor about their weight.

- Among the majority of Americans who believe obesity rates in America will increase or stay the same in the next 5 years, there is support across all political parties to do something to prevent obesity, though Democrats (95 percent) and independents (95 percent) are more likely than Republicans (78 percent) to say that something should be done.

- Although the seriousness of obesity is widely recognized, a majority of those who believe something needs to be done to prevent obesity say that it is up to individuals themselves to do something (58 percent) rather than the health care system (41 percent).

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7 https://www.cdc.gov/obesity/adult/causes.html
8 http://www.phsi.harvard.edu/health_reform/poll_results.pdf
Thirty-five percent of survey respondents had a calculated BMI placing them in the obese range, similar to official population figures for obesity from the Centers for Disease Control and Prevention, which show that 37 percent of U.S. adults were obese in 2011-2014.9

Fully 57 percent of Americans whose calculated BMI places them in the obese range say that they do not consider themselves to be obese - 47 percent consider themselves to be overweight but not obese and 9 percent consider their weight to be about right. Nearly two-thirds of men who are overweight or obese underestimate their weight, whereas fewer than half of women who are overweight or obese underestimate their weight.

Adults who are obese are more likely to say their weight interferes with their romantic relationships (21 percent vs. 9 percent), aspirations and goals (20 percent vs. 11 percent), and family life (11 percent vs. 5 percent) than those who are not obese.

One third of Americans personally know someone who died or developed a disease or health condition because of obesity. These people are more likely to recognize the severity of obesity, including its link to other diseases. They are also more likely to take weight seriously in their own lives. They more often report talking to a doctor about their own weight, that they are currently trying to lose weight, and that they consider the impact of their own weight on other aspects of their life.

**AMERICANS CONSIDER OBESITY AS SERIOUS A HEALTH PROBLEM FOR THE COUNTRY AS CANCER.**

For the most part, Americans are well informed about the largest health risks linked to obesity and they consider obesity a serious problem for the country – as serious as cancer. Eighty-one percent report overweight and obesity as an extremely or very serious health problem facing the nation. Asked the same question about other health problems, obesity ties with cancer as the most serious issue for Americans. Americans consider obesity to be a more serious health problem than diabetes, heart disease, mental illness, and HIV/AIDS. The number of Americans who consider obesity a serious health problem today is similar to 2013 when 75 percent of American adults said the same in a poll conducted by The Associated Press-NORC Center for Public Affairs Research.10

While the severity of obesity is widely recognized across demographic groups, Hispanics (87 percent) are more likely to say that it is a serious health problem compared to whites (80 percent) or African Americans (81 percent). Race and ethnicity are the only demographic factors associated with perceptions of the severity of obesity. According to the Centers for Disease Control and Prevention, the prevalence of obesity is highest among African Americans adults (48.1 percent), followed by Hispanics (42.5 percent), and then whites (34.5 percent).11

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Americans consider obesity to be as serious a health problem for the country as cancer.

Question: In this country, how serious a problem is each of these health issues? Not a problem at all, only a little serious, moderately serious, very serious, or extremely serious.

Most Americans (85 percent) believe that obesity poses an extremely or very high risk to a person’s overall health. And, when it comes to the most significant outcomes of being overweight or obese, about half of American adults name heart disease (58 percent), which is the leading cause of death for both men and women in the U.S., and diabetes (53 percent) as the most significant outcomes. Other significant outcomes named by more than 10 percent of American adults include: generally being unhealthy (23 percent), high blood pressure (20 percent), death (19 percent), mobility issues (17 percent), arthritis (16 percent), mental health problems (14 percent), and poor self-esteem (12 percent).

Those from different racial and ethnic backgrounds hold different views on some of the most significant outcomes of obesity, as do men and women. Whites (63 percent) are more likely than African Americans (46 percent) or Hispanics (48 percent) to say that heart disease is one of the most significant outcomes. When it comes to diabetes, African Americans (38 percent) are less likely than both whites (58 percent) and Hispanics (48 percent) to say it is a significant outcome despite the fact that African American women face a lifetime risk of diabetes that is over 50 percent. This risk among African American women is higher than the risk for whites and African American men but not Hispanics. And while men and women are equally likely to name heart disease as a significant outcome, women (57 percent) are more likely than men (49 percent) to name diabetes.

Today, more than 9 in 10 Americans say that being obese increases a person’s risk for heart disease, high blood pressure, diabetes, bone or joint damage, stroke, severe depression, and sleep apnea. In addition, more than 8 in 10 Americans know that obesity increases the risk for developing kidney disease, liver disease, certain types of cancer, and infertility. But, less than half recognize that obesity can increase a persons’ risk of developing Alzheimer’s disease.

12 http://www.cdc.gov/heartdisease/docs/consumered_heartdisease.pdf
13 http://www.thelancet.com/journals/landia/article/PIIS2213-8587(14)70161-5/abstract
Americans are aware of the increased risk obesity poses for many other chronic conditions.

![Bar chart showing the percentage of people who believe obesity increases the risk of developing various diseases.](chart)

Question: To the best of your knowledge, does being obese increase a person’s risk of developing each of the following or does it not increase that risk? Increases risk a lot, increases risk a little, or does not increase risk.

In some cases, Americans’ knowledge of the associations between obesity and the risk for developing specific diseases has increased over the past decade. The high levels of knowledge of the increased risk obesity poses for developing heart disease and high blood pressure have remained relatively the same as the rates observed in a Harvard Forums on Health poll conducted in 2003. On the other hand, knowledge of the increased risk that obesity poses for developing diabetes jumped from 88 percent to 98 percent from 2003 to 2016, and knowledge of the increased risk for developing certain types of cancer jumped from 52 percent to 82 percent from 2003 to 2016.14

**DESPITE BEING INFORMED ABOUT THE RISKS OF OBESITY, MOST AMERICANS DO NOT CONSIDER IT A DISEASE.**

Most Americans (94 percent) agree that obesity increases a person’s risk of dying early even if they do not have any other health conditions. However, few Americans consider obesity in and of itself to be a disease (38 percent). The majority of Americans, 61 percent, consider obesity a risk factor for other diseases but not a disease itself. This is another topic were men and women hold different views. Nearly half of women (46 percent) say obesity itself is a disease, compared to just 29 percent of men who say the same.

14 [http://www.phsi.harvard.edu/health_reform/poll_results.pdf](http://www.phsi.harvard.edu/health_reform/poll_results.pdf)
Most Americans do not view obesity as a disease in and of itself.

Question: Which statement comes closest to your view of obesity, even if neither is exactly right? Obesity itself is a disease. Obesity is a risk factor for other diseases, but it is not a disease itself.

Overall, Americans are not sure about the causes of obesity; 50 percent view obesity as resulting from many different genetic, environmental, and social factors, whereas 48 percent say it is a lifestyle choice resulting from a person’s eating and exercise habits.

Similar to thinking about obesity as a disease, there is a clear difference of opinion among men and women on its causes. Compared to men, women are more likely to say that obesity results from many different factors (60 percent vs. 40 percent) and are less likely to say that it results from a person’s lifestyle alone (39 percent vs. 58 percent).

Men and women hold different opinions on the causes of obesity.

Question: Which statement comes closest to your view of obesity, even if neither is exactly right? Obesity is a lifestyle choice resulting from a person’s eating and exercise habits. Obesity is a disease resulting from many different genetic, environmental, and social factors.
In addition to the gender differences, people with different levels of education and those from different political parties have varying opinions on the causes of obesity. Those with at least a college degree are more likely to say that obesity results from many different factors compared to those with less education, who are more likely to say that obesity results from a person’s lifestyle choices alone. Compared to Republicans (39 percent) and independents (48 percent), Democrats (60 percent) are more likely to say that obesity results from many different factors. Republicans (60 percent) and independents (52 percent) are more likely than Democrats (38 percent) to say that obesity results from a person’s lifestyle choices alone.

**AMERICANS THINK WE NEED ACTION ON OBESITY BUT PLACE THE RESPONSIBILITY ON INDIVIDUALS, NOT THE HEALTH CARE SYSTEM.**

Despite prevention efforts, the American public lacks confidence that the country’s problem with obesity will improve in the near future. Most believe that obesity rates will either increase (57 percent) or stay the same (29 percent) in the next 5 years, just 13 percent think there will be fewer obese Americans. African Americans are more optimistic than whites about the prospect of rates of obesity declining in this country. Twice as many African Americans (23 percent) as whites (10 percent) believe there will be fewer obese Americans in the next five years.

Among those who believe obesity will increase or stay the same in the next 5 years, 89 percent say that something should be done to prevent obesity in this country. There is support across all political parties to do something, though Democrats (95 percent) and independents (95 percent) are more likely than Republicans (78 percent) to say that something should be done.

Yet, a majority of those who believe something needs to be done to prevent obesity say that it is up to individuals themselves to do something (58 percent) rather than the health care system (41 percent). Those who say obesity is a lifestyle choice are particularly likely to believe individuals are responsible (66 percent) compared to those who attribute obesity to genetic, environmental, and social factors (50 percent).

Older Americans, those with a high school degree or less education, and Republicans are more likely to say it is up to individuals themselves to do something, whereas younger Americans, those with some college or more education, and Democrats are more likely to say the healthcare system can prevent more people from becoming obese.
Americans from all political parties believe action is needed to prevent obesity and that individuals should be responsible, not the health care system.

Question: Do you think something should be done to prevent obesity in this country in the next five years, or does nothing need to be done? Do you think our health care system can prevent more people from becoming obese in the next five years, or is it up to individuals themselves?

OVER HALF OF AMERICANS WITH OBESITY DON’T THINK THEY ARE OBESE AND MANY HAVE NOT HAD A DOCTOR TALK TO THEM ABOUT THEIR WEIGHT.

Using self-reported height and weight to calculate Body Mass Index (BMI), 2 percent of survey respondents are classified as underweight, and about one-third are classified as normal weight (31 percent), overweight (29 percent), and obese (35 percent). These figures are similar to official population figures for obesity from the Centers for Disease Control and Prevention, which show that 37 percent of U.S. adults were obese in 2011-2014.15

We assessed individuals’ perceptions of their own weight status by comparing their BMI to their own self-placement as obese, overweight, normal weight, or underweight. Ninety-one percent of Americans whose BMI places them in the obese range correctly classify themselves as being overweight rather than underweight or at about the right weight. However, few Americans with obesity recognize that they are obese rather than just overweight. Fully 47 percent of those whose BMI places them in the obese range say they consider themselves to be overweight but not obese, and another 9 percent do not even consider themselves to be overweight.

Additionally, a majority (59 percent) of those whose BMI places them in the overweight range say they do not consider themselves to be overweight.

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Few Americans who qualify as obese consider themselves to be obese.

Among those who are overweight or obese, men are more likely than women to underestimate their weight. Nearly two-thirds of men who are overweight or obese underestimate their weight, whereas fewer than half of women who are overweight or obese underestimate their weight.

Thirty-five percent of Americans who are obese based on their BMI have not spoken with a doctor or health professional about their weight. This suggests many missed opportunities since those who are obese are more likely than those who are not obese to say they have visited a doctor within the past 6 months (56 percent vs. 44 percent).

Americans’ perceptions of their own weight also play a role. Among those who are obese, those who underestimate their weight by saying they are overweight or their weight is about right instead of obese are less likely to talk to a doctor about weight (57 percent) than those who accurately consider themselves to be obese (76 percent).

This is especially true for obese Americans who are in good health and those without insurance. Eighty percent of those who are obese who rate their health as fair or poor have spoken with a doctor about their weight compared to 59 percent of those who say they are in better health. And, 42 percent of those who are obese who do not have health insurance say they have talked to a doctor about their weight compared to 67 percent of those with health insurance.

Overall, Americans who say obesity is a lifestyle choice are less likely to talk to a doctor about their weight (35 percent) compared to those who attribute obesity to genetic, environmental, and social factors (46 percent).

**FOR AMERICANS WHO ARE OBESE, WEIGHT AND ITS CONSEQUENCES ARE CHRONIC CONCERNS.**

For Americans with obesity, weight is a greater obstacle to work, family, and relationships compared to those who are not obese, and nearly all (94 percent) have tried to lose weight. They are more likely
to say their weight interferes with their romantic relationships (21 percent vs. 9 percent), aspirations and goals (20 percent vs. 11 percent), and family life (11 percent vs. 5 percent) than those who are not obese.

While 1 in 3 Americans worry about gaining weight all or a good deal of the time, those with obesity are over twice as likely to say they worry (54 percent) than those who are not obese (20 percent). Of those who worry at least a little, the majority are extremely or very concerned about health consequences, such as increased risk of developing diabetes and other diseases. Adults with obesity are particularly prone to such health complications because of their weight, and they tend to worry more about the health consequences (70 percent) than those who are not obese (49 percent). Yet, as noted above, many Americans with obesity have not talked to a doctor about their weight.

The concerns of Americans with obesity are borne out in their self-reported health. Americans who are obese report being in poorer health and report more chronic medical conditions than those who are not. Just 22 percent of Americans with obesity rate their health positively, and half report being diagnosed with 2 or more chronic conditions.

Those who are obese according to their BMI but do not consider themselves obese are statistically as likely to have 2 or more chronic conditions as those who correctly describe themselves as obese (46 percent vs. 55 percent).

A MAJORITY OF AMERICANS HAVE CLOSE FRIENDS WHO ARE OVERWEIGHT, AND ONE-THIRD PERSONALLY KNOW SOMEONE WHO DIED OR EXPERIENCED HEALTH PROBLEMS DUE TO OBESITY.

Most Americans have people in their lives who are overweight or obese, with over half considering a close friend to be overweight. Of parents with at least one child under 18, 11 percent consider any of their children to be overweight, remaining stable since 2013 when 12 percent of parents said the same.16

Additionally, one-third of Americans personally know someone who died or developed a disease or health condition because of obesity.

Those with obesity are no more likely to know someone who has experienced the health consequences of obesity. However, they are more likely than Americans who are not obese to have a close friend, spouse or partner, child, or biological parent who is overweight.

Americans who personally know someone who died or developed a disease or health condition because of obesity are more likely than those who do not to recognize the severity of obesity, including its link to other diseases. They are also more likely to take weight seriously in their own lives, as they are more likely to report talking to a doctor about their own weight (48 percent vs. 37 percent), that they are currently trying to lose weight (70 percent vs. 54 percent), and that they consider the impact of their own weight on other aspects of their life.

Whites are more likely than African Americans or Hispanics to know someone who died or had health problems due to obesity (38 percent of whites vs. 27 percent of African Americans and 31 percent of Hispanics), or have a parent (42 percent of whites vs. 27 percent of African Americans and 29 percent of Hispanics) or friend (59 percent of whites vs. 48 percent of African Americans and 46 percent of Hispanics) who is overweight.

Americans who are obese tend to have family members, partners, and close friends who are also overweight.

**Percent who consider any of the following people in their life to be overweight...**

<table>
<thead>
<tr>
<th>Person Type</th>
<th>Obese</th>
<th>Not obese</th>
</tr>
</thead>
<tbody>
<tr>
<td>Spouse</td>
<td>36%</td>
<td>20%</td>
</tr>
<tr>
<td>Child</td>
<td>18%</td>
<td>6%</td>
</tr>
<tr>
<td>Biological parent</td>
<td>46%</td>
<td>32%</td>
</tr>
<tr>
<td>Close friend</td>
<td>59%</td>
<td>53%</td>
</tr>
</tbody>
</table>

**Question:** Do you consider any of the following people to be overweight, or not?

**ABOUT THE STUDY**

**Survey Methodology**

This survey was conducted by NORC at the University of Chicago with funding from the American Society for Metabolic and Bariatric Surgery (ASMBS). Data were collected using AmeriSpeak®, a probability-based panel designed to be representative of the U.S. household population. During the initial recruitment phase of the panel, randomly selected U.S. households were sampled with a known, non-zero probability of selection from the NORC National Sample Frame and then contacted by U.S. mail, email, telephone, and field interviewers (face-to-face).

Interviews for this survey were conducted between August 11 and September 21, 2016, with adults age 18 and over representing the 50 states and the District of Columbia. Panel members were randomly drawn from AmeriSpeak®. There were 1,509 completed surveys—1,178 via the web and 331 via telephone. Interviews were conducted in both English and Spanish, depending on respondent preference. The survey included oversamples of African Americans and Hispanics for a total of 390 interviews with African Americans and 453 interviews with Hispanics. The final stage completion rate is 32.9 percent, the weighted household panel response rate is 33.5 percent, and the weighted household panel retention rate is 93.9 percent, for a cumulative response rate of 10.3 percent. The overall margin of sampling error is +/- 3.5 percentage points at the 95 percent confidence level, including the design effect. The margin of sampling error for the subgroup of African Americans is +/- 6.1 percentage points including the design effect, and +/- 5.5 percentage points for the subgroup of Hispanics.

All respondents were offered a cash equivalent incentive to complete the survey, with African Americans and Hispanics offered an additional incentive.

Once the sample has been selected and fielded, and all the study data have been collected and made final, a poststratification process is used to adjust for any survey nonresponse as well as any non-coverage or under- and oversampling resulting from the study-specific sample design.
Poststratification variables included age, gender, census division, race/ethnicity, and household phone status. The weighted data, which reflect the U.S. population of adults age 18 and over, were used for all analyses.

All differences reported between subgroups of the U.S. population are at the 95 percent level of statistical significance, meaning that there is only a 5 percent (or lower) probability that the observed differences could be attributed to chance variation in sampling.

**About the American Society for Metabolic and Bariatric Surgery (ASMBS)**

The ASMBS is the largest organization for bariatric surgeons in the nation. It is a non-profit organization that works to advance the art and science of bariatric surgery and is committed to educating medical professionals and the public about bariatric surgery as an option for the treatment of morbid obesity, as well as the associated risks and benefits. It encourages its members to investigate and discover new advances in bariatric surgery while maintaining a steady exchange of experiences and ideas that may lead to improved surgical outcomes for morbidly obese patients.

[www.asmbs.org](http://www.asmbs.org)

**About NORC at the University of Chicago**

NORC at the University of Chicago is an independent research institution that delivers reliable data and rigorous analysis to guide critical programmatic, business, and policy decisions. Since 1941, NORC has conducted groundbreaking studies, created and applied innovative methods and tools, and advanced principles of scientific integrity and collaboration. Today, government, corporate, and nonprofit clients around the world partner with NORC to transform increasingly complex information into useful knowledge.

NORC conducts research in five main areas: Economics, Markets, and the Workforce; Education, Training, and Learning; Global Development; Health and Well-Being; and Society, Media, and Public Affairs.

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