

January 6th, 2026

Dear Members of the House Committees on Human Services and Health Care,

Today you will be hearing testimony from the Vermont Department of Health in support of vaccine requirements for children and in favor of providing protection to medical providers who inject them into their patients.

I'd like you to remember the guidance our health department provided just five years ago.

In the fall of 2020, the Vermont Health Department worked with the Agency of Education to provide guidance on the reopening schools. They published their recommendation in a document titled [A Strong and Healthy Start: Safety and Health Guidance for Vermont Schools](#). The document suggested that schools implement mask mandates, temperature testing, social distancing and [nasal-swab testing](#). [Most of the schools in Vermont complied](#).

Their “[guidance](#)” included the following:

“Classrooms and other school spaces should be set up to ensure a minimum distance between students. For students in grades PreK-6, the minimum distance is three feet. For students in grades 7-12, the minimum distance is six feet.”

“Students and staff may remove their masks if they are outside and can ensure that they will be more than six feet apart for the entire time they have their masks off.”

“Masks should be worn during mealtimes anytime students are not actually eating or drinking. Masks should be on when students are receiving their meals and when they are disposing of their trash and trays. Masks should only be removed when students are about to start eating and they should be replaced as soon as students are done eating.”

It is impossible to argue that the recommended practices which were in place for two years were not disruptive and stressful to students, staff and families. The countless harms they caused have yet to be acknowledged, assessed or addressed.

[The Agency of Education in collaboration with the Department of Health](#) told students, staff and families that these policies would only need to be put into place until 80% of the students were willing to take the Covid-19 vaccine, resulting in students and staff pressuring each other to get vaccinated so the interventions could stop:

“After February 28, 2022, masks should no longer be required for all those eligible for vaccination when the vaccination rate among students is equal to or greater than 80% of the school’s currently eligible population. Currently, all Vermonters ages 5 and older are eligible to be vaccinated.”

In March of 2022 the Vermont Department of Health dropped its mask recommendation, despite not achieving its 80% vaccination goal. The governor cited student [mental health concerns](#) as one of the reasons for the change in direction.

Facial masks, distancing, temperature taking and Covid-19 testing have long been debunked as impractical or ineffective mitigation measures and the Department of Health and Agency of Education are no longer recommending any of these practices in their [updated guidance](#).

Despite the fact that only about [10% of students are vaccinated against Covid-19](#) and only a [third have had a flu vaccine](#) this year, our public agencies have returned to recommending the good old-fashioned practices of washing hands, covering sneezes and coughs and staying home when sick. Since returning to such practices, [influenza rates in Vermont](#) have gone drastically down.

These updates were not made due to a change in science. High-quality research on the effectiveness of the Covid interventions has been non-existent from the start.

The Department of Health's own [survey](#) and Dr. Levine's [UVM study](#) exposed the harms and ineffectiveness of masks as early as June of 2020, before their recommendations of statewide and school mask mandates. However, the researchers were only focused on compliance, not safety or effectiveness.

This practice of imposing masks in order to influence vaccination is similar to the practice used in many health care settings in Vermont, where staff are required to wear face masks if they do not take the annual flu vaccine. These "Vaccine or Mask" policies have been called [coercive](#), and some might even say they are [abusive](#), especially when considering the [physical and emotional burdens](#) experienced as a result of wearing face masks.

This legislative session our representatives are being faced with a choice. Should they spend their time exploring ways to impose more of the health department's recommendations, as proposed in [House Bill 545: An act relating to issuing immunization recommendations](#)? Or, should they hear testimony from [OSHA trained experts](#) who understand how to protect vulnerable students and from citizens who want health choice?

It's time to talk about the impact of the "guidance" our public agencies are providing us.

Please take the time to seriously consider ways you can protect our right to choose which medical interventions are right for ourselves and our families. [Bill 61, An act relating to bodily autonomy and health care decision making](#) and [Bill 393, An act relating to the prohibition of requiring face masks](#) have been introduced in order to get just such a conversation started.

Thank you.

Sincerely,

Amy Hornblas
Director, [Vermont Stands Up](#)

ORIGINAL LETTER WITH LINKS AVAILABLE ONLINE: [VermontStandsUp.org](#)

