

Potential barriers to employment

In the 2003 survey, 15 percent of homeless men and 16 percent of homeless women reported having a job that had lasted for three months or more. (For homeless men, this increased steadily from 5% in 1991, to a high of 22% in 2000, and then dropped to 15% in the 2003 survey.)

While homelessness itself is clearly a substantial barrier to employment, the survey identifies other barriers as well. The analysis presented here examines several survey items that have been identified by employment counselors as potential barriers to employment:¹

- Transportation problems
- Inability to afford child care
- No high school diploma or GED
- No job for one year or more
- Physical health problems
- Diagnosed with serious or persistent mental illness within last two years
- Diagnosed with alcohol or drug abuse disorder within last two years or recent detox or chemical dependency treatment admission
- In a correctional facility within last two years

The following table provides estimates of these potential employment barriers for unemployed persons living in Minnesota's temporary housing programs and those on the street on October 26, 2003.

¹ Employment counselors in the Wilder Day Reporting Program and the Employment Plus program identified all of the items used in this analysis as potential barriers to employment.

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Potential barriers to employment (N=3,325 unemployed homeless adults)

Potential barrier	Statewide (N=3,325)	Geographic area		Program type				
		Twin Cities metro area (N=2,366)	Greater Minnesota (N=959)	Emergency shelter (N=1,128)	Battered women's shelter (N=218)	Transitional housing (N=1,501)	Unknown shelter/ street (N=478)	
Transportation problems								
Men	%	32.7%	34.2%	28.6%	35.4%	-	29.0%	32.4%
	N	(544)	(414)	(130)	(281)	-	(163)	(100)
Women	%	33.5%	33.3%	33.7%	33.3%	37.6%	33.2%	30.2%
	N	(555)	(385)	(170)	(110)	(82)	(312)	(51)
Inability to afford child care								
Men	%	1.5%	1.7%	0.9%	0.6%	-	3.2%	0.3%
	N	(25)	(21)	(4)	(5)	-	(18)	(1)
Women	%	19.7%	19.4%	20.4%	14.4%	23.9%	22.0%	11.8%
	N	(327)	(224)	(103)	(48)	(52)	(207)	(20)
No high school diploma or GED								
Men	%	25.6%	26.0%	24.4%	28.9%	-	19.2%	28.5%
	N	(426)	(315)	(111)	(230)	-	(108)	(88)
Women	%	28.1%	29.0%	25.9%	45.6%	31.7%	43.3%	60.5%
	N	(466)	(335)	(131)	(167)	(55)	(284)	(52)
No job for one year or more								
Men	%	53.4%	54.8%	49.7%	51.1%	-	56.4%	53.7%
	N	(889)	(664)	(225)	(406)	-	(317)	(166)
Women	%	49.6%	52.0%	44.0%	50.3%	46.1%	50.2%	49.1%
	N	(823)	(601)	(222)	(168)	(100)	(471)	(83)
Physical health problems that interfere with employment								
Men	%	30.3%	29.2%	33.1%	29.6%	-	34.3%	24.9%
	N	(504)	(354)	(150)	(235)	-	(193)	(77)
Women	%	23.9%	23.0%	25.9%	29.3%	18.8%	23.2%	23.1%
	N	(397)	(266)	(131)	(98)	(41)	(218)	(39)

Potential barriers to employment (N=3,325 unemployed homeless adults) (continued)

Potential barrier	Statewide (N=3,325)	Geographic area		Program type				
		Twin Cities metro area (N=2,366)	Greater Minnesota (N=959)	Emergency shelter (N=1,128)	Battered women's shelter (N=218)	Transitional housing (N=1,501)	Unknown shelter/ street (N=478)	
Diagnosed with serious or persistent mental illness within last two years								
Men	%	47.7%	44.3%	57.0%	39.7%	-	61.0%	44.3%
	N	(795)	(537)	(258)	(315)	-	(343)	(137)
Women	%	53.6%	53.3%	54.3%	45.5%	50.2%	57.8%	50.3%
	N	(889)	(615)	(274)	(152)	(109)	(543)	(85)
Alcohol or drug problems (reports being diagnosed with alcohol or drug abuse disorder within last two years or multiple detox admissions or chemical dependency treatment admission)								
Men	%	63.8%	60.9%	70.0%	35.3%	-	60.5%	50.8%
	N	(763)	(492)	(271)	(280)	-	(340)	(157)
Women	%	30.0%	30.1%	29.9%	25.1%	17.9%	33.8%	34.3%
	N	(498)	(347)	(151)	(84)	(39)	(317)	(58)
In a correctional facility within last two years								
Men	%	18.5%	15.7%	26.0%	15.2%	-	16.4%	30.4%
	N	(308)	(190)	(118)	(121)	-	(92)	(94)
Women	%	8.1%	7.3%	9.9%	8.7%	6.0%	7.0%	16.0%
	N	(134)	(84)	(50)	(29)	(13)	(66)	(27)

The most frequently reported potential barriers to employment are previous long term unemployment (52%), mental health problems (51%), chemical dependency problems (38%), and transportation problems (33%). The lack of a high school diploma (27%), physical health problems (27%), and recent incarceration (13%) are reported by at least one-third of unemployed homeless adults. Child care is a problem for one-fifth (20%) of the women.

A decreasing percentage of homeless adults report none of the potential barriers to employment that are listed above. As the following table shows, 6 percent of the men and women report none of these barriers in 2003. This has decreased steadily since 1994, when 23 percent of men and 22 percent of women reported none of these potential barriers to employment.

Number of potential barriers to employment

Potential barrier	Statewide (N=3,325)	Geographic area		Program type			
		Twin Cities metro area (N=2,366)	Greater Minnesota (N=959)	Emergency shelter (N=1,128)	Battered women's shelter (N=218)	Transitional housing (N=1,501)	Unknown street/ street (N=478)
None of the listed barriers							
Men %	6.2%	6.4%	5.9%	7.9%	-	4.8%	4.5%
N	(104)	(77)	(27)	(63)	-	(27)	(14)
Women %	5.9%	5.7%	6.2%	9.9%	4.1%	4.3%	8.9%
N	(97)	(66)	(31)	(33)	(9)	(40)	(15)
1 barrier							
Men %	15.8%	16.9%	12.8%	18.7%	-	12.3%	14.6%
N	(263)	(205)	(58)	(149)	-	(69)	(45)
Women %	18.0%	18.4%	17.3%	18.3%	24.7%	16.9%	14.8%
N	(299)	(212)	(87)	(61)	(54)	(159)	(25)
2 barriers							
Men %	28.0%	28.8%	25.8%	29.6%	-	27.8%	29.4%
N	(466)	(349)	(117)	(207)	-	(156)	(91)
Women %	27.5%	28.2%	25.8%	26.4%	28.3%	27.9%	26.6%
N	(456)	(326)	(130)	(88)	(62)	(262)	(45)
3 barriers							
Men %	26.3%	27.0%	24.4%	10.6%	-	19.4%	24.6%
N	(438)	(327)	(111)	(84)	-	(109)	(76)
Women %	27.8%	25.4%	33.3%	24.3%	24.7%	30.0%	26.6%
N	(461)	(293)	(168)	(81)	(54)	(282)	(45)
4 barriers							
Men %	15.1%	13.1%	20.3%	5.7%	-	8.2%	18.8%
N	(251)	(159)	(92)	(45)	-	(46)	(58)
Women %	15.1%	15.9%	13.3%	14.1%	14.2%	15.5%	16.0%
N	(2511)	(184)	(67)	(47)	(31)	(146)	(27)
5 barriers							
Men %	6.6%	5.5%	9.5%	6.9%	-	7.5%	5.8%
N	(110)	(67)	(43)	(40)	-	(29)	(18)
Women %	4.9%	5.5%	3.6%	6.0%	4.1%	4.8%	4.7%
N	(82)	(64)	(18)	(20)	(9)	(45)	(8)

Number of potential barriers to employment (continued)

Potential barrier	Statewide (N=3,325)	Geographic area		Program type			Unknown street/ street (N=478)
		Twin Cities metro area (N=2,366)	Greater Minnesota (N=959)	Emergency shelter (N=1,128)	Battered women's shelter (N=218)	Transitional housing (N=1,501)	
6 barriers							
Men %	1.8%	2.0%	1.3%	1.1%	-	1.0%	1.9%
N	(30)	(24)	(6)	(6)	-	(4)	(6)
Women %	.5%	0.6%	0.4%	.3%	-	0.4%	2.4%
N	(9)	(7)	(2)	(1)	-	(4)	(4)
7 barriers							
Men %	0.2%	0.3%	-	1.1%	-	1.0%	0.3%
N	(4)	(4)	-	(6)	-	(4)	(1)
Women %	0.2%	0.2%	0.2%	0.6%	-	0.1%	-
N	(3)	(2)	(1)	(2)	-	(1)	-

A similar analysis by Peter Rossi in his book, *Down and Out in America*, examined homeless individuals' problems related to unemployment, criminal records, mental illness, and poor health.² His study, conducted in 1987, found that fewer than 4 percent of Chicago's homeless population had no problems at all to report and more than half had multiple problems.

In the 2003 study, the top three most frequently mentioned barriers – unemployed for more than one year (52%), recent mental health problems (51%), and recent chemical dependency problems (38%) – indicate that many unemployed homeless adults have significant employment barriers to overcome. Although intervention efforts designed to help homeless people obtain jobs may work best when specifically targeted to help people who are the most amenable to change, there appears to be a growing need to address the issues of the “hardest to employ” homeless population. For example, the main employment barriers for some homeless adults are a lack of transportation (33%), lack of a high school education or GED (27%), recent incarceration (13%), or child care needs (11%). Programs designed to help move homeless adults with these employment barriers into the workforce would be easier to implement than programs designed to address the issues of long-term unemployment, recent chemical dependency, or recent mental health problems.

² Rossi, P. (1989). *Down and out in America: The origins of homelessness* (pp. 177-178). Chicago: University of Chicago Press.

Long-term homelessness

Both the federal government and the State of Minnesota have recently developed plans to address long-term homelessness. The State of Minnesota includes, in this category, all homeless people whose current experience of homelessness has lasted for a year or longer, or who have been homeless at least four times in the last three years. The federal plan uses a more restrictive definition. In addition to the same time factors (length and/or repetition), the federal definition also requires that long-term homeless individuals covered by their initiative are unaccompanied and have a disabling condition.

In order to better understand the characteristics of homeless adults whose needs are to be addressed under either the state or federal plans, Wilder Research Center conducted a comparative analysis using the following criteria:

Minnesota long-term: The individual's current episode of homelessness has lasted 12 months or more, or the individual has been homeless four or more times in the last three years.

Federal long-term (also termed "chronic" by the U.S. Department of Housing and Urban Development): The individual meets the definition for Minnesota long-term homelessness, and also is staying alone (not accompanied by a spouse, partner, or children) and has at least one serious, chronic disability.³

Short-term: Individuals who do not fit the Minnesota definition for long-term (their current episode has lasted less than one year and they have been homeless three or fewer times in the last three years).

This analysis includes all those adults covered by the statewide study, including those staying in outdoor locations, emergency shelters, battered women's shelters, and transitional programs.

Some of the differences between these three segments of the population are shown in the following three tables. The first table shows the differences between the Minnesota and federal long-term homeless groups and the short-term homeless. The second table shows how these patterns differ by gender and the third table shows how they differ by type of

³ "Individual" was classified as unaccompanied based on the respondent's report of who was with them on the previous night. As the tables show, a small number of people who were unaccompanied at that time, and otherwise fit the federal definition of long-term homeless, reported having children with them at the time of the interview.

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housing. “Crisis housing” here includes emergency shelter, battered women’s shelter, and unknown or no shelter.

Comparison of long-term and short-term homelessness

	Minnesota long-term (N=2,266)	Federal long-term* (N=1,432)	Short-term (N=2,508)
Slept outdoors on night of survey	9.1%	9.8%	3.8%
Reported that the last place they stayed was unsafe	5.5%	6.6%	4.8%
Persons of color	58.1%	56.9%	62.0%
Accompanied by one or more children	19.5%	0.9%	36.4%
Did not complete high school	25.5%	26.0%	23.1%
Lived in MN less than one year	9.8%	9.1%	26.6%
Ever lived in a foster home	23.5%	23.8%	16.3%
Ever lived in a drug or alcohol treatment facility	47.9%	57.7%	31.4%
Ever lived in a mental health treatment facility	26.5%	33.3%	14.9%
Lists one source of income as “asking for money on the street”	10.6%	13.3%	4.9%
Uses drop-in centers	35.3%	40.9%	24.9%
Had any kind of medical coverage in October	70.2%	72.0%	70.1%
Military veteran	15.7%	19.2%	13.8%
Is currently employed	29.0%	25.1%	31.2%
Reports a physical, mental, or other health condition that limits the kind or amount of work they can do	47.5%	60.5%	34.9%
Reports a physical, mental, or other health condition that limits basic self-care or daily activities	16.6%	19.7%	11.0%
Possible traumatic brain injury	30.7%	35.9%	27.2%
Reports having hepatitis	5.1%	7.1%	3.4%
Reports major mental illness	52.2%	63.3%	41.9%
Reports a diagnosed substance abuse disorder	33.1%	44.8%	17.1%
Ever admitted to detox	39.1%	48.9%	23.9%
Reports that he/she is not taking prescribed medication	17.4%	20.4%	18.6%
Received emergency room care in last six months	39.4%	43.8%	35.5%
Ever physically abused as child	41.8%	43.1%	34.0%
Ever neglected as a child	25.4%	26.6%	21.1%
Has sought health care in last year due to violent injury	12.5%	15.8%	12.0%
More than one year since contact with family	19.2%	22.8%	10.6%

**Note: Federal long-term is a subgroup of Minnesota long-term.*

Gender comparison of long-term and short-term homelessness

	Men			Women		
	Minnesota long-term (N=1,323)	Federal long-term* (N=1,004)	Short-term (N=1,174)	Minnesota long-term (N=942)	Federal long-term* (N=427)	Short-term (N=1,334)
Slept outdoors on night of survey	12.6%	11.9%	6.7%	4.2%	4.7%	1.3%
Reported the last place stayed was unsafe	7.1%	7.5%	6.9%	3.2%	4.4%	2.9%
Persons of color	58.9%	59.6%	62.5%	57.0%	50.6%	61.6%
Accompanied by one or more children	2.6%	0.2%	8.9%	56.8%	2.6%	39.5%
Did not complete high school	23.0%	24.2%	22.2%	29.1%	30.2%	23.9%
Lived in MN less than one year	10.2%	9.9%	27.0%	9.3%	7.5%	26.2%
Ever lived in a foster home	19.3%	20.0%	13.5%	29.4%	32.7%	18.9%
Ever lived in a drug or alcohol treatment facility	54.8%	62.0%	41.3%	38.1%	47.3%	22.8%
Ever lived in a mental health treatment facility	27.2%	31.5%	14.3%	25.5%	37.6%	15.5%
Lists one source of income as "asking for money on the street"	14.7%	15.3%	8.6%	5.0%	8.2%	1.7%
Uses drop-in centers	42.2%	42.6%	36.0%	25.7%	36.6%	14.9%
Had medical coverage in October	59.9%	66.0%	58.8%	84.7%	86.3%	80.1%
Military veteran	25.4%	26.3%	26.9%	2.1%	2.3%	2.2%
Is currently employed	30.2%	27.4%	36.6%	27.4%	19.6%	26.4%
Reports a physical, mental, or other health condition that limits the kind or amount of work they can do	48.5%	59.0%	33.8%	46.1%	64.0%	36.0%
Reports a physical, mental, or other health condition that limits basic self-care or daily activities	15.5%	18.5%	9.5%	18.2%	22.4%	12.3%
Possible traumatic brain injury	31.0%	34.7%	27.0%	30.2%	38.8%	27.3%
Reports having hepatitis	6.8%	8.5%	4.8%	2.7%	3.8%	2.1%
Reports major mental illness	47.7%	57.9%	37.7%	58.5%	76.2%	45.5%
Reports a diagnosed substance abuse disorder	37.5%	46.3%	21.3%	26.9%	41.4%	13.4%
Ever admitted to detox	48.9%	54.0%	33.6%	25.3%	36.6%	15.3%
Reports that he/she is not taking prescribed medication	17.1%	19.7%	18.1%	17.8%	22.3%	19.1%
Received emergency room care in last six months	34.0%	38.5%	30.4%	47.1%	56.1%	39.9%
Ever physically abused as child	36.5%	39.2%	25.2%	49.4%	52.4%	41.8%
Ever neglected as a child	20.8%	22.4%	16.6%	32.0%	36.6%	25.1%
Has sought health care in last year due to violent injury	10.4%	12.1%	7.3%	15.3%	24.6%	16.1%
More than one year since family contact	25.9%	25.6%	14.2%	9.7%	15.3%	7.2%

**Note: Federal long-term is a subgroup of Minnesota long-term.*

Comparison of long-term and short-term homelessness by shelter type

	Crisis housing **			Transitional housing		
	Minnesota long-term (N=1,105)	Federal long-term* (N=787)	Short-term (N=1,399)	Minnesota long-term (N=1,161)	Federal long-term* (N=645)	Short-term (N=1,107)
Slept outdoors on night of survey	18.7%	17.8%	6.9%	0.0%	0.0%	0.0%
Reported place they stayed last night was unsafe	9.5%	10.0%	7.0%	1.6%	2.4%	2.0%
Persons of color	61.9%	64.4%	66.1%	54.6%	47.9%	56.9%
Accompanied by one or more children	5.3%	0.5%	26.3%	33.0%	1.4%	49.2%
Did not complete high school	28.2%	27.3%	26.0%	22.9%	24.2%	19.3%
Lived in MN less than one year	13.4%	11.5%	29.9%	6.5%	6.2%	22.3%
Ever lived in a foster home	23.3%	25.1%	17.8%	23.7%	22.3%	14.5%
Lived in a drug or alcohol treatment facility	46.1%	53.5%	28.9%	49.6%	62.7%	34.7%
Lived in a mental health treatment facility	23.2%	28.4%	12.2%	29.6%	39.4%	18.4%
Lists one source of income as "asking for money on the street"	18.3%	20.5%	7.9%	3.4%	4.5%	1.2%
Uses drop-in centers	52.2%	53.8%	34.3%	19.2%	24.9%	12.9%
Had any kind of medical coverage, Oct.	54.5%	60.2%	59.9%	85.1%	86.4%	83.0%
Military veteran	16.4%	17.4%	13.9%	15.1%	21.3%	13.6%
Is currently employed	23.5%	21.9%	29.6%	34.2%	28.8%	33.2%
Reports a health condition that limits the kind or amount of work he/she can do	50.0%	63.2%	33.9%	45.2%	57.2%	36.3%
Reports a health condition that limits basic self-care or daily activities	15.6%	19.3%	8.8%	17.7%	20.2%	13.8%
Possible traumatic brain injury	32.8%	37.2%	28.7%	28.7%	34.2%	25.3%
Reports having hepatitis	4.4%	5.8%	3.7%	5.7%	8.8%	2.9%
Reports major mental illness	44.1%	54.5%	36.6%	59.8%	74.1%	48.6%
Reports a substance abuse disorder	30.7%	39.8%	12.6%	35.3%	50.9%	22.8%
Ever admitted to detox	45.8%	52.8%	23.9%	31.7%	44.1%	23.8%
Reports that he/she should be taking medications but is not	19.4%	22.9%	21.3%	15.5%	17.4%	15.2%
Received emergency room care in past 6 months	37.8%	43.9%	37.5%	41.0%	43.5%	32.9%
Ever physically abused as child	39.1%	42.5%	33.1%	44.4%	43.9%	35.2%
Ever neglected as a child	23.4%	26.5%	21.3%	27.3%	26.7%	20.9%
Has sought health care in past year due to violent injury	14.1%	16.5%	14.3%	10.9%	14.9%	9.0%
More than 1 year since contact with family	28.1%	29.3%	13.4%	10.9%	15.0%	6.8%

Notes:

* Federal long-term is a subgroup of Minnesota long-term.

** Crisis housing includes emergency shelters, battered women's shelters, and non-sheltered/unknown shelter locations.

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In general, persons of color make up about three-fifths of the homeless adult population in this special analysis. Persons of color made up 62 percent of the short-term homeless group and 57 percent of the Minnesota and the federal long-term homeless groups. Overall, persons in all three groups were similar in reporting the place they stayed last night was unsafe; not completing high school; having medical coverage in the month of October; not taking prescribed medications; seeking health care in the past year due to violent injury; and having hepatitis. However, there were several clear differences between the three groups as well.

Homeless adults fitting the federal long-term homeless criteria were *more* likely to:

- Have slept outdoors on the night of the survey (10% vs. 9% for the Minnesota long-term homeless group and 4% for the short-term homeless group).
- Ask for money on the streets (13% vs. 11% for the Minnesota long-term homeless group and 5% for the short-term homeless group).
- Have lived in a foster home (24% for both the federal and Minnesota long-term homeless groups vs. 16% for the short-term homeless group).
- Have lived in a drug or alcohol treatment center (58% vs. 48% for the Minnesota long-term homeless group and 31% for the short-term homeless group).
- Ever have been admitted to detox (49% vs. 39% for the Minnesota long-term homeless group and 24% for the short-term homeless group).
- Report recent diagnosis of substance abuse disorder (45% vs. 33% for the Minnesota long-term homeless group and 17% for the short-term homeless group).
- Have lived in a mental health treatment facility (33% vs. 27% for the Minnesota long-term homeless group and 15% for the short-term homeless group).
- Report recent diagnosis of major mental illness (63% vs. 52% for the Minnesota long-term homeless group and 42% for the short-term homeless group).
- Have received care in an emergency room in the last six months (44% vs. 39% for the Minnesota long-term homeless group and 36% for the short-term homeless group).
- Have a possible traumatic brain injury (36% vs. 31% for the Minnesota long-term homeless group and 27% for the short-term homeless group).
- Report a physical, mental, or other health condition that limits the kind or amount of work they can do (61% vs. 48% for the Minnesota long-term homeless group and 35% for the short-term homeless group).

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- Report a physical, mental, or other health condition that limits basic self-care or daily activities (20% vs. 17% for the Minnesota long-term homeless group and 11% for the short-term homeless group).
- Use drop-in centers (41% vs. 35% for the Minnesota long-term homeless group and 25% for the homeless short-term group).
- Have been physically mistreated as a youth (43% vs. 42% for the Minnesota long-term homeless group and 34% for the short-term homeless group).
- Have been neglected as a child (27% vs. 25% for the Minnesota long-term homeless group and 21% for the short-term homeless group).
- Have had no contact with their family for over one year (23% vs. 19% for the Minnesota long-term homeless group and 11% for the short-term homeless group).

Homeless adults fitting the **short-term homeless** criteria were *more* likely to:

- Have lived in Minnesota for less than one year (27% vs. 10% for the Minnesota long-term homeless group and 9% for the federal long-term homeless group).
- Be accompanied by one or more children (36% vs. 20% for the Minnesota long-term homeless group).
- Be currently employed (31% vs. 29% for the Minnesota long-term homeless group and 25% for the federal long-term homeless group).

Homeless persons fitting the Minnesota or federal definition of long-term homeless will require more intensive interventions and services than the short-term homeless population. Service providers seeking to help the long-term homeless population obtain and maintain housing face many challenges. Some of the challenges include recent substance abuse problems (federal definition 45% and Minnesota definition 33%), major mental health problems (federal definition 63% and Minnesota definition 52%), and possible traumatic brain injury (federal definition 36% and Minnesota definition 31%). Furthermore, many of the long-term homeless report a physical, mental, or other health condition that interferes with daily activities (federal definition 20% and Minnesota definition 17%) and limits the kind or amount of work they can do (federal definition 61% and Minnesota definition 48%). At both the state and federal level, current efforts are underway to find ways to stabilize housing and provide on-going services for those fitting the definition of long-term homeless.

Comparison of key findings about homeless adults, by extent and stability of shelter use

In 2003, efforts were made to select diverse street locations and to have formerly homeless persons or outreach workers do most of the street interviewing in order to increase the number of homeless persons who would be willing to answer the survey. Nevertheless, we do not know how representative our sample is of all non-sheltered homeless adults in Minnesota. More non-sheltered persons were interviewed in the 2003 sample (624), than in 2000 (381), than in 1997 (263), than in 1994 (236) or in 1991 (116). *This may in part be due to increasing efforts and experience in identifying non-sheltered homeless adults.* However, it may also reflect an overall increase in the population of homeless persons.

The sheltered homeless population in Minnesota has increased from 1991 to 2003. The number of non-sheltered homeless adults may have increased as well. Regardless of whether the non-sheltered homeless population has increased, the total number of such persons is unknown, but is undoubtedly much larger than this sample. Even in a week-long survey of homeless people nationwide in 1997, the Urban Institute found that 27 percent of the homeless people they identified had not used shelter services at all during the week.⁴ A single-day survey is bound to find an even smaller proportion.

One segment of the non-sheltered homeless population, the street homeless, tend to frequently seek shelter in outdoor locations, abandoned buildings, or other places not meant for habitation. People interviewed in such locations are represented in all of the tables in the data tables section of the report under the heading “unknown shelter/street.” The following descriptive and comparative information is based on a narrower subset of homeless adults: those who indicated they had slept outdoors for at least five nights in October 2003. Of the homeless adults interviewed, 733 fit the criterion, 532 in the Twin Cities metro area and 201 in various locations in greater Minnesota. The following information about this group gives a brief descriptive profile, while the table that follows shows comparisons with homeless persons who slept outdoors occasionally but less often, with homeless people who were sheltered all month in emergency shelters or temporary settings, and with those sheltered all month in more stable transitional housing programs.

In general, persons of color make up over half of the homeless adult population in this special analysis. Persons of color made up 64 percent of the homeless group using temporary or crisis shelter, 59 percent of those who frequently sleep outdoors, 55 percent

⁴ Burt, M., Aron, L.Y., Lee, E., and Valente, J. (2001). *Helping America's Homeless*. Washington D.C.: The Urban Institute Press.

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of those who occasionally sleep outdoors, and 54 percent of those in transitional housing. Overall, persons in all four groups were similar in the proportion reporting they have never married, being homeless as a child, being evicted from their last housing, having lost last housing because they couldn't afford the rent, unable to find affordable housing, being able to pay less than \$200 a month for rent, having an eviction or bad rental history that is keeping them from finding housing, reporting credit problems as a housing barrier, reporting a chronic health problem, being concerned about who will care for them if they were seriously ill or dying, and receiving care in the emergency room in the last six months. However, there were several clear differences between the four groups as well.

Homeless adults who slept outdoors five or more nights in October were more likely to be male, long-term Minnesota residents, and have no children. Among the small number who had children with them, their children were more likely to have various problems. Those who slept outdoors five or more nights were more likely to:

- Have been unable to get needed physical health, mental health, or dental care for their children
- Have been unable to get needed child care for their children
- Report their school-age children have learning or school problems, have repeated a grade, or did not attend school on the day of the survey

This group using shelters least had a history of longer or more repeated homelessness and exposure to violence. They were more likely to:

- Have been homeless for one year or more or four or more times in the last three years
- Meet the federal definition of “chronic homeless,” which includes chronic disability as well as length and frequency of homelessness
- Have been unable to obtain shelter in last three months due to lack of bed space
- Have slept outdoors on the night of the survey
- Report the place they stayed last night was unsafe, and have sought health care as a result of injury or illness resulting from violence while homeless
- Report not being able to follow instructions given during an emergency room visit because of their housing situation

This group had more traumatic childhoods, including or followed by more residence in institutions. They have less contact with their families. They were more likely to:

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- Report childhood abuse, pregnancy before age 18, and/or out-of-home placement
- Ever have lived in a foster home, chemical dependency treatment facility, correctional facility, or in any kind of institution in general
- Report no contact with family for one year or more

Those who used shelter least had lower employment rates and wages, and different employment barriers. Compared to other homeless adults they were more likely to:

- Be unemployed (along with others who slept outdoors in October)
- Have alcohol or drug abuse or long-term unemployment as employment barriers
- Earn less than \$10 per hour on their job, if employed
- Be unable to pay anything for rent (along with others who slept outdoors in October)

People who slept outdoors five or more times in October were less likely to receive income from steady employment or publicly-funded programs (MFIP, General Assistance, or Food Stamps) and more likely to receive income from friends and relatives or asking for money on the street.

This most unsheltered group had higher rates of some medical conditions and many chronic disabilities. They were more likely to:

- Have hepatitis
- Have indications of possible brain injury and/or cognitive disabilities
- Report having physical, mental, or other health conditions that limit daily activities or the kind or amount of work they can do

Those who slept five or more nights outdoors in October were more likely to report using tobacco, alcohol, marijuana, and/or cocaine in the last week, and more likely to have been in detoxification centers. However, they were less likely to report they now need to see a professional about an alcohol or drug problem.

People who slept outdoors five or more nights in October were more likely to report using basic safety net programs for meeting survival needs (hot meal programs, drop-in centers, and clothing shelves), and less likely to have medical coverage, receive transportation assistance, or be taking all their prescribed medications.

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Their housing barriers are more likely to include physical disabilities, bad rental history, or problems with a criminal record.

They are more likely to be military veterans, more likely to have served in Viet Nam, and less likely to have had recent contact with a County Veterans Officer.

The following table presents a comparison of key findings of homeless adults based on the extent and stability of shelter use.

Comparisons based on extent and stability of shelter use

	Transitional housing – no nights sleeping outdoors (N=2,269)	Emergency shelter – no nights sleeping outdoors (N=1,085)	Those who report sleeping outdoors 1 to 4 nights (N=596)	Those who report sleeping outdoors 5 or more nights (N=734)
Regional breakdown				
Percent of Twin Cities homeless in each group	48.5%	24.9%	10.9%	15.6%
Percent of Greater Minnesota homeless in each group	48.2%	18.6%	17.5%	15.7%
Demographics				
Average age	36.3 years	38.9 years	40.0 years	40.4 years
Male	39.4%	54.4%	66.6%	76.7%
Female	60.6%	45.5%	33.4%	23.3%
Persons of color	53.9%	63.3%	55.2%	58.6%
Never married	54.2%	55.0%	57.0%	55.7%
Did not complete high school	21.2%	23.1%	34.2%	26.5%
Received Special Education services in school	23.7%	21.8%	29.2%	30.7%
Currently enrolled in school or training	18.9%	8.9%	9.1%	4.0%
Lived in Minnesota less than one year	14.2%	30.2%	19.8%	15.0%
Lived in Minnesota for more than three years	76.2%	61.3%	74.8%	77.9%
Grew up in Minnesota	48.6%	36.5%	41.1%	44.6%
Children				
Have children with them	40.9%	26.7%	12.4%	5.9%
Parent reports child has physical health problems that interfere with daily activities	14.2%	20.2%	19.7%	12.9%
Parent reports child has emotional or behavioral problems that interfere with daily activities	22.0%	23.0%	31.7%	15.6%
Parent reports unable to get needed physical medical care for child(ren)	4.3%	7.6%	10.2%	15.6%
Parent reports unable to get needed mental health care for child(ren)	2.7%	3.1%	8.5%	19.4%

Comparisons based on extent and stability of shelter use (continued)

	Transitional housing – no nights sleeping outdoors (N=2,269)	Emergency shelter – no nights sleeping outdoors (N=1,085)	Those who report sleeping outdoors 1 to 4 nights (N=596)	Those who report sleeping outdoors 5 or more nights (N=734)
Children (continued)				
Parent reports unable to get needed dental health care for child(ren)	17.0%	13.3%	14.0%	29.0%
Parent reports child(ren) skipped meals in the last month because there wasn't enough money	5.8%	6.1%	21.7%	12.5%
Parent reports school age child has learning or school problems	40.7%	31.9%	35.3%	44.4%
Parent reports school age child repeated a grade in school	26.1%	25.0%	13.9%	38.9%
Parent reports child did not attend school the day of the survey	9.2%	17.7%	27.3%	31.6%
Parent reports child(ren) have problems attending school because of housing situation	3.5%	12.8%	30.3%	22.2%
History of homelessness				
Slept outdoors on night of survey	0.0%	0.0%	3.9%	37.2%
Reports place stayed last night was unsafe	1.8%	2.4%	8.4%	16.6%
Median number of nights slept outdoors in October	0 nights	0 nights	2 nights	14 nights
Homeless less than one month	7.3%	19.3%	12.9%	10.2%
Homeless for one year or more	49.4%	27.5%	40.1%	54.0%
Homeless four or more times in last three yea	24.4%	29.2%	35.0%	38.8%
Previously homeless	40.2%	39.0%	46.0%	45.4%
Homeless as a child	7.4%	5.6%	5.5%	6.7%
Meets federal definition of "chronic homeless"	28.5%	22.2%	34.1%	43.1%
Meets Minnesota definition of "long-term homeless"	51.2%	32.9%	47.1%	58.7%
Unable to obtain shelter due to lack of bed space in the last three months	9.9%	19.2%	33.7%	47.0%
More than one year since contact with family	8.9%	14.8%	20.2%	26.3%
Housing history				
Last regular or permanent housing in Minnesota	75.2%	63.1%	67.7%	73.2%
Evicted from last housing	28.7%	26.5%	29.7%	28.4%
Lost last housing because couldn't afford rent	32.6%	31.6%	31.8%	34.7%
Lost last housing due to loss of job or hours cut	26.9%	32.4%	37.7%	36.8%

Comparisons based on extent and stability of shelter use (continued)

	Transitional housing – no nights sleeping outdoors (N=2,269)	Emergency shelter – no nights sleeping outdoors (N=1,085)	Those who report sleeping outdoors 1 to 4 nights (N=596)	Those who report sleeping outdoors 5 or more nights (N=734)
Housing history (continued)				
Left housing because of domestic abuse (women only)	23.6%	50.0%	29.3%	38.6%
Unable to find housing they can afford	54.1%	48.0%	51.1%	54.0%
Needs more than two bedrooms	22.4%	11.9%	7.9%	2.9%
Average amount could pay for rent (median)	\$300	\$300	\$300	\$250
Could not pay anything for rent	17.1%	20.3%	27.3%	28.1%
Could pay some, but less than \$200 for rent	29.8%	27.8%	31.2%	33.8%
Could pay more than \$400 for rent	37.0%	37.5%	34.3%	27.0%
Chemical abuse as housing barrier	29.2%	13.6%	24.2%	28.6%
Credit problems as housing barrier	23.0%	17.6%	23.5%	22.1%
Criminal history as housing barrier	18.6%	16.2%	29.1%	33.6%
Physical disability as housing barrier	9.3%	6.4%	8.2%	10.2%
Mental health as housing barrier	54.3%	37.3%	41.2%	43.7%
Previously homeless as housing barrier	40.1%	38.9%	45.5%	44.8%
Eviction or bad rental history as housing barrier	10.9%	10.9%	8.2%	12.8%
Currently unemployed as housing barrier	66.2%	69.7%	75.0%	74.7%
Average number of housing barriers	3.6 barriers	2.9 barriers	3.5 barriers	3.7 barriers
Estimated percent who only need housing – no additional services	12.8%	16.0%	16.1%	10.9%
Institutional placement				
Lived in a foster home	19.2%	16.1%	20.4%	25.8%
Lived in a chemical dependency facility	42.4%	29.0%	37.5%	47.5%
Lived in a mental health facility	24.1%	13.7%	19.5%	19.7%
Lived in an orphanage	2.1%	2.1%	3.7%	3.3%
Ever institutionalized	68.0%	62.3%	72.7%	78.0%
Held one week or more in a juvenile detention facility	15.8%	15.1%	21.0%	25.3%
Served one month or more in a county jail	27.3%	31.7%	42.7%	50.8%
Served time in a state or federal prison	10.8%	16.5%	17.6%	25.8%
Ever in any correctional facility	36.0%	39.5%	51.7%	58.3%

Comparisons based on extent and stability of shelter use (continued)

	Transitional housing – no nights sleeping outdoors (N=2,269)	Emergency shelter – no nights sleeping outdoors (N=1,085)	Those who report sleeping outdoors 1 to 4 nights (N=596)	Those who report sleeping outdoors 5 or more nights (N=734)
Employment				
Completed training for a particular job	40.8%	41.3%	36.5%	31.2%
Currently employed	33.7%	30.2%	25.0%	24.7%
Currently employed full-time	14.0%	13.7%	9.6%	10.0%
Currently earning below \$10.00 an hour	67.6%	74.3%	76.5%	79.3%
Child care is employment barrier	9.9%	7.3%	4.5%	1.9%
Alcohol or drug use is employment barrier	29.0%	14.8%	30.8%	33.8%
Recent incarceration is employment barrier	7.0%	5.3%	17.3%	15.1%
Education is employment barrier	15.1%	17.9%	29.7%	21.1%
Transportation is employment barrier	20.9%	25.2%	27.7%	19.9%
Unemployed for more than one year	34.7%	35.1%	33.9%	41.2%
Average number of barriers to employment	2.6 barriers	2.2 barriers	2.6 barriers	2.6 barriers
Income and services				
Median income for October	\$525	\$384	\$256	\$250
Asks for money on the street	2.3%	3.9%	10.9%	26.0%
Receives income from steady employment	30.5%	21.1%	17.1%	10.9%
Receives income from MFIP	29.8%	19.0%	9.5%	3.6%
Receives income from General Assistance	20.4%	18.8%	17.9%	14.2%
Receives money from friends and/or relatives	10.2%	10.1%	10.6%	14.2%
Receives Supplemental Security Income (SSI)	10.0%	9.2%	14.8%	12.1%
Receives Food Stamps	51.6%	49.4%	36.1%	32.8%
Reports medical coverage in October	84.1%	63.5%	56.7%	50.1%
Uses hot meal programs	15.8%	40.5%	57.8%	65.1%
Uses drop-in centers	16.2%	29.6%	50.4%	56.4%
Uses free or almost-free clothing shelves	30.3%	49.4%	44.3%	56.4%
Has at least one case manager	78.9%	49.5%	44.3%	35.1%
Military veterans				
Military veteran (all adults)	14.4%	15.1%	13.9%	17.0%
Military veteran (men only)	32.6%	26.7%	19.9%	21.7%
Served more than two years in military	57.8%	62.2%	64.3%	59.2%
Veterans who served in a combat zone	69.0%	67.1%	65.5%	41.9%
Veterans who served in Vietnam	19.6%	20.7%	28.9%	35.2%
Veterans who received an honorable, general, or medical discharge	94.6%	92.0%	89.2%	83.9%
Veterans who had contact with a County Veterans Officer in last year	50.6%	44.7%	41.9%	37.9%

Comparisons based on extent and stability of shelter use (continued)

	Transitional housing – no nights sleeping outdoors (N=2,269)	Emergency shelter – no nights sleeping outdoors (N=1,085)	Those who report sleeping outdoors 1 to 4 nights (N=596)	Those who report sleeping outdoors 5 or more nights (N=734)
Physical and mental health				
Reports need to see a professional about a physical health problem	44.0%	39.9%	40.6%	36.1%
Reports need to see a professional about a mental health problem	44.9%	33.6%	36.1%	32.5%
Reports need to see a professional about an alcohol or drug problem	16.0%	6.9%	12.3%	4.4%
Reports need to see a dentist about a tooth or gum problem	60.7%	56.4%	58.9%	40.5%
Reports chronic health problems in last year	55.9%	58.2%	54.0%	53.8%
Reports having hepatitis	4.3%	2.4%	4.9%	6.2%
Reports recent diagnosis of tuberculosis	.6%	1.2%	1.5%	1.5%
Reports not taking prescribed medications	15.3%	17.1%	21.7%	24.3%
Reports testing positive for HIV or AIDS	3.2%	1.3%	.3%	1.4%
Reports concern about how they would be cared for if seriously ill or dying	48.8%	47.3%	45.3%	49.5%
Received care in an emergency room in last six months	37.0%	39.9%	36.7%	37.3%
Reports they were unable to follow emergency room instructions because of housing situation	15.3%	20.0%	34.0%	53.5%
Reports onset of problems following a head injury	27.1%	26.4%	28.9%	39.4%
Reports mental illness diagnosis in last two years	54.3%	37.3%	41.2%	43.7%
Reports receiving treatment for diagnosed mental health problem in last two years	77.8%	66.9%	64.2%	59.4%
Reports chemical dependency and mental health (dual diagnosis) within last two years	20.7%	7.6%	16.3%	18.1%
Reports a physical, mental, or other health condition limits the kind or amount of work they can do	40.9%	39.7%	39.2%	44.6%
Reports a physical, mental, or other health condition makes it hard to perform daily activities	15.8%	11.9%	9.9%	12.7%
Reports feeling confused, having problems making decisions or remembering things to the point that it interferes with daily activities	31.4%	25.8%	27.4%	33.6%
Any of above 3 (work or daily activity limitations or cognitive disability)	51.4%	48.6%	49.7%	54.2%
Reports a major mental illness, chemical dependency, and/or chronic health condition	74.2%	62.4%	64.2%	66.7%

Comparisons based on extent and stability of shelter use (continued)

	Transitional housing – no nights sleeping outdoors (N=2,269)	Emergency shelter – no nights sleeping outdoors (N=1,085)	Those who report sleeping outdoors 1 to 4 nights (N=596)	Those who report sleeping outdoors 5 or more nights (N=734)
Alcohol and chemical dependency				
Reports use of cigarettes in last week	70.0%	70.3%	77.4%	82.5%
Reports alcohol use in last week	13.3%	16.4%	33.9%	52.1%
Reports marijuana use in last week	3.3%	7.5%	14.5%	21.0%
Reports crack cocaine use in last week	1.0%	1.5%	4.6%	7.9%
Reports other cocaine use in last week	0.3%	0.7%	1.9%	2.5%
Considers self chemically dependent	37.9%	21.4%	36.1%	39.2%
Reports alcohol or drug abuse diagnosis	29.2%	13.6%	24.2%	28.6%
Reports ever admitted to detox	28.4%	23.4%	38.1%	45.9%
Physical and sexual abuse				
Reports physical abuse as child	39.9%	32.5%	34.5%	42.0%
Reports sexual abuse as a child	33.5%	23.0%	20.7%	22.0%
Reports being physically and/or sexually mistreated as a child	46.1%	38.0%	37.6%	55.1%
Reports childhood abuse, pregnancy before age 18, and/or out-of-home placement	60.6%	52.7%	54.7%	63.3%
Reports parents neglected to provide food, shelter, medical care, or ignored physical or emotional needs in significant ways	24.2%	20.5%	19.3%	27.9%
Reports being in a relationship with someone who hit, slapped, pushed, or threatened them in the last year	21.9%	28.8%	26.0%	23.6%
Reports being sexual with someone for the purpose of getting shelter, clothing, or food	17.5%	9.8%	12.2%	13.2%
Sought health care as a result of an injury or illness resulting from violence	10.0%	13.3%	14.1%	16.8%
Reports being physically or sexually attacked or beaten since becoming homeless	15.1%	9.8%	16.5%	16.8%