

White River Junction District Office

2016 Behavioral Risk Factor Surveillance System Data

Guidance • Support • Prevention • Protection

Table of Contents

	Page
Introduction.....	3
Demographics.....	4
Health Status Indicators.....	6
Health Access Indicators.....	8
Chronic Conditions.....	10
Risk Behaviors.....	14
Preventive Behaviors – Fruit & Vegetable Consumption.....	18
Preventive Behaviors – Physical Activity Recommendations.....	20
Preventive Behaviors – Routine Doctor Visits and Immunizations.....	21
Oral Health.....	23
HIV Screening.....	25
Cancer Screening.....	26
Appendix A.....	28

What is the Behavioral Risk Factor Surveillance System or BRFSS?

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

Typically between 6,000 and 7,000 Vermont adults are interviewed as part of the Vermont BRFSS each year. Vermont residents ages 18 and older are eligible for the survey. A Vermont resident is defined as someone living in the state for at least 30 days in a given calendar year. Adults living in institutions such as nursing homes, group homes, or prisons are not eligible for the survey.

The BRFSS survey includes questions on chronic disease prevalence (e.g. asthma diagnosis), risk behaviors (e.g. currently smoke), demographics (e.g. age, gender, race), health care access (e.g. have health insurance), and preventive behaviors and health screening (e.g. routine visits to a doctor or colorectal cancer screening).

Additional information can be found on the VDH and CDC websites:

- <http://healthvermont.gov/research/brfss.aspx>
- <http://www.cdc.gov/brfss/>

A report summarizing the 2016 statewide results from the Vermont BRFSS can also be found on the VDH website: http://www.healthvermont.gov/sites/default/files/documents/pdf/summary_brfss_2016.pdf.

Changes to BRFSS Methodology

In 2011, the CDC implemented changes to the BRFSS weighting methodology in order to more accurately represent the adult population. Population weights are now calculated using iterative proportional fitting (or “raking”) methodology. This allows the weights to be calculated using smaller sample sizes, adjusts for more demographic variables, and incorporates cell phone interview data into estimates.

While these adjustments make the calculations more representative of the population, the changes in methodology also limit the ability to compare 2011 and subsequent results to previous years. VDH’s Center for Health Statistics recommends that comparisons between 2011 BRFSS data and earlier years be made with caution. Statistical differences between 2011 and earlier years may be due to methodological changes, rather than changes in opinion or behavior.

Demographics of White River Junction District Office*

The next few pages describe the demographic makeup of White River Junction area adults in 2015-2016.

More than half (54%) of White River Junction adults are female. Six in ten (61%) are ages 25-64, with about a quarter (27%) ages 65 and older.

- White River Junction area adults are statistically less likely to be 25-44 (21% vs. 28%) and more likely to be 65 and older (27% vs. 23%), compared to Vermont adults overall.

More than a third (37%) of White River Junction area adults have a high school degree or less. Thirty-four percent have a college degree or higher, while 29% have some college education.

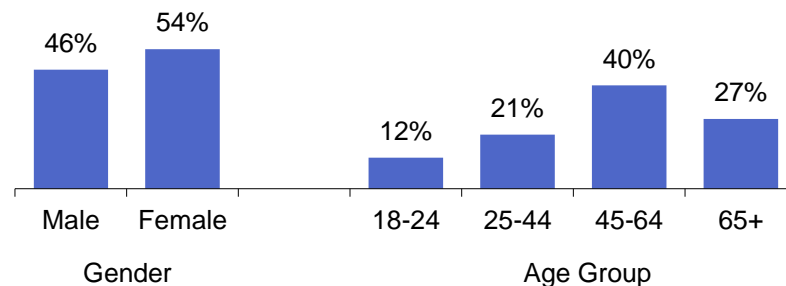
- White River Junction area adults report a similar education distribution as those in Vermont overall.

More than half (53%) of White River Junction area adults live in a home making \$50,000 or more annually. About a quarter each live in homes making \$25,000-\$49,999 annually (24%) and less than \$25,000 a year (23%).

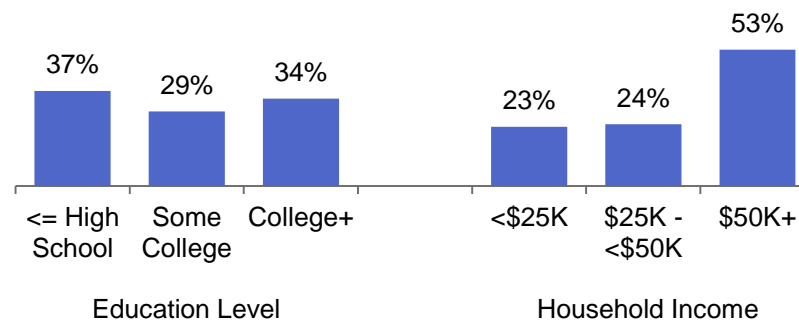
- There are no statistical differences between White River Junction adults and Vermont adults overall by annual income level.

Six percent of adults in the White River Junction area report being a person of color. This is the same to reported among Vermont adults overall.

White River Junction Residents by Gender and Age



White River Junction Residents by Education & Income Level



*See page 31 for a list of the towns included in the White River Junction Health District.

Demographics of White River Junction District Office

Six in ten White River Junction adult residents are currently employed, and about two in ten (22%) are retired. Nine percent said they are a student or homemaker, and seven percent are unable to work. Few (3%) are unemployed.

- White River Junction area adults have a similar employment distribution to Vermont adults overall.

More than half of White River Junction adults are married (55%). Two in ten (21%) have never married, while fourteen percent are divorced. Six percent or less are widowed or part of an unmarried couple (4%).

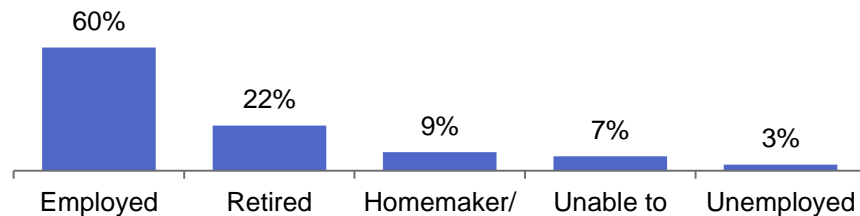
- Adults in the White River Junction area have a similar marital status distribution, compared with Vermont adults overall.

Seven in ten (72%) adults in the White River Junction area said there are no children less than 18 in their home.

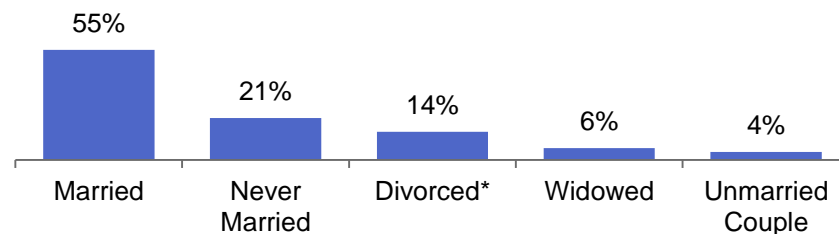
Twelve percent reported one child, while six percent have three or more children in their home.

- The number of children in the home reported by White River Junction area adults is similar to that for Vermont overall.

White River Junction Residents by Employment Status

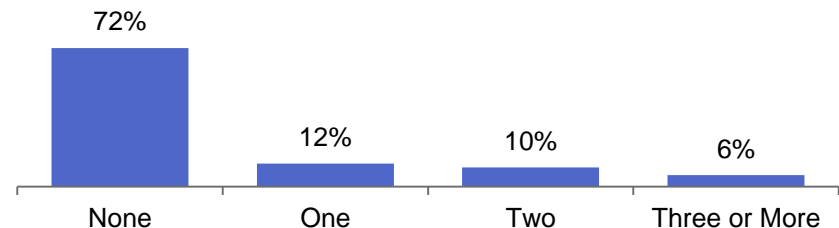


White River Junction Residents by Marital Status



*Includes those who reported their marital status as divorced or separated.

White River Junction Residents by Children in Household



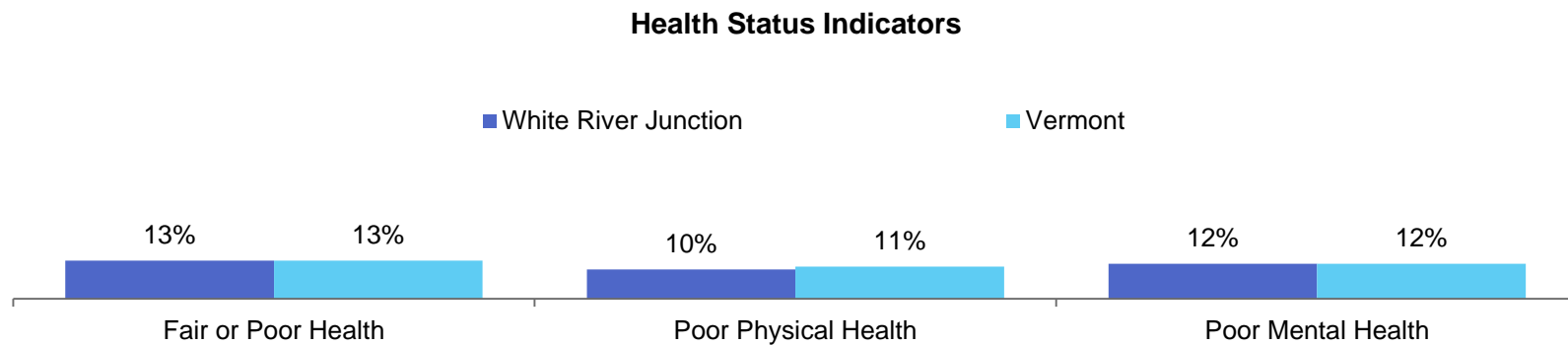
Health Status Indicators

In 2015-2016, more than one in ten (13%) White River Junction area adults reported their general health as fair or poor. One in ten had poor physical health while twelve percent had poor mental health.

- Poor mental and physical health are defined as 14 or more days of poor mental/physical health in the last month.

There are no significant differences in health status, regardless of the measure, when comparing White River Junction area adults and Vermont adults overall.

Among adults in the White River Junction area, health status indicators have not changed statistically since 2011. See Appendix A for results over time.



Health Status Indicators

Rates of fair or poor general health, poor physical health, and poor mental health among White River Junction area adults do not differ statistically by gender.

Fair or poor general health and poor physical health increase with age.

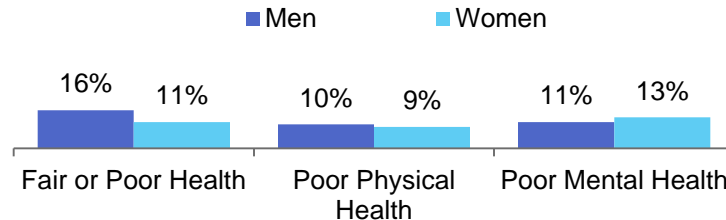
- White River Junction area adults 65 and older are statistically more likely than those 18-44 to have fair or poor health.
- Poor physical health is statistically more likely among adults 45 and older, compared with younger adults.

Reported poor mental health decreases with increasing age, however differences are not statistically significant.

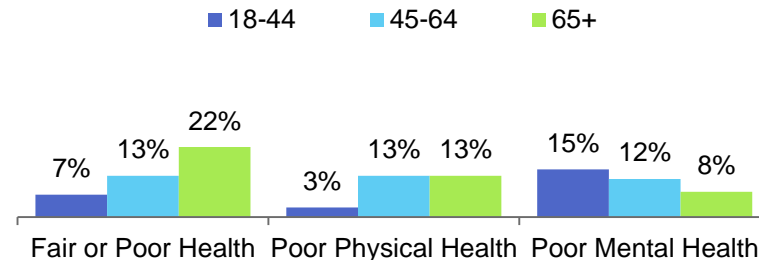
Among White River Junction area adults, reported poor health status decreases with increasing household income, regardless of the measure.

- All differences by annual household income for fair or poor health are statistically significant.
- Adults in homes that make at least \$25,000 annually are statistically less likely to report poor physical health, compared to adults with less income.
- Similarly, adults in homes making \$50,000 or more per year are statistically less likely to have poor mental health, compared with those in homes that make less than \$25,000 annually.

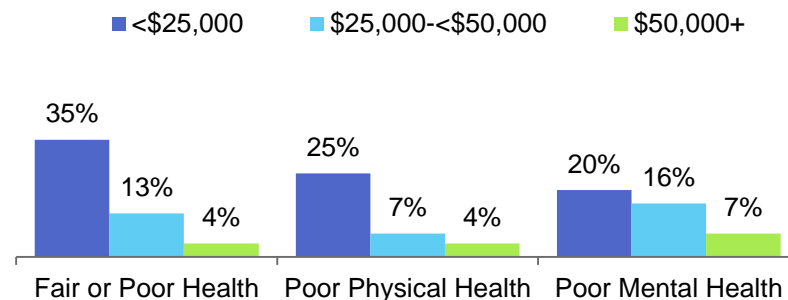
**Health Status Indicators by Gender
White River Junction Adults**



Health Status Indicators by Age



Health Status Indicators by Income Level



Healthcare Access Indicators

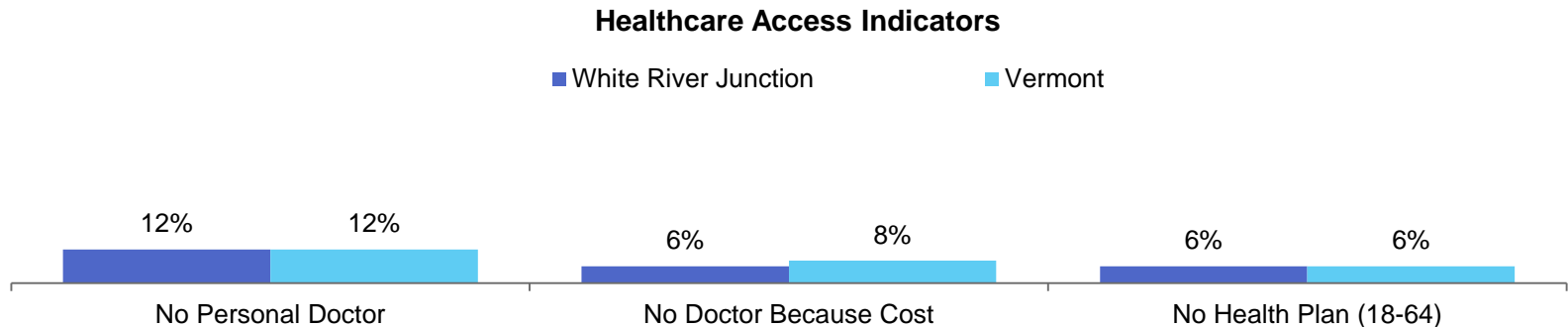
In 2015-2016, one in eight (12%) adults in the White River Junction area said they do not have a personal doctor for health care. Fewer, six percent, needed care in the last year but did not seek it due to the cost. Likewise, six percent of White River Junction area adults ages 18-64 did not have health insurance.

There are no differences in health care access, regardless of the measure, when comparing White River Junction area adults and Vermonters overall.

The proportion of adults 18-64 in the White River Junction area without a health plan is trending down, decreasing by half from 12% in 2011-2012 to 6% in 2015-2016. However, the difference between 2011-2012 and 2015-2016 is not statistically different.

- Changes the proportion of adults in the White River Junction area without a personal doctor or delaying care due to cost have not changed statistically since 2011.

See Appendix A for results over time.



Healthcare Access Indicators

There are no statistically significant differences by gender in any healthcare access measure, among White River Junction area adults.

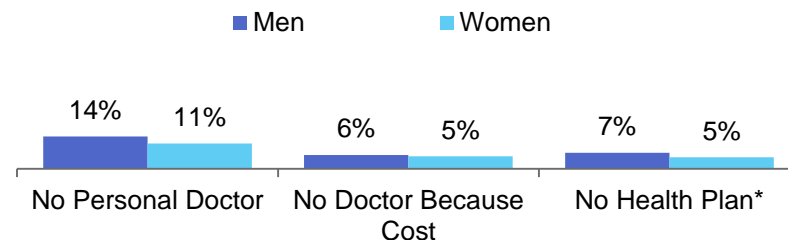
Poor health care access decreases with increasing age.

- White River Junction area adults 65 and older are statistically less likely to delay care due to cost compared to younger age groups.
- There are no statistically significant differences in not having a personal doctor or not having a health plan by age.

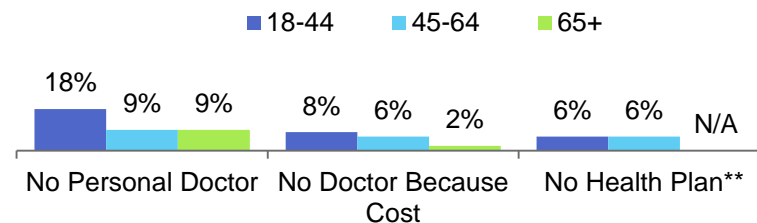
Adults in the White River Junction area with the highest annual household incomes are less likely to report delaying care due to cost.

- Adults in homes making at least \$50,000 a year are statistically less likely to delay healthcare due to cost compared to adults with incomes of \$25,000 to \$49,999.
- There are no significant differences in adults not having a personal doctor or not having a health plan by annual household income.

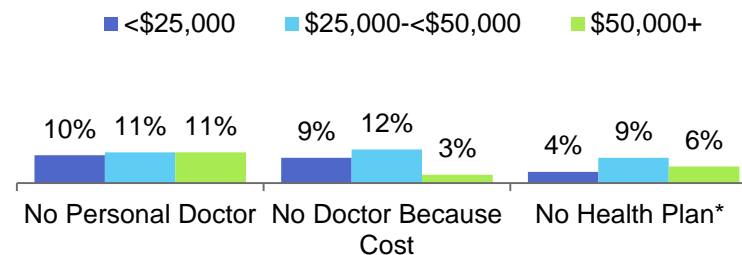
**Healthcare Access Indicators by Gender
White River Junction Adults**



Healthcare Access Indicators by Age



**Healthcare Access Indicators
by Income Level**



*Sample size is too small to report.

**Limited to adults 18-64.

Chronic Conditions

Three in ten White River Junction area adults are obese or have arthritis. About a quarter (26%) have ever been diagnosed with a depressive disorder (26%).

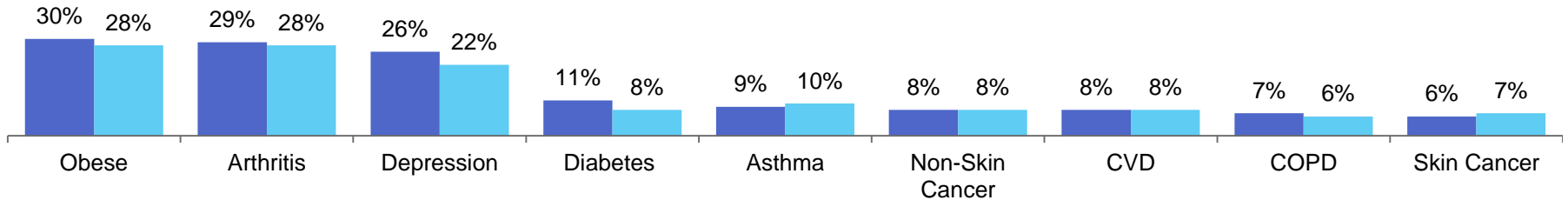
Eleven percent of adults in the White River Junction area have ever been told they have diabetes. Less than one in ten or fewer reported being diagnosed with each of the following chronic conditions: asthma, non-skin cancer, cardiovascular disease (CVD), chronic obstructive pulmonary disease (COPD), and skin cancer.

White River Junction area adults reported similar rates of all chronic conditions, regardless of the measure, as compared with Vermont adults overall.

The prevalence of diabetes is trending up, increasing from 7% in 2011-2012 to 11% in 2015-2016, however the difference in diabetes prevalence in these two years is not statistically significant. Prevalence of other chronic conditions have not changed statistically since 2011. See Appendix A for results over time.

Prevalence of Selected Chronic Conditions

■ White River Junction ■ Vermont



Obesity data is limited to adults 20 and older and is age-adjusted to the U.S. 2000 population.

Chronic Conditions

Among White River Junction area adults, females are more than twice as likely as males to report a depressive disorder (34% vs.16%), a statistically significant difference.

- There are no statistically significant differences in the prevalence of arthritis, obesity or asthma by gender.

Arthritis prevalence among White River Junction adults increases with increasing age.

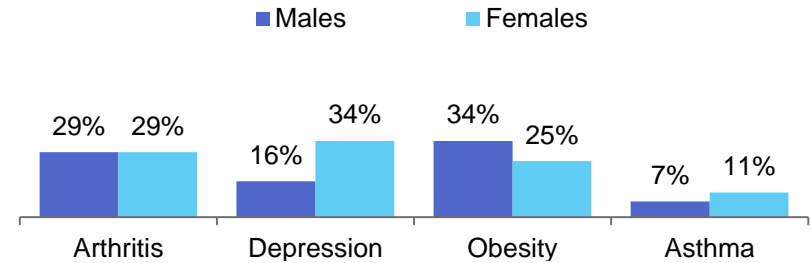
- All differences by age are statistically significant.

Rates of depression, obesity, and asthma among White River Junction area adults do not differ statistically by age.

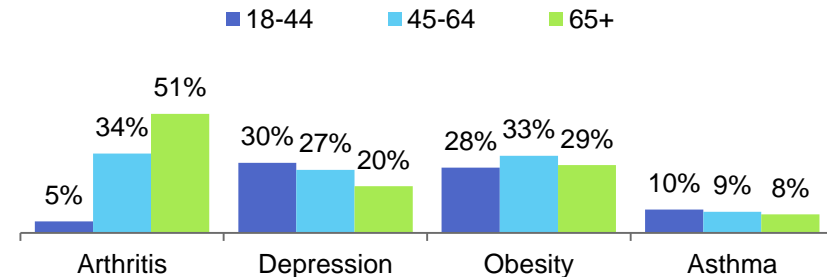
The prevalence of arthritis, depression, obesity, and asthma decrease with increasing household income.

- Adults in homes making \$50,000 or more annually are statistically less likely to have arthritis or obesity, compared with those in homes making less than \$25,000.
- There are no differences in depression or asthma prevalence by annual household income level.

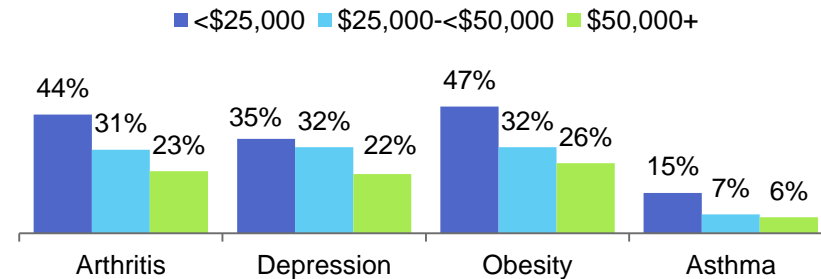
**Chronic Conditions by Gender
White River Junction Adults**



Chronic Conditions by Age



Chronic Conditions by Income Level



Note: Obesity data are for adults 20 and older and, except that by age, are age adjusted to U.S. 2000 standard population.

Chronic Conditions

White River Junction area men are statistically more likely than women to report diabetes (15% vs. 7%) and CVD (13% vs. 4%).

- There are no differences in rates of COPD by gender.

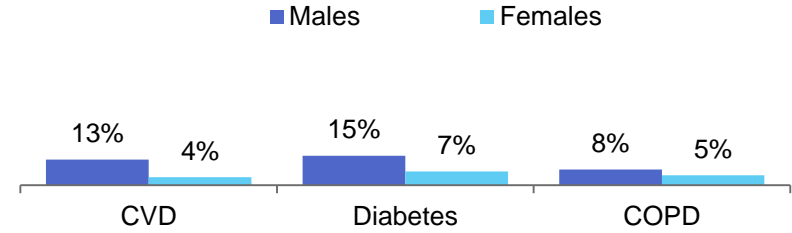
As age increases, the prevalence of CVD, diabetes, and COPD increases as well.

- Adults 65 and older are statistically more likely to have CVD than younger adults.
- There are no statistical differences in rates of diabetes and COPD by age.

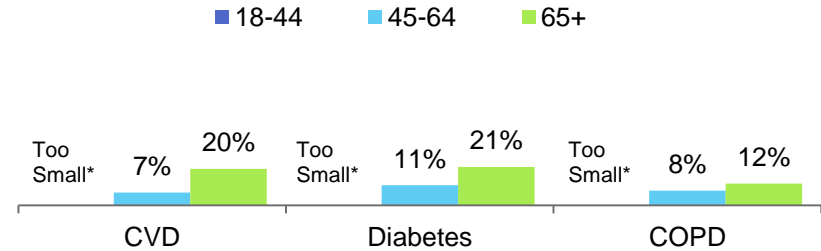
White River Junction area adults living in homes with less income are more likely to report CVD, diabetes, or COPD compared to homes that earn more income.

- Area adults in homes earning less than \$25,000 per year are statistically more likely to have CVD, COPD, and diabetes than those with more annual income.

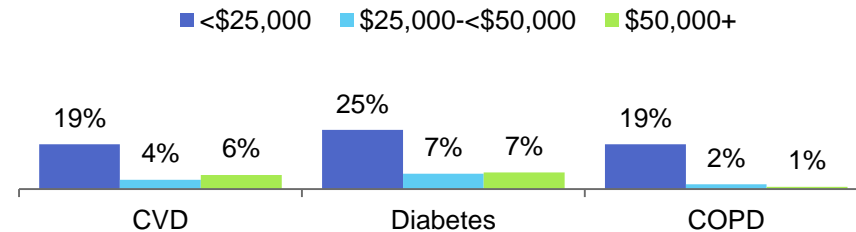
**Chronic Conditions by Gender
White River Junction Adults**



Chronic Conditions by Age



Chronic Conditions by Income Level



*Sample size is too small to report.

Chronic Conditions

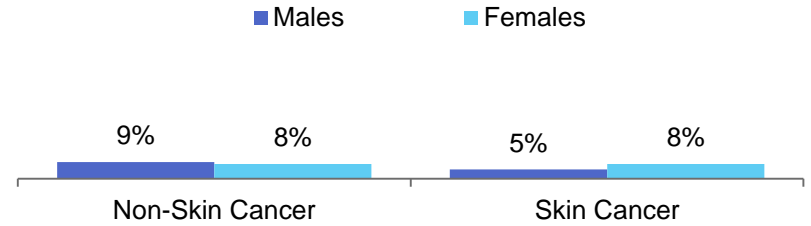
There are no differences by gender in the prevalence of non-skin cancer or skin cancer, among White River Junction adults.

The prevalence of both skin cancer and non-skin cancers among White River Junction area adults increase with increasing age.

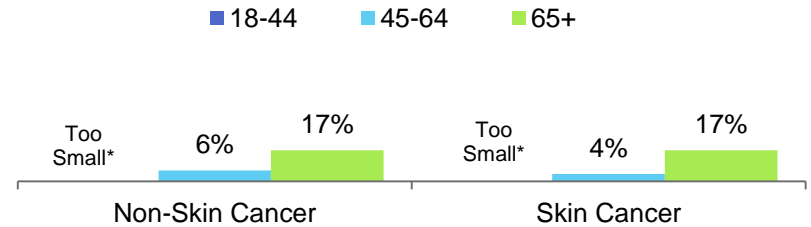
- All differences by age in the prevalence of skin cancer are statistically significant.

White River Junction adults have similar rates of non-skin cancer and skin cancer by annual household income level.

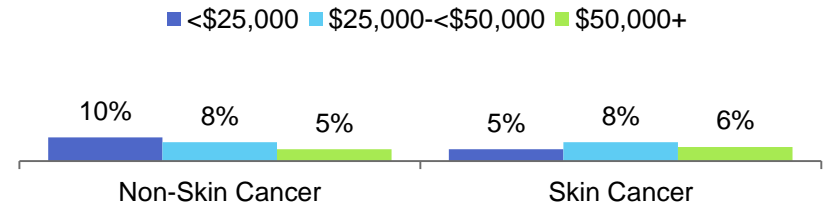
**Chronic Conditions by Gender
White River Junction Adults**



Chronic Conditions by Age



Chronic Conditions by Income Level



*Sample size is too small to report.

Risk Behaviors

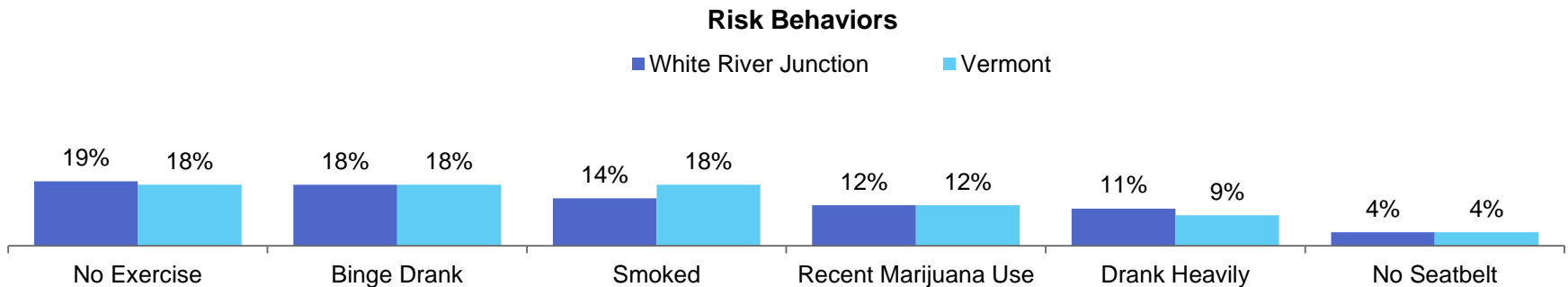
In 2015-2016, about one in five (19%) White River Junction area adults did not participate in leisure time physical activity during the previous month, while one in six (14%) currently smoke. Of smokers, half (49%) tried to quit smoking at least once during the previous year (data not shown).

Eighteen percent of adults in the White River Junction area binge drank in the past month, while 11% reported heavy drinking.

- Binge drinking is defined as five or more drinks in one sitting for men and four or more drinks for women. Heavy drinking is defined as more than two drinks per day for men and more than one for women.

More than one in ten (12%) percent used marijuana in the last month. Few, four percent, wear their seatbelt seldom or never.

There are no statistically significant differences White River Junction area adults and Vermont adults overall, for any of the above risk behavior measures. Additionally, risk behavior prevalence has not changed statistically for any measure since 2011. See Appendix A for results over time.



Note: Smoking and exercise data are age adjusted to the U.S. 2000 standard population.

Risk Behaviors

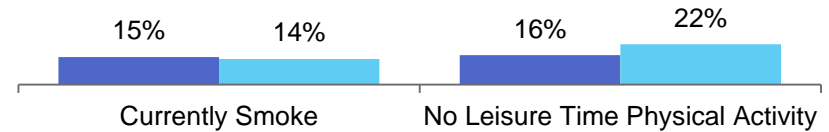
There are no significant differences in rates of current smoking and not participating in leisure time physical activity by gender or age, among White River Junction area adults.

Rates of smoking and not participating in any leisure time physical activity decrease as annual household income increases.

- Adults in homes making \$50,000 or more per year are statistically less likely to not participate in leisure time physical activity than those in homes with less income.
- Differences in smoking by annual household income level do not differ statistically.

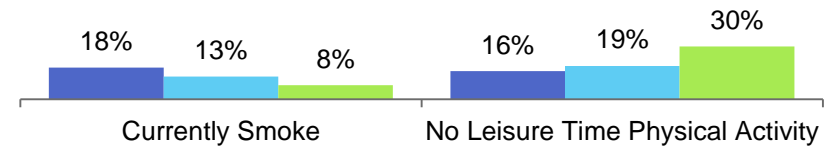
Risk Behaviors by Gender
White River Junction Adults

■ Males ■ Females



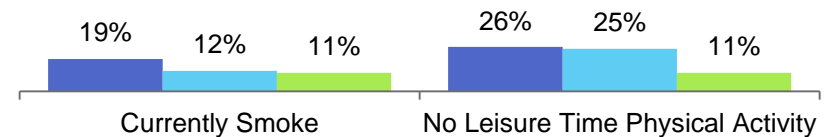
Risk Behaviors by Age

■ 18-44 ■ 45-64 ■ 65+



Risk Behaviors by Income Level

■ <\$25,000 ■ \$25,000-<\$50,000 ■ \$50,000+



Note: Smoking and physical activity data, except that by age, are age-adjusted to the U.S. 2000 population.

Risk Behaviors

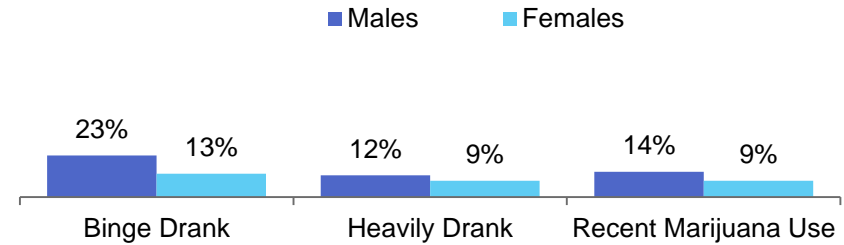
There are no significant differences in the prevalence of binge drinking, heavy drinking, or recent marijuana use by gender among White River Junction area adults.

Rates of binge drinking, heavy drinking, and recent marijuana use decrease with increasing age.

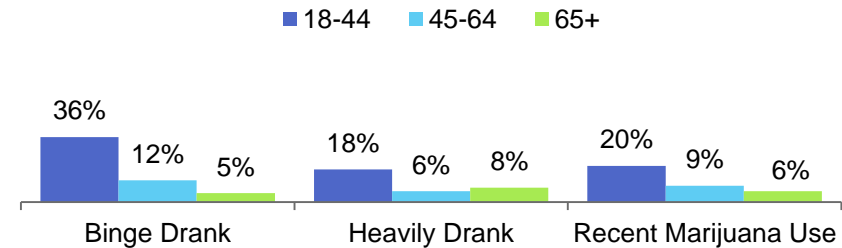
- Adults 18-44 are statistically more likely to binge drink, compared to older adults.
- Heavy drinking is higher among adults 18-44 vs. those 45-64.
- Recent marijuana use is statistically higher among adults 18-44 compared to those 65 and older.

There are no differences in binge drinking, heavy drinking, or recent marijuana use by annual household income, among White River Junction area adults.

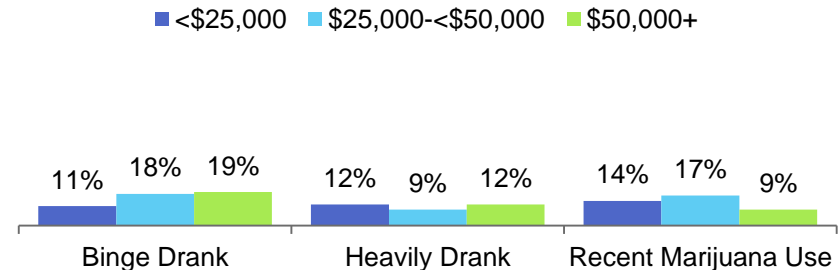
Risk Behaviors by Gender
White River Junction Adults



Risk Behaviors by Age



Risk Behaviors by Income Level



*Sample size is too small to report.

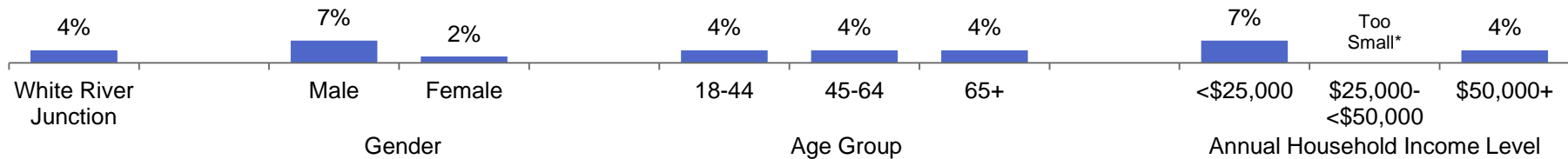
Risk Behaviors

Overall, four percent of adults in the White River Junction area seldom or never wear a seatbelt when riding or driving in a car. This is similar to the four percent of Vermont adults who reported the same.

White River Junction area men reported never or seldom wearing seatbelts at statistically higher rates to women (7% vs. 2%)

Adult non-use of seatbelts in the White River Junction area does not differ by age or annual household income level.

**Seldom or Never Wear Seatbelt, Overall and by Sub-groups
White River Junction Adults**



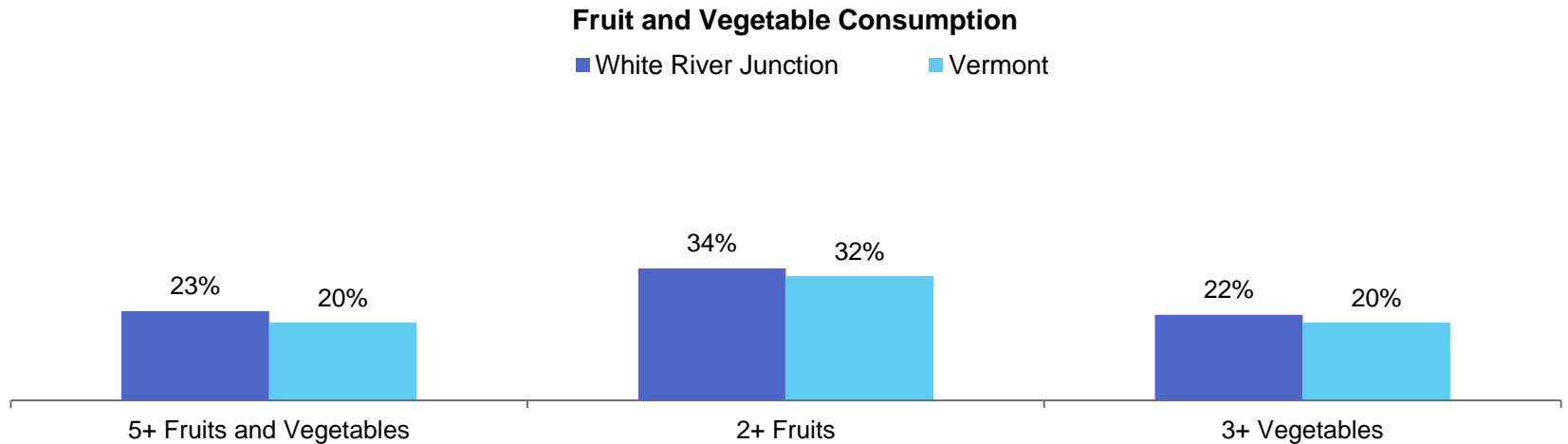
*Sample size is too small to report.

Preventive Behaviors

Fewer than a quarter (23%) of White River Junction area adults ate five or more fruits and vegetables per day. Approximately a third (34%) ate two or more fruits while 22% reported eating three or more vegetables.

White River Junction area adult consumption of fruits and vegetables is similar to that of Vermont adults overall.

Fruit and vegetable consumption, among White River Junction area adults, did not change statistically from 2011/2013 to 2013/2015. See Appendix A for trend results.



Preventive Behaviors

Females in the White River Junction area are statistically more likely than males to eat vegetables at least three times per day (28% vs. 15%).

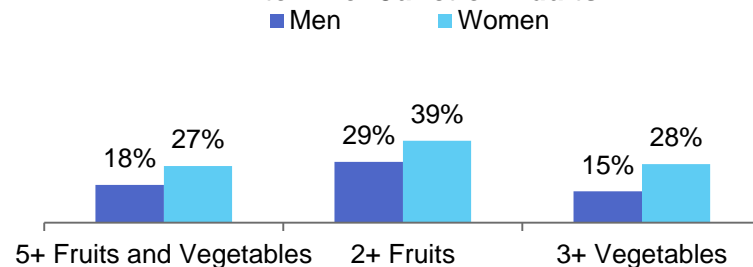
- Eating fruits at least twice or fruits and vegetables at least five times per day does not vary statistically by gender.

There are no statistical differences in the consumption of fruits and vegetables by age.

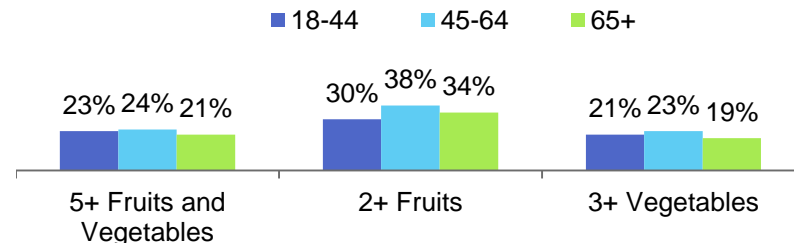
Fruit consumption is higher among White River Junction area adults in homes with more income.

- Adults in homes making at least \$50,000 per year are statistically more likely than those in homes with less income to eat fruits at least twice daily.
- Consumption of vegetables three or more times or fruits and vegetables at least five times daily does not vary statistically with household income level.

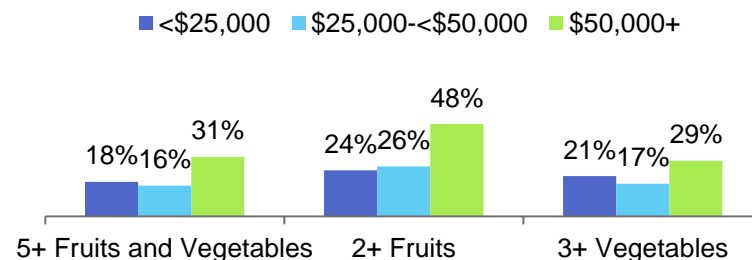
**Preventive Behaviors by Gender
White River Junction Adults**



Preventive Behaviors by Age



Preventive Behaviors by Income Level



Note: fruit and vegetable data, except that by age, are age adjusted to the U.S. 2000 standard population.

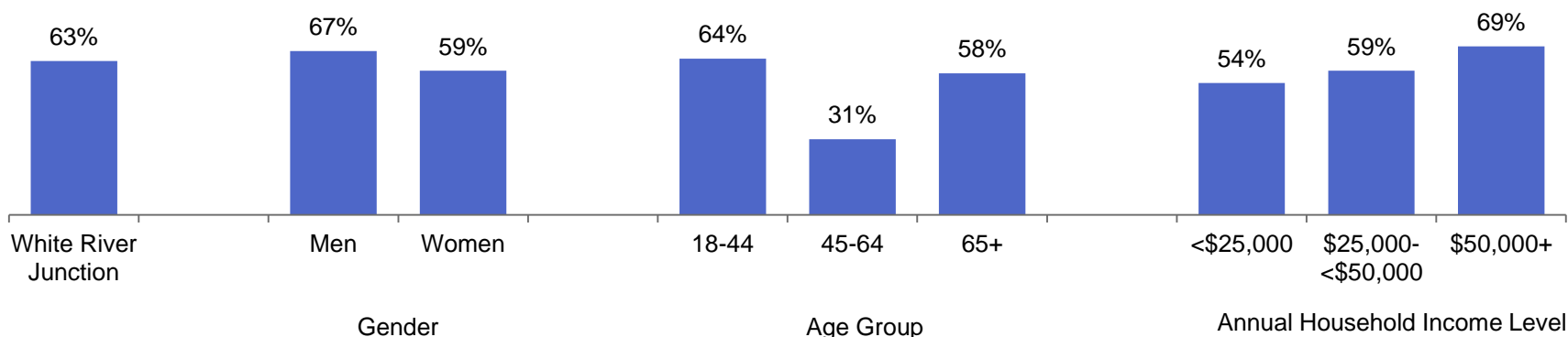
Preventive Behaviors

In 2013/2015, more than six in ten (63%) White River Junction adults met physical activity recommendations*. This is similar to the 59% reported among Vermont adults.

There are no statistically significant differences in physical activity by gender, age, or annual household income level, among White River Junction area adults.

Meeting physical activity recommendations, among White River Junction area adults, did not change statistically from 2011/2013 to 2013/2015. See Appendix A for trend results.

**Met Physical Activity Recommendations, Overall and by Sub-groups
White River Junction Adults**



*For adults, the CDC currently recommends they participate in 150 minutes of moderate physical activity or 75 minutes of vigorous activity per week. Strength building activities are recommended at least two times per week. For more information see: www.cdc.gov/physicalactivity/everyone/guidelines/index.html.

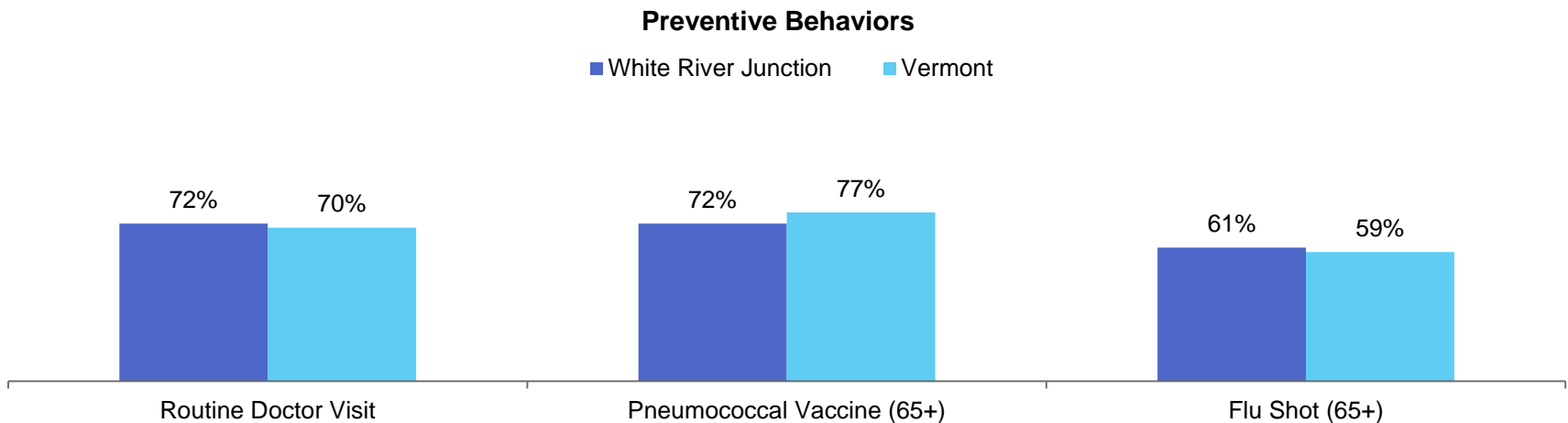
Preventive Behaviors

About seven in ten (72%) adults in the White River Junction area saw their doctor for a routine visit in the previous year. This is similar to the 70% reported among all Vermont adults.

White River Junction area adults ages 65 and older also received vaccinations at similar rates to Vermont adults overall.

- Seventy-two percent of White River Junction adults 65 and older have gotten a pneumococcal vaccine and 61% got a flu shot in the last year, compared with 77% and 59% of Vermont adults, respectively.

Routine doctor visits and receipt of vaccinations among White River Junction area adults have not changed since 2011. See Appendix A for results over time.



Preventive Behaviors

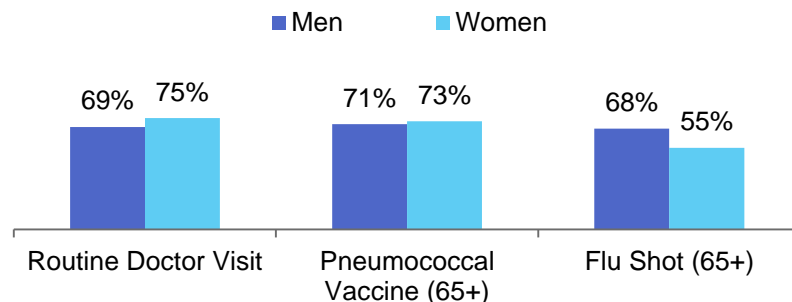
There are no statistically significant differences in routine visits to the doctor or receipt of the pneumococcal vaccine or a flu shot by gender among White River Junction adults.

Routine visits to the doctor in the last year increase with age.

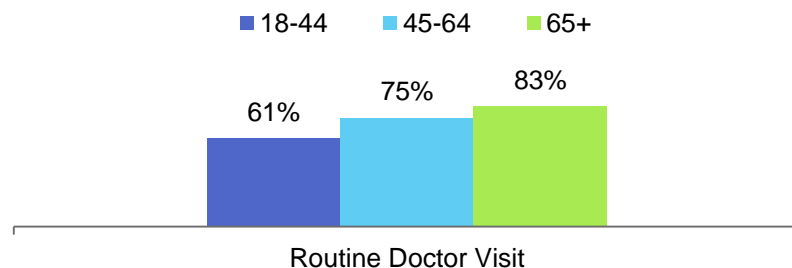
- Adults in the White River Junction area who are 65 and older are statistically more likely than those 18-44 to routinely see their doctor.

White River Junction area adults report similar rates by annual household income in routine doctor visits and receipt of vaccinations.

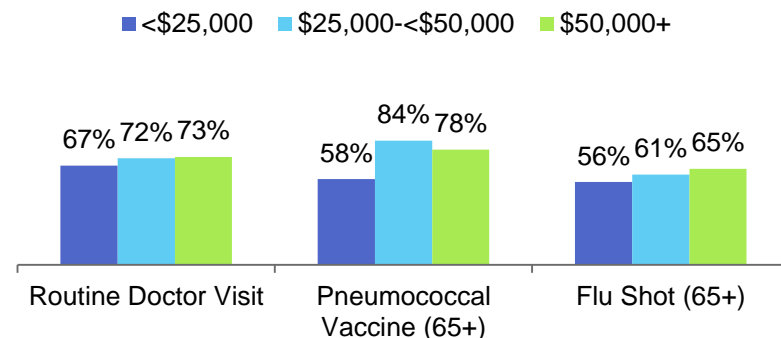
**Preventive Behaviors by Gender
White River Junction Adults**



Preventive Behaviors by Age



Preventive Behaviors by Income Level

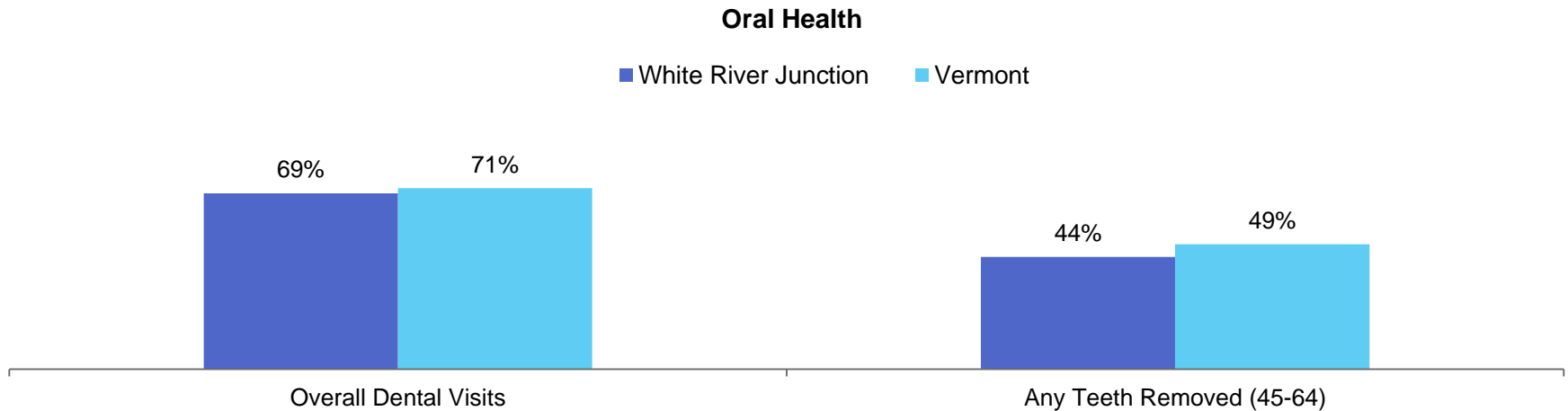


Oral Health

About seven in ten (69%) White River Junction adults saw their dentist in the last year. This is similar to the 71% reported among all Vermont adults.

Less than half (44%) of White River Junction area adults, ages 45-64, have had at least one tooth removed. This is also similar to what is reported by Vermont adults of the same age (49%).

Oral health indicators, among White River Junction area adults, did not change statistically from 2012/2014 to 2014/2016. See Appendix A for trend results.



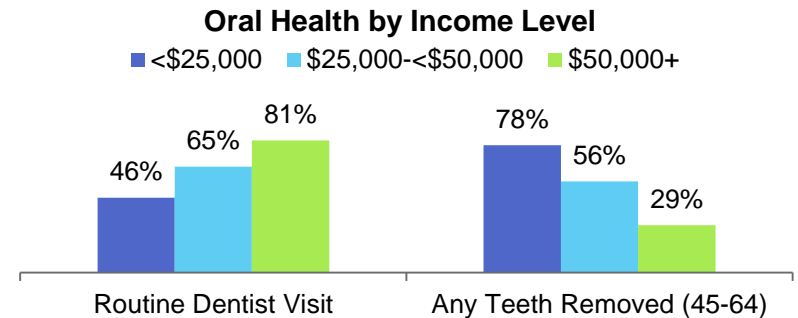
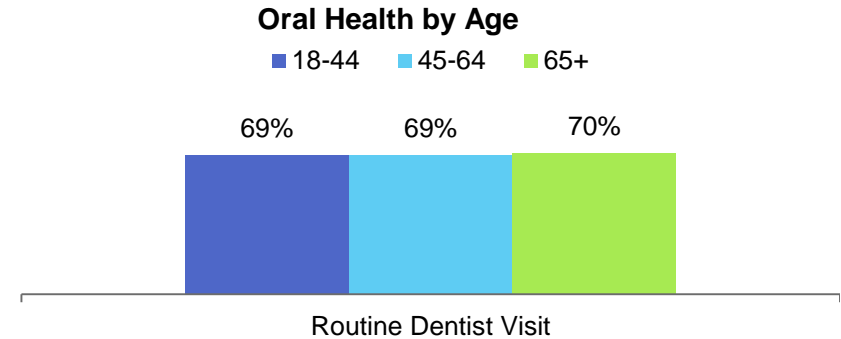
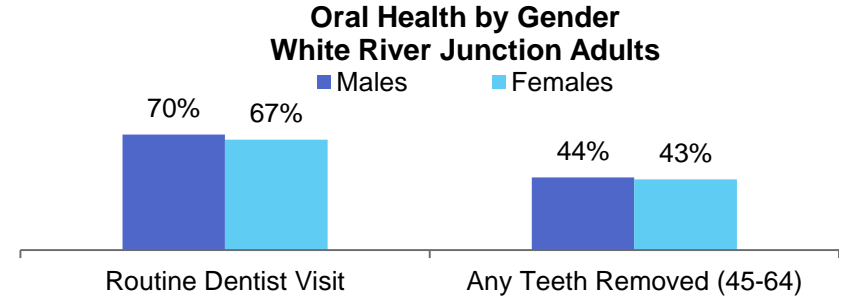
Oral Health

Among White River Junction adults, there are no differences by gender in routine dental visits and having one or more teeth removed/extracted.

Routine dental visits also do not vary statistically by age.

Adults living in homes with more income are more likely to routinely see their dentist and less likely to have had teeth removed.

- Those in homes making at least \$50,000 annually are statistically more likely to routinely visit the dentist compared to those with less income.
- Similarly, adults 45-64 in homes with an income of \$50,000 or more are statistically less likely to have had teeth removed, compared with those in homes with less income.



HIV Screening

In 2015-2016, nearly four in ten (38%) White River Junction area adults had ever been tested for HIV, which is similar to the proportion reported among Vermont adults overall (37%).

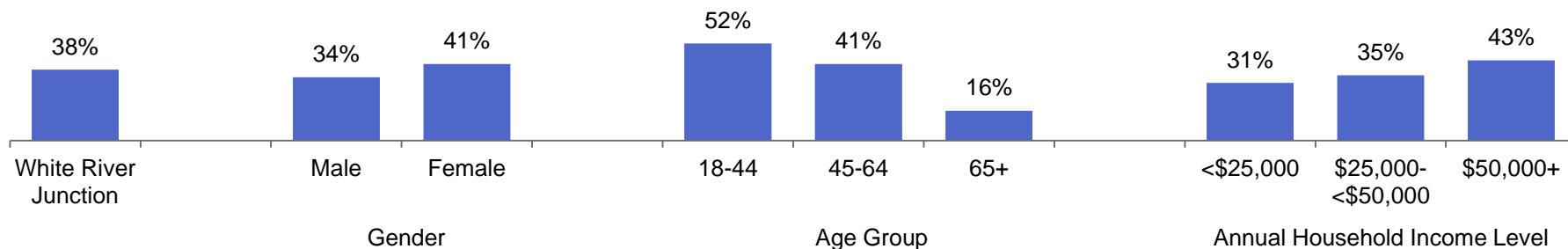
Ever having an HIV test decreases with increasing age. In other words, as adults age they are less likely to have had an HIV test.

- Area adults 65 and older are statistically less likely to have ever been tested for HIV compared to younger age groups.

There are no differences, among White River Junction adults, in HIV testing by gender or annual household income level.

The proportion of White River Junction area adults tested for HIV is trending up, increasing from 32% in 2011-2012 to 38% in 2015-2016. However, the difference in HIV testing between the two years is not statistically significant. See Appendix A for results over time.

**Ever Had HIV Test, Overall and by Sub-Groups
White River Junction Adults**



Cancer Screening

In 2014/2016, about three-quarters (73%) of women ages 50-74 in the White River Junction area met breast cancer screening recommendations. This is similar to the proportion reported among all Vermont women in this age group (79%).

- The breast cancer screening recommendation is a mammogram every two years.

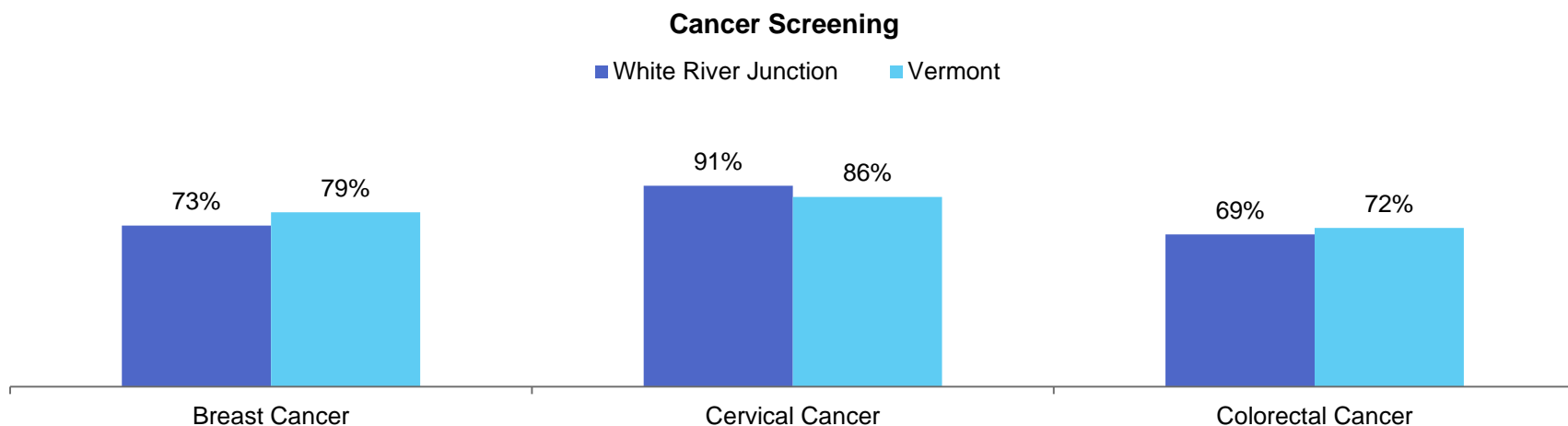
Ninety-one percent of women 21-65 and older who live in the White River Junction area met cervical cancer screening recommendations, statistically similar to the 86% among Vermont women of the same age.

- Cervical cancer screening recommendations are for a PAP test every three years, and excludes women who have had a hysterectomy.

Among adults 50 to 75 living in the White River Junction area, roughly seven in ten (69%) met colorectal cancer screening recommendations, similar to the rate among all Vermonters of the same age (72%).

- Recommendations for screening for colorectal cancer are: a fecal occult blood test (FOBT) annually OR sigmoidoscopy every five years and FOBT every three years OR colonoscopy every ten years.

Receipt of mammograms among women 50-74, and of colorectal cancer screening among adults 50-75 did not change statistically from 2012/2014 to 2014/2016. Changes in cervical cancer screening could not be measured due to a difference in how hysterectomies were asked about in 2016 and earlier years.



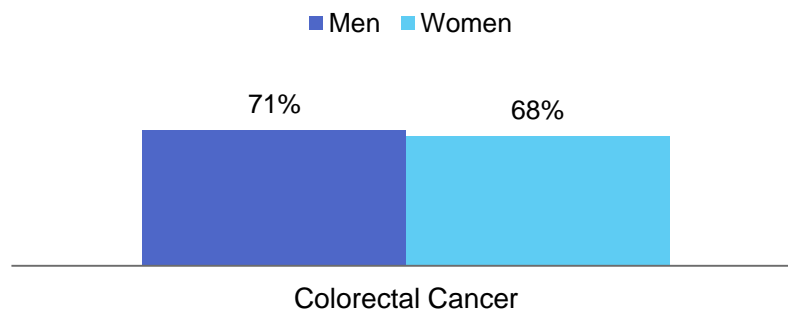
Cancer Screening

Among White River Junction area adults, there are no statistical differences in gender between receiving recommended colorectal cancer screenings.

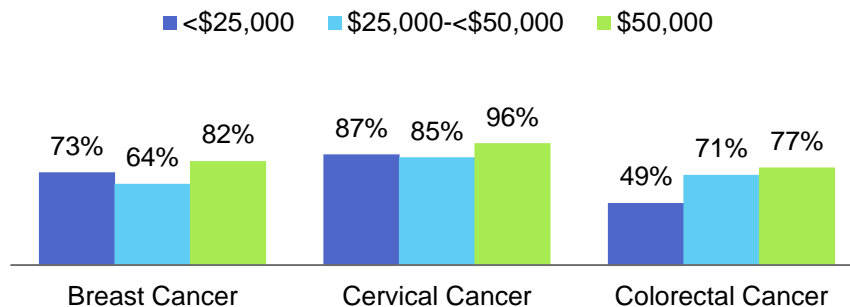
White River Junction area adults in homes with more income are more likely to meet cancer screening recommendations.

- White River Junction adults 50-75 years of age with a household income of at least \$50,000 per year are statistically more likely to meet recommendations for screening for colorectal cancer than those in homes with the lowest incomes.
- The proportion of women in the White River Junction area meeting recommendations for breast and cervical cancer do not differ statistically by annual household income level.

**Cancer Screening By Gender
White River Junction Adults**



Cancer Screening by Income Level



Appendix A: White River Junction District Office Trend Results (2011-2016)

Health Status Indicators	2011-2012	2012-2013	2013-2014	2014-2015	2015-2016	Significant Change Since 2011
Fair or Poor General Health	12%	11%	10%	13%	13%	No
Poor Physical Health	10%	9%	8%	9%	10%	No
Poor Mental Health	10%	9%	9%	10%	12%	No
Health Access Indicators	2011-2012	2012-2013	2013-2014	2014-2015	2015-2016	Significant Change Since 2011
No Personal Doctor	11%	14%	15%	12%	12%	No
No Doctor Because of Cost	8%	8%	8%	6%	6%	No
No Health Plan (ages 18-64)	12%	9%	7%	6%	6%	No*
Chronic Conditions	2011-2012	2012-2013	2013-2014	2014-2015	2015-2016	Significant Change Since 2011
Arthritis	29%	28%	29%	31%	29%	No
Depression	24%	23%	23%	26%	26%	No
Obesity	26%	25%	26%	26%	30%	No
Asthma	9%	9%	9%	11%	9%	No
Diabetes	7%	7%	6%	9%	11%	No*
Non-Skin Cancer	7%	8%	9%	8%	8%	No
Cardiovascular Disease (CVD)	8%	6%	6%	8%	8%	No
Skin Cancer	8%	10%	10%	9%	6%	No
Chronic Obstructive Pulmonary Disease (COPD)	4%	5%	7%	7%	7%	No

*No health plan among White River Junction area adults 18-64 has a statistically significant downward trend, while COPD prevalence among all adults in this area has a statistically significant upward trend. However, for both measures the change from 2011-2012 to 2015-2016 is not statistically significant.

Appendix A: White River Junction District Office Trend Results (2011-2016)

Risk Behaviors	2011-2012	2012-2013	2013-2014	2014-2015	2015-2016	Significant Change Since 2011
Smoking	18%	17%	16%	15%	14%	No
Binge Drinking	17%	14%	14%	16%	18%	No
Heavy Drinking	6%	6%	7%	8%	11%	No
No Exercise	18%	17%	18%	21%	19%	No
Seldom or Never use Seatbelt	3%	3%	2%	4%	4%	No
	2011-2012	2012-2013	2013, 2015	2015-2016		Significant Change Since 2011
Recent Marijuana Use	7%	7%	9%	12%		No
Preventative Behaviors	2011-2012	2012-2013	2013-2014	2014-2015	2015-2016	Significant Change Since 2011
Routine Doctor Visit, in Last year	70%	68%	65%	69%	72%	No
Pneumococcal Vaccine, Ever, Ages 65+	69%	68%	74%	74%	72%	No
Flu Shot in the Last Year, Ages 65+	71%	66%	62%	62%	61%	No
Ever Tested for HIV	32%	30%	30%	35%	38%	No*

*HIV testing among adults in the White River Junction area has a statistically significant upward trend, however, the change from 2011-2012 to 2015-2016 is not statistically significant.

Appendix A: White River Junction District Office Trend Results (2011-2016)

Preventive Behaviors (cont).	2011, 2013	2013, 2015	Significant Change Since 2011
Meet Physical Activity Recommendations	66%	63%	No
Eat 2+ Fruits Per Day	39%	34%	No
Eat 3+ Vegetables Per Day	19%	22%	No
Eat 5+ Fruits & Vegetables Per Day	25%	23%	No
	2012, 2014	2014, 2016	Significant Change Since 2011
Routine Dental Visit, Last Year	74%	69%	No
Teeth Removed , Ages 45-64	42%	44%	No
Mammogram, Last 2 Years, Women 50-74	73%	73%	No
Meet Colorectal Cancer Screen Recommendations, Adults 50-75	64%	69%	No
PAP Test, Last 3 Years, Women 21-65	86%		

Additional Information

Contact the BRFSS Coordinator for additional information or for BRFSS data

Jessie Hammond

Jessie.hammond@Vermont.gov

802-863-7663

Additional sub-state level data can be found on the Vermont Department of Health website

<http://healthvermont.gov/hv2020/index.aspx>

Towns in the White River Junction Health District are: Bradford, Chelsea, Corinth, Fairlee, Randolph, Strafford, Thetford, Tunbridge, Vershire, West Fairlee, Barnard, Bethel, Bridgewater, Hartford, Hartland, Norwich, Pomfret, Rochester, Royalton, Sharon, Stockbridge, and Woodstock.