



Diet-Related Diseases: Vermont's Costly and Growing Problem

- “Obesity has reached epidemic proportions in Vermont and across the United States. Obesity affects a quarter of Vermont adults and 1 in 8 Vermont youth in grades 9 to 12.”¹
- Over 60%, more than 6 in 10 adults in Vermont,² and 29% of Vermont youth³ are overweight or obese; and obese children are at least twice as likely as non-obese children to become obese adults.⁴
- The Vermont Department of Health’s #1 goal under its State Health Improvement Plan (SHIP) is reducing the prevalence of obesity and tobacco use.⁵
- Poor diet is one of three unhealthy behaviors identified by VDH in its recently-launched 3-4-50 campaign to reduce chronic diseases and health care costs in Vermont. Poor diet, no physical activity and tobacco use lead to cancer, heart disease and stroke, Type 2 diabetes and lung disease, and result in more than 50% of deaths in Vermont.
- These are costly, preventable diseases. Chronic diseases affect the quality of life for Vermonters and the state’s economic future. Medical costs related to asthma, cancer, diabetes and cardiovascular disease have **continually increased from \$1.52 billion in 2010 to \$2,042,000,000 in 2015**.⁶
- Costs related to chronic diseases are expected to continue on this path, **increasing by 75 percent** from 2010 to 2020.⁷
- According to the State of Obesity Report, the obesity rate of adults in Vermont has been steadily climbing from 10% in 1990 to 25.1% currently.⁸ New data on youth in this report for Vermont shows an alarming 14.1% of 2-4 year olds in the WIC program and 12.4% of high school students in Vermont are obese.
- Vermont’s current 38,031 cases of heart disease are expected to grow to 190,617 and its current 10,273 cases of obesity-related cancer are expected to grow to 27,751 by 2030 if Vermont continues on its current path.⁹

¹ Vermont Department of Health, Obesity Surveillance in Vermont, <http://healthvermont.gov/health-statistics-vital-records/surveillance-reporting-topic/obesity>

² Vermont 2013 BRFSS Adult Behavioral Risk Factor Survey; Vermont Department of Health

³ Vermont 2013 YRBS Youth Risk Behavior Survey; Vermont Department of Health

⁴ Serdula MK, Ivery D, Coates RJ, et al. “Do Obese Children Become Obese Adults? A Review of the Literature.” *Preventive Medicine*, 22(2): 167–177, 1993. Available at: www.ncbi.nlm.nih.gov/pubmed/8483856.

⁵ A Roadmap to Better Health, Commissioner Harry Chen, House Human Services, February 3, 2017

⁶ Vermont Department of Health 3-4-50 Statewide Data Brief, Centers for Disease Control Chronic Disease Cost Calculator

⁷ Vermont Department of Health 3-4-50 Statewide Data Brief, Centers for Disease Control Chronic Disease Cost Calculator

⁸ State of Obesity Report, Trust for America’s Health/Robert Wood Johnson Foundation

⁹ State of Obesity Report, Trust for America’s Health/Robert Wood Johnson Foundation

- 76% of adolescents and 80% of adults in Vermont do not eat the recommended 5 servings of fruit and vegetables each day (U.S. Department of Health and Human Services Guidelines).¹⁰
- Nutritional factors such as fruit and vegetable consumption and drinking sugar sweetened beverages can contribute to weight and body mass index. In 2013, Vermont adults who ate fewer than two fruits per day during the last month were significantly more likely to report being obese compared to those eating two or more daily (29% vs. 19%). This was also true when comparing vegetable consumption; those eating less than three vegetables were significantly more likely to report being obese compared to those eating at least three (28% vs. 15%).¹¹
- Obesity rates increase with the frequency of sugar sweetened beverage consumption. Twenty-three percent of Vermont adults who don't drink any sugar sweetened beverages daily report obesity, compared with more than a third (36%) of those having three or more daily.¹²
- In 2013, Vermont high school students who did not consume soda in the last week were half as likely to report being obese compared to students who reported drinking soda three times a day (9% vs. 21%).¹³
- The following includes some of the goals related to obesity included in the Vermont Department of Health's Healthy Vermonters 2020 Plan¹⁴:
 - Adults currently obese 25% -- Goal 20%
 - Children 2-5 in WIC currently obese 14% -- Goal 10%
 - Adolescents in grades 9-12 currently obese 12% -- Goal 8%
 - Percent of Adolescents eating vegetables 3 or more times a day currently 18% -- Goal 20%
- "In January 2013, Vermont's Governor Peter Shumlin made headlines across the country and the world by dedicating his entire State of the State address to the impact of opiates on our state. This spotlight on a critical health issue galvanized our state to address the opiate issue in a comprehensive way across all sectors of our state and communities. **Obesity, and the resulting health issues of coronary heart disease, diabetes and stroke, needs a similar approach.**"

-- quote included in narrative by VDH in its 2013 application for federal obesity prevention grant *PPHF 2014: Heart Disease & Stroke Prevention Program and Diabetes Prevention - State and Local Public Health Actions to Prevent Obesity, Diabetes, and Heart Disease and Stroke*

¹⁰ Vermont Department of Health, 2105 BRFSS and YRBS

¹¹ Vermont Department of Health, Obesity Data Brief, 2013 BRFSS

¹² Vermont Department of Health, Obesity Data Brief, 2013 BRFSS

¹³ Overweight and Obesity Among High School Students in Vermont, Physical Activity and Nutrition: Vermont 2013 Youth Risk Behavior Survey

¹⁴ <http://healthvermont.gov/about/reports/healthy-vermonters-plans-reports>