

# Vermont Diabetes Profile

Lamoille County | December 2025

Diabetes is a chronic condition which, like many chronic conditions, is linked to lifestyle, environment, access to equitable care, and genetic factors. Lifestyle, often driven by social determinants of health, such as poor diet, access to healthy and affordable food, physical inactivity, and tobacco use, can increase the risk of developing diabetes and experiencing poor health outcomes. This document presents data on diabetes among people who live in **Lamoille County**.

If you need help accessing or understanding this information, contact

[ahs.vdhdpdiabetesteam@vermont.gov](mailto:ahs.vdhdpdiabetesteam@vermont.gov).

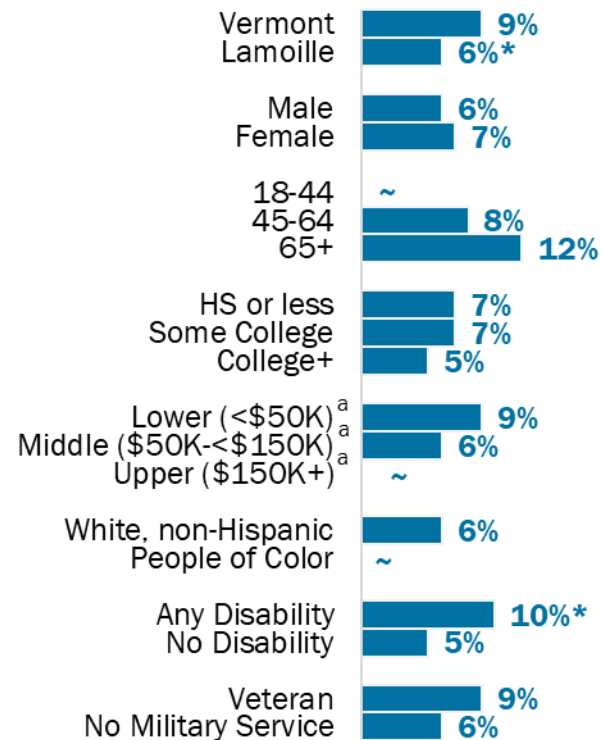
## Key Points

- **Six percent of residents in Lamoille County have diabetes.**
- **Individuals with diabetes in Lamoille County are significantly more likely to have co-occurring chronic conditions compared to those without diabetes.**

## Demographics

- Six percent of Lamoille County residents have diabetes, which is significantly lower than the statewide prevalence.
- There are no significant differences in the percentage of diabetes by sex, age, level of education, income, race and ethnicity, and veteran status, among residents of Lamoille County.
- Residents of Lamoille who have a disability are twice as likely to have diabetes, compared to residents without diabetes.

### Demographic Prevalence of Diabetes among People who Live in Lamoille County



**HealthVermont.gov**  
802-863-7200

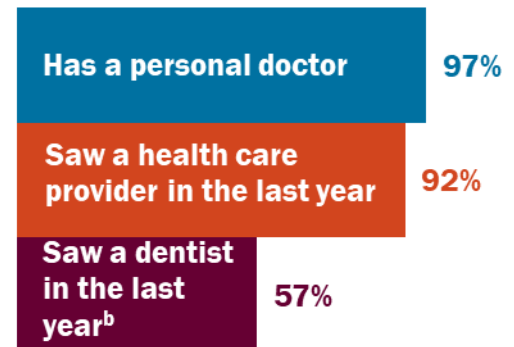
 **VERMONT**  
DEPARTMENT OF HEALTH

## Social Drivers

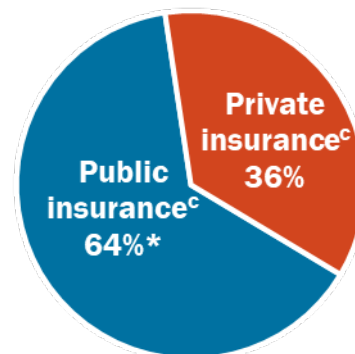
### Health Care Access

- The vast majority, 97%, of Lamoille County residents with diabetes report having a personal doctor.
- The vast majority, 92%, of Lamoille County residents with diabetes saw a health care provider in the last year and approximately two-thirds (57%) saw a dentist in the last year.
- Nearly two in three (64%) residents of Lamoille County with diabetes have public health insurance, compared to 36% who have private insurance. This is a statistically significant difference.

### Health Care Access among Adults in Lamoille County with Diabetes

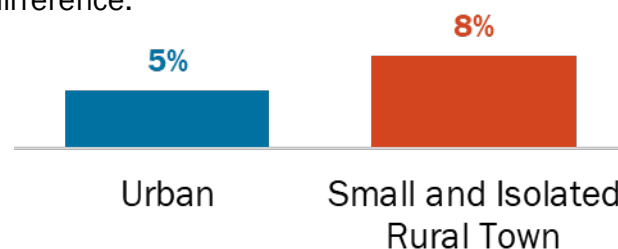


### Type of Health Insurance among Adults in Lamoille County with Diabetes



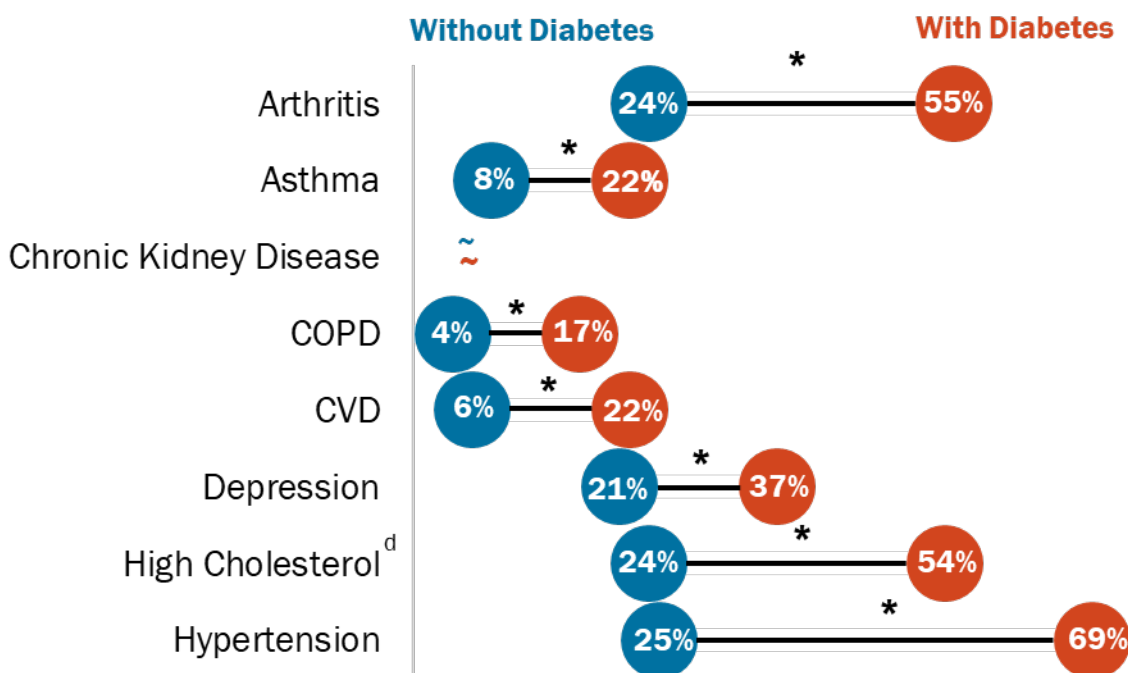
### Geographic Setting

Geographic settings can influence health outcomes. For this report, geographic setting was measured using Rural-Urban Commuting Area (RUCA) codes.<sup>1</sup> The prevalence of diabetes among those living in urban areas in Lamoille County is 5%. The prevalence of diabetes is 8% among those living in small and isolated rural towns in Lamoille County. This is not a statistically significant difference.



## Co-Occurring Conditions

Lamoille County adults **with diabetes** are more likely to have a co-occurring chronic disease than those **without diabetes**.



## References

1. U.S. Department of Agriculture, Economic Research Service. Rural-Urban Commuting Area Codes. July 2025. Accessed November 13, 2025. [www.ers.usda.gov/data-products/rural-urban-commuting-area-codes/documentation](http://www.ers.usda.gov/data-products/rural-urban-commuting-area-codes/documentation).

## Notes

Values in this data brief may be compared to statewide values found in the [2025 Vermont Diabetes Data Pages](#). Use caution when comparing values that use different data years.

This document is intended to support Diabetes Self-Management Education and Support (DSMES) accreditation/recognition applications with the American Diabetes Care & Education Specialists (ADCES)/American Diabetes Association (ADA). For more information visit [Diabetes Self-Management webpage](#) and see **Standard 2 (Step 2)** for a description of how to use this document to support your organization's application.

## Notations

\*Denotes statistical significance.

\*\*Denotes statistical significance from other similarly marked group within demographic category.

~Data suppressed due to insufficient sample size or low statistical reliability.

Data source: VT Behavioral Risk Factor Surveillance System data years 2020-2023 unless noted otherwise as follows: <sup>a</sup>2021-2023, <sup>b</sup>2016, 2018, 2020, 2022, <sup>c</sup>2018, 2021-2023, <sup>d</sup>2017, 2019, 2021, 2023.