

# Racial and Ethnic Minority Health – Data Brief

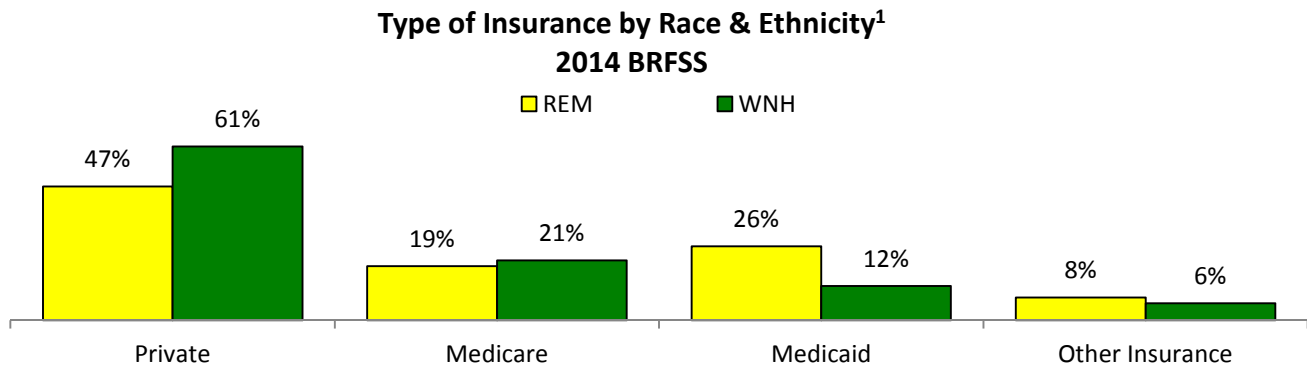
## 2013-2014 Vermont Behavioral Risk Factor Survey

### Background

Vermont’s 2013-2014 Behavioral Risk Factor Surveillance System survey allows us to look at health disparities by race, among Vermont adults. Racial and ethnic minorities are defined as those who report being American Indian, Asian, African-American, Hawaiian/Pacific Islander, Hispanic, or multiple races.

### Healthcare Access

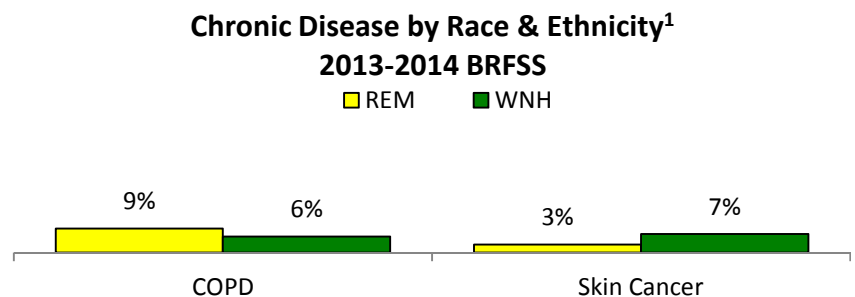
In Vermont, more than one in ten (13%) adult racial and ethnic minorities said they did not see a doctor in the last year because of cost, significantly higher than the nine percent among white, non-Hispanic adults. Racial and ethnic minorities are also twice as likely to not have a personal doctor, when compared with white, non-Hispanic adults (24% vs. 13%). Adults of a racial or ethnic minority are also significantly more likely to report being without health insurance (14% vs. 8%). Of those with a health plan, racial and ethnic minorities are significantly less likely to be covered by a private insurer and more likely to be covered by Medicaid.



Type of insurance provider is likely at least partially influenced by differences in annual household income level by race and ethnicity. Vermont adults who are a racial or ethnic minority are more than one and a half times as likely as a non-Hispanic white adult to live in a home making less than \$25,000 per year (37% vs. 24%). Correspondingly, racial and ethnic minorities are significantly less likely than white, non-Hispanic adults to report living in a home with an income of at least \$75,000 annually (20% vs. 30%).

### Chronic Disease

There are no significant differences in most chronic diseases by race; the exceptions are the prevalence of chronic obstructive pulmonary disease (COPD) and skin cancer. As compared with white, non-Hispanic adults, Vermont racial and ethnic minorities are significantly more likely to report having COPD (9% vs. 6%) and less likely to report skin cancer (3% vs. 7%).

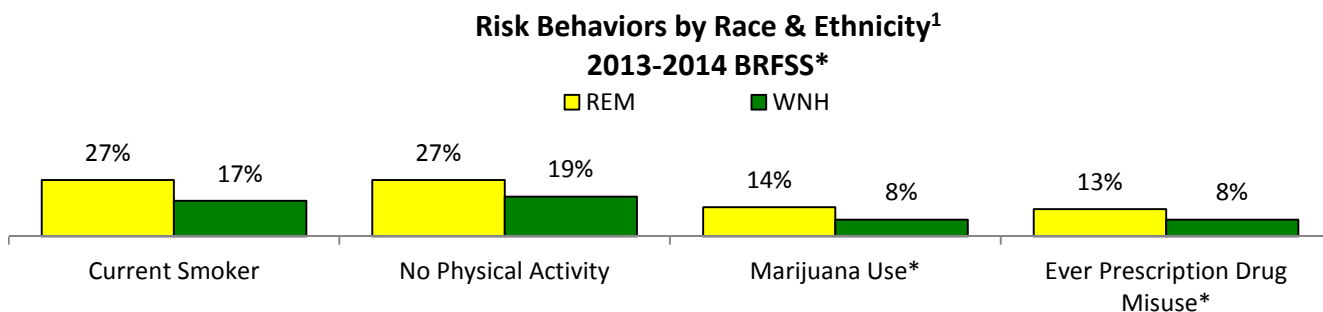


<sup>1</sup> In figure legends, ‘REM’ is used to indicate racial and ethnic minorities, while ‘WNH’ is used for white, non-Hispanic.

## Risk Behaviors

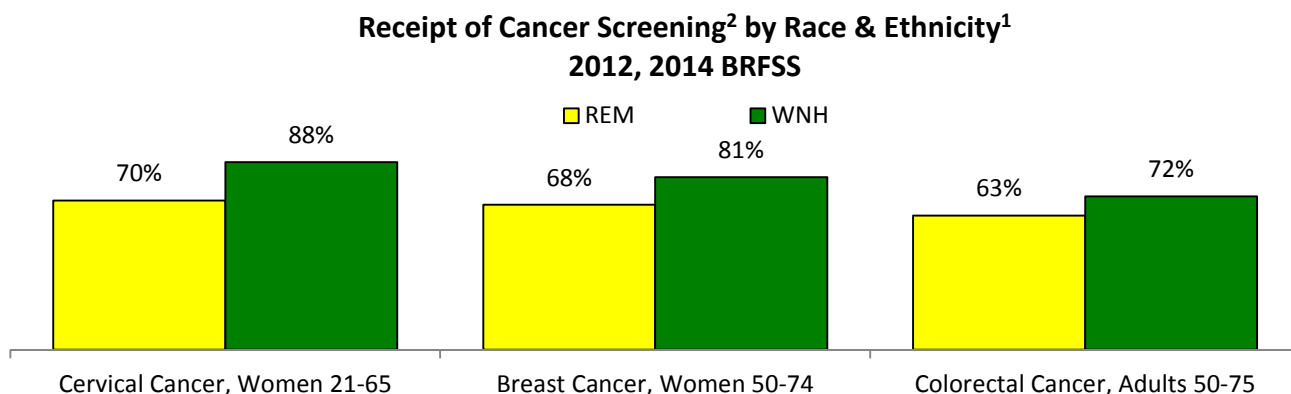
Current smoking, no leisure time physical activity, recent use of marijuana, and ever misusing prescription drugs are all significantly more likely to be reported among racial and ethnic minorities than non-Hispanic whites. More than a quarter of Vermont racial and ethnic minority adults smoke or do not participate in any leisure time physical activity, significantly higher than the less than 20% among white, non-Hispanic adults. Fourteen percent of racial and ethnic minorities recently used marijuana and 13% have ever misused a prescription drug, compared with 8% each among white, non-Hispanic adults.

There are no significant differences in binge drinking (18% each) and heavy drinking (8% each) by race.



## Cancer Screening<sup>2</sup>

Vermont adults who are a racial or ethnic minority are significantly less likely than white, non-Hispanic adults to receive recommended cancer screenings, including cervical cancer, breast cancer, and colorectal cancer.



## Demographics

Racial and ethnic minorities also tend to be younger than white, non-Hispanics. In 2013-2014, six in ten (59%) adult racial and ethnic minorities were ages 18 to 44, compared with 41% of non-Hispanics whites. Fifty-eight percent of racial and ethnic minority adults in Vermont are male, compared with about half (48%) of white, non-Hispanics, a statistically significant difference.

As compared with non-Hispanic whites, racial and ethnic minority adults are also significantly more likely to have less than high school education (15% vs. 8%) and less likely to have a college degree or higher (23% vs. 32%). Disability is reported among 28% of racial and ethnic minorities, similar to the 23% among white, non-Hispanic adults.

For more information on the BRFSS contact Jessie Hammond, M.P.H. ([jessie.hammond@vermont.gov](mailto:jessie.hammond@vermont.gov)).

<sup>2</sup> Information about cancer screening recommendations can be found on the Vermont Department of Health website: [http://healthvermont.gov/prevent/cancer/documents/CancerScreening\\_Public.pdf](http://healthvermont.gov/prevent/cancer/documents/CancerScreening_Public.pdf)