Worksite Wellness – Data Brief 2013 Vermont Behavioral Risk Factor Survey (BRFSS)

Background

With over 70% of Vermont adults currently employed¹, worksites are prime settings to reach a large segment of the Vermont population and influence family members and communities. Employers with worksite health promotion programs see on average: 27% reduction in sick leave absenteeism, 26% reduction in health costs, and 32% decrease in workers' compensation and disability claims. For every dollar invested in wellness, employers can expect to see an average savings of \$5.81².

In Vermont, according to 2013 Behavioral Risk Factor Surveillance System data, one in twenty adults employed outside the home (excludes self-employed adults) reported having poor physical health³ and seven percent reported poor mental health³. On average, employed adults reported that their health kept them from doing their usual activities, including work, one day per month.

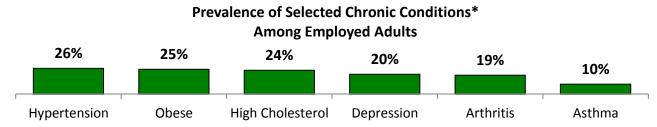
Chronic Conditions

Chronic conditions can impact one's participation in daily activities, such as work. Employed adults with chronic conditions are more likely than those without a chronic illness to be absent from and less productive at work. In 2013, more than half (53%) of Vermont adults employed outside their home had one or more chronic conditions, while about a quarter had at least two (23%).

Obesity and depression are among the most costly chronic conditions to employers^{2,4}. Obesity also increases a person's risk of developing other chronic conditions such as hypertension, high cholesterol, type 2 diabetes, osteoarthritis and some cancers⁵. In 2013, a quarter of employed adults were obese and an additional 36% were overweight, meaning that 61% of employed adults are either already obese or at risk for becoming so. One in five employed adults had a depressive disorder.

Hypertension (26%) and high cholesterol (24%) were also reported by about a quarter of employed adults. One in five had arthritis, and of those adults, a quarter said their arthritis affects whether they work, the type of work or the amount of work they do. One in ten employed Vermont adults had asthma. Among employed adults with asthma, 19% said their asthma was caused by a current or previous job and 34% said it is exacerbated by one.

Five percent or fewer said they had: a non-skin cancer (5%), skin cancer (4%), diabetes (4%), chronic obstructive pulmonary disease (3%), cardiovascular disease (4%), or chronic kidney disease (1%).



^{*}Hypertension and obesity data are age adjusted to the U.S. 2000 population. Obesity data are also limited to adults 20 and older.



¹ Vermont Department of Labor

² 2012 Society of Human Resource Management (SHRM) Conference, presentation by Mark Schmit, Vice President

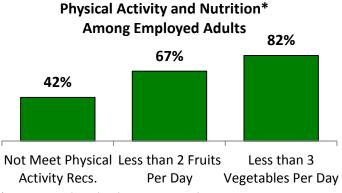
³ Defined as 14 or more poor physical health and 14 or more poor mental health days in the last month, respectively.

⁴ Pittman, D. (2012, November 6). Depression the big-ticket item for employers. Medpage Today [Online]. Retrieved November 13, 2012 from www.medpagetoday.com

⁵ http://www.cdc.gov/chronicdisease/resources/publications/aag/obesity.htm

Physical Activity and Nutrition

A healthy diet and exercise can improve health among those with chronic conditions and lower the risk of



developing one. Physically active employees cost employers 15% less in health care than inactive ones⁵.

In 2013, two in five employed Vermont adults did not meet weekly physical activity recommendations of 150 minutes of moderate activity or 75 minutes of vigorous activity. Two-thirds did not eat two or more fruits per day, while four out of five did not eat three or more vegetables per day.

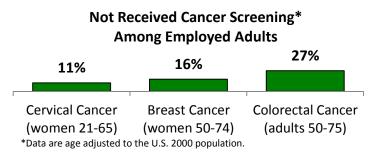
Tobacco Use

Smoking has been linked to diseases such as cancer, heart disease, stroke, and chronic obstructive pulmonary disease and is the leading preventable cause of death⁶. Quitting smoking, regardless of age, leads to increased longevity and improved quality of life⁷. In 2013, less than one in five (17%) employed adults were smokers. Compared to non-smokers, employed smokers have reduced productivity and increased absenteeism⁸. Nearly three in ten (27%) smoked in the past but have successfully quit. Of current smokers, six in ten (59%) tried to quit in the previous year.

Cancer Screening⁹

Screening for cancers can lead to early detection, better health outcomes and decreased mortality. More than

one in ten (11%) employed women 21-65 did not meet cervical cancer screening recommendations in 2012, while 16% of employed women 50-74 did not meet breast cancer screening guidelines. More than a quarter (27%) of adults 50-75 employed outside the home did not receive appropriate colorectal cancer screening.



Worksite Wellness

VDH has identified five priority strategies for worksites to adopt that will assist in creating environments that support healthy eating and physical activity in worksites. The five strategies are low-cost and offer population-level impact for worksites. They are: implement healthy food and beverage policies, go tobacco-free, provide refrigerators, microwaves, and break areas, help employees get 30 minutes of physical activity a day, and support local food initiatives.

For more information about worksite wellness program at VDH please contact your local district office: http://healthvermont.gov/local/district/district_office.aspx. For more information on the BRFSS contact Jessie Hammond, M.P.H. (Jessie.Hammond@state.vt.us).

⁹ Cancer screening guidelines are from the USPSTF and can be found here: http://www.uspreventiveservicetaskforce.org.



^{*}Data are age adjusted to the U.S. 2000 population.

⁶ Centers for Disease Control and Prevention: http://www.cdc.gov/tobacco/data_statistics/fact_sheets/fast_facts/index.htm

⁷ Campaign for Tobacco Free Kids: http://www.tobaccofreekids.org/research/factsheets/pdf/0246.pdf

⁸ Berman, M., Crane R., and Munur, M. Estimating the cost of a smoking employee. Tobacco Control 2013 Online First; 3 June 2013.