



Vermont Young Adult Survey 2024

Franklin and Grand Isle Counties Rates for Survey Items Including Comparisons to Previous Years

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Acknowledgments

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Questions regarding the survey or any of the data tables and reports based on the survey data should be directed to Amy Livingston at 802-490-5071, or <u>alivingston@pire.org</u>.

Introduction

Background

The 2024 Vermont Young Adult Survey (YAS) was conducted from March 4 through May 27 by the Pacific Institute for Research and Evaluation (PIRE). Surveys using similar methods were conducted by PIRE in 2014, 2016, 2018, 2020, and 2022. This document describes the methods used to conduct the survey and provides an overview of the detailed summary tables that follow.

Methods

For each of the six survey years, Vermont residents ages 18 to 25 were recruited primarily through Instagram and Facebook ads to participate in an online survey. In 2024 ads were also placed on Snapchat for the first month of the recruitment period, but were discontinued due to low response. In addition to ads on Social Media platforms, the survey is also promoted by the Vermont Department of Health and community partners through their own social media channels, listservs, websites, and other media. The ads were designed to catch the attention of a broad range of young adults and highlighted the chance for randomly-drawn respondents to win \$100 gift cards, and one prize of a \$500 gift card. The number of usable surveys obtained (for the state) was 2867 in 2014, 3062 in 2016, 2365 in 2018, 2340 in 2020, 1538 in 2022, and 1308 in 2024.

Although Instagram and other social media platforms are widely used by the majority of young adults in the U.S.¹, the use of these platforms for recruiting survey respondents combined with the self-selection by respondents to participate yields a "convenience sample" rather than a truly representative sample of all young adults in Vermont. To enhance the representativeness of the samples, data were weighted by gender, age group, and county of residence to reflect the young adult population of Vermont. For 2014-2022, the data were weighted to the 2019 population totals, which were the most recent data available at the time of the 2022 report. For 2024, data were weighted to the 2023 population totals (most recent available) to better reflect the young adult population at the time this year's survey was administered. Weighted state estimates from surveys through 2022 have generally matched closely with those obtained from the National Survey on Drug Use and Health for the same years and age group, thus supporting the usefulness of the sample for reflecting statewide rates, patterns, and trends regarding substance use behaviors.

Overview of Summary Tables

Findings from the 2014-2024 surveys for Franklin and Grand Isle Counties have been summarized in the tables below. The tables also include 2024 results for the state. For 2024 items not included in previous years of the survey, the table cells for those items and years are shaded gray. Some items, or sets of items, are applicable only to respondents who provided a positive response to a previous question. These items are indented and apply only to the subset of respondents who answered affirmatively to the item directly preceding the indented items. To protect the anonymity of respondents, data is suppressed when less than 5 people answer a question in a particular way.

¹ https://www.pewresearch.org/internet/2024/01/31/americans-social-media-use/

The survey items reported in these tables are summarized as the weighted percent of respondents reporting a particular behavior or perception (i.e., the "prevalence² rate"). Using this approach required "cut-points" to be identified for items with multiple response options. For example, the prevalence rate for the perceived risk of harm from using substances was defined as the percent of respondents who perceived the risk of harm to be either <u>no risk</u> or <u>slight risk</u>. For some such items, additional prevalence rates were defined using different cut-points (e.g., <u>no risk</u> only). The response options used to define each of these prevalence rates are indicated in the tables.

The N shown for each column is the unweighted sample size for each year and may be lower for some measures due to missing responses or non-applicability.

A report of statewide findings and brief Summary of Key Findings from the survey is also available on the Vermont Department of Health website.

Statistically Significant Differences

Statistically significant differences for prevalence rates between years or between the county and the rest of the state are noted with yellow shading. The cell containing the rate for 2024 is shaded yellow if there is a difference at the p<.05 level from the 2022 rate for that county. The cell containing the state rate for 2024 is shaded yellow if there is a difference at the p<.05 level between the state rate (excluding the county of focus) and the 2024 rate for the county.

² Note that use of the term "prevalence rate" is subject to the limitations of the YAS convenience sample discussed above.

Franklin and Grand Isle Counties Rates for Survey Items from 2014-2024

Substance category and specific behavior:	2014 (N=162)	2016 (N=241)	2018 (N=213)	2020 (N=136)	2022 (N=84)	2024 (N=93)	Vermont 2024 (N=1308)
Alcohol use in past 30 days							
Any use	67.0	68.3	71.0	75.7	66.7	65.7	69.0
Any binge drinking ³	50.0	46.1	48.6	37.7	39.5	35.9	41.9
Any use (ages 18-20 only)	47.5	53.3	51.5	59.8	46.1	44.3	55.0
Cannabis use in past 30 days		1	-	1	-	-	
Any use	30.0	38.6	42.0	45.6	39.5	52.6	48.1
Used cannabis 20 or more days ⁴	56.5	56.6	50.6	55.5	46.2	45.4	43.6
Any use (ages 18-20 only)	33.1	43.1	33.7	48.0	47.7	54.9	39.3
Drove after using cannabis ⁵	15.6	18.7	15.3	16.1	15.8	12.2	10.8
Source of cannabis ⁵ (new question	n 2024. Iter	n was "sele	ct all that a	oply")			
Friend or family member gave to me						24.4	35.1
Someone else gave to me							11.4
Bought from friend or family member						14.9	19.0
Bought from store or dispensary						55.0	59.6
Bought from someone else							14.8
Grew my own						22.0	10.8
Took from friend or family member							0.1
Got some other way							3.7
Tobacco and nicotine delivery products	use in pas	t 30 days					
Used cigarettes			22.8	21.0	8.7	16.0	14.3

TABLE A. Substance Use Prevalence Rates

³ Asked if "yes" to past 30-day alcohol use. Binge drinking is defined as having 5 or more drinks (if male) or 4 or more drinks (if female) on a single occasion.

⁴ Asked if "yes" to past 30-day cannabis use.

⁵ Asked if "yes" to past-30-day cannabis use. Because this item was select all that apply, response options may sum to more than 100.

Substance category and specific behavior:	2014 (N=162)	2016 (N=241)	2018 (N=213)	2020 (N=136)	2022 (N=84)	2024 (N=93)	Vermont 2024 (N=1308)
Used chewing tobacco, snuff, dip, snus, nicotine pouches, or dissolvable tobacco products ⁶						12.1	9.1
Used electronic vapor products containing nicotine			20.0	20.0	20.5	38.4	27.3
Used electronic vapor products containing nicotine (ages 18-20 only)			30.5	31.3	26.2	35.5	24.5
Used any of the above products			41.8	37.1	28.1	46.8	36.7
Used flavored tobacco or nicotine product ⁷						84.2	80.6

Substance category and specific behavior:	2014 (N=162)	2016 (N=241)	2018 (N=213)	2020 (N=136)	2022 (N=84)	2024 (N=93)	Vermont 2024 (N=1308)	
Other drugs used in past year								
Misuse of any R _x drug	16.7	9.5	10.4	4.2	8.7		5.9	
Used hallucinogens			12.9	9.4		9.6	15.8	

 ⁶ Nicotine pouches and dissolvable tobacco products added to response option in 2022.
⁷ Asked if "yes" to past 30-day use of any tobacco or nicotine products.

TABLE B. Substance Use Risk Factor Prevalence Rates

Risk factor:	2014 (N=162)	2016 (N=241)	2018 (N=213)	2020 (N=136)	2022 (N=84)	2024 (N=93)	Vermont 2024 (N=1308)
Perceived ease of obtaining substances							
Very easy or somewhat easy for underage persons to buy alcohol in stores	17.7	29.1	32.7	25.1	35.2	28.1	31.1
Very easy or somewhat easy for underage persons to buy alcohol in bars and restaurants	17.8	19.7	26.1	15.0	13.8	26.3	24.3
Very or somewhat easy for underage persons to buy alcohol online to be delivered by mail ⁸						23.7	15.3
Very easy or somewhat easy for underage persons to get cannabis ⁹					72.8	71.7	72.2
<u>Very easy</u> for underage persons to get cannabis					43.7	47.4	45.5
Very easy or somewhat easy for underage persons to buy e-cigarettes or other electronic vapor products				45.0	46.5	58.3	55.7
Very easy or somewhat easy for persons the age of respondent to get cocaine					20.6	26.4	21.6
Very easy or somewhat easy for persons the age of respondent to get R_x pain relievers w/o prescription	52.2	54.0	51.1	23.5	26.5	26.3	18.3
Very easy or somewhat easy for persons the age of respondent to get stimulants w/o prescription					30.5	34.3	35.5
Very easy or somewhat easy for persons the age of respondent to get buprenorphine w/o prescription					20.4	17.5	10.7

Risk factor:	2014 (N=162)	2016 (N=241)	2018 (N=213)	2020 (N=136)	2022 (N=84)	2024 (N=93)	Vermont 2024 (N=1308)
Low perceived risk of harm from using su	bstances						
No risk or slight risk from having five or more drinks once or twice a week	28.5	25.6	24.9	22.0	32.1	23.2	23.6
No risk or slight risk from using cannabis regularly ¹⁰					72.9	52.0	62.6
No risk from using cannabis regularly					28.2	17.7	19.1
No risk or slight risk from using e- cigarettes or other EVPs containing nicotine regularly ¹¹					18.2	24.5	19.1

⁸ This item was added in 2024.

⁹ The wording of this item changed in 2022 (from "persons your age" to "underage persons" and from "marijuana" to cannabis") to better address legal retail sales of cannabis for adults age 21+ in VT starting in the fall of 2022. As a result, it cannot be compared to previous years.

¹⁰ The wording of this item changed in 2022 (from smoking "marijuana once or twice a week" to using "cannabis regularly"). As a result, it cannot be compared to previous years.

¹¹ The wording of this item changed in 2022 (from using "e-cigarettes or other electronic vaping devices containing nicotine once or twice a week" to using "regularly"). As a result, it cannot be compared to previous years.

No risk or slight risk from using R_x pain relievers that were not prescribed a few times a year	15.8	11.4	13.8	7.1	12.3	9.0	8.5
No risk or slight risk from using R_x stimulants that were not prescribed a few times a year					10.0	12.6	21.5
No risk or slight risk from using buprenorphine that was not prescribed a few times a year					6.7	7.3	7.4

TABLE C.Emotional distress reported in the past two weeks (data available for 2020, 2022, and
2024 only). Percent of respondents reporting various types of emotional distress...

Emotional distress indicators:	2020 (N=136)	2022 (N=84)	2024 (N=93)	Vermont 2024 (N=1308)
Little interest or pleasure in doing things	38.1	37.1	30.7	35.2
Felt down, depressed, or hopeless	44.7	41.8	37.6	41.5
Felt nervous, anxious, or on edge	53.3	50.9	57.7	58.0
Was not able to stop or control worrying	26.2	30.4	35.6	33.3
None of the above	33.6	37.5	31.6	31.0

Vermont Percent of respondents reporting having seen or heard information 2022 2024 2024 about the dangers of... (N=84) (N=93) (N = 1308)Fentanyl being mixed or added to the following drugs: (item was "select all that apply) Cocaine 57.3 65.1 70.9 Heroin 48.6 61.5 63.1 MDMA 32.1 43.1 42.9 40.8 54.8 Methamphetamine 51.1 Pills obtained from others (rather than a pharmacy) 30.5 54.5 56.0 Other 11.5 9.6 12.5 25.4 I have not heard of fentanyl being mixed with any of these drugs 13.1 12.0 4.9 I don't know what fentanyl is 10.3 Xylazine being mixed or added to the following drugs:¹² (item was "select all that apply) 10.0 Cocaine 13.6 Heroin 14.4 17.4 MDMA 8.0 ---Methamphetamine 12.6 6.7 Pills obtained from others (rather than a pharmacy) ___ 11.7 Other 1.1 ---I have not heard of xylazine being mixed with any of these drugs 22.0 16.5 I don't know what xylazine is 60.2 62.4

TABLE D. Awareness of Dangers of Fentanyl and Xylazine.

TABLE E. How changes in policies related to substance availability affect use

Policies and related changes in use (new questions in 2024)	2022 (N=84)	2024 (N=93)	Vermont 2024 (N=1308)				
Cannabis has been available to purchase in stores in Vermont since 2022. use?	How has this o	changed your	cannabis				
Not applicable - I do not use cannabis		40.1	42.6				
My cannabis use has not changed		30.2	36.6				
I started to use cannabis or increased my cannabis use		19.8	10.0				
I decreased my cannabis use or stopped using cannabis			5.1				
Don't know			3.4				
Other			2.4				
Restaurants and bars in Vermont can now sell alcohol "to-go". How has t	Restaurants and bars in Vermont can now sell alcohol "to-go". How has this changed your alcohol use?						
Not applicable - I do not use alcohol		33.6	28.0				
My alcohol use has not changed		59.6	61.2				

¹² This was a new question in 2024.

I started using alcohol or increased my alcohol use			2.0			
I decreased my alcohol use or stopped using alcohol			2.6			
Don't know			4.7			
Other			1.4			
If flavored tobacco products were no longer sold in Vermont, which of the following would you most likely do? ¹³						
Switch to non-flavored or tobacco-flavored versions of the products I use		25.8	18.5			
Switch to some other tobacco product (e.g., cigars, smokeless tobacco, snus, hookah)		18.4	12.9			
Make my own flavors			4.6			
Buy flavored tobacco products from another state or country		46.8	35.9			
Quit using tobacco products		14.0	16.6			
Other			3.4			
None of the above		24.5	39.1			

TABLE F. Stigma

Perception of stigma toward people who have been in treatment for substance use	2022 (N=84)	2024 (N=93)	Vermont 2024 (N=1308)
Agree or strongly agree that people who have been in treatment for substance use are negatively judged by others	85.4	90.1	78.5

TABLE G. Respondent Demographics

Characteristic:	2014 (N=162)	2016 (N=241)	2018 (N=213)	2020 (N=136)	2022 (N=84)	2024 (N=93)	Vermont 2024 (N=1308)
Age group							
18 to 20	34.6	34.6	34.6	34.6	34.6	35.0	42.5
21 to 25	65.4	65.4	65.4	65.4	65.4	65.0	57.5
Sex (as assigned at birth)							
Male	51.2	51.2	51.2	51.2	51.2	51.5	51.0
Female	48.8	48.8	48.8	48.8	48.8	48.5	49.0
Sexual Orientation and Gender Identity							
Heterosexual/Cisgender		86.7	81.7	77.5	68.6	72.5	63.5
Lesbian, Gay, Bisexual, Transgender, and Questioning (LGBTQ)		13.3	18.3	22.5	31.4	27.5	36.5
Student status							
Not a student	65.2	63.6	64.4	59.0	56.2	64.6	54.4
Yes, in college or vocational school, full- time	17.9	18.1	19.9	32.6	21.6	17.9	29.4
Yes, in college or vocational school, part- time	7.7	10.1	3.8	3.6	7.4	8.8	7.0

¹³This question was only asked of those who indicated that they had used a flavored tobacco or nicotine product in the past 30 days.

Characteristic:	2014 (N=162)	2016 (N=241)	2018 (N=213)	2020 (N=136)	2022 (N=84)	2024 (N=93)	Vermont 2024 (N=1308)	
Yes, in high school or a GED program	7.0	7.9	9.4	4.3	14.0	6.1	6.9	
Yes, in some other type of school			2.5				2.3	
Race/Ethnicity	Race/Ethnicity							
White, non-Hispanic		93.5	92.6	89.6	80.9	85.3	84.6	
Black, Indigenous, and people of color (BIPOC)		6.5	7.4	10.4	19.1	14.7	15.4	

Characteristic:	2014 (N=162)	2016 (N=241)	2018 (N=213)	2020 (N=136)	2022 (N=84)	2024 (N=93)	Vermont 2024 (N=1308)
Employment status							
Employed for wages (full-time)	52.4	53.0	48.4	39.5	47.3	57.7	48.5
Employed for wages (part-time)	21.5	23.7	28.0	24.3	30.3	16.8	30.3
Self-employed	2.1	5.9	3.8			12.3	4.4
Not employed and looking for work	17.0	13.6	13.5	26.6	12.4	9.6	9.8
Not employed and not looking for work	6.9	3.8	6.4	8.2	9.0		6.9
Socioeconomic status – How would you describe your overall personal financial situation? ¹⁴							
Live comfortably					22.4	13.6	23.9
Meet needs with a little left					28.2	30.2	32.9
Just meet basic expenses					37.7	39.3	32.4
Don't meet basic expenses					11.7	16.9	10.9

¹⁴ This was a new item in 2022.