

Office of Economic Opportunity Family Supportive Housing Program Annual Report: State Fiscal Year 2026

The Family Supportive Housing (FSH) program works to reduce both the incidence and duration of family homelessness in Vermont by helping families with minor children secure and maintain affordable housing. Through intensive, in-home case management and coordinated services, FSH supports families to transition out of homelessness and build long-term stability. In SFY24, the Vermont Legislature significantly increased funding for FSH, nearly doubling its capacity. This most recent expansion marked a major milestone, transforming FSH into a truly statewide initiative and a key strategy in addressing family homelessness in Vermont. The following is a summary of the statewide successes and challenges, compiled from data and narratives provided by the local agencies that carry out the work.

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Executive Summary

In State Fiscal Year 2026 (SFY2026), the Family Supportive Housing (FSH) program operated statewide and supported **489 households** through intensive, flexible outreach case management. The program sustained **31 staff positions** across **11 community partner agencies**, allowing families across Vermont to access coordinated services aimed at securing and maintaining stable housing.

Drawing on reports from FSH partner organizations, data shows continued progress in reducing the duration of homelessness while also highlighting challenges related to limited access to subsidies and housing. Families spent a median of **335 days** homeless before securing permanent housing, secured housing in a median of **80 days** after enrolling, and maintained that housing for a median of **474 days** while still in the program. Of households housed at the end of the year, **76.4%** were current on rent and **80.9%** were identified as in good standing with their landlord. Rental support, including Section 8, Rapid Re-Housing, project-based vouchers, and affordable housing options, continued to play a central role in stability, alongside increasing family income.

Providers reported strong engagement in case management, home visits, and collaboration with partner agencies. At the same time, providers reported challenges such as limited housing stock, rising rental costs, stricter landlord screening requirements, behavioral health symptoms, and reduced access to rental subsidies.

Despite these pressures, **74%** of program exits were successful, demonstrating meaningful progress toward stability for many households. This report summarizes statewide capacity, housing outcomes, wellbeing indicators, engagement measures, and provider reported challenges and strengths for SFY2026.

Program Summary

The Family Supportive Housing (FSH) program helps families with minor children exit homelessness and build long-term stability through intensive, flexible case management focused on the entire family. Service coordinators work with families, referred to the program through Coordinated Entry, to create achievable goals across multiple domains and tailor support to each household's needs.

FSH operates through a statewide network of 11 community partner agencies. Providers collaborate with housing and resource organizations within their communities and statewide. This cross-sector collaboration strengthens access to rental units, expands available support, and helps families navigate complex housing systems.

The program uses a trauma informed, strengths-based model that emphasizes relationship building, skill development, housing retention, and coordinated service planning. Providers meet with families in their homes and communities. They offer help

navigating rental processes, tenancy support, financial coaching, and referrals to behavioral health, childcare, employment, and early learning services.

FSH Staffing and Caseload Capacity 2026

In SFY2026, FSH operated through 11 community partner agencies across the state, supporting **31 staff positions** responsible for intensive case management and housing support. Each service coordinator maintains a caseload between 12-15 households.

This distributed network allowed families across Vermont to access consistent program support, regardless of location, and strengthened statewide alignment in implementing the FSH model.¹

FSH Partners Staffing and Caseload Capacity 2026

FSH Partners	Staffing Capacity	Caseload Capacity
Winston Prouty Center (Brattleboro)	3	36-45
COTS (Burlington)	5	60-75
Homeless Prevention Center (Rutland)	4	48-60
Upper Valley Haven (Hartford)	2	24-30
Northeast Kingdom Community Action (NEK)	3	36-45
Family Center of Washington County (Barre)	5	60-75
Sunrise Family Resource Center (Bennington)	3	36-45
Pathways Vermont (St. Albans)	3	36-45
Springfield Supported Housing	1	12-15
United Way of Lamoille County	1	12-15
John Graham Housing & Services (Addison)	1	12-15

¹ [State Fiscal Year 2026 Awards Summary](#)

TOTALS

31

372-465

Key Achievements & Impact Highlights

In SFY26, providers helped families secure permanent housing, improve landlord relationships, access rental subsidies, and maintain housing stability over time.

Key statewide highlights include:

- Improved access to permanent housing for families experiencing homelessness.
- Timeframes showed families accessing housing more quickly once entering FSH.
- Increased rent compliance and landlord standing among program participants.
- Strong participation in rental assistance programs and other supports that promote housing retention.
- High rates of successful exits, demonstrating families' ability to sustain stability or transition to other supports when ready.

Together, these outcomes reflect a statewide program that is increasing housing stability, supporting financial wellbeing, and expanding coordinated housing access for families experiencing homelessness.

Housing Stability Outcomes

Housing stability remained a core focus of the Family Supportive Housing (FSH) program throughout SFY2026. Statewide data show that once entering the program, families entered housing, maintained stability, and accessed a range of support that helped reduce episodes of homelessness. At the end of the year, most families were stably housed, while others remained at risk, imminently homeless, or experiencing

literal homelessness. Figure 1 summarizes statewide housing status for active families.

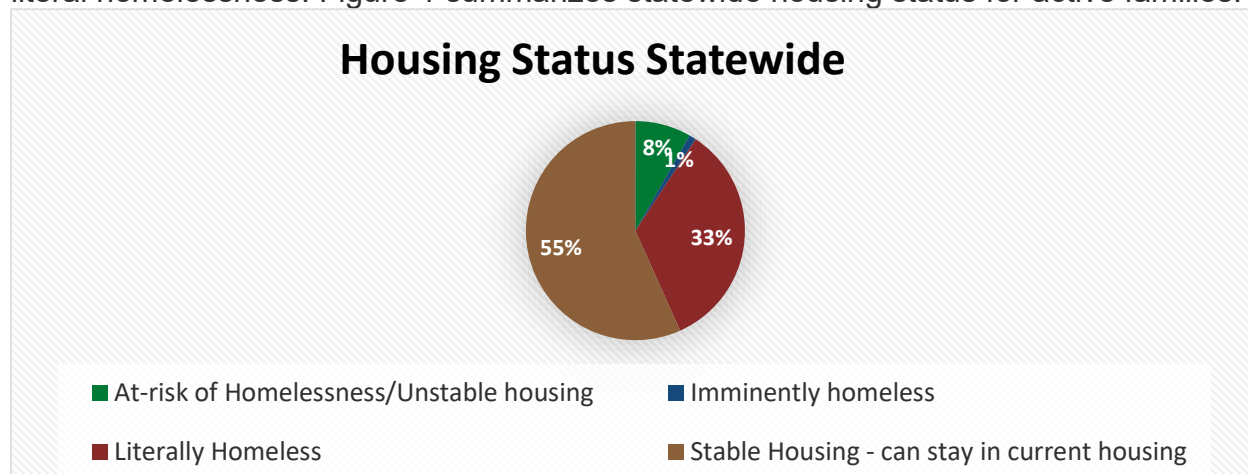


Figure 1: Housing Status among active FSH families in State Fiscal Year 2026 (SFY26). At-risk of homelessness (8%), Imminently Homeless (1%), Literally Homeless (33%), and Stable Housing – can stay in current housing (55%).

Families spent a median of **335 days** experiencing homelessness before securing permanent housing. After enrolling in FSH, families obtained housing in a median of **80 days** and maintained that housing for a median of **474 days** while still in the program, highlighting how coordinated support accelerates progress toward stability.

Rental assistance programs continued to play an important role in supporting stability. Families accessed a range of subsidies, including Rapid Re-Housing, Section 8, affordable housing units, transitional housing, and state-funded rental support, while others increased income enough to pay full rent independently. Figure 2 shows the distribution of rental support used by stably housed families.



Figure 2: Rental Assistance Types: (14%), RRH Subsidy (13%), Family Unification Voucher (12%), Section 8 Voucher (12%), Full Rent (7%), Public Housing (4%), Transitional Housing (5%), Vermont Rental Subsidy (5%).

Providers also monitored rent compliance and landlord standing as indicators of tenancy success. Statewide, most families remained current on rent (**76.4%**) and maintained positive landlord relationships (**80.9%**). These indicators, combined with narrative examples from partner agencies, show that families benefit from targeted supports that help resolve barriers, address rental debt, and strengthen communication with landlords.

Exit outcomes provided additional insight into housing stability. Successful exits occurred when families no longer required FSH services or transitioned to other supports. Unsuccessful exits occurred when housing instability persisted. Figure 3 shows statewide exit outcomes, indicating that most families exited successfully after sustaining housing for several months.

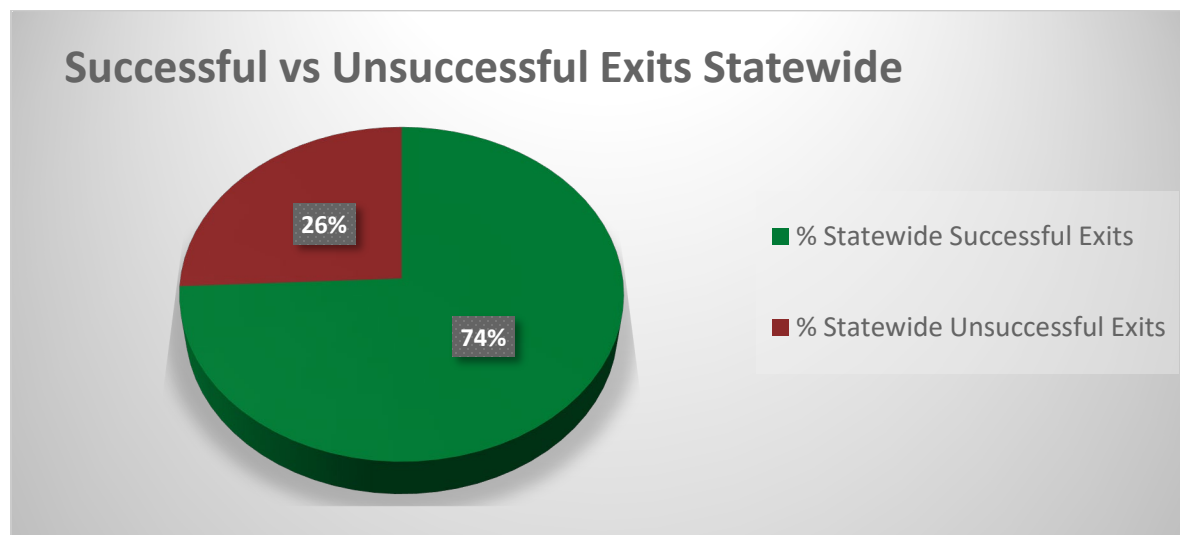


Figure 3: Exit Data: successful exits (74%) and unsuccessful exits (26%).

Families who were successfully exited remained in the program a median of **333** days and those who were unsuccessfully exited remained a median number of **195** days.

Narratives from partner agencies, like this one from Upper Valley Haven, illustrate how coordinated efforts help families navigate crises, resolve rental arrears, and maintain stability. These examples demonstrate the value of targeted financial support, case management, and cross-agency collaboration.

A single parent participating in the Family Supportive Housing (FSH) Program demonstrated remarkable resilience when an unexpected medical emergency resulted in several months without income. Although he was employed, the loss of income caused him to fall behind on rent and face the possibility of eviction for himself and his child.

The FSH Service Coordinator worked closely with the client to assess his situation, develop a plan, and connect him with available resources. The client applied for Housing Opportunity Program (HOP) financial assistance; however, because he was more than three months behind on rent, additional funding sources were needed to cover the remaining balance owed to the landlord. Through collaboration with local community partners, the Service Coordinator secured supplemental financial assistance to meet the outstanding amount required. This coordinated effort allowed the client to qualify for HOP funding, and rental assistance was delivered to the landlord just one day before the family would have been evicted.

As a result of these combined housing retention efforts, the family was able to remain safely housed and avoid recurrent homelessness. Since resolving the immediate housing crisis, the client has returned to work and has taken proactive steps to strengthen his financial stability. He utilized his income tax refund to pay rent in

advance and enrolled in a savings plan through the Family Supportive Housing Program. The client continues to maintain stable housing and is building a stronger financial foundation for himself and his child.

Family Well-Being and Support Outcomes

Family wellbeing is central to long-term housing stability. FSH providers support children's safety and health, strengthen adult wellbeing, and help families build financial resilience. Statewide indicators reflect improvements across multiple domains.

Child Health and Safety

FSH tracks child safety through involvement with the Department for Children and Families (Family Services Division). In SFY2026, fewer families had active Family Services cases at the end of the fiscal year, **21.32%**, than at enrollment, **30.25%**, and several children returned safely to their families, **44 children**.

Children's health improved across several measures. Most children in FSH were up to date on pediatric well-child checks by the end of SFY2026, **94.93%**, reflecting strong coordination with medical providers and family engagement in preventive care.

Behavioral health supports also increased. A growing percentage of children were enrolled in mental health services by the end of the year, **19.55%**, demonstrating improved access to trauma informed behavioral health supports.

Childcare availability remained an important stability factor, especially for families with children under age six. Across the statewide caseload, many children were enrolled in childcare at enrollment, **36.64%**, additional children enrolled during the year, **6.85%**, and many maintained participation, **42.62%**. Childcare supports consistent routines, increased safety, and early learning opportunities.

FSH also monitored hunger-related needs. Many families reported food insecurity at enrollment, **34.81%**, and statewide screening showed a decrease by year's end, **29.11%**.

A narrative example [edited for privacy] from Sunrise Family Resource Center illustrates how coordinated work between shelter partners, FSH staff, DCF, and therapeutic providers helped reunify a mother with her children and secure housing, a powerful demonstration of how child safety, family wellbeing, and housing stability intersect.

A mother and one of her children were experiencing homelessness in a motel under the GA program. Compounding this, her other two children had been placed in the foster care system in another state and had remained there for years prior to our involvement with the family. The mom had been attempting to have the case

transferred back to Vermont as Vermont had completed their initial investigation and determined the allegations of abuse were unfounded. The other state put up multiple barriers and requirements to moving forward. FSH collaborated with the local homeless coalition to secure placement in a family shelter and connected the mother to therapy and a parenting course. For nearly a year in shelter, FSH provided ongoing stabilization, housing readiness and emotional support to prepare the family for independent living. After four years of separation and a year of diligent work in the shelter, the family is finally reunited with no DCF involvement. At the time of this writing, the mother was informed she was approved for a unit with a project-based voucher, allowing this resilient family to move into a permanent, stable home of their own.

Adult Health and Wellbeing

FSH providers tracked adult behavioral health needs, including substance use concerns, treatment participation, and access to mental health services. Statewide, **20.02%** of adults identified substance misuse at enrollment, compared to **17.12%** at the end of the fiscal year. Nearly one-fifth of adults were enrolled in mental health services at year's end, **19.26%**.

The following narrative from Pathways Vermont illustrates how provider agencies support adult health and wellbeing by addressing both housing needs and substance use or mental health concerns:

A program participant and their family were experiencing homelessness and staying in a motel. The family was navigating multiple stressors, including financial instability, transportation barriers, health challenges, mental health and substance use concerns, and involvement with child welfare services. Early in the program, the family experienced challenges maintaining consistent communication with service providers due to the significant stressors they were navigating. Despite these challenges the family remained engaged with their goals of increasing income, strengthening stability, and securing permanent housing.

With support from the FSH service team, the family applied for Reach Up and connected with their Reach Up worker. The FSH coordinator helped establish consistent communication among providers, supported the family in maintaining access to benefits, assisted with transportation-related resources and obtaining identification documents, and helped prepare the family for upcoming housing opportunities.

Additional collaboration included the Department for Children and Families (DCF) and Community Action. DCF and FSH coordinators maintained consistent communication to support the family's goals, safety planning, and access to resources. During this

time, the parents connected with resources related to substance use recovery, overall health, and family well-being.

The team worked collaboratively and communicated consistently about available housing opportunities. When the family was given the opportunity to apply for affordable housing, the family successfully completed the application process and gathered required identification and income documentation within a time-sensitive timeframe.

Through these coordinated efforts, the family successfully leased their own apartment and has remained stably housed. The family continues to build financial stability, is accessing psychiatric and medical support, and is actively pursuing employment opportunities. This transition represents a significant milestone after experiencing periods of homelessness and housing instability.

Financial Wellbeing

Financial stability is essential to sustaining housing. Providers reported improvements in household income, employment participation, budgeting skills, savings, and debt reduction.

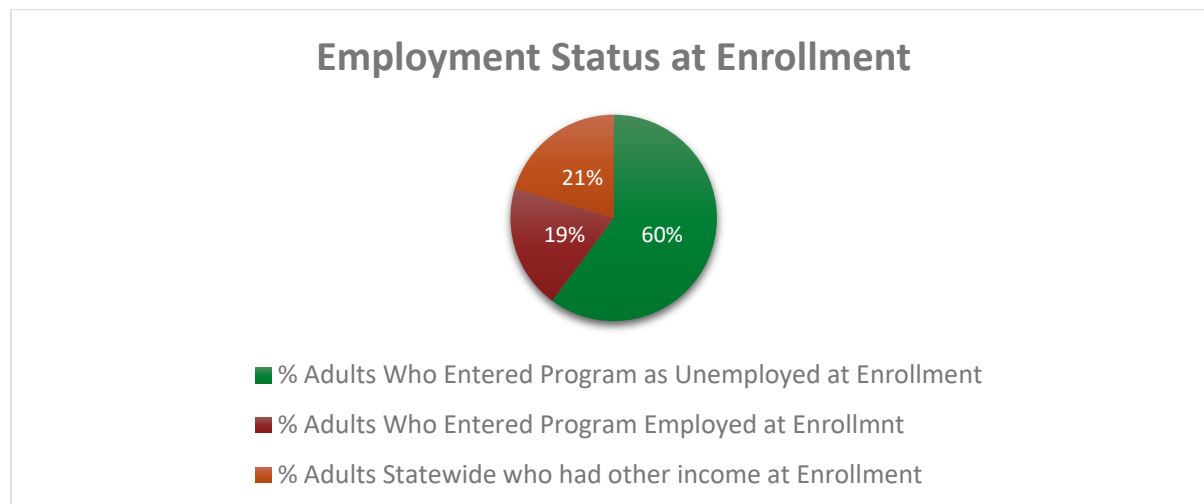


Figure 4: Employment Status of Adults at Enrollment: 60% of adults entered the program as unemployed, 19% as unemployed, and 21% entered with another source of income at enrollment.

Of these, **69%** employed adults maintained employment and **11%** of those unemployed at enrollment, reported employment at the end of the SFY.

Reach Up remained a key economic partner. Many families enrolled, **45.54%**, or remained enrolled, **50.04%**, in Reach Up during the fiscal year, strengthening access to income supports and coordinated case planning.

Families also demonstrated progress in budgeting skills, debt reduction, and savings increases. More than half of families used personal budgets, **59.66%**, one-third paid down debt, **32.02%**, and many increased savings through FSH-supported tools, **17.71%**. Just over **20 percent** of families increased their overall financial capability scores.

This narrative from COTS illustrates how housing placement can lead to employment opportunities, and how service coordinators prepared families to secure income sources that contributed to long-term stability.

Quickly after enrolling a new FSH family, our service coordinator identified that while the household had applied to multiple housing waitlists, they were not eligible to move forward due to concerns of a large back-debt related to housing that the family had incurred. Through collaboration with partners, and focused strategies with the family, the barrier was removed. Two months later the family was identified for an apartment through Coordinated Entry and leased up. They are now settling into their new home nicely.

Though finding housing was the most urgent need of the family at the time of enrollment, the head of household also shared that he was looking for employment during his FSH intake meeting. While processing this goal with the service coordinator at subsequent meetings, he decided that he would prefer to wait until he felt more stable and that he would begin a job search once he was housed. The service coordinator supported this decision and agreed to circle back to the goal once the family had moved into an apartment. Ultimately, the head of household was offered a job with an organization that was involved in their move into their new home.

Program Engagement and Social Supports

Program engagement remained strong across the statewide caseload. Most families regularly engaged in case management and participated in their service plans, **74.26%**. Home visits played an essential role in building trust and understanding family needs. In SFY2026, **71.59%** of active families received at least one home visit per month as part of ongoing stabilization and service coordination.

Statewide, social support networks also improved. Many families, **13.55%**, increased their Social Supports Score during SFY2026, demonstrating strengthened connections to informal supports, community networks, and extended resources.

Together, these indicators show how engagement and social support contribute to family resilience and long-term stability.

Partnership and Systems Coordination

FSH relies on a statewide network of partners that help families secure and maintain stable housing. These relationships improve consistency across regions and strengthen support for families with complex needs. Training, data support, and consultation also help build statewide capacity and improve overall service delivery.

Coordinated Housing Partnerships

FSH uses the statewide Coordinated Entry (CE) system to identify and prioritize families for enrollment. FSH CE prioritization is based on three criteria: children under age six, involvement with DCF Family Services, and the length or chronicity of homelessness. These criteria help ensure that families with the highest needs receive timely access to FSH support. Collaboration with CE partners promotes consistent prioritization across regions and strengthens placement decisions.

FSH also works with housing organizations and landlords across Vermont to increase access to safe, affordable units. Memoranda of Understanding (MOUs) support coordinated placements and clear communication. Service coordinators help resolve concerns, facilitate communication, and support families in maintaining stable housing. These partnerships expand available housing options and strengthen statewide alignment in housing practices.

Cross Agency Service Coordination

FSH service coordinators work across several systems to support families with complex needs. They maintain regular communication with Reach Up, DCF Family Services, behavioral health providers, and early childhood partners. This coordination helps families navigate services more easily, reduce duplication, and improves access to behavioral health support, parenting resources, financial assistance, and early learning programs.

Cross-agency coordination continues to grow as a statewide priority. Families often work with many providers, and clear communication and shared planning are essential. Strengthening these pathways supports more seamless service delivery and improves housing stability and wellbeing for families. Together, these partnerships expand access to housing and strengthen the systems families rely on as they work toward long-term stability. This narrative from John Graham Housing & Services shows how coordinated support can help families work through barriers and move into stable housing.

We had a family come into shelter in 2025 after fleeing domestic violence in another part of the country. We connected them with the local DV agency to initiate entrance to services. FSH worked with the family to find parenting classes/support and counseling, access local resources for food/clothing, and fill out housing and funding applications. We collaborated with DCF and Easterseals to best support the family. As stability for the family increased, they were able to seek employment and increase independent income. After many months in shelter, they had the opportunity for a local apartment through landlord partnerships. This family is now able to fully start fresh in their own space, paid for with employment income, and work toward their ultimate goals of owning a home and starting a business.

System Training, Consultation, and Practice Improvement

FSH maintained statewide practice in SFY26 through monthly practice guidance, quarterly supervisor meetings, and in-person Communities of Practice. These activities support consistent implementation of the FSH model and provide structured opportunities for shared learning. The final version of the FSH Data Manual was introduced in SFY26 and is now used to review data, evaluate statewide trends, and shape priorities for SFY27. The program also used external consultation to improve the monitoring process and support more consistent review of documentation and data practices. Together, these efforts reinforce trauma informed practice, support documentation standards, and help align statewide service delivery.

Key Challenges Identified

Vermont's housing crisis² continued to create significant barriers for families in SFY26. Very low vacancy rates, rising rents, and a shortage of affordable subsidies and units made it difficult for families to secure sustainable housing. Providers report that landlords responded to market pressures by increasing screening requirements, including higher income thresholds, stricter credit criteria, and more restrictive pet policies. These practices limited access for families with low incomes or unstable rental histories. Rental subsidies also remained limited. Section 8 Housing Choice Vouchers and state subsidies were in short supply, and the planned termination of short- and medium-term rental assistance may place several families at risk of returning to homelessness.

² <https://accd.vermont.gov/housing/plans-data-rules/needs-assessment>

Agencies reported that unsheltered homelessness increased. Families who could not afford high motel rates often relied on vehicles, camping, or temporary arrangements with friends or relatives. FSH teams had to stay flexible and continue offering support wherever families were staying to reduce service disconnection and maintain stability.

Families entering FSH often present with complex needs that require support from multiple systems. Providers report that trauma, presentations of mental health challenges and substance misuse, childcare access issues, and financial insecurity can lengthen the time families remain unhoused and make service coordination more intensive. They shared that long waitlists for childcare subsidies and mental health services create secondary barriers that delay employment and affect family wellbeing. Partner agencies also reported challenges supporting immigrant and refugee households because benefit eligibility rules continue to change, making it harder to determine which supports families can access.

Engagement in a voluntary program can be difficult for families navigating unstable circumstances. Missed appointments and inconsistent communication require service coordinators to use flexible, person-centered strategies, such as varied meeting locations, multiple communication options, and multi-agency collaboration, to help families stay engaged with their service plans.

Capacity constraints across the Family Supportive Housing statewide network of providers add further pressure. Staffing shortages, and turnover limit agencies' ability to maintain intensive case management. Administrative responsibilities related to documentation, data quality, and monitoring also add to provider workload. Together, these challenges strain the statewide system and can slow families' progress toward long-term housing stability.

Program Strengths

FSH providers use a consistent statewide model and continue to strengthen implementation through regular practice guidance, supervisor meetings, and Communities of Practice. These activities give teams a chance to learn together, discuss challenges, and reinforce shared expectations.

Coordinated Entry remains an important strength. It helps identify families with the highest needs and supports timely access to housing opportunities. FSH staff work with CE partners to resolve barriers, support accurate prioritization, and coordinate movement through CE phases.

FSH has also improved statewide alignment through updates to the Data Manual, external consultation, and routine monitoring. These efforts support consistent documentation, help agencies review trends, and guide adjustments to practice.

The program continues to respond to emerging needs. As family situations, local housing markets, or service systems shift, staff adjust case plans and respond quickly to new concerns. This flexibility helps families receive timely support and keeps the model effective in a changing environment.

Together, these strengths contribute to a stable statewide infrastructure. They promote coordinated service delivery and help ensure that families can access the support needed to achieve long-term housing stability.

Looking Ahead to SFY27

In SFY27, FSH will focus on clarifying and updating as needed the Family Supportive Housing Program Manual to strengthen statewide alignment and support consistent practice. Any updates will reflect lessons learned during SFY26 and will incorporate feedback collected through practice guidance, supervisory meetings, Communities of Practice, and feedback from community partners and advisors.

FSH will also work to make all public program materials more accessible as part of the statewide initiative. This includes ensuring that people with differing abilities can use tools that support access, such as screen readers and other adaptive technologies.

Annual site visits will remain a key part of statewide practice, and FSH will update the site visit process to align with policies and monitoring expectations. These visits will give agencies targeted support and help reinforce the statewide model.

SFY27 has promise to allow for increased access to rental assistance compared to the previous year, and agencies will focus on using these opportunities to further support housing access.

Together, these priorities will strengthen statewide infrastructure, improve consistency across regions, and support providers as they help families work toward long-term housing stability.