Testimony for the House Human Services Committee
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For the record, my name is Julie Bond, I am the Executive Director of Good Samaritan Haven, a shelter network serving those experiencing homelessness in Washington county and the broader central Vermont region.
Thank you for the opportunity to share about the gap between current sheltering capacity and the growing need for various models of shelter in Washington county.

I'll begin by outlining the need: According to the latest Coordinated Entry numbers, there are currently over 585 people in Washington county who are experiencing homelessness or are precariously housed (at imminent risk of homelessness). For a balance of state/rural context, Washington county has a higher per capita rate of homelessness than Chittenden County and receives approximately 30% less funding per unhoused person to address the need. This figure is based on publicly available statewide reports.

For the first time in our community's history, there are more than twice the number of people living outdoors unsheltered as there are people who are in emergency shelter beds. This means that Good Samaritan Haven's street outreach team is currently serving over 220 people outdoors compared to those who are sheltered in the 94 emergency shelter beds that exist across the county. This is a direct result of the reduction in the number of motel rooms made available to people through the GA Emergency Housing Program, which has, and continues to serve as the state's largest shelter system. Many of the people currently outdoors were formerly sheltered in the county's motels.

There will always be a need for the motel system to serve as a stop gap for true overflow needs or last-minute emergency housing. It is an important safety valve in the system, but it shouldn't be the primary safety valve.

State shelter operators and homelessness service providers must be consulted about their current capacity and what types of solutions are needed in their communities. This spirit of transparency and collaboration is vital for building a sustainable long term solution and so that motels can return to their original role as temporary, stop gap emergency beds. So thank you for this opportunity to share. We witness the sheer number of people in need, current shelters at capacity, and the challenges that result when the intensity of need exceeds what non-clinical shelters can provide. Shelters house some of the most complex individuals while operating with the least amount of appropriate resources. Shelters were never meant to carry this much of the system's weight, yet they do—quietly, and with extraordinary dedication.

Based on this complexity, the needs of our unsheltered and unhoused neighbors will not be sustainably solved in a one-size-fits-all manner, but rather, there must be a creation of shelter, transitional, temporary and permanent housing solutions that are more tailored to specific sub-populations with particular and unique needs. Specifically, there is great need for shelter or transitional housing options for those with complex mental health experiences, those with active SUD's or who are in recovery or looking to take first steps towards recovery. For example, there is a need in Washington county for beds to help bridge critical days between clinical care and rehab placement. Additionally, older adults need specific shelter and housing options (in particular those requiring skilled nursing home level of care, and those elders who are smokers and who may have a history of criminal justice involvement - which are current barriers to most nursing homes). Finally, families and those who have experienced domestic violence also

need unique shelter & housing options. The long-term success of these special populations in being sheltered, stabilized, and able to meet their personal goals hinges on being in environments that are designed to support their particular physical, mental, emotional or developmental experiences.

The capacity and response to the need: In order to respond to the needs in the community, Good Samaritan Haven has grown five fold in five years. **In 2020 there were approx 172 individuals experiencing homelessness in Washington county. In June 2025 there were 651. And while Good Sam has grown year-over-year at an extraordinary pace, there is still a need for an additional 300+ beds in Washington county to help stabilize our most vulnerable neighbors and reduce the strain on service providers and municipalities.**

Over the last 5–6 years, we have tracked every shift and need in our communities closely. Shelter operators and homelessness service providers are on the front lines every single day—we understand the realities of this crisis clearly. We ask that front line providers and those with lived experience be at the table to help architect and implement solutions.

In July 2024 Good Samaritan Haven submitted a response to the shelter expansion RFP issued by DCF/OEO to get more shelter beds online by that December. Good Sam proposed a roadmap for several projects that would have doubled the shelter bed capacity in Washington county by adding up to 100 beds but not by December. This plan outlined a combination of 5 additional overflow beds, building a 9-18 bed complex care shelter, the creation of a 40-60 bed building with a supportive SRO type of model, and the preservation of 17 beds that are under threat from being located in a floodway. Because the priority was placed on standing up shelters within 6 months, the only project in this proposal

that was funded was the 5 additional overflow beds. If any of those projects had been funded in July 2024, our county would be in a very different place today—much closer to addressing the unsheltered emergency we're now facing.

Good Samaritan Haven and other shelter and homeless service providers around the state are quite keen to address the varying needs in our respective communities and many are willing to take on the development projects and complexities that come with that, if it means being able to save, shelter and stabilize more peoples' lives. That being said, it is important to note that as we respond to increased capacity, organizations will be unable to sustain this level of growth if shelter operations are not invested in commensurately.

Shelter providers know the right-sized solutions for their unique communities and only need the funding to make them happen. For example, Good Samaritan Haven has several projects in pre-development and development that can be started immediately if the funding is there with appropriate time constraints. The roadmap in Washington county for 100 more beds can be implemented with the support of the State. However, it is vital to decouple funding from timelines that do not allow for longer term, intentional development solutions. I don't mean years and years, but I also don't mean an unattainable 4-6 month timeline either. An example of a really successful current project is Good Sam partnering with the State, Evernorth and VHCB to establish the first permanent, year-round shelter in the city of Montpelier. From start to finish, this project will likely take 9-10 months, which is one of the fastest acquisition, rehab and fit-up shelter projects I have known to happen. We are incredibly proud of this project and have been thrilled to see our state and development partners show up with urgency, flexibility and creativity to make this unconventional development process happen. Community needs can be met when the right people are empowered with the right tools and the right charge.

In closing, we have moved into a dual-crisis era of housing and unsheltered homelessness. This is not the direction in which we want our state to be moving.

With targeted funding, key partnerships, and reduced barriers to siting and development, Vermont can move from managing this deeper crisis to building lasting solutions—quickly, efficiently, and with intention. The shelter providers of the state are poised and ready with regional roadmaps for the unique communities we serve. What we need now is for the State to invest in the creative and unique plans that providers know will best suit each region's needs - with timelines that are both aggressive but also realistic.