



# The Health of Vermonters Living with Disabilities

# Table of Contents

<b>Topic</b>	<b>Page</b>	<b>Topic</b>	<b>Page</b>
<a href="#"><u>Introduction</u></a> .....	<a href="#"><u>3</u></a>	<a href="#"><u>Cognitive Decline</u></a> .....	<a href="#"><u>50</u></a>
<a href="#"><u>Methodology</u></a> .....	<a href="#"><u>4</u></a>	<a href="#"><u>Depression</u></a> .....	<a href="#"><u>51</u></a>
<a href="#"><u>Executive Summary</u></a> .....	<a href="#"><u>9</u></a>	<a href="#"><u>Diabetes &amp; Kidney Disease</u></a> .....	<a href="#"><u>52</u></a>
<a href="#"><u>Demographics</u></a> .....	<a href="#"><u>11</u></a>	<a href="#"><u>Weight Status</u></a> .....	<a href="#"><u>54</u></a>
<a href="#"><u>Health Status</u></a> .....	<a href="#"><u>35</u></a>	<a href="#"><u>Preventative Behaviors</u></a> .....	<a href="#"><u>55</u></a>
<a href="#"><u>Health Care Access</u></a> .....	<a href="#"><u>36</u></a>	<a href="#"><u>Physical Activity</u></a> .....	<a href="#"><u>56</u></a>
<a href="#"><u>Quality of Life</u></a> .....	<a href="#"><u>37</u></a>	<a href="#"><u>Nutrition</u></a> .....	<a href="#"><u>57</u></a>
<a href="#"><u>Insurance Type</u></a> .....	<a href="#"><u>38</u></a>	<a href="#"><u>Older Adult Immunizations</u></a> .....	<a href="#"><u>58</u></a>
<a href="#"><u>Oral Health</u></a> .....	<a href="#"><u>39</u></a>	<a href="#"><u>Cancer screenings</u></a> .....	<a href="#"><u>59</u></a>
<a href="#"><u>Falls</u></a> .....	<a href="#"><u>40</u></a>	<a href="#"><u>HIV testing</u></a> .....	<a href="#"><u>62</u></a>
<a href="#"><u>Chronic Conditions</u></a> .....	<a href="#"><u>41</u></a>	<a href="#"><u>Risk Behaviors</u></a> .....	<a href="#"><u>63</u></a>
<a href="#"><u>Overall Burden of Chronic Conditions</u></a> ..	<a href="#"><u>42</u></a>	<a href="#"><u>Sexual &amp; Intimate Partner Violence</u></a> .....	<a href="#"><u>64</u></a>
<a href="#"><u>Arthritis</u></a> .....	<a href="#"><u>43</u></a>	<a href="#"><u>Alcohol Consumption</u></a> .....	<a href="#"><u>65</u></a>
<a href="#"><u>Lung Disease – Asthma &amp; COPD</u></a> .....	<a href="#"><u>44</u></a>	<a href="#"><u>Marijuana Use</u></a> .....	<a href="#"><u>66</u></a>
<a href="#"><u>Cancer</u></a> .....	<a href="#"><u>46</u></a>	<a href="#"><u>Prescription Drug Misuse</u></a> .....	<a href="#"><u>66</u></a>
<a href="#"><u>Cardiovascular Disease &amp; Hypertension</u></a>	<a href="#"><u>47</u></a>	<a href="#"><u>Tobacco Use</u></a> .....	<a href="#"><u>67</u></a>
<a href="#"><u>Cholesterol</u></a> .....	<a href="#"><u>48</u></a>	<a href="#"><u>Appendix A: Health Indicators by Disability Type</u></a>	<a href="#"><u>68</u></a>
		<a href="#"><u>Appendix B: National Core Indicators &amp; BRFSS</u></a>	<a href="#"><u>73</u></a>

*The Vermont Department of Health’s (VDH) Improving the Health of Vermonters with Mobility Limitations and Intellectual Disabilities through Integrated Chronic Disease Prevention Programs project is funded by cooperative agreement #NU27DD000008-01-00 with the Centers for Disease Control and Prevention (CDC). Its content is solely the responsibility of VDH and do not necessarily represent the views of the CDC or the Department of Health and Human Services.*

People with disabilities have higher rates of chronic conditions compared to people who don't have a disability. [The Health of Vermonters Living with Disabilities Data Pages](#) is a summary of the health and health behaviors of adults with disabilities. This report looks at many health factors such as chronic disease, mental health, and substance use. The Vermont Department of Health's Chronic Disease and Disability Program will use this information to work with state and local partners to lower and manage the rates of chronic conditions among Vermonters with disabilities. The Program will use this report to:

- Share information with state and community partners about why it's important that health programs can be used by all Vermonters, including people with disabilities.
- Help self-advocates and caregivers teach other community members about why the health of people with disabilities is important.
- Decide what changes can be made to health programs, laws, and the built environment to help lower rates of chronic disease.
- Modify approaches and outreach used by health programs to better engage people with disabilities.

This report reviews a lot of different information about health. The report was designed so that each page can be used as a separate information sheet to talk about one health topic at a time. Each data point is also broken down by type of disability in the Appendix.

It's hard to find data that looks just at the health of people with disabilities. Health Department data systems usually focus on the reason why a person needs medical care and how they got that care. Information from these data systems can tell us if a person went to the emergency room, what health issue a patient was diagnosed with, and how many people were born or died during a certain amount of time. These data systems do not tell us about patient disability status.

The Behavioral Risk Factor Surveillance System (BRFSS) is a data system that collects the most health information about Vermonters with disabilities compared to other data systems. As a result, BRFSS was the main data source used to create this report. It's important to note that this data may be different than other BRFSS reports. Some BRFSS reports age-adjust data so that it can be compared to the U.S. This report does not age-adjust so that the information presented shows the current health status of Vermonters with a disability.

Data from the United States Census: American Community Survey (ACS) data is used in this report to determine the disability status across all ages. Data from the National Core Indicators (NCI) Survey is shown in Appendix B for a few measures that are similar to the BRFSS. Note that this data source is limited to Vermonters receiving developmental disabilities services. The NCI and BRFSS data are not comparable.

(Continued onto next page)

The National Survey on Children's Health (NSCH) and Vermonters who qualify for Medicaid due to Social Security Administration Disability status (Medicaid Claims) are two other data systems that were looked at but not used for this report. The NSCH was not included because there were not enough people who answered the survey to get information on Vermont children with a disability. The Medicaid Claims data was not used because only one third of adults with disabilities in the state are enrolled in this Medicaid program<sup>1</sup> and disability type is not specified. These data systems may be used in future reports when more data are available or to learn about certain Vermonters with disabilities.

<sup>1</sup>Social Security Administration. (2018, 01 02). *SSA Disability Claim Data*. Retrieved from Data.gov: <https://catalog.data.gov/dataset/ssa-disability-claim-data>

- The [Behavioral Risk Factor Surveillance Survey](#) (BRFSS) is a telephone survey that is done every year. 6,000 - 7,000 Vermont adults answer the survey. All questions are tested to make sure respondents understand the questions in the same way. The BRFSS performs similarly compared to other health-related surveys.
- BRFSS does not include people living in institutions or group homes. Since people living in group homes may be more likely to have a disability, the BRFSS may not include information about all Vermont adults with a disability. Questions used to define disability do not include information on permanence or duration of a disability or underlying medical condition.
- BRFSS uses six questions to ask about disability of Vermonters:
  - ▣ Mobility: serious difficulty walking or climbing stairs.
  - ▣ Cognitive: serious difficulty concentrating, remembering, or making decisions.
  - ▣ Visual: blindness or serious difficulty seeing, even when wearing glasses.
  - ▣ Hearing: deafness or serious difficulty hearing.
  - ▣ Self-Care: any difficulty dressing or bathing.
  - ▣ Independent Living: any difficulty doing errands alone.

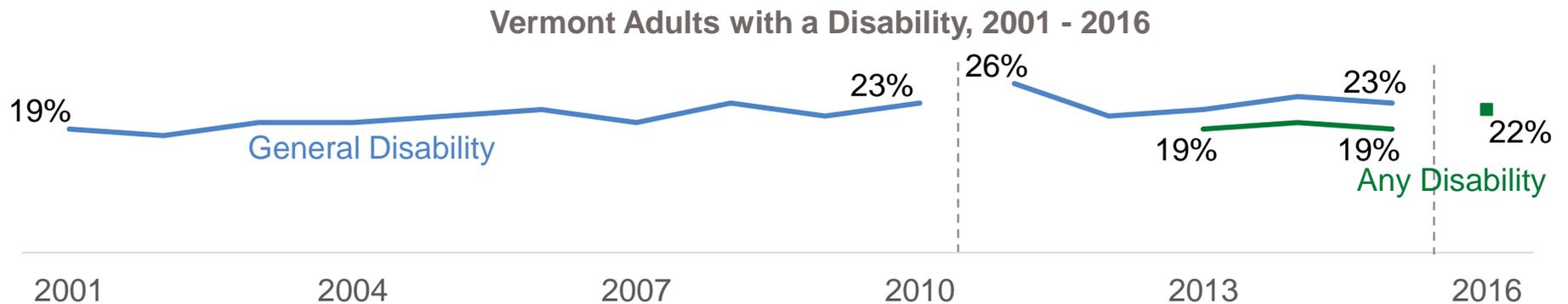
These questions are combined to give information about three other disability types:

- ▣ Any disability: one or any combination of the above;
- ▣ Multiple disabilities: any combination of the above;
- ▣ No disability: none of the above.

(continued onto next page)

- It is important to consider factors such as age and gender when looking at health information for Vermonters with a disability. For example, people that are different ages report having a cognitive disability at about the same rate. People that are older are more likely to say they have a hearing disability compared to people that are younger. Vermonters reporting these disabilities types also report very different marijuana use, HIV screening behaviors and depression diagnosis. The differences may be because of age as well as their disability type.
- Until 2015, BRFSS used two questions to define general disability:
  - ▣ Activity limitations due to physical, emotional or mental problems, OR
  - ▣ Any health problem that requires use of special equipment.

In 2013, BRFSS started to ask questions about mobility, cognitive, visual, self-care, and independent living disabilities. In 2016, BRFSS started asking about hearing disability. Adding the hearing disability question in 2016 changed the number of people that might report having a disability. As a result, the number of adults with a disability before 2016 can't be compared to the number of adults with a disability after 2016.



### US Census American Community Survey

- The American Community Survey (ACS) is a national survey led by the US Census. The survey is distributed by mail and completed either by mail, phone, online or in-person. In 2016, the ACS interviewed 8,650 Vermonters. This report uses 1-year estimates from Fact Finder table S1810. The ACS and BRFSS use the same 6 questions to define any disability. These questions were content tested by the ACS in 2006<sup>1</sup>.

### National Core Indicators Survey

- The [National Core Indicators](#) (NCI) program tracks performance of state developmental disability agencies using a standard survey. The NCI survey is led by the National Association of State Directors of Developmental Disabilities Services and the Human Services Research Institute.
- The NCI measures more than 100 performance measures around outcomes of state services and helps us look at Vermonters that receive developmental disabilities services other than case management. This report only focuses on the health and safety-related indicators that are like indicators used in BRFSS. In 2015-2016 the NCI interviewed 326 Vermont adults.

### Vermont Department of Disabilities, Aging and Independent Living

- Information on direct services funded by the Department of Aging and Independent Living, provided by program type, can be found here: [http://dail.vermont.gov/sites/dail/files/documents/Compiled\\_2017\\_Annual\\_Report.pdf](http://dail.vermont.gov/sites/dail/files/documents/Compiled_2017_Annual_Report.pdf)

<sup>1</sup>US Census Bureau (2018, 01 02). *Evaluation Report Covering Disability*. Retrieved from Census.gov: [https://www.census.gov/content/dam/Census/library/working-papers/2007/acs/2007\\_Brault\\_01.pdf](https://www.census.gov/content/dam/Census/library/working-papers/2007/acs/2007_Brault_01.pdf)

1 in 5 Vermont adults have at least one type of disability, and 1 in 10 have two or more disabilities.

Vermonters with a disability have significant differences in health compared to Vermonters without a disability:

- **Health Status:** One third of Vermonters with a disability report poor physical health and one third report poor mental health. Adults with a disability are less likely to report seeing the dentist in the last year and are twice as likely to have ever had a tooth pulled compared to adults without a disability. Adults age 65 and older with a disability are twice as likely to report a fall in the last year than those adults with no disability.
- **Chronic Conditions:** 95% percent of adults with a disability have a chronic condition. 2 out of 3 adults with a disability have two or more chronic conditions. Adults with a disability are three times as likely than adults without a disability to have asthma, COPD, diabetes, cardiovascular disease, kidney disease, cognitive decline and depression. Three-quarters of Vermont adults with a disability are overweight or obese.

(continued onto next page)

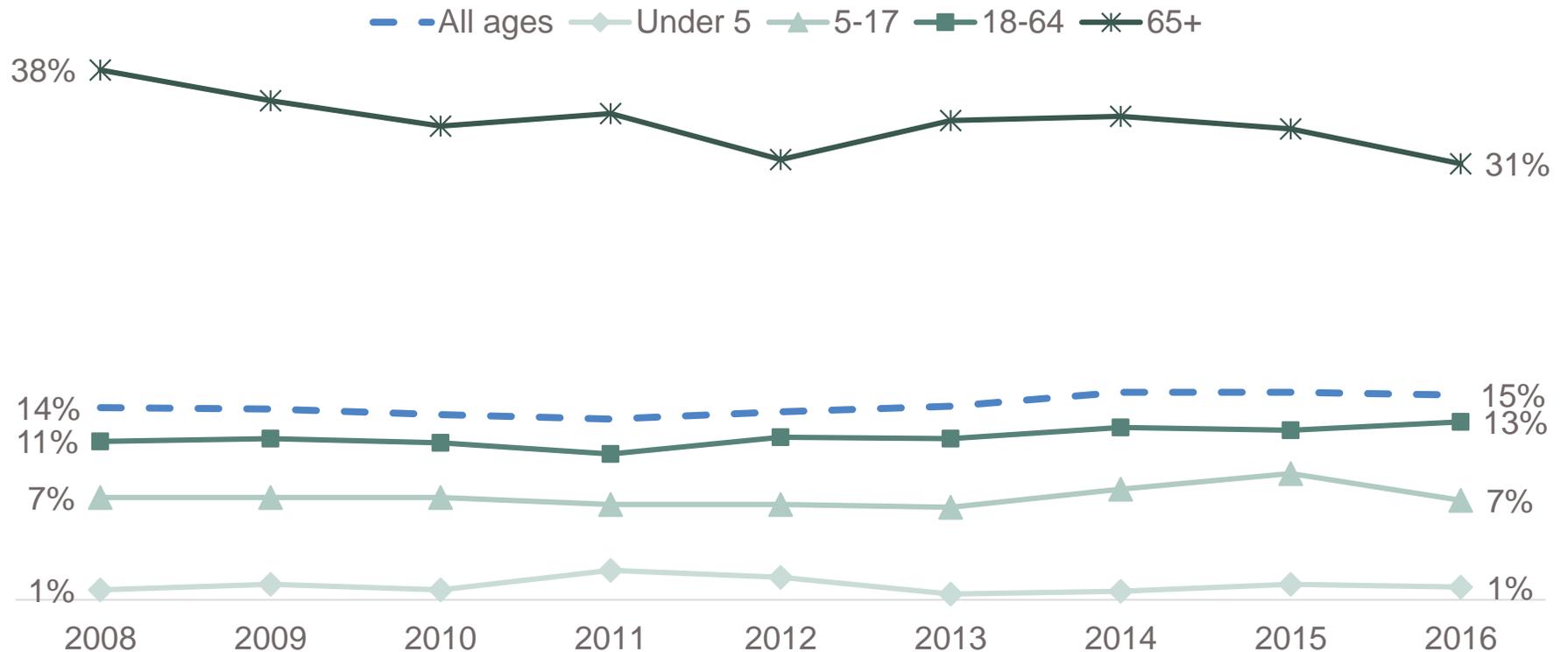
- **Preventative Behaviors:** Adults with a disability are less likely to meet physical activity and strength training recommendations or eat the recommended amount of fruits and vegetables. Adults with a disability are less likely to get recommended cancer screenings than adults with no disability.
- **Risk Behaviors:** Adults with a disability are three times as likely to smoke cigarettes and twice as likely to use marijuana than adults with no disability. People that have a disability are less likely to use alcohol and binge drink compared to people who don't have a disability. Vermont adults living with a disability are twice as likely to have ever experienced sexual violence and intimate partner violence.

# Any Disability Across Ages

One in seven (15%) people in Vermont have a disability. The amount of people who have a disability increases as people get older.

The amount of people in each age group that has a disability has stayed the same since 2008. Even though it looks like the number of people who have a disability in older age groups decreases with time, this is not a significant change.

**Percent of Vermonters with Any Disability, by Age**



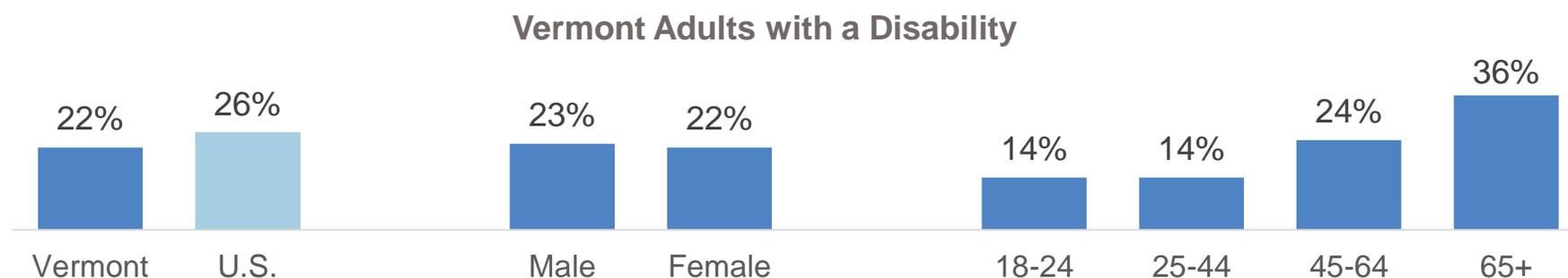
## Any Disability

**People who have a disability have a hard time seeing, hearing, walking, using stairs, getting dressed, washing, focusing, or making choices. People with a disability may also have a hard time going out to shop because of a physical, mental, or emotional condition.**

About 110,000 adults in Vermont have a disability.

Two in ten (22%) adults in Vermont have a disability. This is less than adults in the U.S. who have a disability (26%).

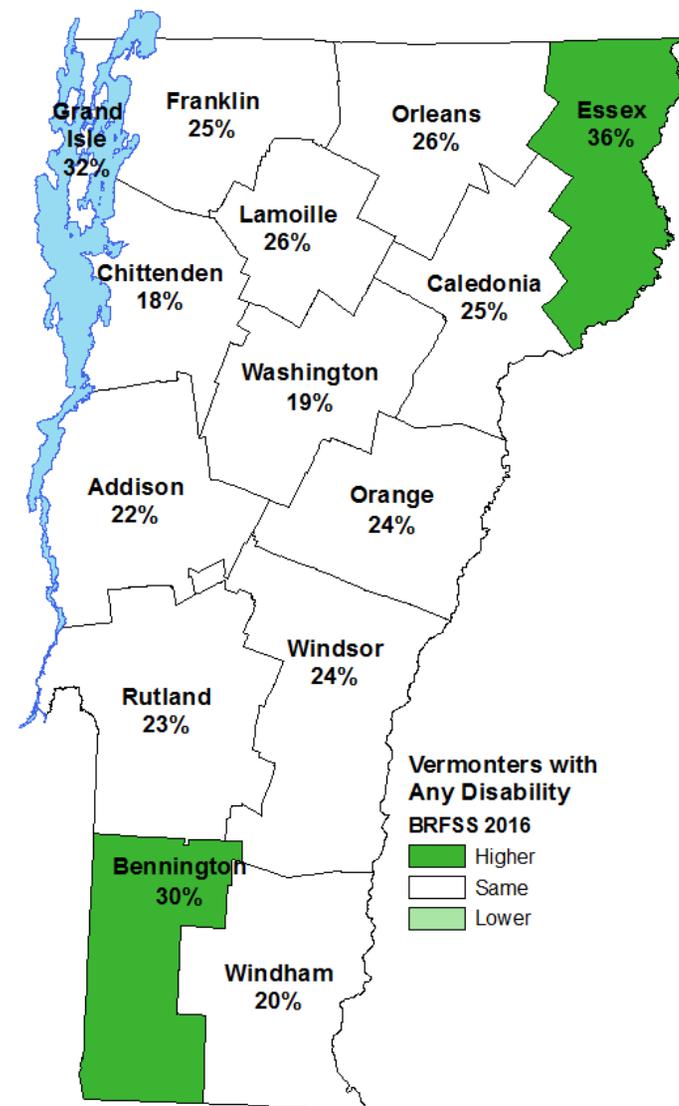
About the same amount of men and women have a disability. As people in Vermont get older they are more likely to have any disability.



This disability by age graph is different from the page before because of the different data sources that were used.

## Any Disability (continued)

People who live in Essex county and Bennington county are more likely to have a disability than people living in Vermont overall.



# Mobility Disability

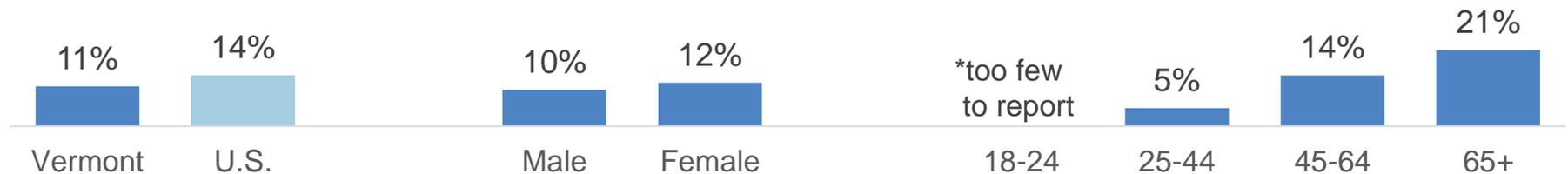
**People who have a mobility disability have a hard time walking or using stairs because of a physical, mental, or emotional condition.**

One in ten (11%) adults in Vermont has a mobility disability. This is about 55,000 people. This is less than adults in the U.S. who have a mobility disability (14%).

In Vermont, women (12%) are more likely to have a mobility disability than men (10%).

As people in Vermont get older they are more likely to have a mobility disability.

**Vermont Adults with a Mobility Disability**



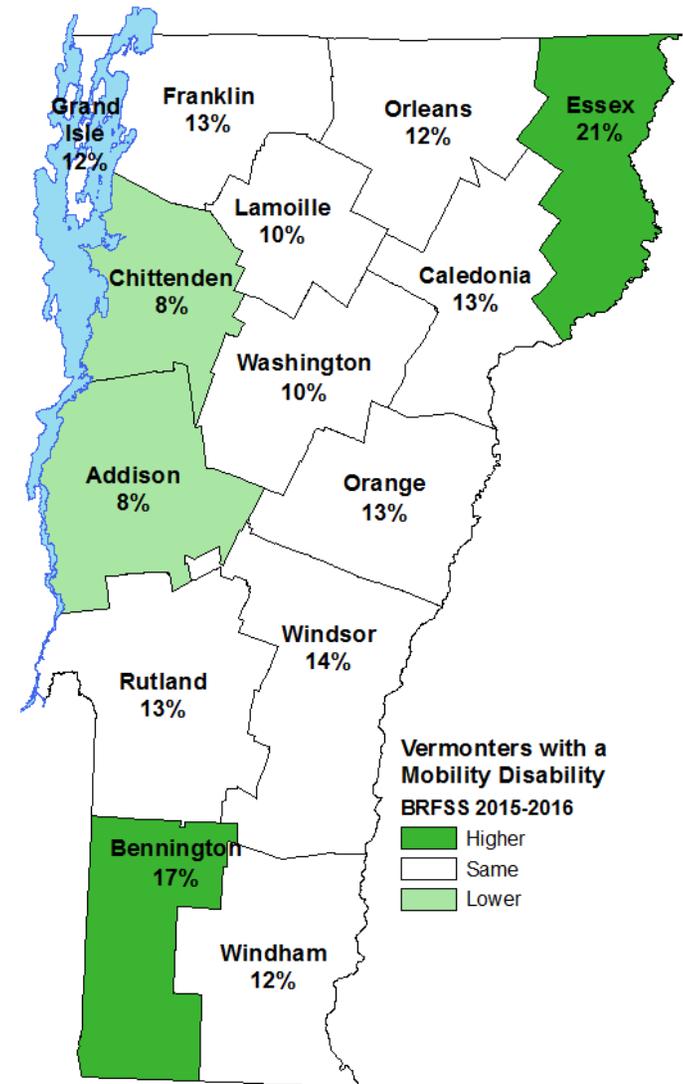
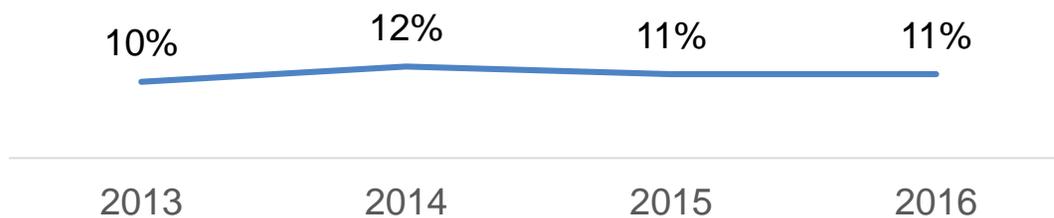
# Mobility Disability (continued)

People who live in Essex county and Bennington county are more likely to have a mobility disability than people living Vermont overall.

People who live in Chittenden county and Addison county are less likely to have a mobility disability than people living in Vermont overall.

There has been no change in the amount of people in Vermont who have a mobility disability since 2013.

**Vermont Adults with a Mobility Disability, 2013 - 2016**



# Cognitive Disability

**People who have a cognitive disability have a hard time focusing or making decisions because of a physical, mental or emotional condition.**

About 46,000 adults in Vermont have a cognitive disability.

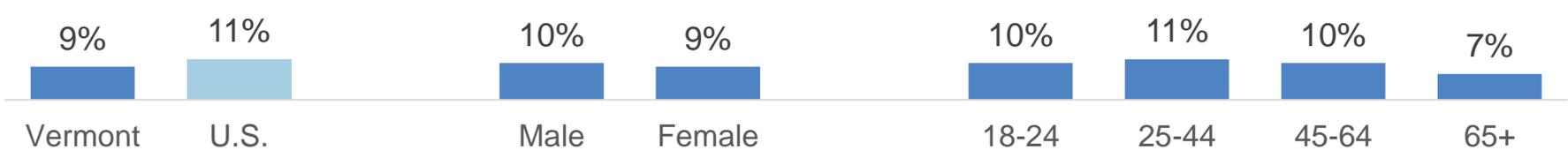
One in ten (9%) adults in Vermont have a cognitive disability. This is less than adults in the U.S. who have a cognitive disability (11%).

About the same amount of men and women have a cognitive disability.

Adults more than 65 years old are less likely to have a cognitive disability than adults 24-44 years old and adults 45-64 years old.

Not all people with a cognitive disability may be included in the survey. Adults with a cognitive disability may be less likely to answer the phone to complete the survey. Adults with a cognitive disability that live in an institution or group home are not included in the survey. This could mean that there are more adults in Vermont who have a cognitive disability than the survey shows.

**Vermont Adults with a Cognitive Disability**



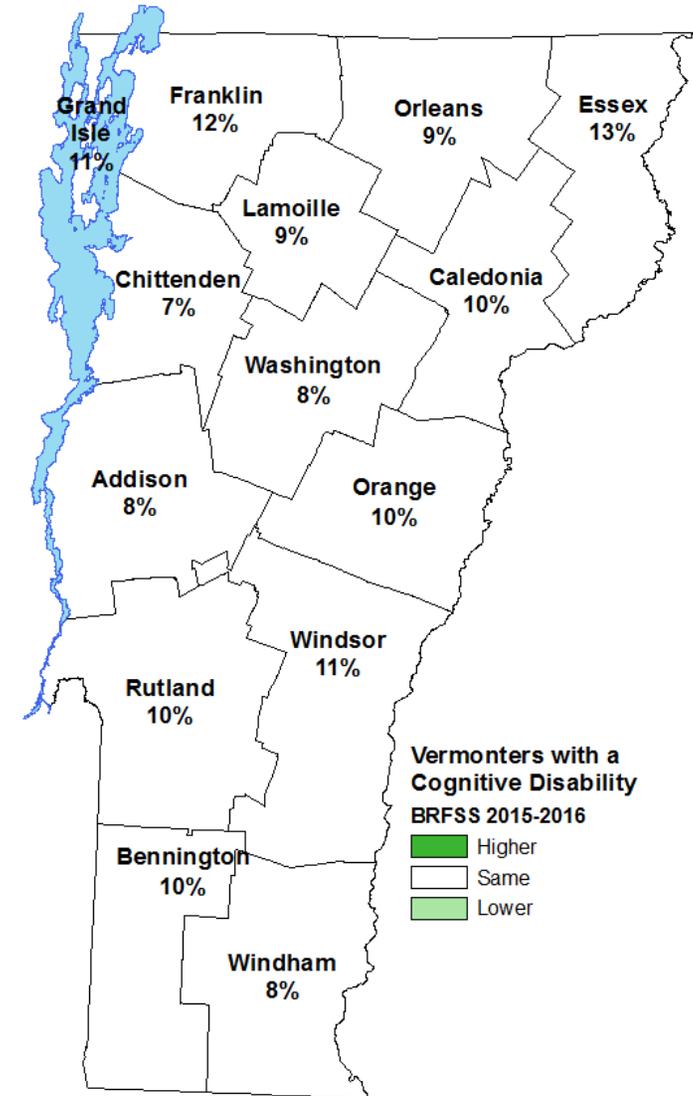
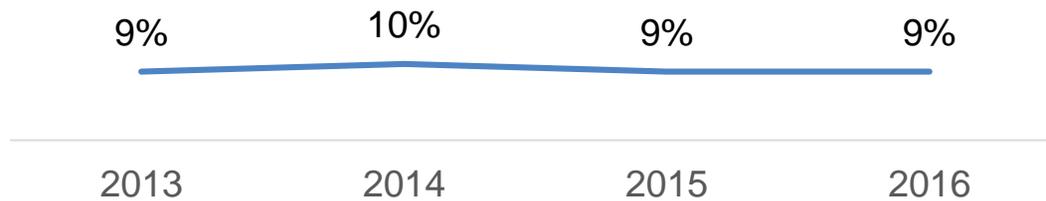
# Cognitive Disability (continued)



The number of adults who have a cognitive disability in each county in Vermont is about the same.

The number of adults in Vermont who have a cognitive disability has stayed the same since 2013.

Vermont Adults with a Cognitive Disability, 2013 - 2016



# Hearing Disability

**People who have a hearing disability either have a hard time hearing or are deaf.**

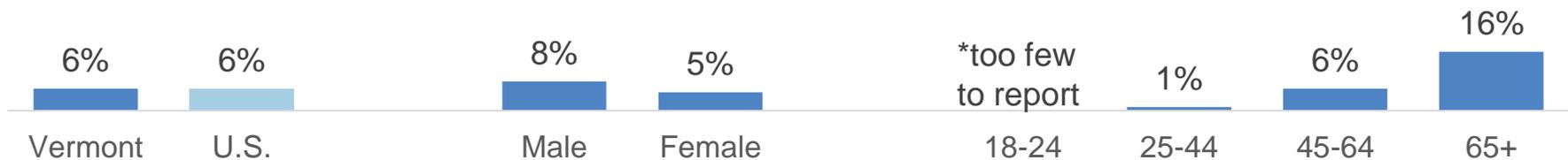
About 31,000 adults living in Vermont have a hearing disability.

One in twenty (6%) adults have a hearing disability. This is the same as adults in the U.S. who have a hearing disability (6%).

Men are more likely to have a hearing disability (8%) than women (5%).

As people in Vermont get older they are more likely to have a hearing disability. 16% of adults more than 65 years old have a hearing disability. 1% of adults that are 25-45 years old have a hearing disability.

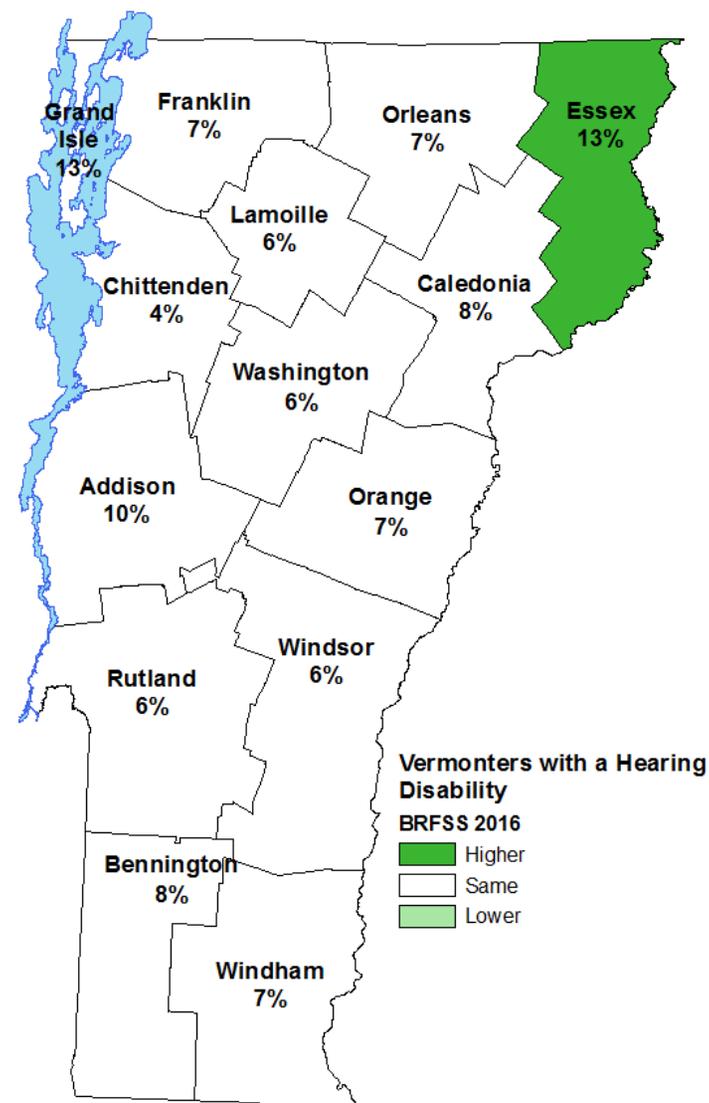
**Vermont Adults with a Hearing Disability**



## Hearing Disability (continued)

People who live in Essex County are more likely to have a hearing disability than people living in Vermont overall.

**Note:** 2016 was the first year the Behavioral Risk Factor Surveillance System (BRFSS) survey started to collect information about hearing disability. This means we do not have a lot of information yet about people in Vermont who have a hearing disability.



# Independent Living Disability

**People with an independent living disability have a hard time going out to run errands by themselves because of a physical, mental or emotional condition.**

About 29,000 adults in Vermont have an independent living disability.

One in twenty (6%) adults in Vermont have an independent living disability. This is about the same as adults in the U.S. (7%) who have an independent living disability.

About the same amount of men and women have an independent living disability.

About the same amount of people in each age group have an independent living disability.

**Vermont Adults with an Independent Living Disability**



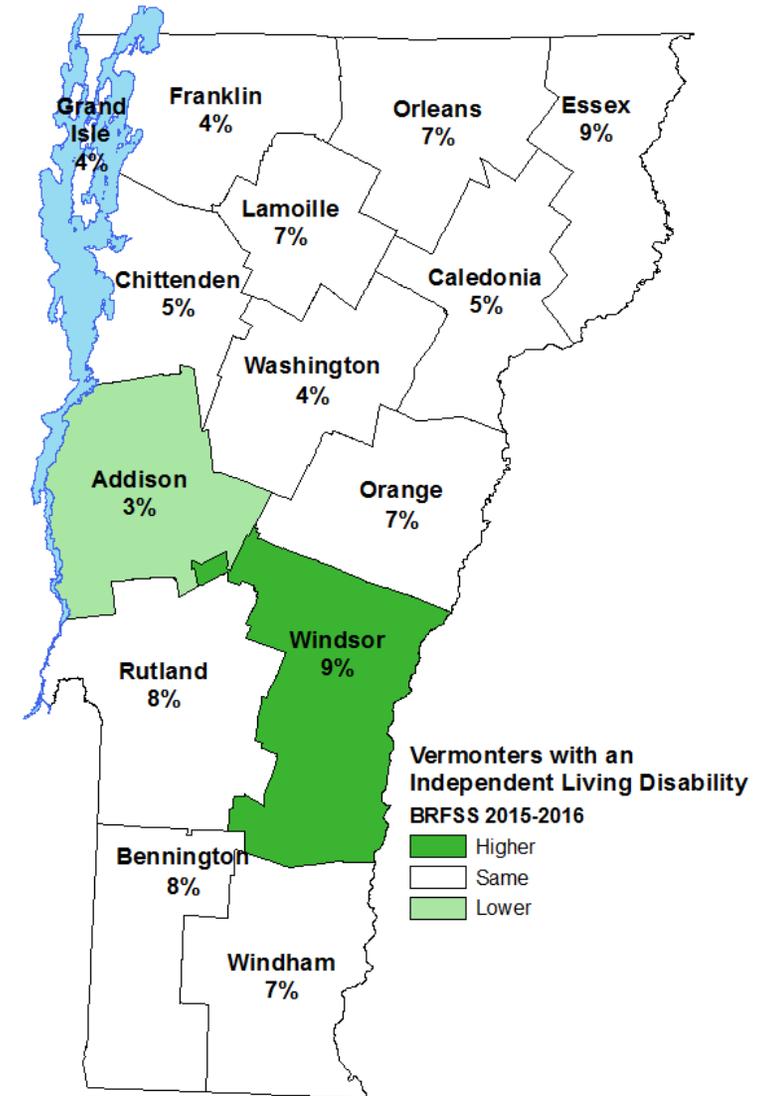
# Independent Living Disability (continued)



Adults who live in Windsor County are more likely to have an independent living disability than adults living in Vermont overall. Adults who live in Addison County are less likely to have an independent living disability than adults living in Vermont overall.

There has been no change in the amount of adults who have an independent living disability in each county since 2013.

**Vermont Adults with an Independent Living Disability 2013 - 2016**



# Visual Disability

**People who have a visual disability have full blindness or have a hard time seeing even when wearing glasses.**

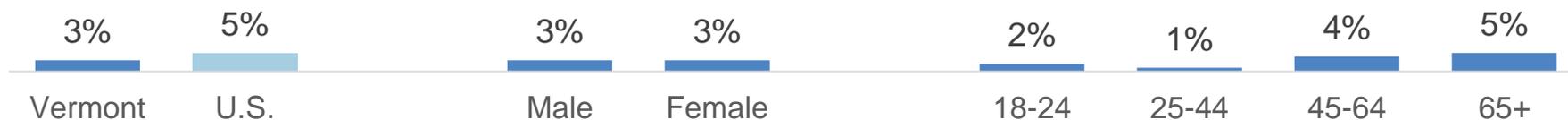
About 17,000 adults living in Vermont have a visual disability.

One in thirty (3%) adults in Vermont have a visual disability. This is less than adults in the U.S. who have a visual disability (5%).

The same amount of men and women in Vermont have a visual disability.

Adults who are 45 years or older are more likely to have a visual disability than people who are 25 - 44 years old.

**Vermont Adults with a Visual Disability**

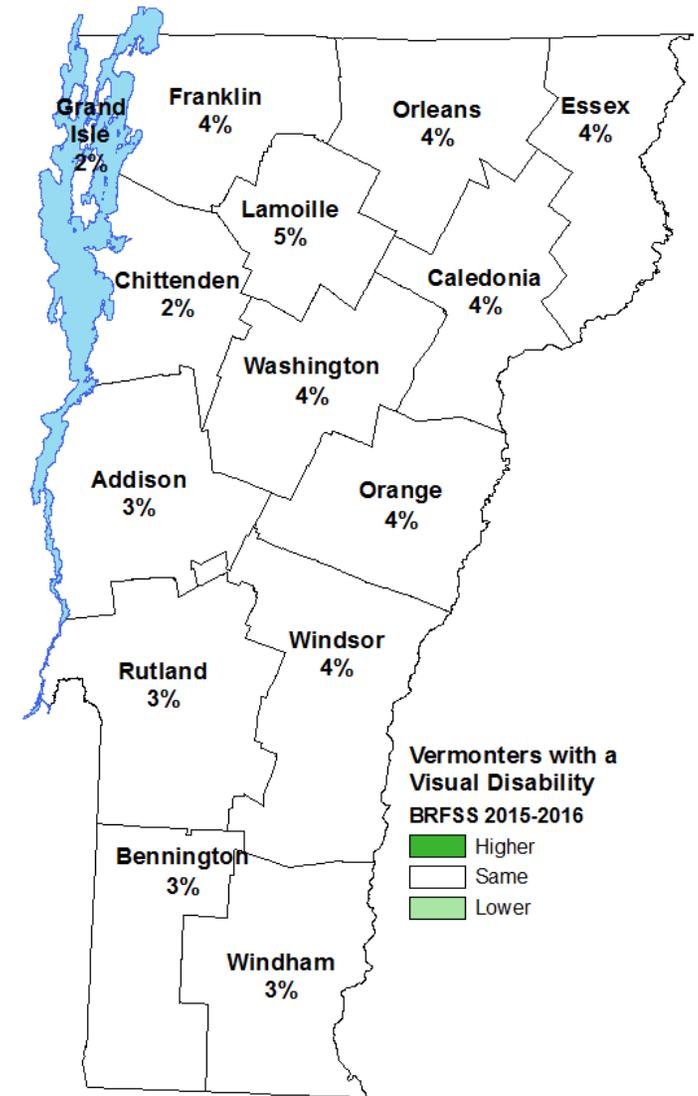


# Visual Disability (continued)

The same amount of people in each county have a visual disability.

There has been no change in the amount of people who have a visual disability in Vermont since 2013.

**Vermont Adults with a Visual Disability, 2013 - 2016**



# Self-care Disability

**People who have a self-care disability have a hard time dressing or taking a shower by themselves.**

About 15,000 adults living in Vermont have a self-care disability.

One in thirty (3%) adults in Vermont have a self-care disability. This is less than adults in the U.S. (4%) who have a self-care disability.

The same amount of men and women in Vermont have a self-care disability.

Adults who are more than 45 years old are more likely to have a self-care disability than adults who are 25 - 44 years old.

**Vermont Adults with a Self-care Disability**



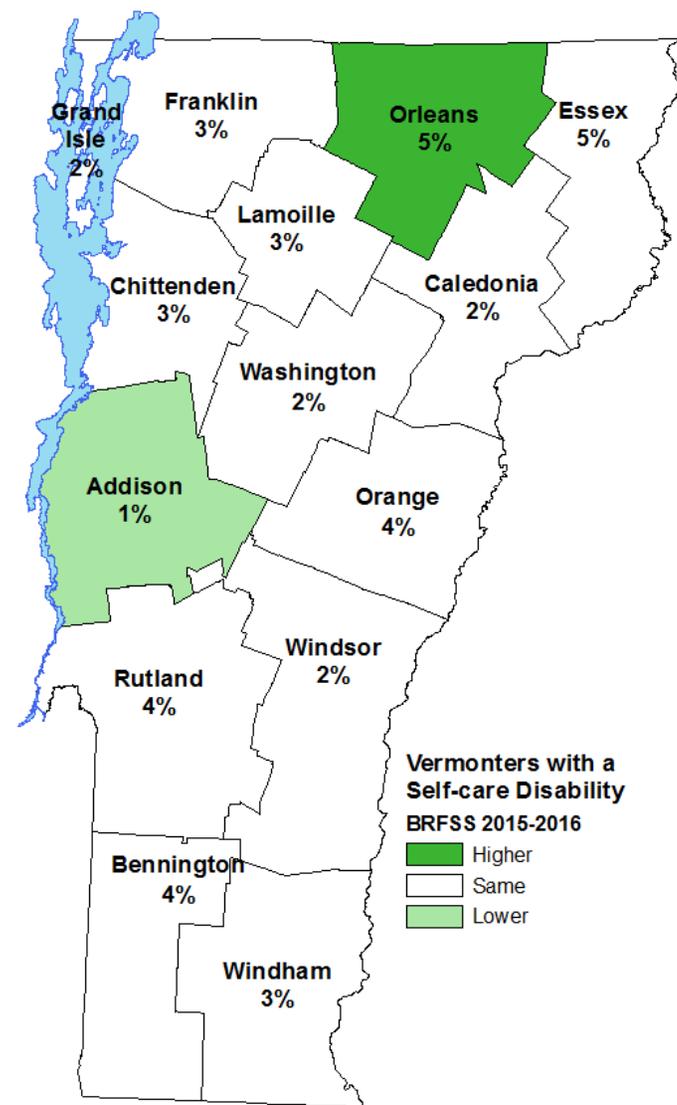
# Self-care Disability (continued)

People who live in Orleans County are more likely to have a self-care disability than people living in Vermont overall.

People who live in Addison County are less likely to have a self-care disability than people living in Vermont overall.

There has been no change in the amount of people who have a self-care disability in Vermont since 2013.

**Vermont Adults with a Self-care Disability, 2013 - 2016**



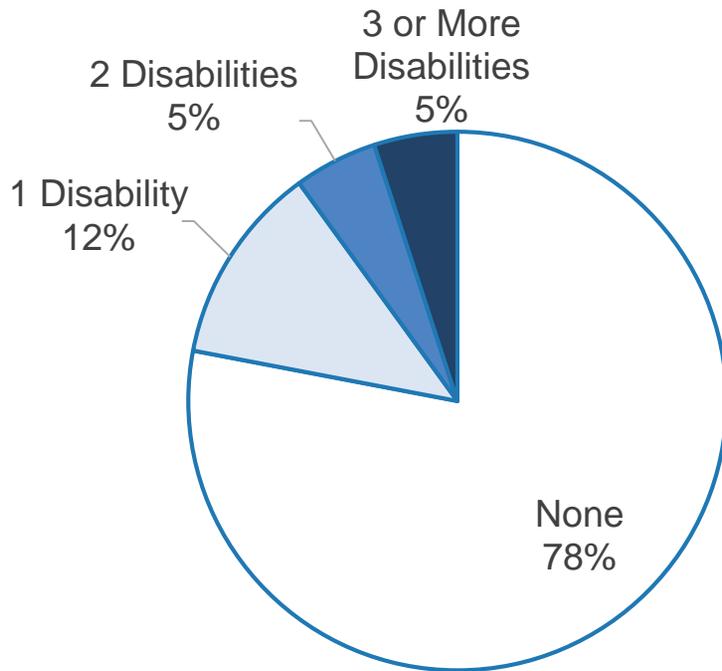
# Adults with More than One Disability

22% of adults living in Vermont have a disability. About half of these adults, or 49,000 people, have more than one disability.

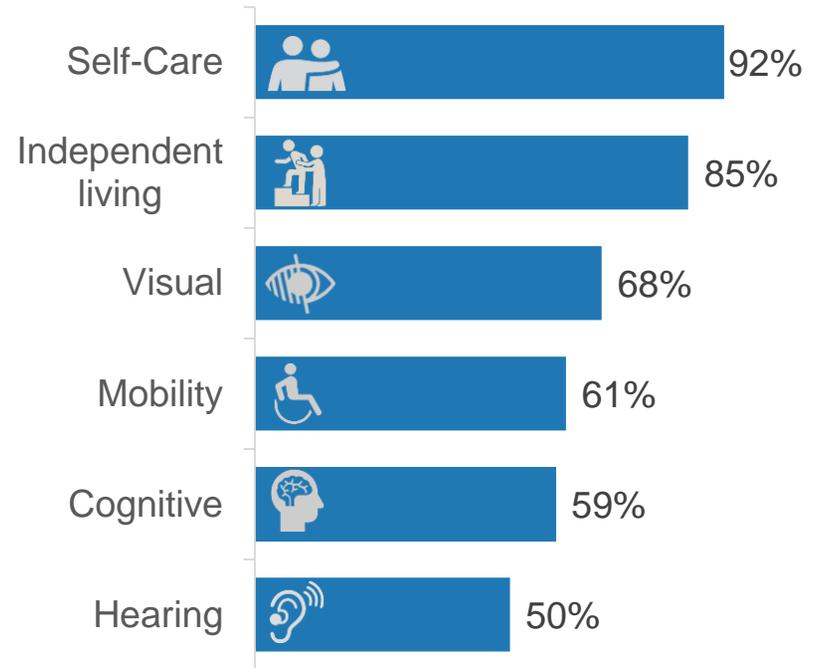
Most adults who have a self-care disability (92%) also have another type of disability.

Adults who have a hearing disability are least likely to also have another type of disability.

**Reported Number of Disability Types Among Adults**



**Adults with More than One Disability by Disability Type**



# People of Color

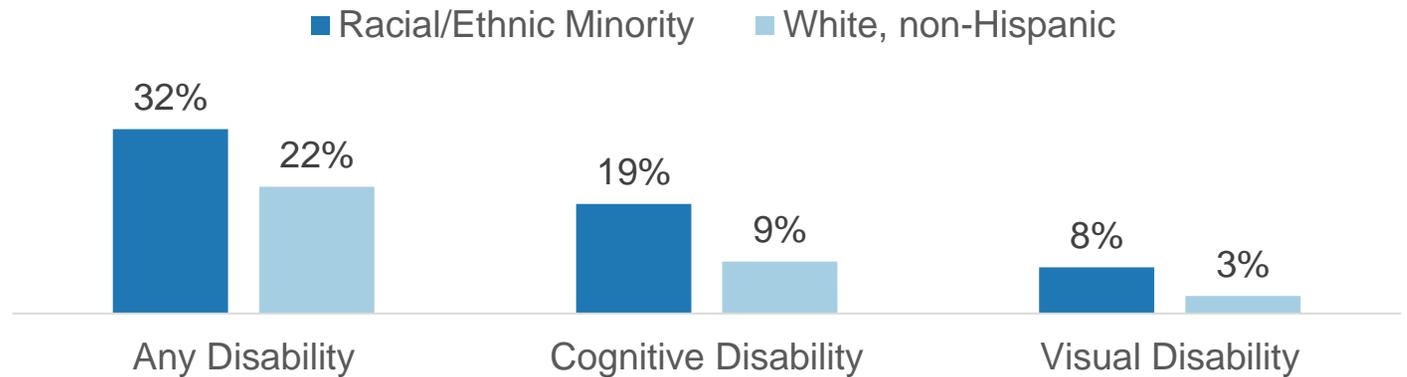
Vermonters of racial or ethnic minority are more likely to have a disability.

One third (32%) of adults of color who live in Vermont have a disability.



One fifth (22%) of adults who are white, non-Hispanic have a disability.

Adults of color are two times as likely to have a cognitive disability or visual disability than white adults.



# Sexual Orientation and Gender Identity

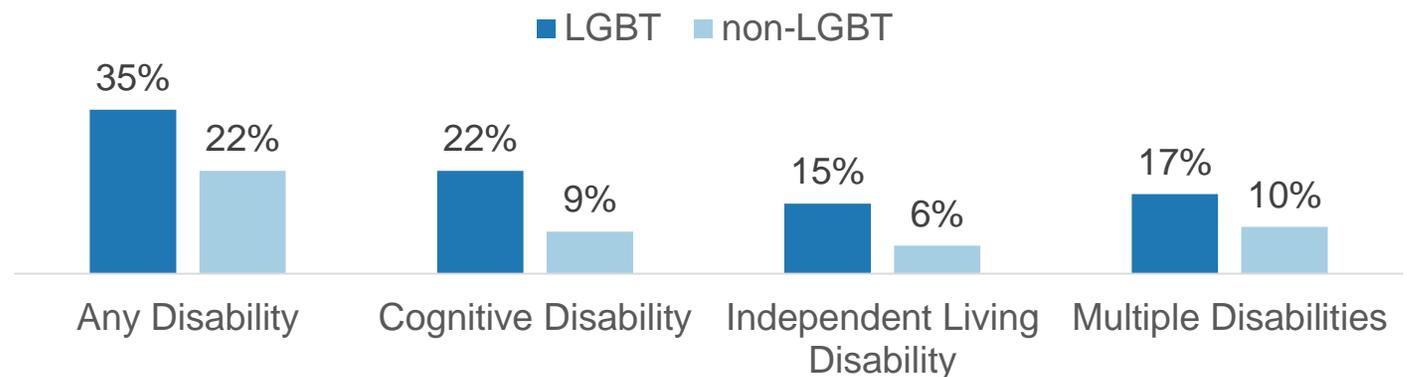
Lesbian, Gay, Bisexual and Transgender Vermonters are more likely to have a disability.

One-third (35%) of LGBT adults in Vermont have a disability.



One-fifth (22%) of non-LGBT adults have a disability.

LGBT adults are two times as likely to have any disability or more than one disability than non-LGBT adults.



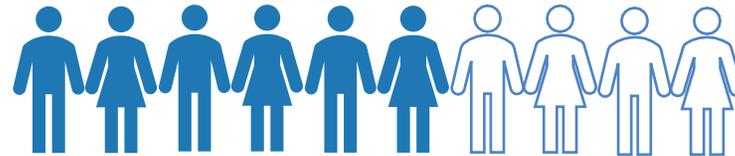
# Education

Adults living in Vermont who have a disability have less education than adults who don't have a disability.

58% of adults with a disability have a high school degree or less.

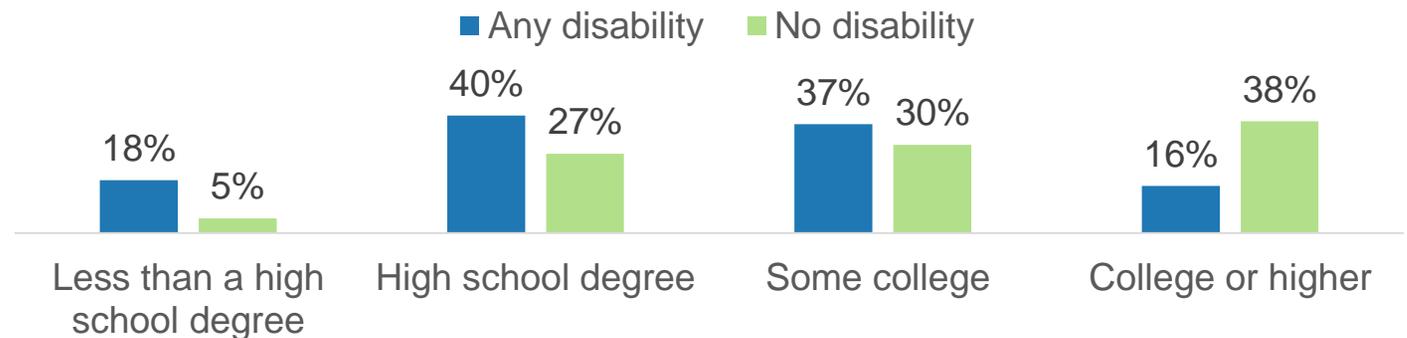
Two in ten (18%) adults who have a disability do not have a high school diploma.

Six in ten adults in Vermont who have a disability have a high school diploma or less education. Adults in Vermont who have a disability are less likely to have a high school diploma than adults who don't have a disability.



Four in ten adults who have a disability have some college education.

Two in ten (16%) adults with a disability have more than a college education. Adults in Vermont who don't have a disability are more likely to have a college degree than adults who have a disability.



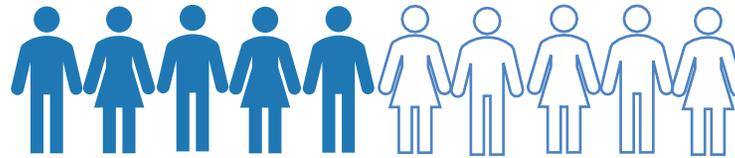
# Household Income

Adults in Vermont with a disability live in homes that make less money than adults without a disability.

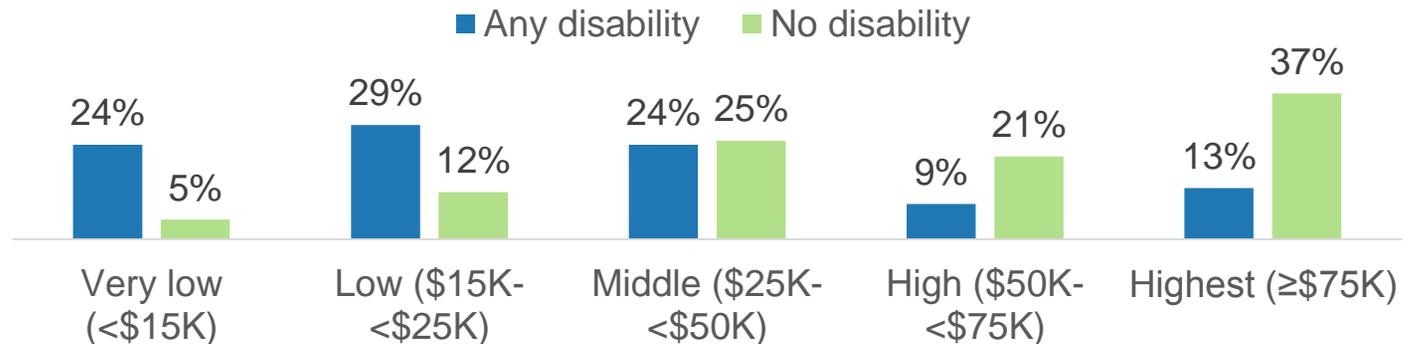
53% of adults with a disability live in a house that makes less than \$25,000 a year.

**Household income is the total amount of money that all people living in one house make.**

Half of adults living in Vermont who have a disability live in a house that makes less than \$25,000 a year.



One-quarter (24%) of adults with a disability live in a house that makes less than \$15,000 per year. Three in ten (29%) adults with a disability live in a house that makes \$15,000 to \$25,000 a year. One-quarter of adults with a disability live in a house that makes \$25,000 to \$50,000 a year. Two in ten adults with a disability (22%) live in a house that makes more than \$50,000 a year.

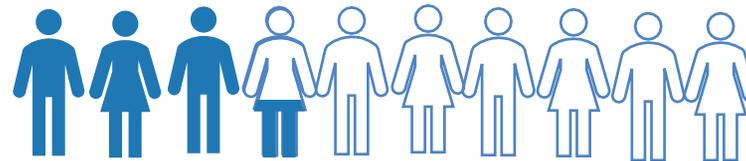


# Employment

Vermonters with a disability are less likely to be working.

35% of Vermont adults with a disability are unable to work.

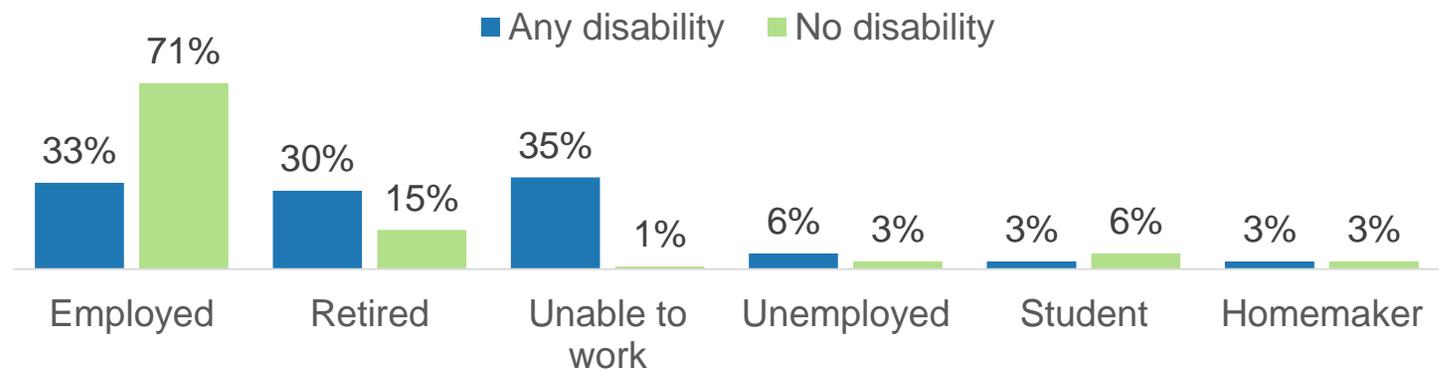
One-third (33%) of adults with a disability are currently working. Adults with a disability are less likely to be working than adults without a disability.



One in twenty (6%) adults with a disability do not have a job but are looking for one.

One-third (35%) of adults in Vermont with a disability are not able to work.

30% of adults with a disability are retired. Adults with a disability are more likely than adults without a disability to be retired or unable to work.



## Home Life – Marital Status

Adults with a disability are less likely to be married.

Vermonters with a disability are more likely to be divorced or widowed.

Four in ten (38%) adults with a disability are married.



Six in ten (57%) of adults without a disability are married.

One-quarter (23%) of adults with a disability are single and have never been married.

Twenty-one percent of adults without a disability are single and have never been married.

Adults with a disability are two times as likely to be divorced than adults without a disability (19% vs 10%). Adults with a disability are three times as likely to be widowed as adults without a disability (14% vs. 5%).

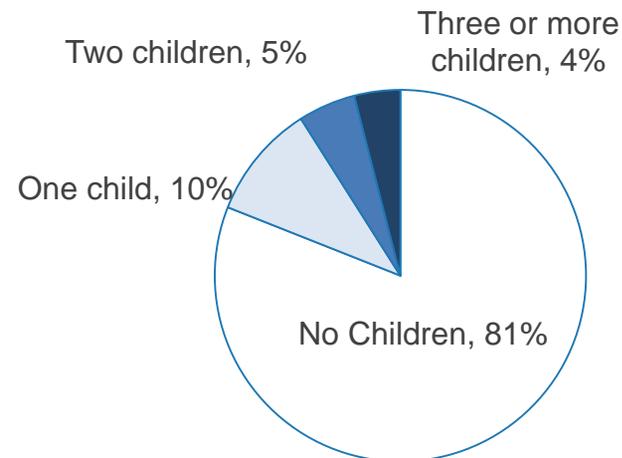
## Home Life – Children in the home

Vermonters with a disability are more likely to have no children in the home.

One-fifth (19%) of adults with a disability live in a home with children. One-third of adults without a disability (32%) live in a home with children.

Differences in adults who are widowed or have children in the home may be because older adults are more likely to have a disability. Older adults are more likely to be widowed and are more likely to not have children in the home.

**Adults with a disability and children in their home**



# Housing and Veteran Status

Adults with a disability are less likely to own their homes compared to those without a disability. Adults with a disability are more likely to rent their home than adults without a disability.

Vermonters with a disability are more likely to be a veteran.

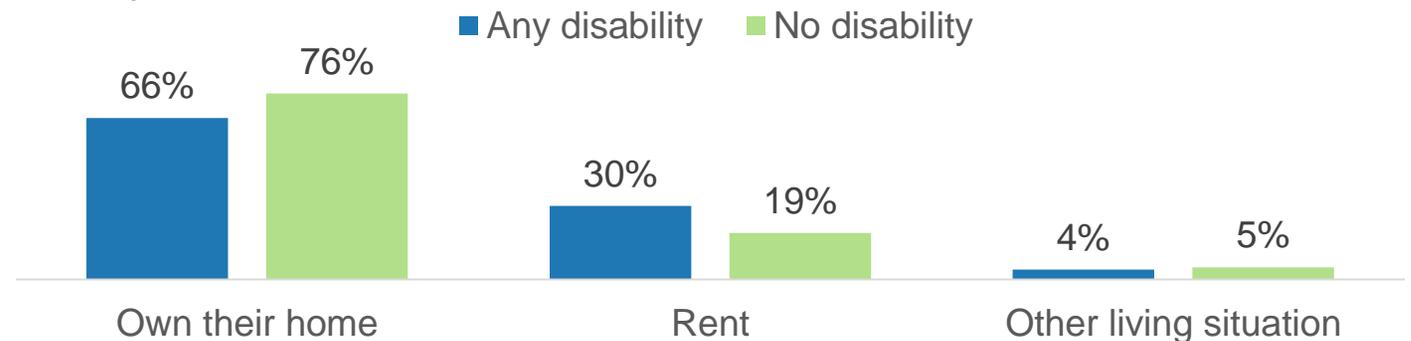
Two-thirds of adults in Vermont with a disability own their home.



Three in ten (30%) adults with a disability rent their home.

About the same number of adults with a hearing disability (80%) as people without a disability own their home.

About the same number of adults with a hearing disability (18%) as people without a disability rent their home.



One-sixth (15%) of adults in Vermont with a disability are veterans of the military. This is more than adults in Vermont without a disability who are veterans (10%). Adults with a hearing disability are much more likely to be veterans (26%).

# Health Status

- Quality of Life
- Health Care Access
- Insurance Type
- Oral Health
- Falls

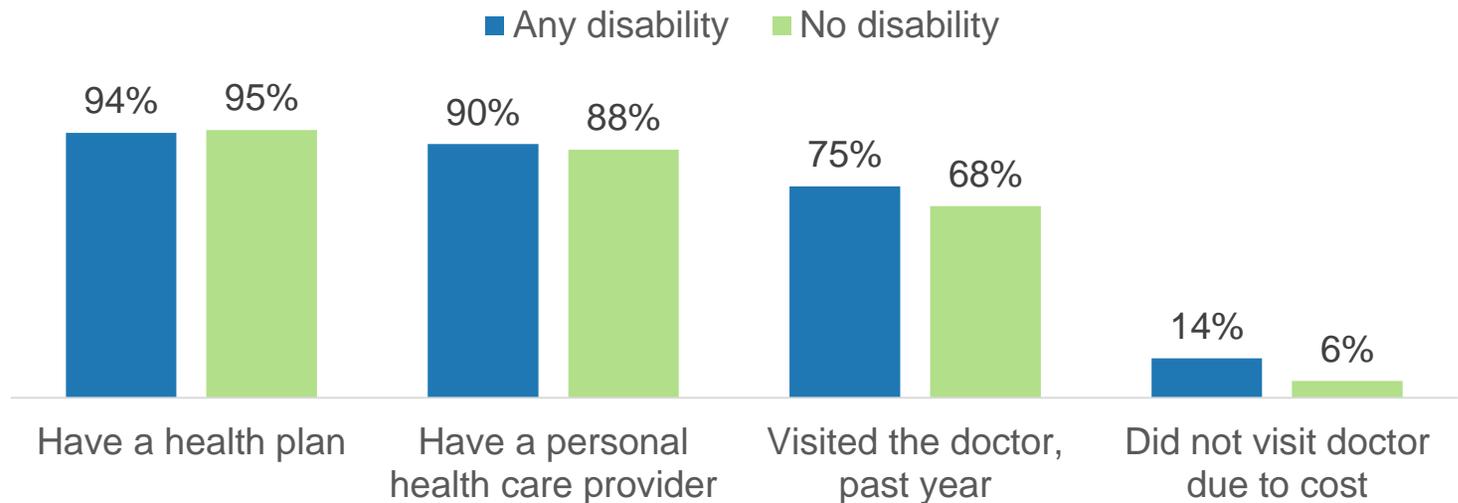
# Health Care Access

Adults in Vermont with a disability are more likely than adults without a disability to have gone to the doctor in the last year.

14% of adults with a disability did not go to the doctor in the last year because of the cost.

Most adults in Vermont with a disability (94%) have a health insurance plan. Nine in 10 adults with a disability have a personal health care provider. This is about the same as adults with no disability who have a health insurance plan and personal health care provider.

Three-quarters of adults in Vermont with a disability saw a doctor in the last year. Two times as many adults with a disability (14%) as adults without a disability (6%) did not see the doctor in the last year because of how much it costs.



# Quality of Life

Compared to adults without a disability, indicators of poor health are at least three times higher among adults with a disability.

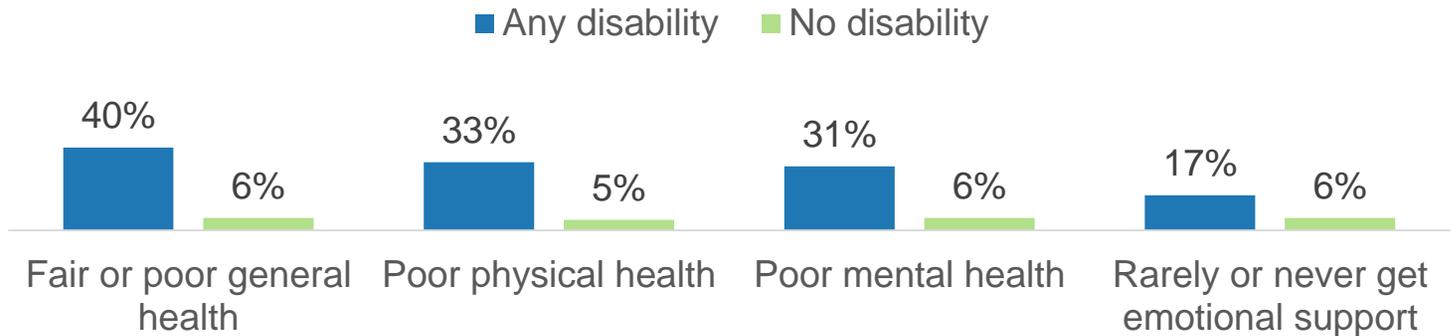
Adults with a disability are less likely to get the emotional support they need.

## Indicators of health include general health, physical health, mental health, and emotional support.

Four in ten adults in Vermont with a disability have fair or poor general health. This is seven times more than adults without a disability.

One third of adults with a disability have poor physical health. One third of adults with a disability have poor mental health.

One in five adults with a disability do not get the emotional support they need. This is three times more than adults without a disability.

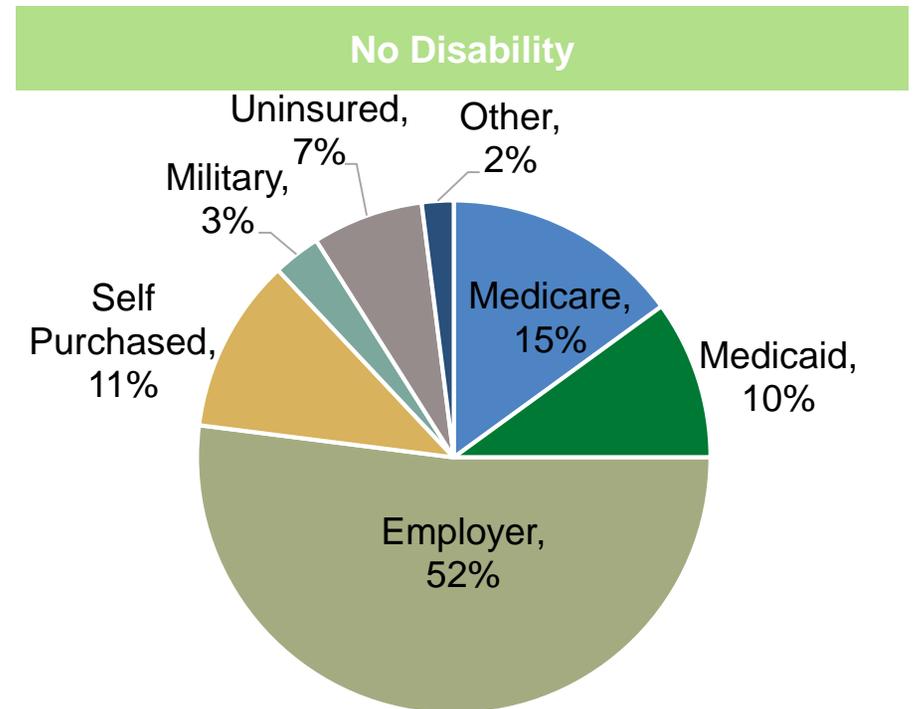
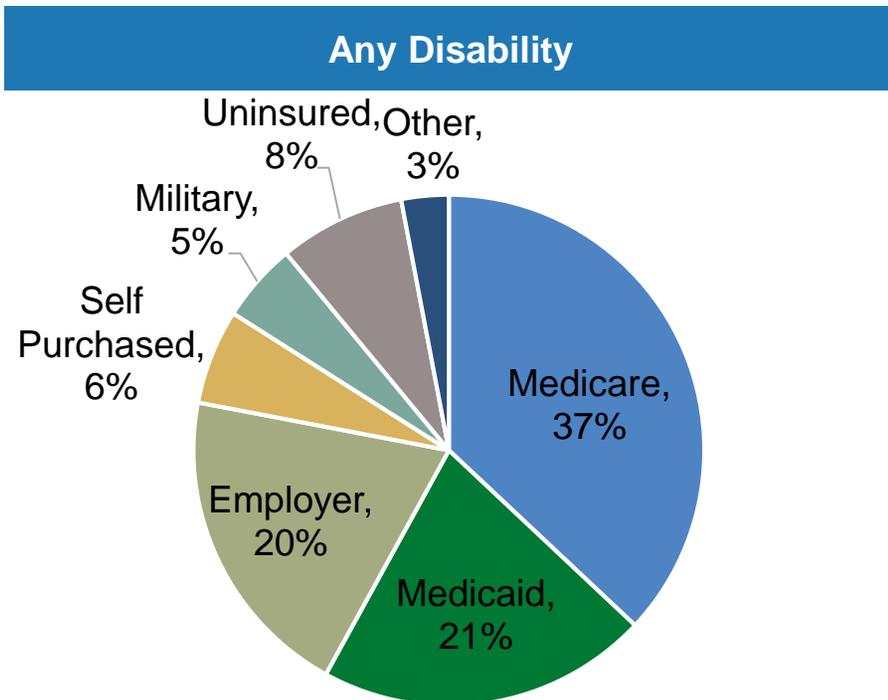


Poor physical health is defined as: During the last month, physical health was not good for at least 14 of those days.

Poor mental health is defined as: During the last month, mental health was not good for at least 14 of those days.

# Primary Health Insurance Provider

Adults in Vermont with a disability have different health insurance providers than adults without a disability. Two-thirds of adults with a disability get their insurance through a government program. This is two times the amount of adults without a disability who get their insurance through a government program. Adults with a disability are much less likely to have health insurance through an employer (20%) than adults with no disability (52%).



Being older or not employed makes it more likely that a person gets their health insurance through a government program. Many adults in Vermont with a disability are either older or not employed. This could be why so many adults with a disability get their insurance through a government program in Vermont.

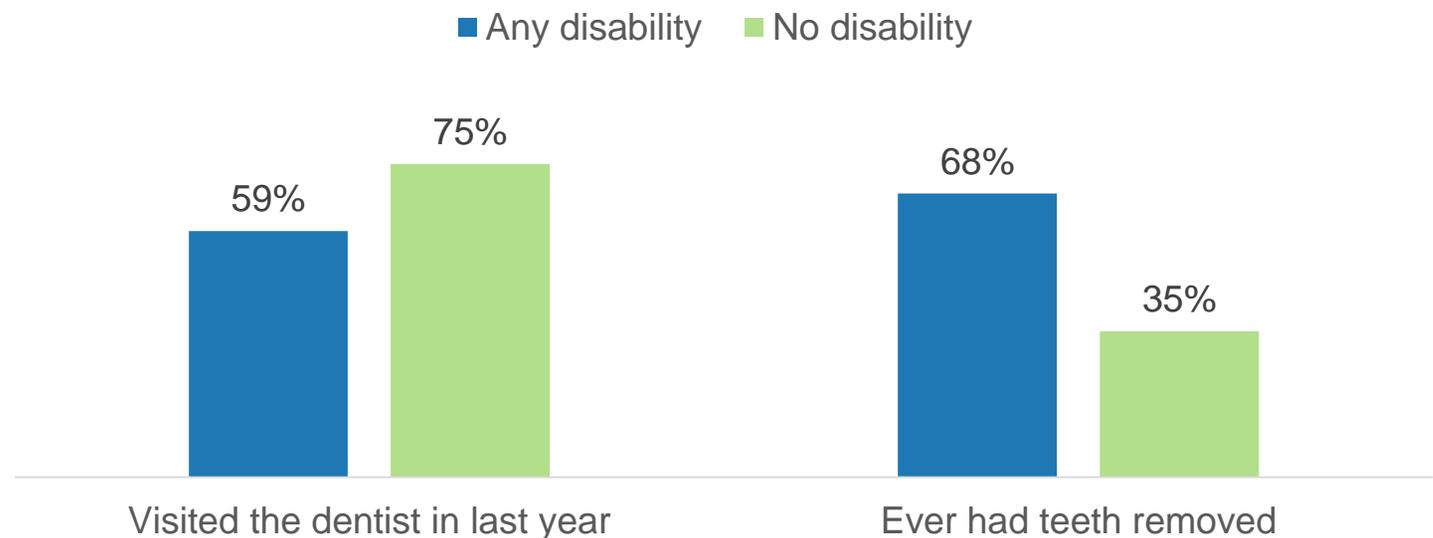
# Oral Health

Adults in Vermont with a disability are less likely to go to the dentist than adults without a disability. Adults with a disability are also more likely to have had teeth removed than adults without a disability.

59% of Vermont adults with a disability have been to the dentist in the last year.

Six in ten Vermont adults with a disability went to the dentist in the past year. This is less than adults without a disability who visited the dentist in the past year (75%).

Adults with a disability are twice as likely to have ever had a tooth removed (68%) compared to adults without a disability (35%).



# Falls

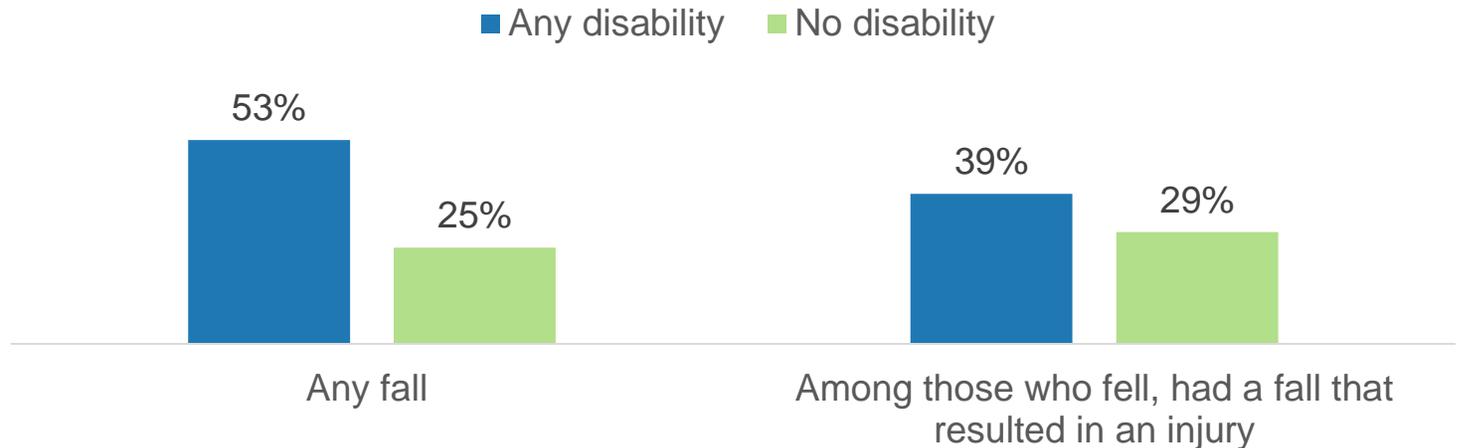
Adults in Vermont with a disability that are age 65 and older are more likely to have fallen in the past year than adults without a disability.

53% of adults in Vermont with a disability that are age 65 and older have fallen in the last year.

Half of adults in Vermont with a disability that are age 65 and older fell in the past year. This is two times the amount of adults age 65 and older without a disability that fell in the last year (26%).

Among the adults with a disability age 65 and older who fell at least once in the past year, 4 in 10 had a fall that caused an injury.

**Falls in the Past Year Among Adults Age 65 and Older**



# Chronic Conditions

- Arthritis
- Lung Disease – Asthma & COPD
- Cancer
- Cardiovascular Disease & Hypertension
- Cholesterol
- Cognitive Decline
- Depression
- Diabetes & Kidney Disease
- Weight Status
- Overall Burden of Chronic Conditions

# Chronic Conditions in People with Disabilities

**A chronic condition is an illness or sickness that goes on for many years and often gets worse over time.**

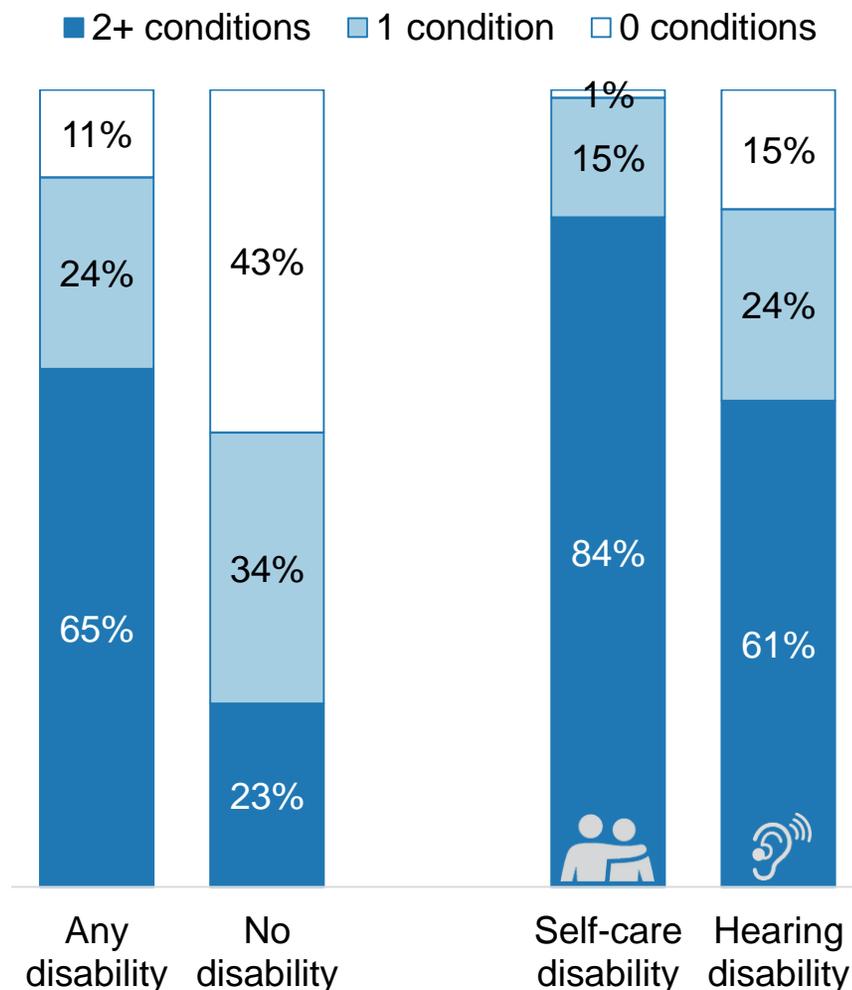
Vermont adults with a disability are more likely to have chronic conditions than adults without a disability.

- ▣ Nine in ten Vermont adults with a disability report at least one chronic condition. Six in ten adults without a disability report at least one chronic condition.
- ▣ Two-thirds of adults with a disability have two or more chronic conditions. This is almost three times as often than adults without a disability (23%).

Almost all Vermonters that need help taking care of themselves have at least one chronic condition (99%).

Vermonters with a hearing disability are the least likely to have two or more chronic conditions (61%).

Chronic Conditions Among Adults



# Arthritis

**Arthritis is a disease that causes the joints of the body to become swollen and painful.**

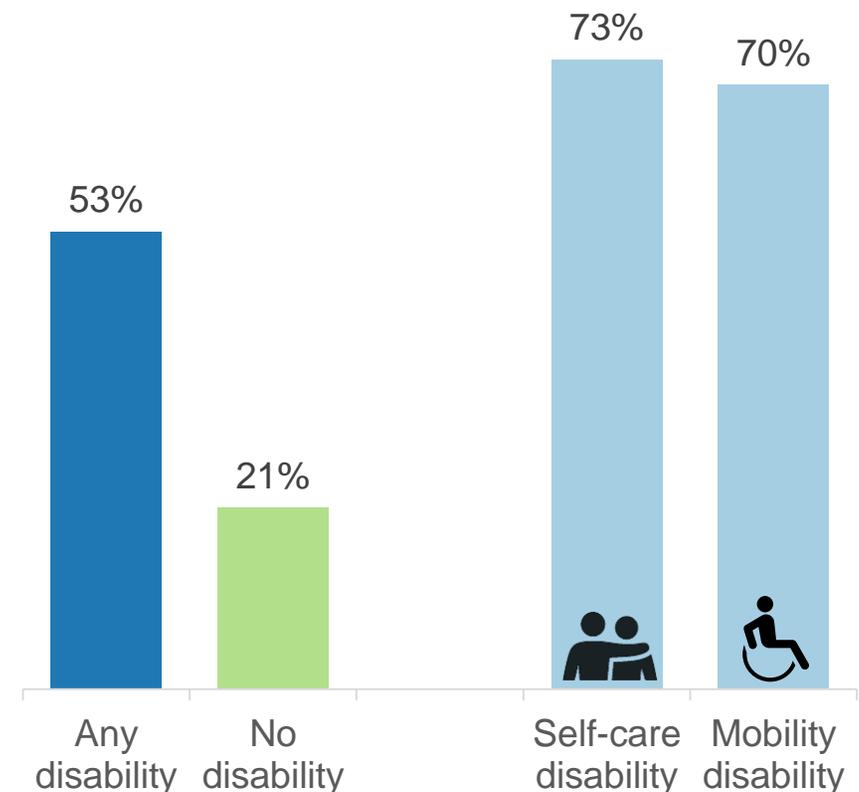
More than half (53%) of adults that live in Vermont and have a disability have arthritis. This is about 58,000 people.

- ▣ Vermonters with a disability are more than two times as likely to have arthritis compared with adults in Vermont that don't have a disability.

Seven in ten (73%) Vermonters that have trouble caring for themselves have arthritis.

Seven in ten (70%) Vermonters that have trouble moving have arthritis.

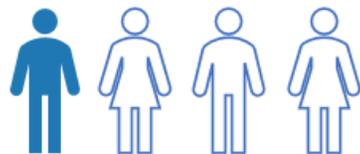
Adults with Arthritis



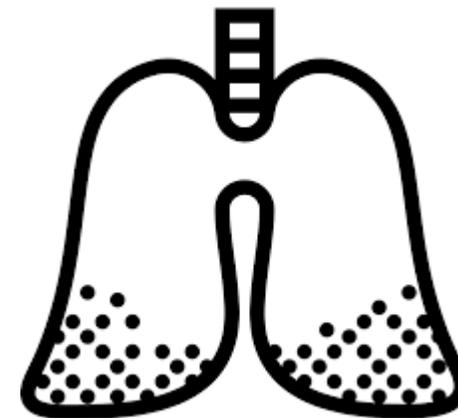
## Lung Disease – Asthma and COPD

The lungs take oxygen from the air we breathe and move it into our blood to help keep our cells and body healthy. Lung disease is any problem in the lungs that causes them to not work correctly. Lung disease makes it hard to breath. Asthma and chronic obstructive pulmonary disease (COPD) are two examples of lung diseases ([www.lung.org](http://www.lung.org)).

- One in four adults in Vermont who have a disability have lung disease. This is about 28,000 people.



- Adults with a disability are two times as likely as adults without a disability to have lung disease (10%).



## Lung Disease – Asthma and COPD

Asthma causes the airways of the lungs to swell and get smaller if the person gets near smoke, dust, or other triggers that makes their symptoms worse. This can make it hard to breathe and causes tightness of the chest and coughing.

- ▣ Two in ten adults in Vermont with a disability have asthma.
- ▣ One in four adults with a mobility disability have asthma.

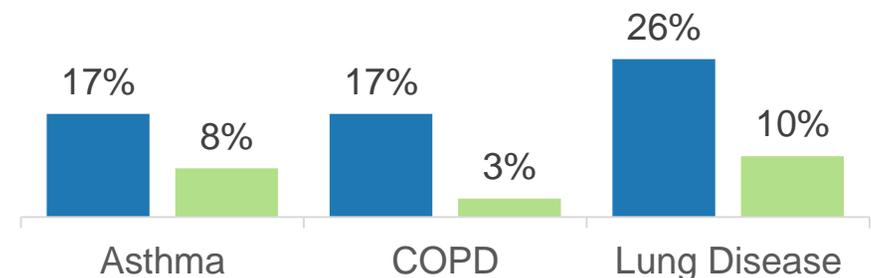
Lungs with asthma can open up more and work better when treated and managed.

COPD means the lungs have been damaged. COPD makes it hard to move air in and out of the lungs. Even with treatment, the lungs are less able to open up and work correctly. This makes it harder and harder to breathe all the time. COPD is often caused by smoking. ([www.copdfoundation.org](http://www.copdfoundation.org)).

- ▣ Two in ten adults with a disability have COPD.

### Adults with Lung Disease

■ Any disability ■ No disability



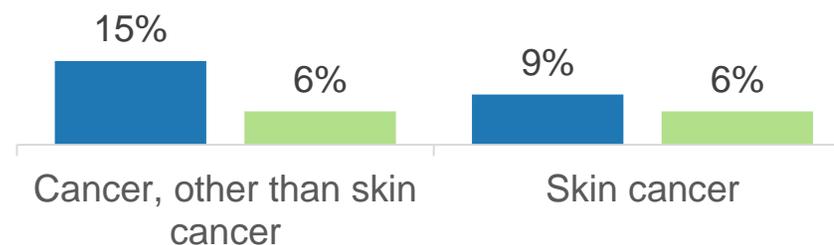
# Cancer

Vermonters with a disability are more likely to report cancer and skin cancer than those with no disability.

- ▣ Vermonters with a disability are more than two times as likely to be diagnosed with cancer than those with no disability.
- ▣ Vermonters with a hearing disability are more than two times as likely to report skin cancer than those without a disability.

## Adults Ever Diagnosed with Cancer

■ Any disability ■ No disability



In total, about 17,000 Vermont adults with any disability have been diagnosed with a non-skin cancer.

## Cardiovascular Disease and Hypertension

**Cardiovascular diseases are illnesses related to the heart and blood vessels. These can include heart disease, heart attack and stroke.**

**Hypertension is another word for high blood pressure. High blood pressure is when your heart must work harder to move blood through your body.**

One in five, or 21,000 adults in Vermont with a disability, have ever been told they have cardiovascular disease (CVD).

- ▣ Adults with a disability are four times more likely to have been diagnosed with CVD than adults with no disability.

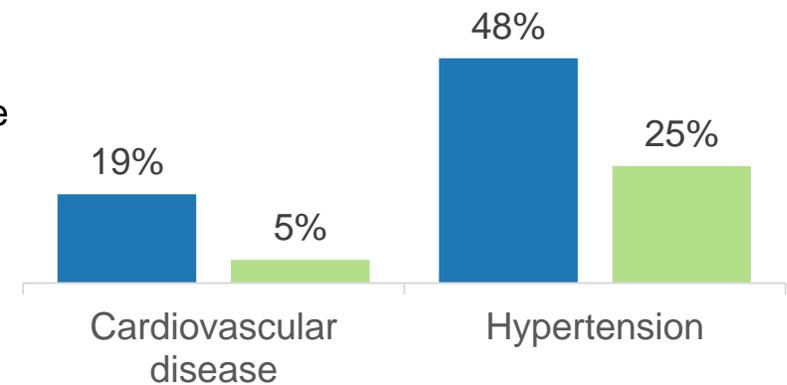
Five in ten adults with a disability have been told they have high blood pressure.

- ▣ Adults who have a hard time walking are three times more likely to have high blood pressure than adults without a disability.

Adults in Vermont with a disability are more likely to have ever been told they have cardiovascular disease or hypertension than adults with no disability.

**Adults Ever Diagnosed with Cardiovascular Disease and Hypertension**

■ Any disability ■ No disability



# High Cholesterol

What is Cholesterol? Cholesterol is a waxy substance your body uses to protect nerves, make cell tissues, and produce certain hormones. Your liver makes all the cholesterol your body needs. Your body also gets cholesterol from the food you eat (such as eggs, meats, and dairy products). Too much cholesterol can be harmful to your health. ([Familydoctor.org](http://Familydoctor.org))

How do you get high cholesterol?

- ▣ Eating too many foods that are high in fat can increase your cholesterol level.
- ▣ Being overweight and inactive can lead to high cholesterol.
- ▣ Your family history also affects your cholesterol level.



Why is high cholesterol a problem?

If you have high cholesterol, your body may store the extra cholesterol in your arteries. Your arteries are blood vessels that carry blood from your heart to the rest of your body. Buildup of cholesterol in your arteries is known as plaque. Large amounts of plaque can block an artery. Cholesterol plaques can also split open, which can cause a blood clot that blocks the flow of blood.

If an artery that supplies blood to the muscles in your heart becomes blocked, you could have a heart attack. If an artery that supplies blood to your brain becomes blocked, you could have a stroke.

## High Cholesterol and Screening continued

About half of Vermont adults with a disability have ever been told they have high cholesterol. This is about 38,000 people.

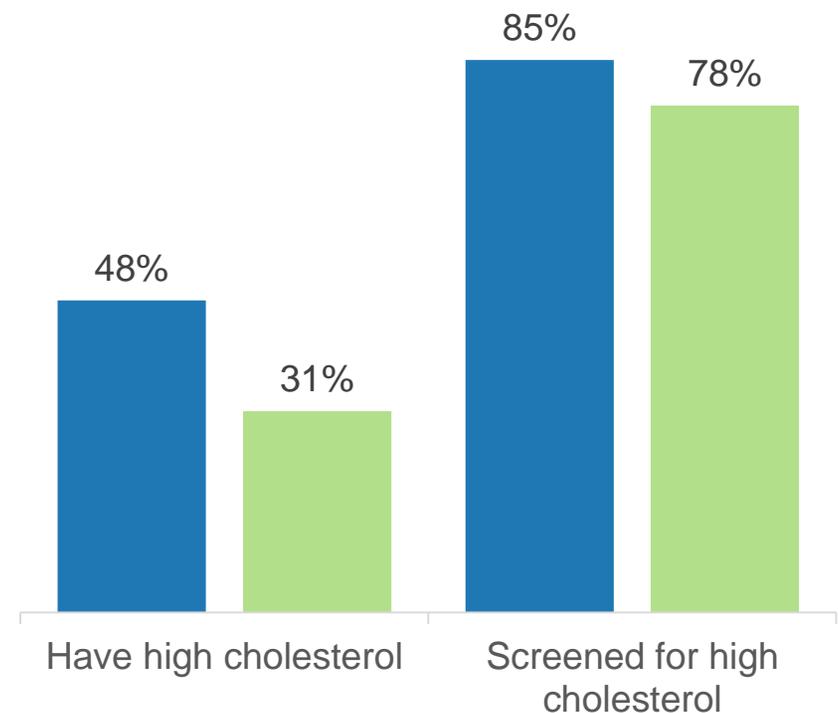
- ▣ Adults with a disability that live in Vermont are more likely than people without a disability to have high cholesterol.

Most adults with a disability that live in Vermont have been tested for high cholesterol in the past five years.

- ▣ Adults with a disability get tested for high cholesterol more often than adults without a disability.
- ▣ Adults with a disability that makes it hard for them to move are the most likely to have been tested for high cholesterol.

### High Cholesterol and Cholesterol Screening Among Adults

■ Any disability ■ No disability



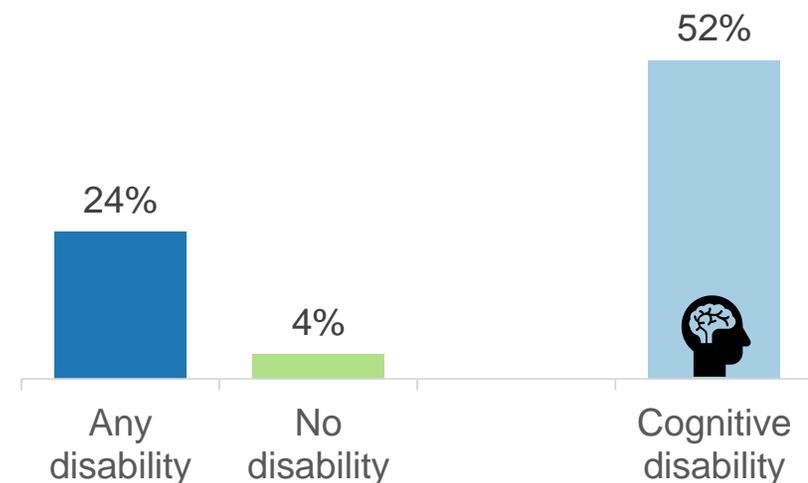
# Cognitive Decline

**Cognitive decline is when a person becomes more and more confused or starts to have a worse memory.**

One in four adults with a disability in Vermont report having cognitive decline in the past year. This is about 18,000 people.

- ▣ Adults with a disability are five times more likely than adults with no disability to report having cognitive decline.
- ▣ Half of adults with a cognitive disability report having cognitive decline in the past year.

**Adults with Worsening Confusion or Memory Loss in the Past Year**



# Depressive Disorder

**Depression is a mood disorder that causes a lasting feeling of being sad and loss of interest. Depressive disorder is when you feel depressed most of the time for most days of the week. ([www.mayoclinic.org](http://www.mayoclinic.org))**

Half of adults with a disability in Vermont report ever being told they have a depressive disorder. This is about 49,000 people.

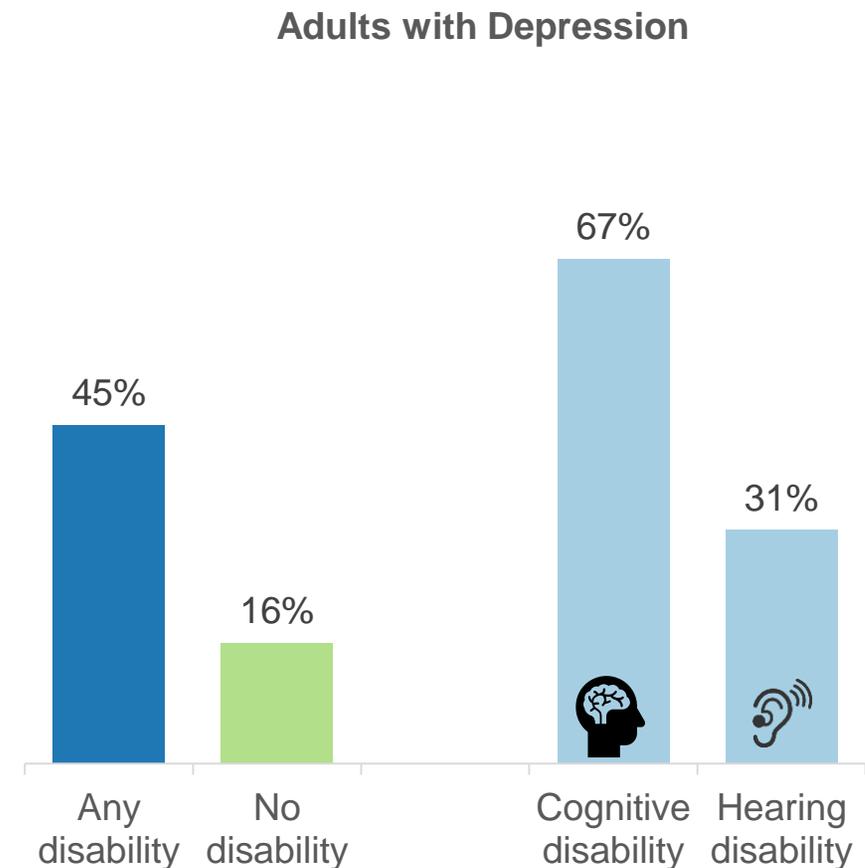
- ▣ Adults with a disability in Vermont are three times more likely than those with no disability to have a depressive disorder.

Adults with a cognitive disability have the highest rate of depression.

- ▣ Two out of three adults with a cognitive disability report having a depressive disorder.

Of all types of disabilities, adults with a hearing disability are least likely to report having a depressive disorder.

- ▣ One in three adults with a hearing disability report ever being told they had a depressive disorder.



# Diabetes

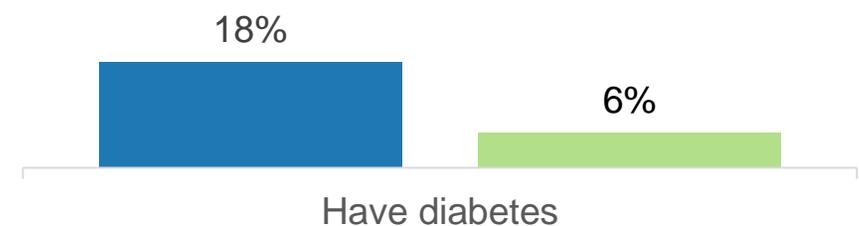
Diabetes is a condition in which the body can't use a type of sugar called glucose. Glucose is the main source of energy for the cells that make up the human body. A hormone called insulin helps the body to control and use glucose. If the body can't create or use insulin the right way, too much glucose builds up in the blood. This can damage the vessels that carry blood throughout the body and also damage many important systems in the body.

In Vermont, one in five adults with a disability has diabetes. That is about 20,000 people.

Vermonters with a disability are three times more likely to have diabetes than Vermonters with no disability.

## Adults with Diabetes

■ Any disability ■ No disability



# Kidney Disease

The kidneys clean out extra liquids and waste from the blood to help keep the body healthy. Kidney disease occurs when the kidneys are not able to clean the blood as well as they should. Diabetes can lead to kidney disease.

Adults in Vermont with a disability are three times more likely to have kidney disease than adults with no disability. One in twenty adults with a disability have chronic kidney disease.

Adults with a disability are more likely to have diabetes and kidney disease than adults with no disability.

## Adults with Kidney Disease

■ Any disability ■ No disability



## Overweight and Obesity

**Obese and overweight both mean that you your weight is more than what is healthy for your height.** This could increase your risk for health conditions such as diabetes, high blood pressure, heart disease, and kidney disease.

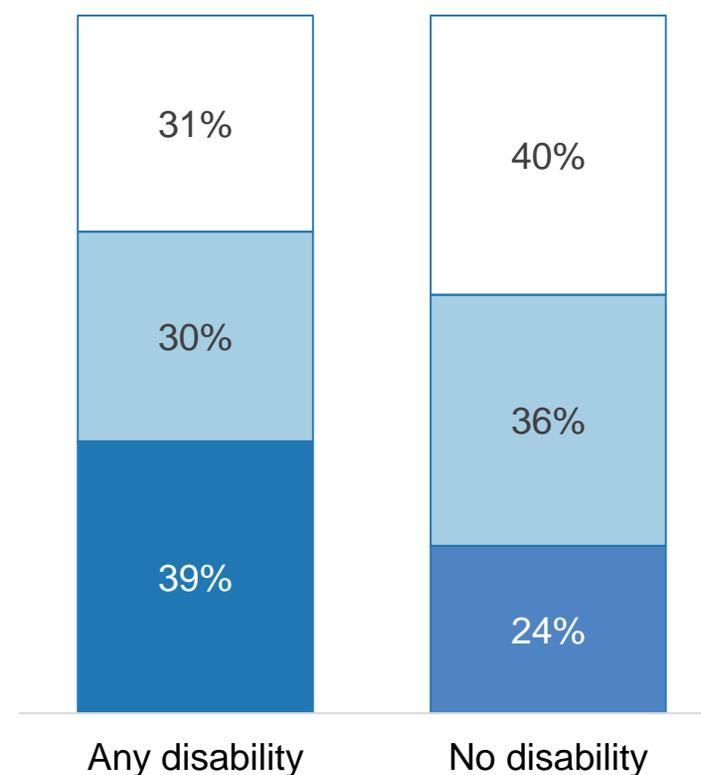
There is a measurement called Body Mass Index (BMI) that is used to compare your weight to your height. Overweight means your BMI is higher than 24.9 and obese means your BMI is higher than 29.9. If your BMI is lower than 18.5 it means you are underweight.

Seven in ten Vermont adults that have a disability weigh more than a healthy weight.

- ▣ Three in ten (30%) Vermont adults with a disability are overweight. Four in ten Vermont adults without a disability are overweight.
- ▣ Vermont adults with a disability are much more likely to be obese (39%) than adults without a disability (24%).

### Adult Weight Status

- Normal or Underweight
- ▣ Overweight
- Obese



# Preventative Behaviors

- Physical Activity
- Nutrition
- Older Adult Immunizations
- Cancer screenings
- HIV testing

## Physical Activity

Getting enough physical activity helps keep your body at a healthy weight and lowers your risk for chronic diseases like heart disease, diabetes, and some cancer. Physical activity also strengthens your bones and muscles and can improve your mental health.

Adults with a disability are less active than adults who do not have a disability.

Aerobic activity makes your heart beat fast, like when you run, walk fast, or dance. Aerobic activity is good for your heart.

- 37% of adults with a disability get enough aerobic activity. 57% of adults without a disability get enough aerobic activity.

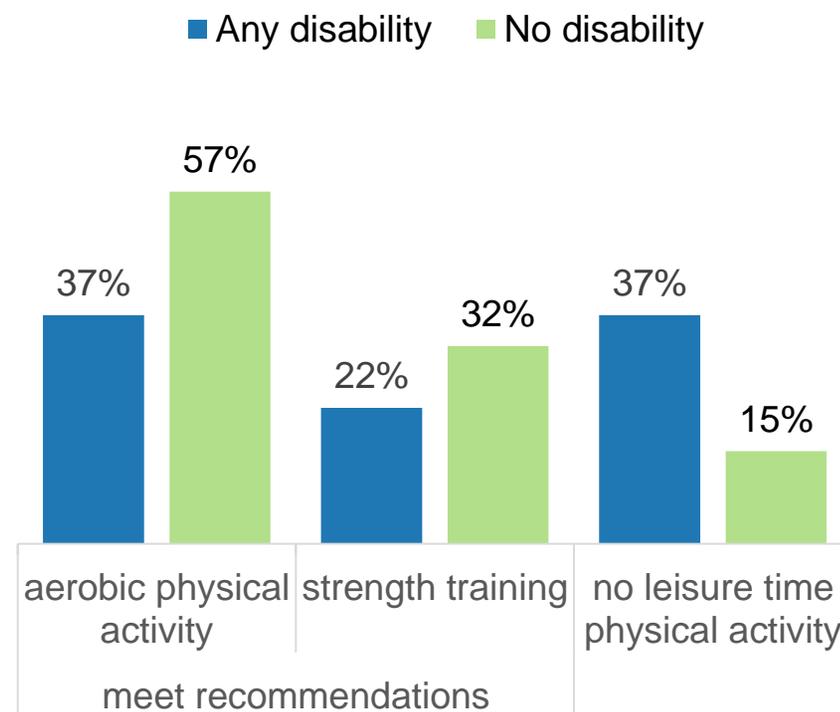
Strength training, like lifting weights, make muscles stronger.

- 22% of adults with a disability do enough strength training. 32% of adults without a disability do enough strength training.

Adults with a self-care disability do the least amount of aerobic activity (21%). Adults that have a visual disability do the least amount of strength training (18%).

Adults with a disability are twice as likely not to get enough free-time physical activity as adults without a disability.

### Physical Activity Among Adults



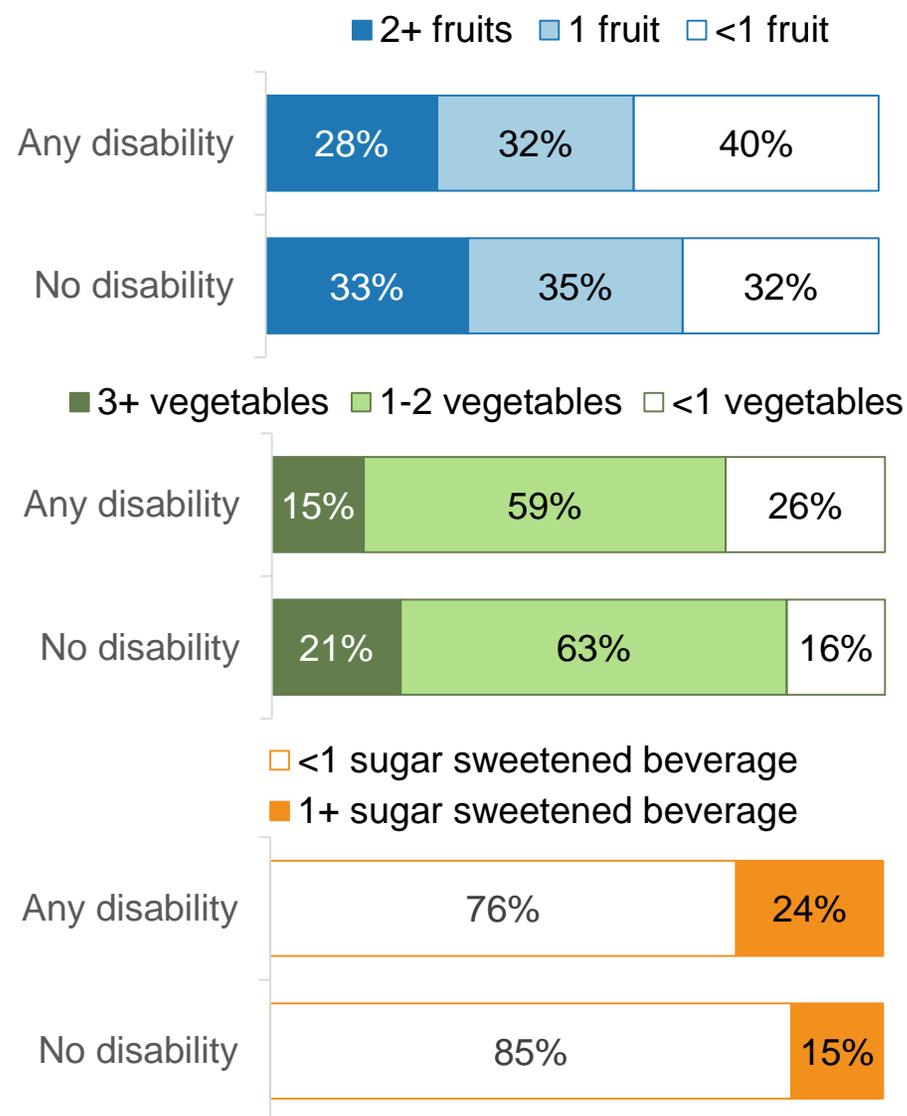
## Nutrition: Healthy Eating

Vermont adults with a disability are less likely to eat fruits and vegetables than adults with no disability.

- Three in ten adults with a disability eat two or more fruits each day.
- Four in ten adults with a disability eat less than one fruit a day.
- One in four adults with a disability eat less than one fruit a day.
- One in seven adults with a disability eat three or more vegetables each day.

Adults with a disability are more likely to drink soda or sugary drinks each day than adults without a disability.

### Daily Adult Nutrition



## Older Adult Immunizations

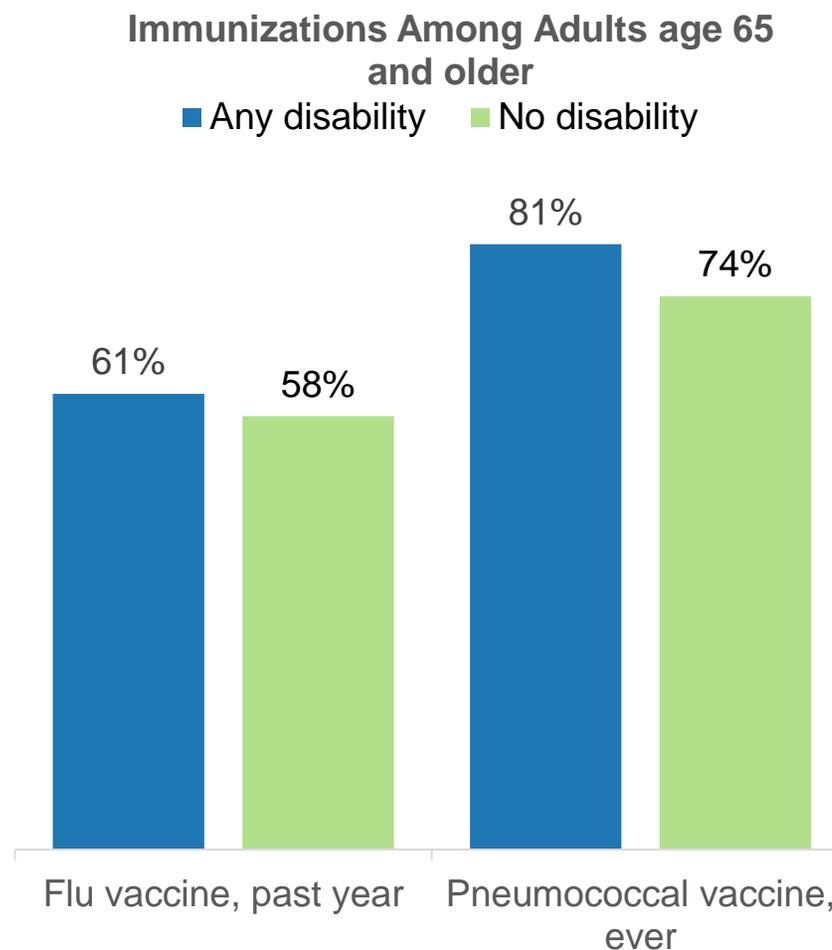
Immunizations (or vaccines) help protect people from certain diseases. Immunizations help prepare your body to fight a disease better and faster, so you won't get sick.

([www.vaccines.gov/basics/index.html](http://www.vaccines.gov/basics/index.html))

In Vermont, about the same amount of older adults with a disability and without a disability have received the recommended immunizations.

- ▣ Six in ten adults with a disability age 65 and older got a flu vaccine in the past 12 months.
- ▣ Eight in ten adults with a disability age 65 and older have ever received a pneumococcal vaccine.

Older adults with a mobility disability are more likely to have ever had a pneumococcal vaccine (85%) than older adults without a disability (74%).



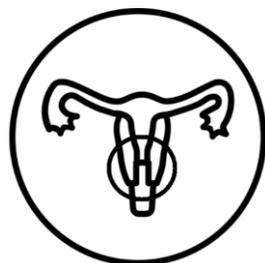
# Breast and Cervical Cancer Screenings

## Breast Cancer Screenings



A mammogram is an x-ray picture of the breast that looks for cancer. It can be used when someone has a lump or a sign of breast cancer. Screening mammography is the type of mammogram that checks someone when they have no symptoms.

## Cervical Cancer Screenings



The Pap test is a screening test that looks for cervical cancer. It finds changes to cervical cells that may turn into cancer.

## Breast and Cervical Cancer Screenings (continued)

Women with disabilities are less likely to meet cervical cancer and breast cancer screening recommendations than those without a disability.

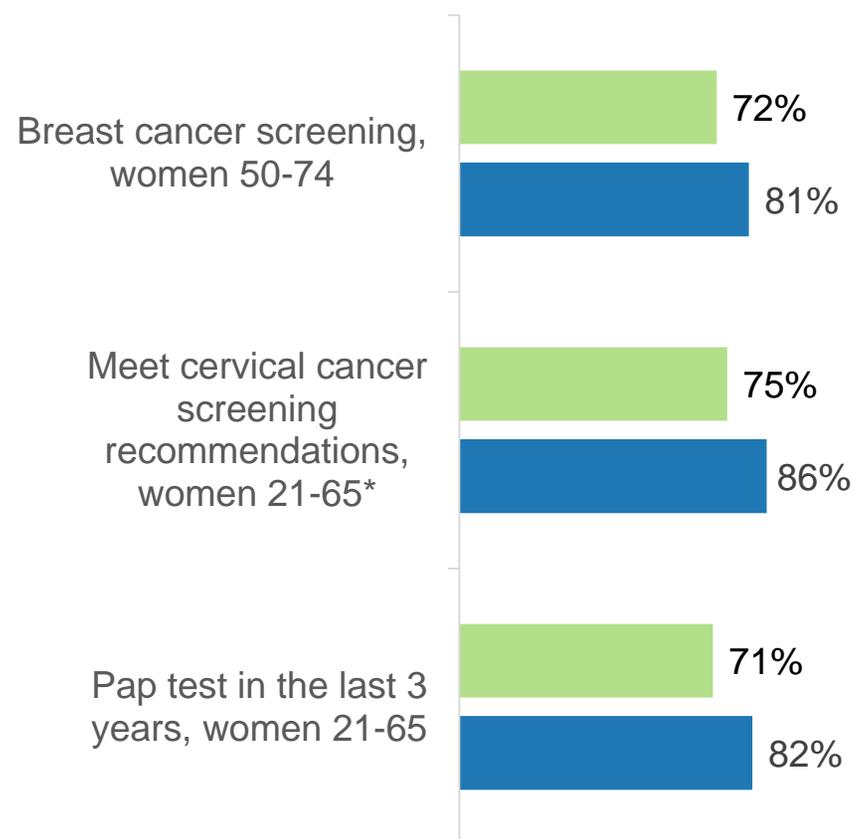
- Three-quarters of women with a disability age 21 to 65 meet cervical cancer screening recommendations.\*
- Seven in ten (72%) women with a disability ages 50-74 are up-to-date on breast cancer screening.

\*In 2016, cervical cancer screening recommendations included Pap testing every 3 years for ages 21-29 and a continuation of Pap testing every 3 years or Pap and HPV co-testing every 5 years for ages 30-65. **This is no longer the current guideline, please visit:**

<https://www.uspreventiveservicestaskforce.org/Page/Document/UpdateSummaryFinal/cervical-cancer-screening2> for current guidelines.

### Cancer Screening Among Adult Women

■ Any disability ■ No disability



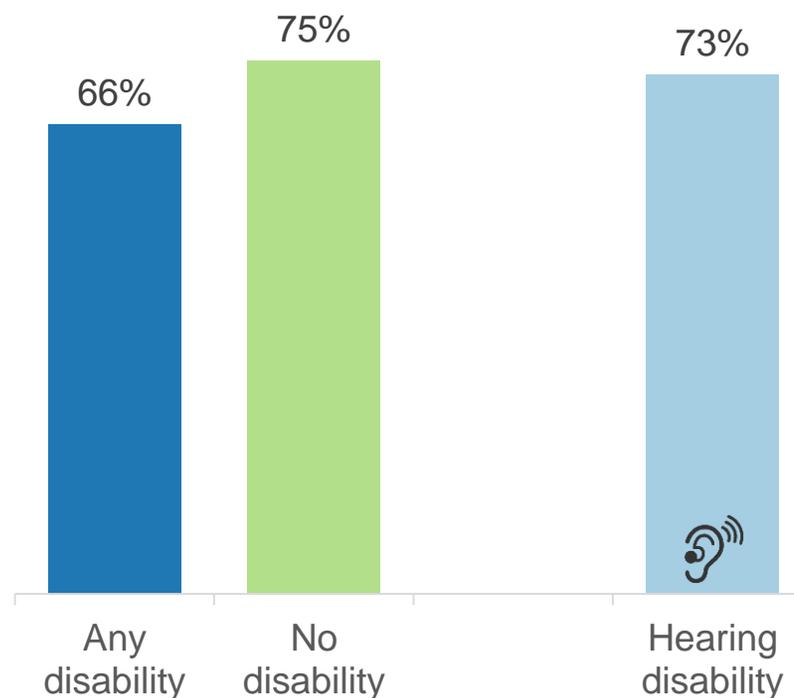
## Colorectal Cancer Screening

Vermonters ages 50-75 with a disability are less likely to have met colorectal cancer screening recommendations\* than those with no disability. Two in three (66%) Vermont adults age 50 to 75 with a disability meet colorectal cancer screening recommendations:

- ▣ Two in three Vermont adults ages 50 to 75 with a disability are up-to-date on colorectal cancer screening recommendations.
- ▣ Among Vermonters with a disability, those with a hearing disability are most likely to be up-to-date on colorectal cancer screening.

\*Current colorectal cancer screening guidelines include testing adults ages 50-75 with a Fecal Occult Blood Test (FOBT) every year OR a Sigmoidoscopy every five years and a FOBT every three years OR a Colonoscopy every 10 years.

Adults Age 50 to 75 Up-to-Date on Colorectal Cancer Screening Guidelines



# HIV Testing

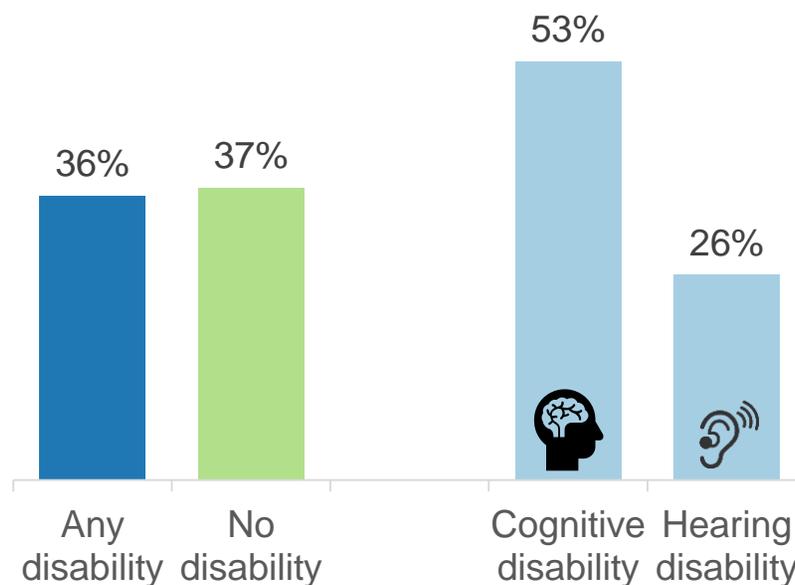
**Human Immunodeficiency Virus (HIV) is a virus that attacks the body's immune system.** Without treatment, HIV can weaken the immune system so much that the body can't fight off infections or diseases. If HIV is not treated, it can lead to acquired immunodeficiency syndrome (AIDS).

([www.hiv.gov](http://www.hiv.gov))

One in three adults in Vermont with a disability have ever been tested for HIV. This is 37,000 people. About the same as adults without a disability have ever been tested for HIV (37%).

Adults with a cognitive disability are the most likely to have ever been tested for HIV (53%). Adults with a hearing disability are the least likely to have ever been tested for HIV (26%).

HIV Testing Among Adults



# Risk Behaviors

- Sexual & Intimate Partner Violence
- Alcohol Consumption
- Marijuana
- Prescription Drug Misuse
- Tobacco Use

## Sexual and Intimate Partner Violence

**Sexual violence is a sexual act committed against someone without that person's freely given consent.**

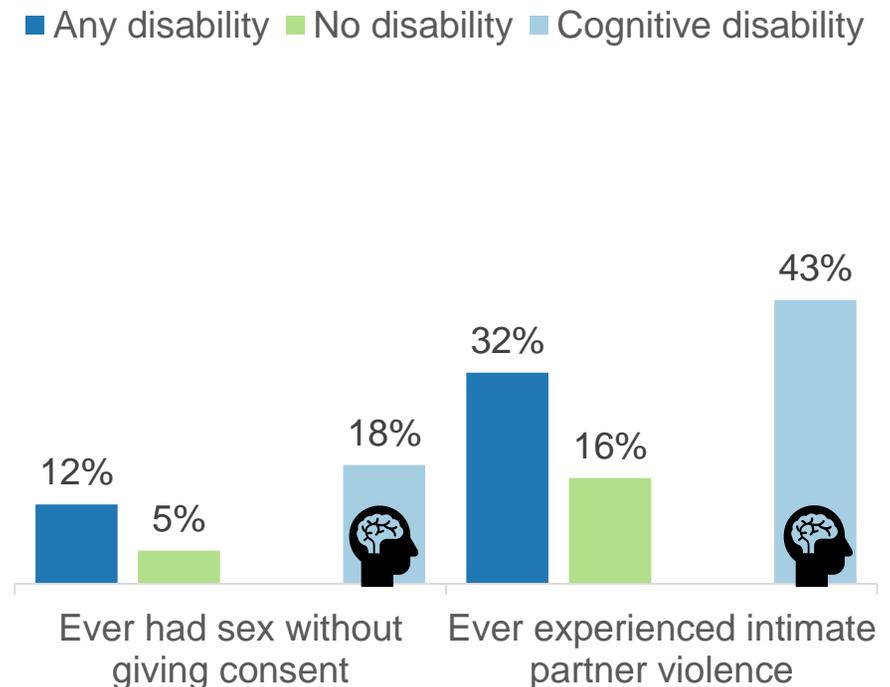
Intimate partner violence is a pattern of controlling behavior such as physical, sexual, psychological, or economic abuse. ([www.healthvermont.gov](http://www.healthvermont.gov))

Adults in Vermont with a disability are two times as likely as adults without a disability to have experienced sexual violence or intimate partner violence.

- ▣ One in eight adults with a disability has ever had sex without giving consent. 5% of adults with no disability has ever had sex without giving consent.
- ▣ One in three adults with a disability have ever experienced intimate partner violence. 16% of adults with no disability have ever experienced intimate partner violence.

Of all adults in Vermont with a disability, adults with a cognitive disability are the most likely to have experienced sexual violence (18%) and intimate partner violence (43%). Adults with a cognitive disability are three times more likely than adults without a disability to experience sexual violence and intimate partner violence.

### Sexual Violence and Intimate Partner Violence Among Adults



## Alcohol Use

Adults in Vermont with a disability are less likely than adults without a disability to drink any alcohol or binge drink alcohol.

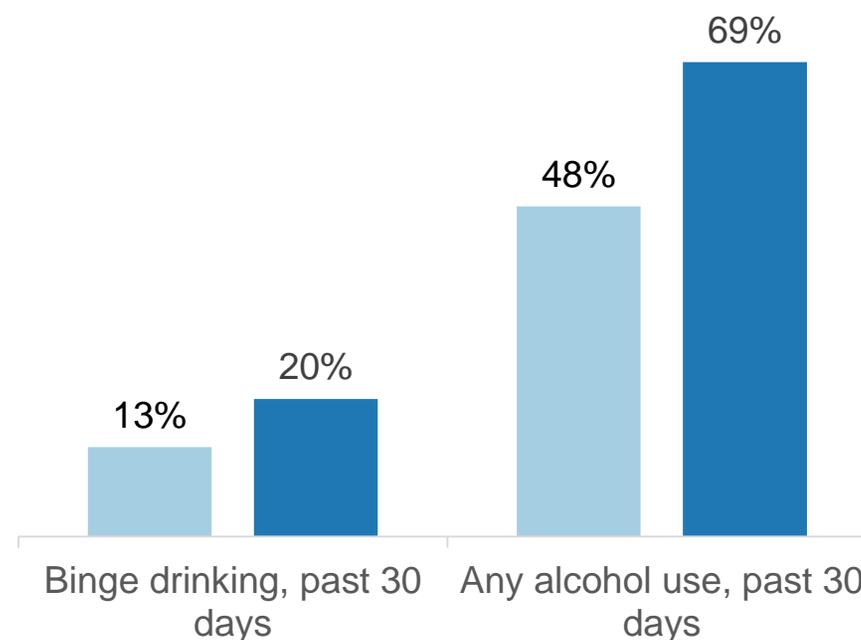
- ▣ Half of adults with a disability have had any alcohol in the past month.
- ▣ One in seven adults with a disability binge drank in the last month.
  - Binge drinking is having five or more alcoholic drinks on one occasion for men and four or more for women.

One in ten adults with a disability drank heavily in the last month. This is the same amount as adults with no disability.

- Heavy drinking is having more than two drinks per day for men and more than one drink for women.

### Adult Alcohol Consumption

▣ Any disability    ■ No disability



# Marijuana Use and Prescription Drug Misuse

Adults in Vermont with a disability are two times as likely as adults without a disability to use marijuana\*.

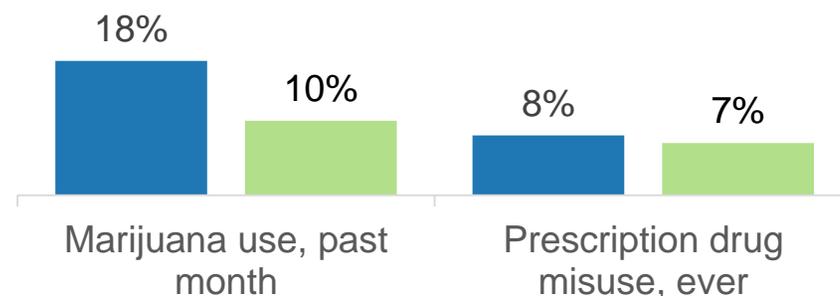
- ▣ One in five adults with a disability have used marijuana in the past month.
- ▣ Vermont adults with a cognitive disability are three times as likely to use marijuana as adults without a disability.

About the same amount of adults with a disability and without a disability have ever taken a prescription drug without a prescription.

- ▣ One in twelve adults with a disability have ever taken a prescription drug without a prescription.

**Adult Marijuana Use and Prescription Drug Misuse**

■ Any disability   ■ No disability



\* Vermont allows medical use of marijuana to treat certain health conditions. This may affect or increase the number of people who report using marijuana. For more information, visit

<https://medicalmarijuana.vermont.gov/medical-and-mental-health-professionals>

# Tobacco Use

Adults with a disability are twice as likely as adults without a disability to smoke cigarettes or use any tobacco.

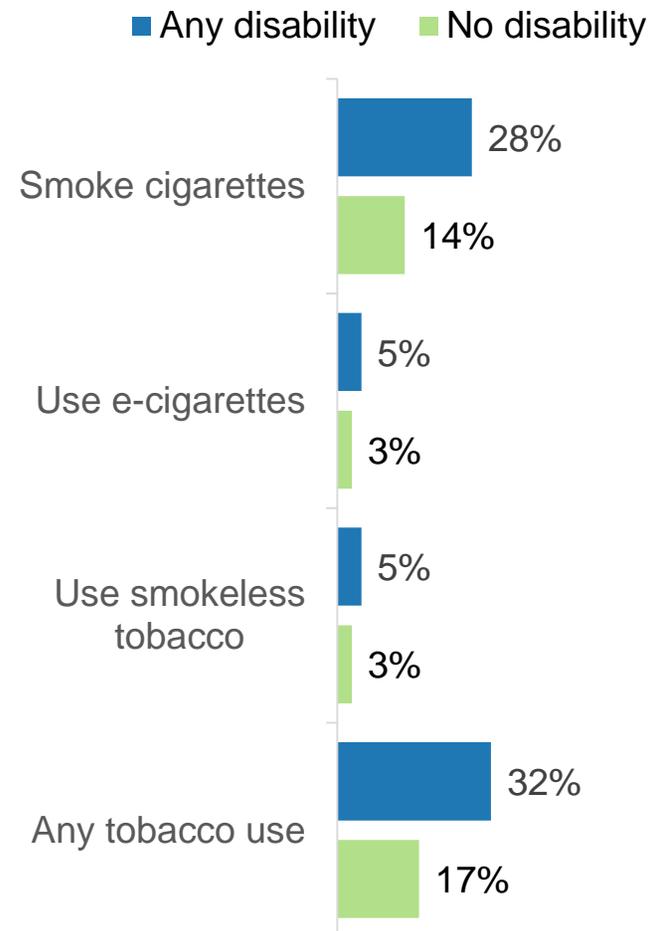
- ▣ One in four adults in Vermont with a disability smoked cigarettes in the past month.
- ▣ Half of adults with a disability who smoke tried to quit at least once in the last year.

One in twenty adults with a disability used e-cigarettes in the past month. This is about the same amount of adults with a disability who used smokeless tobacco in the past month.

Adults with a cognitive disability, independent living disability, or more than one disability are three times as likely to use e-cigarettes than people without disabilities.

(This data does not include use of cigars.)

## Adult Tobacco Use, Past 30 Days



## Appendix A: Health Indicators by Disability Type

### Disability Type Among Select Demographic Characteristics

		None	Any	Mobility	Cognitive	Hearing	Indep. living	Visual	Self-care	Multiple disabilities
<b>Sex</b>	Male	77%	23%	10%	10%	8%	5%	3%	3%	9%
	Female	78%	22%	12%	9%	5%	7%	3%	3%	10%
<b>Age</b>	18-24	86%	14%	-	10%	-	4%	2%	-	4%
	25-44	86%	14%	5%	11%	1%	5%	1%	1%	6%
	45-64	76%	24%	14%	10%	6%	7%	4%	5%	12%
	65+	64%	36%	21%	7%	16%	7%	5%	4%	15%
<b>Race/ ethnicity</b>	White, non-Hispanic	78%	22%	11%	9%	6%	6%	3%	3%	9%
	Racial/Ethnic Minority	68%	32%	14%	19%	6%	9%	8%	5%	13%
<b>Sexual Orientation/ Gender Identity</b>	Heterosexual/ Cisgender	78%	22%	11%	9%	7%	6%	3%	3%	10%
	LGBT	65%	35%	12%	22%	7%	15%	6%	6%	17%

## Demographic Characteristics Among Vermonters with a Disability

		None	Any	Mobility	Cognitive	Hearing	Indep. living	Visual	Self-care	Multiple disabilities
<b>Education</b>	Less than high school	5%	18%	17%	23%	17%	21%	24%	20%	23%
	High school	27%	40%	42%	39%	37%	44%	38%	40%	40%
	Some college	30%	37%	26%	26%	27%	26%	23%	30%	26%
	College or higher	38%	16%	15%	11%	20%	9%	15%	10%	11%
<b>Household Income</b>	Very low (<\$15K)	5%	24%	28%	32%	19%	33%	31%	33%	30%
	Low (\$15K-<\$25K)	12%	29%	31%	30%	23%	35%	30%	36%	35%
	Middle (\$25K-<\$50K)	25%	24%	22%	22%	30%	19%	27%	14%	22%
	High (\$50K-<\$75K)	21%	9%	7%	6%	13%	5%	8%	5%	7%
	Highest (≥\$75K)	37%	13%	12%	11%	14%	8%	5%	12%	7%
<b>Employment Status</b>	Employed	71%	33%	19%	38%	31%	18%	31%	11%	20%
	Retired	15%	30%	35%	14%	48%	23%	32%	26%	29%
	Unable to Work	1%	35%	56%	35%	24%	53%	35%	71%	51%
	Unemployed	3%	6%	5%	8%	1%	9%	4%	4%	6%
	Student	6%	3%	<1%	5%	1%	4%	4%	1%	2%
	Homemaker	3%	3%	3%	3%	6%	3%	2%	3%	3%
<b>Marital Status</b>	Married	57%	38%	40%	26%	46%	28%	36%	37%	33%
	Never Married	21%	23%	14%	36%	11%	30%	20%	17%	22%
	Divorced	10%	19%	22%	20%	20%	21%	21%	26%	22%
	Widowed	5%	14%	19%	7%	18%	13%	13%	12%	16%
	Unmarried Couple	6%	4%	3%	7%	3%	3%	5%	3%	4%
	Separated	1%	2%	3%	4%	1%	5%	5%	4%	4%
<b>Children in the home</b>	No children	68%	81%	86%	72%	87%	73%	77%	77%	78%
	One child	14%	10%	6%	16%	8%	15%	11%	10%	12%
	Two children	13%	5%	5%	7%	3%	6%	8%	4%	5%
	Three + children	5%	4%	3%	5%	-	6%	4%	9%	5%
<b>Housing</b>	Own their home	76%	66%	70%	53%	80%	56%	67%	68%	63%
	Rent	19%	30%	27%	42%	18%	42%	30%	29%	34%
	Other	5%	4%	3%	5%	2%	2%	3%	3%	3%
<b>Veteran</b>	10%	15%	15%	12%	26%	9%	14%	16%	13%	

Shaded boxes indicate statistical significance when compared to no disability.

## Health Status Among Vermonters with a Disability

		None	Any	Mobility	Cognitive	Hearing	Indep. living	Visual	Self-care	Multiple disabilities
<b>Quality of Life</b>	Fair/poor general health	6%	40%	58%	43%	30%	61%	44%	80%	56%
	Poor physical health	5%	33%	54%	35%	26%	55%	36%	78%	52%
	Poor mental health	6%	31%	32%	53%	22%	49%	40%	45%	44%
	Rarely/never get emotional support	6%	17%	17%	20%	16%	19%	19%	23%	20%
<b>Health Care Access</b>	Have a medical health plan	95%	94%	95%	92%	95%	97%	96%	97%	95%
	Personal health care provider	88%	90%	95%	88%	92%	90%	86%	97%	92%
	Did not visit doctor due to cost	6%	14%	15%	20%	13%	17%	15%	18%	16%
	Visited the doctor in last year	68%	75%	82%	67%	79%	71%	72%	77%	75%
<b>Insurance Type (2014)</b>	Employer	52%	20%	15%	22%	N/A	11%	17%	18%	14%
	Self Purchased	11%	6%	6%	6%	N/A	4%	5%	5%	4%
	Medicare	15%	37%	45%	28%	N/A	43%	39%	40%	40%
	Medicaid	10%	21%	18%	27%	N/A	29%	22%	26%	27%
	Military	3%	5%	5%	5%	N/A	5%	2%	2%	5%
	Other	2%	3%	4%	2%	N/A	1%	4%	-	4%
	Uninsured	7%	8%	6%	9%	N/A	7%	11%	6%	7%
<b>Oral Health</b>	Visited the dentist in the last year	75%	59%	50%	59%	47%	53%	60%	51%	55%
	Ever had teeth removed	35%	68%	77%	66%	71%	69%	78%	79%	75%
<b>Falls</b>	Fell in last 12 months, adults 65+	25%	53%	59%	63%	51%	62%	62%	63%	60%
	Fell in last 12 months, resulted in injury, adults 65+	29%	39%	40%	36%	38%	45%	48%	-	43%

Shaded boxes indicate statistical significance when compared to no disability.

All indicators are non age-adjusted, and therefore should be interpreted with caution when comparing to Healthy Vermonters 2020 data.

## Chronic Conditions, Physical Activity and Nutrition Among Vermonters with a Disability

		None	Any	Mobility	Cognitive	Hearing	Indep. living	Visual	Self-care	Multiple disabilities
<b>Chronic Conditions</b>	Arthritis	21%	53%	70%	48%	54%	58%	59%	73%	61%
	Asthma	8%	17%	23%	19%	14%	24%	20%	34%	23%
	Non-skin cancer	6%	15%	19%	12%	17%	16%	15%	22%	16%
	Skin cancer	6%	9%	10%	5%	14%	4%	8%	4%	7%
	Cardiovascular disease	5%	19%	26%	18%	28%	21%	22%	30%	24%
	Chronic obstructive pulmonary disease (COPD)	3%	17%	26%	16%	16%	23%	25%	35%	23%
	Cognitive decline	4%	24%	26%	52%	24%	38%	35%	35%	36%
	Depressive disorder	16%	45%	46%	67%	31%	63%	50%	47%	55%
	Diabetes	6%	18%	25%	15%	19%	19%	20%	24%	21%
	High cholesterol (2015)	31%	48%	53%	46%	N/A	50%	52%	48%	54%
	Cholesterol screening in the past five years (2015)	78%	85%	92%	77%	N/A	88%	84%	87%	88%
	Hypertension (2015)	25%	48%	61%	38%	N/A	51%	55%	47%	54%
	Kidney disease	2%	6%	9%	5%	7%	10%	7%	14%	9%
	Obese	24%	39%	47%	40%	32%	48%	37%	47%	43%
	Overweight	36%	30%	29%	27%	35%	25%	31%	30%	29%
	One or more chronic condition	57%	89%	96%	90%	85%	94%	88%	99%	94%
	Two or more chronic conditions	23%	65%	79%	66%	61%	75%	67%	84%	74%
	<b>Physical Activity and Nutrition</b>	Meet aerobic physical activity recommendations (2015)	57%	37%	30%	42%	N/A	27%	39%	21%
Meet strength training recommendations (2015)		32%	22%	21%	24%	N/A	21%	18%	21%	20%
No leisure time physical activity		15%	37%	52%	32%	34%	45%	36%	61%	46%
2 or more fruits/day (2015)		33%	28%	31%	22%	N/A	30%	28%	35%	28%
Less than 1 fruit/day (2015)		32%	40%	38%	44%	N/A	38%	40%	35%	41%
3 or more vegetables/day (2015)		21%	15%	13%	13%	N/A	15%	13%	13%	12%
Less than 1 vegetable/day (2015)		16%	26%	27%	29%	N/A	27%	31%	25%	32%
Drink 1 or more sodas/sugar sweetened beverages (2013)		15%	24%	22%	27%	N/A	25%	28%	18%	26%

Shaded boxes indicate statistical significance when compared to no disability.

All indicators are non age-adjusted, and therefore should be interpreted with caution when comparing to Healthy Vermonters 2020 data.

## Preventative Behaviors, Screenings, Substance Use and Domestic Violence Among Vermonters with a Disability

	None	Any	Mobility	Cognitive	Hearing	Indep. living	Visual	Self-care	Multiple disabilities
<b>Immunizations</b> Flu shot (65+ )	58%	61%	63%	46%	62%	55%	57%	53%	59%
Pneumococcal (65+)	74%	81%	85%	65%	78%	81%	86%	77%	83%
<b>Breast cancer screening (women 50-74)</b>	81%	72%	67%	74%	81%	61%	68%	60%	67%
<b>Cervical cancer screening</b> Pap in the last 3 years	82%	71%	70%	73%	71%	71%	76%	73%	71%
HPV test in the last 5 years	52%	50%	44%	51%	47%	52%	-	51%	47%
Meeting cervical cancer screening recommendation	86%	75%	76%	77%	74%	75%	77%	85%	76%
<b>Colorectal cancer screening (50-75)</b>	75%	66%	65%	68%	73%	63%	64%	59%	64%
<b>Ever tested for HIV</b>	37%	36%	31%	53%	26%	38%	37%	44%	38%
<b>Sexual violence (2015)</b>	5%	12%	10%	18%	N/A	17%	12%	13%	17%
<b>Intimate partner violence (2014)</b>	16%	32%	27%	43%	N/A	42%	33%	37%	39%
<b>Alcohol consumption</b> Any alcohol, past 30 days	69%	48%	38%	49%	53%	37%	46%	41%	39%
Heavy drinking, past 30 days	9%	9%	8%	14%	11%	12%	15%	13%	13%
Binge drinking, past 30 days	20%	13%	10%	17%	12%	13%	21%	15%	13%
Drinking at a level of risk (65+)	25%	18%	15%	26%	25%	15%	20%	25%	18%
<b>Marijuana use, past 30 days</b>	10%	18%	13%	29%	9%	24%	23%	18%	19%
<b>Prescription drug misuse, lifetime (2015)</b>	7%	8%	6%	12%	N/A	8%	8%	8%	9%
<b>Tobacco use</b> Currently smoke cigarettes	14%	28%	26%	42%	21%	35%	27%	35%	32%
Currently use smokeless tobacco	3%	5%	3%	8%	4%	5%	6%	4%	5%
Currently use e-cigarettes	3%	5%	4%	9%	4%	9%	3%	6%	8%
Any tobacco use (not including cigars)	17%	32%	29%	48%	23%	41%	29%	38%	37%
Smokers who attempted to quit	49%	52%	57%	52%	48%	51%	55%	53%	54%

Shaded boxes indicate statistical significance when compared to no disability.

All indicators are non age-adjusted, and therefore should be interpreted with caution when comparing to Healthy Vermonters 2020 data.

## Appendix B: National Core Indicators (NCI) and BRFSS

The NCI annually surveys Vermonters receiving State provided services other than case management. The [2015-2016 survey](#) included primarily younger adults with an intellectual disability. While the BRFSS and NCI results are **not comparable**, looking at this data together can help identify health disparities that may exist between Vermonters with a disability who are receiving services and all Vermonters adults with a disability.

This table looks at health related NCI data next to similar BRFSS data among adults with a disability.

	National Core Indicators		Behavioral Risk Factor Surveillance System	
<b>Health Care Access</b>	Have a primary care provider	98%	Have a personal health care provider	90%
	Had a full exam, past year	88%	Visited the doctor, past year	75%
	Need and do not have health care coordination	3%	-	-
	Had a dental exam, past year	86%	Visited the dentist, past year	86%
	Need and do not have dental care coordination	3%	-	-
<b>Health Status</b>	In poor health	4%	Poor physical health	33%
	Need social or relationship support	28%	Rarely or never get emotional support	17%
	Often feel lonely	10%	-	-

(continued on the next page)

	<b>National Core Indicators</b>		<b>Behavioral Risk Factor Surveillance System</b>	
<b>Chronic Conditions</b>	Have ever had cancer	3%	Ever diagnosed with non-skin cancer	15%
	Have cardiovascular disease	6%	Ever diagnosed with cardiovascular disease	19%
	Have high cholesterol	18%	Have high cholesterol	48%
	Have diabetes	10%	Have diabetes	18%
	Are overweight	30%	Are overweight	30%
	Are obese	38%	Are obese	39%
<b>Preventative Behaviors</b>	Engage in regular physical activity	72%	Meet physical activity recommendations	37%
	Had a flu vaccine, past year	77%	Had a flu vaccine, past year	61%
	Had a Pap test, past 3 years (all adult women)	58%	Had a Pap test, past 3 years (women ages 21-65)	71%
	Had a mammogram, past 2 years (women age 40 and older)	78%	Had a mammogram, past 2 years (women ages 50-74)	72%
	Had a colorectal cancer screening, past year (adults age 50 and older)	21%	Meeting colorectal cancer screening recommendations (adults ages 50-75)	66%
<b>Tobacco Use</b>	Uses nicotine or tobacco products	8%	Any tobacco use, past 30 days	32%

# Questions?

For more information about Chronic Disease Prevention and Disability at the Vermont Department of Health, please contact:

- Allie Perline at [allison.perline@Vermont.gov](mailto:allison.perline@Vermont.gov)

For more information about Chronic Disease and Disability data in Vermont, please contact:

- Mallory Staskus at [Mallory.Staskus@Vermont.gov](mailto:Mallory.Staskus@Vermont.gov)