October 13, 2026

Chair Trevor Squirrell
Legislative Committee on Administrative Rules
Vermont State House
115 State Street Montpelier, VT 05633

Re: Department for Children and Families, Vermont Homelessness Response Continuum Emergency Rule (adopted pursuant to Act 143 of 2026, Sec. 8(a)(1)) — extensions to the 70-day limit for hotel and motel placements

Dear Chair Squirrell and Members of the Committee:

Thank you for the opportunity to comment on the Department for Children and Families' (DCF) emergency rule implementing the Vermont Homelessness Response Continuum. Building Bright Futures (BBF) is Vermont's Early Childhood State Advisory Council. Our role is to bring data and the voices of families to bear on decisions that affect young children and the people who care for them.

Our comments focus on one provision of DCF's Emergency Rule: Part 8, Section 5.00 (Extensions). We respectfully ask the Committee to consider whether the rule, as written, carries out the full scope of the extension authority the General Assembly granted in Act 143, particularly for pregnant people and families with children under age 5. Building Bright Futures has been notified of several instances of families being denied an extension beyond the 70-day hotel and motel limit. This includes a family with a one-year old and a pregnant parent sleeping in their car.

BBF respectfully asks the Committee to:

1. **Encourage DCF to add an extension criterion** for households with a pregnant member or a child under age 5, preferably all households with minor children. This could be added to Part 8, Section 5.01 or stated as an example of "imminent risk" under Section 5.01(d).
2. **Reduce duplicative documentation burden for these households.** Verification of pregnancy and a child's age is already required under Part 3, Section 3.05. That verification should be enough to support an extension, without separate proof of imminent risk.
3. **Carry this change into the permanent rule.** DCF must submit a draft permanent rule by April 1, 2027, and adopt it by October 1, 2027 (Act 143, Sec. 8(b)).
4. **Ensure stakeholder input informs the permanent rule.** We ask that before any rule is finalized, stakeholders including service providers and families experiencing homelessness, are involved.

Clear extension criterion would reach a small, identifiable group. The cost of extending shelter for these households is modest compared with the health, developmental, and child-welfare costs of a pregnant person or young child sleeping in a car or outdoors.

Act 143 authorizes extensions beyond the 70-day hotel and motel limit in broad terms. New 33 V.S.A. § 2212(b) (Act 143, page 23) provides that the Department "may grant extensions to the time limits … pursuant to criteria adopted in rule, **including for**":

1. a household actively awaiting a placement in housing, treatment, or other services;
2. medical necessity;
3. lack of reasonable alternative accessible placements for a member with a disability; and
4. imminent risk to the health or safety of one or more household members.

We recognize that these four reasons do not specifically name pregnant people or families with children. However, the General Assembly chose the words "including for." That language signals examples, not a complete list. It directs DCF to adopt criteria in rule and leaves room for additional criteria that serve the Act's purposes. Including pregnant people and families with children would also be consistent with the rest of the Act and the rule itself:

- **Act 143 already names them as priorities.** 33 V.S.A. § 2211(a) directs the Office to prioritize households with a member who "is a minor child" or "is pregnant." The rule's screening tool is built on those same groups (Part 1, Section 5.03).
- **DCF already treats families with children as a distinct population.** Part 8, Section 6.02(a) allows population-specific hotels for "families with children."
- **The Act calls for flexibility.** The General Assembly intended services that "meet the specific needs of households experiencing homelessness" (Sec. 2(4)(B)) and that "promote maximum flexibility" (Sec. 3(8)). It also stated the goal that unsheltered homelessness "be eliminated" (Sec. 2(1)).

The fourth statutory reason, imminent risk to health or safety, arguably already covers many of these households. But the rule requires a "documented imminent risk" for each member, case by case (Part 8, Section 5.01(d)). For a pregnant person or an infant, the risk of sleeping outside is inherent, not something a case manager should have to prove within a 10-day decision window.

Pregnant people and young children are especially vulnerable to unsheltered homelessness. The research is consistent: homelessness during pregnancy and in the first years of life causes measurable, lasting harm, and the harm grows with time.

- **Pregnancy.** In a study of nearly 10,000 mothers, homelessness during pregnancy was an independent risk factor for low birth weight, raising the adjusted odds by 43% (Cutts et al., *Maternal and Child Health Journal*, 2015). Homelessness after birth did not carry the same association, which points to pregnancy as a critical window.
- **Infants and toddlers.** In a study of 20,571 caregivers of children under 4, children who were homeless both before and after birth had 41% higher odds of hospitalization, 48% higher odds of developmental delay, and nearly double the odds of fair or poor health. Infants homeless for more than six months had more than three times the odds of fair or poor health (Sandel et al., *Pediatrics*, 2018).
- **Brain development.** More than 1 million new neural connections form every second in the first few years of life, and toxic stress disrupts that development (Harvard Center on the Developing Child).
- **Infancy is the peak age for homelessness.** Infancy is the age at which a person is most likely to stay in a public shelter (ZERO TO THREE). An estimated 446,996 children from birth through

age 3 experienced homelessness nationally in 2022–23, up 23% in two years (SchoolHouse Connection).

- **Family homelessness remains consistently high in Vermont.** Over the last three reported years, the annual Point-in-Time (PIT) count has recorded more than 1100 families experiencing homelessness, and in the October 2024 - September 2025 period 1,500 children in Vermont under the age of 13 experienced homelessness. (HUD's 2007-2025 PIT Counts by State and 2025 State of Homelessness in Vermont Report)
- **Unsheltered homelessness in Vermont rose nearly 63%** in the January 2025 Point-in-Time Count (Vermont Public).

The 70-day limit applies from April 1 through November 30. Families who reach it in those months risk sleeping outside during a pregnancy or a child's first years. A clear criterion would let DCF use the flexibility the General Assembly already gave it.

Thank you for your attention and for your service on the Committee. We would be glad to provide additional data or answer questions.

Respectfully,



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Sources

- Act 143 (2026), as enacted
- DCF, Vermont Homelessness Response Continuum Emergency Rule (2026)
- DCF Act 27 Monthly Housing Report, Nov. 30, 2025
- Cutts et al. (2015), Homelessness During Pregnancy
- Sandel et al. (2018), Timing and Duration of Pre- and Postnatal Homelessness
- Harvard Center on the Developing Child, Brain Architecture
- ZERO TO THREE, Current Data on Infants and Toddlers Experiencing Homelessness
- SchoolHouse Connection, Infant and Toddler Homelessness Across 50 States (2025)
- NLIHC, HUD 2024 AHAR summary
- Vermont Public, Unsheltered homelessness spikes (July 30, 2025)