2025 Vermont Youth Risk Behavior Survey

St Johnsbury School District Results

The Vermont Department of Health would like to acknowledge the work and effort of all the schools, teachers and students who participate in the Youth Risk Behavior Survey each year.

We would especially like to thank the students and schools in St Johnsbury School District who participated in the 2025 YRBS.

Participating Middle Schools

ST JOHNSBURY SCHOOLS

Copies of the questionnaires, state-wide reports, data briefs, and additional sub-state reports are available online. Visit the Vermont Department of Health YRBS website at: https://www.HealthVermont.gov/yrbs.

The Vermont Department of Health recognizes that many social, economic and environmental inequities made worse by structural oppression, marginalization and racism influence the data we collect and report. We are continuously working to better collect and share data that reflect the lived experiences of all Vermonters.

If you have questions or concerns or need help accessing or understanding this information, contact: AHS.VDHYRBS@vermont.gov

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About the YRBS

The Youth Risk Behavior Survey (YRBS) is part of a national school-based survey that monitors the health-risk behaviors that contribute to the leading causes of death and disability among youth and young adults and high-priority health topics. These include:

- Behaviors that lead to injuries and violence
- Alcohol, Marijuana, and other drug use
- Tobacco use
- Unhealthy dietary behaviors
- Inadequate physical activity
- Sexual health
- Social determinants of health
- Youth assets

YRBS in Vermont

The Vermont Department of Health has conducted the YRBS in Vermont schools since 1993. We collaborate with the Agency of Education to administer the YRBS every two years during the spring semester at all public schools and select independent schools. Schools ending in 6th grade are not eligible to participate.

Methodology and Accuracy

The YRBS is designed to protect students' privacy. It's confidential, anonymous, and optional for students. When reporting data, we follow suppression rules to provide additional privacy. Data is suppressed when less than 50 students respond to a question or less than 5 students answer a question in a particular way.

Completion of the survey depends on a student's ability to read, understand, and complete the questionnaire on their own or with computer-assisted technology (e.g., screen readers). Students with very limited reading skills or significant intellectual or learning disabilities may not be fully represented in this data.

Additional information about the methodology has been described by the CDC and can be found online.at: https://www.cdc.gov/yrbs/index.html

How Accurate are the Results

Research shows that self-reported survey data from adolescents is as credible as self-reported data from adults. The anonymous survey design and survey environment encourage students to be honest and open.

Consistency checks, weights, and other internal checks are used to ensure the data is accurate and representative. For more information on survey reliability including "Do students tell the truth" is available on the Vermont Department of Health YRBS webpage at: https://www.HealthVermont.gov/yrbs

Understanding and Interpreting the Results

Statistical Differences

Throughout this report, statistically significant differences are noted. Statistical significance is calculated by comparing the 95% confidence intervals of two or more values. If the confidence intervals overlap, the percentages are not different. In other words, the two groups are not statistically different from one another. If the confidence intervals do not overlap, there is a statistical difference between the two groups.

A 95% confidence interval is a range of values and can vary due to the size of a particular population or how consistently students responded to an item. Sometimes, when comparing the responses of two or more groups, the overall percent may look very different, but the two numbers are not statistically different. Other times, the two values may be very close but differ statistically.

While this report notes statistical differences, we encourage you to consider meaningful differences: does the disparity merit a targeted intervention, show a real change in health, or otherwise mean something important to the community (statistics aside).

In this report, comparisons are made with the overall statewide rate. Statistical differences are noted in each table.

Data Suppression

For some questions, not enough students respond to be able to report an estimate. In those instances, a dot (.) indicating “too few students” is noted in the table. Reportable estimates include a numerator of at least 5 students and denominator of 50 or more students.

Using the YRBS

Engaging students, schools, and communities

The YRBS can detect changes in risk behaviors over time and identify differences among ages, grades, and genders. With these data, school and community organizations can focus prevention efforts and determine whether school policies and community programs are having the intended effect on student behaviors.

Think of the YRBS as a tool for starting discussions, for educating the community, for planning and evaluating programs, and for comparing Vermont students with other students nationwide.

Start the Conversation: Use the YRBS to begin a conversation with teens about the personal choices they make or about the health of their community. Ask them if the Results accurately reflect what they see happening around them. How do they explain the Results? From their perspective, what is or is not working? How would they promote healthy behaviors?

Increase Awareness: The YRBS provides an opportunity to break through "denial" and make community members aware of the risks that their young people face. It can also dispel myths and correct misinformation about the "average teenager." The YRBS can accentuate the positive and celebrate the fact that many students are abstaining from behaviors that endanger their health and their ability to succeed.

Plan and Evaluate Programs: The YRBS can serve as the basis of a community needs assessment. It can help identify strengths and weaknesses in communities and can inform strategies to address those weaknesses.

Remember to Look at the Positive Side: In most cases, the majority of adolescents are NOT engaging in risky behaviors. Although most of the charts examine the prevalence of risk behaviors, please do not forget about the percentage of adolescents who are NOT engaging in these behaviors.

Participate in Getting to Y: Getting to Y provides an opportunity for students to take a lead in bringing meaning to their own Youth Risk Behavior Survey data and taking steps to strengthen their school and community based on their findings. Schools and districts across the state form teams to analyze local level data, identify areas of strength and concern, and create a preliminary action plan. Through the Getting to Y program, students attend a training day where they learn tools and strategies to examine data, explore root causes, and create next action steps. In addition, teams plan and host a community dialogue event to share their executive summary with the school and community.

For more information on upcoming Getting to Y trainings, newsletters, and resources visit Getting to Y at: http://www.upforlearning.org/initiatives/getting-to-y

2025 Vermont Youth Risk Behavior Survey Report

Middle School Results

Demographics

St Johnsbury School District	N
Overall	162

Sex	N	%
Male	87	53
Female	75	47

Grade	N	%
6th grade	38	24
7th grade	61	36
8th grade	63	40

Race / Ethnicity	N	%
BIPOC	34	13
White non-Hispanic	125	87

Sexual Orientation & Gender Identity	N	%
LGBTQ+	31	21
Heterosexual Cisgender	118	79

Note: Students are not required to answer questions on the YRBS. Therefore, totals by specific demographics may not equal the overall total.
N = Unweighted number of students; % = Weighted percent

Unintentional Injuries and Prevention

	Vermont %	SU %	Differences
Had a concussion from playing a sport or being physically active, past year	18	17	
Rarely or never wore a bicycle helmet, among students who rode a bicycle	23	29	SU > VT
Rarely or never wore a helmet when rollerblading or skateboarding, among students who rollerblade or skateboard	23	39	SU > VT

	Vermont %	SU %	Differences
Were asked by a doctor, dentist, or nurse if they used a tobacco product, past year, among students who saw a medical provider	28	30	
Had 1+ sunburns, past year	62	51	VT > SU

	Vermont %	SU %	Differences
Have ever ridden in a car driven by someone who had been using marijuana	12	16	SU > VT
Did not always wear a seat belt	22	27	SU > VT
Ever rode with a driver who had been drinking alcohol	16	20	SU > VT

. = Too few students to report

Physical Violence, Bullying and School Safety

	Vermont %	SU %	Differences
Felt that they were ever treated badly or unfairly in school because of their race or ethnicity	24	18	VT > SU
Felt that they were ever treated badly or unfairly because they are or people think they are lesbian, gay, bisexual, transgender, or questioning	20	20	
Have ever been teased or called names because of their weight, size, or physical appearance	55	59	

	Vermont %	SU %	Differences
Were ever bullied on school property	46	52	SU > VT
Were ever electronically bullied	27	32	SU > VT
Were bullied, past 30 days	26	30	
Bullied someone, past 30 days	12	16	SU > VT
Were ever in a physical fight	39	41	

	Vermont %	SU %	Differences
Did not go to school because they felt unsafe at school or on their way to or from school, past 30 days	11	14	

. = Too few students to report

Family and Neighborhood Violence & Other Risk Factors

	Vermont %	SU %	Differences
Ever saw someone get physically attacked, beaten, stabbed, or shot in their neighborhood	15	19	SU > VT
Could obtain a loaded gun ready for them to fire without a parent or other adult's permission or supervision	37	28	VT > SU
Reported that an adult or person at least 5 years older than them ever made them do sexual things they did not want to do	4	6	

. = Too few students to report

Mental Health

	Vermont %	SU %	Differences
Reported that their mental health was most of the time or always not good	20	25	SU > VT
Felt sad or hopeless every day for 2 weeks or more in a row, past year	22	28	SU > VT

	Vermont %	SU %	Differences
Ever did something to purposely hurt themselves without wanting to die	19	24	SU > VT
Ever seriously thought about killing themselves	18	27	SU > VT
Ever made a plan about how they would kill themselves	13	21	SU > VT
Ever tried to kill themselves	7	15	SU > VT

	Vermont %	SU %	Differences
Most of the time or always got the kind of help they needed when feeling sad, empty, hopeless, angry, or anxious, among students who needed help	36	33	

	Vermont %	SU %	Differences
Would most likely talk to an adult in their school or an adult outside of school who is not a family member about their feelings, among students who felt sad/angry/anxious	6	.	Too Few

. = Too few students to report

Lifetime Substance Use

	Vermont %	SU %	Differences
Ever smoked a cigarette	6	7	
Ever drank alcohol	16	15	
Ever tried marijuana	6	9	SU > VT
Ever tried an electronic vapor product	10	17	SU > VT
Ever tried a flavored tobacco product	5	6	

	Vermont %	SU %	Differences
Ever took prescription pain medicine without a doctor's prescription or differently than how a doctor told them to use it	6	.	Too Few
Ever used inhalants	5	5	

	Vermont %	SU %	Differences
Smoked a cigarette before age 11 years	3	.	Too Few
Drank alcohol for the first time before age 11 years	7	9	
Tried marijuana for the first time before age 11 years	2	.	Too Few
First tried an electronic vapor product before age 11 years	3	.	Too Few
First tried a flavored tobacco product before age 11	2	.	Too Few

. = Too few students to report

Current Substance Use

	Vermont %	SU %	Differences
Currently smoked cigarettes or cigars or used smokeless tobacco	2	.	Too Few
Currently smoked cigarettes or cigars or used smokeless tobacco or electronic vapor products	5	6	

	Vermont %	SU %	Differences
Smoked a cigarette, past 30 days	1	.	Too Few
Used an electronic vapor product, past 30 days	5	6	
Smoked a cigar, past 30 days	1	.	Too Few

	Vermont %	SU %	Differences
Drank alcohol, past 30 days	4	.	Too Few
Used marijuana, past 30 days	3	5	SU > VT

	Vermont %	SU %	Differences
Used electronic vapor products mainly because they were curious about them	3	3	
Used electronic vapor products because they were feeling anxious, stressed, among current users	22	.	Too Few
Used electronic vapor products because friends/family used them, among current users	25	.	Too Few

. = Too few students to report

Perceptions Around Substance Use

	Vermont %	SU %	Differences
Say if they wanted to get electronic vapor products, it would be sort of easy or very easy for them to get some	18	17	
Say if they wanted to get alcohol, it would be sort of easy or very easy for them to get some	34	25	VT > SU
Say if they wanted to get marijuana, it would be sort of easy or very easy for them to get some	15	17	

	Vermont %	SU %	Differences
Think it is wrong or very wrong for someone their age to use electronic vapor products	92	97	SU > VT

	Vermont %	SU %	Differences
Responded that their parents or guardians feel it would be wrong or very wrong for the student to use electronic vapor products	95	99	SU > VT
Responded that their parents or guardians feel it would be wrong or very wrong for the student to drink alcohol	88	93	SU > VT
Responded that their parents or guardians feel it would be wrong or very wrong for the student to use marijuana	94	93	

. = Too few students to report

Perceptions Around Substance Use

	Vermont %	SU %	Differences
Think people greatly risk harming themselves if they use electronic vapor products regularly	52	57	
Think people greatly risk harming themselves if they have five or more drinks of alcohol once or twice each weekend	42	42	
Think people greatly risk harming themselves if they use marijuana regularly	48	43	VT > SU

. = Too few students to report

Sexual Health

	Vermont %	SU %	Differences
Ever had sexual intercourse	4	8	SU > VT
Used a condom during last sexual intercourse, among students who had sexual activity	44	.	Too Few

. = Too few students to report

Physical Activity

	Vermont %	SU %	Differences
Were physically active at least 60 minutes per day on 5 or more days, past week	58	43	VT > SU
Did not participate in at least 60 minutes of physical activity on at least 1 day, past week	11	10	
Were physically active at least 60 minutes per day on all 7 days, past week	34	23	VT > SU

	Vermont %	SU %	Differences
Walk or ride their bike to school five days per week	10	19	SU > VT

	Vermont %	SU %	Differences
Played on at least one sports team, past year	70	62	VT > SU

. = Too few students to report

Nutrition

	Vermont %	SU %	Differences
Did not eat breakfast, past week	11	12	
Ate breakfast on 5 or more days, past week	59	51	VT > SU
Ate breakfast on all 7 days, past week	42	35	VT > SU

. = Too few students to report

Social Determinants of Health

	Vermont %	SU %	Differences
Experienced unstable housing, past year	2	.	Too Few
Reported in their home people most of the time or always speak a language other than English	7	.	Too Few
Most of the time or always went hungry because there was not enough food in their home	2	3	

. = Too few students to report

Protective Factors

	Vermont %	SU %	Differences
Used social media several times a day or more	55	58	

	Vermont %	SU %	Differences
Ate dinner at home with at least one of their parents or other adult family member on four or more days, past week	88	84	VT > SU

	Vermont %	SU %	Differences
Strongly agree or agree that they feel close to people at their school	71	65	VT > SU
Reported there is at least one teacher or other adult in their school that they can talk to if they have a problem	71	71	
Strongly agree or agree that their school has clear rules and consequences for behavior	61	66	SU > VT

	Vermont %	SU %	Differences
Strongly agree or agree that in their community they feel like they matter to people	61	57	

. = Too few students to report