

Homelessness in Minnesota

*Detailed Findings from the
2018 Minnesota Homeless Study*

Authors: Brian Pittman, Stephanie Nelson-Dusek,
Michelle Decker Gerrard, and Ellen Shelton



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451 Lexington Parkway North | Saint Paul, Minnesota 55104
651-280-2700 | www.wilderresearch.org

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2018 Minnesota Homeless Study

Snapshot of counts and estimates

The Minnesota Homeless Study, conducted every three years by Wilder Research, is a point-in-time study aimed at better understanding homelessness in Minnesota. The study is the most comprehensive source of descriptive information about homeless adults, youth, and children in the state, and is intended to equip readers with the data needed to improve housing programs and policies, address systemic problems, and ultimately eliminate homelessness in Minnesota.

This summary provides a snapshot of the numbers of people who were homeless in Minnesota in 2018 and findings from face-to-face interviews conducted on October 25, 2018, with 4,181 adults experiencing homelessness throughout Minnesota.

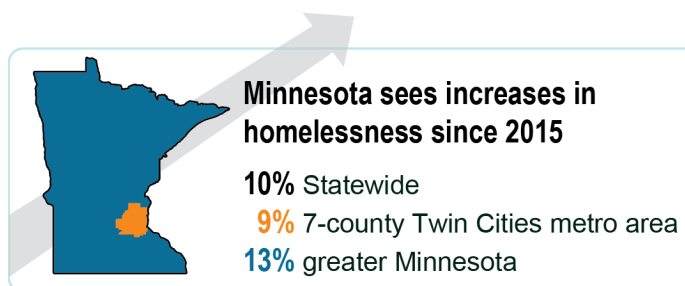
Snapshot of counts and estimates

11,371	19,600	50,600
people were counted as experiencing homelessness in October 2018	people were estimated to be experiencing homelessness on any given night in 2018	people were estimated to be experiencing homelessness over all of 2018

Note. See the Appendix for a detailed description of the methods used to arrive at these numbers.

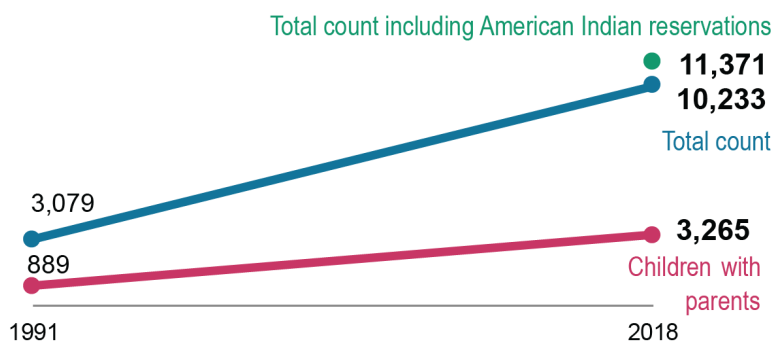
Homelessness has increased by 10% since 2015.

The overall number of people experiencing homelessness counted on a single night in October increased by 10% from 2015. This increase in homelessness is evident throughout Minnesota, where there was a 9% increase in the 7-county Twin Cities metro area and a 13% increase in greater Minnesota.¹



This report has an updated count (11,371) that includes the 1,138 people experiencing homelessness counted on six American Indian reservations that participated in a companion study during this same period. Findings from the Reservation Homeless Study are detailed in a separate report (MartinRogers et al., 2020).

ONE-NIGHT STUDY COUNTS OF PEOPLE EXPERIENCING HOMELESSNESS, 1991-2018



¹ Increases are based on the count of people experiencing homelessness originally published by Wilder in March 2019. In partnership with six tribes, Wilder also conducts a study of homelessness on American Indian reservations. Historically, the counts from that study are reported separately; however, this year Wilder has combined the Statewide and Reservation counts. Because this is the first year they are combined, the updated number (N=11,371) should not be compared with previous years. Moving forward, Wilder will be able to compare the combined counts across years (starting with 2018).

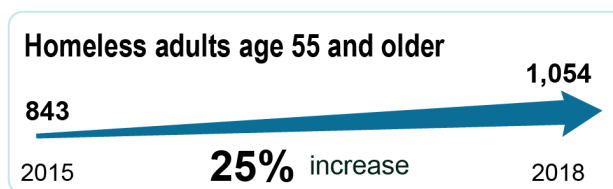
► **There was a considerable increase in the number of people not staying in a formal shelter setting.**

The proportion of people *not* staying in a formal shelter (meaning outside or temporarily doubled up) increased considerably (62%) from 2015 to 2018; this drove the overall increase in homelessness and occurred primarily in the Twin Cities metro area (93%), compared to greater Minnesota (36%). It is important to note that more people experiencing homelessness were counted in shelters² (74%) than not (26%). However, the drastic increase in people staying outside of a formal shelter points to another critical issue, which is the shortage of shelter space and services to help stabilize people in crisis. A striking 32% of respondents had been turned away from shelter in the previous three months due to a lack of space. A similar number (33%) reported that they stayed the night on a bus, on a light rail train, in a bus or train transit station, or at a highway rest stop in the previous 12 months.

Simply put, many people are staying outside of the formal shelter system because there is nowhere else to go; shelters are at capacity and there is no available affordable housing.

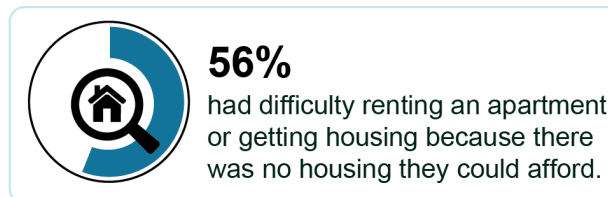
► **Since 2015, there has been a 25% increase in older adults (55+) experiencing homelessness.**

Among older adults, homelessness is on the rise. The number of homeless adults age 55 and older increased 25% from 2015, which is substantially faster growth than older adults in Minnesota overall (8%; U.S. Census Bureau, 2015 and 2018 Population Estimates). In addition, issues facing the aging population, particularly chronic physical health conditions, are magnified for those experiencing homelessness.



Highlighted survey findings

► **A lack of affordable and subsidized housing in Minnesota is the primary barrier for getting out of homelessness.**

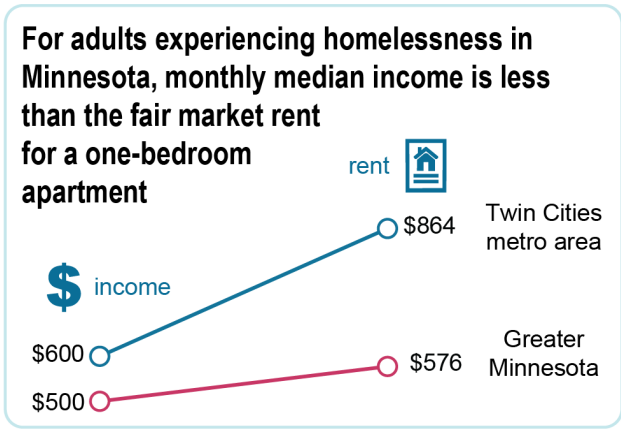


In addition to a shortage of shelter beds for those experiencing homelessness, there is a gap between the incomes of people experiencing homelessness and the affordability and availability of rental units, a finding that is consistent with previous study reports.

More than half of respondents (56%) said they have had difficulty renting an apartment or getting housing because there was no housing they could afford, and the most common reasons that adults reported for leaving their last housing were eviction or not having their lease renewed (39%) and being

² The term “shelter” includes emergency shelters, domestic violence shelters, transitional housing, and a limited number of Rapid Rehousing programs.

unable to afford rent or house payments (38%). During the month of the study, 13% of adults experiencing homelessness had *no* income; three-quarters (76%) made less than \$1,000 in income. Adults experiencing homelessness reported a median income of \$550 during the month of the study (\$600 in the Twin Cities metro area and \$500 in greater Minnesota). This is less than the fair market rent – \$864 per month for a one-bedroom apartment in the Twin Cities and \$576 per month in greater Minnesota (U.S. Department of Housing and Urban Development, 2018). Half of homeless adults are on a waiting list for subsidized housing, and the average wait time is 12 months.

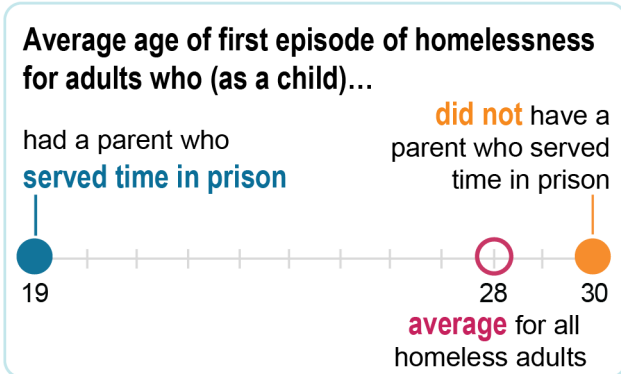


► **Homelessness often begins at a young age.**

Most homeless adults (77%) have had multiple experiences with homelessness, and many adults have experienced repeated homelessness starting from an early age. More than half (52%) of those surveyed first became homeless by the time they were age 24, and over one-third (36%) first became homeless at or before age 18.

► **Adverse childhood experiences hasten entry into homelessness.**

When asked whether they had experienced any of seven different adverse childhood experiences (ACEs),³ the majority (73%) of homeless adults had experienced at least one, and over half (59%) reported multiple ACEs. These experiences have the added negative effect of hastening entry into homelessness. For each ACE reported by homeless adults, the average age of first episode of homelessness drops considerably. Most notably, adults who (as a child) experienced having a parent serve time in prison were, on average, homeless at age 19 (compared to age 30 for those who did not have this ACE).



The survey also asks respondents about social service placements they may have experienced as a child. Half (52%) of young adults (age 18-24) had been in a social service placement as a child, compared to less than one-third (31%) of adults 25 and older. Again, having experienced a social service placement as a child decreases the average age of first episode of homelessness (age 21 for those with a social service placement, and age 31 for those without).

³ The Minnesota Homeless Study survey asks homeless adults whether they had experienced any of seven different adverse childhood experiences (ACEs), as described by the Centers for Disease Control and Prevention. It should be noted that, generally, there are 11 ACEs measured, but, for the purposes of this research, we only ask about the seven most severe (and combine emotional and physical neglect into one category).

► **Children experiencing homelessness face added barriers to positive social-emotional and academic outcomes.**

In the 2018 Minnesota Homeless Study, nearly one-third (32%) of those experiencing homelessness were children (17 or younger) living with their parents.

As illustrated in the [Single Night Count of People Experiencing Homelessness](#) (Wilder Research, 2019), this number has remained relatively flat since 2015.

For young children, homelessness means additional strain on academic and social well-being. Nearly half (46%) of parents experiencing homelessness reported that at least one of their children had to change schools because of their housing situation, and 43% reported at least one of their children had learning

problems that required additional services. When asked about a set of experiences their school-aged child might have had, the most common issues parents reported were experience with bullying as a victim (42%) and difficulty with peer relationships (29%).

Parents experiencing homelessness reported at least one of their children. . .



46%

had to **change schools** because of their housing situation



43%

had learning problems that required **additional services**

► **Nearly 6 in 10 homeless adults have experienced physical or sexual violence; women and people who identify as LGBTQ experience this violence at higher rates.**

Nearly six in ten (58%) homeless adults report experiencing at least one act of abuse or violence measured in the survey. Women are more likely than men to have these experiences (on all measures in the survey). The three most common experiences were: stayed in an abusive relationship because they did not have any other housing options (women: 53%, men: 25%), being in a personal relationship with someone who was abusive within the last year (women: 38%, men: 13%), and being physically or sexually attacked while homeless (women: 31%, men: 17%).

% who reported at least one act of abuse or violence

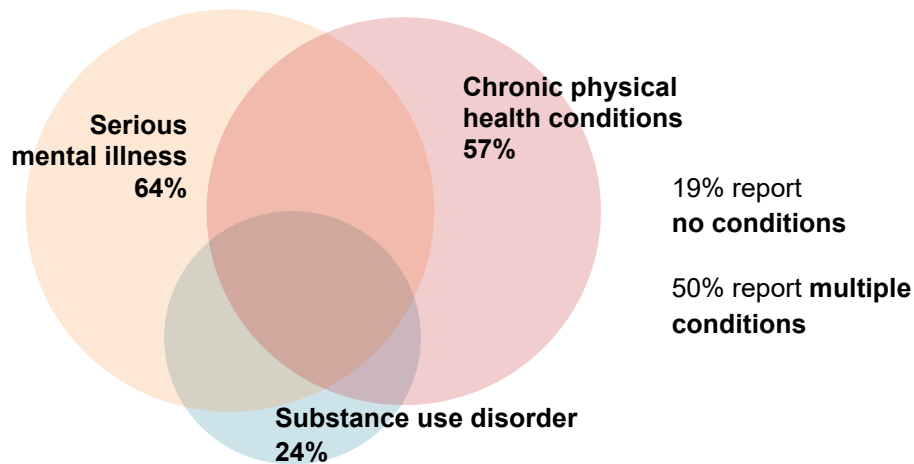


Adults who identify as LGBTQ also experience violence and exploitation at higher rates than other adults experiencing homelessness (on all measures in the survey). One-half (50%) of homeless LGBTQ adults said that they had stayed in an abusive relationship because they did not have other housing options (compared to 37% of other adults); 38% had been physically or sexually attacked while homeless (compared to 22% of other adults), and 36% had been in a personal relationship with someone who was abusive within the last year (compared to 23% of other adults). Experiences with violence and exploitation are both a cause of homelessness, as well as a result of unsafe situations in which homeless adults may be forced to stay.

► **Most homeless adults have a chronic health condition.**

Most adults experiencing homelessness (81%) have either a chronic physical health condition (57%), serious mental illness (64%), or substance use disorder (24%), and 50% have co-occurrences of these conditions. Since 2000, the proportion of adults experiencing chronic physical and mental health conditions has increased, while substance use disorder has remained relatively flat. In particular, the mental health diagnoses of post-traumatic stress disorder has tripled between 2000 and 2018.

MENTAL, PHYSICAL, AND CHEMICAL HEALTH CONDITIONS AMONG HOMELESS ADULTS



These conditions create additional barriers to finding and keeping stable housing and economic opportunity. Having health issues while homeless makes it more difficult to get out of homelessness and worsens the health issues themselves. For example, it is more difficult for a person to schedule and get to a doctor’s appointment to address chronic health issues when that person may not have access to a phone, transportation, or health insurance.

► **The increasing number of homeless older adults with chronic physical health conditions is cause for concern.**

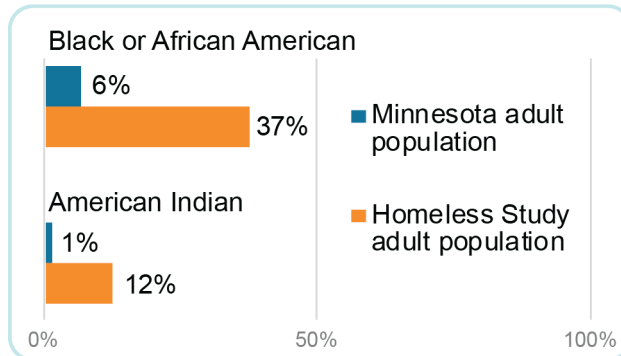
A separate Homeless Study report (Lindberg et al. 2020) shows that 75% of older adults experiencing homelessness have a chronic physical health condition (compared to 57% of all adults experiencing homelessness). This proportion has risen consistently since 2009 (66%). Nearly all older adults experiencing homelessness (90%) reported that a disability limits their ability to work or complete activities of daily living (such as eating, bathing, and dressing). The sharp increase in the percentage of older homeless adults, as well as the increase in reported chronic physical health conditions, amounts to a public health crisis. A recent report on homelessness among the aging population states:

Older homeless adults have medical ages that far exceed their biological ages. Research has shown that they experience geriatric medical conditions such as cognitive decline and decreased mobility at rates that are on par with those among their housed counterparts who are 20 years older (Brown et al., 2017; Brown, Kiely, Bharel, & Mitchell, 2012). As a result, health care and nursing home costs are likely to increase significantly over the next 15 years (Culhane et al., 2019, p. 2).

► **African American and American Indian adults are overrepresented in Minnesota's homeless population.**

Racist and discriminatory economic and housing policies (such as redlining), along with generational poverty, continue to play a role in the overrepresentation of African American and American Indian people in the homeless population.

Those experiencing homelessness in 2018 were most likely to identify as African American (37%) or white (34%). However, relative to proportions statewide, people identifying as African American or American Indian are notably overrepresented in the homeless population. More than one-third (37%) of adults experiencing homelessness identify as African American (compared to 6% of Minnesota adults) and 12% identify as American Indian (compared to 1% of Minnesota adults).⁴ The percentage of people identifying as American Indian is an undercount, as it reflects only the data from the Minnesota Homeless Study; Wilder has published a separate report detailing interview data from the Reservation Homeless Study.



► **An estimated 19,600 people are homeless on any given night in Minnesota; relevant public data provides a more accurate estimate than in prior studies.**

Wilder estimates 19,600 people experienced homelessness on any given night in Minnesota during 2018, and 50,600 people experienced homelessness over the course of the year. These numbers are larger than in our previous reporting cycles because Wilder used a different estimation method that relies on data collected through the Minnesota Department of Education's Minnesota Student Survey (<https://education.mn.gov/MDE/dse/health/mss/>) to help estimate numbers of children and youth experiencing homelessness.

The availability of this comprehensive and relevant public data source has contributed greatly to an improved understanding of the scale of this critical social issue. Specifically, it has shown that the number of children experiencing homelessness with their parents is much greater than previously understood.

The updated methods used for the 2018 Minnesota Homeless Study are described in greater detail in the Appendix, but it is important to note two things:

- 1) **Wilder Research believes the 2018 estimates are more accurate than in previous years** because they better account for unaccompanied minors and homeless children with their parents (which was a difficult population to account for previously).
- 2) **The 2018 estimates should *not* be compared to previous study years** because the methods used to construct the 2018 estimates are much different than our previous studies.

⁴ Vintage 2018 Population Estimates, U.S. Census Bureau.

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Introduction

The Minnesota Homeless Study, conducted every three years by Wilder Research, is a point-in-time study aimed at better understanding the prevalence of homelessness in Minnesota, as well as the circumstances of those experiencing homelessness.

Why is this study important?

Wilder Research, with the support of public and private funders, housing service providers, and volunteer interviewers, has conducted the Homeless Study since 1991; 2018 marks the 10th cycle of the study. The historical nature of the study allows us to look at trends over time, and the breadth and depth of the study (through thousands of face-to-face interviews) allows us to look more closely at the experiences of specific populations, such as older adults, unaccompanied youth, the LGBTQ community, Veterans, and American Indians living on reservations. The Minnesota Homeless Study is the most comprehensive source of descriptive information about homeless adults, youth, and children in the state, and we hope this report continues to equip readers with the data they need to identify and address systemic issues, improve programs and policies, and ultimately eliminate homelessness in Minnesota.

What you will find in this report

The 2018 study took place on October 25 and two methods were used to collect data on that day: counts and face-to-face interviews with people experiencing homelessness. A detailed explanation of study methods is in the Appendix.

- **Counts:** The first section of the report focuses on the **11,371** people literally counted on the night of the study. Wilder works with housing providers across the state to get this information, and their efforts and support are critical to the study. Wilder uses the counts to weight interview data, and to estimate the number of people experiencing homelessness in Minnesota – both on a single night and over the course of a year.
- **Interview data:** Most of the data in this report were collected through interviews with **4,181** adults experiencing homelessness. These anonymous interviews ask a wide range of questions about personal history and current needs, and typically take 30 to 45 minutes to complete. Wilder could *not* conduct this study without the honesty and courage of the participants.

For the most part, the findings in this report focus on *adults* experiencing homelessness on October 25, 2018. Where appropriate, we have indicated if findings are from the counts or interview data. This is a public report and is intended to be used by anyone who wants to learn more about homelessness in Minnesota. For additional reports, please visit www.mnhomeless.org.

Counts and estimates

Wilder Research counted **11,371** people experiencing homelessness in Minnesota on a single day in 2018. This is the highest count since the study began and a 10% increase over 2015.

Key findings:

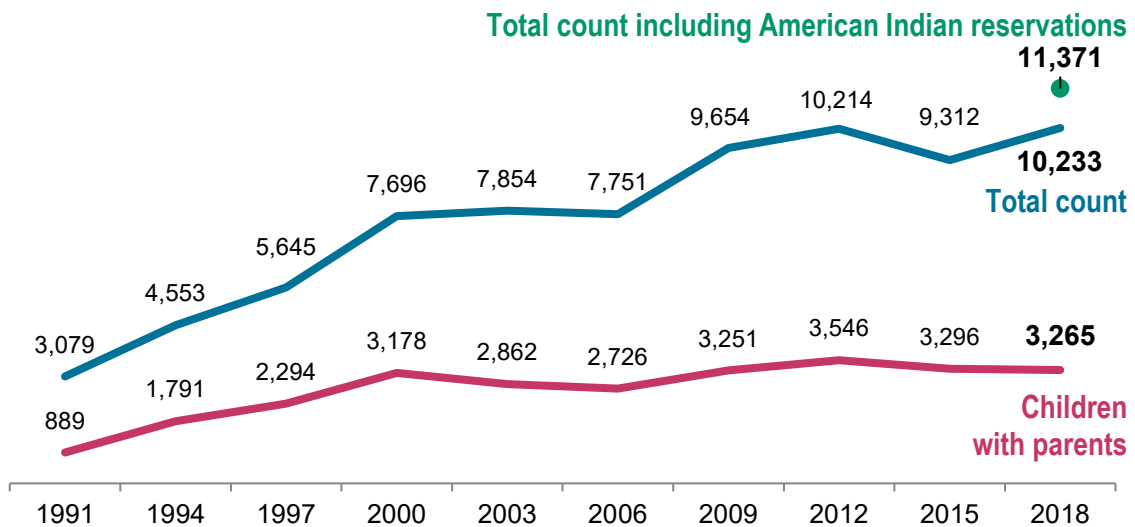
- Young people (children under age 18 with their parents and youth age 24 and younger on their own) continue to make up almost half of Minnesota’s homeless population.
- However, the 2018 study found a jump in adults (age 25+) experiencing homelessness, especially older adults (up 25%).
- Wilder Research estimates that there are 19,600 people experiencing homelessness on any given night and 50,600 people experiencing homelessness over the course of the year in Minnesota.

One night count

On October 25, 2018, Wilder Research counted a total of 11,371 people experiencing homelessness in Minnesota. This is an updated count from the one originally published in the [Single Night Count of People Experiencing Homelessness](#) in March 2019 (Wilder Research). The updated count includes 1,138 people experiencing homelessness on six American Indian reservations, collected through a companion study of homelessness on American Indian reservations. Historically, data from the reservation companion study were reported separately and not included in this statewide report. Thus, the trend data in Figure 1 do not include the reservation counts and the updated count should not be compared with previous study years. Moving forward, Wilder will be able to compare the combined counts across years (starting with 2018).

The original count of 10,233 people represented a 10% increase over 2015 (Figure 1). It includes 3,265 children (age 17 or younger) with homeless parents, which is similar to the 2015 study.

1. One-night study counts of people experiencing homelessness, 1991-2018



As reported in Wilder’s *Single Night Count of People Experiencing Homelessness* (Wilder Research, 2019), specific groups of people saw considerable increases from the 2015 study, particularly those not in a formal shelter (outside or temporarily doubled up) (increase of 62%). On the night of the study, 26% of people experiencing homelessness were not staying in any formal shelter or housing program.

There was a **62%** increase in people **not in a formal shelter** between 2015 and 2018.

Another population that increased considerably was adults experiencing homelessness, especially older adults (55 and older). While, proportionally, they make up the smallest age group of those experiencing homelessness (Figure 2), homelessness among older adults jumped 25% between 2015 and 2018 (Figure 3). Similarly, homeless adults (age 25-54) increased by 20%.

2. Homelessness by age group



3. Change in counts by age group, 2015 to 2018

	2015 study	2018 study	% change (2015 to 2018)
Children (17 and younger) with parents	3,296	3,265	-1%
Youth on their own (24 and younger)	1,463	1,484	+1%
Adults (25-54)	3,637	4,382	+20%
Older adults (55 and older)	843	1,054	+25%
Total	9,312	10,233	+10%

Note. Totals include people experiencing homelessness (of unknown age) in detox on the night of the survey (N=73 in 2015 and N=48 in 2018). For this figure, counts of people experiencing homelessness on American Indian reservations were not included because the 2015 numbers are not available for comparison.

Single night estimate

Any point-in-time count will underrepresent the total number of people experiencing homelessness, since many people living outside of the shelter system are not found on the night of the study. This is especially true of youth on their own, who often couch-hop or find other temporary places to stay, as well as people experiencing homelessness in suburban locations and greater Minnesota where there are fewer shelters.

An estimated **19,600** people are **homeless on any given night** in Minnesota

Research done by others provides a basis for estimating the total number of Minnesotans who are likely to have been homeless and not staying in formal shelters on the date of the study (see the Appendix for details about estimation techniques). We estimate that there were approximately 19,600 homeless Minnesotans on any given night in 2018 (Figure 4).

4. Estimated number of people homeless on any given night in Minnesota, by age group

	Count of people in shelters	Count of people not in shelters	Estimate of additional uncounted people	Estimated total (count plus estimate)
Adults age 25 and older	3,661	1,775	900	6,336
Young adults age 18-24	856	436	1,925 ^a	3,217 ^a
Unaccompanied minors under age 18	122	70	1,467 ^a	1,659 ^a
Children with their parents	2,852	413	3,967 ^a	7,232 ^a
Total	7,491	2,694	8,259^b	18,450^a
Actual count of people on American Indian reservations who were homeless on the date of the study:				1,138
GRAND TOTAL				19,582

^a The estimation methods for young adults, unaccompanied minors, and children with parents were updated for 2018. As a result, the estimates cannot be directly compared to those from earlier studies.

^b Although overall counts (reported earlier) include homeless people (of unknown age) in detox on the night of the survey (48 in 2018), the estimation technique used includes them within the estimated number of people not in shelter (uncounted) on the night of the study.

Estimate of annual numbers

Many people who experience homelessness are homeless for only a short time. The Minnesota Homeless Study only includes a snapshot of people found on a single night in late October. Therefore, the study cannot count people who were homeless for a single week in early October, for example, or for six months from February through July. However, by counting the number of people in our study who were homeless for shorter periods and computing how many more people would become newly homeless during comparable periods throughout the year, we can estimate the number of people experiencing homelessness over the course of the year.

Approximately
50,600
Minnesotans
experience
homelessness
in a year

For school-age youth, the Minnesota Student Survey provides a direct source of self-reported information about the incidence of homelessness over a year's time among youth in grades 7 through 12 (roughly age 12 through 17). We have used this source to estimate annual homelessness among unaccompanied minors, and as a part of combined methods for estimating homelessness among children with their parents and young adults on their own.

In the 2018 Homeless Study, we estimate that 50,600 Minnesotans experience homelessness at least once over the course of a full year. This includes:

- 14,800 adults age 25 or older
- 7,500 young adults (age 18-24) on their own
- 5,800 minors (age 17 or younger) on their own
- 22,500 children with their parents

This estimate includes minor children with parents who stay in temporary, doubled-up arrangements and are therefore defined as “homeless” under the McKinney-Vento Act as it applies to educational services.

Most of the remainder of this report focuses on findings from the in-person interviews with 4,181 adults experiencing homelessness, including their background characteristics, homelessness and housing histories, health and well-being, and use of social services.

Characteristics of Minnesota's homeless population

Adults experiencing homelessness in Minnesota have a diverse set of backgrounds, experiences, and identities.

Key findings:

- African American and American Indian adults are overrepresented in Minnesota's homeless population; this has been true throughout the history of the study.
- Men and women are equally represented within the homeless population, but sheltered differently.
- LGBTQ identification is more common among young homeless adults.
- 23% of adults experiencing homelessness have children with them; these children experience issues related to homelessness.
- 90% of homeless parents are women; these women are more stably sheltered and have fewer housing barriers than other homeless women.
- Most (66%) adults experiencing homelessness were on their own (not with a partner or children).

Racial and ethnic background

➤ *Racial disparities are persistent in the Minnesota homeless population, and they occur among persons of all age groups, genders, and geographic locations. Discrimination in housing and other historic trauma are some of the factors that have led to the overrepresentation of people of color in Minnesota's homeless population.*

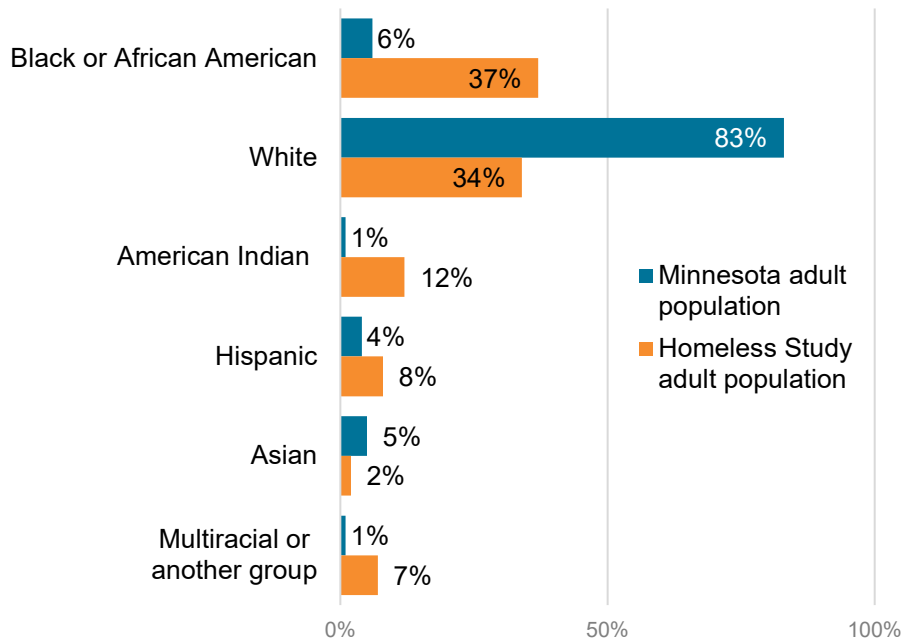
Two-thirds (66%) of homeless adults surveyed were people of color or indigenous while only 17% of the overall Minnesota population are people of color or indigenous.

African American and American Indian populations are most overrepresented in Minnesota's homeless population

These disparities exist across racial groups, but are most prevalent among African American and American Indian populations (Figure 5). More than one-third (37%) of homeless adults identify as African American, but only 6% of adults in the overall Minnesota population identify as African American. Similarly, 12% of the homeless adult population identifies as American Indian while only 1% of the Minnesota adult population identifies as American Indian.⁵

⁵ This does not include the 1,138 homeless adults who the study counted on six American Indian reservations that share geography with Minnesota.

5. Race of homeless adults (18 and older), compared to representation in Minnesota population

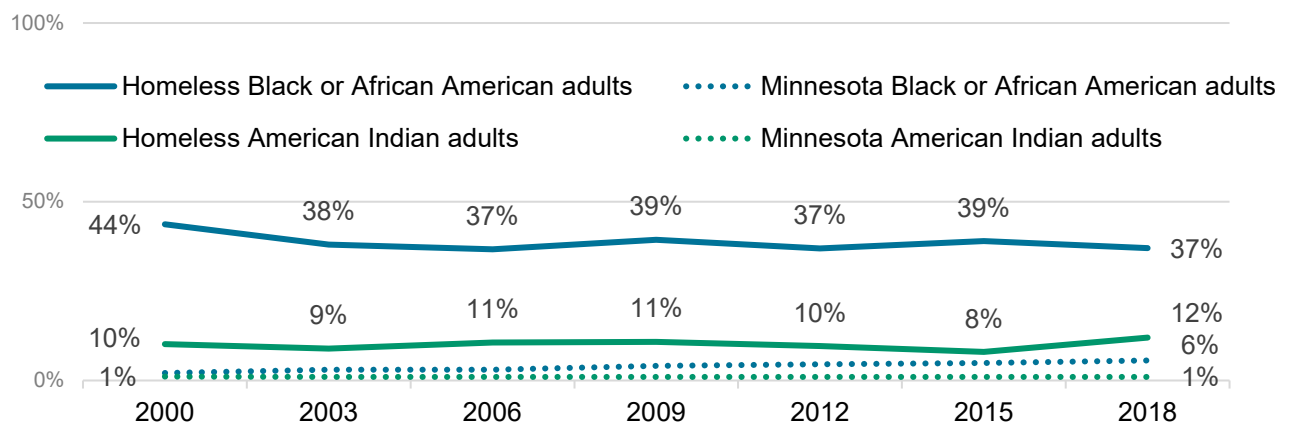


Source. Vintage 2018 Population Estimates, U.S. Census Bureau.

Racial disparities have persisted throughout the history of the study

One of the most consistent findings throughout the history of the Minnesota Homeless Study is the gap between the proportion of African American and American Indian adults in the homeless population compared to the proportion of these groups in the overall Minnesota population. Figure 6 shows the proportions of African American and American Indian adults in the Minnesota homeless population and overall Minnesota population over time.

6. Trend of African American and American Indian disparities between homeless and Minnesota populations, 2000-2018



To provide deeper context about why these disparities occur in Minnesota’s African American and American Indian communities, Wilder examined research on discriminatory practices related to housing. It is also important to understand the overall context of structural racism:

Structural racism refers to a system in which public policies, institutional practices, cultural representations, and other norms work in various, often reinforcing ways to perpetuate racial group inequity. It identifies dimensions of our history and culture that have allowed privileges associated with “whiteness” and disadvantages associated with “color” to endure and adapt over time (Lawrence et al., 2004, p. 11).

From the earliest colonial era, the United States has enforced both formal policies and informal social norms that exclude African Americans and American Indians. These discriminatory policies and practices include reduced access to housing. In the years after the Civil War and the passing of constitutional amendments to provide rights to people freed from slavery, Jim Crow laws were also passed to legalize and continue discrimination against African Americans. These laws limited where people could live; what schools they could attend; what jobs they could have; and their access to transportation, health care, and a wide variety of services (National Park Service, 2018).

One example specifically related to housing involved the federal Home Owners Loan Corporation which “created maps that were color-coded to indicate the desirability of neighborhoods. Race was a significant factor in determining the color-coding of a neighborhood (Hiller 2005), with communities of color designated as undesirable and color-coded red. This appraisal system, called redlining, was adopted by the Federal Housing Administration (FHA), which provided mortgage insurance enabling many Americans to buy homes. ... In addition to redlining, the FHA advocated using restrictive covenants to maintain the racial segregation of neighborhoods” (Brown et al., 2019, p. 2).

There have been similar discriminatory practices impacting American Indians. Within the past century, many families were torn apart by forced removal of children to boarding schools designed to erase their cultural heritage. Government programs also moved many families to urban areas with false promises of jobs and housing, thus disconnecting them from the safety net provided by their home communities.

Age, gender, and LGBTQ identity

➔ *Overall, men and women are about equally represented in the homeless adult population, but they stay in different shelter settings. Men are more likely to stay in emergency shelters and in non-shelter locations, while women are more likely to stay in transitional housing and domestic violence shelters. Homeless young adults (age 18-24) are more likely than older age cohorts to identify as LGBTQ.*

Men and women are equally represented, but are sheltered differently

Homeless adults interviewed as part of the 2018 Minnesota Homeless Study include a similar proportion of men and women, but gender distribution varies by type of shelter. Overall, 53% identify as men and 47% identify as women (0.5% identified their gender in another way). The proportion of men and women has been very consistent since the 2000 study.

53% of homeless adults identify as **men** and **47%** identify as **women**

However, the locations in which men and women seek and receive shelter vary. Men are more likely to stay in emergency shelters (65% are men) and in non-shelter locations (58% are men) while women are more likely to live in transitional housing programs (60% are women). Furthermore, 11% of women were staying in domestic violence shelters (100% of adults in those facilities).

Homeless men are older on average than homeless women; average age also varies by location

The average age of homeless adults interviewed in 2018 was 40. This is comparable to previous studies.

Homeless women were younger on average than homeless men (36 vs. 43). Emergency shelters serve a slightly older population (average age 44) than other types of shelters.

Young adults are more likely to identify as LGBTQ

Eleven percent of homeless adults interviewed during the 2018 Minnesota Homeless Study identified as lesbian, gay, bisexual, transgender, or questioning (LGBTQ). The percentage of adults identifying as LGBTQ is similar to 2015. Women and young adults are more likely to identify as LGBTQ.

22% of young adults age 18-24 experiencing homelessness identify as **LGBTQ**

- The average age for adults identifying as LGBTQ was 32 (41 for all others)
- Young adults (age 18-24) are the most likely (22%⁶) age cohort and older adults (55+) are the least likely (3%) age cohort to identify as LGBTQ

Partnership and family status

➤ *Adults experiencing homelessness are often single, although many have children. Homeless women are more likely than homeless men to have children. Many adults experiencing homelessness are in contact with family members who are not homeless.*

⁶ This figure has been analyzed using unweighted data to be consistent with numbers reported previously and in other Wilder reports on youth identifying as LGBTQ. See the appendix for more information on weighting.

Two-thirds (66%) of adults experiencing homelessness reported that they had never been married. Only 5% are currently married and 29% have been married before but are no longer married (separated, divorced, or widowed).

Two-thirds (66%) of adults experiencing homelessness stayed on their own (i.e., not with a partner or children) the night before they were interviewed for the 2018 Homeless Study. This was much higher for men (85%) than women (43%). Almost one-half (45%) of the homeless adults interviewed are parents of at least one child age 17 or younger. Twenty-three percent of adults had children with them when they were interviewed; many have children who do not currently live with them. Women are much more likely than men to be parents, and to have children with them.

- 62% of homeless women are parents of minor children (either staying with them or not), compared to 30% of homeless men
- 45% of homeless women had at least one child staying with them on the night of the survey, compared to 4% of homeless men
- 6% of homeless women were pregnant on the night of the survey, and 2% of men had a partner who was pregnant on the night of the survey

Most (71%) adults experiencing homelessness were raised by their biological parents. Ten percent were raised by their grandparents or other relatives, 7% were raised in a “blended family,” 5% were raised in a foster family, and 4% were raised in an adoptive family.

- 63% reported they had contact with family within the past month. 20% of homeless adults surveyed had not had contact with their family for a year or more
- 27% reported they could stay with relatives for an extended period of time if needed

63% of adults experiencing homelessness had **contact with family** in the past month

Children with adults experiencing homelessness

➔ *Children with their parents make up a large proportion of the total number of people experiencing homelessness. Homelessness is associated with increased stress for children and families, and leads to disruptions with schooling and socialization. Women make up almost all of the homeless adults who are parenting, and these women are more likely to be in transitional housing and have higher levels of educational attainment, employment, and income than homeless people who are not parenting.*

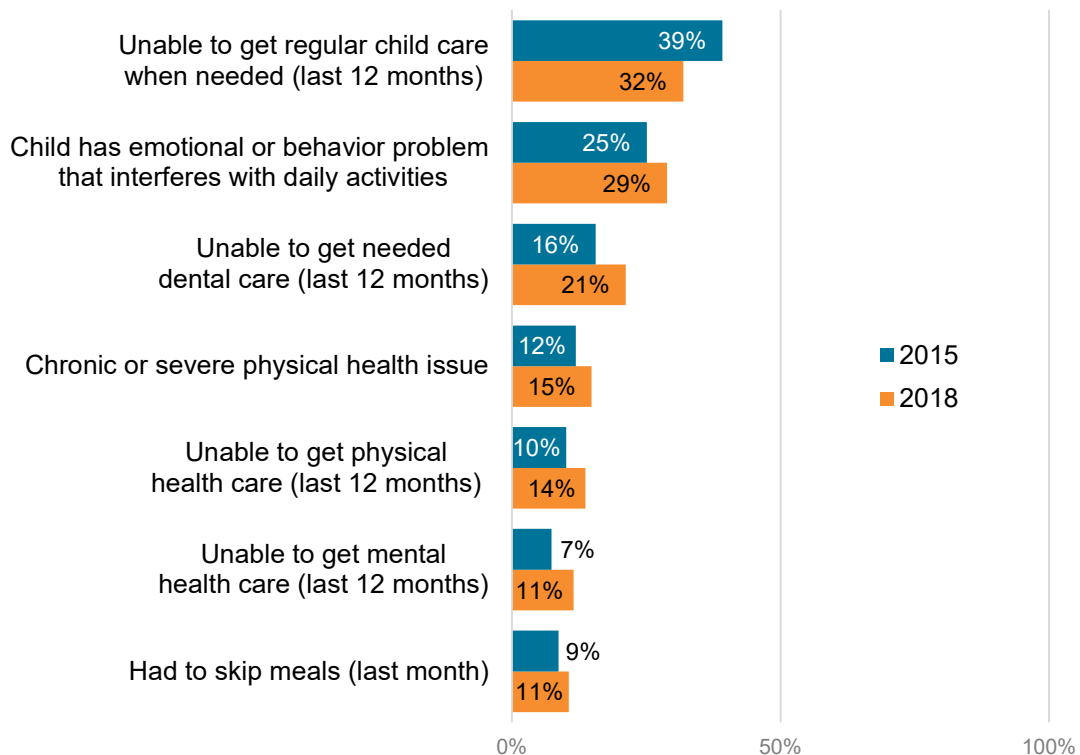
Children age 17 or younger with their parents made up one-third (32%) of the total number of people experiencing homelessness counted on October 25th, 2018. The 2018 Minnesota Homeless Study counted 1,472 families (with children 17 and younger), down 5% from 1,542 in 2015. The total number of people in those families decreased by 2% (5,034 in 2018 and 5,126 in 2015). Of those surveyed in non-shelter locations, 12% of adults had children with them.

According to the interview data, almost one-quarter (23%) of adults experiencing homelessness have children with them. These homeless parents have an average of 2.0 children with them and the average age of those children is 6.6 years. Almost half (48%) of homeless children with their parents are 5 years old or younger.

Homeless parents commonly report homelessness-related issues for their children

The Minnesota Homeless Survey asked homeless parents specific questions about issues they may have experienced related to their children. Compared to 2015, a lower percentage of parents reported issues related to getting child care, but for every other issue a higher percentage of parents reported experiencing the issue (Figure 7).

7. Homeless parents who report experiencing issues with at least one of their children, 2015 and 2018

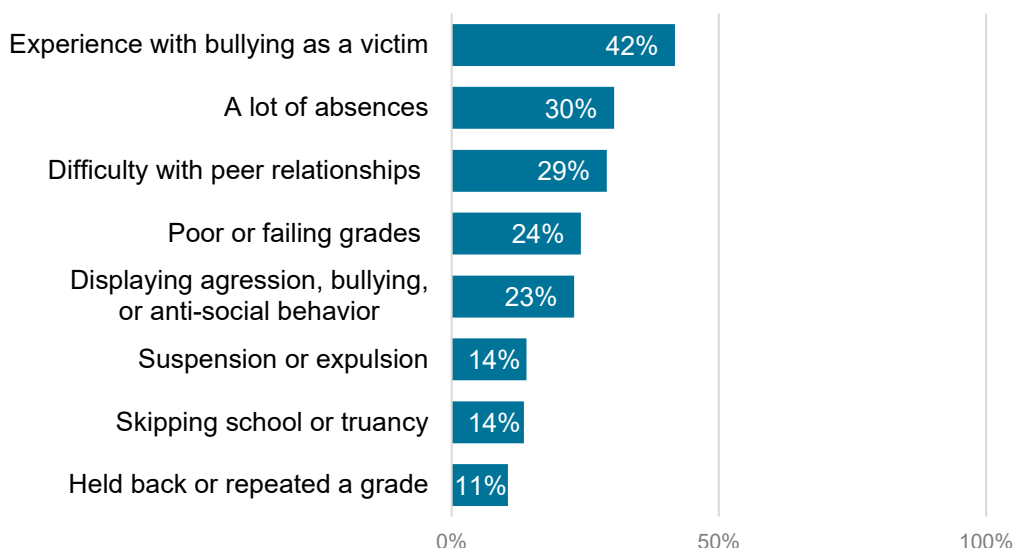


School-aged children with homeless parents experience issues with school and peer relationships

Overall, 64% of parents are with school-aged children. While most (88%) of these homeless parents with school-aged children reported all of their children went to school on the day of the survey, almost one-half (46%) reported that at least one of their children had to change schools because of their housing situation and 43% reported at least one of their children had learning problems that required additional services.

Parents of school-aged children were also asked about potential issues their children may have experienced in school (Figure 8). Two of the most commonly reported issues were related to relationships with other students, including being a victim of bullying (42%) and difficulty maintaining peer relationships (29%).

8. School-related issues experienced by children of homeless parents (% of parents reporting any of their children had the issue)



Homeless women with children have different experiences than other homeless women

Almost all (90%) of homeless parents who have children with them identified as women (45% of homeless women report having children with them). Homeless women who have children with them have different experiences than other homeless women including being in more stable shelter situations. Almost one-half (46%) of homeless women with children with them were interviewed in transitional housing (23% of other homeless women) and 13% were in non-shelter locations (36% of other homeless women).

Compared to other homeless women, homeless women who had children with them were:

- Less likely to report mental health issues (66% vs. 78%)
- Less likely to report chronic physical health conditions (52% vs. 65%)
- More likely to be fleeing domestic violence (40% vs. 34%)
- Less likely to report evidence of a traumatic brain injury (28% vs. 38%)
- Less likely to report substance use disorder (12% vs. 30%)
- Less likely to report ever being placed in corrections or social service placement (59% vs. 76%) and less likely to have left corrections in the past 2 years (9% vs. 18%)
- More likely to be employed (38% vs. 24%) and averaged higher monthly income (\$887 vs. \$562) even though educational attainment is similar
- More likely to identify as African American (47% vs. 26%)

History of homelessness and housing

There is not a single story to tell about the housing history and shelter situation for adults experiencing homeless in Minnesota. Situations vary across demographic groups, and shelter situations change day to day for some adults experiencing homelessness.

Key findings:

- The 2018 study saw a big increase in the numbers of people staying outside or temporarily doubled up (up 62% over the 2015 study).
- Very few adults experiencing homelessness had spent any time in regular housing during the previous month.
- Many adults experiencing homelessness had spent time outside or in other places not intended for habitation during the previous month.
- Homeless adults staying in transitional housing and non-shelter locations have been homeless longer than those staying in other shelter situations.
- 59% of adults experiencing homelessness had been homeless for at least a year. (This is the highest ever observed in the study.)

Homelessness, housing, and out-of-home placements

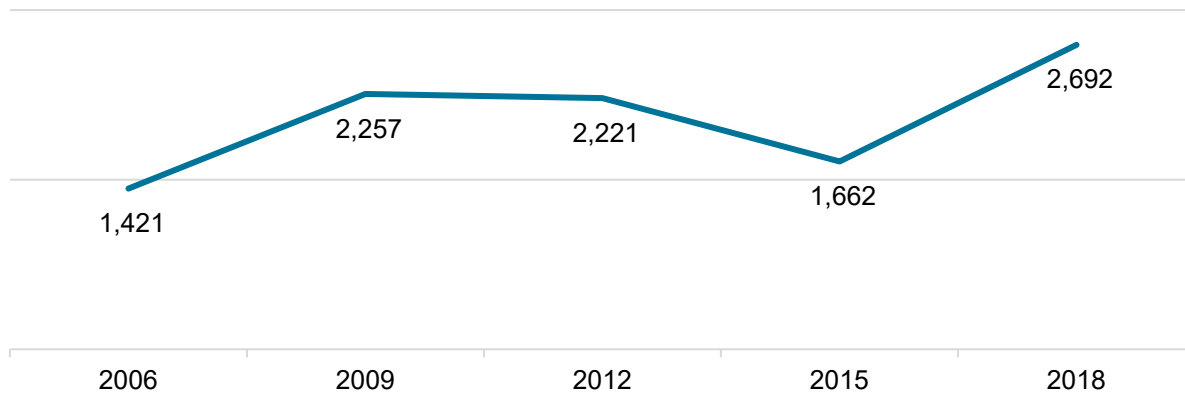
➤ *According to the 2018 Minnesota Homeless Study counts, the 2016 through 2019 HUD Point in Time (PIT) counts, and anecdotal information from stakeholders, the number of homeless adults staying outside has increased greatly over the past three years. Very few adults experiencing homelessness, regardless of their current shelter situation, had spent time in their own housing during the previous month, but many spent time temporarily doubled up and staying outside or in other unsheltered situations.*

Increase in number of adults experiencing homelessness who were not in shelter

As noted in the counts section, the 2018 Minnesota Homeless Study counted a 62% increase over the 2015 study in adults experiencing homelessness who were not in shelter on the night of the study. Because shelter capacity has remained flat, the increase in homeless adults counted in non-shelter locations is primarily responsible for the 10% increase in the overall homeless population between 2015 and 2018.

The 2018 study also counted more people not in formal shelter than any previous study (Figure 9).






9. Count of adults experiencing homelessness not in formal shelter, 2006-2018



It is impossible to identify all people experiencing homelessness who are not in a formal shelter. These numbers are impacted by variations in outreach efforts and the visibility of the population. The 2018 study was conducted in conjunction with increased visibility of people staying in encampments and on public transportation. In addition, there were homeless outreach events conducted throughout the state that also allowed access to those not staying in shelter.

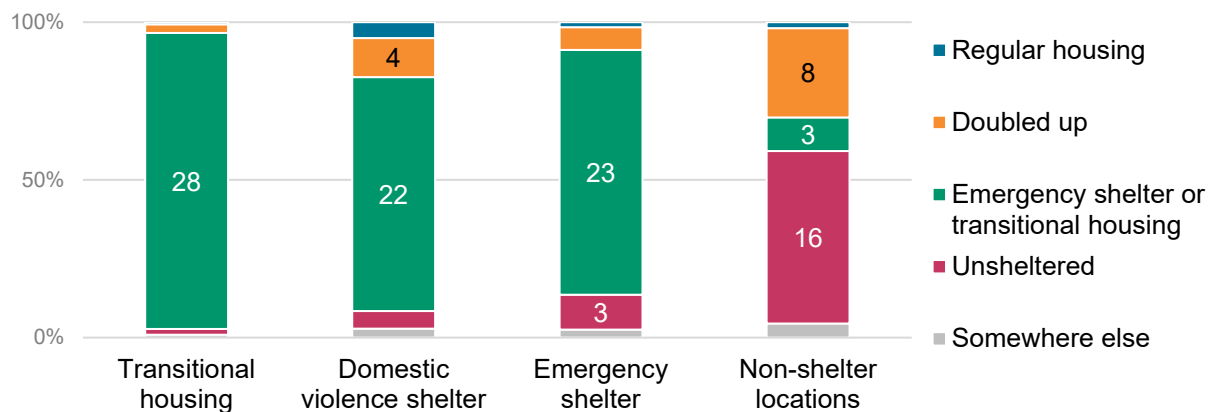
Recent shelter situation is different for those interviewed in non-shelter locations

The 2018 Minnesota Homeless Study survey asked respondents where they stayed during the previous month. In the 30 days before the survey:

-  **77%** had spent at least 1 night in **shelter or transitional housing** (61% spent more than half of that time in shelter or transitional housing)
-  **39%** had spent at least 1 night **outside or in a place not intended for habitation** (18% spent more than half of that time outside or in a place not intended for habitation)
-  **29%** had spent at least 1 night temporarily **doubled up** with friends or family (9% spent more than half of that time doubled up)
-  **4%** had spent at least 1 night in **regular housing of their own** (1% spent more than half of that time in regular housing)
-  **8%** had spent at least 1 night in **some other arrangement** (2% spent more than half that time in some other arrangement including hotels, hospitals, treatment facilities, incarceration, etc.)

People who were interviewed in non-shelter situations stayed in different places in the previous 30 days compared to those interviewed in shelters (Figure 10). Those in non-shelter locations spent an average of more than one-half of the previous month (16.4 days) outside or unsheltered, and another 8.5 days temporarily doubled up with friends and family.

10. Average number of nights (of previous 30) spent in different situations, by shelter type where interviewed



Note. Numbers only shown for greater than 2.

Length of time homeless and homeless history

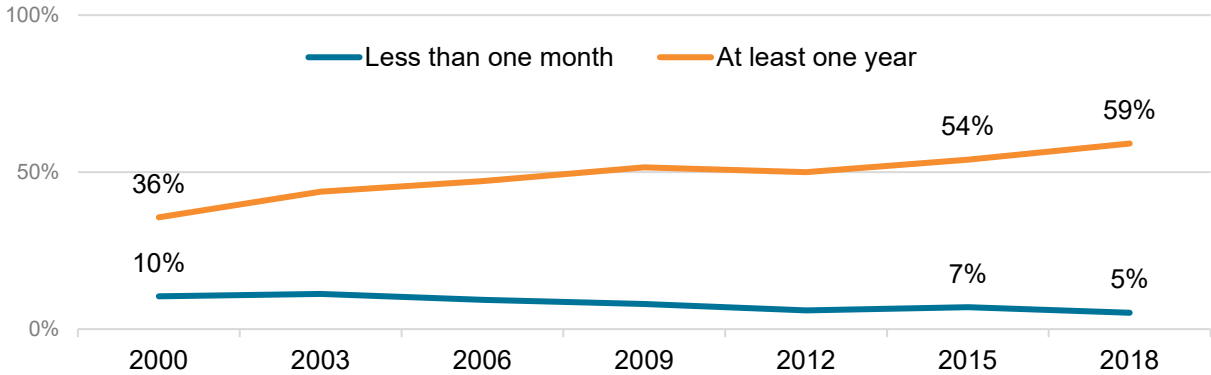
➤ *The Minnesota Homeless Study has observed a steady increase in the percentage of homeless adults who have been homeless for more than a year. Length of homelessness is longest in transitional housing and non-shelter locations, but the experiences of people in these settings are very different. Homeless adults in transitional housing experience much more stability than those in non-sheltered locations because they are able to stay in their housing for longer periods (in some cases, up to two years).*

The Minnesota Homeless Study is a single night point-in-time count and survey of people experiencing homelessness in Minnesota. Since the survey takes place on a single night, it undercounts people who have shorter experiences with homelessness because they are less likely than those who have been homeless longer to be homeless on the selected night.

With that caveat, 59% of the homeless adults surveyed in 2018 reported being homeless for at least one year. This is up from 54% in 2015, and is the highest the Minnesota Homeless Study has ever recorded. Figure 11 shows the changes in longer and shorter-term homelessness since 2000.

59% of those surveyed have been homeless for at least one year

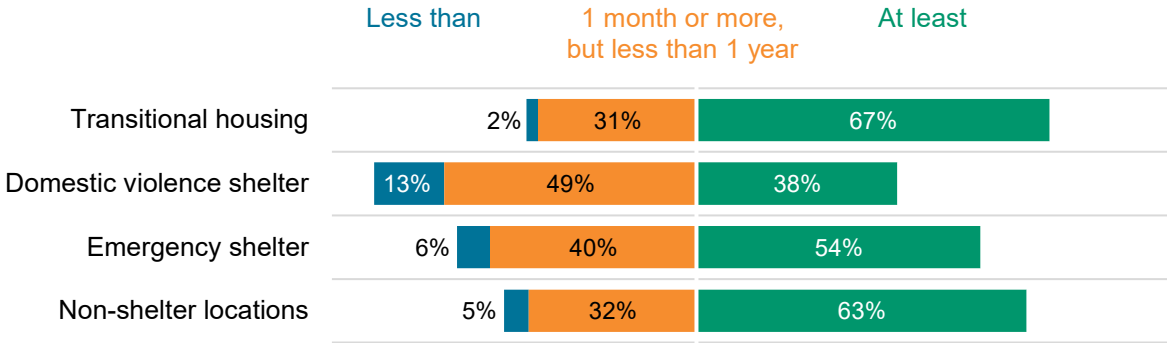
11. Length of time homeless, 2000-2018



Longer experiences with homelessness in transitional housing and non-shelter locations

Interestingly, respondents interviewed in transitional housing and in non-shelter locations reported very similar lengths of time for their current episode of homelessness (Figure 12). Two-thirds (67%) of adults in transitional housing and 63% of adults in non-shelter locations had been homeless for at least a year. Over half of adults in emergency shelter (54%) and 38% of adults in domestic violence shelter had been homeless for at least a year. Transitional housing facilities are generally designed to allow people to stay for longer periods than the other settings.

12. Length of time homeless, by shelter type



Many homeless adults were first homeless as a young person

Most adults experiencing homelessness (77%) have had multiple experiences with homelessness, and many adults have experienced repeated homelessness starting from an early age. Over a third (36%) of adults experiencing homelessness first became homeless at or before age 18, and one-half (52%) first became homeless by the time they were age 24. For homeless adults, the average age they first experienced homelessness was 28 and the median was 23. The most common age (i.e., modal age) of first homelessness for adults surveyed was 18 years old (8% of those surveyed).

The proportion of homeless adults first experiencing homelessness at or before 18 years old varies by demographics:

- 54% of American Indian adults, 33% of Black or African American adults, and 30% of white adults first experienced homelessness by the age of 18
- 57% of adults who identify as LGBTQ and 34% of non-LGBTQ adults first experienced homelessness by the age of 18
- 42% of women and 31% of men first experienced homelessness by the age of 18

52% of homeless adults **first experienced homelessness** by the age of 24

Housing and placement history

➤ *People experiencing homelessness in Minnesota are mostly from Minnesota. About half had their last housing in Minneapolis or Saint Paul, a third in greater Minnesota, and the remaining in the suburbs. A majority of homeless adults had experienced a placement in a residential treatment program or other social service placements; and over half of young adults had these placements when they were under age 18.*

Minnesota homelessness is homegrown

Almost all of Minnesota's homeless adults have a connection to Minnesota. Eighty-eight percent either grew up in Minnesota, were last housed in Minnesota, or have lived in Minnesota for at least three years.

This includes:

- 78% had their last regular or permanent housing in Minnesota (38% in Minneapolis/Saint Paul, 12% in the seven-county Twin Cities suburbs, and 26% in greater Minnesota)
- 84% of homeless adults have lived in Minnesota for three years or longer
- 55% lived in Minnesota most or all of the time growing up (until age 16)

78% of adults experiencing homelessness had their last regular or permanent housing in Minnesota

Residential social service placements continue to be a common precursor to homelessness

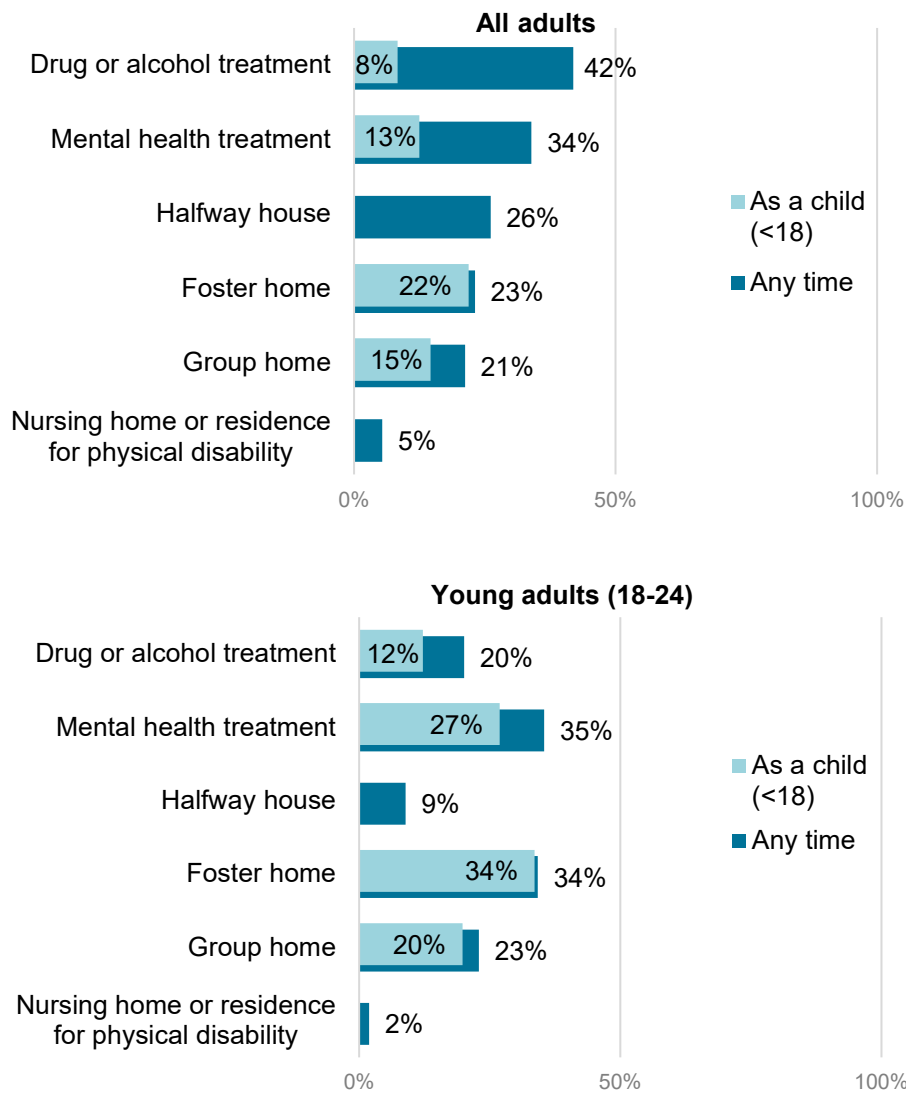
Out-of-home placements in childhood, such as foster care or other social service placements, are known to increase the likelihood of homelessness (Courtney et al., 2011). Adults transitioning out of treatment and correctional facilities are also at high risk. A majority of homeless adults (68%) have been in some type of social service placement or inpatient treatment at some point in their lives. Figure 13 lists the social service placements included in the survey. Young adults (age 18-24) are slightly less likely to have experienced any placement (62%), but are more likely than all adults to have been placed in foster care (34% vs. 23%).

52% of young adults age 18-24 had been in a social service placement as a child

While young adults are less likely than other adults to have ever been in a social service placement, they are more likely to have experienced social service placements as children. More than one-half (52%) of young adults (age 18-24) had been in a social service placement as a child. This compares to less than one-third (31%) of adults 25 and older and 34% of all adults age 18 and older. Childhood social services placement is associated with earlier ages of first homelessness.

For all adults experiencing homelessness, the average age of first episode of homelessness was 28. But, if homeless adults had a childhood social service placement, their average age of first episode of homelessness was 21, compared to 31 for those without a childhood social service placement.

13. Residential placement (ever and as child), all adults and young adults (age 18-24)



Note: Respondents were not asked about staying in a halfway house as a child.

Health conditions and history of trauma

Most adults experiencing homelessness have serious health issues, and many of these issues are difficult to care for while they are homeless. In addition, health issues, trauma, violence, and exploitation continue to be significant concerns among the homeless population, and these conditions often occur together.

Key findings:

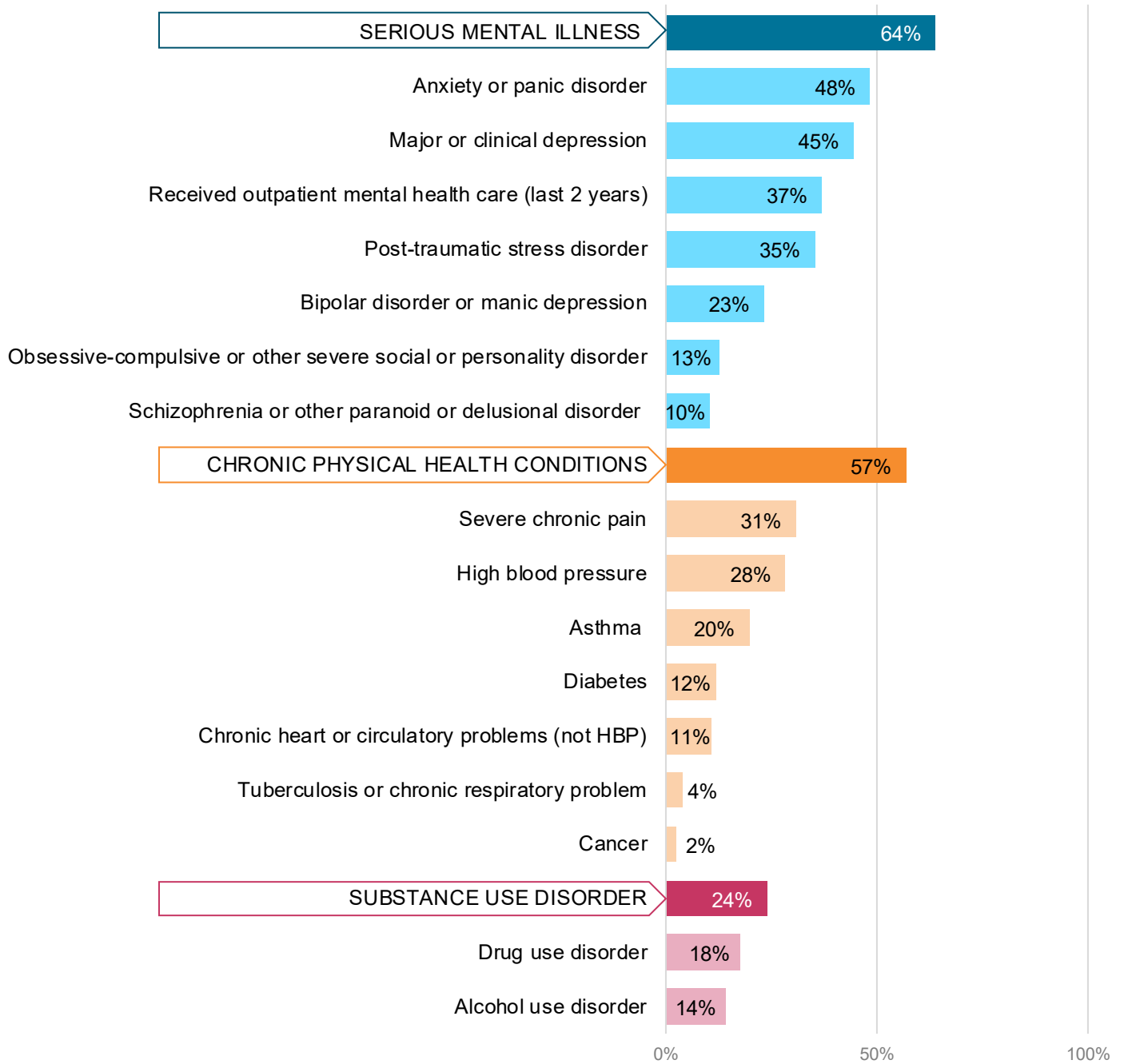
- 64% reported a significant mental health issue, 57% reported a chronic physical health condition, and 24% reported a substance use disorder; 86% have at least one of these conditions.
- 33% reported evidence of a traumatic brain injury.
- 58% reported physical or cognitive limitations to work or daily activities.
- 24% have been physically or sexually attacked while they have been homeless.

Mental, physical, and chemical health

➤ *Health concerns are common among adults experiencing homelessness in Minnesota. Physical and mental health conditions have increased significantly over the last decade, while substance use has remained relatively flat. Most adults experiencing homelessness have some kind of health coverage, but many need to see health professionals for current ailments. Adverse health conditions can be a result of trauma experienced while homeless and pose a significant barrier to getting stable housing.*

The 2018 Homeless Study survey asked 16 questions that help to understand the mental, physical, and chemical health of adults experiencing homelessness. Overall, a higher percentage of adults experiencing homelessness reported a serious mental illness (64%) than a chronic physical health condition (57%) or substance use disorder (24%). Figure 14 shows the specific conditions that are used to construct these numbers.

14. Chronic health conditions



Note. For the serious mental illness conditions and the substance use disorders, respondents were asked if they had been told by a doctor in the last 2 years they had that condition. For the chronic physical health conditions, respondents were asked if they had the condition in the past 12 months.

Health issues often occur together

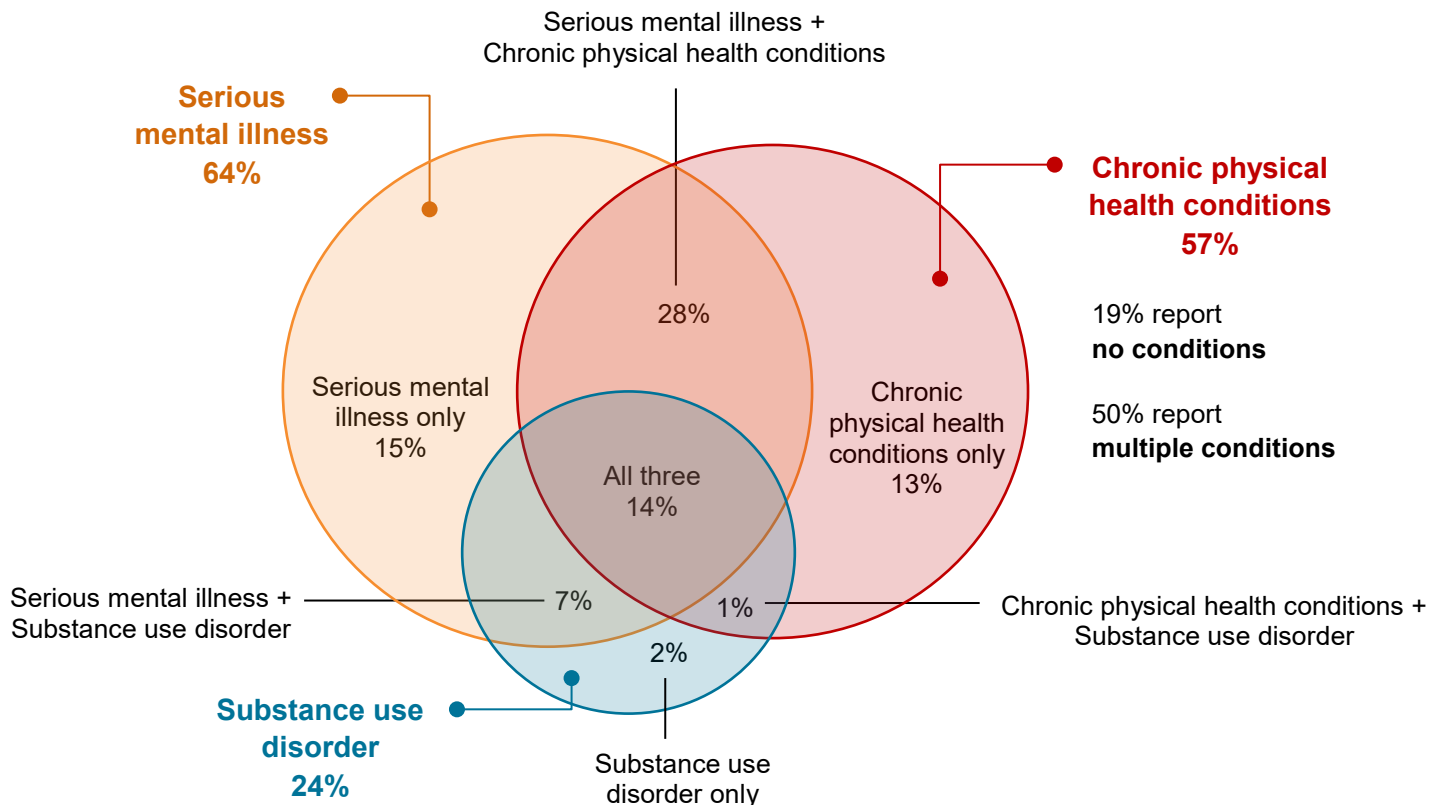
Very few adults experiencing homelessness are free from chronic health conditions. Overall, 86% have at least one of the following conditions:

- 81% have a chronic physical health condition, serious mental illness, or substance use disorder
- 58% have a physical or cognitive condition that limits work or interferes with activities of daily living
- 33% have evidence of a traumatic brain injury⁷

50% of adults experiencing homelessness report **co-occurring chronic health conditions**

While 81% of adults experiencing homelessness have at least one of the chronic health conditions (described in the previous section), half (50%) have co-occurring conditions. Figure 15 shows the overlap of the three chronic health domains. Chronic physical health conditions and serious mental illness show the biggest overlap (28%), and 14% reported all three.

15. Co-occurrence of chronic health issues

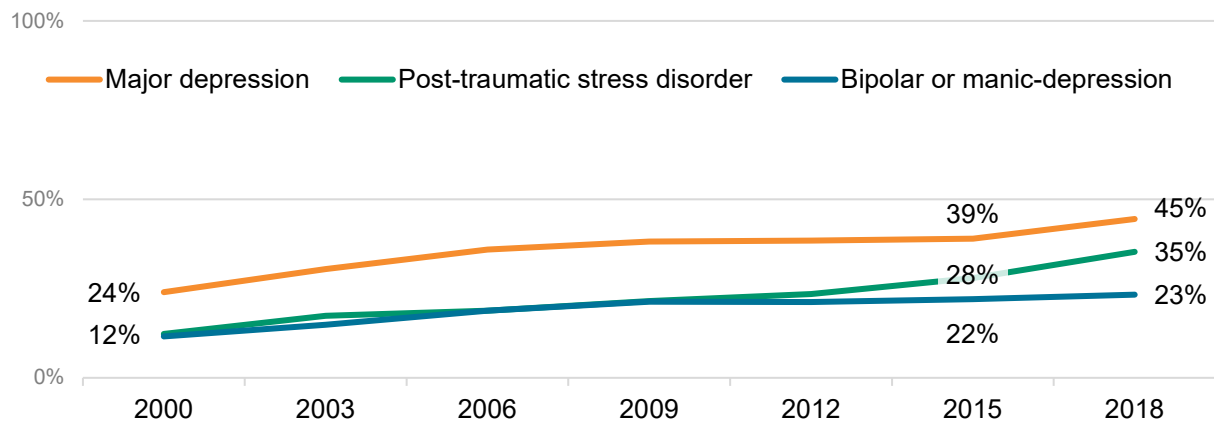


⁷ Respondents are asked if they were ever hit on the head so hard that they became unconscious or saw stars and, if yes, if they subsequently began to have problems with headaches, concentration or memory, understanding, excessive worry, sleeping, or getting along with people.

Mental health conditions have increased considerably since 2000

Of all mental health conditions asked about in the survey, the three most frequently reported over time have had considerable increases since the 2000 study (Figure 16). Of particular note, the percentage with post-traumatic stress disorder has tripled between 2000 and 2018. It should be noted that most recently anxiety disorder is the most frequently reported mental health condition among Minnesota's homeless population (48%). However, the study did not ask about this condition until 2015.

16. Top 3 mental health conditions, 2000-2018

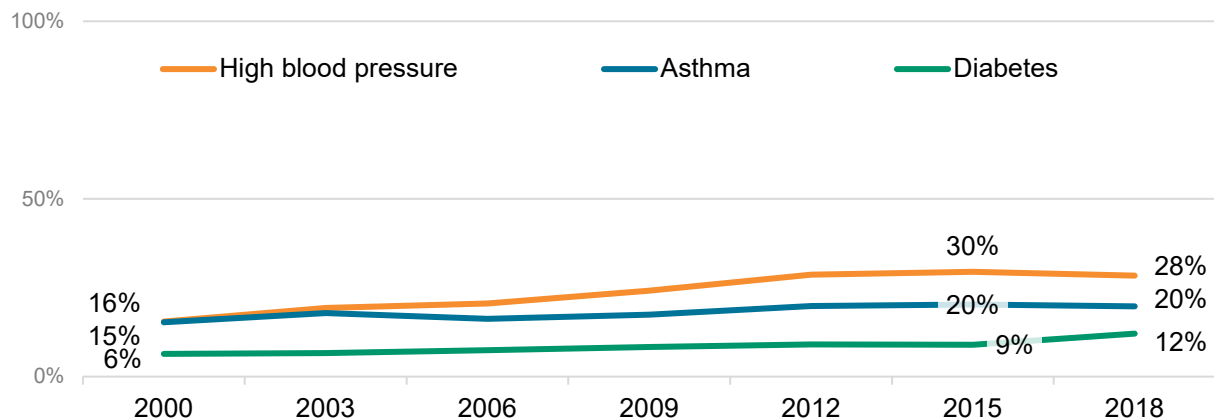


Note. Includes respondents who reported a doctor had told them that they had these conditions during the last two years.

Chronic physical health conditions have increased somewhat since 2000

Other than severe chronic pain, which the Minnesota Homeless Study only began tracking in 2018, the top three most common chronic physical health conditions asked about in the survey have increased since the 2000 study, but have also mostly leveled off during the last three studies (Figure 17).

17. Top 3 chronic physical health conditions, 2000-2018

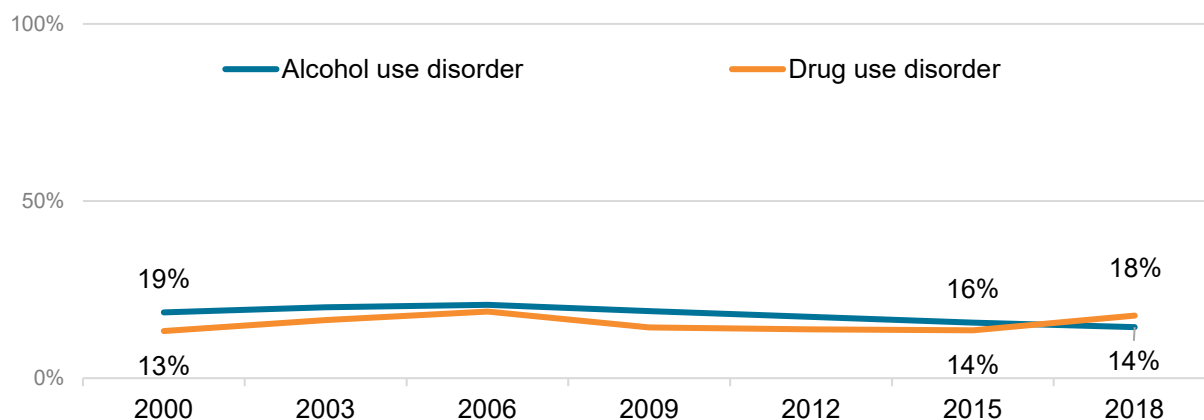


Note. Respondents were asked if they had these conditions during the last 12 months.

Substance use disorder remains flat since 2000

While trend data collected by the Minnesota Homeless Study has shown increases in rates of significant mental illness and chronic health conditions over time, the rates of reported substance use disorders have remained consistent since 2000 (Figure 18).

18. Substance use disorder, 2000-2018



Note. Respondents were asked if they had been told by a doctor in the last 2 years that they had the condition.

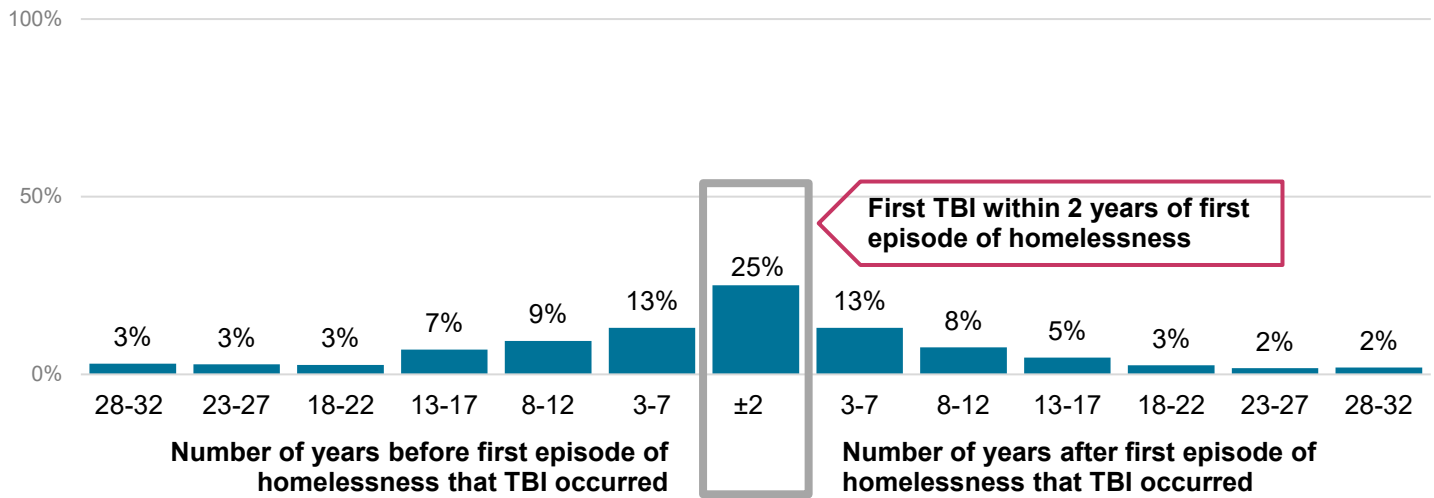
Although rates of diagnosed substance use disorder have remained flat over time, there was a jump in 2018 in the percentage of homeless adults who reported that they had been in an inpatient treatment program. Forty-two percent of homeless adults had been in inpatient treatment at some point in their lives, up from 35% in 2015. This is the highest percentage reported since 2000.

Traumatic brain injury (TBI) clusters around first episode of homelessness

Traumatic brain injury (TBI) also represents a considerable health concern among adults experiencing homelessness. Since 2006, the Minnesota Homeless Study has tracked evidence of TBI. Respondents were asked if they had ever been hit on the head so hard they were knocked unconscious or saw stars and, if yes, if they subsequently began to have problems with headaches, concentration or memory, understanding, excessive worry, sleeping, or getting along with people. They were also asked the age at which this injury occurred.

One-third (33%) of adults experiencing homelessness reported evidence of TBI; this rate has been relatively consistent since 2006. Another consistency is the timing of the TBI coinciding within a window around the age that many people first became homeless. One-quarter (25%) of adults who reported traumatic brain injuries had their first suspected TBI between 2 years before and 2 years after their first episode of homelessness (Figure 19).

19. Years between first TBI and first episode of homelessness

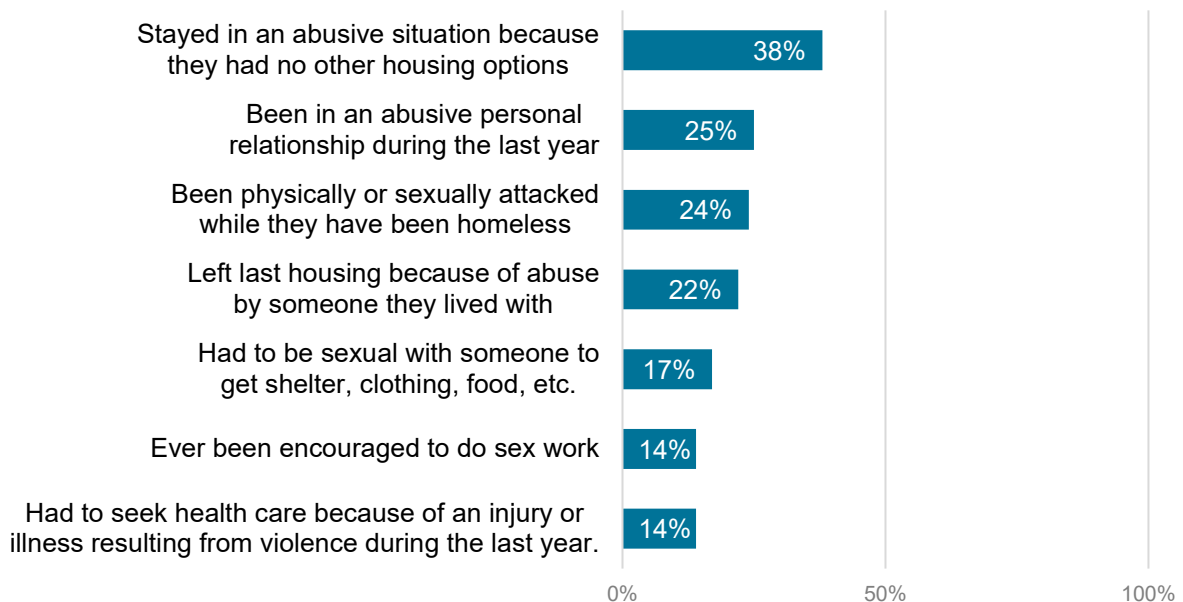


Violence and exploitation

➤ *Experiences with violence are common among people experiencing homelessness. This violence is both a cause of homelessness, and can be a result of the unsafe situations in which homeless adults often need to stay. Homeless women as well as people identifying as LGBTQ are more likely to experience each type of violence asked about in the survey.*

Overall, 58% of adults experiencing homelessness reported at least one of the seven types of abuse, violence, or sexual exploitation asked about in the Minnesota Homeless Study survey (Figure 20).

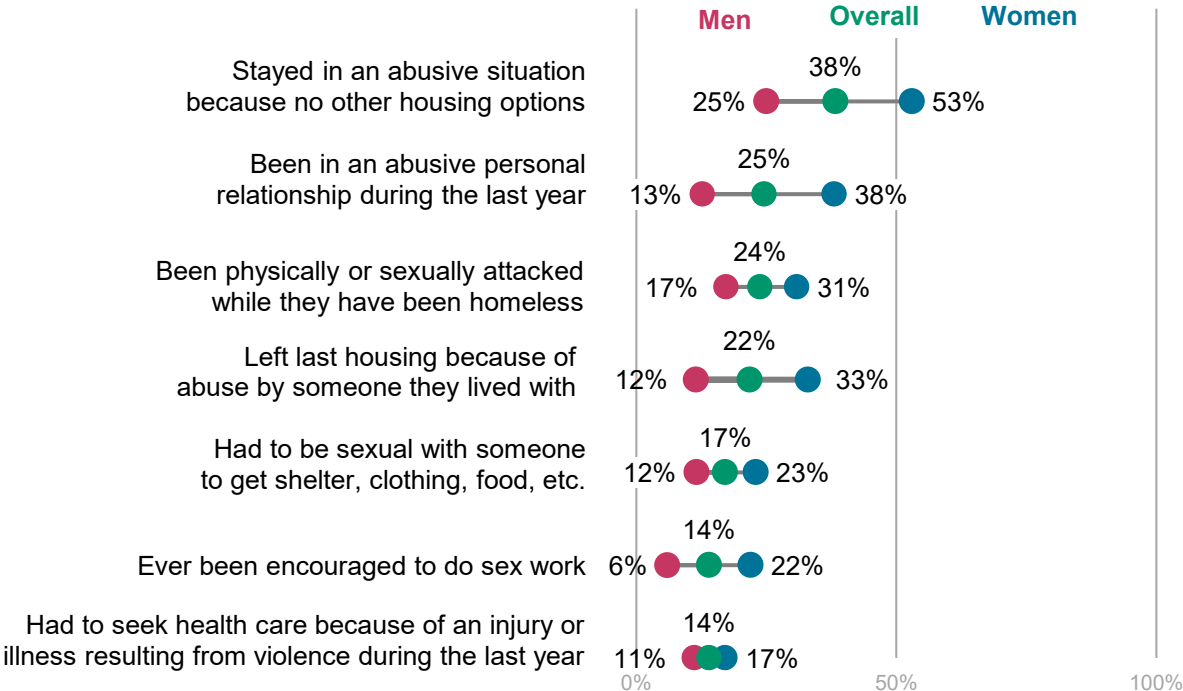
20. Violence and exploitation



Women experience all types of violence and exploitation at higher rates than men

Overall, women are more likely than men (71% vs. 45%) to report at least one of the seven types of abuse, violence, or sexual exploitation asked about in the Minnesota Homeless Study Survey. Women are also more likely than men to experience each type of violence measured (Figure 21). This was especially true for the questions related to abusive personal relationships. More than one-half (53%) of homeless women had stayed in an abusive relationship because they did not have any other housing options (25% of men), and 38% of homeless women had been in an abusive relationship in the past year (13% of men).

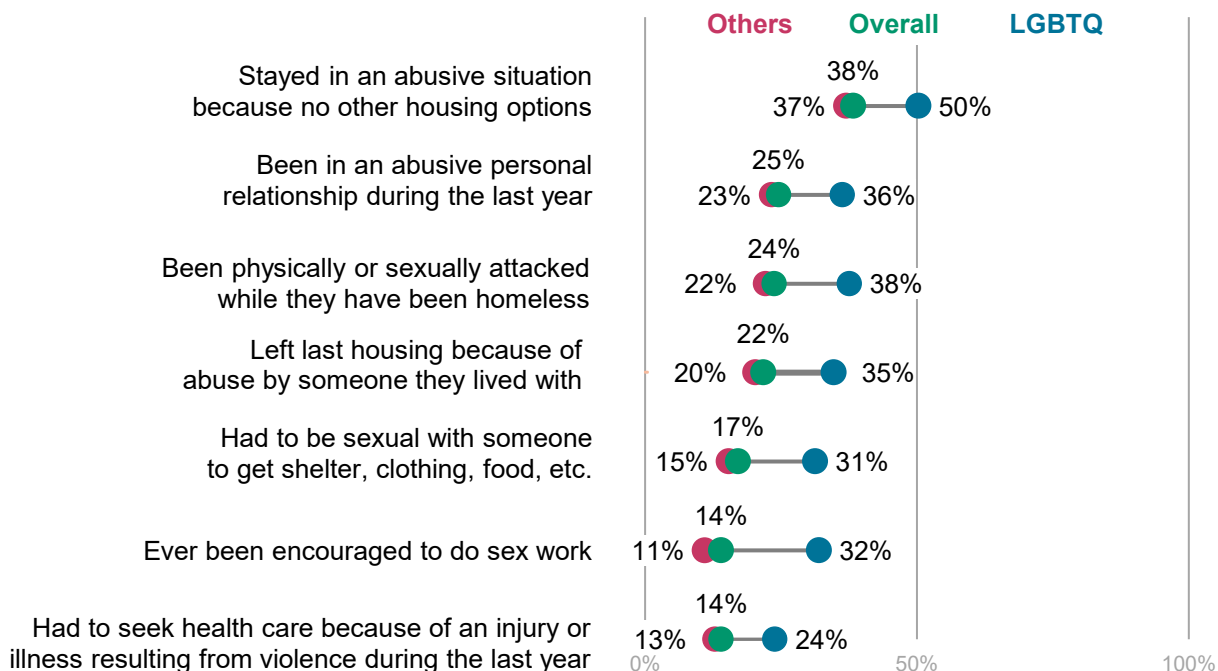
21. Violence and exploitation by gender



Homeless adults who identify as LGBTQ experience violence and exploitation at higher rates than other homeless adults

Overall, homeless adults who identify as LGBTQ are more likely than other homeless adults (78% vs. 56%) to report at least one of the seven types of abuse, violence, or sexual exploitation asked about in the Minnesota Homeless Study Survey. Homeless adults who identify as LGBTQ are also more likely than other homeless adults to report each type of violence measured (Figure 22). One-half (50%) of homeless adults identifying as LGBTQ reported they had stayed in an abusive relationship because they did not have other housing options (37% of other adults), and 38% had been physically or sexually attacked while homeless (22% of other adults).

22. Violence and exploitation by LGBTQ identification



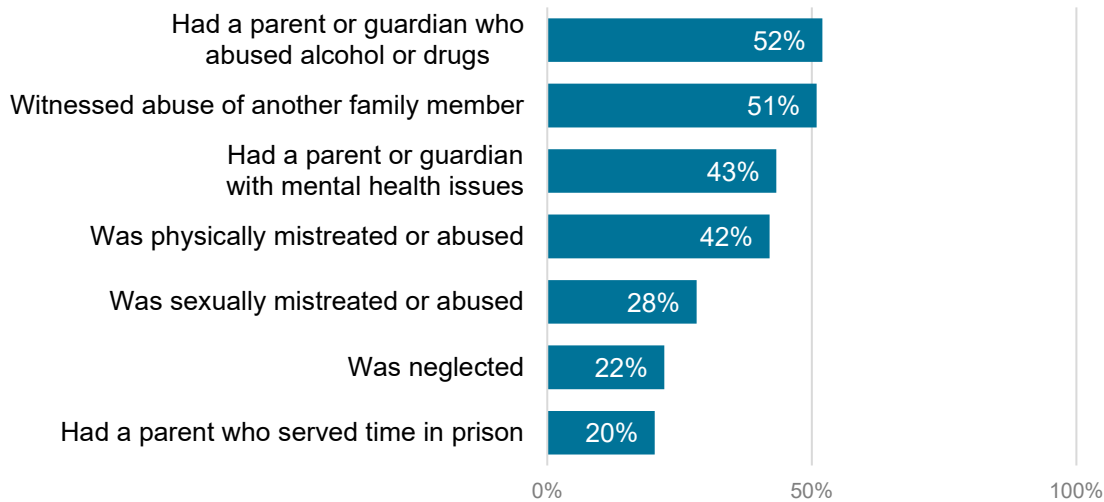
Childhood trauma

➔ *Childhood trauma has been linked to physical, emotional, and cognitive issues in adulthood. The 2018 Minnesota Homeless Study analysis shows that childhood trauma is associated with a younger age of first episode of homelessness. These data show the critical need to incorporate practices that recognize histories of trauma and highlight the resilience of the population who have faced these challenges.*

The Minnesota Homeless Study survey asks homeless adults whether they had experienced any of seven different adverse childhood experiences (ACEs). Adverse childhood experiences are potentially traumatic events that occur in childhood (under age 18). They include violence or abuse and other aspects that can undermine a child's sense of "safety, stability, and bonding, such as growing up in a household with substance misuse, mental health problems, and instability due to parental separation or household members being in jail or prison" (Centers for Disease Control and Prevention, n.d.). It should be noted that, generally, there are 11 ACEs measured, but, for the purposes of this research we only ask about the seven most severe (and combine emotional and physical neglect into one category).

Overall, 73% reported experiencing at least one of the seven ACEs they were asked about (Figure 23). Issues with others in the household were most common; this includes living with someone who misused substances (52%), witnessing abuse of a family member (51%), and living with a parent who struggled with mental health issues (43%).

23. Percentage of homeless adults reporting adverse childhood experiences (ACEs)



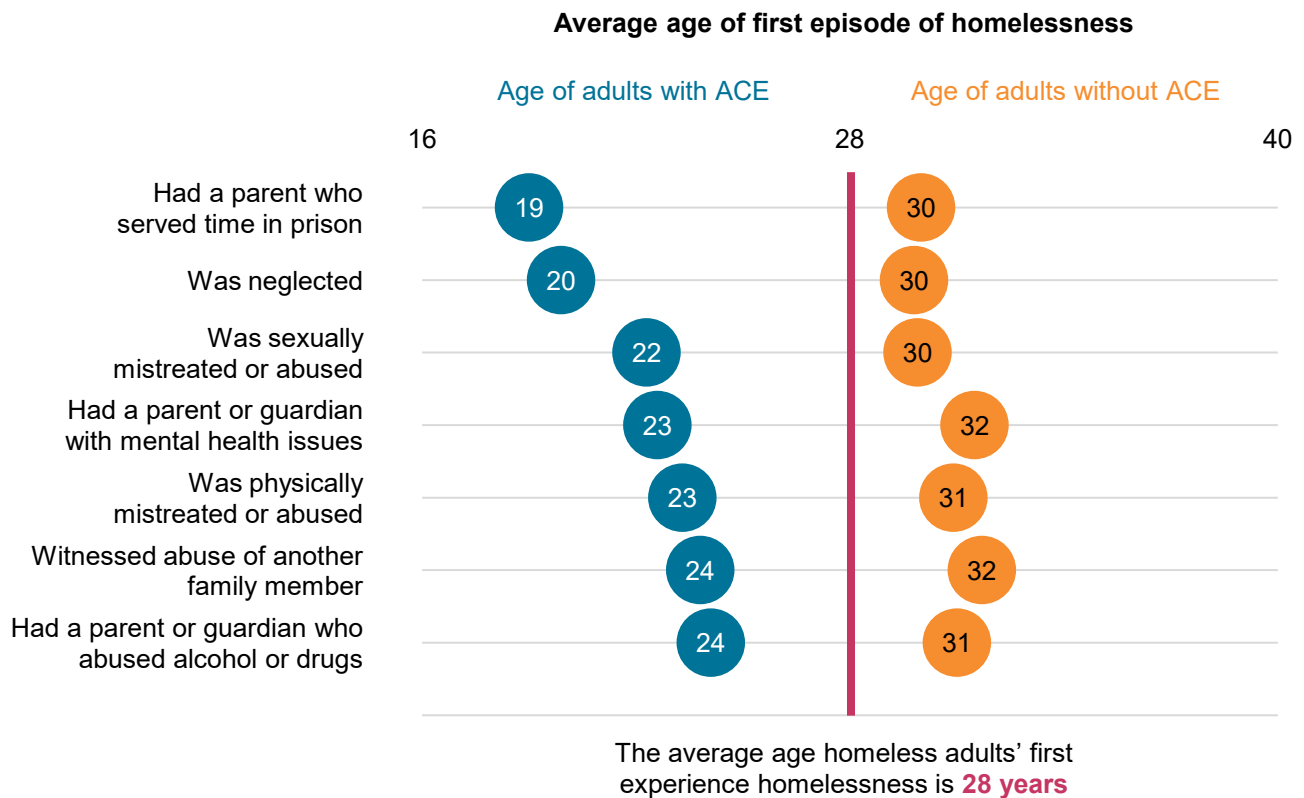
Self-reporting ACEs varies by different demographic groups:

- Women (81%) are more likely than men (65%) to report an ACE
- Young adults (age 18-24) (83%) are more likely than older adults (55+) (57%) to report an ACE
- Adults identifying as LGBTQ (87%) are more likely than others (72%) to report an ACE

Adverse childhood experiences often precede and hasten entry into homelessness

The average age at which homeless adults first experienced homelessness is 28, but for those reporting an adverse childhood experience, the average age of first episode of homelessness is 8 to 11 years younger. Figure 24 compares the average age of first episode of homelessness for those reporting an ACE to those who did not report an ACE. For example, for those who were neglected as a child, the average age of the first episode of homelessness was 20 years. Those without this ACE had an average age of first episode of homelessness of 30 years.

24. Average age of first episode of homelessness by type of ACE experienced

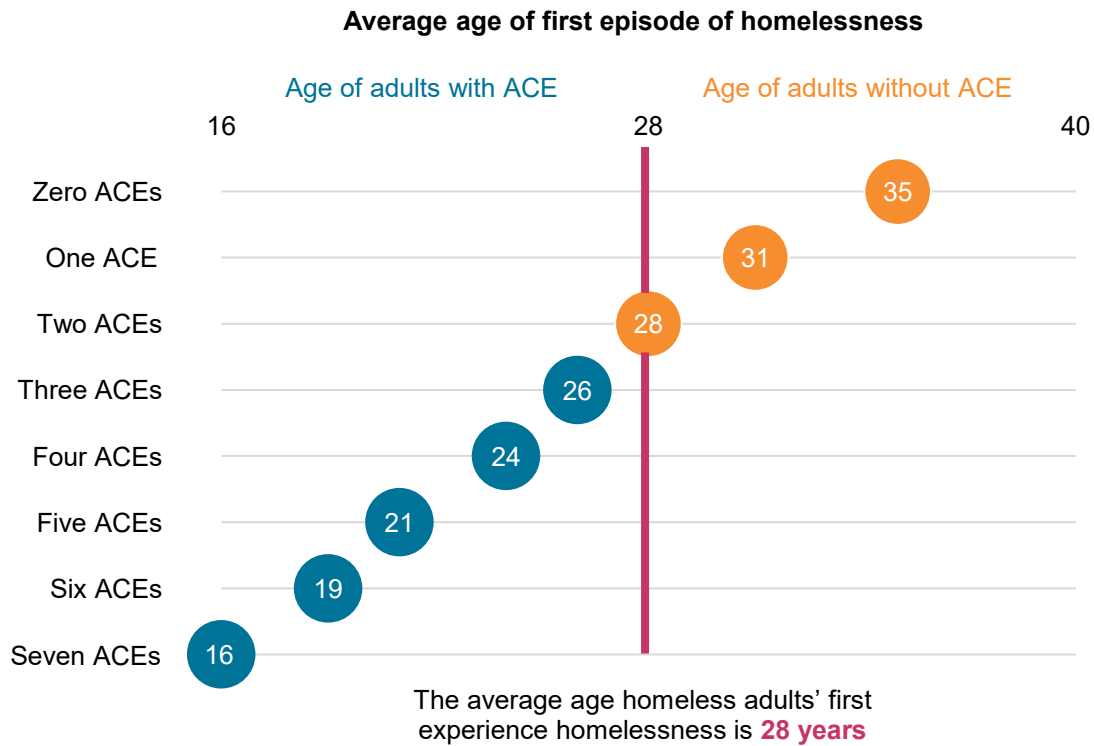


This disparity is explained in part because homeless youth (age 24 and younger) are more likely than older age groups to report an ACE. However, even when we examine ACE data of older age groups of homeless adults, those with ACEs also experienced homelessness at a younger age than those without ACEs. For example, the average age of first episode of homelessness for middle age homeless adults (age 35-54) was 22 years for those who had a parent who served time in prison when they were children. This compares to an average age of 31 for the first episode of homelessness for middle age homeless adults who did not report this ACE.

Adverse childhood experiences are often compounded

Not only are ACEs common among adults experiencing homelessness, but more than one-half (59%) reported multiple ACEs. The average was 2.5 out of a total of seven ACEs. Homeless women (69%) were more likely than homeless men (50%) to report multiple ACEs. Homeless adults reporting three or more ACEs had younger than average first episodes of homelessness (Figure 25).

25. Average age of first episode of homelessness by number of adverse childhood experiences



Education, employment, and income

Education, employment, and income are key protective factors for safe and stable housing.

Key findings:

- Most (79%) adults experiencing homelessness completed high school or received their GED.
- One-third (32%) of adults experiencing homelessness received special education services in school.
- Employment rates are similar to the 2015 study. Almost one-third (30%) of adults experiencing homelessness were employed (13% worked at least 35 hours per week).
- Adults experiencing homelessness reported a median of \$550 of income during the month of the study.

Educational attainment

➔ *While many adults experiencing homelessness have attained high-school level and college-level education, many report having received special education services while in school.*

High school completion is common

Most (79%) adults experiencing homelessness completed high school or received their GED.

- 37% attended at least some college, and 13% have at least a two-year degree
- 9% are currently enrolled in an adult education or training program, most commonly 2-year college or technical programs (32% of those enrolled), GED courses (19%), or 4-year college (10%)

Many received special education services while in school

One-third (32%) of adults experiencing homelessness had an Individual Education Plan (IEP) or received special education services while in school.

Of those who received special education services in school:

- 30% had not completed high school or received a GED, compared to 18% of those who did not receive special education services
- 23% were young adults (age 18-24), compared to 13% of those who did not receive services
- 75% had a significant mental illness, compared to 59% of those who did not receive services
- 41% reported evidence of a traumatic brain injury, compared to 29% of those who did not receive services

Employment and income

➔ *Employment and income can be stabilizing influences for people struggling with homelessness, but unemployment and lack of income also represent one of the biggest barriers to finding stable housing. Conversely, being homeless also represents a significant barrier to getting and keeping gainful employment.*

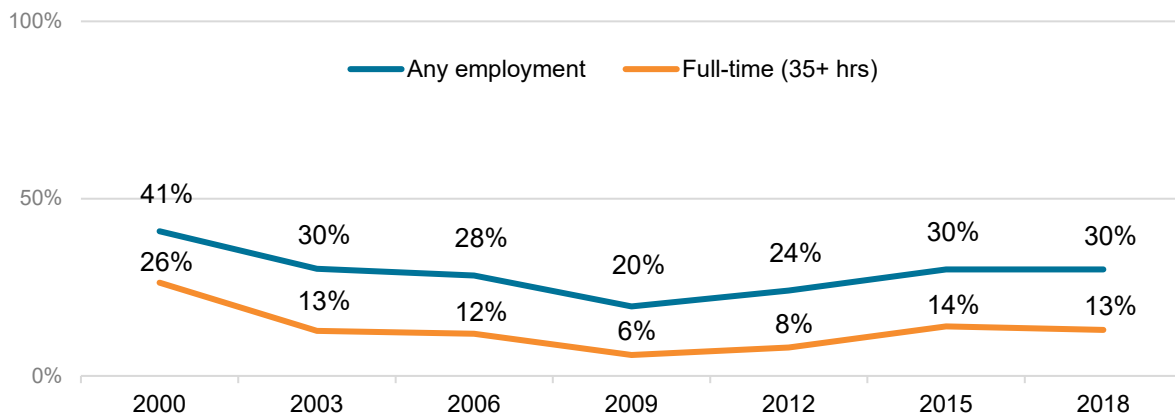
Overall, 30% of adults experiencing homelessness were employed, and 13% worked at least 35 hours per week. The average number of hours worked per week for employed homeless adults was 31.

Sixteen percent were laid off from a job in the past six months, and 55% of unemployed homeless adults had not had a job for more than a year. The average length of time since unemployed homeless adults had a job was 4.3 years (median=1.6 years). One-half (49%) reported they were currently looking for a job. Barriers to employment are varied, but the most common barriers unemployed homeless adults report include physical health issues (29%), insufficient transportation (26%), mental or chemical health issues (23%), and issues related to lack of stable housing (18%).

Employment has increased since 2009

Employment numbers in the homeless adult population have crept up since their low during the depths of the Great Recession in 2009. But, the proportion of employed homeless adults is still lower than the peak in 2000, and it has not increased since 2015 (Figure 26).

26. Employment trend, 2000-2018



Educational attainment is associated with higher levels of employment for adults experiencing homelessness.

- 24% with less than a high school education were employed
- 29% with a high school diploma or GED (but no college) were employed
- 34% with at least some college were employed

Other characteristics were also associated with higher or lower levels of employment.

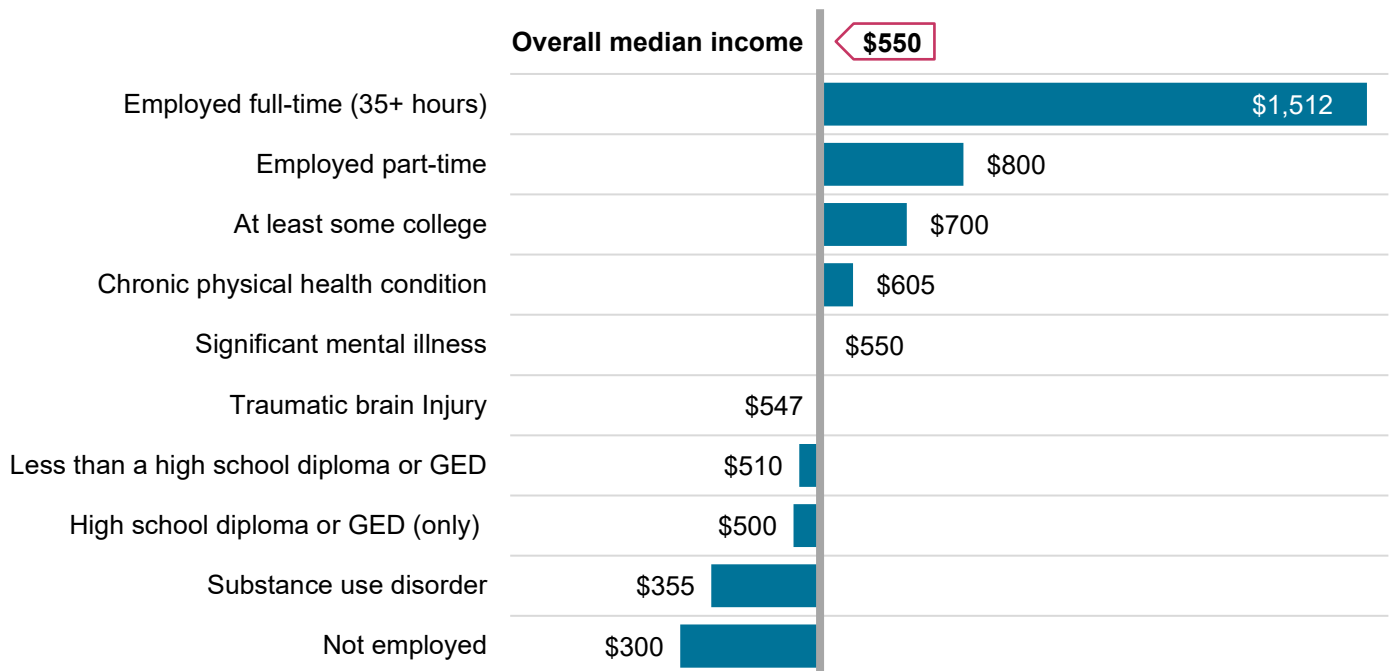
- 41% of those in transitional housing were employed, compared to 20% in non-shelter locations
- 26% of those who reported significant mental illness were employed, compared to 37% of those who did not report a significant mental illness
- 23% of those who reported evidence of TBI were employed, compared to 33% of those who did not report evidence of TBI
- 21% of those who reported substance use disorder were employed, compared to 32% of those who did not report substance use disorder

Income varies by health, education, and employment

Respondents of the 2018 Minnesota Homeless Survey were asked what their total income from all sources was for the month of the survey. The average income reported was \$684 and the median was \$550. Three-quarters (76%) reported income of less than \$1,000 during the month, and 13% reported no income for the month. Income rates are very similar to 2015.

Median income varies by health, education, and employment characteristics (Figure 27).

27. Median monthly income by health, education, and employment characteristics



Factors associated with homelessness

Many of the causes of homelessness and barriers to safe and stable housing can be inferred from the characteristics outlined in the previous sections of this report. This section provides the most salient factors associated with homelessness as reported by the adults experiencing homelessness.

Key findings:

- Financial reasons (being able to afford rent, loss of income, debt) are the most common reasons respondents report for leaving their last housing.
- The availability of affordable housing was the most common barrier to getting housing.

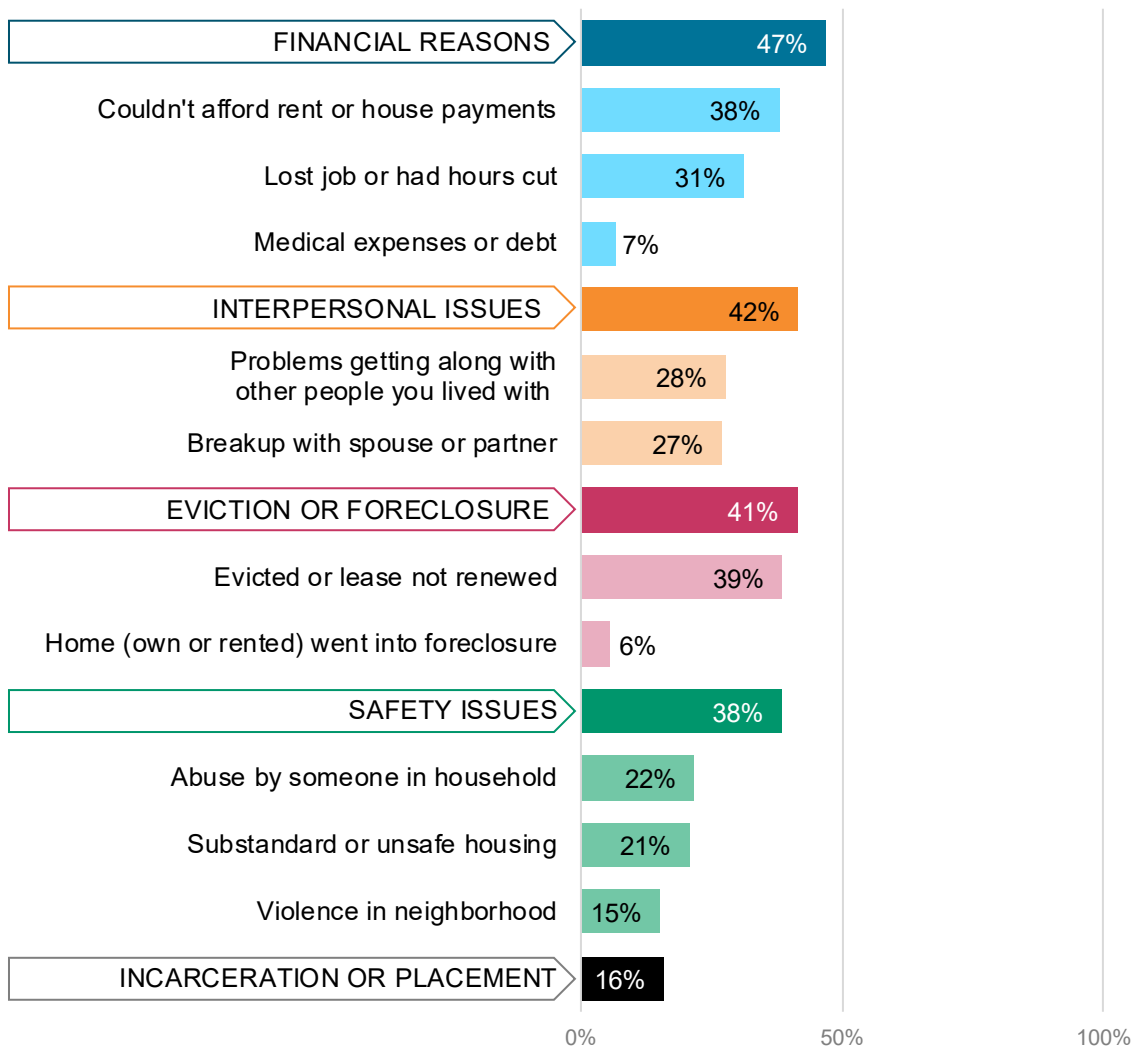
Why adults experiencing homelessness left their last housing

➔ *There is no single cause of homelessness, but there are often common and inter-related themes of economic, social, and safety issues; eviction or foreclosure; and entry into the criminal justice or other institutional systems.*

The Minnesota Homeless Study survey listed 11 potential reasons for why respondents left their last stable housing. These reasons are shown in Figure 28 and are aggregated under the following general categories: Financial reasons; interpersonal issues; eviction or foreclosure; safety issues; and incarceration or placement. Respondents could, and often did, provide multiple reasons for leaving their last housing.

- Women were more likely than men to leave due to safety issues (48% vs. 29%)
- Young adults (age 18-24) were less likely than other adults (age 25+) to report financial reasons (38% vs. 49%) and eviction/foreclosure (32% vs. 43%), but were more likely to report interpersonal issues (48% vs. 40%)
- Older adults (55+) were less likely than other adults to report safety issues (29% vs. 41%)

28. Reasons why homeless adults left their last housing



Reasons for leaving last housing are inter-related

Adults experiencing homelessness often have multiple inter-related reasons for leaving their last stable housing. Financial reasons often overlapped with other reasons for leaving their last housing.

- 25% reported **financial reasons** *and* **eviction or foreclosure**
- 20% reported **financial reasons** *and* **interpersonal issues**
- 18% reported **financial reasons** *and* **safety issues**

Eviction and foreclosure also overlapped with safety issues and interpersonal issues.

- 15% reported **eviction or foreclosure** *and* **safety issues**
- 15% reported **eviction or foreclosure** *and* **interpersonal issues**

Housing affordability and subsidies

➔ *The combination of a lack of affordable housing, lack of income, and lack of access to timely housing subsidies makes it extremely difficult for homeless adults to find and keep safe and stable housing even before accounting for other housing barriers they may face.*

Monthly income does not match the cost of housing

Housing affordability and income are the primary barriers to housing for people experiencing homelessness. More than one-half (56%) of homeless adults reported that there is no housing they can afford. This is the most frequent response given among 12 potential barriers asked about on the survey (see next section). Furthermore, 13% had no income during the month of the survey, 22% had incomes of \$100 or less, and 47% had incomes of \$500 or less.

56% of adults experiencing homelessness reported there was **no housing they could afford**

The median income for the homeless adults surveyed in the Twin Cities was \$600, but the fair market rent for a one-bedroom apartment in the Twin Cities is \$864 (U.S. Department of Housing and Urban Development, 2018). The median income for homeless adults surveyed in greater Minnesota was \$500, but the fair market rent for a one-bedroom apartment in greater Minnesota is \$576. (U.S. Department of Housing and Urban Development, 2018).

Homeless adults experience long waits or lack access to housing subsidies

One-half (50%) of homeless adults are currently on a waiting list for public housing, Section 8, or another type of financial assistance for housing; 34% have been on the waiting list for a year or longer, and the average wait time was 12 months. Another 10% could not get on a waiting list because it was closed.

Only 20% of homeless adults received help paying for rent or housing (such as Section 8 or supportive housing) in the previous year. Seven percent of homeless adults received a housing voucher during the past two years that they could not use because they could not find a place that would accept it.

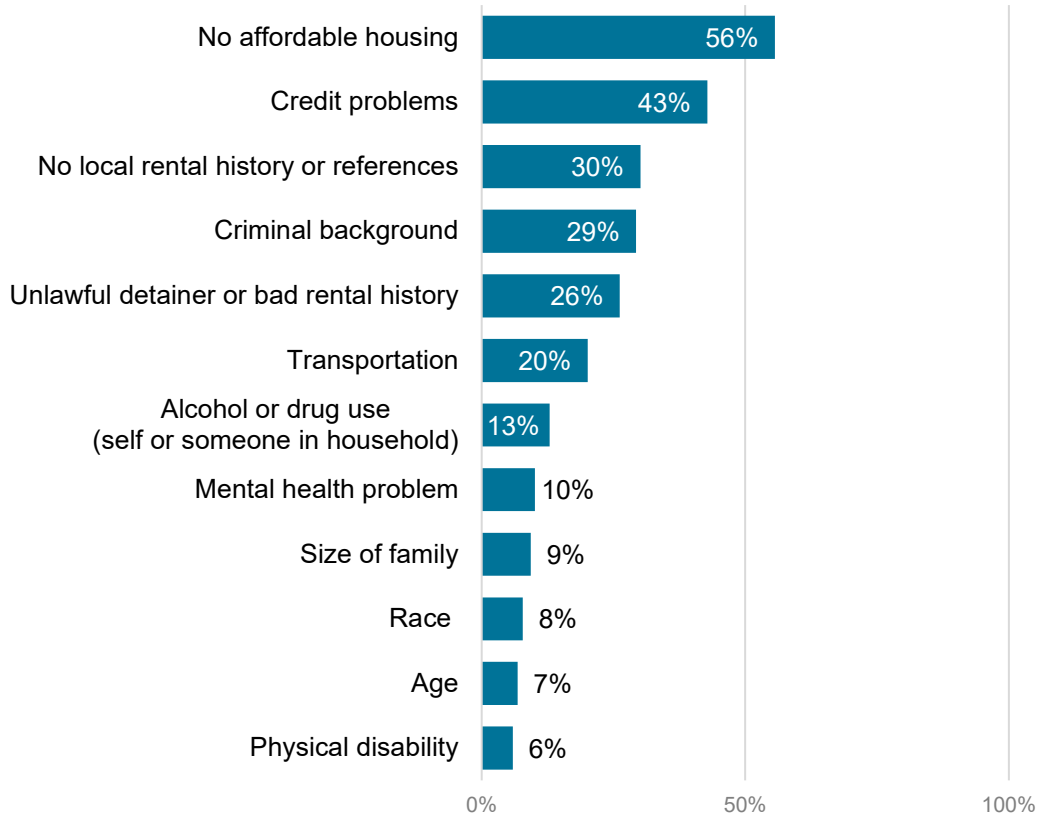
50% of adults experiencing homelessness were **on a waiting list for subsidized housing**

Self-reported barriers to stable housing

➤ Many of the barriers keeping homeless adults from finding safe and stable housing are implied in the findings from the other sections of this report, but adults experiencing homelessness most often reported affordability, credit issues, rental history, and criminal background as their biggest barriers to getting housing.

The Minnesota Homeless Study asks respondents 12 questions about what has made it difficult for them to get housing (Figure 29). As noted above, the most reported barrier to housing was a lack of affordable housing (56%). Along with affordability, adults experiencing homelessness also report practical complications to getting housing, including credit problems (43%), lack of rental history or references (30%), and bad rental history (26%).

29. Barriers to getting housing



Criminal background is a barrier to housing for a large proportion of homeless adults

Other than affordability, credit, and rental history barriers, having a history of incarceration is the most frequently self-reported barrier to getting housing. One-half (51%) of adults experiencing homelessness have ever been incarcerated and almost one-third (29%) self-report that a criminal background has made it difficult for them to get housing.

29% of adults experiencing homelessness report a **criminal background is a barrier** to getting housing

Self-reported criminal background as a housing barrier is higher for those with more recent experiences with the criminal justice system.

- 21% had left incarceration in the past two years; of those, 60% report criminal background as a barrier
- 16% are on probation; of those, 63% report criminal background as a barrier

Self-reported criminal background as a housing barrier is also higher among men (34%) and among those interviewed in non-shelter locations (38%), and lower among young adults (16%).

In recent years, there has been substantial momentum to address the link between criminal background and difficulty in accessing housing, particularly in the rental market. In 2016, the U.S. Department of Housing and Urban Development (HUD) released its *Guidance on Application of Fair Housing Act Standards to the Use of Criminal Records by Providers of Housing and Real Estate-Related Transactions* (U.S. Department of Housing and Urban Development, 2016). The guidance recognized that nearly one-third of the US population has a criminal record of some sort, but that “many formerly incarcerated individuals, as well as individuals who were convicted but not incarcerated, encounter significant barriers to securing housing, including public and other federally-subsidized housing because of their criminal history.”

The HUD guidance directed that a blanket restriction on criminal convictions could be a violation of Fair Housing standards when this practice has a disparate impact on people of color. This violation occurs when the housing provider is unable to show that there is well-founded or evidence-based justification for restricting people with criminal convictions to the housing. The 2016 HUD guidance has led to increased review of specific criminal conviction criteria by landlords and housing providers and efforts in cities throughout the country, including Minneapolis and Saint Paul, to mandate less restrictive housing screening criteria.

Service use

Social services can be critical supports for people experiencing homelessness. Not only do they provide a safety net to meet immediate survival needs, but, at times, they can help stabilize people so they can address other issues.

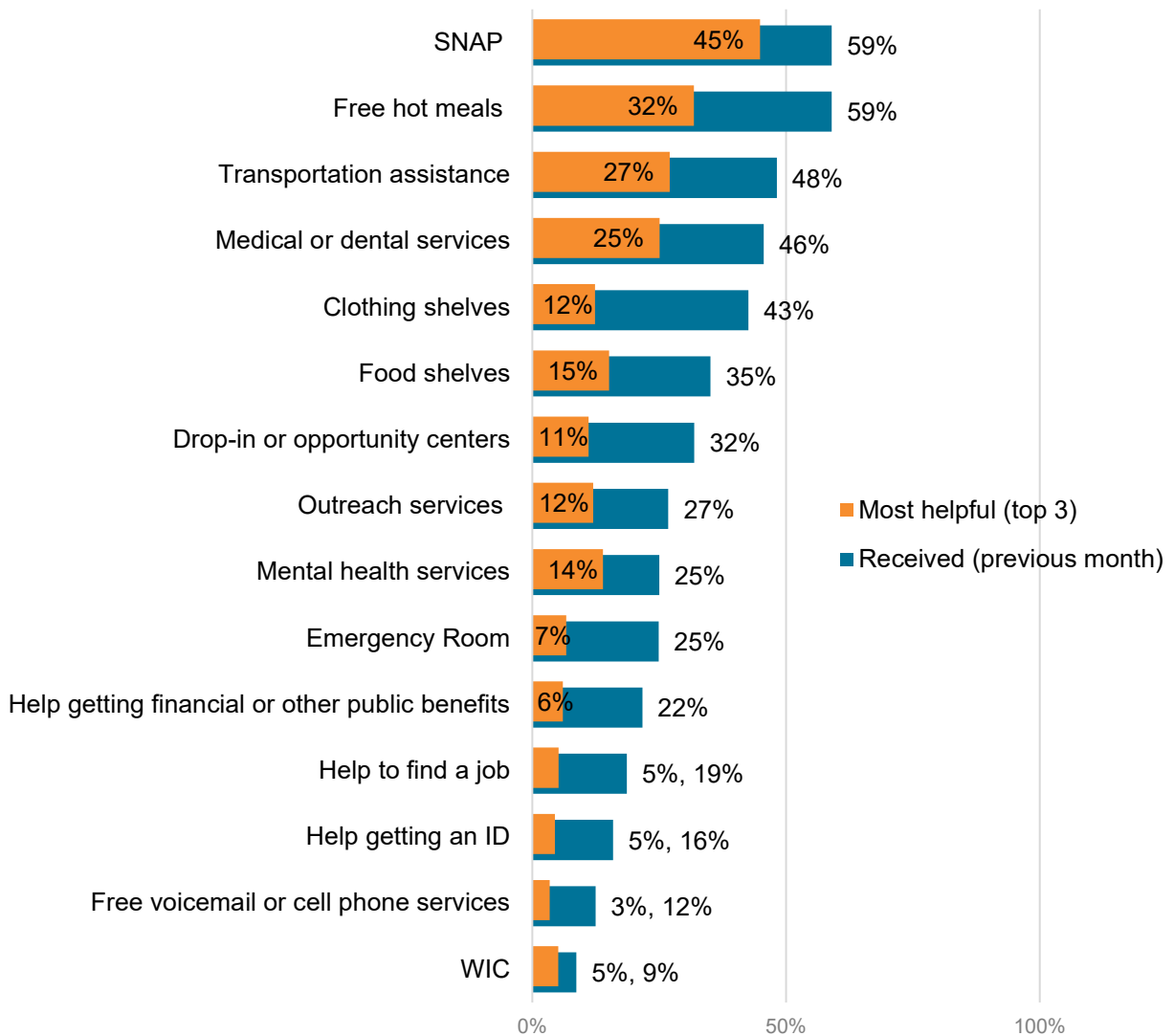
Key findings:

- Food assistance services are the most used, and, when asked, adults experiencing homelessness rate them as most helpful among other services listed.
- Supplemental Nutritional Assistance Program (SNAP or food stamps) use has been decreasing since the 2012 study.
- Public transit is used as both a service and as shelter.

The 2018 Minnesota Homeless Study survey asked respondents whether they received any of 15 safety net or social services commonly received by people with very low incomes. Respondents were also asked to identify up to three services that helped them the most during the past month (Figure 30).

Of this list, food benefits—including SNAP (59% received; 46% most helpful) and free hot meals (59% received; 33% most helpful)—were the most valued services. This is consistent with previous studies.

30. Social services received in previous month and those rated top 3 most helpful



Public transit is used as a service and as shelter

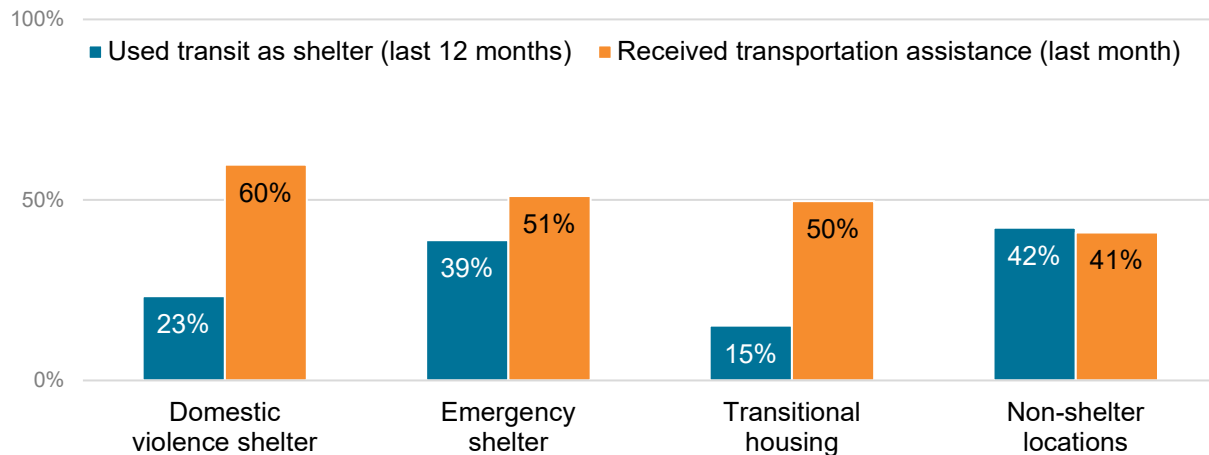
As shown above, transportation assistance is an important service for adults experiencing homelessness (48% received in previous month; 27% most helpful). As part of the 2018 Minnesota Homeless Study, the survey also asked respondents if they had used transit as shelter, and one-third (33%) reported that they stayed the night on a bus, on a light rail train, in a bus or train transit station, or at a highway rest stop in the previous 12 months.

Usage patterns for transit as shelter versus transportation are very different depending on shelter setting (Figure 31). Homeless adults interviewed in non-shelter locations were the most likely of any interview setting to have used transit as shelter in the previous 12 months (42%), but least likely to have received transportation

33% of adults experiencing homelessness reported using transit as shelter in the previous year

assistance in the previous month (41%). On the other hand, only 15% of those in transitional housing had used transit as shelter in the previous year, while one-half (50%) received transportation assistance. This is similar to those in domestic violence shelters (23% used transit as shelter and 60% received transportation assistance).

31. Using transit as service and shelter, by shelter type



Adults experiencing homelessness who have used transit as shelter during the previous year were more likely to be men, middle aged, and in the Twin Cities metro area. For those who have used transit as shelter:

- 82% were interviewed in the Twin Cities metro area (compared to 60% of those who had not used transit as shelter)
- 68% had been homeless for at least a year (compared to 55% of those who had not used transit as shelter)
- 28% had spent a majority of the previous 30 days outside/unsheltered (compared to 13% of those who had not used transit as shelter)
- 65% were men (compared to 47% of those who had not used transit as shelter)
- 48% were age 35-54 years (compared to 39% of those who had not used transit as shelter)
- 28% had left an incarceration setting in the past 2 years (compared to 18% of those who had not used transit as shelter)

Adults experiencing homelessness who used transit as shelter in the past year also had considerably higher levels of distress than those who had not used transit as a shelter. For those who have used transit as shelter:

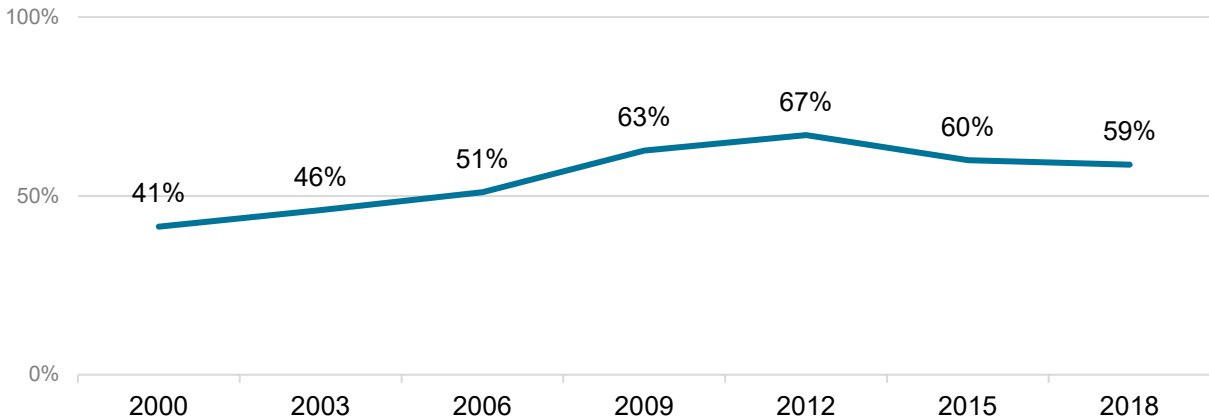
- 63% had a chronic physical health condition (compared to 54% of those who had not used transit as shelter)
- 68% had significant mental illness (compared to 62%)

- 45% had evidence of traumatic brain injury (compared to 27%)
- 32% had alcohol or drug abuse disorder (compared to 20%)

SNAP use has declined since 2012

As shown above, nutrition and food-related services are critical services for people experiencing homelessness, but use of the most common food assistance program has decreased in recent years (Figure 32). In 2018, 59% reported using SNAP in the previous 30 days. This is down from a peak of 67% in 2012, but still higher than 2000 when 41% reported using the food assistance program (known as food stamps at the time).

32. Supplemental Nutritional Assistance Program (SNAP) use (previous 30 days), 2000-2018



This decrease is almost certainly related to confusion around the ending of a waiver tied to Supplemental Nutrition Assistance Program (SNAP) benefits. In 2009, the United States Department of Agriculture Food and Nutrition Services (FNS) offered states an opportunity to waive mandatory work provisions for able-bodied adults without dependents (ABAWDs), meaning states could set aside employment and training requirements as a condition of receiving SNAP benefits. The waiver was adopted in response to the nationwide recession and high unemployment rates experienced across the country. However, in November 2013, due to an improved economy and lower unemployment rate in Minnesota, the ABAWD waiver expired. A report previously published by Wilder on this topic illustrated that both providers and SNAP beneficiaries were unclear that a waiver existed and unsure about the implications of the waiver ending (Nelson-Dusek, 2015).

Conclusions

A primary finding from the 2018 Minnesota Homeless Study is that homelessness among adults *increased* by 10% since 2015; this increase occurred both in the Twin Cities metro area (9%) and in greater Minnesota (13%).

A driving factor in this increase was the sharp rise in the proportion of people not staying in a formal shelter (an increase of 62% between 2015 and 2018). These increases point to the critical need for 1) more shelter beds and support services to help those in crisis, and 2) more affordable housing across our state.

While there are efforts underway to increase the amount of affordable housing, particularly the governor's proposed investment of \$276 million in safe and affordable housing projects across the state (Office of Governor Tim Walz & Lt. Governor Peggy Flanagan, 2020), we know from conducting the Minnesota Homeless Study for over 30 years that any effort to end homelessness must be targeted (as in the case of ending Veterans homelessness), potent, and sustained over time.

Besides creating more affordable housing, solutions must start upstream to stem the tide of people coming into homelessness. At the individual level, we can focus on providing support for families in crisis; at the community level, we can focus on mitigating the impact of longstanding policies that have systematically disadvantaged African American and American Indian people.

The Minnesota Homeless Study identifies the startling histories of childhood trauma experienced by our homeless population. By focusing efforts on providing mental health care and supports to struggling families, with a particular emphasis on those who may have a parent absent because of incarceration or another issue, we can provide critical stabilization and support that may prevent the crises that lead to homelessness.

Statewide and in our local communities, we must focus on policies and practices rooted in structural racism that inhibit fair and full access to education, employment, credit, health care, and housing opportunities. By recognizing that discriminatory policies have inhibited the ability to create wealth for generations of African American and American Indian people in our state, we can begin dismantling a structure that has given an unfair advantage to some and not to others.

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Appendix

Defining homelessness

The definition of homelessness used for the Minnesota Homeless Study is the same one specified by the U.S. Congress in its most recent reauthorization of the Hearth Act in May 2009. A homeless person is anyone who lacks a fixed, regular, and adequate nighttime residence, **and**:

1. Has a primary nighttime residence that is a public or private place not designed for or ordinarily used as a regular sleeping accommodation for human beings, including a car, park, abandoned building, bus or train station, airport, or camping ground;
or
2. Has a primary nighttime residence that is a supervised, publicly- or privately-operated shelter designated to provide temporary living arrangements (including hotels and motels paid for by Federal, State, or local government programs for low-income individuals or by charitable organizations, congregate shelters, and transitional housing);
or
3. An individual who resided in a shelter or place not meant for human habitation and is exiting an institution where he or she temporarily resided (this includes those persons leaving detox on the date of the study who were homeless upon entry).

This definition is expanded to include persons who will imminently lose their housing, as evidenced by an eviction action that notifies them that they must leave within 14 days; or persons staying in hotels or motels (not paid for by public or charitable funds) who lack the resources necessary to reside there for more than 14 days; or persons in temporarily doubled up situations where there is evidence that the owner or primary renter will not allow the individual or family to stay for more than 14 days.

A doubled-up parent not meeting any of these criteria may be included if they have a child with them, have a significant history of residential instability, and have a barrier (or have a child with a barrier) that interferes with housing or employment.

For youth through age 24, the definition of homelessness is expanded to include people who are not with a parent or guardian and who are staying temporarily with other relatives or friends (“couch hopping”). Federal and state legislation governing services for runaway and homeless youth explicitly include youth through age 24. We, therefore, include young people age 18 through 24 in our discussion of unaccompanied homeless youth. However, those age 18 or older are legally adults and are also included in the overall adult findings. For this reason, “youth” and “adult” numbers should not be added together for totals.

Study methods

Wilder Research conducts the Minnesota Homeless Study, along with a companion study of homelessness on American Indian reservations, every three years. The 2018 study took place on October 25, 2018, and included two components that captured information on that date: 1) face-to-face interviews with people throughout the state who meet a federal definition of homelessness, and 2) a count of people experiencing homelessness.

Interviews with people experiencing homelessness

In 2018, information about the characteristics of people experiencing homelessness was gathered from 4,181 face-to-face interviews with homeless adults and minor youth (under 18 without their parents). Each interview lasts about 30 to 45 minutes. Study participation is voluntary and participants receive \$10 for completing the interview.

The interviews were conducted by over 1,000 trained volunteers and program staff in more than 300 locations, including shelters and transitional housing programs, meal sites, service centers, encampments, and other places not intended for housing. In shelter and transitional housing programs, one adult per family was asked to complete the interview.

Interviews were conducted with people known to be homeless on October 25, 2018, including 2,338 adults in shelters, as well as another 1,843 adults in non-shelter locations. According to the interviews, adult respondents had 2,921 children and 729 partners with them. In addition, we conducted interviews with 98 unaccompanied minors age 17 and under, both in and out of shelter settings. These minors had a total of 6 children and 14 partners with them.

The survey was translated into Spanish and Somali.

Weighting the interviews

The 2018 survey data were weighted – statistically adjusted – to reflect the actual number of sheltered homeless persons, as indicated by specific site counts of people in shelters throughout the state on October 25, 2018. Shelter sites include emergency shelters, domestic violence shelters, transitional housing programs, and a few Rapid Rehousing programs that continue to function as transitional housing on the day of the survey.

Only sites from which there were completed interviews were used in the weighting. Data from non-shelter locations are not weighted. The actual number of homeless persons in non-sheltered locations cannot be accurately estimated, so these cases were given a weight of 1.0.

The statewide data is based on interviews in shelter locations with 1,217 men, 1,107 women, and 13 people who self-identified their gender, for a total of 2,338 interviews with adults (gender was

missing for one person). Another 1,843 interviews were conducted with adults in non-shelter locations. According to the interviews, our sample of adult respondents had a total of 1,632 children with them.

The actual number of adults in shelter and transitional housing programs on the night of the survey, according to the count that Wilder Research conducted with providers, was 4,517. Therefore, survey results have been weighted to represent the 2,321 men and 2,196 women who were in shelter and transitional housing programs on the night of the survey. According to shelter providers, 2,845 children were with their parents or another adult on the night of the survey. An additional 411 children were with adult parents who were not in shelters on the night of the survey.

When the actual number of adults experiencing homelessness (N=4,517) is combined with the 1,843 interviews completed with adults in non-shelter locations, the total sample for which estimates are available is 6,360. Because we received no completed surveys from males in specific shelter types in two regions, there is a small discrepancy between the total weighted sample size (6,351) and the total sample for which estimates are available (6,360).

The weightings were calculated by a sample-balancing program available in the Princeton Statistical Program (P-Stat). Individual case weights were computed based on:

- Individual sites
- Gender (male, female)
- Minnesota regions (northwest, northeast, central, west central, southwest, southeast) and counties (Anoka, Dakota, Hennepin, Scott/Carver, Ramsey, Washington, and St. Louis County)
- Shelter types (emergency, domestic violence shelter, transitional/Rapid Rehousing)

Count of persons staying in all shelter settings

In addition to interview data, Wilder works with housing providers to get counts of adults, youth, and children staying in shelter settings on the night of the study, including emergency shelters, domestic violence shelters, time-limited transitional housing, a few selected Rapid Rehousing programs, and emergency service voucher sites. This complete enumeration within shelters allows us to weight the interview results for those in shelters and generalize the findings to nearly the entire population of those experiencing homelessness in our state.

The shelter settings counts are used to produce a count for each Continuum of Care region (geographic areas used for housing planning and service coordination) and are posted on <http://mnhomeless.org>. There is no comparable information about the total number of persons in non-shelter locations, other than the counts of those who participated in interviews and persons

staying with them in non-shelter locations. All adults and unaccompanied youth found in non-shelter locations were asked to be interviewed (or one member of each couple).

Sources and methods for estimations

Our one-night and annual estimates are based on research elsewhere that, through surveys or through identification in administrative records, establish either estimated or minimum numbers of homeless persons. The relationship between one-night and annual rates of homelessness depends greatly on both the length of time a person is homeless and how many times within the year they are homeless. Because the length and frequency of homeless spells differ among different household types and different age groups, we estimate the numbers of homeless people in segments. Some of the research we use as our basis is about homelessness on a single date, and some is about the incidence of homelessness over a full year, so we work in both directions to arrive at the overall numbers for each.

Adults age 25 and older. We have found no recent research that attempts to derive an estimate of unsheltered homelessness at any scale larger than an individual city. We base our single-night estimate on the most recent Point-In-Time (PIT) Count conducted across the entire country. The results of this count, published in the *Annual Homeless Assessment Report (AHAR)*⁸, give us a ratio for the number of unsheltered homeless people compared to the number in shelters. Since this is based on the count of people actually found, we know it to be a conservative estimate for the actual number. Using the known number of people in Minnesota's shelters, we use the ratios from the 2019 national PIT Count to estimate the additional number likely to be unsheltered in Minnesota on a single night.

Young adults age 18-24. Based on what we see in our survey data for the length and frequency of homeless spells, we observe that youth in this age range have a pattern of homelessness that is in between the patterns for adults and for unaccompanied youth. Since there are no studies specific to this age range, we compute estimates using both the method for adults (AHAR report) and the method used for unaccompanied minors (Minnesota Student Survey), and combine the results.

Unaccompanied minors age 12-17. The Minnesota Student Survey (MSS) (<https://education.mn.gov/MDE/dse/health/mss/>) is administered to a large and representative population of students in public secondary schools (including charter schools), in alternative high schools and alternative learning centers, and in juvenile detention facilities. We used results of the 2016 survey's question about respondents' experience being homeless on their own over the 12 months prior to the survey. This question was administered to students in 7th through 12th grades

⁸ Henry, M., Watt, R., Mahathey, A., Ouellette, J., & Sitler, A. (2020). *The 2019 annual homeless assessment report (AHAR) to Congress, Part 1: Point-in-time estimates of homelessness*. U.S. Department of Housing and Urban Development. <https://files.hudexchange.info/resources/documents/2019-AHAR-Part-1.pdf>

(8th and 11th for public schools⁹). We computed a weighted average rate of homelessness by combining results for the three survey populations, and imputing the public school rate for students in private schools and those not enrolled in any school. The resultant rate of homelessness was applied to the Census estimate for the 2018 population of youth age 12-17 in Minnesota.

Children with their parents. Two Minnesota-based sources were used for this group. The MSS question on homelessness also includes a separate response option for being homeless with a parent or family member. Weighted average rates for accompanied homelessness were computed as described above for unaccompanied minors, yielding a number for those age 12-17 who had been homeless with their family in the prior year.

A second source is the administrative data maintained by the Minnesota Department of Education (MDE) for the students identified as being homeless or highly mobile.¹⁰ Although these records include some preschoolers, they only include children who come to the attention of their local school district (such as through participation in parent education programs or preschool special education). Since Wilder’s survey data show that half of all children with their parents on the night of the study were age 5 or less, we therefore conservatively multiplied the MDE number for the year by 1.5 to account for the additional preschoolers who were unobserved through these methods. The estimates for MSS and MDE were very similar. Our annual estimate is the average of the two.

Relationship of one-night and annual estimates

The AHAR-based estimates (for adults and youth) begin with a one-night estimate. Based on methods originally developed by the Urban Institute,¹¹ which takes into consideration the length and frequency of spells, we compute a conservative annual rate of homelessness based on these one-night figures. By counting the number of people in our study who were homeless for less than a full year, and computing how many more people would become newly homeless during comparable periods at other times in the same year, we can estimate the full annual number. For example, 77 adults (age 25+) in our study had become homeless just within the week of the survey. There are 51 other weeks in the year, in which we assume a comparable number of people would also become homeless. For the 197 adults (25+) who had been homeless for more than a week but less than a month, we assume a comparable number had become newly homeless in each of the other 11 months of the year. Based on Urban Institute research (which

⁹ 9th graders also took the 2016 survey, but not in the Minneapolis Public Schools. Because of the high proportion of homeless students who live in Minneapolis, we regard the results of the 8th and 11th grades to be more representative of the statewide population.

¹⁰ Minnesota Department of Education. (n.d.). *Statewide data*. Minnesota Report Card. https://rc.education.mn.gov/#demographics/orgId--999999000000_groupType--state_p--b. In addition, communication from MDE officials told us that the October 1 count of homeless and highly mobile children typically doubles by the end of the school year.

¹¹ Burt, M., Aron, L.Y., Lee, E., & Valente, J. (2001). *Helping America’s homeless: Emergency shelter or affordable housing?* The Urban Institute Press.

asked a question our survey did not, about the number of homeless spells within the most recent year), we reduce the initial annual estimate to account for multiple spells by the same person.

The MSS- and MDE-based estimates (for youth, unaccompanied minors, and children with parents) begin with annual estimates. In a process that is the inverse of our conversion from one-night to annual estimates for adults, we use the data from our survey about the length of spells, and the duplication assumptions from the Urban Institute, to convert from the annual estimates to one-night estimates.

Where interviews were done

Interviews were conducted in shelter settings and in non-shelter locations. For this report, there are four types of *shelter settings* that serve those experiencing homelessness.

- **Emergency shelters:** A safe place to sleep, generally open only evenings and overnight, that may provide meals, housing information, and other services
- **Domestic violence shelters:** Safe refuge and advocacy for individuals and their children when fleeing an abusive situation
- **Transitional housing:** Time-limited, subsidized housing that involves working with a professional to set and address goals to become self-sufficient
- **A limited number of Rapid Rehousing (RRH) programs:** Temporary assistance for persons experiencing homelessness to help them obtain and pay for housing. Persons receiving RRH generally receive a subsidy to pay rent to landlords for a limited time.

After careful review, a very small number of RRH programs were included in the 2018 Minnesota Homeless Study, as long as they were programs that had maintained the same model of services and supports as in previous years and were previously considered “transitional housing.”

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