

## Background

The Behavioral Risk Factor Surveillance System (BRFSS) is a telephone survey conducted annually among adults 18 and older. The Vermont BRFSS is completed by the Vermont Department of Health in collaboration with the Centers for Disease Control and Prevention (CDC). All U.S. states, Washington D.C., and most U.S. territories participate in the BRFSS.

In 2018, BRFSS surveys were completed among 6,544 adults from across the state. These results are weighted to be representative of the entire adult population. The annual summary provides data on most survey questions broken down by sex, age, education, income, race and ethnicity, sexual orientation and gender identity, disability status, and trend and county level data.

## Health Status Indicators

Overall most Vermont adults report good to excellent general health, with one in seven reporting fair or poor health (14%). Disparities are seen in general health as fair or poor health is reported more frequently by adults with less education (22%), low income (29%), and adults with a disability (40%). Most Vermont adults report having access to health care. More than nine in 10 (92%) adults 18-64 have a health plan, and 86% of all adults have a personal health care provider. Men, younger adults and adults of color are less likely to have a personal health care provider. For each of these measures, Vermont reported significantly better general health and access to health care than U.S. adults.

## Chronic Condition Indicators

Among Vermont adults the prevalence of chronic conditions included on the BRFSS has been stable since 2011. As compared with the U.S., prevalence of the following chronic conditions are significantly lower among Vermont adults: obesity (29% vs. 32%), diabetes (9% vs. 11%), and chronic kidney disease (2% vs. 3%).

Arthritis (28%) and asthma (12%) are reported at a significantly higher rate in Vermont than among U.S. adults (26% and 9% respectively). Higher rates of chronic disease are generally reported among older Vermont adults, adults with less education, lower income and adults with a disability. Additionally, LGBT adults have a higher asthma rate than non-LGBT adults (18% vs. 11%). While the percent of Vermonters reporting depression decreased from 2017 (25% to 21%), Vermonters still report a higher rate of depression than all U.S. adults (18%). Significant disparities in reported depression exist by all examined demographics. Prevalence of depression is higher among women, younger adults, adults with less education or incomes, people of color, LGBT adults and adults with a disability.

## Risk Behavior Indicators

New in 2018, Vermonters were asked about risk factors such as food and housing insecurity, risk of tick bites, alcohol interactive medications use among older adults, firearm storage and suicidal ideation.

Eight percent of Vermont adults report they were unable to pay their mortgage, rent or utilities sometime in the past year, and 5% were worried they or someone in their home would not have enough food to eat. One in four adults spending time in grassy or wooded areas sometimes or never take measures to prevent tick bites (27%).

Of the four in 10 Vermont adults with a firearm in their home (43%), 17% keep a firearm loaded. Two-thirds of those with a loaded firearm in or around their home keep a loaded firearm unlocked (65%). Four percent of Vermont adults seriously considered suicide in the last year. LGBT adults are three times as likely to report seriously considering suicide compared to non-LGBT adults (12% vs. 4%), and adults with a disability are five times as likely to consider suicide than adults with no disability (10% vs. 2%).

One in six Vermont adults report using marijuana in the last month (17%). This continues the recent trend of increased marijuana use each year since 2013 (7%). Among marijuana users, one in four drove within three hours of using the drug at least once in the last month (23%). Most adults using marijuana say their primary method of use is smoking (80%), 10% usually vape marijuana, 8% usually eat or drink it, and 2% dab it.

Alcohol use among all Vermonters has decreased since 2011 (65% to 61%) but remains higher than among U.S. adults (53%). Twenty-seven percent of adults 18-24 binge drink, better than the [Healthy Vermonters 2020](#) goal of 31%, and is down from 34% in 2011. Cigarette use has also decreased among Vermont adults since 2011 (20% to 15%), but significant disparities remain, with higher rates of cigarette use among adults with less education and income, adults of color and adults with a disability.

Not participating in any leisure time physical activity is statistically lower among Vermont adults than U.S. adults (18% vs. 24%).

### Preventive Behaviors & Health Screenings

Nearly four in 10 adults and just over half of adults 65 and older had their flu vaccination in the last year. Flu vaccination rates have decreased significantly from 2011 to 2018 among all adults (41% to 37%) and adults 65 and older (65% to 54%).

More than three in four adults had a routine doctor visit in the last year, a significant increase from 2017 (70% to 76%). Most adults were asked about their alcohol use at their recent doctor's visit (79%), but screening for alcohol use is less likely among low income adults (68%), and adults with a disability (67%). Vermont adults are significantly more likely to report visiting a dentist in the last year when compared to all U.S. adults (73% vs 66%).

While the proportion of Vermont adults 18-64 getting an HIV test in the last year continues to meet the [Healthy Vermonters 2020](#) goal of 10%, Vermont has a lower screening rate than the U.S. (14%). This is also true for all adults (7% vs. 11%). Lifetime HIV screening among Vermont adults and adults 18-64 has significantly increased since 2011, and both age groups report similar rates to the U.S.

For more information about the Vermont BRFSS: email [ahs.vdhbrfss@vermont.gov](mailto:ahs.vdhbrfss@vermont.gov) or visit [healthvermont.gov/brfss](http://healthvermont.gov/brfss)