



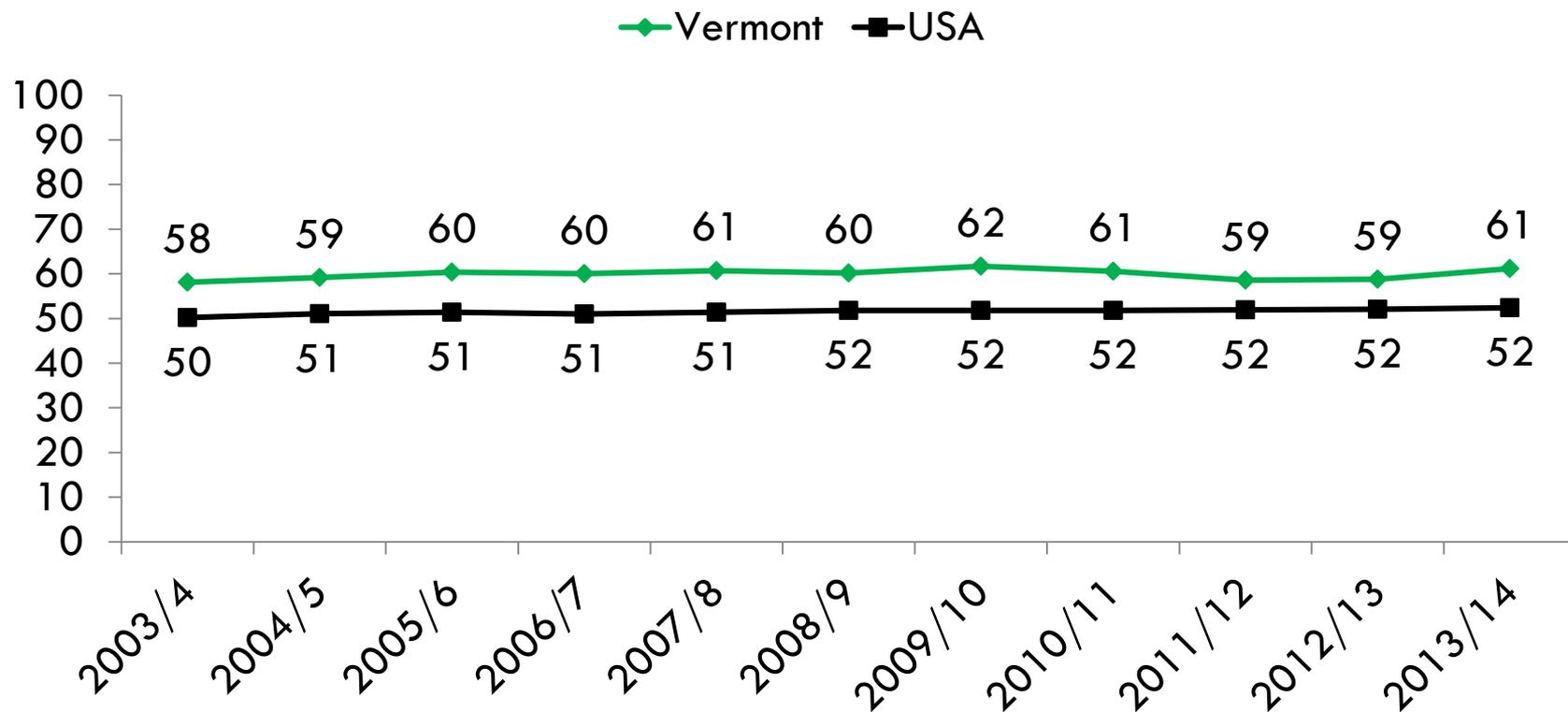
National Survey on Drug Use and Health Vermont Data

Past 30 day alcohol use

- Past 30 day alcohol use for people 12+ years old has remained constant in Vermont and in the U.S. from 2002/2003 to 2013/2014.
- Vermont has a statistically higher prevalence of past 30 day alcohol use compared to the U.S. for those ages 12+, 18-25 and 26+ in 2013/2014.
- 18-25 year olds have the highest past 30 day alcohol use prevalence compared to those 12-17 years old and 26+ years old in Vermont in 2013/2014.
- Underage drinking:
 - In 2013/2014, 30% of 12-20 year olds in Vermont reported past 30 day alcohol use, a statistically higher prevalence than the U.S. average of 23%.

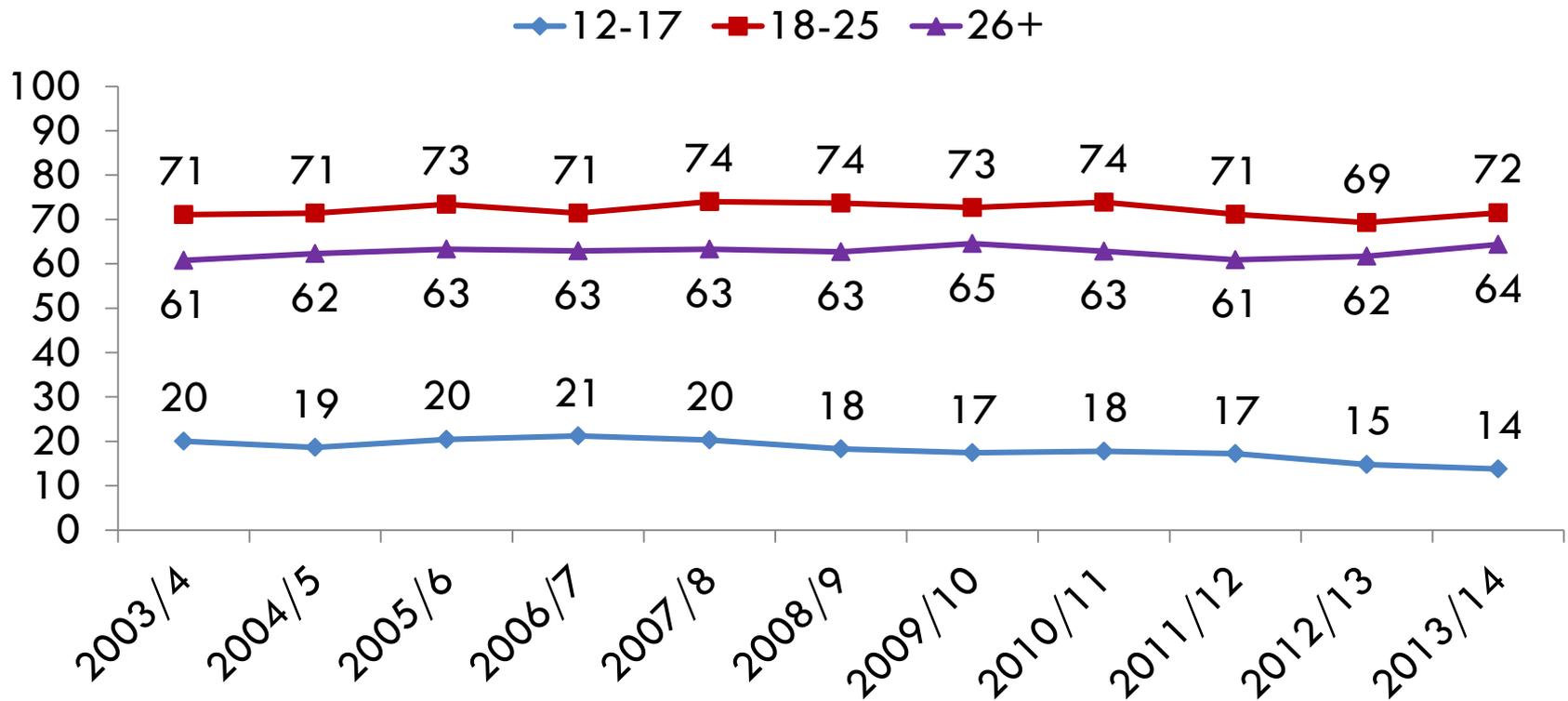
People ages 12+ in Vermont have a statistically higher prevalence of past 30 day alcohol use than the U.S. average.

Percent of population reporting past 30 day alcohol use (ages 12+), Vermont compared to the U.S.



18-25 year olds have a statistically higher prevalence of past 30 day alcohol use compared to those 12-17 years old and 26+ years old in Vermont.

Percent of Vermont population reporting past 30 day alcohol use by age in years.



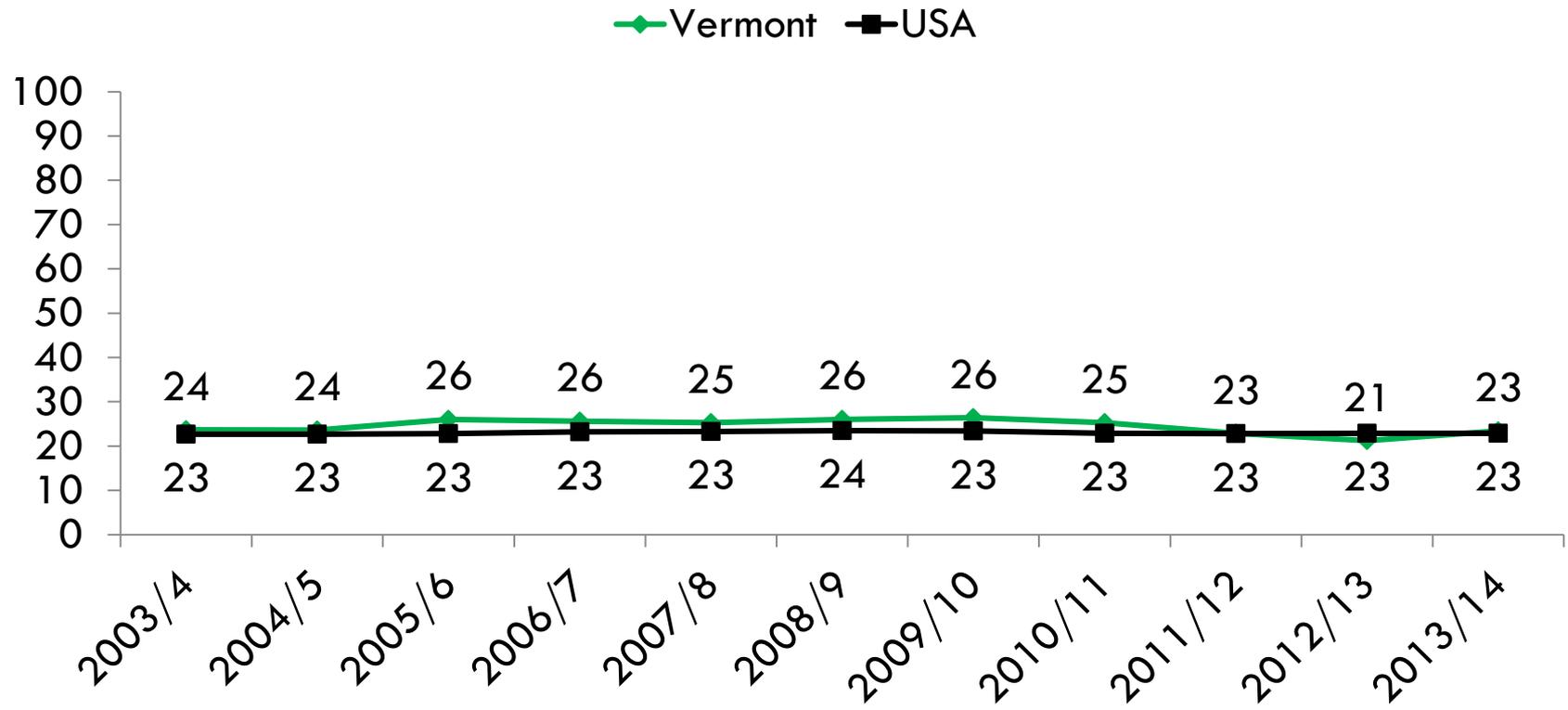
Past 30 day binge drinking

- Vermont has a statistically similar prevalence of past 30 day binge drinking compared to the U.S. for those ages 12+ in 2013/2014.
 - ▣ Vermont has a statistically higher prevalence of past 30 day binge drinking compared to the U.S. for those 18-25 years old in 2013/2014.
- 18-25 year olds have the highest past 30 day binge drinking prevalence compared to those 12-17 years old and 26+ years old in Vermont in 2013/2014. There was a significant increase in binge drinking among 12+, and 26+ year olds from 2012/2013 to 2013/2014.
- Underage drinking:
 - ▣ In 2013/2014, 20% of 12-20 year olds in Vermont reported past 30 day binge drinking, a statistically higher prevalence than the U.S. average of 14%.

Note: Binge drinking is defined as 5+ drinks on the same occasion.

People ages 12+ in Vermont have a similar prevalence of past 30 day binge drinking compared to the U.S. average.

Percent of population reporting past 30 day binge drinking (ages 12+), Vermont compared to the U.S.

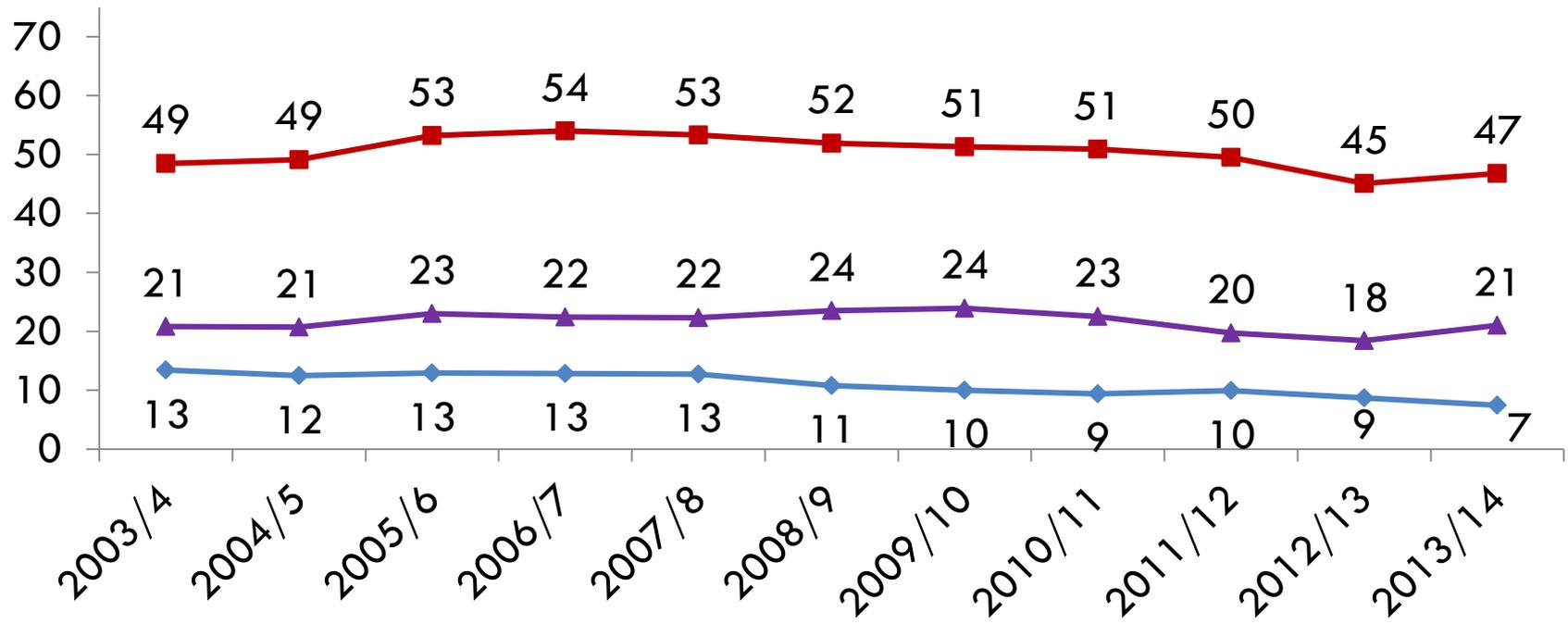


Note: Binge drinking is defined as 5+ drinks on the same occasion.

18-25 year olds have a statistically higher prevalence of past 30 day binge drinking compared to those 12-17 years old and 26+ years old in Vermont.

Percent of Vermont population reporting past 30 day binge drinking by age in years.

◆ 12-17 ■ 18-25 ▲ 26+



Note: Binge drinking is defined as 5+ drinks on the same occasion.

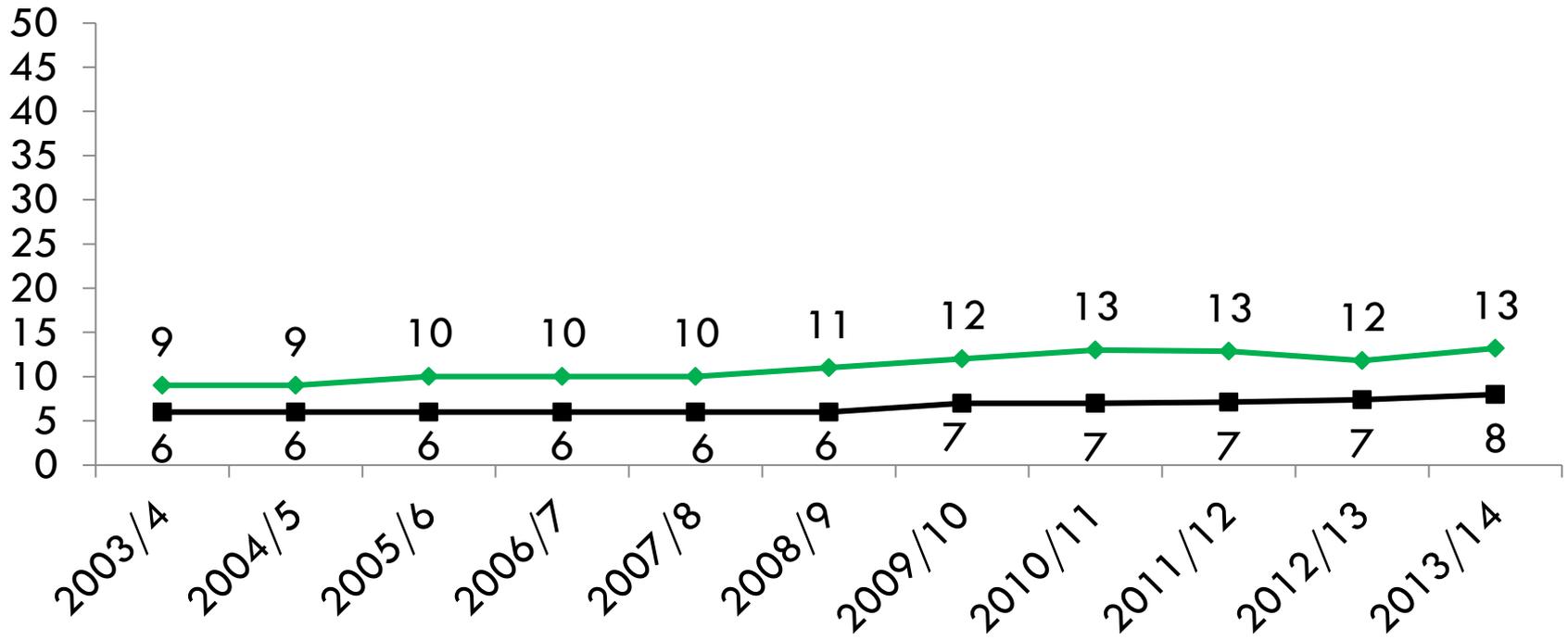
Marijuana

- ❑ Vermont has a statistically higher prevalence of past 30 day marijuana use compared to the U.S. in every age group (those ages 12+, 12-17, 18-25 and 26+) in 2013/2014.
- ❑ Past 30 day marijuana use for 12+ and 18+ year olds showed a significant increase in 2013/2014 compared to 2012/2013
- ❑ 18-25 year olds have a statistically higher prevalence of past year and past 30 day marijuana use compared to those 12-17 years old and 26+ years old in Vermont in 2013/2014.

People ages 12+ in Vermont have a statistically higher prevalence of past 30 day marijuana use compared to the U.S. average.

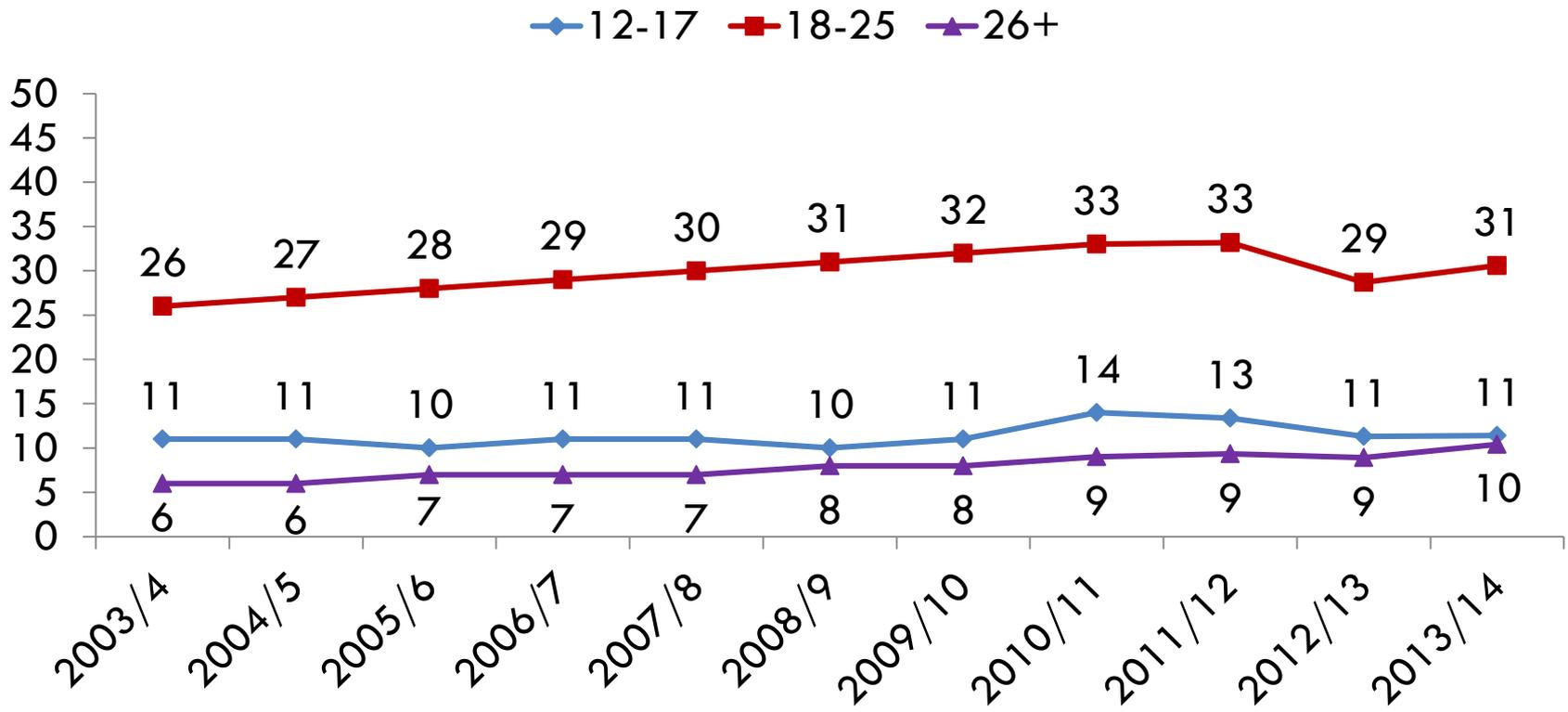
Percent of population reporting past 30 day marijuana use (ages 12+), Vermont compared to the U.S.

—◆— VT —■— US



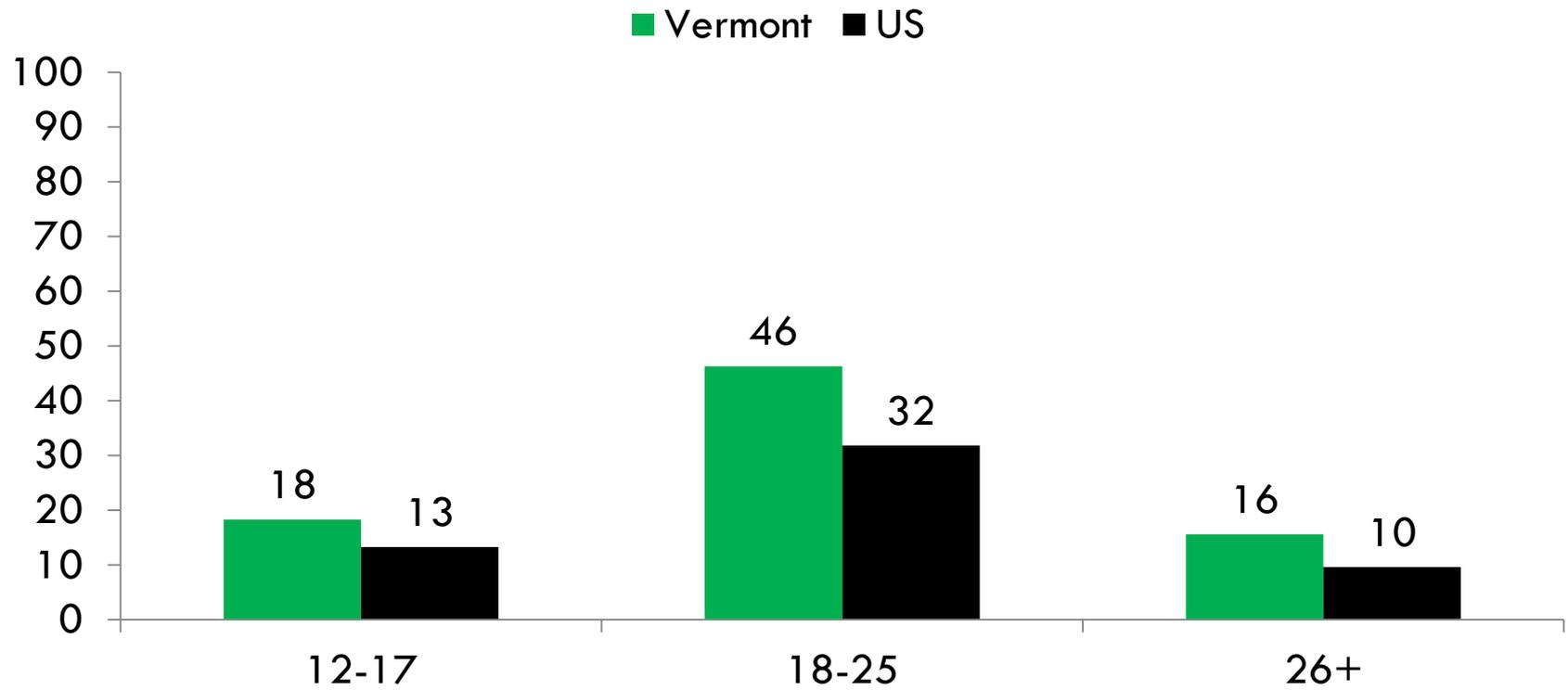
18-25 year olds have a statistically higher prevalence of past 30 day marijuana use compared to those 12-17 years old and 26+ years old in Vermont.

Percent of Vermont population reporting past 30 day marijuana use by age in years.



Vermont has a statistically higher prevalence of past year marijuana use compared to the U.S. in every age group in 2012/2013 (including 12+, not shown).

Percent of Vermont population reporting past year marijuana use by age in years, 2013/2014.



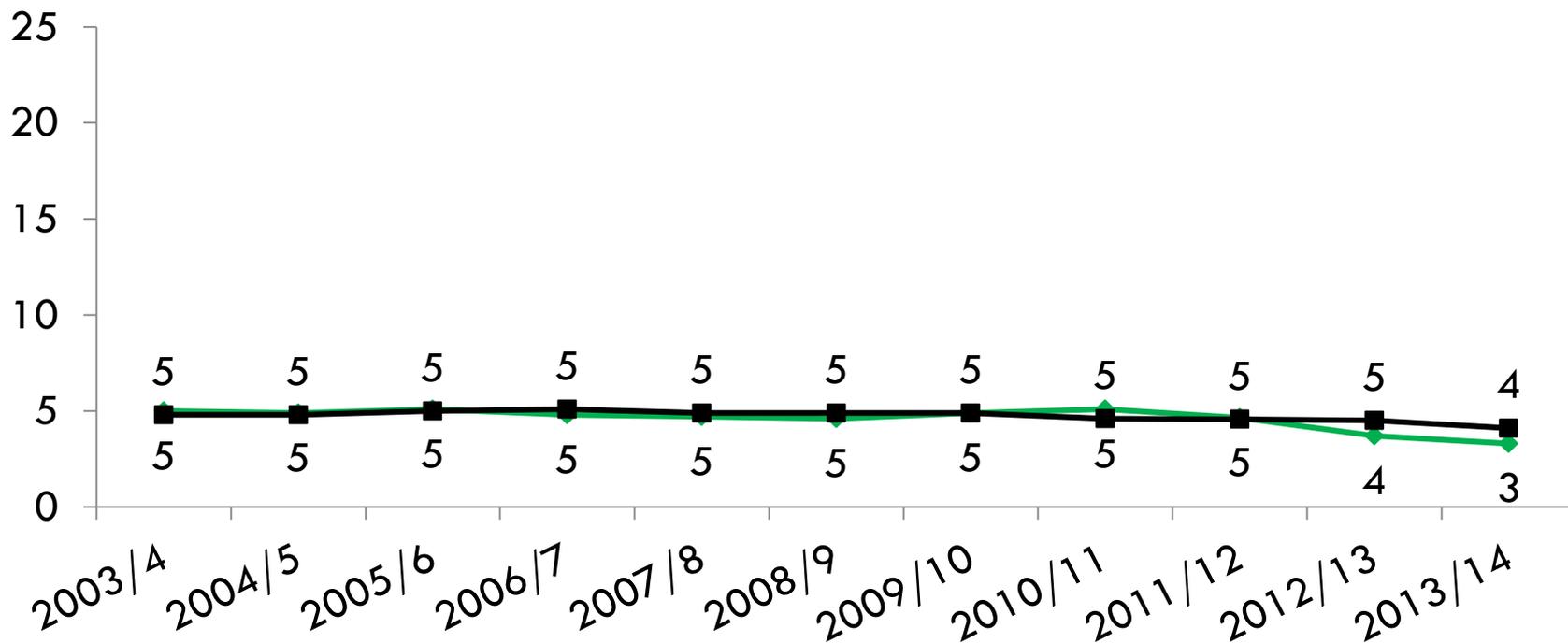
Non-medical pain relievers

- In 2013-14 prevalence for non-medical use of pain relievers (NMUPR) decreased significantly for Vermonters ages 18-25 from 2012/2013.
- Across all age groups, prevalence of NMUPR was among the lowest in the US.
- For Vermonters 26+ prevalence of NMPUR was the lowest among 50 states and the District of Columbia.

People ages 12+ in Vermont have a similar prevalence of non-medical use of pain relievers in the past year compared to the U.S. average.

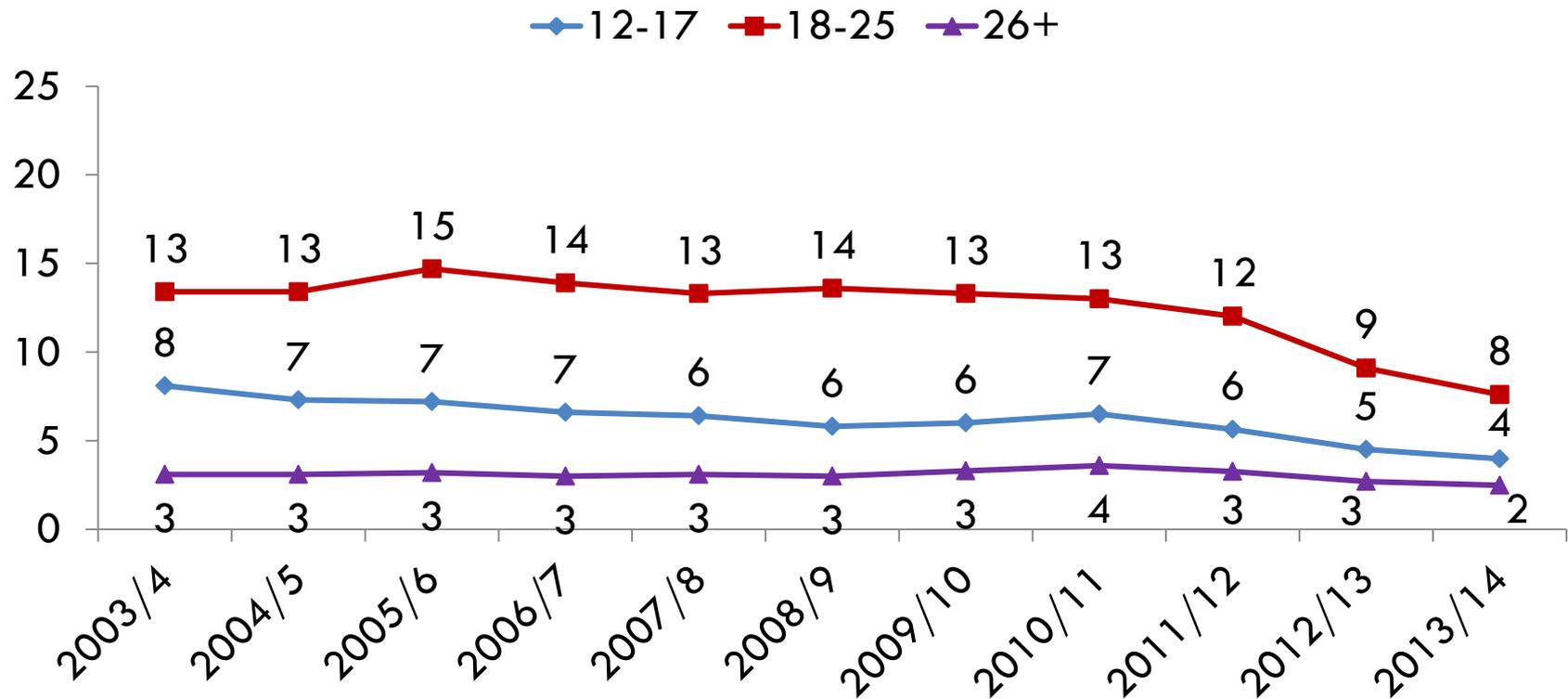
Percent of population reporting non-medical use of pain relievers in the past year (ages 12+), Vermont compared to the U.S.

—◆— VT —■— US



18-25 year olds have a statistically higher prevalence of non-medical use of pain relievers in the past year compared to those 12-17 years old and 26+ years old in Vermont.

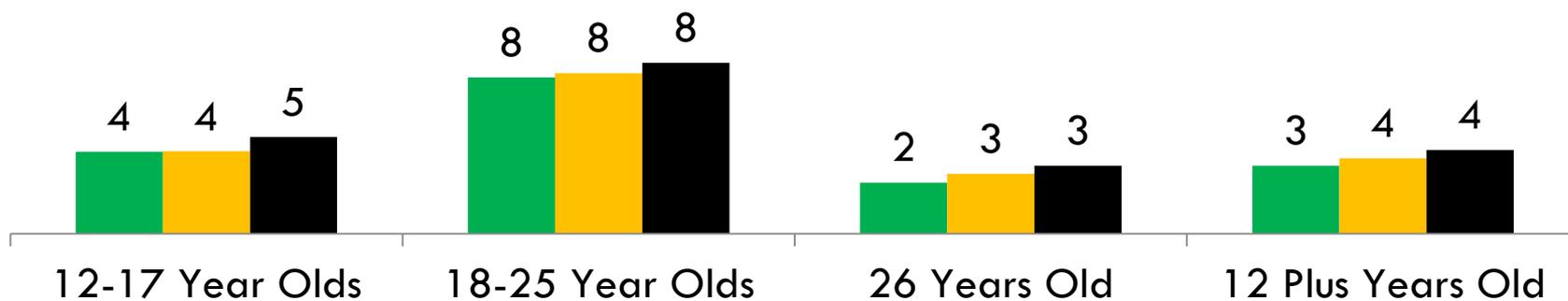
Percent of Vermont population reporting non-medical use of pain relievers in the past year by age in years.



Vermont has similar past 30 day non-medical use of pain reliever prevalence to the U.S. and to the Northeast.

Percent of people reporting past year non-medical use of prescription pain relievers, 2013/2014 Vermont, U.S. Northeast and the U.S.

■ VT ■ NE ■ US



Note - Northeast includes: Connecticut, Delaware, Maine, Maryland, Massachusetts, New Hampshire, New Jersey, New York, Pennsylvania, Rhode Island, and Vermont.

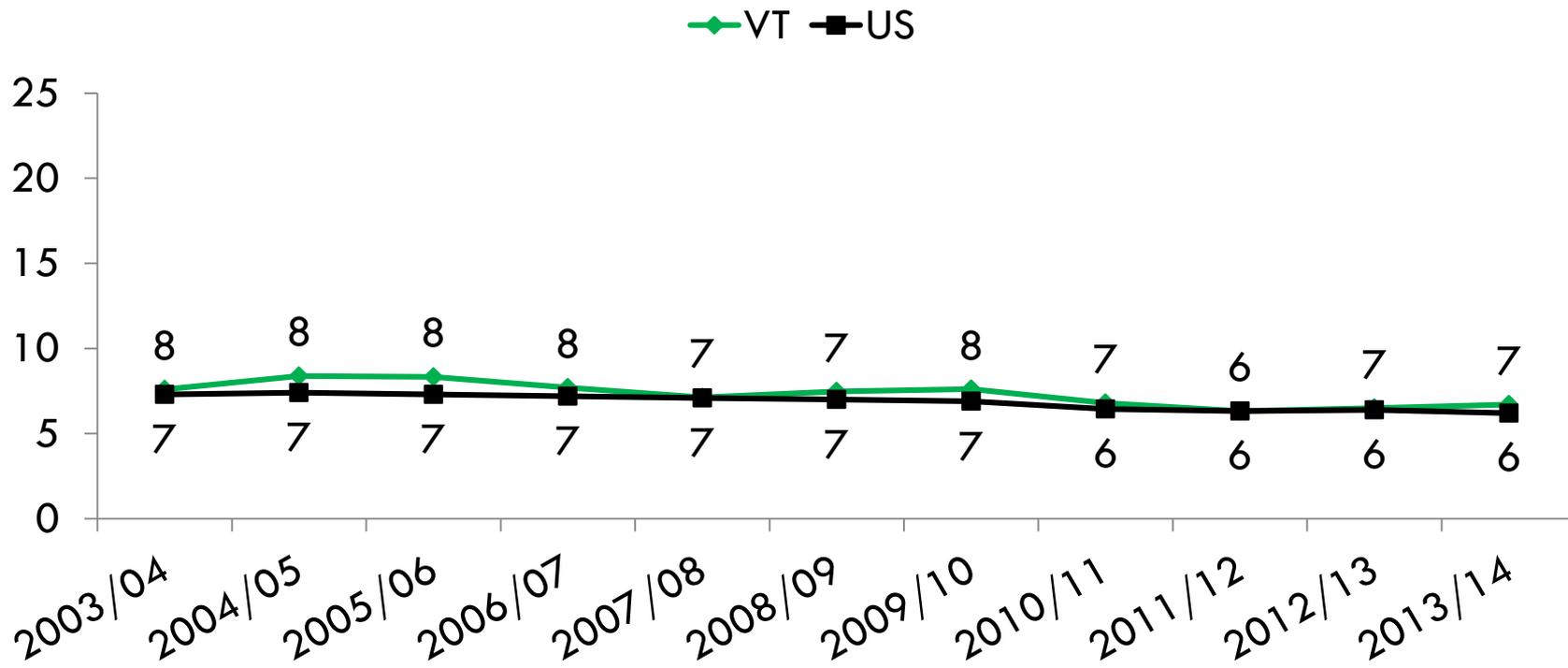
Needing but not receiving treatment

- People ages 12+ in Vermont have a similar prevalence of needing but not receiving treatment for alcohol problems in the past year compared to the U.S. average in 2013/2014.
- 18-25 year olds have a statistically significantly higher prevalence of needing but not receiving treatment for alcohol problems in the past year compared to those 12-17 years old and 26+ years old in Vermont in 2013/2014.
- People ages 12+ have a similar prevalence of needing but not receiving treatment for illicit drug use in the past year compared to the US average in 2013/2014.

NOTE: Illicit Drugs include marijuana/hashish, cocaine (including crack), heroin, hallucinogens, inhalants, or prescription-type psychotherapeutics used non-medically, including data from original methamphetamine questions but not including new methamphetamine items added in 2005 and 2006. Dependence or abuse is based on definitions found in the 4th edition of the Diagnostic and Statistical Manual of Mental Disorders (DSM-IV).

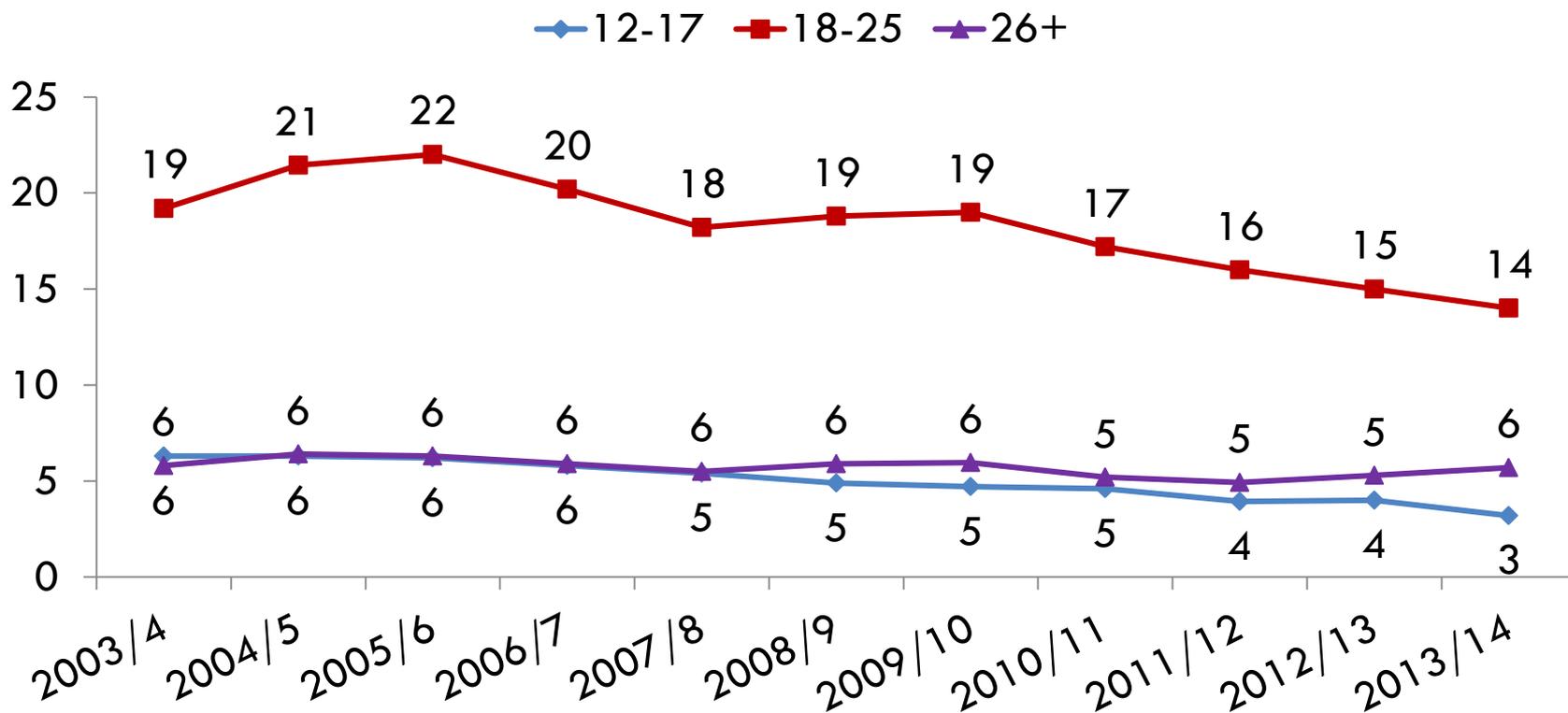
People ages 12+ in Vermont have a similar prevalence of needing but not receiving treatment for alcohol problems in the past year compared to the U.S. average.

Percent of population who needed but did not receive treatment for alcohol problems in the past year (ages 12+), Vermont compared to the U.S.



18-25 year olds have a statistically significantly higher prevalence of needing but not receiving treatment for alcohol problems in the past year compared to those 12-17 years old and 26+ years old in Vermont.

Percent of Vermont population who needed but did not receive treatment for alcohol problems in the past year by age in years.

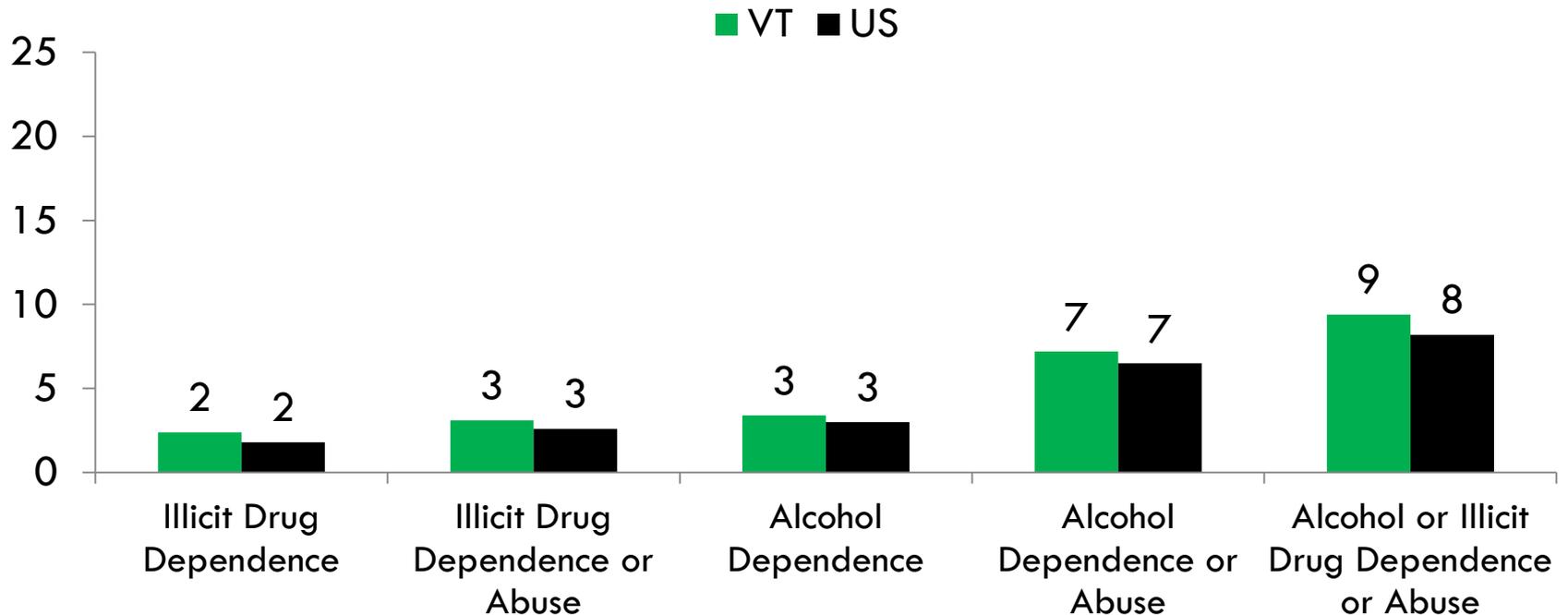


Substance Abuse/Dependence

- People ages 12+ in Vermont have a similar prevalence of substance dependence or abuse (based on DSM-IV criteria) compared to the U.S. average in 2013/2014.

The Vermont population had a statistically similar prevalence of substance dependence or abuse compared to the U.S. average in 2013/2014.

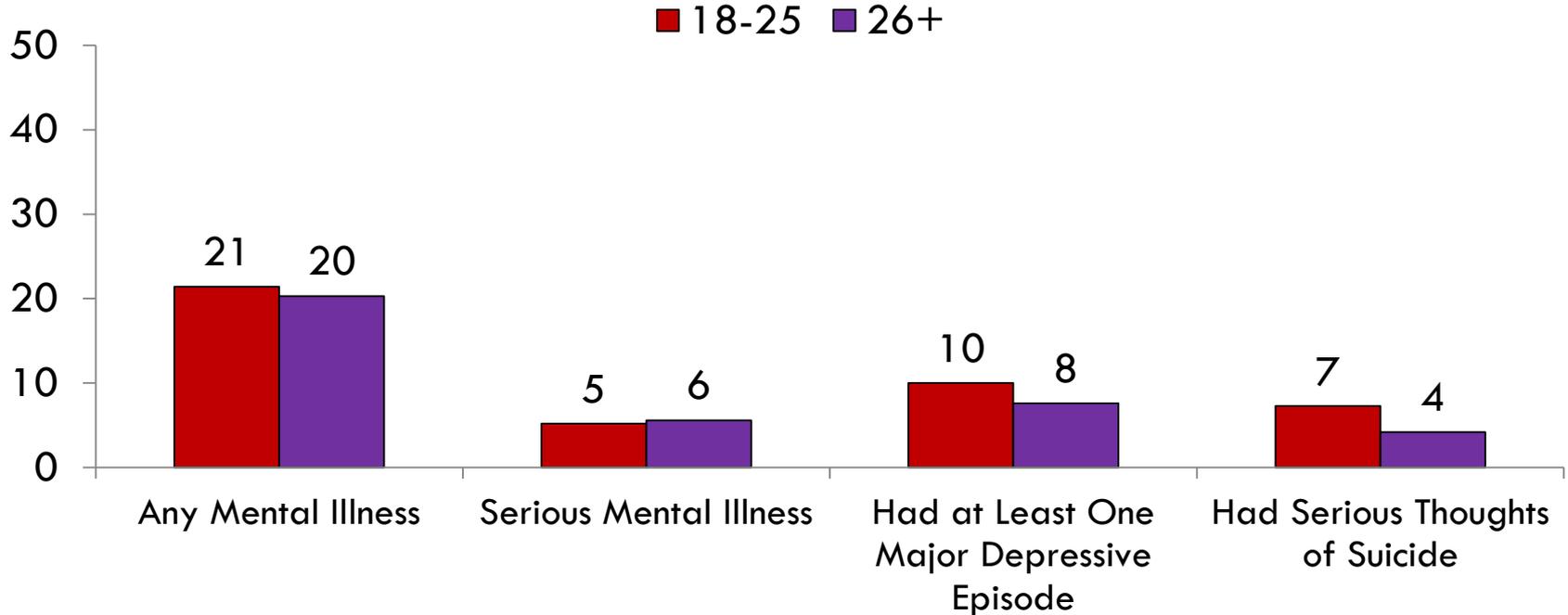
Percent of population who meet DSM-IV criteria for dependence or abuse (ages 12+) in the past year, by substance, Vermont compared to the U.S. 2013/2014



NOTE: Illicit Drugs include marijuana/hashish, cocaine (including crack), heroin, hallucinogens, inhalants, or prescription-type psychotherapeutics used non-medically, including data from original methamphetamine questions but not including new methamphetamine items added in 2005 and 2006. Dependence or abuse is based on definitions found in the 4th edition of the Diagnostic and Statistical Manual of Mental Disorders (DSM-IV).

The prevalence of mental health problems among Vermont adults varies by age group, with one in five 18-25 year olds reporting a mental illness in 2013/2014.

Percent of Vermont population reporting past year mental health problems by age group, 2013/2014
(note, categories not mutually exclusive)



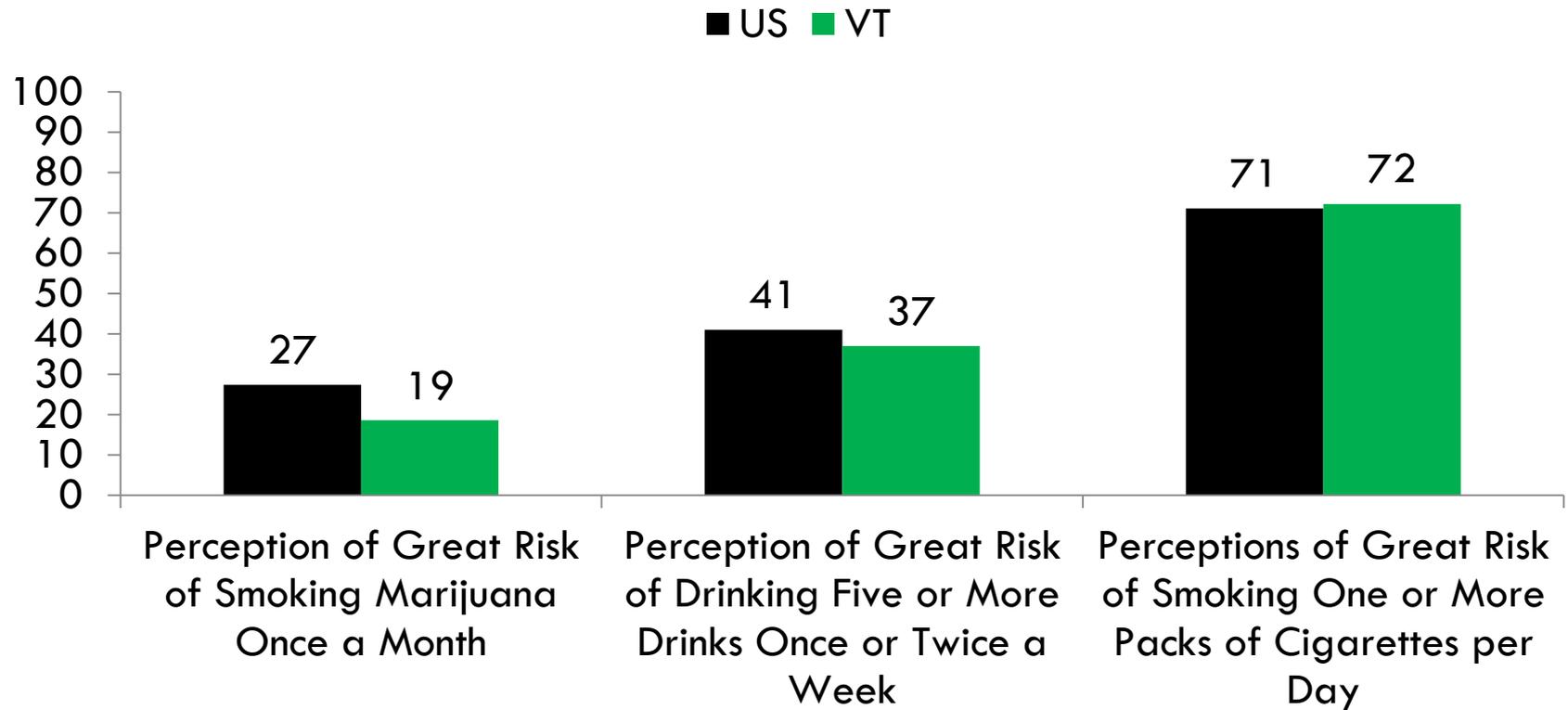
NOTE: Mental health problems were defined as people having a diagnosable mental, behavioral, or emotional disorder, other than a developmental or substance use disorder, that met the criteria found in the 4th edition of the Diagnostic and Statistical Manual of Mental Disorders (DSM-IV).

Perception of risk

- Vermont has a statistically lower perception of great risk of smoking marijuana once a month among those age 12+, 12-17, 18-25, 18+ and 26+ compared to the U.S. in 2013/2014.
- Vermont has a statistically lower perception of great risk of binge drinking among those age 12+, 12-17, 18-25, and 18+ compared to the U.S. in 2013/2014.
- Vermont has a statistically similar perception of great risk of smoking one or more packs of cigarettes a day for all age groups compared to the U.S. in 2013/2014.

Perception of risk of smoking marijuana once a month and drinking heavily weekly is lower in Vermont than in the U.S. for people ages 12+.

Percent of Vermont population reporting that people are at great risk from substance use by substance, VT versus the U.S. 2013/2014



Perception of risk for substance use varies greatly by substance in Vermont.

Percent of Vermont population reporting that people are at great risk from substance use, by substance, 2013/2014

