

# Chapter 9 : Households with special needs and unique challenges

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Several types of Vermont households require service-enriched housing due to their unique needs. These include people with a disability, frail elders, people exiting the corrections system, victims of domestic violence, and people living with HIV/AIDS--groups of Vermonters who, while not homeless, have unmet needs for more supportive housing conditions. This chapter also describes the complex housing challenges facing mobile homeowners and migrant farm workers.

Some Vermonters with mental health challenges or substance use disorder have needs warranting residentially-based care and services. These needs were determined to be beyond the scope of this assessment.

## Vermonters with a disability

An estimated 88,112 adult Vermonters, or 14.2% of the population, report having at least one type of disability. Disability rates are higher among older adults. Thirty-three percent of adults over the age of 65 have a disability, compared to around 12% for younger households. That number rises to nearly 49% for individuals age 75 or older. Vermont has slightly higher rates of disability among younger people and slightly lower rates among older people than the U.S. as a whole. Nationally, 9% of adults age 18-64 and 35% age 65 or older, have a disability<sup>1</sup>.

**Figure 9-1: Vermont adult population with a disability by age**

Disability	Population age 18-64 with disability	% of population	Population age 65+ with disability	% of population
Any disability	46,238	11.8%	35,162	33.1%
Ambulatory	19,013	4.8%	20,208	19.0%
Hearing	10,518	2.7%	16,661	15.7%
Vision	6,643	1.7%	5,583	5.3%
Cognitive	22,172	5.6%	8,373	7.9%
Self-care	7,090	1.8%	7,365	6.9%
Independent living	15,452	3.9%	13,221	12.4%

Source: U.S. Census Bureau: American Community Survey 5-year estimates, 2013-2017 (Table S1810)

The Vermont Department of Health notes that disability rates are slightly higher among male Vermonters, as well as non-White Vermonters and LGBT Vermonters<sup>2</sup>.

<sup>1</sup> U.S. Census Bureau: American Community Survey 5-year estimates, 2013-2017 (Table S1810)

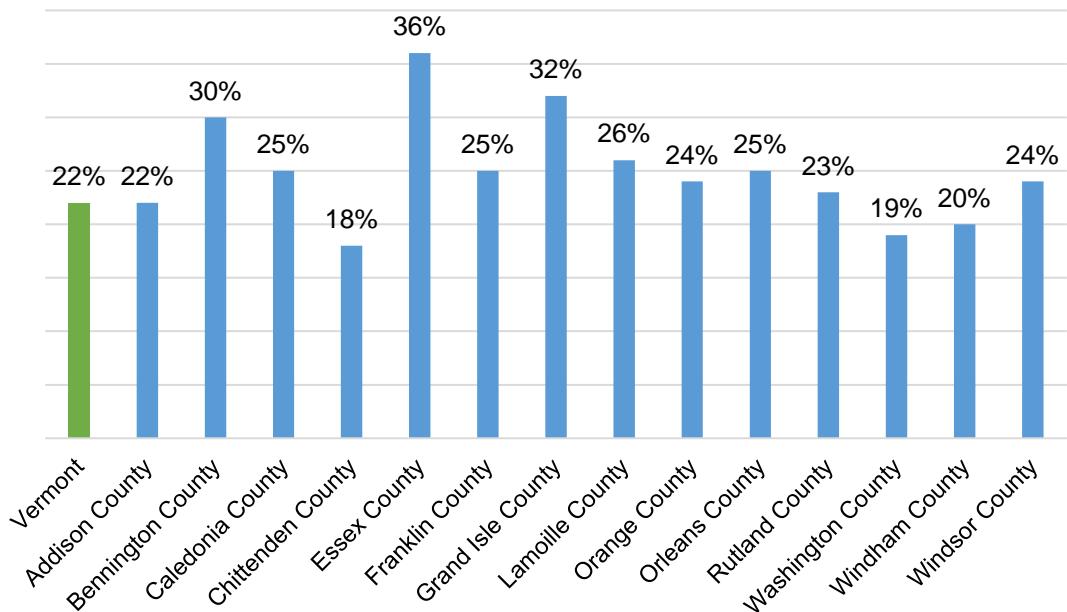
<sup>2</sup> [Vermont Department of Health](#), "The Health of Vermonters Living with Disabilities", 2018

**Figure 9-2: Disability demographics in Vermont**

		Disability type								
		None	Any	Mobility	Cognitive	Hearing	Indep. living	Visual	Self-care	Multiple disabilities
Sex	Male	77%	23%	10%	10%	8%	5%	3%	3%	9%
	Female	78%	22%	12%	9%	5%	7%	3%	3%	10%
Age	18-24	86%	14%	-	10%	-	4%	2%	-	4%
	25-44	86%	14%	5%	11%	1%	5%	1%	1%	6%
	45-64	76%	24%	14%	10%	6%	7%	4%	5%	12%
	65+	64%	36%	21%	7%	16%	7%	5%	4%	15%
Race/ ethnicity	White, non-Hispanic	78%	22%	11%	9%	6%	6%	3%	3%	9%
	Racial/Ethnic Minority	68%	32%	14%	19%	6%	9%	8%	5%	13%
Sexual orientation/ gender identity	Heterosexual /Cisgender	78%	22%	11%	9%	7%	6%	3%	3%	10%
	LGBT	65%	35%	12%	22%	7%	15%	6%	6%	17%

Source: Vermont Department of Health, 2018

The lowest rates of disability in Vermont occur in Chittenden, Washington, and Rutland Counties, while the highest rates are seen in Essex and Grand Isle Counties. This is likely due to the fact these counties have the lowest and highest rates of senior households, respectively<sup>3</sup>.

**Figure 9-3: Vermont adult population with any disability by county**

Source: Vermont Department of Health, 2018

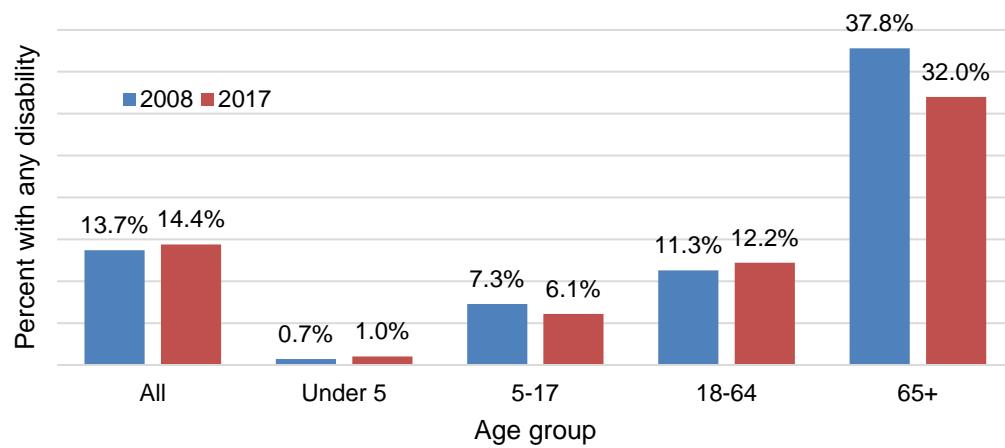
<sup>3</sup> U.S. Census Bureau: American Community Survey 5-year estimates, 2013-2017 (Table B25007) from [housingdata.org](http://housingdata.org)

**Figure 9-4: Vermont population with independent living disability by county**

County	Population with an independent living disability
Vermont	6%
Addison County	4%
Bennington County	8%
Caledonia County	5%
Chittenden County	5%
Essex County	9%
Franklin County	4%
Grand Isle County	4%
Lamoille County	7%
Orange County	7%
Orleans County	7%
Rutland County	8%
Washington County	4%
Windham County	7%
Windsor County	9%

Source: Vermont Department of Health, 2018

Census Bureau data show that over the last decade<sup>4</sup>, disability rates in Vermont remained fairly consistent, decreasing slightly for individuals over age 65. This is consistent with national trends, with disability rates among older Americans declining since the 1980's, mainly due to better medical treatments and education.<sup>5</sup> However, policy experts are concerned that widening socioeconomic disparities could result in poorer health outcomes for low-income individuals, ultimately resulting in an increase in the disability rate, particularly among seniors.<sup>6</sup>

**Figure 9-5: Percent of Vermonters with any disability by age, 2008-2017**

Source: U.S. Census Bureau: American Community Survey 1-year estimates, 2008, 2017 (Table S1810)

<sup>4</sup> U.S. Census Bureau: American Community Survey 1-year estimates, 2008, 2017 (Table S1810). The years 2008 and 2017 were chosen because they represent the furthest apart years available in this data set.

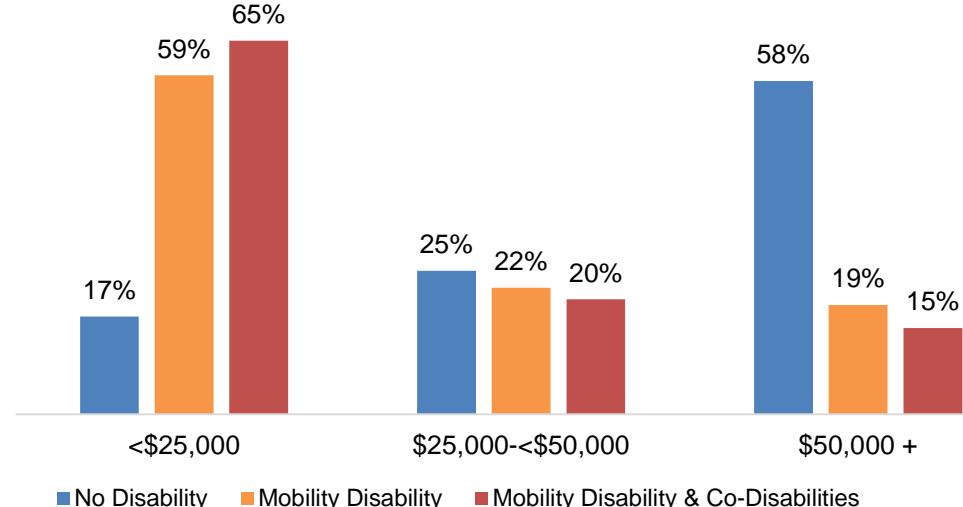
<sup>5</sup> Tsai, Yuping, Education and disability trends of older Americans, 2000–2014, J Public Health (Oxf), 2017.

<sup>6</sup> [Population Reference Bureau](#), Eight Demographic Trends Transforming America's Older Population, 2018.

## Disability and income

Disability has a significant impact on housing opportunities and needs. A higher percentage of those with a mobility disability (59%) and with a co-disability (65%) have incomes of less than \$25,000 a year compared with Vermonters without a disability (17%).<sup>7</sup> Moreover, those with a disability are less likely to be working. One third (33%) of adults with a disability are employed.<sup>8</sup> A 2015 study by the Legislative Joint Fiscal Office revealed that Vermont, alongside New Hampshire and Maine, had the largest number of young adults under age 45 in the Social Security disability program.<sup>9</sup>

**Figure 9-6: Disability rates by household income**



Source: Vermont Department of Health, 2018

The Supplemental Security Income (SSI) program pays benefits to disabled adults and children who have limited earnings and resources and to select adults over age 65 without disabilities. 15,574 Vermonters relied on SSI benefits in 2016. In 2018, the monthly SSI payment in Chittenden County was \$802 while the cost of a one bedroom apartment at HUD's Fair Market Rental levels was \$1,121.<sup>10</sup> In no county in Vermont would SSI payments be enough to cover fair market rents.<sup>11</sup>

The Vermont Department of Disabilities, Aging, and Independent living (DAIL) reports that approximately 80 adults in FY2019 receiving developmental disabilities services were recognized as being viable candidates for a housing voucher with services from DAIL.

## Disability and housing

Vermonters with a disability are less likely to own their own home than other Vermonters.<sup>12</sup> The Housing Discrimination Law Project of Vermont Legal Aid conducted accessibility audits on newly constructed multi-family housing units to determine compliance with required federal Fair Housing Act design and accessibility

<sup>7</sup> [Vermont Department of Health](#), "The Health of Vermonters Living with Disabilities", 2018

<sup>8</sup> [Vermont Department of Health](#), "The Health of Vermonters Living with Disabilities", 2018

<sup>9</sup> [Vermont Public Radio](#), Vermont's High Rate of Young Adults in Social Security Disability Program, 2015

<sup>10</sup> Social Security Administration, 2018 from [housingdata.org](#)

<sup>11</sup> Assuming households should spend no more than 30% of household income towards rent, the federal standard of affordability.

<sup>12</sup> [Vermont Department of Health](#), "The Health of Vermonters Living with Disabilities", 2018

standards. The report showed that 70% of newly constructed multi-family housing units had minor compliance issues and 10% had significant compliance issues.<sup>13</sup> In addition, disability remains the most frequently alleged basis for housing discrimination in Vermont.<sup>14</sup>

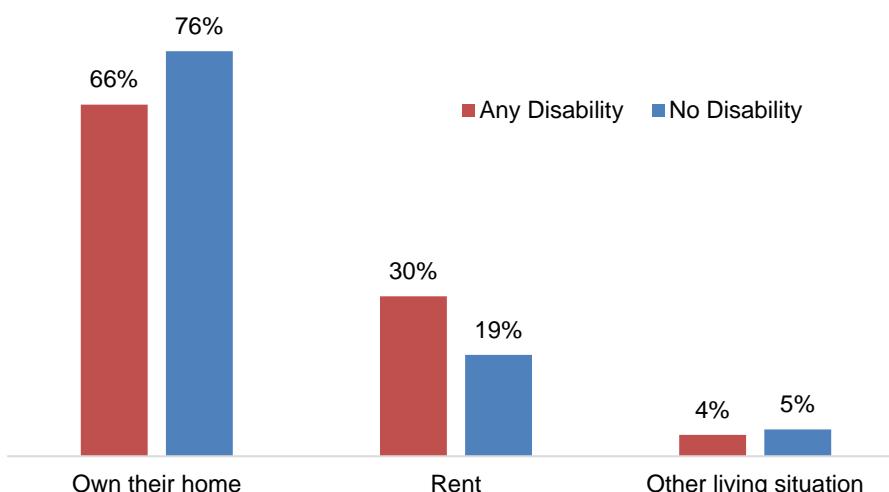
## Frail elders

Vermont ranks as the second oldest state in the nation with a median age of 42.8 whereas the national median age is 37.8.<sup>15</sup> Seniors over the age of 80 or that have disabilities are likely to need housing enriched with services to help them live safely and independently, especially if that household is low-income and has less resources to independently purchase care services.

Vermont has 18,335 households that earn less than 80% of the area median income (AMI)<sup>16</sup> and are headed by someone age 62+ who has a disability. The state has 12,109 households that earn less than 80% of the area median income and are headed by someone age 80 or older.<sup>17</sup> With the number of households headed by someone at least 75 years old likely to increase by approximately 5% between 2020 and 2025<sup>18</sup>, the availability of home-based services needed by this population becomes even more paramount.

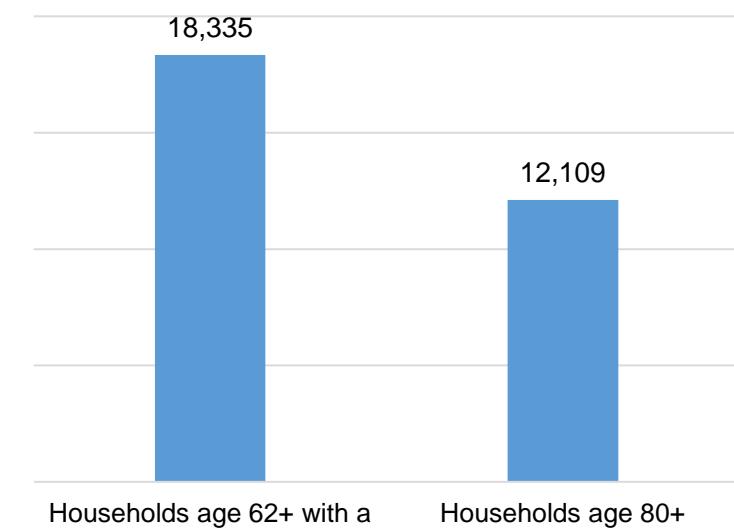
The Department of Disabilities, Aging & Independent Living (DAIL) conducted a Statewide Needs Assessment of Older Vermonters, service providers and caregivers as part of a State Plan on Aging.<sup>19</sup> The report calls for a broad range of housing support

**Figure 9-7: Disability rate by tenure**



Source: Vermont Department of Health, 2018

**Figure 9-8: Vermont low-income senior households in need of service-enriched housing**



Source: U.S. Census Bureau: American Community Survey 5-year estimates, 2013-2017 Public Use Microdata Sample (PUMS)

<sup>13</sup> [Vermont Agency of Commerce and Community Development](#), "Analysis of Impediments to Fair Housing Choice", 2017

<sup>14</sup> [Vermont Agency of Commerce and Community Development](#), "Analysis of Impediments to Fair Housing Choice", 2017

<sup>15</sup> U.S. Census Bureau: American Community Survey 5-year estimates, 2013-2017 (Table B01002).

<sup>16</sup> 80% of Vermont's area median income is \$46,246, according to 2017 ACS estimates.

<sup>17</sup> Note that these categories are not mutually exclusive. It is estimated that of low-income households age 80+, 6,882 have a disability.

<sup>18</sup> Claritas

<sup>19</sup> [Vermont Department of Disabilities](#), Aging & Independent Living, Vermont State Plan on Aging, 2018

services for seniors, from those living in their own homes to those in need of nursing home care. Seniors living independently may be able to do so longer with resources such as home modification/maintenance assistance, home sharing options, expansion of home sharing options. However, this would require a workforce development of caretakers for the elderly and/or those with disabilities. In addition, a concerted effort towards interagency and interprofessional collaboration is needed, according to DAIL.

## Housing solutions for frail elders

According to the State Plan on Aging, the top three concerns for older Vermonters are housing (15%), healthcare (14%) and financial security (14%).<sup>20</sup> With housing as the broadest concern, some promising supportive housing solutions have developed such as Support and Services at Home (SASH) and Home Sharing.

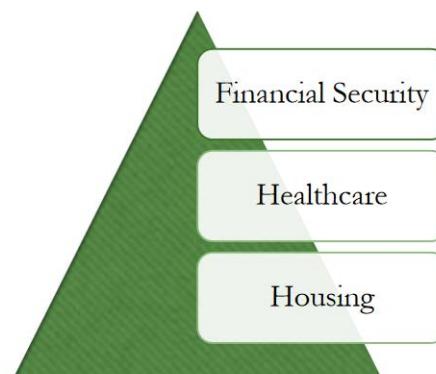
SASH or “Support and Services at Home” is a program developed by Cathedral Square Corporation and is administered in partnership with housing providers, social service agencies and healthcare providers to help Vermonters live independently at home. Of the 6,412 subsidized apartments in Vermont reserved for seniors or people with disabilities the majority are accompanied with SASH services.<sup>21</sup> However, while SASH is very helpful and does extend the ability to stay in one’s own home, it is not a substitute for nursing care for disabled or very frail seniors that cannot live independently. SASH coordinates resources from community health providers, social service agencies and nonprofit housing organizations to help older Vermonters and those with special needs that receive Medicare support to stay in their homes.

Home sharing helps seniors that want to remain in their homes but need some assistance to do so. The housemate they are matched with provides a number of different services such as housekeeping, meal preparation etc. in exchange for rent or reduced rent. Each home share situation is unique and is supported by Vermont Adult Services Division of Disabilities, Aging and Independent Living (DAIL) and administered by two nonprofit organizations: HomeShare Vermont and HomeShare Now.

Another emergent alternative is an accessory dwelling unit or ADU. An ADU is simply an efficiency or one bedroom apartment, secondary to the owner-occupied home and furnished with all the amenities required for independent living. An ADU can be used to house an elderly parent or relative who would otherwise not be able to live independently. However, housing alternatives such as these will not likely meet the requirements of special needs populations that require a high level of care. Support services, on-site or off, are intrinsic in housing success.

Many Vermont seniors currently receive more intensive support services in a home environment. According to AARP, 74,900 Vermonters act as family caregivers. In addition, there are 3,682 personal care aides and 1,944 home aides that provide care for frail elders and people with disabilities.<sup>22</sup> These workers fill a crucial role in allowing frail elders to continue to live at home while receiving healthcare and other services.

**Figure 9-9: Top concerns for Vermonters over 60**



Source: State Plan on Aging Assessment, 2017

<sup>21</sup> [Vermont Directory of Affordable Rental Housing](#)

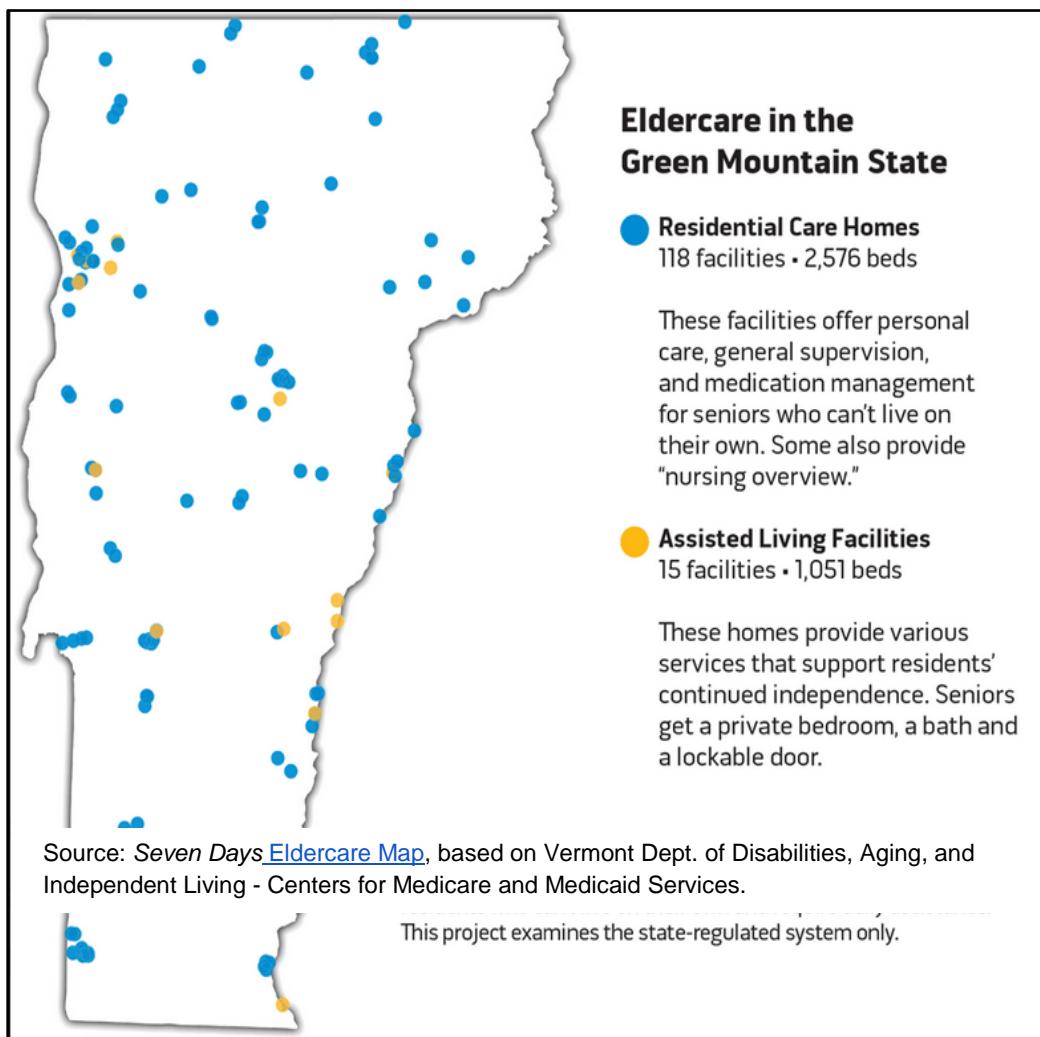
<sup>22</sup> [AARP](#), “Across the States 2018: Profile of Long-Term Services and Supports in Vermont”

For seniors who cannot live in their own homes for various reasons, there are 133 state regulated residential care homes and assisted living residences and 40 federally regulated nursing homes in Vermont.<sup>23</sup> Residential care homes provide room and board, personal care and medication assistance. These homes are designed for people who are not able to live independently but don't require full-time nursing care, and medical care is typically not provided on site. Assisted living homes provide a broader range of services for people who need more personal care support and focus on group activities. Nursing homes are overseen by trained medical professionals, offering medical and rehabilitation services on-site. Some eldercare facilities integrate multiple levels of care on one site.<sup>24</sup>

**Figure 9-10: Locations and types of eldercare facilities in Vermont**

Unfortunately, some eldercare homes do not offer a safe and supportive environment for seniors. Of 133 state-regulated residential care and assisted living homes, only eight have no violations, according to a 2019 investigation by Vermont Public Radio and Seven Days. These violations include inadequate staffing, poor record keeping, medication mismanagement and reports of abuse, neglect or exploitation.<sup>25</sup> Out of 36 Vermont nursing homes for which data was available statewide, 13 had Medicare health inspection ratings below average.<sup>26</sup>

A report from the State Long-Term Care Ombudsman<sup>27</sup> calls for regulation to strengthen accountability for residential care providers, stating that, "The lack of accountability of residential care homes and assisted living residences to residents has become alarming".<sup>28</sup>



<sup>23</sup> [Seven Days](#): Vermont Eldercare Navigator, 2019

<sup>24</sup> [National Institute on Aging](#), Long Term Care: Residential Facilities, Assisted Living, and Nursing Homes, 2017

<sup>25</sup> [Seven Days](#), "Worse for Care: When Elder Homes Stumble, Frail Vermonters Get Hurt", 2020

<sup>26</sup> [Medicare.gov](#), Nursing Home Compare, as of February 5, 2020.

<sup>27</sup> The position is operated through Vermont Legal Aid, contracted by the Vermont Department of Disabilities, Aging, and Independent Living (DAIL).

<sup>28</sup> [Vermont Legal Aid](#), Vermont State Long-Term Care Ombudsman Project, Annual Report 2017-2018.

## Domestic and sexual violence survivors

Throughout 2019, a total of 8,760 people encountering violence and abuse were helped by a coalition of member organizations whose services included finding emergency and long-term housing. Although 60% of these people had experienced domestic violence, the remaining 40% experienced sexual violence or harassment, stalking, sex trafficking, or violence against a family member or friend.<sup>29</sup> Domestic and sexual violence survivors need housing that, unlike homeless shelters, is not publicly identifiable and has enhanced security along with therapeutic services. Another source of aid was rental assistance.

The VT Network<sup>30</sup> distributed funds totaling \$66,000 to 114 households to help stabilize their living situation. The 2019 Point-In-Time count found 133 homeless Vermont households fleeing domestic violence.<sup>31</sup> This figure does not include households staying with friends or family. About one-third of all families in Vermont's network of publicly funded shelters for the homeless are families fleeing domestic or sexual violence, according to the VT Office of Economic Opportunity.

Lack of housing options often results in domestic violence victims remaining in abusive situations, which can be extremely dangerous for victims. While Vermont has a low homicide rate, 65% of all homicides in 2017 were domestic violence-related.<sup>32</sup>

**Figure 9-11: Shelter types for homeless individuals fleeing domestic and sexual violence, 2019**

Shelter type	Adults	Children
Emergency shelter	298	224
Emergency hotel stays	505	219
Transitional housing	85	64

Source: Vermont Network, 2019. Does not include additional people who received assistance through Vermont's General Assistance Emergency Housing program.

## People exiting the corrections system

National research has found that the likelihood of recidivism increases among people exiting the corrections system if they become homeless after incarceration.<sup>33</sup> Vermont faces a lack of housing options that are affordable and available for people transitioning into the community from the corrections system, according to the Vermont Department of Corrections (DOC).<sup>34</sup> This results in some inmates staying past their minimum

<sup>29</sup> [Vermont Network](#), "2019 Data Snapshot"

<sup>30</sup> The Vermont Network consists of fifteen member organizations, including Hopeworks, Safeline, Steps to End Domestic Violence, Women's Freedom Center and Pride Center of Vermont: Safespace Program.

<sup>31</sup> Institute for Community Alliances, 2019 from [housingdata.org](#).

<sup>32</sup> [Vermont Attorney General's Office](#), "Domestic Violence Fatality Review Commission, 2018 Report"

<sup>33</sup> [Lutze et al.](#), "Homelessness and Reentry: A Multisite Outcome Evaluation of Washington State's Reentry Housing Program for High Risk Offenders", 2013

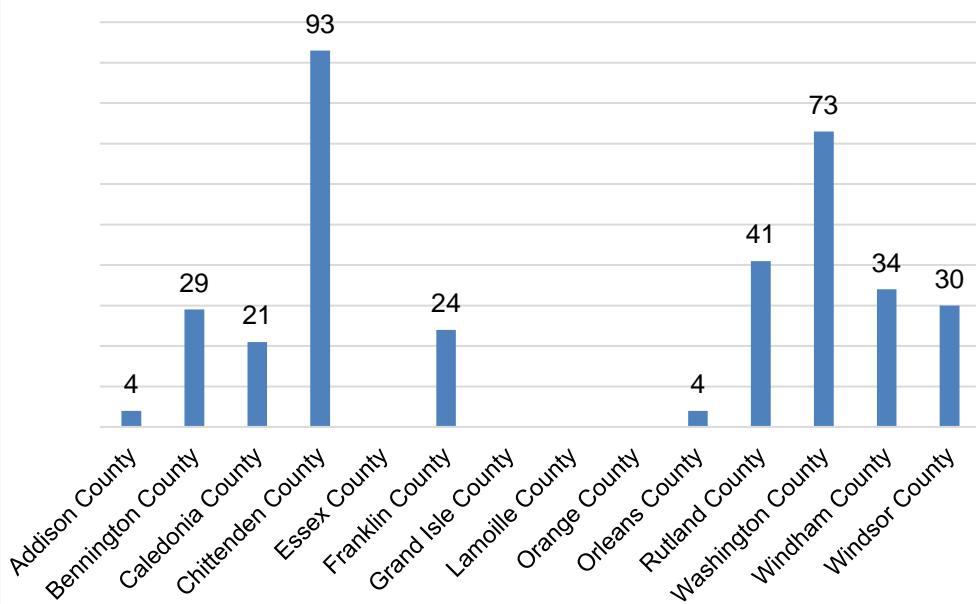
<sup>34</sup> [Vermont Agency of Human Services](#), "Report to the Vermont Legislature, Act 85 Sec. 335.1: Plan to provide secure transitional housing for inmates reentering the community", 2017

sentence. In addition, the Federal Bureau of Prisons has federal inmates who are Vermont residents with completed minimum sentences but who are in need of housing.

Efforts are being made by the Department of Corrections (DOC) to address this problem through transitional housing. Transitional housing consists of a mix of emergency shelter beds, congregate housing sites and scattered apartments. The DOC works with community organizations to place people leaving the corrections system in transitional housing across the state. Approximately 353 transitional housing beds for this population are available statewide.<sup>35</sup> However, some beds are limited to specific types of people (e.g. women, men, and people with mental illness). DOC estimated that in 2017 the cost of transitional housing was significantly lower than continuing to house inmates in prison longer than their minimum sentence.<sup>36</sup>

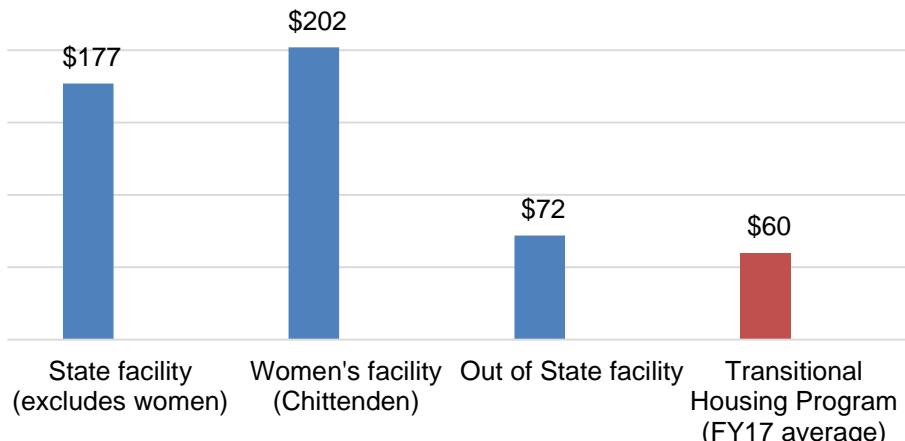
In 2017, the DOC served 1,125 offenders with transitional housing assistance. 774 individuals received housing, 285 received transitional housing support and 66 received release money to help cover housing costs, for a total of 1,125 persons.<sup>37</sup>

**Figure 9-12: Transitional housing beds available through the Vermont Department of Corrections**



Source: Vermont Department of Corrections, 2018

**Figure 9-13: Average daily cost of housing alternatives for offenders exiting prison, 2017**



Source: VT Department of Corrections

<sup>35</sup> [Vermont Department of Health](#), Vermont Department of Corrections Transitional Housing, 2018

<sup>36</sup> [Vermont Agency of Human Services](#), "Report to the Vermont Legislature, Act 85 Sec. 335.1: Plan to provide secure transitional housing for inmates reentering the community", 2017

<sup>37</sup> [Vermont Department of Health](#), Vermont Department of Corrections Transitional Housing, 2018

Despite increased focus on transitional housing for Vermonters leaving the corrections system, 131 inmates have completed their minimum sentence but lack appropriate or approvable housing as of January 29, 2020. This list of inmates is largely populated by a combination of sex offenders and persons who have completed their minimum sentence but returned to prison due to a violation of furlough.

Finding affordable long-term housing solutions available to people leaving the corrections system is challenging. It is particularly difficult for convicted sex offenders. Many are treated as outcasts once they transition from incarceration to the community. In addition, there are strict rules governing where they can reside and few options for them to access housing services or post-prison supervision. This can put them at greater peril of being homeless and re-offending.<sup>38</sup>

## Vermonters with HIV/AIDS

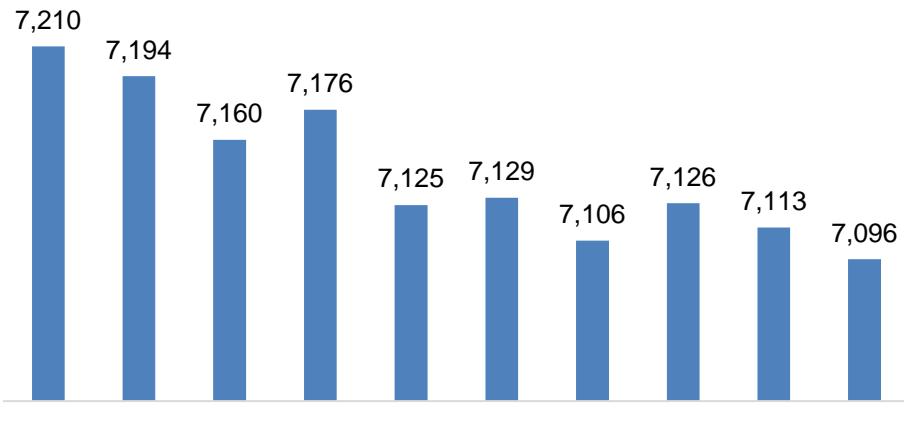
Through investments by the Vermont Agency of Human Services (AHS) in affordable housing programs, 23 people with HIV/AIDS found housing through the federally funded HUD program Housing Opportunities for Persons with AIDS (HOPWA) in 2018.<sup>39</sup>

## Mobile home park residents

Due largely to the lower cost of buying or renting a mobile home, this unit type houses a sizeable portion of Vermont's lower income households. Mobile homes present an affordable housing option for many Vermont residents and make up 7.2% of residential housing units in Vermont.<sup>40</sup> The median Vermont mobile home with land sold for \$92,000 in 2018 and the median mobile home without land sold for \$33,500. Meanwhile the median single family home sold for \$215,000.<sup>41</sup> Vermont's 2019 Mobile Home Park registry lists the median mobile home lot rent at \$347<sup>42</sup> as compared to the \$945 for the state median gross rent.<sup>43</sup>

Approximately one third of Vermont's mobile homes are located in 238 of Vermont's registered mobile home parks while the other two thirds are on rented or owned land outside a mobile home park. Mobile home

**Figure 9-14: Decrease in Vermont mobile home park lots**



Source: Vermont Department of Housing & Community Development, 2019

<sup>38</sup> [Seven Days](#), "A violent sex offender is released into the public spotlight", 2019

<sup>39</sup> [Vermont Agency of Commerce & Community Development](#), "2018 Vermont Housing Budget and Investment Report", 2019

<sup>40</sup> U.S. Census Bureau: American Community Survey 5-year estimates, 2013-2017 (Table B25044), from [housingdata.org](#)

<sup>41</sup> Vermont Department of Taxes; Property Transfer Tax (PTT) Records, 2018 from [housingdata.org](#)

<sup>42</sup> [Vermont Department of Housing & Community Development](#), "Vermont Mobile Home Park Program 2019 Registry & Mobile Home Parks Report", 2019

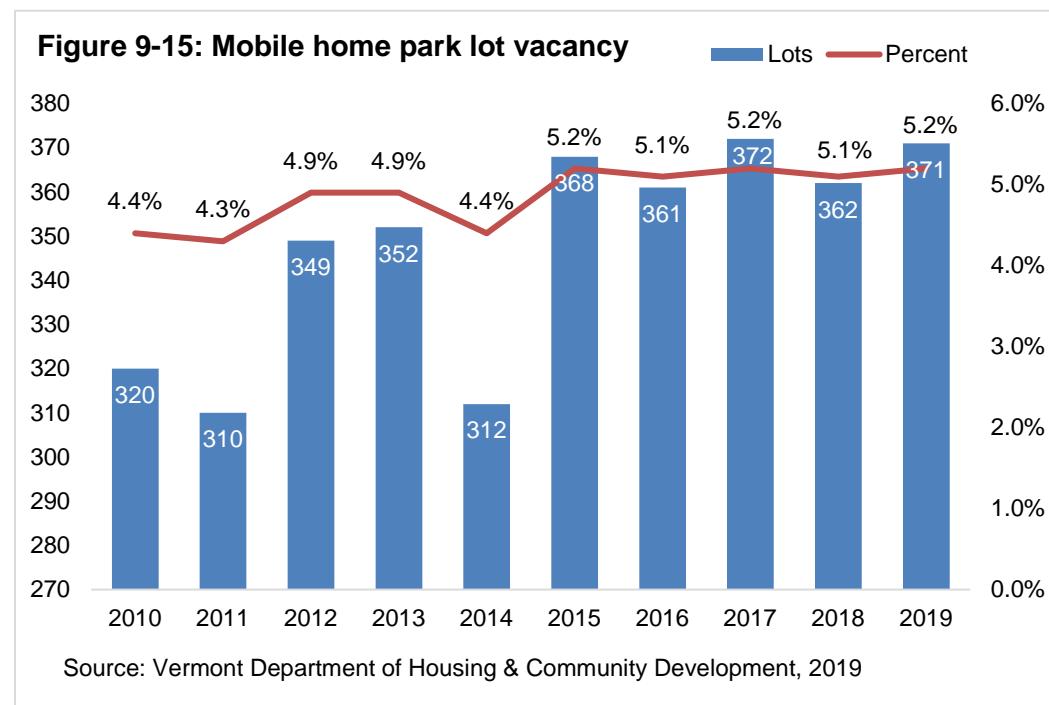
<sup>43</sup> U.S. Census Bureau: American Community Survey 5-year estimates, 2013-2017 (Table B25064), from [housingdata.org](#)

parks and lots have decreased over time to 7,096 in 2019.<sup>44</sup>

In addition to a decrease in total mobile home parks and lots, vacancies have increased over time. The number of mobile home parks fell to 238 in 2019 from 243 parks in 2015. These parks contain 7,096 lots of which 6,532 are occupied.

Mobile home park residents are vulnerable to housing issues in part because of the mobile homes themselves, but mainly because they don't own the land on which their home sits. While most mobile home parks are privately owned, others are owned by non-profit organizations or resident-owned cooperatives.

Grand Isle County has the state's highest lot vacancy rate,<sup>45</sup> while Chittenden County has the lowest vacancy rate, mirroring the rental and owner vacancy rates in those counties.<sup>46</sup> Chittenden and Windsor Counties have the highest median lot rents, while Essex has the lowest median rents.



<sup>44</sup> [Vermont Department of Housing & Community Development](#), "Vermont Mobile Home Park Program 2019 Registry & Mobile Home Parks Report", 2019

<sup>45</sup> [Vermont Department of Housing & Community Development](#), "Mobile Home Park Registration Summary", 2019

<sup>46</sup> See Chapter 4: Renters and Chapter 5: Homeowners for more discussion of vacancy rates.

**Figure 9-16: Mobile home parks by county**

County	Parks	Total lots	Vacant lots	Lot vacancy rate	Median Lot Rent
Addison	15	389	11	2.8%	\$325
Bennington	25	714	70	9.8%	\$357
Caledonia	12	372	40	10.0%	\$300
Chittenden	24	1853	35	1.9%	\$440
Essex*	2	42	3	7.1%	\$225
Franklin	27	463	21	4.5%	\$364
Grand Isle*	2	32	5	15.6%	\$336
Lamoille	7	326	15	4.6%	\$277
Orange	15	281	25	8.9%	\$368
Orleans	8	224	7	3.1%	\$299
Rutland	28	440	32	7.3%	\$329
Washington	24	600	54	9.0%	\$355
Windham**	16	499	15	3.0%	\$265
Windsor	33	861	38	4.4%	\$400
<b>Vermont</b>	<b>238</b>	<b>7096</b>	<b>371</b>	<b>5.2%</b>	<b>\$347</b>

\*Counties with two parks; median rent defaults to the bigger park. State median is the middle rent of all MHP lots.  
\*\*Mountain Home Park has more than half the lots (259 lots).

Source: Vermont Department of Housing & Community Development, 2019

The 2019 report *Sustainability Assessment of Affordable Mobile Home Parks in Vermont*<sup>47</sup> highlights six key areas of concern: marketability, small capital needs, large scale capital needs, operational and financial stability, and flood danger.

This study identified the following critical concerns among the subset of mobile home parks examined. The scope of these problems are likely to be substantially greater among the full universe of Vermont mobile home parks:<sup>48</sup>

- At least 300-400 mobile homes are at risk due to poor quality half of which are located in approximately 10 parks. These homes comprise roughly 20% of all mobile homes in the sample of parks studied. Because the study's sample is likely representative of the universe, the total number of homes in all Vermont mobile home parks with quality concerns is likely to be closer to 1,050-1,400.
- Four mobile home parks assessed in the study are located in 100-year floodplains, one is located in a 500-year floodplain and one is located in a dam inundation area. These parks are in Orange, Windham and Addison counties.
- Orange, Franklin and Windsor counties contain parks in poor financial health.
- Five parks hit on a trio of problems: low value, built prior to 1976 and risk of abandonment/unmarketability. These are in Orange, Addison, Windham and Windsor counties.
- One in 10 parks has 15% vacant or more uninhabitable lots.
- The counties with the greatest market risk are Franklin, Rutland, and Windsor.

<sup>47</sup> [Vermont Housing & Conservation Board](#) and John Ryan, Development Cycles, "Sustainability Assessment of Affordable Mobile Home Parks in Vermont", 2019

<sup>48</sup> The study examined a sample of 52 affordable mobile home parks (21% of all Vermont parks). Conditions in these parks are considered representative in many ways of the universe of parks statewide.

## Migrant and farm workers

It is difficult to precisely determine the number of migrant and farm workers working in Vermont and their housing needs. The Vermont Department of Labor reports 3,130 workers employed in agricultural fields.<sup>49</sup> However, not all agricultural workers have employment reported to the Department of Labor, particularly among workers who lack legal authorization to work.

In 2015, the farmworker advocacy group Migrant Justice's Milk with Dignity campaign estimated that there were 1,200-1,500 migrant farm workers on Vermont's dairy farms.<sup>50</sup> Of those surveyed, 30% reported overcrowded housing and 35% indicated housing in need of major repairs or replacement.

Milk with Dignity questions whether employer-provided farm worker housing is adequate in number to meet current farmworkers housing needs, and whether or not it is in a condition that meets legal standards for safe occupancy.

The ski industry also faces an affordable workforce housing challenge. In addition to local residents, the industry uses many seasonal foreign workers through the J-1 and H-2B visa programs. With low rental vacancy rates in many parts of Vermont, finding a decent, affordable apartment for seasonal use by out-of-state or foreign-born workers can lead to “doubling up”, “couch surfing” and other unstable living arrangements.

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<sup>49</sup> [Vermont Department of Labor](#), Covered Employment and Wages, 2018. Includes the following occupational categories: crop production, animal production and aquaculture, and agriculture and forestry support activities.

<sup>50</sup> [Migrant Justice](#), “Farmworkers Document Abuse & Propose Solution: Milk with Dignity”, 2015