

2026 POINT-IN-TIME REPORT

Prepared by:

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Institute for Community Alliances

About the Authors

Housing & Homelessness Alliance of Vermont (HHAV)

The Housing & Homelessness Alliance of Vermont (HHAV) is a statewide membership organization that envisions a Vermont where everyone has a safe, stable place to call home and homelessness is solved. HHAV's mission is to build a Vermont where the fundamental right to housing is enjoyed by all. HHAV also staffs and advances the work of the Vermont Balance of State Continuum of Care (VT BoS CoC), which coordinates the planning and implementation of the housing and service system that meets the needs of people experiencing homelessness, with the ultimate goal of preventing and ending homelessness. The BoS CoC serves all of Vermont except Chittenden County. HHAV, on behalf of the BoS CoC, also serves as the collaborative applicant to HUD for CoC funding.

For more information, visit www.hhav.org

Chittenden County Homeless Alliance

The Chittenden County Homeless Alliance (CCHA) is a coalition of individuals, organizations, and government entities who support our vision of a safe, decent, affordable, stable home for every person and family in Chittenden County. CCHA's mission is to end homelessness in Chittenden County by being a forum for gathering information, building consensus, coordinating efforts, and advocating for the end of homelessness through prevention, early intervention, and remediation. CCHA serves as the CoC for Chittenden County.

For more information, visit www.cchavt.org

Institute for Community Alliances (ICA)

Institute for Community Alliances is a not-for-profit organization and supports more than 35 Continua of Care with over 4,500 licensed Homeless Management Information System (HMIS) database users across fifteen states. ICA supports data-driven solutions and information systems that help communities address housing instability, homelessness, food insecurity and related issues.

For more information, visit https://icalliances.org/vermont

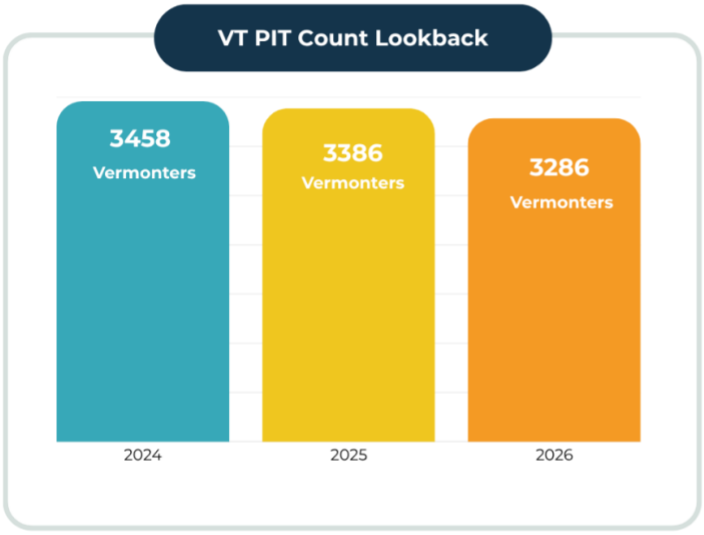
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2026 VERMONT POINT-IN-TIME COUNT AT A GLANCE

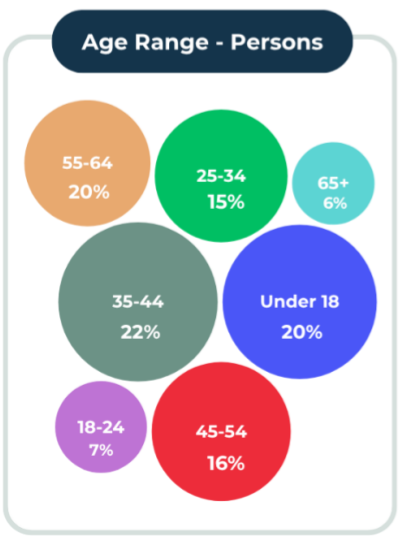
3286 Vermonters were estimated to be experiencing homelessness on January 28th, 2026.

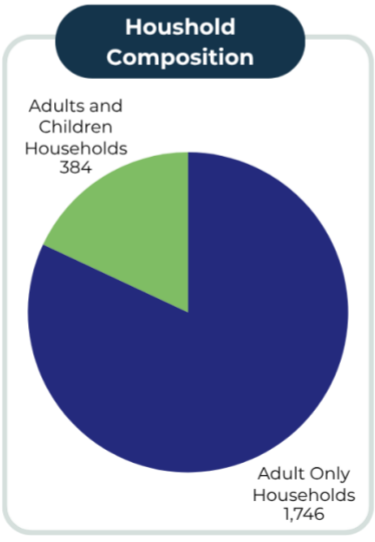
3 percent decrease from 2025

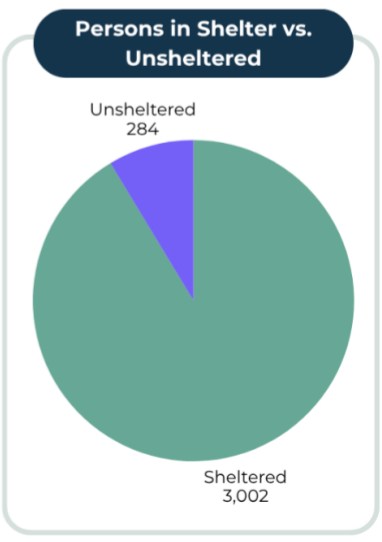


1116 adults reported having a serious mental illness

34 percent of people counted







VERMONT BALANCE OF STATE CONTINUUM OF CARE
CHITTENDEN COUNTY HOMELESS ALLIANCE
INSTITUTE FOR COMMUNITY ALLIANCES

Section 1. Executive Summary

Homelessness continues to be a significant challenge across Vermont, affecting the health, safety, stability, and well-being of individuals and families. People experiencing homelessness face substantial barriers to accessing safe and stable housing, often resulting in significant physical, emotional, and financial hardships. Across the state, a dedicated network of housing providers, shelters, service organizations, and community partners work collaboratively to address immediate needs and support pathways to permanent housing.

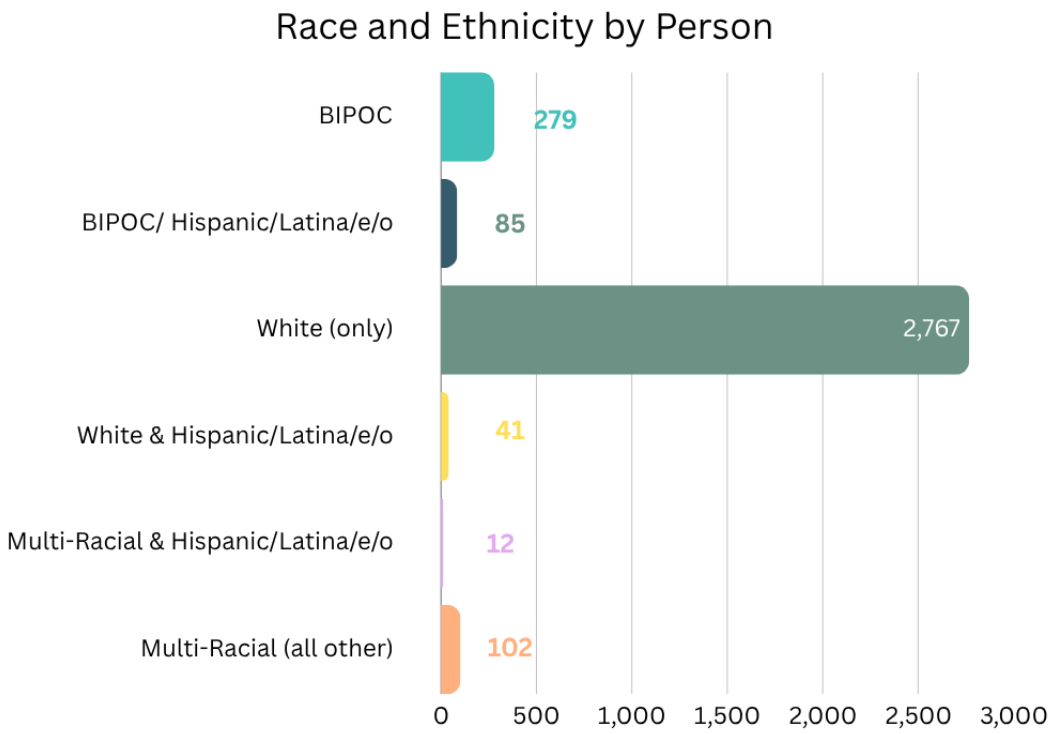
Homelessness is a complex issue influenced by a range of economic, systemic, and individual circumstances, and no single approach can address it alone. The annual Point-in-Time (PIT) Count provides an important snapshot of homelessness in Vermont, helping communities better understand the scope of the issue, identify emerging trends, and inform planning and resource allocation. While the PIT Count cannot capture every individual or family experiencing homelessness, it remains a valuable tool for guiding coordinated, data-informed responses.

Through continued collaboration, thoughtful planning, and a shared commitment to effective solutions, Vermont can strengthen its response to homelessness and expand opportunities for individuals and families to access safe, stable, and permanent housing.

The PIT Count is an annual count of sheltered and unsheltered people experiencing homelessness across Vermont. In 2026, the count was carried out on January 28 by trained individuals throughout the state and data was compiled over the course of one week. The Housing & Homelessness Alliance of Vermont (HHAV) and Chittenden County Homelessness Alliance (CCHA), with technical assistance by Institute for Community Alliances (ICA), supported the data review and analysis before submitting the results to the US Department of Housing and Urban Development (HUD). Below are the major findings and takeaways from the 2026 PIT Count.

- 3,286 people were identified as experiencing homelessness. This represents a 3% decline from 2025.
- Adult-only households accounted for 1,746 households (82%), while households with adults and children represented 384 households (18%).
- Child homelessness increased by 5% in 2026 compared to 2025. A total of 667 children under the age of 18 were identified during the count. This represents approximately 20% of all people experiencing homelessness.

- 1 in 3 people experiencing homelessness identified as chronically homeless (953)
- There was a 5% increase in unsheltered homelessness (284) compared to 2025, with Chittenden County seeing the largest increase.
- Of the people experiencing homelessness, 89% were staying in emergency shelter (2,932). Of those people staying in emergency shelter, 72% were sheltered through the General Assistance (GA) hotel/motel program.
- In 2026, the statewide temporary housing and shelter capacity was 3,359, according to the Housing Inventory Count (HIC). Of those, 2,120 were hotel/motel beds, and 259 were Domestic and/or Sexual Violence (DV/SV) shelter beds.
- 1,116 adults (34%) reported living with a serious mental illness, making behavioral health one of the most significant service needs identified during the PIT Count. Adults reporting a substance use disorder accounted for 580 individuals (18%), while nearly 250 adults identified as survivors of DV/SV.
- A racial and ethnic disparity in people experiencing homelessness continues, with a 9% increase in homelessness from 2025 to 2026 amongst people who identify as Black, Indigenous, and People of Color (BIPOC).



Section 2. Point-in-Time Count and Housing Inventory Count: Methodology, Gaps & Considerations

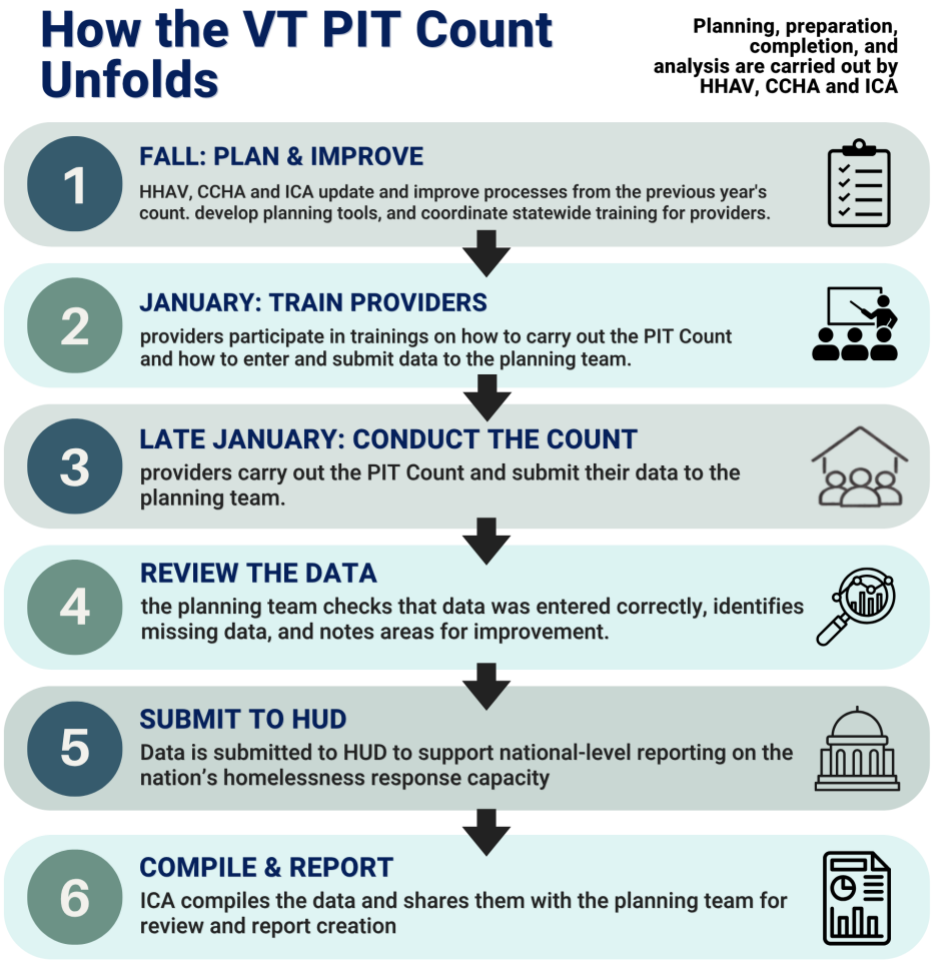
PIT Count and HIC Methodology:

The Point-in-Time Count is an annual count of sheltered and unsheltered people experiencing homelessness on a single night in January and is overseen by the state's two Continua of Care (CCHA and HHAV) and required by HUD. Sheltered homelessness includes those in permanent and cold-weather shelters and transitional housing, while unsheltered homelessness includes people living in places not meant for human habitation, such as living in a car or outside. This year, the PIT Count was carried out on January 28 and providers had one week to connect with people to learn where they had stayed on that night. To count people experiencing unsheltered homelessness, local PIT coordinators do extensive outreach to likely known locations where people may be staying. Each count is planned, coordinated, and carried out locally by community-based organizations and the final report is completed and submitted to HUD by Vermont's Homeless Management Information System (HMIS) contractor, the Institute for Community Alliances. The PIT Count provides a uniform way to measure homelessness across the United States and serves as a key tool to understand and compare homelessness between states.

The HIC counts the beds and housing units available to people experiencing or at risk of homelessness. This includes emergency shelter, transitional housing, rapid rehousing, permanent supportive housing, and other housing programs.
Beds that are voucher based have a different way of being counted than beds at are tenant based. For example, Rapid Rehousing beds are 'voucher based' beds.
Voucher beds need the following must be true in order to count on the HIC:

- Participants were enrolled in the program on or before the PIT date
- Participant physically moved into bed/unit on or before the PIT date
- Participant is still being served and, in that bed/unit through the night of the PIT, so there is either no exit or an exit after the PIT date

PIT Count Process:



Gaps in Data Collection & Analysis:

The PIT Count takes place annually on one night in January. While a lot of work goes into preparing and implementing the count on this night, ultimately, it is only a snapshot. It is widely understood that the PIT Count represents an undercount of the actual number of people experiencing homelessness; despite relying on a dedicated, well-trained network of community providers, it is extremely challenging to reach every individual or household experiencing homelessness in this timeframe.

The weather in January in Vermont, as with other cold-climate sections of the country, also poses a unique challenge to reaching every person. In late January of 2026, it was particularly cold, with lows in the single digits and wind chills below 0° Fahrenheit. This makes it even more difficult to count people accurately, as people are potentially driven to stay in places that are less visible or may take emergency measures like staying on a friend's couch or pooling resources to stay in a motel room. Weather can also influence the count of sheltered vs. unsheltered homelessness; when the weather is this cold, emergency cold-weather shelters open to ensure that people don't freeze to death. Because of some innovative solutions in Vermont in 2026, more extreme cold-weather shelters were available. This means that people who may have otherwise been unsheltered that night were counted as staying in emergency shelter.

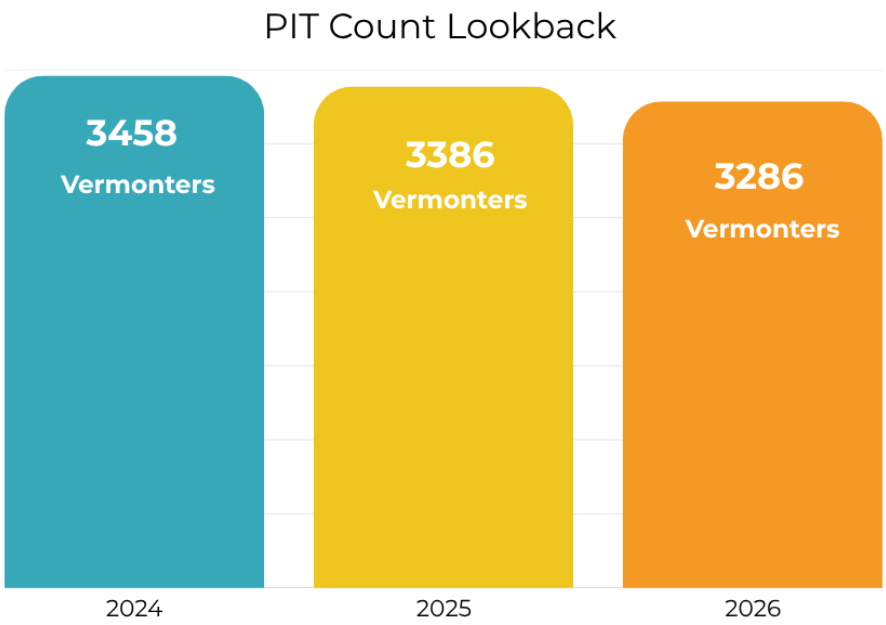
Considerations:

In addition to the PIT Count, Vermont relies on the Coordinated Entry (CE) system to understand the needs of people experiencing or at risk of homelessness. Coordinated entry is a process developed to ensure that all people experiencing homelessness have fair and equal access to housing resources and services and are quickly identified, assessed, referred, and connected to housing and assistance based on their strengths and needs. Monthly CE reports provide another way to assess homelessness across the state, however, there are some limitations to using CE data to assess homelessness. For this year's report, the authors decided to not include CE data. Monthly CE data collected through HMIS can be accessed here.

Section 3. Detailed Findings

Who is Experiencing Homelessness in Vermont?

The 2026 PIT Count identified **3,286 Vermonters experiencing homelessness** on a single night in January. Although this represents a modest **3% decrease** from the previous year, the data continue to demonstrate that homelessness remains a significant challenge affecting individuals and families in every region of the state.

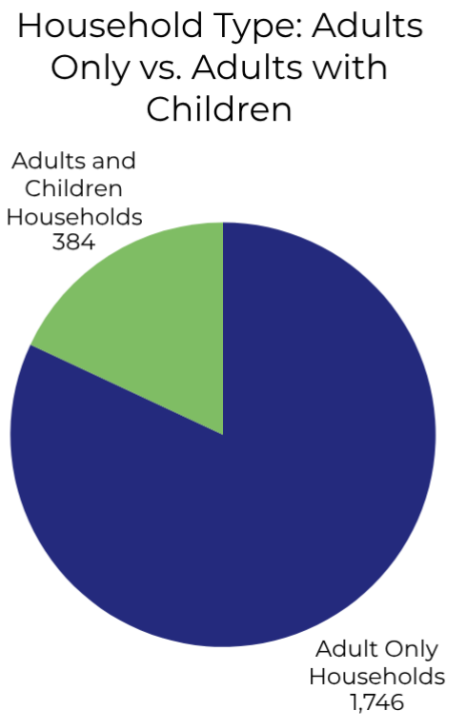


Household Composition

Single adults continue to represent the majority of households experiencing homelessness in Vermont. Adult-only households accounted for **1,746 households (82%)**, while households with adults and children represented **384 households (18%)**. This distribution has remained relatively consistent over recent years and reflects the continued need for housing interventions that serve both single adults with complex service needs and families experiencing housing instability.

Although adult-only households comprise the majority of households identified during the PIT Count, families continue to represent a significant portion of Vermont's homeless population. Adults and children in family households accounted for more than one-third of all individuals experiencing homelessness statewide, underscoring the

ongoing need for family shelter, rapid rehousing, and permanent affordable housing options.



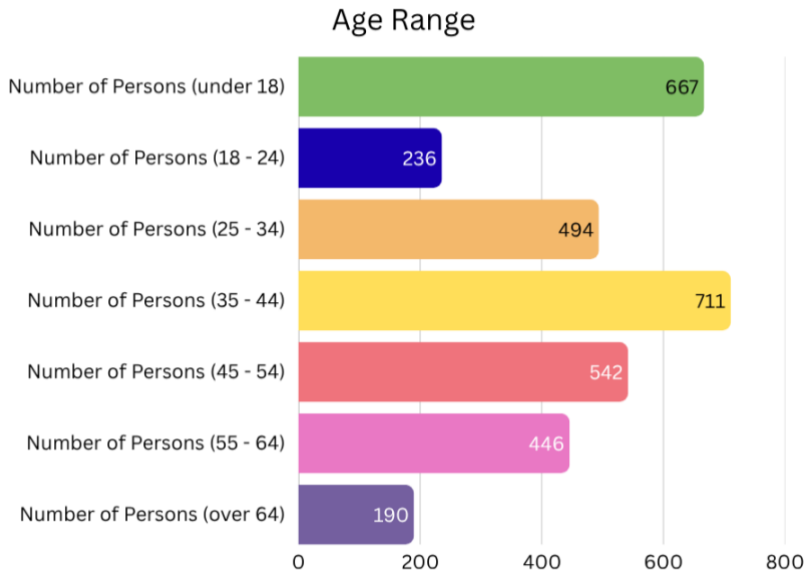
Children and Families

One of the more notable findings from the 2026 PIT Count is that **child homelessness increased despite an overall decline in homelessness statewide**. A total of **667 children under the age of 18** were identified during the count, representing approximately **20% of all people experiencing homelessness**, an increase of approximately **5%** from the previous year.

While overall statewide homelessness declined modestly, the increase in children experiencing homelessness highlights the continued housing instability faced by many Vermont families. These findings reinforce the importance of investments in family shelter capacity, homelessness prevention, and affordable housing opportunities that allow children to remain safely housed while minimizing disruptions to education, healthcare, and family stability.

Age Distribution

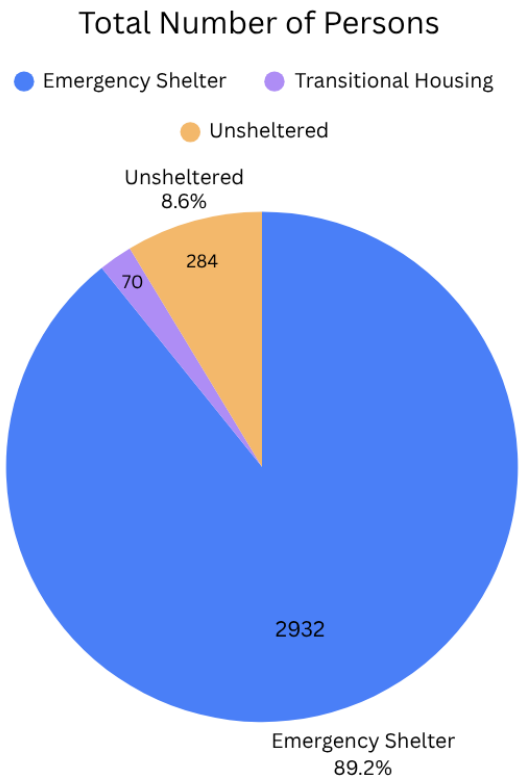
Homelessness continues to affect Vermonters across every stage of life. Adults between the ages of **35 and 54** represented the largest age groups identified during the PIT Count, while children under 18 made up one-fifth of all persons counted. Compared to 2025, several age groups experienced notable changes. Individuals ages **25–34** declined by **13%**, while those ages **35–44** decreased by **10%** and adults over age 64 declined by **12%**, from 215 individuals in 2025 to 190 in 2026. While this decrease is encouraging, older adults continue to represent a uniquely vulnerable population. Many older Vermonters experiencing homelessness live on fixed incomes that have not kept pace with rising housing costs, while simultaneously managing chronic health conditions, physical disabilities, and increasing healthcare needs. Research consistently shows that homelessness accelerates the aging process, resulting in older adults experiencing geriatric conditions, including mobility limitations, cognitive decline, and chronic illness, years earlier than their housed peers.[1] These factors can make exiting homelessness particularly difficult without access to affordable, accessible housing and supportive services. Conversely, the number of adults ages **45–54** increased by **7%**, adults ages **55–64** increased by **2%**, and children under 18 increased by **5%**. These shifts suggest that while overall homelessness has decreased modestly, housing instability continues to impact households differently across age groups.



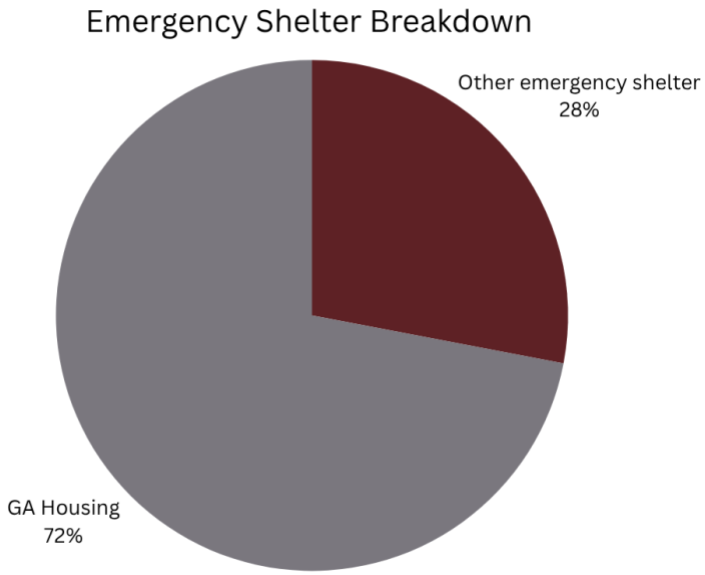
[1] Mantell, R., et al. (2023). "Accelerated Aging in People Experiencing Homelessness: A Rapid Review of Frailty Prevalence and Determinants." PubMed Central.

Where People Were Staying

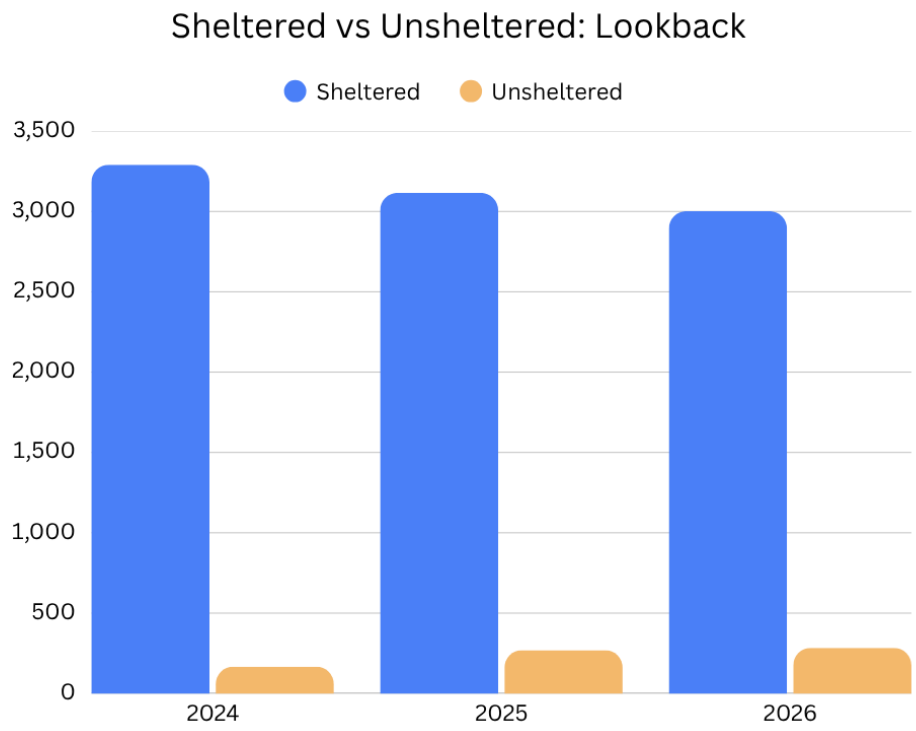
Emergency shelter remained the primary response to homelessness in Vermont during the 2026 PIT Count. Nearly **89% of all people experiencing homelessness were staying in emergency shelter**, while **284 individuals** were identified as unsheltered. Transitional housing accounted for a relatively small portion of the overall homeless response system.



Vermont's emergency shelter system continues to rely heavily on the **General Assistance Emergency Housing Program**, which accounted for approximately **72% of all emergency shelter placements** statewide during the PIT Count. This highlights the continued importance of the state's hotel/motel program in providing emergency shelter capacity while also emphasizing the state's reliance on temporary housing resources in the absence of sufficient permanent housing options.



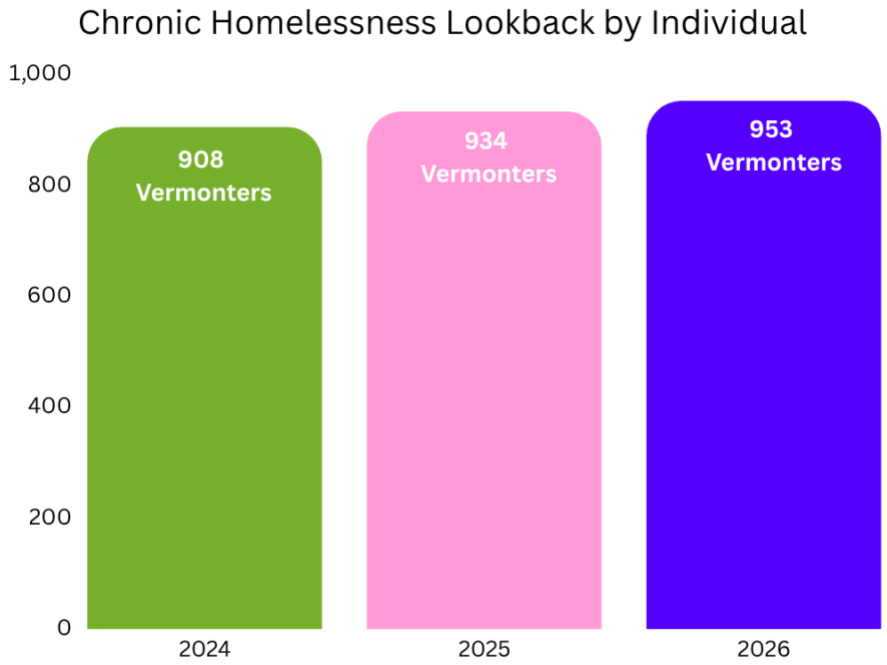
Although overall homelessness declined, the number of individuals identified as unsheltered increased by approximately **5%** compared to 2025. This trend suggests that despite continued investments in emergency shelter, some Vermonters continue to experience barriers to accessing shelter or remain without available shelter options on the night of the count.



Populations Experiencing Greater Housing Instability

The PIT Count continues to demonstrate that homelessness disproportionately affects people experiencing chronic health conditions, behavioral health needs, and other vulnerabilities.

Nearly **one in three people experiencing homelessness (953)** met HUD's definition of **chronic homelessness**, representing a slight increase from 2025. Individuals experiencing chronic homelessness often require both deeply affordable housing and long-term supportive services to successfully exit homelessness.



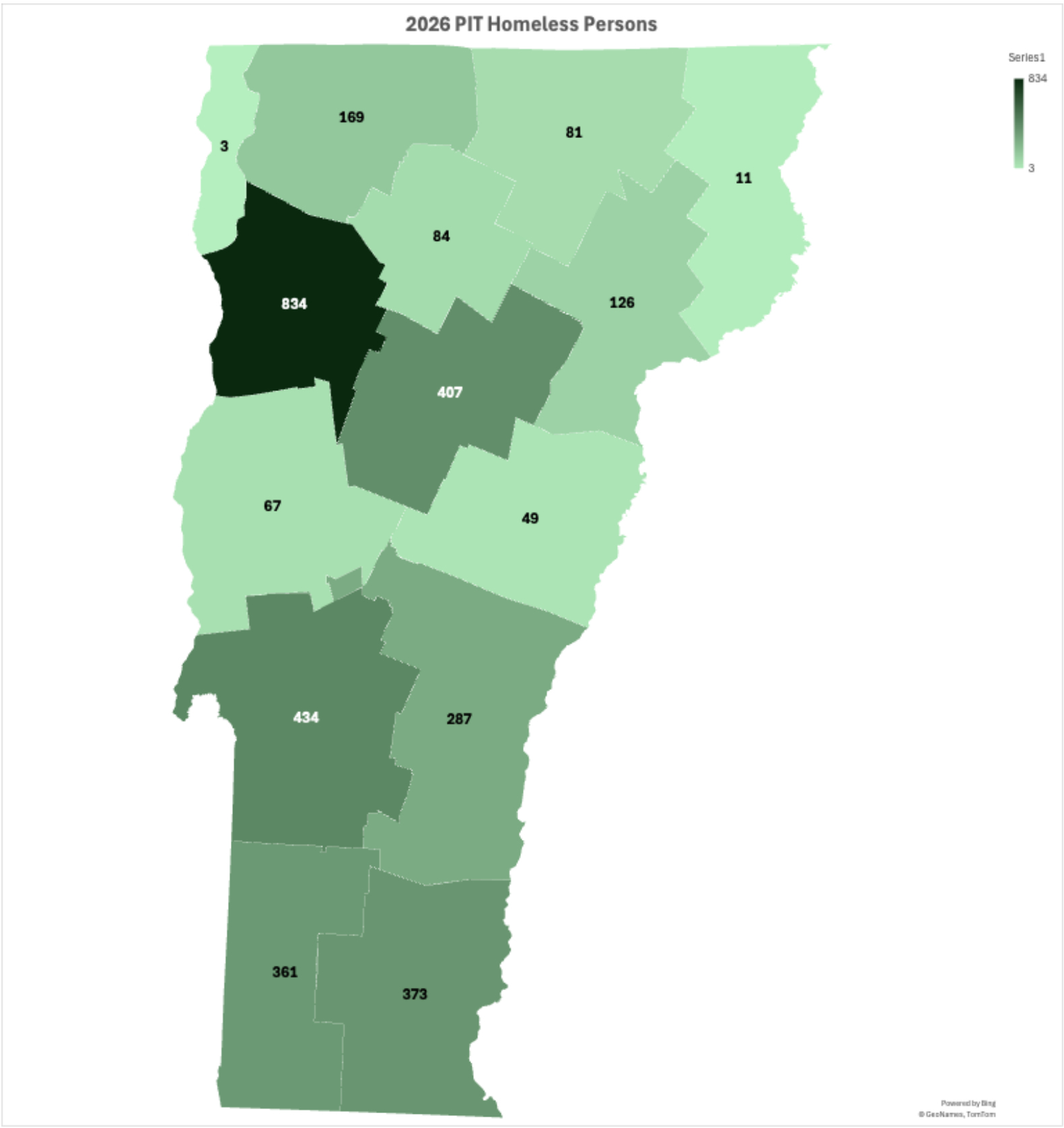
Similarly, **1,116 adults (34%)** reported living with a **serious mental illness**, making behavioral health one of the most significant service needs identified during the PIT Count. Adults reporting a substance use disorder accounted for **580 individuals (18%)**, while nearly **250 adults** identified as survivors of DV/SV.

Several subpopulations experienced encouraging decreases compared to the previous year. Veteran homelessness declined by **17%**, while the number of unaccompanied youth decreased by **16%**. Although these trends are positive, continued coordination between housing providers, veterans' services, youth organizations, and behavioral health systems remains essential to sustaining these improvements.

Regional Highlights

Homelessness continues to affect both of Vermont's Continua of Care differently. Between 2025 and 2026, the Balance of State Continuum experienced a **4% decrease** in the number of people experiencing homelessness, while the Chittenden County Continuum experienced a slight **1% increase**. These regional differences likely reflect local housing market conditions, shelter capacity, and the availability of supportive housing resources across the state.

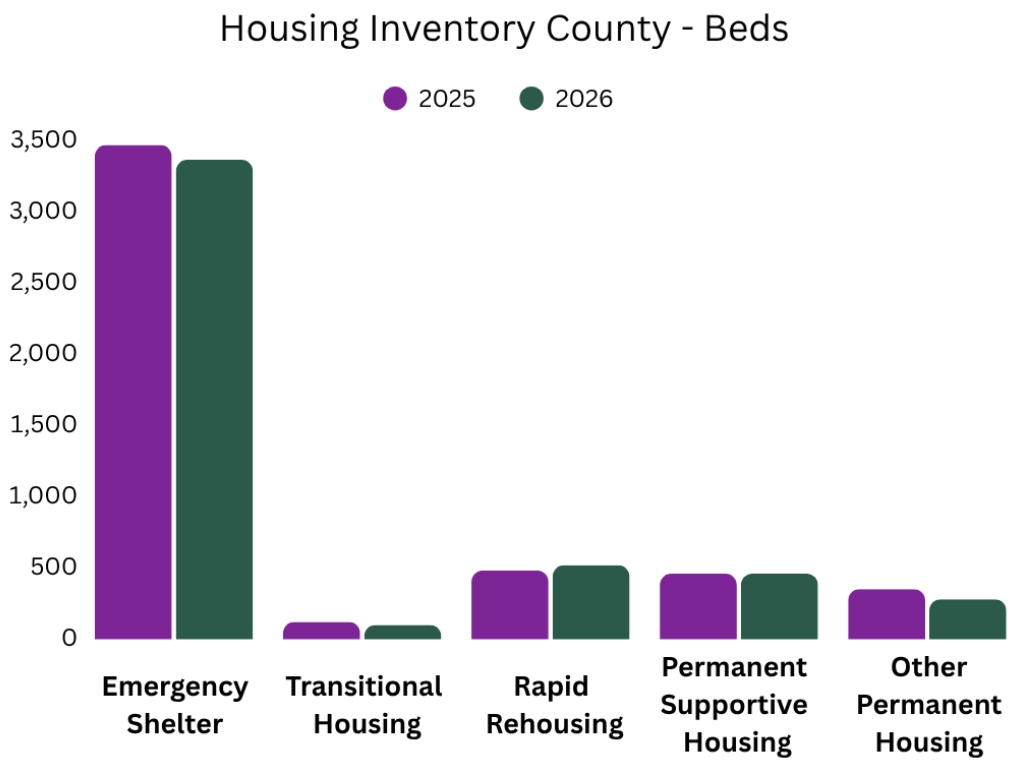
Despite these regional differences, communities throughout Vermont continue to face common challenges, including limited affordable housing, increasing rental costs, behavioral health service needs, and constrained emergency shelter capacity.


2026 PIT Homeless Persons
Series1
834
3
169
3
81
11
84
834
126
407
67
49
434
287
361
373
Powered by Bing
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Housing Inventory Count

This year's statewide HIC report (covering both Continua of Care) shows:

- Emergency Shelter beds decreased by 3% from 2025 to 2026.
- Economic Services Division (ESD) motel beds decreased 4.4% from 2025 to 2026
- Transitional Housing beds decreased 17% from 2025 to 2026.
- Rapid Rehousing beds increased 7% from 2025 to 2026.
- Permanent Support Housing beds increased 0.2% from 2025 to 2026
- Other Permanent Housing beds decreased 20% from 2025 to 2026.



Section 4. Key Takeaways & Conclusion

The 2026 Point-In-Time Count demonstrates that Vermont experienced a modest decline in overall homelessness while continuing to face significant structural housing challenges. Although fewer individuals were identified compared to 2025, several important trends warrant continued attention.

Most notably, child homelessness increased despite the overall statewide decrease, emphasizing that families continue to experience significant housing instability. Additionally, nearly one-third of all people experiencing homelessness met the federal definition of chronic homelessness, and more than one-third reported living with a serious mental illness. These findings illustrate that homelessness is increasingly intertwined with behavioral health needs, long-term housing affordability, and limited access to supportive housing.

The data also reinforce the critical role of Vermont's emergency shelter system. Nearly nine out of every ten people experiencing homelessness were sheltered on the night of the PIT Count, with the majority of those individuals staying in hotels and motels funded through the General Assistance Emergency Housing Program. While this system continues to provide an essential safety net, the reliance on temporary emergency accommodations underscores the importance of expanding permanent housing solutions.

National research consistently demonstrates that homelessness is driven primarily by the availability and affordability of housing rather than individual characteristics alone. Vermont's PIT findings align with these broader national trends, highlighting the need for continued investments in affordable housing production, supportive housing, homelessness prevention, and coordinated statewide responses.

Ultimately, the PIT Count should be viewed not simply as an annual measure of homelessness, but as an important planning tool that helps policymakers, service providers, and communities better understand who is experiencing homelessness, identify emerging trends, and prioritize resources where they are most needed.

Section 5. Looking Ahead & Solutions

While the Point-in-Time Count provides only a one-night snapshot of homelessness, it offers valuable insight into the evolving needs of Vermonters experiencing housing instability. As communities continue working toward reducing homelessness, the findings from the 2026 PIT Count suggest several opportunities for continued investment and collaboration.

1. Expand Affordable Housing

The continued prevalence of homelessness across all regions of Vermont reinforces the need to increase the supply of affordable housing, particularly for households with extremely low incomes. Expanding both permanent affordable housing and permanent supportive housing will remain critical to reducing chronic homelessness and improving housing stability.

2. Expanding Shelter Capacity

The 2026 Point-in-Time Count demonstrates the critical role that emergency shelter continues to play within Vermont's homeless response system. On the night of the count, **89% of all individuals experiencing homelessness were staying in emergency shelter**, and **72% of those sheltered individuals were staying in hotels and motels through Vermont's General Assistance (GA) Emergency Housing Program**. These findings underscore the extent to which the state's emergency shelter system has relied on the GA motel program to provide immediate, life-saving shelter during periods of housing crisis.

With the implementation of **Act 143**, Vermont's emergency shelter landscape is undergoing significant change as the availability of motel rooms through the General Assistance Emergency Housing Program is substantially reduced. While the law aims to transition the state's response toward a more coordinated homelessness system, the reduction in motel capacity places increased pressure on existing emergency shelters and community-based providers.

As Vermont continues implementing these changes, expanding emergency shelter capacity will be essential to ensuring that individuals and families experiencing homelessness have access to safe, low-barrier shelter while they work toward permanent

housing solutions. This may include investments in year-round emergency shelters, seasonal overflow capacity, specialized shelter models for families, youth, older adults, and individuals with medical or behavioral health needs, and enhanced partnerships between healthcare systems, housing providers, and community organizations.

The increase in unsheltered homelessness identified during the 2026 PIT Count further highlights the importance of maintaining sufficient emergency shelter capacity during this transition. Without adequate shelter resources, more Vermonters may be forced to remain unsheltered while awaiting permanent housing opportunities, increasing risks to individual health, safety, and community well-being.

3. Strengthen Homelessness Prevention

Preventing households from entering homelessness remains one of the most effective strategies for reducing future shelter demand. Continued investment in rental assistance, eviction prevention, mediation, and flexible financial assistance can help households remain stably housed before a housing crisis occurs.

4. Expand Behavioral Health and Supportive Services

The high prevalence of serious mental illness and chronic homelessness highlights the importance of integrating housing with behavioral health services, healthcare, and case management. Strengthening partnerships across housing, healthcare, and human services systems can improve long-term housing outcomes for individuals with complex needs.

5. Support Families and Children

The increase in child homelessness underscores the importance of strengthening family shelter capacity, expanding rapid rehousing opportunities, and increasing access to affordable family-sized housing. Ensuring that children experience as little disruption as possible during periods of housing instability should remain a statewide priority.

6. Continue Using Data to Drive Decision-Making

The PIT Count is one component of Vermont's broader homeless response system. When combined with Homeless Management Information System (HMIS) data, Coordinated Entry information, Housing Needs Assessments, and local provider
experience, PIT Count data can help inform policy decisions, funding priorities, and program planning. Continued improvements in data quality and statewide collaboration will strengthen Vermont's ability to respond effectively to homelessness and measure progress over time.

Section 6. Subpopulations data

2026 VT PIT Summary By County

Program County	Addison	Bennington	Caledonia	Chittenden	Essex	Franklin	Grand Isle	Lamoille	Orange	Orleans	Rutland	Washington	Windham	Windsor	TOTAL
Total number of households	58	222	95	551	3	113	2	60	39	58	253	279	237	160	**2,130**
Households with at Least One Adult and One Child	3	45	9	100	3	26	0	7	0	8	57	35	47	44	**384**
2 members	0	12	3	35	1	14	0	0	0	3	15	14	17	12	**126**
3 members	2	23	3	36	1	8	0	4	0	3	21	9	15	17	**142**
4 members	0	6	2	15	0	3	0	2	0	0	9	5	8	8	**58**
5+ members	1	4	1	14	1	1	0	1	0	2	12	7	7	7	**58**
Households without Children	55	177	86	451	0	87	2	53	39	50	196	244	190	116	**1,746**
Households with Only Children	0	0	0	0	0	0	0	0	0	0	0	0	0	0	**0**
Total number of persons	67	361	126	834	11	169	3	84	49	81	434	407	373	287	**3,286**
Number of children (under age 18)	6	75	18	168	7	39	0	15	0	15	103	67	80	74	**667**
Number of young adults (age 18 to 24)	3	25	9	72	1	10	0	10	0	1	30	19	33	23	**236**
Adults (25-34)	16	66	19	129	2	23	0	6	5	13	59	64	50	42	**494**
Adults (35-44)	18	67	28	195	1	38	3	15	15	17	88	98	78	50	**711**
Adults (45-54)	10	53	21	138	0	26	0	18	12	15	73	68	64	44	**542**
Adults (55-64)	11	47	25	103	0	24	0	11	10	11	55	64	48	37	**446**
Adults (65+)	3	28	6	29	0	9	0	9	7	9	26	27	20	17	**190**
Adults (Unreported Age)	0	0	0	0	0	0	0	0	0	0	0	0	0	0	**0**
Unsheltered	16	7	11	113	0	12	3	0	0	14	12	8	64	24	**284**
Emergency Shelter	49	354	105	721	11	146	0	84	30	64	418	383	304	263	**2,932**
Motel/Hotel paid for by AHS	15	314	73	444	0	105	0	43	30	48	381	240	235	192	**2,120**
Motel/Hotel paid for by other sources	0	0	0	0	0	0	0	0	0	0	2	0	0	0	**2**
Transitional Housing for the Homeless	2	0	10	0	0	11	0	0	19	3	4	16	5	0	**70**
Unsheltered HH	15	7	10	103	0	11	2	0	0	8	10	8	58	21	**253**
Emergency Shelter HH	41	215	80	448	3	97	0	60	20	48	239	255	175	139	**1,820**
Motel/Hotel paid for by AHS HH	13	191	52	226	0	68	0	29	20	42	220	154	124	102	**1,241**
Motel/Hotel paid for by other sources HH	0	0	0	0	0	0	0	0	0	0	2	0	0	0	**2**
Transitional Housing for the Homeless HH	2	0	5	0	0	5	0	0	19	2	4	16	4	0	**57**
Sex	**Addison**	**Bennington**	**Caledonia**	**Chittenden**	**Essex**	**Franklin**	**Grand Isle**	**Lamoille**	**Orange**	**Orleans**	**Rutland**	**Washington**	**Windham**	**Windsor**	**TOTAL**
Female	16	122	50	227	6	71	1	25	9	34	118	117	135	87	**1,018**
Male	27	147	52	313	2	84	2	22	30	38	155	168	151	103	**1,294**
Missing	24	92	24	294	3	14	0	37	10	9	161	122	87	97	**974**
Gender	**Addison**	**Bennington**	**Caledonia**	**Chittenden**	**Essex**	**Franklin**	**Grand Isle**	**Lamoille**	**Orange**	**Orleans**	**Rutland**	**Washington**	**Windham**	**Windsor**	**TOTAL**
Women (Girl, if child)	23	145	55	317	3	69	1	39	15	34	169	157	153	117	**1,297**
Man (Boy, if child)	39	170	56	375	4	76	2	35	29	35	198	218	168	129	**1,534**
Culturally Specific Identity	0	0	0	0	0	0	0	0	0	0	0	0	0	0	**0**
Transgender	1	2	1	1	0	0	0	1	0	0	1	1	0	0	**8**
Non-Binary	1	1	0	3	1	1	0	0	0	0	0	2	3	2	**14**
Questioning	0	0	0	0	0	0	0	0	0	0	0	0	0	0	**0**
Different Identity	0	1	0	0	0	0	0	0	0	0	0	1	0	0	**2**
More Than One Gender	0	0	0	4	0	0	0	0	0	0	0	0	1	0	**5**
Includes Woman (Girl if child)	0	0	0	1	0	0	0	0	0	0	0	0	1	0	**2**
Includes Man (Boy if child)	0	0	0	3	0	0	0	0	0	0	0	0	1	0	**4**
Includes Culturally Specific Identity	0	0	0	0	0	0	0	0	0	0	0	0	0	0	**0**
Includes Transgender	0	0	0	4	0	0	0	0	0	0	0	0	1	0	**5**
Includes Non-Binary	0	0	0	0	0	0	0	0	0	0	0	0	0	0	**0**
Includes Questioning	0	0	0	0	0	0	0	0	0	0	0	0	0	0	**0**
Includes Different Identity	0	0	0	0	0	0	0	0	0	0	0	0	0	0	**0**
Missing	3	42	14	134	3	23	0	9	5	12	66	28	48	39	**426**

2026 VT PIT Summary By County

Race/Ethnicity	Addison	Bennington	Caledonia	Chittenden	Essex	Franklin	Grand Isle	Lamoille	Orange	Orleans	Rutland	Washington	Windham	Windsor	TOTAL
American Indian, Alaska Native, or Indigenous	0	2	0	5	0	7	0	0	0	2	3	5	2	1	**27**
American Indian, Alaska Native, or Indigenous & Hispanic/Latina/	0	0	0	1	0	0	0	0	0	0	0	1	0	0	**2**
Asian or Asian American	0	0	0	18	0	3	0	1	0	0	1	0	2	0	**25**
Asian or Asian American & Hispanic/Latina/e/o	0	0	0	0	0	0	0	0	0	0	0	0	0	0	**0**
Black, African American, or African	0	11	3	126	0	8	0	4	1	3	16	20	13	11	**216**
Black, African American, or African & Hispanic/Latina/e/o	0	0	0	20	0	4	0	0	1	1	0	5	2	0	**33**
Hispanic/Latina/e/o	0	0	5	16	0	1	0	1	1	3	1	10	2	7	**47**
Middle Eastern or North African	0	0	0	1	0	1	0	0	1	0	0	1	0	0	**4**
Middle Eastern or North African & Hispanic/Latina/e/o	0	0	0	0	0	0	0	0	0	0	0	0	0	0	**0**
Native Hawaiian or Pacific Islander	0	0	1	3	0	0	0	0	1	0	0	0	1	1	**7**
Native Hawaiian or Pacific Islander & Hispanic/Latina/e/o	0	1	0	1	0	0	0	0	0	0	1	0	0	0	**3**
White	64	332	112	596	11	140	3	76	43	71	400	342	330	247	**2,767**
White & Hispanic/Latina/e/o	0	1	0	14	0	0	0	0	0	0	4	12	4	6	**41**
Multi-Racial & Hispanic/Latina/e/o	0	0	1	5	0	0	0	0	0	0	2	1	2	1	**12**
Multi-Racial (not Hispanic/Latina/e/o)	3	14	4	28	0	5	0	2	1	1	6	10	15	13	**102**
No answer	0	0	0	0	0	0	0	0	0	0	0	0	0	0	**0**
Subpopulations	**Addison**	**Bennington**	**Caledonia**	**Chittenden**	**Essex**	**Franklin**	**Grand Isle**	**Lamoille**	**Orange**	**Orleans**	**Rutland**	**Washington**	**Windham**	**Windsor**	**TOTAL**
Chronically homeless HOUSEHOLDS	28	74	30	209	1	31	0	23	5	12	77	133	135	51	**809**
Chronically homeless persons	28	95	30	232	3	37	0	25	9	18	103	140	154	79	**953**
Veterans	0	3	3	20	0	1	0	2	18	2	14	20	5	4	**92**
DV households (Households with adults)	4	22	14	74	0	23	0	12	2	6	22	26	22	12	**239**
DV survivors (Adults Only)	4	23	14	75	0	23	0	12	2	6	24	28	25	13	**249**
Unaccompanied youth households	3	11	6	32	0	6	0	4	0	1	7	14	12	3	**99**
Parenting youth households	0	0	1	12	0	4	0	1	0	0	3	1	4	5	**31**
Disabilities	**Addison**	**Bennington**	**Caledonia**	**Chittenden**	**Essex**	**Franklin**	**Grand Isle**	**Lamoille**	**Orange**	**Orleans**	**Rutland**	**Washington**	**Windham**	**Windsor**	**TOTAL**
Physical Disability (Long-Term)	10	77	22	180	0	33	0	21	20	18	68	108	94	26	**677**
Developmental Disability	8	51	22	122	1	22	0	10	6	5	30	90	76	31	**474**
Mental Health (Severe and Persistent)	38	112	46	287	1	70	0	36	23	22	97	177	155	52	**1,116**
Chronic Substance Abuse (Alcohol and/or Drug)	14	34	30	180	2	31	2	18	16	1	41	89	98	24	**580**
Other Chronic Health Conditions (Long-Term)	14	84	8	185	0	28	0	21	18	8	46	129	97	33	**671**
Physical Disability (Long-Term) (Children)	0	4	0	5	0	1	0	0	0	0	4	3	2	2	**21**
Developmental Disability (Children)	0	20	4	32	2	1	0	7	0	1	10	16	20	11	**124**
Mental Health (Severe and Persistent) (Children)	0	8	3	17	2	3	0	2	0	1	3	11	7	3	**60**
Chronic Substance Abuse (Alcohol and/or Drug) (Children)	0	0	0	0	0	0	0	0	0	0	0	1	0	0	**1**
Other Chronic Health Conditions (Long-Term) (Children)	0	7	0	17	0	1	0	0	0	0	2	5	5	5	**42**
Length of Time Homeless	**Addison**	**Bennington**	**Caledonia**	**Chittenden**	**Essex**	**Franklin**	**Grand Isle**	**Lamoille**	**Orange**	**Orleans**	**Rutland**	**Washington**	**Windham**	**Windsor**	**TOTAL**
First Time Homeless	23	109	36	257	1	72	0	15	23	45	76	101	62	83	**903**
Less than one month*	1	60	9	178	0	30	0	7	1	7	94	46	66	53	**552**
One to three months*	4	60	10	123	5	26	0	17	5	8	95	73	62	42	**530**
Three months to one year*	20	113	66	205	4	54	3	26	17	38	96	105	67	89	**903**
One year or more*	42	128	41	328	2	59	0	34	26	28	149	183	178	103	**1,301**
First Time Homeless HH	23	87	30	210	0	55	0	15	20	36	61	76	49	58	**720**
Less than one month HH**	1	0	0	43	0	3	0	1	1	0	1	9	0	0	59
One to three months HH**	2	30	6	65	0	18	0	9	2	4	49	31	30	20	**266**
Three months to one year HH**	14	81	51	157	1	43	2	19	14	29	78	84	52	56	**681**
One year or more HH**	41	111	38	286	2	49	0	31	22	25	125	155	155	84	**1,124**

*Looks at individual people part of households

**Looks at the head of household

2026 VT PIT Summary by Local Coalition

Local CoC Code	Addison	Bennington	Franklin/Grand Isle	Lamoille	Northeast Kingdom	Orange/Windsor N	Rutland	S Windsor/ N Windham	Washington	Windham South	Chittenden	Totals
Total number of households	58	222	115	60	156	162	253	54	279	220	551	**2130**
Households with at Least One Adult and One Child	3	45	26	7	20	24	57	20	35	47	100	**384**
2 members	0	12	14	0	7	7	15	4	14	18	35	**126**
3 members	2	23	8	4	7	12	21	5	9	15	36	**142**
4 members	0	6	3	2	2	1	9	8	5	7	15	**58**
5+ members	1	4	1	1	4	4	12	3	7	7	14	**58**
Households without Children	55	177	89	53	136	138	196	34	244	173	451	**1746**
Households with Only Children	0	0	0	0	0	0	0	0	0	0	0	**0**
Total number of persons	67	361	172	84	218	244	434	114	407	351	834	**3286**
Number of children (under age 18)	6	75	39	15	40	37	103	38	67	79	168	**667**
Number of young adults (age 18 to 24)	3	25	10	10	11	11	30	13	19	32	72	**236**
Adults (25-34)	16	66	23	6	34	38	59	10	64	49	129	**494**
Adults (35-44)	18	67	41	15	46	52	88	22	98	69	195	**711**
Adults (45-54)	10	53	26	18	36	45	73	20	68	55	138	**542**
Adults (55-64)	11	47	24	11	36	40	55	7	64	48	103	**446**
Adults (65+)	3	28	9	9	15	21	26	4	27	19	29	**190**
Adults (Unreported Age)	0	0	0	0	0	0	0	0	0	0	0	**0**
Unsheltered	16	7	15	0	25	15	12	0	8	73	113	**284**
Emergency Shelter	49	354	146	84	180	210	418	114	383	273	721	**2932**
Motel/Hotel paid for by AHS	15	314	105	43	121	173	381	78	240	206	444	**2120**
Motel/Hotel paid for by other sources	0	0	0	0	0	0	2	0	0	**0**	0	**2**
Transitional Housing for the Homeless	2	0	11	0	13	19	4	0	16	5	0	**70**
Unsheltered HH	15	7	13	0	18	13	10	0	8	66	103	**253**
Emergency Shelter HH	41	215	97	60	131	130	239	54	255	150	448	**1820**
Motel/Hotel paid for by AHS HH	13	191	68	29	94	108	220	39	154	99	226	**1241**
Motel/Hotel paid for by other sources HH	0	0	0	0	0	0	2	0	0	0	0	**2**
Transitional Housing for the Homeless HH	2	0	5	0	7	19	4	0	16	4	0	**57**
Sex	**Addison**	**Bennington**	**Franklin/Grand Isle**	**Lamoille**	**Northeast Kingdom**	**Orange/Windsor N**	**Rutland**	**S Windsor/ N Windham**	**Washington**	**Windham South**	**Chittenden**	**Totals**
Female	16	122	72	25	90	60	118	42	117	129	227	**1018**
Male	27	147	86	22	92	100	155	42	168	142	313	**1294**
Missing	24	92	14	37	36	84	161	30	122	80	294	**974**
Gender	**Addison**	**Bennington**	**Franklin/Grand Isle**	**Lamoille**	**Northeast Kingdom**	**Orange/Windsor N**	**Rutland**	**S Windsor/ N Windham**	**Washington**	**Windham South**	**Chittenden**	**Totals**
Women (Girl, if child)	23	145	70	39	92	91	169	49	157	145	317	**1297**
Man (Boy, if child)	39	170	78	35	95	117	198	51	218	158	375	**1534**
Culturally Specific Identity	0	0	0	0	0	0	0	0	0	0	0	**0**
Transgender	1	2	0	1	1	0	1	0	1	0	1	**8**
Non-Binary	1	1	1	0	1	2	0	0	2	3	3	**14**
Questioning	0	0	0	0	0	0	0	0	0	0	0	**0**
Different Identity	0	1	0	0	0	0	0	0	1	0	0	**2**
More Than One Gender	0	0	0	0	0	0	0	0	0	1	4	**5**
Includes Woman (Girl if child)	0	0	0	0	0	0	0	0	0	1	1	**2**
Includes Man (Boy if child)	0	0	0	0	0	0	0	0	0	1	3	**4**
Includes Culturally Specific Identity	0	0	0	0	0	0	0	0	0	0	0	**0**
Includes Transgender	0	0	0	0	0	0	0	0	0	1	4	**5**
Includes Non-Binary	0	0	0	0	0	0	0	0	0	0	0	**0**
Includes Questioning	0	0	0	0	0	0	0	0	0	0	0	**0**
Includes Different Identity	0	0	0	0	0	0	0	0	0	0	0	**0**
Missing	3	42	23	9	29	34	66	14	28	44	134	**426**

2026 VT PIT Summary by Local Coalition

Race/Ethnicity	Addison	Bennington	Franklin/Grand Isle	Lamoille	Northeast Kingdom	Orange/Windsor N	Rutland	S Windsor/ N Windham	Washington	Windham South	Chittenden	Totals
American Indian, Alaska Native, or Indigenous	0	2	7	0	2	1	3	1	5	1	5	**27**
American Indian, Alaska Native, or Indigenous & Hispanic/Latina/e/o	0	0	0	0	0	0	0	0	1	0	1	**2**
Asian or Asian American	0	0	3	1	0	0	1	0	0	2	18	**25**
Asian or Asian American & Hispanic/Latina/e/o	0	0	0	0	0	0	0	0	0	0	0	**0**
Black, African American, or African	0	11	8	4	6	10	16	3	20	12	126	**216**
Black, African American, or African & Hispanic/Latina/e/o	0	0	4	0	1	1	0	0	5	2	20	**33**
Hispanic/Latina/e/o	0	0	1	1	8	8	1	0	10	2	16	**47**
Middle Eastern or North African	0	0	1	0	0	1	0	0	1	0	1	**4**
Middle Eastern or North African & Hispanic/Latina/e/o	0	0	0	0	0	0	0	0	0	0	0	**0**
Native Hawaiian or Pacific Islander	0	0	0	0	1	2	0	0	0	1	3	**7**
Native Hawaiian or Pacific Islander & Hispanic/Latina/e/o	0	1	0	0	0	0	1	0	0	0	1	**3**
White	64	332	143	76	194	206	400	100	342	314	596	**2767**
White & Hispanic/Latina/e/o	0	1	0	0	0	3	4	3	12	4	14	**41**
Multi-Racial & Hispanic/Latina/e/o	0	0	0	0	1	0	2	1	1	2	5	**12**
Multi-Racial (not Hispanic/Latina/e/o)	3	14	5	2	5	12	6	6	10	11	28	**102**
No answer	0	0	0	0	0	0	0	0	0	0	0	**0**
Subpopulations	**Addison**	**Bennington**	**Franklin/Grand Isle**	**Lamoille**	**Northeast Kingdom**	**Orange/Windsor N**	**Rutland**	**S Windsor/ N Windham**	**Washington**	**Windham South**	**Chittenden**	**Totals**
Chronically homeless HOUSEHOLDS	28	74	31	23	43	53	77	22	133	116	209	**809**
Chronically homeless persons	28	95	37	25	51	64	103	31	140	147	232	**953**
Veterans	0	3	1	2	5	20	14	1	20	6	20	**92**
DV households (Households with adults)	4	22	23	12	20	11	22	8	26	17	74	**239**
DV survivors (Adults Only)	4	23	23	12	20	11	24	10	28	19	75	**249**
Unaccompanied youth households	3	11	6	4	7	1	7	2	14	12	32	**99**
Parenting youth households	0	0	4	1	1	1	3	4	1	4	12	**31**
Disabilities	**Addison**	**Bennington**	**Franklin/Grand Isle**	**Lamoille**	**Northeast Kingdom**	**Orange/Windsor N**	**Rutland**	**S Windsor/ N Windham**	**Washington**	**Windham South**	**Chittenden**	**Totals**
Physical Disability (Long-Term)	10	77	33	21	40	36	68	15	108	89	180	**677**
Developmental Disability	8	51	22	10	28	31	30	8	90	74	122	**474**
Mental Health (Severe and Persistent)	38	112	70	36	69	57	97	28	177	145	287	**1116**
Chronic Substance Abuse (Alcohol and/or Drug)	14	34	33	18	33	30	41	20	89	88	180	**580**
Other Chronic Health Conditions (Long-Term)	14	84	28	21	16	38	46	16	129	94	185	**671**
Physical Disability (Long-Term) (Children)	0	4	1	0	0	1	4	1	3	2	5	**21**
Developmental Disability (Children)	0	20	1	7	7	8	10	3	16	20	32	**124**
Mental Health (Severe and Persistent) (Children)	0	8	3	2	6	0	3	2	11	8	17	**60**
Chronic Substance Abuse (Alcohol and/or Drug) (Children)	0	0	0	0	0	0	0	0	1	0	0	**1**
Other Chronic Health Conditions (Long-Term) (Children)	0	7	1	0	0	2	2	3	5	5	17	**42**
Length of Time Homeless	**Addison**	**Bennington**	**Franklin/Grand Isle**	**Lamoille**	**Northeast Kingdom**	**Orange/Windsor N**	**Rutland**	**S Windsor/ N Windham**	**Washington**	**Windham South**	**Chittenden**	**Totals**
First Time Homeless	23	109	72	15	82	85	76	24	101	59	257	**903**
Less than one month*	1	60	30	7	16	29	94	25	46	66	178	**552**
One to three months*	4	60	26	17	23	38	95	10	73	61	123	**530**
Three months to one year*	20	113	57	26	108	79	96	43	105	51	205	**903**
One year or more*	42	128	59	34	71	98	149	36	183	173	328	**1301**
First Time Homeless HH	23	87	55	15	66	64	61	16	76	47	210	**720**
Less than one month HH**	1	0	3	1	0	1	1	0	9	0	43	**59**
One to three months HH**	2	30	18	9	10	18	49	2	31	32	65	**266**
Three months to one year HH**	14	81	45	19	81	59	78	24	84	39	157	**681**
One year or more HH**	41	111	49	31	65	84	125	28	155	149	286	**1124**

*Looks at individual people part of households

**Looks at the head of household

Section 7. Additional Resources

- Archived Vermont PIT Reports
  https://helpingtohousevt.org/pointintime/
- Point-in-Time Count Methodology (HUD)
  https://www.hudexchange.info/resource/4036/point-in-time-count-methodology-guide/
- Shelter, CE and homelessness data through ICA
  https://icalliances.org/vermont-data-and-reports
- Shelter, GA, monthly homelessness reports through VT DCF
  https://dcf.vermont.gov/Addressing-and-Preventing-Unsheltered-Homelessness#Data
- Act 143 of 2026. Vermont Homelessness Response Continuum (VHRC)
  https://dcf.vermont.gov/oeo/programs/VHRC
- Building Bright Futures: The State of Vermont's Children: 2025 Year in Review
  https://www.buildingbrightfutures.org/data-page/state-of-vermonts-children/
- Vermont Housing Needs Assessment: 2025-2029
  https://vhfa.org/sites/default/files/publications/VT-HNA-2025.pdf
- 2026 NLIHC Out of Reach report
  https://nlihc.org/oor