

2023 VERMONT YOUTH RISK BEHAVIOR SURVEY

High School Populations in Focus:

Subjective Social Status

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.

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>

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About the YRBS

The Youth Risk Behavior Survey (YRBS) is 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. These include:

- Behaviors that contribute to unintentional injuries
- Violence
- Alcohol and other drug use
- Tobacco use
- Unhealthy dietary behaviors
- Inadequate physical activity
- Sexual health behaviors related to pregnancy and STDs

The YRBS also measures other high priority health-related behaviors and protective factors. These include:

- Prevalence of obesity
- Attitudes and perceptions related to substance use
- Food and housing insecurity
- Youth assets
- Academic achievement

About the YRBS

In Vermont, the Department of Health works with the Agency of Education and the Centers for Disease Control and Prevention (CDC) to administer the YRBS. It is typically conducted every two years during the spring semester. The YRBS was first administered in 1993 among students in grades 8 through 12. Since 2011, Vermont has conducted two separate surveys: a high school survey of students in grades 9 through 12, and a middle school survey of students in grades 6 through 8.

The middle school and high school surveys differ. The middle school survey is shorter and focuses more on lifetime behaviors and includes questions on fighting, bullying, suicidality, substance use, attitudes and perceptions about substance use, sexual activity, nutrition, physical activity, youth assets, and other factors related to health equity. The high school survey includes questions on these topics as well as more in-depth questions on current behaviors such as driving behaviors and self-reported height and weight.

Copies of the Vermont high school and middle school surveys as well as previous surveys can be found online at: <https://www.HealthVermont.gov/yrbs>

Methodology

The YRBS is a biennial school-based survey. In Vermont, students in all public schools and select independent schools across the state are invited to participate in the YRBS. Historically, this has always taken place in the Spring semester. However, due to the COVID-19 pandemic and remote learning, the 2021 survey was delayed and administered during the fall of 2021.

Survey procedures were designed to protect the privacy of students. The YRBS is confidential, anonymous, and optional for students. All students are read a standard set of directions and asked to complete the self-administered survey. Completion of the survey depends on a student's ability to read and complete the questionnaire independently or with the use of computer assisted technology (e.g., screen readers). Thus, students with very limited reading skills or significant intellectual or learning disabilities, may not be adequately represented in this data. Students can decline participation at any time or skip any questions they do not wish to answer. In addition, to protect students' anonymity, data is suppressed when less than 50 students respond to a question or less than 5 students answer a question in a particular way.

In 2019, Vermont began administering a web-based version of the YRBS. Students complete the YRBS online using a unique, random login code to access the survey online. No survey logic or skip patterns are used to ensure that all students complete the survey in approximately the same time frame, regardless of how they answer a question.

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>

How Accurate are the Results?

Research indicates data of this nature may be gathered as credibly from adolescents as from adults. The anonymous survey design and survey environment encourages students to be honest and forthright.

Numerous precautions are taken to ensure the reliability and validity of the results. The CDC runs over 100 consistency checks on the data to exclude careless, invalid, or logically inconsistent answers. These internal reliability checks help identify the small percentage of students who falsify their answers.

The CDC also weights data, a mathematical procedure that makes data representative of the population from which it was drawn.

The results in this report are weighted by sex, grade, and race/ethnicity in order to compensate for absenteeism and incomplete surveys. The weighting allows the results to be fully representative of middle school students in grades 6 through 8 (middle school survey) and high school students grades 9 through 12 (high school survey). Weighting permits us to draw inferences about the school-based student population in Vermont.

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 with an asterisk (*).

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.

Populations in Focus

Adverse health outcomes and behaviors experienced by specific populations are not intrinsic to youth themselves and are often instead due to social, economic and environmental inequities. The Vermont Department of Health acknowledges that these inequities can have a greater impact than individual choices. To identify disparities and help tell the complex story of youth across Vermont, health-related factors and behaviors experienced by specific populations of youth are analyzed.

This report focuses on the specific health disparities based on Subjective Social Status (SSS). SSS can be used as an alternative to socioeconomic status (SES). It looks at an individual's personal perception of their social standing relative to others. Based on the MacArthur Scale of Subjective Social Status- Youth Version, students were shown a picture of a ladder and asked:

Imagine this ladder pictures how American society is set up. At the top of the ladder are people who are the best off—they have the most money, the highest amount of schooling, and the jobs that bring the most respect. At the bottom are people who are the worst off—they have the least money, little or no education, no job or jobs that no one wants or respects. Please tell us where you think your family would be on this ladder.

Select the number that best represents where your family would be on this ladder.

- A. 1 (best off)
- B. 2
- C. 3
- D. 4
- E. 5
- F. 6
- G. 7
- H. 8 (worst off)


In this report, responses were collapsed into three groups: ‘better off’ (top two rungs), ‘similar’ (middle four rungs), and ‘worse off’ (bottom two rungs).

2023 VERMONT YOUTH RISK BEHAVIOR SURVEY REPORT

HIGH SCHOOL RESULTS

Demographics

Overall	N
VT	15606

Subjective Social Status Ladder		N	%
	1 (best off)	659	4
	2	1603	10
	3	4019	26
	4	4479	30
	5	2796	19
	6	1096	8
	7	238	2
	8 (worst off)	149	1

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

Demographics

Subjective Social Status	N	%
Worse off	387	3
Similar	12390	83
Better off	2262	15

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	Worse Off	About the Same	Better Off
Had a concussion from playing a sport or being physically active, past year	18	22 *	17	22 *
Rarely or never wore a helmet when they rode a bicycle or skateboard or rollerbladed, among those who rode a bicycle or skateboard or rollerbladed, past year	42	62 *	40	35 *

	Vermont	Worse Off	About the Same	Better Off
Were asked by a doctor, dentist, or nurse if they smoked, among those who saw a provider in the past year	49	52	49	50

All numbers are percentages; * = Statistical difference compared to VT; . = Too few students to report

Unintentional Injuries and Prevention

	Vermont	Worse Off	About the Same	Better Off
Drove a car or other vehicle when they had been drinking alcohol, among students who drive, past 30 days	7	14 *	5 *	12 *
Texted or e-mailed while driving a car or other vehicle, among students who drive, past 30 days	38	43	36	47 *
Drove a car or other vehicle when they had been using marijuana, among students who drive, past 30 days	12	22 *	11 *	13

All numbers are percentages; * = Statistical difference compared to VT; . = Too few students to report

Unintentional Injuries and Prevention

	Vermont	Worse Off	About the Same	Better Off
Rode in a car or other vehicle driven by someone who had been using marijuana, past 30 days	22	37 *	20 *	19 *
Rode with a driver who had been drinking alcohol, past 30 days	19	26 *	17	20

All numbers are percentages; * = Statistical difference compared to VT; . = Too few students to report

Violence and Bullying

	Vermont	Worse Off	About the Same	Better Off
Carried a weapon on school property, past 30 days	5	11 *	4 *	6
Were threatened or injured with a weapon on school property, past year	9	17 *	7 *	9
Were in a physical fight, past year	16	26 *	15	16

	Vermont	Worse Off	About the Same	Better Off
Were electronically bullied, past year	18	29 *	17	16
Were bullied, past 30 days	21	33 *	19	17 *
Bullied someone else, past 30 days	13	21 *	11 *	15

All numbers are percentages; * = Statistical difference compared to VT; . = Too few students to report

Violence and Bullying

	Vermont	Worse Off	About the Same	Better Off
Did not go to school because they felt unsafe at school or on their way to or from school, past 30 days	10	20 *	8 *	9
Ever saw someone get physically attacked, beaten, stabbed, or shot in their neighborhood	17	34 *	15 *	14 *

All numbers are percentages; * = Statistical difference compared to VT; . = Too few students to report

Violence and Bullying

	Vermont	Worse Off	About the Same	Better Off
Experienced physical dating violence, among students who dated or went out with someone, past year	9	18 *	8 *	9
Report someone has ever done sexual things to them that they did not want	23	38 *	22	17 *
Reported someone they were dating or going out with did sexual things that they did not want, among students who dated or went out with someone, past year	14	22 *	14	10 *

All numbers are percentages; * = Statistical difference compared to VT; . = Too few students to report

Mental Health

	Vermont	Worse Off	About the Same	Better Off
Felt sad or hopeless, past year	29	48 *	29	19 *
Reported that their mental health was most of the time or always not good, past 30 days	34	52 *	34	22 *
Most of the time or always bothered by feeling nervous, anxious, or on edge, past year	36	54 *	36	24 *

	Vermont	Worse Off	About the Same	Better Off
Made a plan about how they would attempt suicide, past year	14	25 *	13	9 *
Attempted suicide, past year	7	15 *	6 *	6
Purposely hurt themselves without wanting to die, past year	23	36 *	22	16 *

All numbers are percentages; * = Statistical difference compared to VT; . = Too few students to report

Mental Health

	Vermont	Worse Off	About the Same	Better Off
Would most likely talk to a teacher, counselor or other 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, or anxious	7	10 *	7	7
Most of the time or always get the kind of help they need, among those who felt sad, angry, hopeless, or anxious	31	20 *	31	40 *

All numbers are percentages; * = Statistical difference compared to VT; . = Too few students to report

Lifetime Substance Use

	Vermont	Worse Off	About the Same	Better Off
Ever smoked a cigarette	18	29 *	17 *	19
Ever drank alcohol	49	56 *	48	52
Ever tried marijuana	35	47 *	34	33
Ever tried an electronic vapor product	32	44 *	31	29

All numbers are percentages; * = Statistical difference compared to VT; . = Too few students to report

Lifetime Substance Use

	Vermont	Worse Off	About the Same	Better Off
Smoked a cigarette before age 13 years	7	14 *	6 *	6
Had their first drink of alcohol before age 13 years	14	22 *	12 *	14
Tried marijuana for the first time before age 13 years	6	13 *	5 *	5
First tried an electronic vapor product before age 13	7	14 *	6 *	7

All numbers are percentages; * = Statistical difference compared to VT; . = Too few students to report

Lifetime Substance Use

	Vermont	Worse Off	About the Same	Better Off
Ever misused a prescription pain medicine	9	18 *	7 *	8
Ever used cocaine	3	7 *	2 *	5 *
Ever used inhalants	7	14 *	6 *	7
Ever used heroin	2	5 *	1 *	4 *
Ever used methamphetamines	2	5 *	1 *	4 *

All numbers are percentages; * = Statistical difference compared to VT; . = Too few students to report

Current Substance Use

	Vermont	Worse Off	About the Same	Better Off
Currently smoked cigarettes	6	12 *	4 *	8 *
Currently used an electronic vapor product	16	25 *	15	16
Currently used smokeless tobacco	3	6 *	2 *	6 *
Currently smoked cigars	4	8 *	3 *	6 *

	Vermont	Worse Off	About the Same	Better Off
Misused any prescription medication, past 30 days	5	12 *	4 *	6
Currently drank alcohol	27	30 *	26	32 *
Binge drank, past 30 days	13	17 *	12	18 *
Currently used marijuana	22	31 *	21	22

All numbers are percentages; * = Statistical difference compared to VT; . = Too few students to report

Current Substance Use

	Vermont	Worse Off	About the Same	Better Off
Primarily used EVP because they were curious about them, among students who used EVP, past 30 days	25	22	26	23
Primarily used EVP because friends or family used them, among students who used EVP, past 30 days	19	16	20	17
Usually got electronic vapor products by buying them themselves in a convenience store, supermarket, discount store, or gas station, among students who used EVP, past 30 days	4	4	3	7

All numbers are percentages; * = Statistical difference compared to VT; . = Too few students to report

Current Substance Use

	Vermont	Worse Off	About the Same	Better Off
Used an electronic vapor product to vape marijuana, among students who used marijuana, past 30 days	65	72 *	63	65

All numbers are percentages; * = Statistical difference compared to VT; . = Too few students to report

Other Substance Use Behaviors and Experiences

	Vermont	Worse Off	About the Same	Better Off
Attended school under the influence of alcohol or other illegal drugs, past year	12	22 *	11	10 *
Ever lived with a parent or guardian who was having a problem with alcohol or drug use	27	54 *	26	15 *

All numbers are percentages; * = Statistical difference compared to VT; . = Too few students to report

Perceptions Around Substance Use

	Vermont	Worse Off	About the Same	Better Off
Say if they wanted to get electronic vapor products, it would be sort of easy or very easy for them to get some	60	66 *	60	59
Say if they wanted to get alcohol, it would be sort of easy or very easy for them to get some	66	65	66	66
Say if they wanted to get marijuana, it would be sort of easy or very easy for them to get some	58	69 *	57	54 *

All numbers are percentages; * = Statistical difference compared to VT; . = Too few students to report

Perceptions Around Substance Use

	Vermont	Worse Off	About the Same	Better Off
Think it is wrong or very wrong for someone their age to use electronic vapor products	70	60 *	71	70
Think it is wrong or very wrong for someone their age to drink alcohol	53	52	53	49 *
Think it is wrong or very wrong for someone their age to use marijuana	55	43 *	55	58 *

All numbers are percentages; * = Statistical difference compared to VT; . = Too few students to report

Perceptions Around Substance Use

	Vermont	Worse Off	About the Same	Better Off
Responded that their parents or guardians feel it would be wrong or very wrong for them to use electronic vapor products	89	80 *	90 *	89
Responded that their parents or guardians feel it would be wrong or very wrong for them to drink alcohol	67	65	69	62 *
Responded that their parents or guardians feel it would be wrong or very wrong for them to use marijuana	75	60 *	76	77

All numbers are percentages; * = Statistical difference compared to VT; . = Too few students to report

Perceptions Around Substance Use

	Vermont	Worse Off	About the Same	Better Off
Think people greatly risk harming themselves, physically or in other ways, if they use electronic vapor product regularly	42	37 *	42	46 *
Think people greatly risk harming themselves, physically or in other ways, if they have five or more drinks of alcohol once or twice each weekend	35	34	35	36
Think people greatly risk harming themselves, physically or in other ways, if they use marijuana regularly	24	18 *	24	31 *

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Sexual Health

	Vermont	Worse Off	About the Same	Better Off
Were ever tested for human immunodeficiency virus (HIV)	8	12 *	7	9
Were tested for a sexually transmitted disease (STD), past year	8	11 *	7	10 *

	Vermont	Worse Off	About the Same	Better Off
Had sexual intercourse with four or more persons during their life	8	13 *	6 *	10 *

	Vermont	Worse Off	About the Same	Better Off
Were currently sexually active, past 3 month	28	35 *	26 *	32 *

All numbers are percentages; * = Statistical difference compared to VT; . = Too few students to report

Sexual Health

	Vermont	Worse Off	About the Same	Better Off
Drank alcohol or used drugs before last sexual intercourse, among students who were currently sexually active	20	29 *	18	20
Used a condom during last sexual intercourse, among students who were currently sexually active	49	41 *	49	51

All numbers are percentages; * = Statistical difference compared to VT; . = Too few students to report

Sexual Health

	Vermont	Worse Off	About the Same	Better Off
Did not use any method to prevent pregnancy during last sexual intercourse with an opposite-sex partner, among students who were currently sexually active	7	13 *	6	8
Used an IUD (such as Mirena or ParaGard) or implant (such as Implanon or Nexplanon) before last sexual intercourse with an opposite-sex partner, among students who were currently sexually active	18	18	18	17
Used birth control pills; an IUD or implant; or a shot, patch, or birth control ring before last sexual intercourse with an opposite-sex partner, among students who were currently sexually active	52	49	53	51

All numbers are percentages; * = Statistical difference compared to VT; . = Too few students to report

Weight

	Vermont	Worse Off	About the Same	Better Off
Are obese	14	23 *	13	9 *
Are overweight	14	16	14	12 *

	Vermont	Worse Off	About the Same	Better Off
Tried to lose weight or keep from gaining weight by going without eating for 24 hours or more, taking any diet pills, powders, or liquids, vomiting or taking laxatives, smoking cigarettes, or skipping meals	22	33 *	22	17 *
Described themselves as slightly or very overweight	29	43 *	29	19 *
Were trying to lose weight	39	49 *	39	32 *

All numbers are percentages; * = Statistical difference compared to VT; . = Too few students to report

Physical Activity

	Vermont	Worse Off	About the Same	Better Off
Were physically active at least 60 minutes per day on 5 or more days, past week	52	39 *	52	64 *

All numbers are percentages; * = Statistical difference compared to VT; . = Too few students to report

Nutrition

	Vermont	Worse Off	About the Same	Better Off
Did not eat breakfast, past week	14	23 *	13	12 *

	Vermont	Worse Off	About the Same	Better Off
Ate 5+ fruits/vegetables every day, past week	19	19	17 *	28 *

All numbers are percentages; * = Statistical difference compared to VT; . = Too few students to report

Social Determinants of Health

	Vermont	Worse Off	About the Same	Better Off
Most of the time or always went hungry because there was not enough food in their home, past 30 days	2	7 *	1 *	2
Experienced unstable housing, past 30 days	4	9 *	2 *	5 *
Think their family subjective social status is worse than other families	3	.	.	.

All numbers are percentages; * = Statistical difference compared to VT; . = Too few students to report

Social Determinants of Health

	Vermont	Worse Off	About the Same	Better Off
Have a disability or long-term health problem that keeps them from doing everyday activities	7	14 *	6	6
Currently receive Special Education services through an Individualized Education Plan (IEP) or 504 plan	18	25 *	17	17

All numbers are percentages; * = Statistical difference compared to VT; . = Too few students to report

Protective Factors

	Vermont	Worse Off	About the Same	Better Off
Ate dinner at home with at least one parent or other adult family member on four or more days during the previous week	72	52 *	73	82 *

All numbers are percentages; * = Statistical difference compared to VT; . = Too few students to report

Protective Factors

	Vermont	Worse Off	About the Same	Better Off
Reported there is at least one teacher or other adult in their school that they can talk to if they have a problem	69	60 *	70	70
Strongly agree or agree that their school has clear rules and consequences for behavior	48	39 *	48	57 *
During an average school week, spend 10 or more hours participating in afterschool activities	24	14 *	24	32 *
Report they are most likely to attend a 4-year college or university, a community college, or technical school after high school	69	56 *	71	76 *
Felt that they were ever treated badly or unfairly in school because of their race or ethnicity	21	32 *	20 *	20

All numbers are percentages; * = Statistical difference compared to VT; . = Too few students to report

Protective Factors

	Vermont	Worse Off	About the Same	Better Off
Used social media several times a day	80	77	81	79

	Vermont	Worse Off	About the Same	Better Off
Strongly agree or agree that in their community they feel like they matter to people	54	34 *	55	69 *

All numbers are percentages; * = Statistical difference compared to VT; . = Too few students to report