

Vermont State Health Assessment Community Engagement Data



Specific Health Conditions

The data in this slide deck is about **specific health conditions**.

May 2024

Where does this data come from?

This data was collected as part of the 2024 [Vermont State Health Assessment](#).

We are grateful to the people of Vermont who participated in focus groups and interviews for the State Health Assessment. The following information comes from individuals who identify as members of and/or support one or more of the following communities:

- Indigenous people
- People of color
- People with disabilities
- People who are unhoused
- People who identify as LGBTQ+
- Older Vermonters

The information presented here are the expressed opinions of Vermonters based on their lived and professional experiences. They are not the opinions of the Vermont Department of Health, but rather the people who make up the communities for whom we work.

How can I use this data?

Please use this data freely! We hope that it is useful for our partners in your efforts to improve health and well-being.

You can use this data to:

- Elevate the voices of people with lived experience to provide context to quantitative data.
- Understand the factors that impact health and well-being.
- Identify solutions to address some of the most important health needs facing people in Vermont.
- Inform planning and decision-making for your organization or community.
- Identify opportunities for collaboration with other organizations or sectors.

Visit [How Healthy Are We? Data Resources | Vermont Department of Health](#) to access other Health Department data. Access local data, trends over time, visualizations and maps, equity and disparities information, topic-specific data and more.

Who does this data reflect?

Geographic representation of focus group participants

County	Focus group involvement	% of State population
Addison	7%	6%
Bennington	13%	6%
Caledonia	7%	5%
Chittenden	25%	26%
Grand Isle	<1%	1%
Lamoille	4%	4%
Missing	6%	
Orange	1%	5%
Orleans	6%	4%
Rutland	6%	9%
Washington	8%	9%
Essex	1%	1%
Franklin	6%	8%
Windham	4%	7%
Windsor	5%	9%

Community representation of focus group participants

Community	Focus group involvement
Older Vermonters	19%
Vermonters with a disability	19%
LGBTQ+ Vermonters	15%
Vermonters of color	14%
Missing data	11%
Unhoused Vermonters	10%
None of the above	8%
Indigenous Peoples	4%

Community representation of interviewees

Community	Key informants
No specific community	23%
Vermonters of color	18%
Older Vermonters	15%
Vermonters with a disability	14%
Unhoused Vermonters	13%
LGBTQ+ Vermonters	11%
Indigenous Peoples	5%

Specific Health Conditions: Key Drivers & Health Impacts

(slide 1 of 3)

Key drivers are important factors that contribute to a health need. These were identified by the community.

Key Drivers	Health Impacts
1. Limited access to fresh food exacerbates related health conditions: Many eat highly processed foods, with no access to expensive and nutritious fresh food. Many do not have the resources, support, and education to treat diabetes. Lack of specialists, unaffordable medications and medical equipment, and stigmatizing provider attitudes impede chronic disease management.	More difficult for individuals to access appropriate care, prevent and avoid complications. Faster disease progression. Poorer quality of life.
2. High rates of dementia: There are believed to be very high rates of Alzheimer's, Parkinson's, and other dementias in VT. Many with this diagnosis want to stay in their homes with no one to take care of them. Impossible to get appointments with neurologist for diagnosis and medication, and difficult to get appropriate care.	Behaviors that are increasingly hard to manage, family members have terrible struggles with care resulting in caregiver health concerns. Faster disease progression.
3. Respiratory issues: Asthma is associated with environmental factors, such as smoking, wood burning heating, housing conditions, and climate change issues like fires.	Less able to participate in social activities, experience high levels of stress, contributes to further poor health outcomes.

Specific Health Conditions: Key Drivers & Health Impacts

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Key Drivers	Health Impacts
<p>4. Living with chronic stress causes high cortisol levels. Sleep disruption causes stress and is caused by stress. Inability to fully recover when working long hours, having housing or food concerns, living with chronic pain.</p>	<p>Hypertension, mental health and substance use issues, decreased ability to care for any medical condition. "...when you're living in constant stress, and your brain is being occupied by making sure that there's food, by paying the rent, paying the bills, trying not to get evicted, that's a high cortisol environment. We know that has physical damaging effects on the body, so you're more likely to have hypertension...you're more likely to have diabetes, you're more likely to have a heart attack, you're more likely probably to be overweight, you're more likely to have depression."</p>
<p>5. Limited services for people with developmental delays: not enough resources and providers for neuropsychological testing.</p>	<p>"If you don't get access to certain therapy early on in autism, some of the skills that child could gain, it's more difficult for them to gain them. It marks them for their entire life. It's almost sometimes irreparable, the damage, that is caused by not having access at the right time specifically for this group."</p>
<p>6. Living with trauma. Many people come into medical environments living with or having histories of significant trauma, at times from medical systems. Living with gender-based violence, PTSD for veterans and some refugees, medical trauma due to discrimination and systemic policies and actions, living unhoused, exposure to drug violence.</p>	<p>Encounters with uninformed health practitioners leads to mistrust and avoidance of care. Trauma impacts all aspects of well-being. Many engage in self-medication.</p>

Specific Health Conditions: Key Drivers & Health Impacts

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Key Drivers	Health Impacts
<p>7. Difficult to find independence and success for youth with illnesses or disabilities transitioning to adulthood due to lack of housing, high costs of basic needs, housing, high costs of medications and health services.</p>	<p>Increased risk for mental health, suicidality, and substance use issues. “My parents have always found a way to pay, but I am terrified about how I am ever going to afford this when I graduate from college, get dropped from their insurance, and have to figure this out on my own. There has to be a way to make it more affordable to get/keep insurance, pay hospital bills and afford medication especially for young adults facing serious health issues.”</p>
<p>8. Dental concerns and no access to dentists. Expensive, can be very challenging to find a dentist, especially one that takes specific types of insurance. Many dentists do not accept Medicaid. “Dentures, oh my god, dentures, and like tooth extractions with anesthesia. I don't know who thinks it's okay to just let people be awake while their teeth get yanked out of their face. But there is only one health care provider in the state that takes Medicaid that will put you under anesthesia for extractions.”</p>	<p>Skip routine dental appointments. Travel far to get to a dentist. Living with dental pain, problems eating. Impact on overall health.</p>
<p>9. Wait times for services, often while dealing with active health problems.</p>	<p>“My liver is getting worse and worse weekly, and I've got a 2-month wait to even see []a specialist about what to do, biopsying it. And it's one of those, like, it's scary for me. I'm the sole provider for a family.”</p>

Specific Health Conditions: Summary of Key Drivers

“...not even acknowledging that long COVID is a thing and we have so many people that come to us because there's no other doors, no other places that are really acknowledging in the way that they should be.”

#	Key drivers (not in order of importance)
1	Limited access to fresh food exacerbates related health conditions.
2	High rates of dementia across the state.
3	Respiratory issues are common and difficult to get treatment for.
4	Living with chronic stress worsens other health challenges and overall quality of life.
5	Services available for people with developmental delays are very limited.
6	Living with trauma takes a profound toll on people and their supports.
7	Difficult to find independence and success for youth with illnesses or disabilities transitioning to adulthood.
8	Dental services are severely limited for many.
9	Wait times for specialists are long and worsen existing conditions.

Specific Health Conditions: Possible Solutions

These solutions were identified by participants of the focus groups and interviews.

Possible solutions

Cultivate a culture where people can take time away from work to take care of themselves.

Offer community programs about healthy lifestyles, including healthy eating and nutrition education.

Work with insurance companies to increase the reimbursement rates for community health and behavioral health providers to work with patients on lifestyle changes.

Offer universal education to people about the experiences of violence and gender- based violence, including best practices for meeting the needs of survivors.

Assess legislation and policies around zoning and building restrictions to work towards building sustainable and affordable local housing.

Update regulations and policies around who receives economic support for housing to fit current economic realities.

Increase the speed at which housing support is provided.

Structure housing support services and care depending on individual needs.

Update standards for landlords to require safe and quality housing environments for tenants at affordable prices and ensure renter protections are included.