

# SOCIAL REGION

Infrastructure:  
Education, Libraries & Recreation Facilities

Housing

Community Health

# INFRASTRUCTURE: EDUCATION, LIBRARIES & RECREATION FACILITIES

## GOALS

1. Provide high-quality educational and vocational opportunities that meet the needs of our population, regardless of age or economic status.
2. Ensure the region has a network of high-quality, publicly accessible and free community libraries.
3. Offer high-quality, sustainable recreational land, facilities, and programs that meet the recreational needs of current and future generations.

Strong educational and recreational facilities are key to ensuring our region’s people are healthy and that its communities are vibrant. Franklin and Grand Isle Counties are fortunate to have successful schools, healthy and community-supported libraries, and a location between two of Vermont’s greatest recreational assets: Lake Champlain and the Green Mountains. Still, efforts must be made to maintain existing assets and further grow the region’s infrastructure to ensure that all citizens have access to educational (Table 1) and recreational opportunities.

## ASSETS AND VALUES

### Education

The region’s schools strive to provide high-quality education to all students. They aim to prepare students for the workforce, raise test proficiency ratings, and reduce the economic achievement gap while operating under declining (or unpredictable) school enrollment levels, increased costs per pupil, and budgetary constraints.

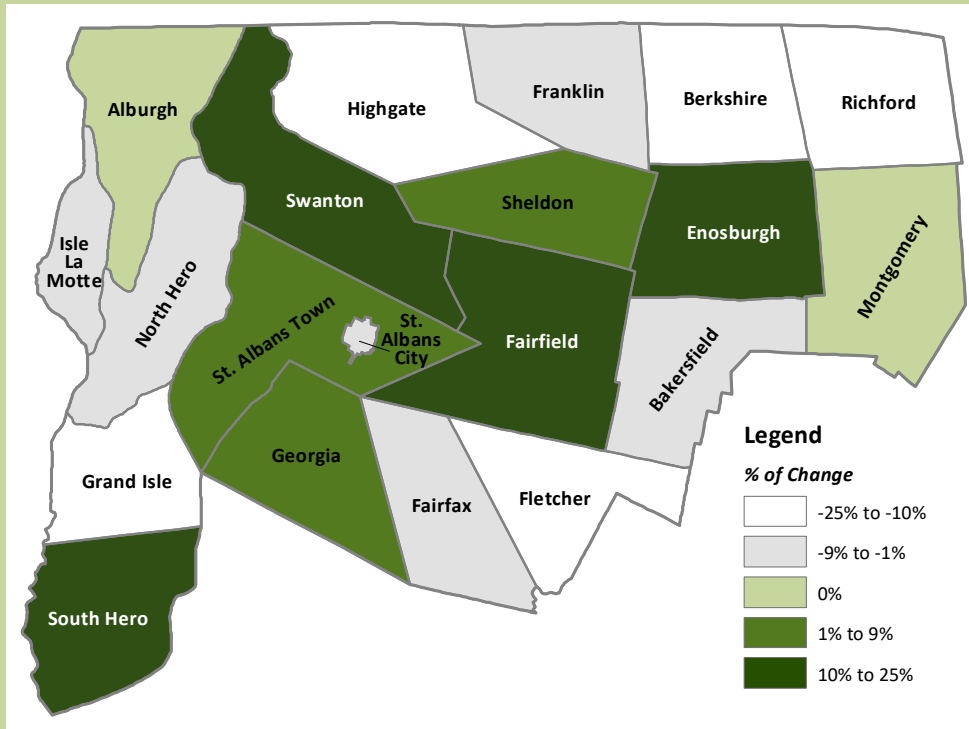
The State of Vermont uses standardized testing as a school accountability tool, mandated by the No Child Left Behind Act of 2001. These

TABLE 1: At a Glance - Education

<ul style="list-style-type: none"><li>• There are five supervisory unions in the region, which include:<ul style="list-style-type: none"><li>19 elementary schools</li><li>4 junior high/middle schools</li><li>5 high schools</li><li>2 technical/career centers</li></ul></li><li>• There were approximately 8,800 students enrolled in the region’s schools for the 2021-2022 school year.</li><li>• 12 of the region’s 23 municipalities provide tuition for grades 9–12 and 3 municipalities do so for grades 7–8 because there is neither a high school in the community nor a designated high school.</li></ul>
--

standardized tests help schools measure both individual student progress and how schools compare against each other. One of the key measures derived from these tests compares the results of students who qualify for free lunch or reduced-cost lunch with the results of students who do not. In the 2020–2021 eighth-grade math test, the average difference in percentage achieving at or above proficiency was 25.3%. Similarly, in eighth-grade language arts, the average difference in achieving at or above proficiency was 25.4% (Vermont Agency of Education, 2021). The overall percentage of students achieving proficiency or above was much lower in 2021 than in previous years, but this result is not directly comparable due to the many impacts of the COVID-19 pandemic on the education system, including the closure of schools for much of spring 2020.

### MAP 1: Change in Elementary School Enrollment 2015-2022



SOURCE: Vermont Agency of Education 2021

Region-wide K–12 school enrollment has declined since the mid-2000s, and the majority of schools are facing declining enrollment. However, some schools, mainly in western and central Franklin County, are experiencing growth in enrollment compared to recent years. From the 2014–2015 school year to the 2021–2022 school year, Franklin County had a 1.8% increase and Grand Isle County had a 3.2% reduction in public school K-12 enrollment. Statewide there was a 5% reduction in enrollment during the same period. Enrollment numbers do not include high school students who attend school outside of the region or outside of the state.

Because of the size differences among regional schools and the way education funding is structured by Act 68, it is difficult to equitably compare per-pupil costs on a regional basis. Adjusting for inflation, some schools have seen increases in cost per equalized pupil since 2012, while others have not, but there does not appear to be a discernible trend explaining these changes.

Secondary, postsecondary, and adult technical education courses are provided through regional career centers, comprehensive high schools, and colleges. The Northwest region hosts two career and technical education centers: Cold Hollow Career Center at Enosburgh High School and Northwest Career and Technical Center at Bellows Free Academy high school in St. Albans.

### Libraries

Library facilities are well distributed across the region. Only two towns in the region do not have a library: Berkshire and Fletcher. St. Albans Free Library serves both the City and the Town of St. Albans. Most public libraries are heavily dependent on local support. Municipal taxes provide the majority of funding for libraries, with almost two-thirds receiving at least 90% of their total income from this source. Volunteers contribute substantially to staffing many town libraries. For example, the library in Isle La Motte is operated entirely by volunteers.

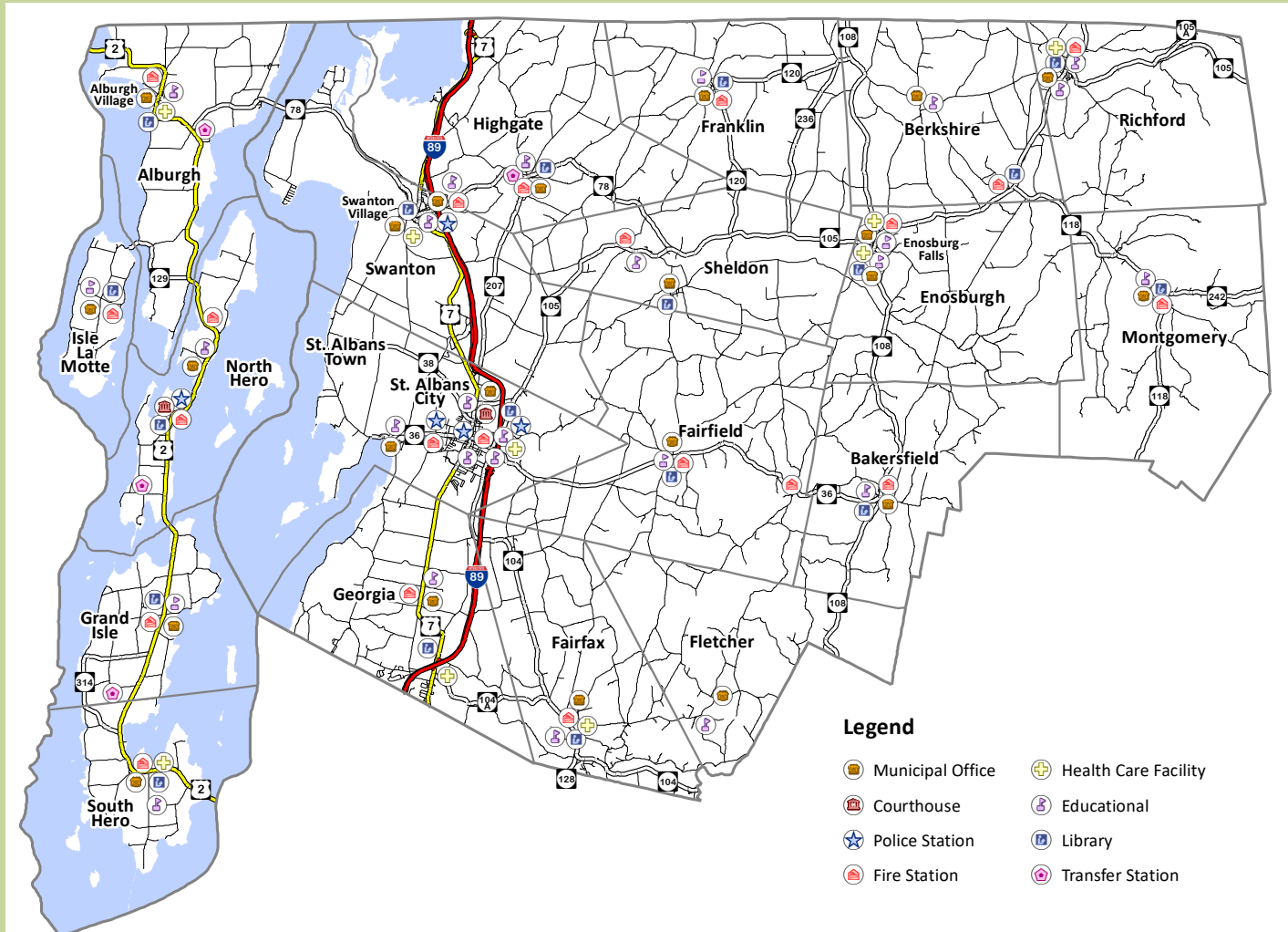
Internet access has vastly increased the resources available to rural libraries. All 17 libraries in the region have Internet access and 7 libraries have public Wi-Fi hotspots that allow for access outside of library hours (Vermont Department of Libraries, Vermont Public Library Statistics, FY 2021 Annual Report; Vermont Department of Public Service WiFi Hotspot Map). The interlibrary loan system is accessible to all libraries, enabling borrowers to obtain materials from all libraries in Vermont and, through the state's Department of Libraries, from most libraries across the country. The region is also uniquely served by the Franklin Grand Isle Bookmobile, a nonprofit local library that provides literacy activities, educational programming, and library services to children and adults.

## Recreation

The Northwest region has a landscape ranging from the shores of Lake Champlain through expanses of the Champlain Valley's farmland to the western hills of the Green Mountains. For residents and visitors, this diverse topography offers a wide range of recreational opportunities.

Publicly owned lands cover more than 19,677 acres, 4.3% of the total land area in Franklin and Grand Isle Counties. The state owns more than half of this acreage, managing over 47 parcels ranging in size from the 1,766-acre Fairfield Swamp Wildlife Management Area to small, one-acre fishing access areas. The federally owned Missisquoi National Wildlife Refuge, which covers 6,470 acres, represents a very significant portion of the remaining public lands.

**MAP 2: Northwest Region Facilities**



SOURCE: Vermont Enhanced 911 Board

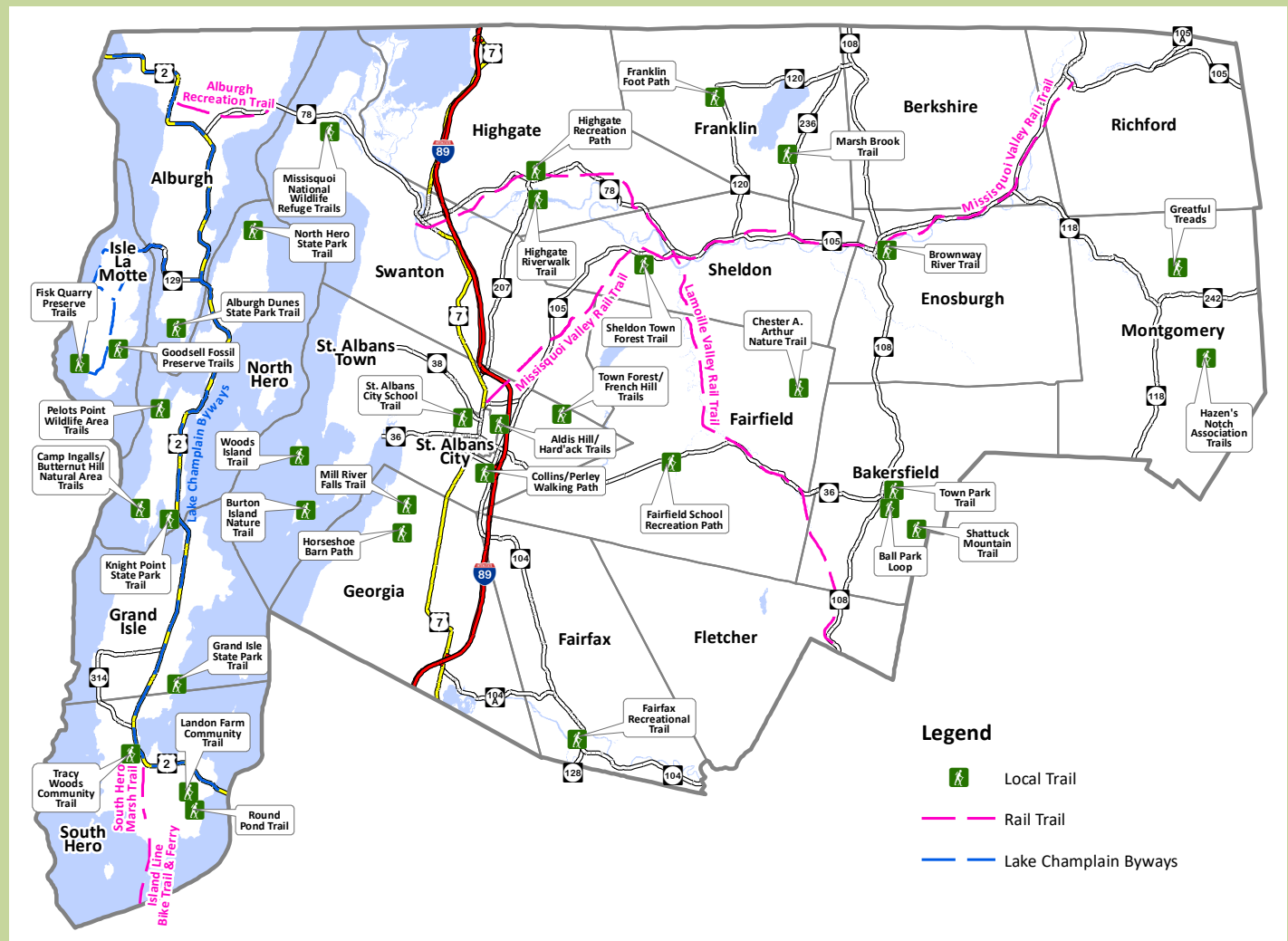
In addition to undeveloped forests, wetlands, and open lands, nearly every municipality in the region offers some recreational sites open to the public. Indoor recreation facilities serving the region include the Collins Perley Sports & Fitness Center in St. Albans Town and the Highgate Recreational Facility.

Hard'ack Recreation Area, owned by St. Albans City and located in St. Albans Town provides the only downhill skiing opportunity in the region, with a tow rope, snowmaking, and lighted trails. This recreation area was improved with a new lodge and, in 2022 a four-season community pool was added. Although not located within the region, Jay Peak Resort and Smugglers' Notch Resort are both located immediately adjacent to the region and are enjoyed by regional residents. These resorts provide a wide variety of winter recreational options (downhill skiing and snowboarding, cross-country skiing, ice skating, etc.).

The region could benefit from additional private gyms and fitness centers. The St. Albans-Swanton area is served by at least three private gyms. However, the remainder of Franklin County and Grand Isle County have no private gyms, although there are some private fitness class opportunities.

Franklin County is home to two significant outdoor recreation assets: the Missisquoi Valley Rail Trail (MVRT) and the Lamoille Valley Rail Trail (LVRT), two multi-use trails that span the region on more than 125 miles of decommissioned railroad beds. The MVRT spans from St. Albans Town to Richford. The LVRT spans from

## MAP 3: Northwest Region Trails



**SOURCE:** NRPC Collected Data

Swanton south to Fletcher within the region, and then continues east to provide a connection to St. Johnsbury. Grand Isle County is a major bike recreation destination highlighted by the Island Line on road bike trails and a seasonal bike ferry connection to Colchester and the Burlington bike path. Communities throughout the region have sidewalks that provide additional opportunities for physical activity and for students to walk to school. See the transportation chapter for more details.

## GOALS AND POLICIES

### ① GOAL

**Provide high-quality educational and vocational opportunities that meet the needs of our population, regardless of age or economic status.**

- a. Ensure that preschool, primary and secondary, and post-secondary educational services are provided in safe and accessible facilities with sufficient capacity, available at reasonable cost, and that meet or exceed state standards.
- b. Ensure that new developments shall not place undue burden on the capacity of local school systems.
- c. Support the location of schools and vocational training facilities within regional or sub-regional growth centers, or in city, village, or hamlet centers, rather than in non-growth areas.
- d. Encourage the region's high schools and technical/career centers to offer specialized vocational training opportunities for both young adults and adults with varying backgrounds and educational levels.
- e. Promote collaboration among local schools, technical/career centers, and businesses to support job growth and training needs and facilitate high-quality employment opportunities.

### ② GOAL

**Ensure the region has a network of high-quality, publicly accessible, and free community libraries.**

- a. Support the location of libraries within regional or sub-regional growth centers, or in city, village, or hamlet centers, rather than in non-growth areas.
- b. Encourage libraries to provide educational and cultural programs for community members of all ages.
- c. Support libraries as a place to learn about and use technology for people of all means and abilities and support installation/maintenance of Wi-Fi hot spots at libraries.

### ③ GOAL

**Offer high-quality, sustainable recreational land, facilities, and programs that meet the recreational needs of current and future generations.**

- a. Support the establishment of a network of indoor and outdoor recreation land, facilities, and programs for people of various ages, physical abilities, incomes, races or ethnicities, and educational levels throughout the region.
- b. Encourage the expanding network of high-quality, multi-use recreational trails in the region.
- c. Promote the development of abundant opportunities for public access to the region's waters and shorelines.
- d. Ensure all people feel welcome in our public and private recreation areas.
- e. Support efforts to reduce financial barriers to access public lands.



# HOUSING

## GOALS

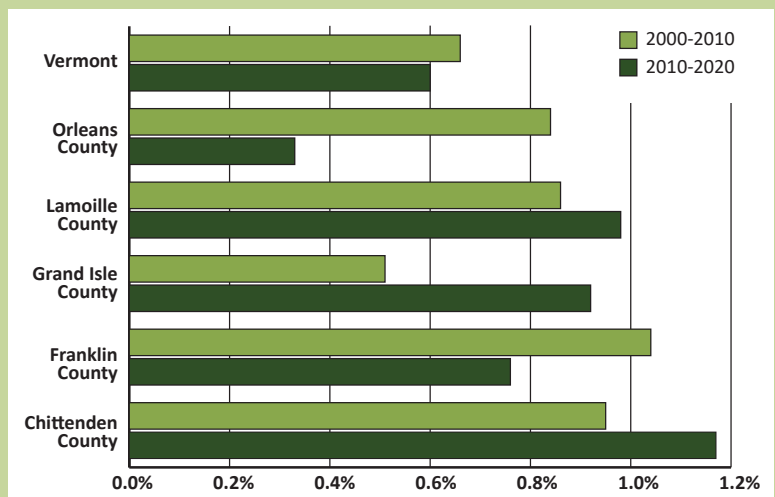
1. Build and improve more homes so that high-quality, safe, and affordable housing options are equitably available to all current and future residents.
2. Ensure housing is easier to build in regional and sub-regional growth areas and village centers that are convenient and accessible to employment, services, retail, public transportation, recreation facilities, and schools.
3. Housing design and construction is energy efficient and minimizes adverse environmental impacts.

Housing policy, planning, and regulation plays a major role in shaping the physical form, landscape, and demographics of the region. The policies set by regional and local plans result in regulations and other actions that impact the location, density, type, form, and amount of housing. These factors in turn inform the efficiency of utilities and services, the economic vitality of our region and its villages and downtowns, workforce availability, agricultural viability and forest fragmentation, and the overall character of our communities. Ultimately, regional planning decisions impact the housing options available to individuals and families, including accessibility to employment, health care, education, and grocery stores; affordability; and size.

Beyond physical implications, housing is a basic human need and foundational building block for individuals and families to be successful in life. It is well understood that once stable housing is achieved, individuals and families are more likely to sustain employment and achieve other life goals. While housing people is complicated by a wide range of social and economic policies and conditions, this region is committed to ensuring equitable access to safe, convenient, and affordable housing for current and future generations.

The region as a whole does not have enough affordable housing, driven in part by an overall housing shortage in the State of Vermont. The supply of housing has not kept pace with population growth, and more units are needed

**FIGURE 1:**  
Rate of Growth in Number of Households



SOURCE: Decennial Census, U.S. Census Bureau

for a given population due to the growing number of smaller households. The shortage is complicated by an older, homogeneous housing stock, high construction costs, the pandemic, and other economic factors. The impacts of the housing crisis have rippled through every community; local and regional planners and officials throughout the state are faced with the immense challenge of taking action to better meet the housing needs of families and individuals.

NRPC completed a housing needs assessment in 2022 to provide an understanding of demographic and housing trends in the region and to quantify regional housing needs. (Northwest Vermont Housing Needs Assessment, Place Sense LLC, January 2023) This chapter includes important highlights and conclusions from the 2022 housing needs assessment.

## Current Housing Landscape and Trends

### Household Count and Growth

23,088 households were living in the two-county region in 2020, an increase of 1,673 households from 2010. Household change has been increasing at slower rates since the 1970s, although Grand Isle County bucked this trend in the 2010s, growing faster than the previous decade. Overall, the region has been experiencing slow household growth—averaging 0.9% annually between 2000 and 2020. This growth is faster than the state, but slower than Chittenden County and Lamoille County.

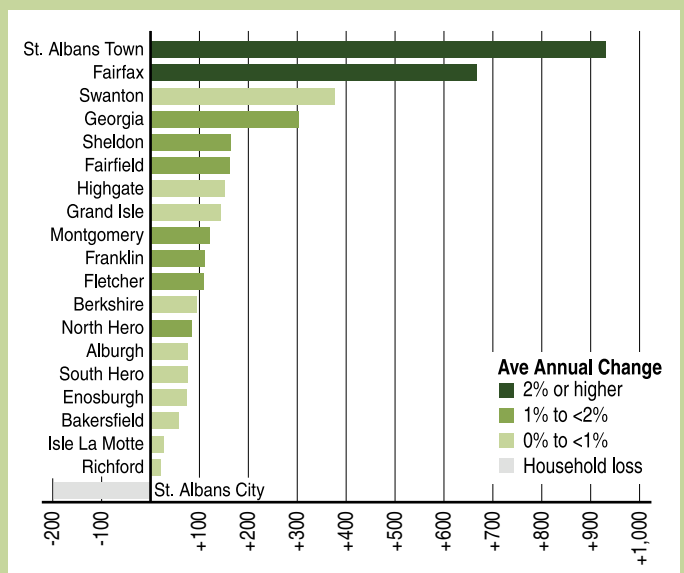
Housing creation has largely been occurring in only a few communities in recent years. During the past 20 years, 45% of households moving into or forming in the region were in St. Albans Town and Fairfax. Only St. Albans City experienced a decline in the number of households between 2000 and 2020, although City permit data show a smaller decline of only 22 units.

### Migration

Households that moved between 2000 and 2020 were largely going from one residence to another within the region, rather than migrating in from outside the region. Approximately 15% of residents who moved between 2015 and 2020 moved into the region from outside Vermont, while nearly 27% moved into the region from somewhere else in Vermont. In the coming decades, migration into Vermont by “climate refugees” is projected to increase. Some climate-related migration into Vermont is likely already happening and will continue to happen largely by households at higher median incomes with the flexibility to move to more desirable locations. As the climate continues to change, climate migration will likely become an unavoidable choice regardless of income in some parts of the country. This region should prepare to receive new climate refugees, since it is projected to be one of most habitable locations in the country as the climate warms (ProPublica, Climate Migration, 2020).

The COVID 19 pandemic may have influenced new migration into the region in 2020 and 2021 by households with the flexibility to work from home and the financial means to relocate to areas that appeal to their

**FIGURE 2:**  
**Change in Number of Households**  
**2000 - 2020**



SOURCE: Decennial Census, U.S. Census Bureau



lifestyle. These trends are so far only confirmed anecdotally; it is necessary to review the results of the pending 2021 American Community Survey data to confirm accuracy and also to explore the proportion of out-of-state migrants who already owned property in the state and changed it to their primary residence versus remote workers who decided to move to Vermont.

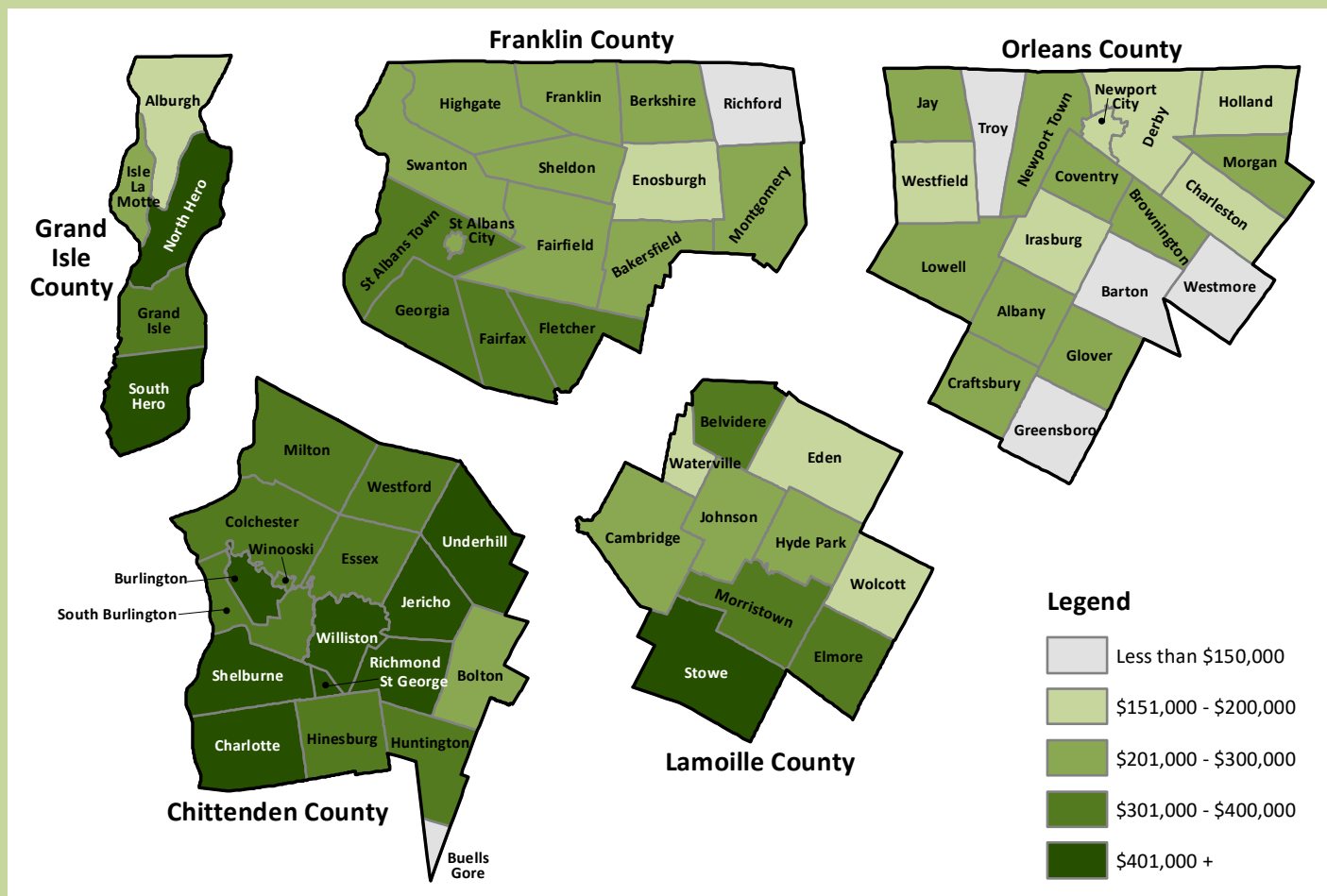
### Travel to Work

While Franklin County is host to several regional job centers in St. Albans, Enosburgh, Swanton, and Georgia, it is also within commuting distance of Chittenden County's large regional employment center. As a result, just under half (48%) of the workforce stays within the county for employment. For the other half of the workforce that travels to Chittenden County for work, it is usually a tradeoff for more affordable housing options in Franklin County. In Grand Isle County, over 80% of the workforce travels off the islands due to limited employment options there and easy access to Chittenden County. (U.S. Census Bureau, LEHD Origin-Destination Employment Statistics (2019))

### Sale Prices

The median sale price of a single-unit primary home in the two-county region increased to new highs in 2021: \$275,000 in Franklin County and \$330,050 in Grand Isle County.

**MAP 4: Median Sale Prices of Primary Residences (2021)**



SOURCE: Housing Vermont - [www.housingdata.org](http://www.housingdata.org)

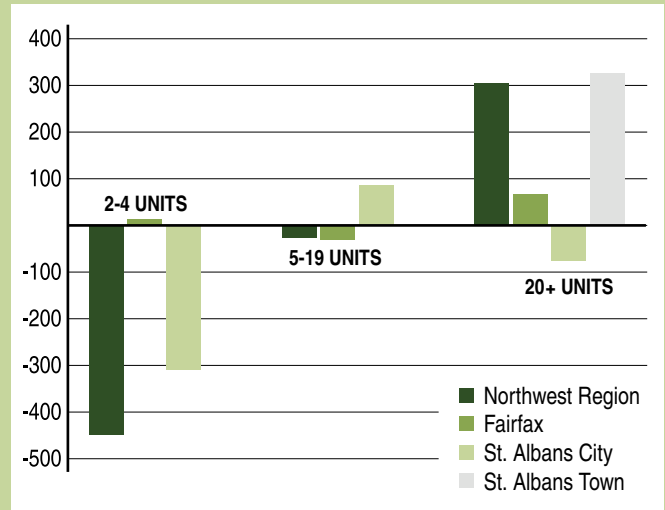
Home sale prices are strongly influenced by the market in Chittenden County, with those towns adjacent to or within easy commuting distance of Chittenden County having higher sale prices. In Franklin County, prices rose significantly at the beginning of the century but declined from 2006 to 2016. There was a sharp increase in 2019 to nearly \$242,000, and price increases were sustained in 2020 and 2021. Grand Isle County experiences a high variability in median price from year to year due to the small number of sales, but the overall trend is similar to Franklin County at a higher price point. Overall, from 2018-2023 home prices in Vermont rose at more than three times the rate of inflation (Bureau of Labor Statistics).

## Housing Types

The diversity of the housing stock declined between 2000 and 2020, with the region losing housing in two-, three-, and four-unit structures, along with mobile homes, which is a trend that is seen statewide. Single-unit detached homes comprised nearly 77% of the two-county region's housing stock in 2020.

On the other hand, the region has experienced an increase in units in large multi-unit buildings between 2000 and 2020. Affordable rental housing projects built in the region during this 20-year period created 325 units in buildings with 10 or more units, accounting for two-thirds of new units in buildings of that size. The remaining third is mostly accounted for by market-rate senior housing. New multi-unit housing was highly concentrated in a small number of communities: 52% in St. Albans Town and another 20% in Fairfax. Additional large-scale developments, such as the Cathedral Square senior housing facility in South Hero, have been constructed since 2020.

**FIGURE 3: Multi-Unit Housing Change by Location**



SOURCE: American Community Survey

## Seasonal and Second Home Properties

The two-county region is a recreation destination and has historically had a substantial stock of camps and second homes. Census data suggests that nearly 13% of the region's housing units were seasonal in 2020. Seasonal housing is concentrated in Grand Isle County, where it accounted for nearly 35% of all units in 2020. Seasonal housing comprised more than 25% of the housing stock in six of the region's municipalities in 2020: Franklin, Montgomery, Alburgh, Isle La Motte, North Hero, and South Hero. Short-term rentals also make up a portion of seasonal dwellings, but the percentage varies by community and season.

## Projections

The two-county projection indicates that the regional population will continue to grow through 2040, but the pace of growth between 2020 and 2040 will be slower than between 2000 and 2020. It projects an increase of about 2,600 new residents in the region over the 20-year period—an average annual growth rate of 0.2% between 2020 and 2040. Future housing demand will be driven by the number and characteristics of households. It projects an increase of 1,630 new households in the region over the 20-year period—an average annual growth rate of 0.4% between 2020 and 2040. The projection indicates that the number of households in the two-county region headed by someone age 65 or older will increase by about 1,560, suggesting an aging in place of the region's boomer households and the need for long-term care facilities. It also shows a recovery in the number of households headed by someone age 35 to 44, which had declined significantly between 2000 and 2020, suggesting new millennial households moving into or forming in the region.

## Household Characteristics

### Age

The median age was estimated to be 40.5 years in Franklin County and 48.7 years in Grand Isle County in 2020. All municipalities in the region saw the median age of residents increase between 2000 and 2020. A person's age is highly predictive of their housing needs, preferences, and experience. Baby boomers have reached or will soon reach retirement age, with many planning to "age in place." The large generation of millennials have been facing issues of affordability and uncertainty since they entered the housing market.

### Household Size

Household size in the two-county region continues to decline, with the average falling below 2.5 people in 2020. Average household size ranged within the region from a low of 2.13 people in Isle La Motte to a high of 2.71 in Georgia. In both counties, the average household size was approximately 3 persons in 1980. As household size drops, more housing units are needed to house the same population.

### Living Arrangements

Approximately 64% of the region's households are estimated to be families (defined as two or more people related by blood, marriage, or adoption and residing together) (ACS, 2020). While the two-county region continues to have more family than nonfamily households, we are seeing growth in nonfamily and single-person households. Between 2000 and 2020, 82% of new households created were nonfamily and 60% were single-person households. More than 2,100 new single-person households were created over the 20-year period. New family and nonfamily households account for net population growth in addition to the dynamic shifting of the same population between family and nonfamily living arrangements.

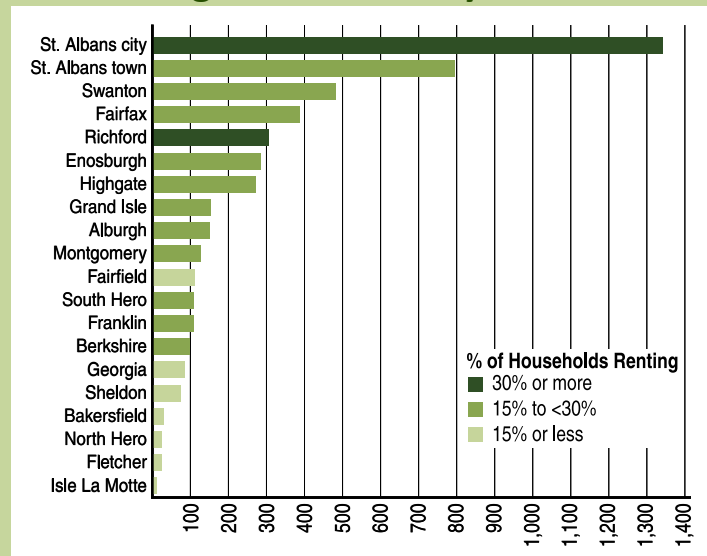
### Tenure

Nearly 80% of households living in the two-county region in 2020 owned their home. More than 90% of new households created between 2000 and 2020 in the region were homeowners. Households who rent are concentrated in St. Albans City and St. Albans Town, which together account for more than 43% of all the renting households in the region. Households headed by the youngest and oldest residents in the region are the most likely to be renting. Single-person households in the region are also more likely to be renting.

## Household Income, Housing Cost and Affordability

Housing affordability is primarily determined by two factors: household income and housing costs, although

**FIGURE 4:**  
**Renting Households by Location**



SOURCE: American Community Survey, U.S. Census Bureau

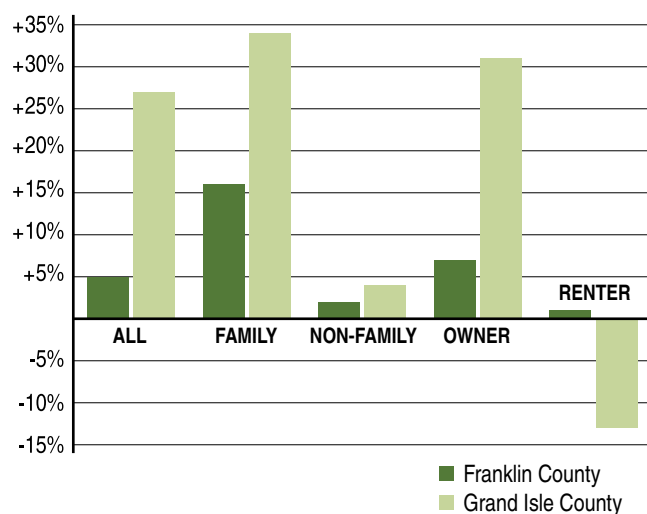
### Housing and Transportation Costs

Housing is generally considered affordable regardless of income when a household uses **no more than 30%** of their income to pay for it.

Given that travel to and from a household to destinations varies based on location **transportation costs** are considered affordable when they consume **15% or less** of the household income.

**Combined** housing and transportation costs that total **greater than 45%** of the household income are considered unaffordable.

**FIGURE 5:  
Median Income Growth  
2000 - 2020**

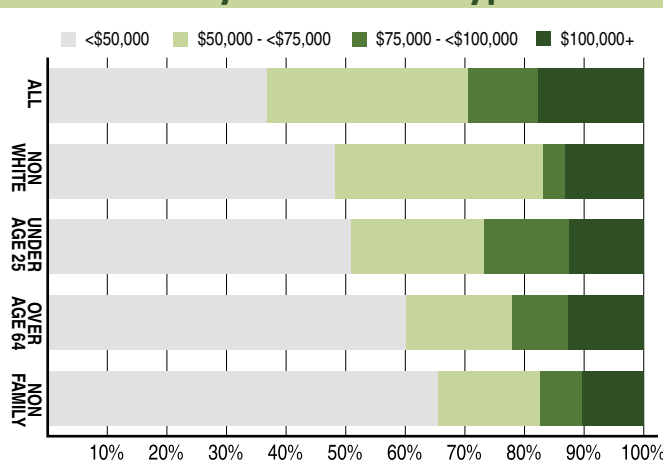


SOURCE: U.S. Census Bureau

other costs of living including transportation impact overall affordability. The Census Bureau estimated that median household income in Franklin County was \$65,314 and in Grand Isle County was \$81,667 in 2020. The Metropolitan Statistical Area Median (MSA) income, which includes the region and Chittenden County, is \$73,447. Median household income in Franklin County increased 4.5% above the rate of inflation between 2000 and 2020. The data shows much larger gains in Grand Isle County with a jump of 26.5% over the 20-year period.

Household income growth is not evenly distributed across households of different types and characteristics. Family households saw their median income grow significantly more than non-family households. In 2020, the median income of owning households was approximately twice the median income of renting households in the two-county region. Households headed by someone identifying as non-white or white and another race/ethnicity, younger or older were disproportionately represented in the region's lower income groups.

**FIGURE 6:  
Income by Household Type 2020**



SOURCE: American Community Survey, U.S. Census Bureau

The Census Bureau estimated that 10% of the region's households had an income below the poverty line in 2020. Despite gains in medium income, both the total number of households below the poverty line and the poverty rate inched upwards between 2000 and 2020. The increase in households below the poverty line is entirely attributable to nonfamily households. A nonfamily household in the two-county region is nearly three times as likely to have an income below the poverty line as a family household. Given that most of the region's new households are nonfamily households, the income and poverty disparity between family and nonfamily households is a worrying trend.

Households are considered to be cost-burdened by their housing costs when monthly housing costs consume more than 30% of their income for rent, mortgage, insurance, taxes and utilities. This metric is widely accepted as the maximum level considered affordable for the average household. For the Northwest Region, homeownership is affordable when ownership costs do not exceed 30% of gross annual income using a target incomes of 120% of the Burlington-South Burlington MSA median household income. And, rental housing is affordable when total rental costs do not exceed 30% of the gross annual income using a target income of 80% of the Burlington-South Burlington MSA median household income.

The Census Bureau estimated that nearly 1 in 3 households in the two-county region were cost burdened in 2020. The number of cost burdened households decreased from 2010 to 2020, however this decrease was

almost entirely made up of owning households. The steep rise in home sale prices has been cushioned by increases in median income for homeowners. Whether with a mortgage or without a mortgage, ownership costs remained well below the affordability limit of 30% of household income for the region's median household income. However, the region's renting households are significantly more cost burdened. Renting a home remains unaffordable for 43% of renting households at the region's median household income.

Many of the region's most vulnerable households are disproportionately burdened by housing costs. 6,620 or 64% of low-income households (with annual household income 80% of MSA or less) in the two-county region were cost burdened. Many of these households are single people – younger adults and seniors. Younger adults in this group are more likely to be renting, while older adults are more likely to be homeowners. These households are also more likely to be headed by someone with a disability or someone identifying as BIPOC or multi-racial. Households with children represent a smaller proportion of low-income households, but those with children are nearly all cost burdened.

### FIGURE 7: Cost Burdened Households



**NOTES:** Cost burdened households are spending more than 30% of their income on housing. The percentage of cost burdened households in each category is shown in yellow in the pie charts. The pie charts are sized to represent the total estimated number of households in each category based on data from the U.S. Census Bureau, 2020 ACS PUMS.

Non White means that the head of the household responded to the US Census question on race and ethnicity by identifying as Native American, Black, Hispanic, another race or ethnicity other than White, or White in addition to another race and/or ethnicity, i.e mixed race and/or ethnicity.

## Closing the Gap: Meeting Current and Future Housing Needs

Vermont Statute (24 V.S.A. § 4348a(a)(9)) tasks Regional Planning Commissions with identifying the housing needs for all communities and economic groups in the region. The 2022 Northwest Vermont Housing Needs Assessment has determined that a significant number of households in the region do not have adequate



housing, or have unmet housing needs. Housing needs are categorized by those households that are currently unhoused, underhoused and/or cost-burdened. Once factoring in overlap between the underhoused and cost-burdened, the assessment estimates that 7,600 households are currently living with an unmet need. The unhoused population consists of those individuals and families that are currently experiencing homelessness. The underhoused population includes individuals and families that do not have their needs met by their current housing, including young adults living with family members because adequate housing is not available, housing that is overcrowded or poor quality, and senior housing that is not ADA compliant. The cost-burdened population are individuals and families that pay more than 30% of their household income on housing costs.

The level of current unmet housing need is so significant that ‘catching up’ will require a sustained, long-term commitment. Meeting the housing needs of current households will take a combination of new affordable housing units, modifications to existing units and expansion of programs that address both housing costs and household income. To satisfy the current unmet need within a 20-year timeframe, it would necessitate addressing the unmet needs of an average of 380 households annually. This does not take into account new housing units needed to account for population growth.

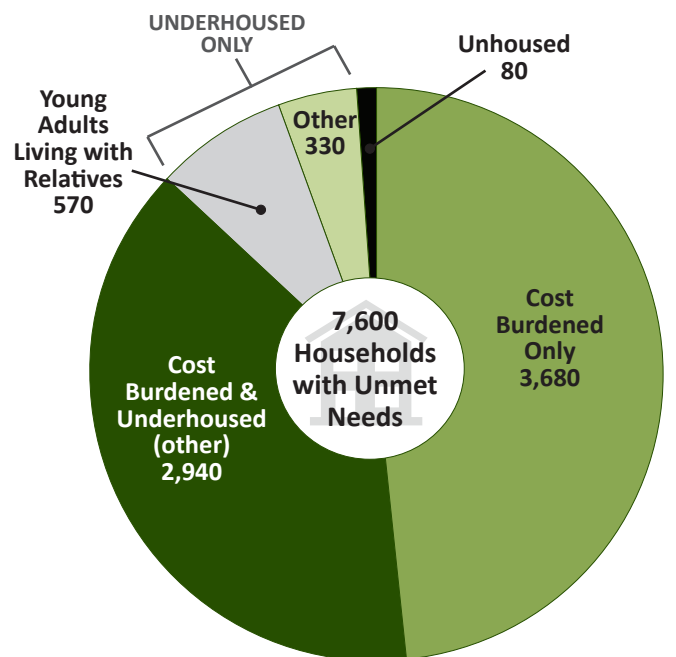
NRPC recommends the following strategies to address unmet housing needs:

1. new housing units in 2–5-unit buildings in regional and sub-regional growth areas and village centers,
2. flexibility and incentives for construction of Accessory Dwelling units
3. improvements to sub-standard housing units,
4. enrollment of existing units in guaranteed affordability programs,
5. new/expanded housing assistance programs that result in lower housing costs, and
6. new/expanded workforce development/job training programs that result in higher household income.

To address disproportional impacts on different types of households, strategies will need to focus on meeting the needs of:

1. severely cost-burdened households,
2. households currently living in substandard housing,
3. BIPOC households,
4. seniors facing difficulties with aging in place, and
5. young adults seeking to move into or form a household within the region.

**FIGURE 8:  
Unmet Housing Needs**



SOURCE: 2022 Northwest Vermont Housing Needs Assessment

NRPC will work with municipalities and other regional and statewide partners on implementing housing strategies with the intention of addressing unmet housing needs and promoting the development of new units. Attention will focus on better meeting the needs of all communities across the region and the marginalized populations that have historically faced discrimination and disproportional impacts on housing security. While NRPC is not directly involved in constructing new housing units, the Commission will continue to work with communities on making it easier to build homes by reducing regulatory barriers and providing incentives for new housing development locally. The Commission also coordinates with partners to further a wide variety of



programming that supports homeowners and renters in managing the cost of housing, access to housing and sustaining and improving existing homes.

NRPC will continue to serve as the backbone organization for Housing For All, Working Communities Challenge. This partnership is funded through the state of Vermont and the Federal Reserve Bank of Boston and has a mission to support the creation and improvement of housing for healthy, inclusive, and prosperous communities.

This effort will also include education on regional housing needs, maintaining and updating data and tracking progress and outcomes. Unfortunately, the data needed to adequately track progress towards this goal is not easily collected or adequately tied to improvements in meeting housing needs, so part of this effort involves working to improve access to data.

## GOALS AND POLICIES

### 1 GOAL

**Build and improve more homes so that high-quality, safe and affordable housing options are equitably available to all current and future residents.**

- a. Promote the construction of new housing units through local and state permitting flexibility, bylaw modernization, employer assisted housing and education about the importance of housing.
- b. Preserve the region's existing housing stock; improve substandard housing to comply with state recognized building codes.
- c. Promote mixed-income Affordable Housing Developments with at least 20% or a minimum of 5 affordable units as defined by VT Statute for new housing developments in the region.
- d. Support perpetual affordability protected by covenant or other legal restriction for new affordable housing developments.
- e. Support a variety of programs that provide financial incentives for affordable housing, such as land trusts, cooperative housing, shared equity, Section 8 vouchers, alternative financing and others.
- f. Promote zoning changes that integrate diverse housing types into existing neighborhoods, including accessory apartments, cottage courts and 2-5 multi-unit housing for residents of all incomes and ages.
- g. Support the development of housing that meets the needs of the existing and future workforce of the region and assist employers who are interested in participating in employer supported housing.
- h. Promote and facilitate life safety and accessibility improvements in housing units.
- i. Support the development of housing units dedicated to those that are housing insecure or unhoused.
- j. Target housing access programs to populations that have experienced housing insecurity at disproportionate rates, including BIPOC and mixed-race households.
- k. Promote and facilitate housing dedicated to the region's senior residents.
- l. Improve the financial security of low- and moderate-income households.
- m. Ensure compliance with fair housing laws.

### 2 GOAL

**Ensure housing is easier to build in concentrated, regional and sub-regional growth areas and village centers that are convenient and accessible to employment, services, retail, public transportation, recreation facilities and schools.**

- a. Promote the efficient design of new housing developments to conserve energy and minimize the financial impact of expanded municipal services on municipalities and taxpayers, including maximizing

density according to local context, utilizing a street network that connects to services and amenities and making use of public or shared wastewater, water supply and stormwater infrastructure.

- b. Support the location of housing developments that have substantial regional impacts within locally and regionally designated growth centers with appropriate infrastructure, and outside of identified resource and conservation lands.
- c. Ensure that multi-family, assisted living and group homes will be designed to meet the needs of the occupants and will be located in areas with convenient access to related services.

## ③ GOAL

**Housing design and construction is energy efficient and minimizes adverse environmental impacts.**

- a. Support development of water and wastewater infrastructure in and around the region's growth areas to support additional high-density housing development in smart-growth locations.
- b. Encourage the design of housing developments that fit into the cultural, aesthetic and natural landscape in which they are located.
- c. Ensure new rural housing developments are sited to preserve the greatest amount of open space possible, avoid adverse impacts on significant natural areas and minimize the fragmentation and parcelization of agricultural land and habitat blocks. Open space shall be retained for agriculture, forestry, recreation or resource preservation.
- d. Support the conversion of existing commercial and institutional space to new housing to meet the region's needs.

# COMMUNITY HEALTH

## GOALS

- 1. Promote active, healthy living and a high quality of life among individuals and communities; encourage physical activity and access to healthy foods.**
- 2. Reduce and prevent substance misuse across the region.**
- 3. Support the mental and physical health of the region's residents of all ages.**

Good health not only increases life expectancy; it also contributes to personal happiness and success. A healthy lifestyle enables people to reduce their health-care expenses and save their earnings.

In recent years, there has been increased recognition of the major role social factors play in an individual's health outcomes. These "social determinants of health" include both direct factors, such as the impact of living next to a contaminated site, and indirect factors, such as a person's ability to access healthy food. According to the U.S. Center for Disease Control, these social determinants of health can be divided into five broad categories: economic stability, education access and quality, health care access and quality, neighborhood and built environment, and social and community context. Healthy People 2030, a program of the U.S. Department of Health and Human Services, sets data-driven national objectives to improve health and well-being over the next decade using these determinants. This framework was used during the 2022 revision of the Northwestern Medical Center's Community Health Needs Assessment (CHNA), data from which is used throughout this chapter.

This chapter addresses these social determinants of health to provide strategic guidance for decisions related to regional community health in the short, medium, and long terms. Addressing the underlying social factors that can create poor health is important to eliminating health disparities and ensuring well-being for all regional residents.

The COVID-19 pandemic has affected all aspects of public health. It has also highlighted and exacerbated the existing disparities within Vermont around the social determinants of health. As the pandemic continued, it had a persistent and disproportionate impact on populations that are at higher risk and populations that



Social Determinants of Health  
Copyright-free

Healthy People 2030

are underserved. For example, according to the VT Department of Health, “BIPOC Vermonters with COVID-19 have a significantly higher rate of pre-existing conditions compared to white non-Hispanic Vermonters with COVID-19; 19.4 versus 12.1 per 10,000 Vermonters, respectively. BIPOC Vermonters with COVID-19 have significantly higher rates of diabetes, lung, and cardiovascular disease than rates among white non-Hispanic Vermonters.” (December 2020)

## SOCIAL DETERMINANTS OF HEALTH IN THE NORTHWEST REGION

### Economic Stability

Economic stability and access to a high-quality education are critical factors for a healthy community. A key takeaway from focus groups and informant interviews for the CHNA was that people with lower incomes are more likely to experience health challenges related to mental health, substance use disorder, and lack of access to health-care services in our region. More information regarding these factors can be found in the economic infrastructure chapter of this plan.

### Education Access and Quality

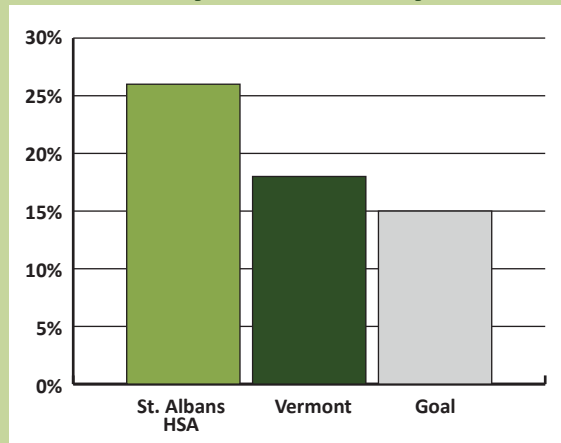
Standardized tests are one measure of student progress and how schools compare against each other. These tests consistently show that students who qualify for free lunch or reduced-cost lunch score at least 25% lower on these tests than students who do not. More information regarding education can be found in the social infrastructure chapter of this plan.

### Neighborhood and Built Environment

A person’s neighborhood can have a major impact on a person’s health. If someone is able to walk or bike to their destination, they will have exercised without needing to make a separate time to do so. Creating an environment that encourages walking and biking will therefore encourage healthy lifestyle choices and improve community-level health outcomes. However, many regional residents do not have this opportunity: 23% of residents stated that it was unsafe to walk in the region and 91% of residents commute via personal vehicle, though this number might be lower now with the increase in telecommuting. (Vermont Department of Health; U.S. Census American Community Survey 2020).

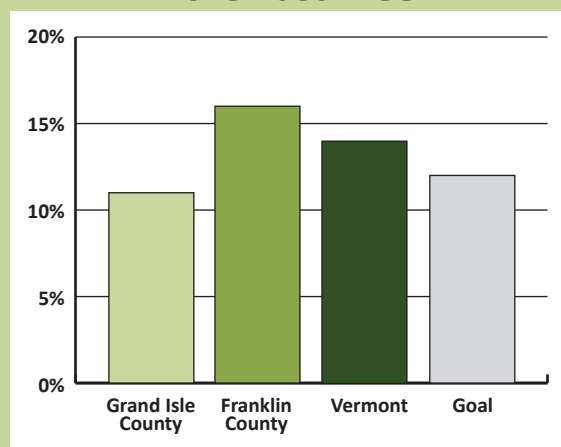
**Physical Activity:** In many communities, schools and recreation areas can be challenging to access via walking or biking, or they are located on major truck routes or in communities where there are limited or no sidewalks or paths. Partially as a result of these conditions, more than a quarter of Franklin and Grand Isle County residents (26% in 2018) report that they do not use any leisure time for physical activity. That number has not improved since 2000–2002. Franklin County has a higher percentage of youth in grades 9–12 who did not participate in physical activity than the state as a whole, while Grand Isle’s numbers are better than the state as

**FIGURE 9: Percentage of Adults with No Leisure Time Physical Activity**



SOURCE: Behavioral Risk Factor Surveillance System

**FIGURE 10: Youth Grades 9-12 Who Did Not Participate in at Least 60 Minutes of Physical Activity on at Least One Day in the Past Week**



SOURCE: Behavioral Risk Factor Surveillance System

a whole (Figure 10). Lack of physical activity has been linked to a number of health conditions, including heart disease, high blood pressure, and type 2 diabetes (US CDC 2022).

The region has numerous opportunities to increase physical activity, including improving bike and pedestrian access to schools and recreation facilities and expanding bike path and sidewalk networks within the region's growth areas. Residents can be encouraged to take advantage of the region's vast natural resources for walking, hiking, snowshoeing, swimming, skating, etc.

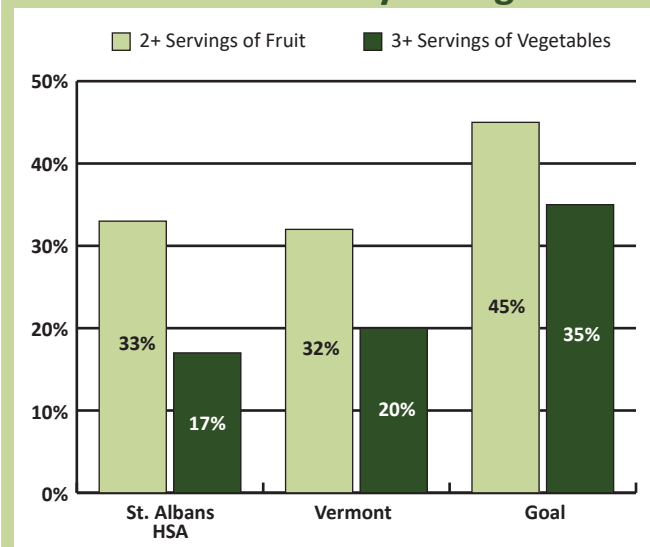
Safe Routes to School is a comprehensive program focused on children being able to safely walk and bike to school. At least 12 schools in northwest Vermont have worked with NRPC and the Vermont Agency of Transportation (VTrans) to develop Safe Routes to School programs.

Paths and trails in the region offer recreational and physical activity opportunities. The region is home to the Missisquoi Valley Rail Trail, a 26.4-mile multi-use pathway between St. Albans Town and Richford. The region is also home to a segment of the Lamoille Valley Rail Trail, which connects Swanton to St. Johnsbury. Additional efforts should be made to enhance bicycle connections, particularly to Canada, and to encourage recreation-oriented tourism. In Grand Isle County, paths like the South Hero Recreation path provide local opportunities. Wider shoulders on regional roads can encourage additional bicycle recreation as well, but can also lead to increased vehicle speeds.

**Food Access:** Access to nutritious, healthy food is a measure of neighborhood health and is a major issue in the region. Across the region, there are only six full-service grocery stores, and none of those are in Grand Isle County. Because of the importance of food access for community health, the NOTCH clinic purchased (and now operates) the grocery store in Richford when the previous owners announced its closure. While some areas may be served by smaller stores, not all of these stores provide access to a full range of produce and healthy options. Additionally, a survey conducted as part of the CHNA process found that 26% of respondents stated that the food available in the region does not meet the diverse needs of the community. Beyond access to stores selling healthy food, those with lower incomes may also be unable to afford such food. Statewide, 5% of residents reported not having enough to eat and an additional 22% reported not having the types of food they would like to eat available to them because of cost or availability (US Census Pulse Survey 2022). Because unhealthy food options are often cheaper than healthy options, it is likely that many regional residents find it challenging to access nutritious choices. The region's network of food shelves fills the gap for area residents who cannot afford or access enough food. This charitable food system serves a crucial role in the region; in most cases, food shelves are run by volunteers and supported by donations. Healthy Roots Collaborative, a program of NRPC, provides gleaned produce to the area's food shelves and meal sites.

Statistics concerning eating habits are also available through the Vermont Department of Health Behavioral Risk Factor Surveillance System (BRFSS) survey 2019-2020. The data shows that adults throughout the region fall short of the goal of eating at least two fruits and three vegetables daily (Figure 11). Among youth, the total of the population eating at least two servings of fruit on a daily basis is approximately 30%.

**FIGURE 11:  
Adult Healthy Eating**

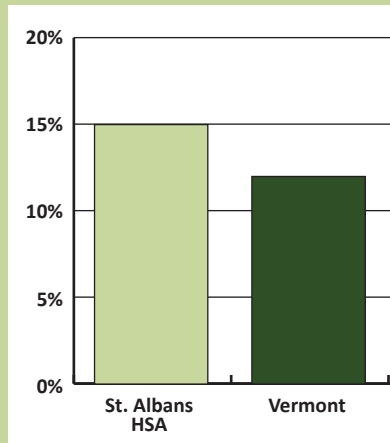


*SOURCE: Vermont Department of Health*

## Social and Community Context

Positive community and social interactions are important for a person's physical and mental health. One of the key concerns of residents and service providers identified in the 2022 Community Health Needs Assessment is a lack of community connectedness. One in four respondents stated that people of all cultures, gender identities, and sexual orientations were not accepted. Over 80% stated that interpersonal violence is a problem in the community, and one-third stated that young people are not thriving.

**FIGURE 12:**  
**Adults Reporting**  
**Poor Mental Health**



SOURCE: Vt. Department of Health

Isolation and social ostracization are major risk factors for mental health issues and substance use. Both youth and adults in the region are impacted by mental health challenges. Fifteen percent of regional adult residents reported poor mental health. Roughly one-third of high school age youth reported feeling sad or hopeless in the past year. LGBTQIA+ youth were significantly more likely to feel sad or hopeless, with almost 70% of Franklin County LGBTQIA+ youth stating they felt sad or hopeless (data for Grand Isle County LGBTQIA+ youth was not available). Research suggests the pandemic may have negatively impacted regional mental health, with a study of northern New England finding that nearly half of all respondents reported mental health challenges during the pandemic.

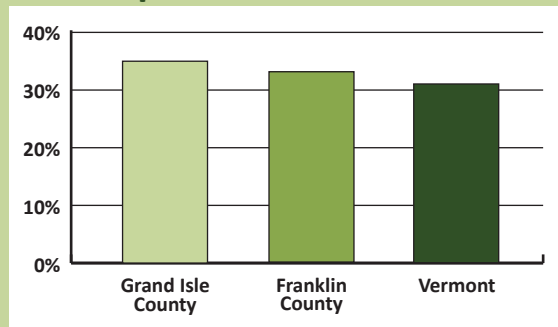
Substance use continues to be a major issue for the region's residents. The number of people being treated for opioid use disorder dramatically increased in the past two decades and is currently the most common substance use being treated in Franklin and Grand Isle Counties (Figure 14).

Alcohol use is the second most common reason that adults in Franklin and Grand Isle Counties seek treatment for substance use; however, treatment for alcohol use has decreased somewhat over the last decade. Alcohol and binge drinking rates for youth have continued to decrease from 2011 to 2019.

Smoking continues to be a public health concern in the region. Smoking is a major risk factor for asthma, which is the number-four chronic disease occurring in the region, at a rate of 11%. Roughly 13% of Grand Isle County adults and 18% of Franklin County adults smoke. However, 66% of adults made a quit attempt in the past year, showing a strong desire for treatment. Including both smoking and electronic vape products, 21% of Grand Isle youth and 30% of Franklin County youth smoke as reported in the 2019-2020 Behavioral Risk Factor Surveillance System data. These trends are extremely concerning, as they show that youth are now more likely to smoke than adults. A significant component of this trend is likely due to misconceptions about electronic vape products, with only 38% percent of Grand Isle County youth and 24% of Franklin County youth believing that electronic vapor products greatly risk harming themselves.

Marijuana/hashish use is the third most common reason adults in Franklin and Grand Isle Counties seek treatment for substance use. Roughly 18% of the region's adults currently use cannabis, while almost one-quarter of all high school youth in the region have used cannabis in the past 30 days. Similar to electronic vape products, many youth have misconceptions about the risks of cannabis, with just 22% of Franklin County high school students and 26% of Grand Isle County high school students believing that people greatly risk harming themselves if they

**FIGURE 13:**  
**Youth Reporting Feeling Sad**  
**or Hopeless in the Past Year**



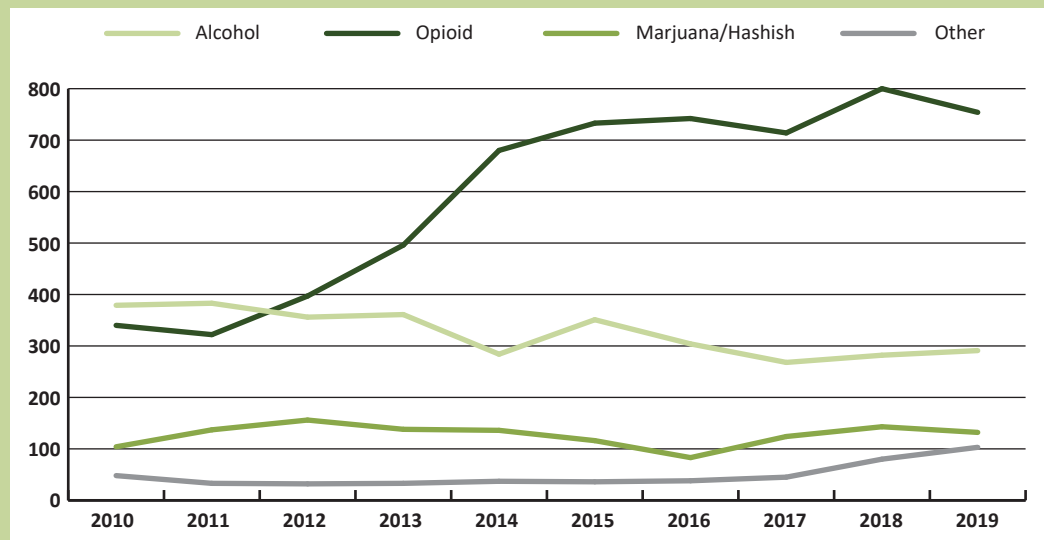
SOURCE: Vermont Department of Health



use marijuana regularly. Prevention organizations across the region have worked diligently to provide youth with accurate information about the risks of cannabis use. Legal sale of recreational cannabis began in 2022, with municipalities having the option to opt-in to allow recreational sales.

Addressing the underlying factors that impact mental health and substance use, including those discussed above, will be critical to combating these trends.

**FIGURE 14:**  
**Number of People in Franklin and Grand Isle Counties Treated for Substance Use Disorders**



SOURCE: Vermont Department of Health

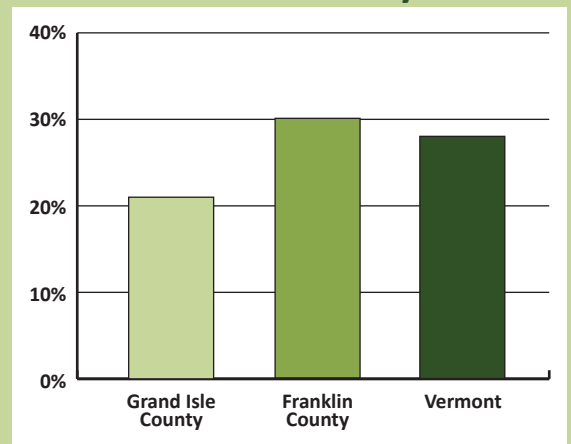
## Health Access and Quality

Access to quality health-care services is critical for good health. The recent 2022 CHNA survey found that many residents had challenges accessing health-care services. Roughly 20% of survey respondents stated that services for substance use disorder are inaccessible due to lack of transportation. Many residents have encountered high wait times for health-care services: 36% of CHNA survey respondents stated that wait times for adult mental health care made it inaccessible, while 38% stated that the wait times for primary care and pediatric appointments make them inaccessible. These results point to a need for additional capacity in the region's health-care system.

While capacity of services is an issue, the region has many quality health-care assets. Most notable among the region's community health assets is Northwestern Medical Center (NMC), located in St. Albans City. The hospital is licensed for 70 beds and employs more than 75 medical staff members. It also has a walk-in clinic and urgent-care facilities located in St. Albans and Georgia.

NMC works closely with Northern Tier Center for Health (NOTCH), a primary-care practice with locations in Richford, Swanton, Enosburg Falls, St. Albans, Georgia, Fairfax, and Alburgh. NOTCH's mission is to provide high-quality care to traditionally underserved populations in Franklin and Grand Isle Counties. NOTCH provides a wide array of health-care services, including family medicine, behavioral health, pharmacy, and general dentistry. Because it is a federally funded health center, care is provided to those who do not have health insurance. Since 2012, Community Health Centers has operated a practice in South Hero—the Champlain Islands Community Health Center—which provides access to primary care and mental health services. Expansion to dental services is expected in 2024.

**FIGURE 15:**  
**Youth Grades 9-12 Who Used Tobacco Products or Electronic Vape Products in the Past 30 Days**



SOURCE: Vermont Department of Health

There are three nursing homes in Franklin County, which are all located in St. Albans City and St. Albans Town. Grand Isle County does not have any nursing homes. Nursing homes provide nursing care and related services for people who need medical, rehabilitative, or other special services. There are six Level III residential care homes serving Franklin County. Residential care homes are state-licensed group living arrangements designed to meet the needs of people who cannot live independently but usually do not require the type of care provided in a nursing home. In Grand Isle County Bayview Crossing senior housing recently opened, but there remains an unmet need in Grand Isle County for nursing and residential care homes. (Vermont Department of Disabilities, Aging and Independent Living).

Northwest Counseling and Support Services (NCSS) is a private, nonprofit service agency located in St. Albans that provides residents of the region with access to social services. NCSS focuses on providing mental and developmental health services. This includes providing support to those with substance use issues and to senior citizens through the Senior Team, and collaborating with the Champlain Valley Agency on Aging (which provides services to the region and to Chittenden and Addison Counties). NCSS also works with youth via several programs including the Youth in Transition Program and the Transitional Living Program Services. NCSS is one of three substance abuse treatment centers located in the region; the other two are the Howard Center and Turning Point of Franklin County, both of which are located in St. Albans City. Franklin County Caring Communities is a local nonprofit focused on youth development. The organization has been particularly involved in substance abuse prevention in Franklin County.

Franklin County Home Health Agency is a local nonprofit based in St. Albans that provides home health-care programs and related support services. The organization provides comprehensive health care within the home setting, often collaborating with other local organizations, such as NCSS.

Champlain Islanders Developing Essential Resources (CIDER) provides transportation, meals and community support services to seniors in Grand Isle County. United Way of Northwest Vermont is active in community health causes in the region. The organization has several different programs that focus on three key areas: access to health care, safe community and homes, and supporting healthy choices. Through these three programs, the United Way is combating substance use, domestic violence, mental health, and obesity issues in the region.

Samaritan House, a program of the Champlain Valley Office of Economic Development, is a nonprofit organization that provides emergency shelter and transitional housing to people without other options or resources within Franklin and Grand Isle Counties. Samaritan House is located in St. Albans City, and it is the only emergency shelter in Franklin and Grand Isle Counties. In 2020, Spectrum opened a drop-in center for youth in crisis that offers hot meals and showers during the day.

## **Health Equity**

Health equity is the state in which everyone has a fair and just opportunity to attain their highest level of health (Center for Disease Control (CDC)). Achieving health equity and eliminating health disparities requires focused and ongoing efforts to address historical and social injustices (US CDC). Efforts to improve the social determinants of health must focus first on the most impacted marginalized communities and include the voices of those communities. The state's RPCs have collectively developed a [Health Equity Toolkit](#) to assist municipalities with incorporating health equity in their planning.

## GOALS AND POLICIES

### 1 GOAL

**Promote active, healthy living and a high quality of life among individuals and communities; encourage physical activity and access to healthy foods.**

- a. Incorporate healthy community design through land development patterns, transportation options, and site design that enable residents to lead physically active lives.
- b. Include walking paths, sidewalks, biking paths, and/or recreation opportunities in larger projects that meet the definition of having significant regional impact.
- c. Increase access to physical activity and healthy recreation spaces region-wide and support community-based recreation programs.
- d. Increase access to healthy food in the region by supporting regional agriculture, farm-to-plate and farm-to-institution activities, and transportation programs to bring residents to shopping opportunities.
- e. Promote worksite wellness in the Northwest region.
- f. Create opportunities for aging residents to thrive through community-based events, social activities, and targeted assistance.
- g. Support universal school meals to ensure all children have access to daily school meals.
- h. Limit locations of land uses that can have negative health impacts, such as emissions and noise, to avoid additional burdens on historically disadvantaged communities.
- i. Allocate resources to support new paths, sidewalks, parks, and recreational opportunities in communities and neighborhoods that have historically had lower public investment or experience negative impacts from existing land uses.

### 2 GOAL

**Reduce and prevent substance misuse across the region.**

- a. Reduce the visibility of alcohol, cannabis, and tobacco products and advertisements.
- b. Increase education about substance use prevention in order to change community norms.
- c. Create restrictive licensure policies for alcohol, cigarettes and cannabis through local ordinances, including limiting location and hours of operation.
- d. Increase the number of community and school personnel dedicated to providing screening, referral, and education.
- e. Support the development of residential and non-residential treatment facilities within the region.

### 3 GOAL

**Support the mental and physical health of the region's residents of all ages.**

- a. Reduce barriers to mental health treatment and support prevention efforts.
- b. Ensure safe housing and transitional support for adolescents.
- c. Create crisis safe space for adolescents, LGBTQIA, and BIPOC community members.
- d. Provide safe spaces and support programs for individuals and families escaping domestic abuse.
- e. Support the mental health of the region's aging residents.