

Older Adults Experiencing Homelessness in Minnesota

Key Characteristics of Adults Age 55 and Older from the 2018 Minnesota Homeless Study

About the study

Every three years, Wilder Research conducts a statewide study to better understand the prevalence, causes, circumstances, and effects of homelessness. The study includes face-to-face interviews with people throughout the state who meet the federal definition of homelessness, as well as a count of people who were homeless on a single night in late October. The most recent study was conducted on October 25, 2018. Counts show that 10,233 people in Minnesota were experiencing homelessness on that night (excluding those on American Indian reservations). Of those, 1,054 were age 55 or older.

This summary highlights findings from interviews with 740 people who were age 55 and older and experiencing homelessness in Minnesota. Unlike the overall Minnesota Homeless Study data, these responses have not been "weighted" to represent everyone who we counted on the night of the study. Interviews were conducted in emergency shelters, domestic violence shelters, transitional housing, and non-shelter locations such as encampments, hot meal programs, and other drop-in service sites.

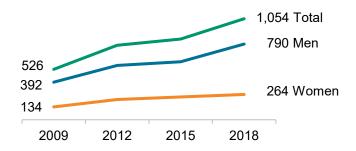
Additional fact sheets and reports about Minnesotans experiencing homelessness, including data tables about the older adult population and other groups experiencing homelessness, can be found at www.mnhomeless.org.

Key findings

Older adult homelessness is on the rise and increased 25% since the last study

The 1,054 homeless adults age 55 and older who were counted in the 2018 study is the largest number of older adults identified since the study began asking shelters for specific counts of this age group in 2009 (Figure 1). The number of homeless adults age 55 and older increased 25% from 2015, which is substantially greater than the increase in this age group in the overall Minnesota population (8%; U.S. Census Bureau, 2015 and 2018 Population Estimates). While their increased numbers are cause for concern, older adults are still the age group least likely to experience homelessness. Adults age 55 and older make up 10% of the total 2018 homeless population, which is significantly smaller than their representation in the overall population of Minnesota (29%; U.S. Census Bureau, 2018 Population Estimates).

1. One-night study counts of the Minnesota older adult (55 and older) homeless population



The number of older adults experiencing homelessness who were not in a formal shelter increased considerably; nearly half of homeless older adults in greater Minnesota were not in a formal shelter

In the 2018 study, 27% of older adults experiencing homelessness were not in a formal shelter (i.e., outside or temporarily doubled up). The percentage of older adults not in a formal shelter was higher in greater Minnesota (46%) compared to the Twin Cities metro area (21%), although the actual number not in a formal shelter was higher in the Twin Cities metro area (168) compared to greater Minnesota (119). The number of older adults not in a formal shelter increased 58% between 2015 and 2018 (Figure 2).

2. Counts of Minnesota older adults not in a formal shelter (outside or doubled up)



Based on our research, as well as anecdotal evidence from stakeholders, we know that people experiencing homelessness are often forced to find different living arrangements from night to night. 2018 interview data show that 32% of older adults experiencing homelessness spent more than a week out of the past month staying outside. In addition, 13% spent more than a week staying with others, temporarily doubled up.

A one-night snapshot makes it impossible to identify all people experiencing homelessness in our state. The large growth in the population of homeless older adults not in formal shelter may have been due to a combination of factors, including: growth and increased visibility of encampments, limited availability of shelter space, increased use of trains and buses as a place to sleep, and year-to-year variations in the ability to locate and interview people. Thirty percent of older adults said they had been turned away from shelter in the last three months due to a lack of space. Study results show that capacity, in both shelter and subsidized housing availability, does not meet the need.

The increasing number of homeless older adults with complex health conditions is cause for concern.

Seventy-five percent of homeless older adults have a chronic physical health condition, 54% have a serious mental illness, and 21% have a substance abuse disorder (Figure 3). Almost all homeless older adults (90%) reported that a disability limits their ability to work or complete activities of daily living (such as eating, bathing, and dressing); 38% said a cognitive issue affects activities of daily living. Just 15% said they are employed, and poor physical health was cited most frequently as a barrier to obtaining employment. These findings are consistent with other recent studies that have found that homeless older adults have health care needs similar to housed older adults 10 to 20 years older (Brown, Hemati, Riley, Lee, Ponath, Tieu, Guzman & Kushel, 2017).

3. Chronic health conditions for adults age 55 and older experiencing homelessness, 2009-2018

	2009	2012	2015	2018
Older adults with a chronic physical health condition	66%	69%	71%	75%
Older adults with serious mental illness ^a	37%	41%	49%	54%
Older adults with a substance abuse disorder	23%	24%	24%	21%
Older adults with a serious or chronic disability ^b	87%	88%	89%	90%
Older adults with a cognitive impairment	28%	35%	35%	38%

^a The diagnosis of "anxiety or panic disorder" was added in 2015.

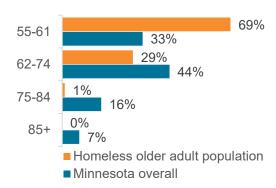
^b Serious or chronic disability includes mental illness, substance abuse disorder, or other conditions that limit work or activities of daily living.

Nearly half of homeless older adults did not become homeless until they were age 50 or older; most are under age 75

Forty-eight percent of homeless older adults first became homeless at age 50 or older. In 2018, 3 in 10 homeless older adults were experiencing homelessness for the first time.

Over two-thirds (69%) of homeless older adults are age 55-61, compared to 33% of the Minnesota older adult population (Figure 4). Difficult circumstances and conditions associated with being homeless often result in a lower average life expectancy for older adults without permanent housing and inform the selection of age 55+ as the lower boundary for older adults in this study population (National Coalition for the Homeless, 2009).

4. Age distribution of older adults experiencing homelessness compared to overall Minnesota older adults, age 55 and over, 2018



Source: Minnesota older adult percentages are from U.S. Census 2018 population estimates.

Most older adults experiencing homelessness rely on public benefits; however, it is not enough to cover housing costs

Seventy percent listed General Assistance, Social Security, Social Security Disability Insurance, or Supplemental Security Income as their main source of income in the month of the survey. Homeless older adults had a higher median monthly income compared to homeless adults age 25-54 (\$750 vs. \$436), but relied more on General Assistance and Social Security for their income than homeless adults under age 55.

Other public benefits that a majority of homeless older adults reported using in the past 12 months included medical coverage (76%) and food stamps (SNAP) (61%). However, considering the chronic health conditions and low incomes reported by older adults experiencing homelessness, the data indicate that some who may be eligible for these benefits may not be getting them.

Older adults often turn to family for assistance in applying for government assistance and other benefits. However, 46% said it had been more than a month since they had contact with their families.

Of a list of reasons for losing their last permanent housing, the most common were eviction or a lease that was not renewed (42%), not being able to afford the rent (39%), or having their job or hours cut (29%). Over half (53%) said they were on a waiting list for subsidized housing, and an additional 19% reported that they could not get on a waiting list because the list was closed at the time they applied.

Many older adults experiencing homelessness face barriers related to their past criminal background or chemical dependency that make it more difficult to obtain stable housing; this is particularly true for homeless older men

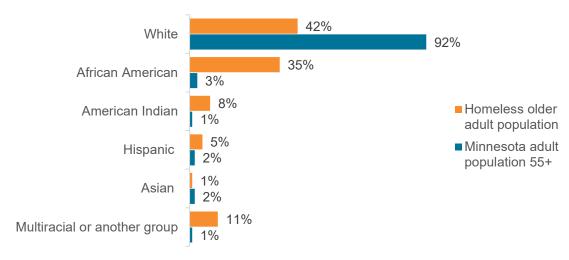
People who have a history of incarceration have a more difficult time accessing housing, due to rental eligibility and screening criteria. Fifty-three percent of homeless older adults reported that they had been incarcerated at some time in their lives, including 61% of men and 29% of women. Twenty-six percent said that a criminal background had made it difficult for them to get or keep housing, including 29% of men and 16% of women.

Mental health and substance abuse issues are often made worse by homelessness and need to be addressed in order to restore stable housing. Forty-nine percent of older adults experiencing homelessness had lived in an alcohol or drug treatment facility, including 54% of men and 36% of women.

People of color make up half of homeless older adults; they are overrepresented in Minnesota's homeless population

Generational impacts of discriminatory housing policies and other systemic inequities have contributed to the overrepresentation of people of color in the homeless population. Older adults experiencing homelessness in 2018 were most likely to identify as white (42%) or African American (35%). However, relative to proportions statewide, people identifying as African American or American Indian are notably overrepresented in the homeless population. This disproportionality extends to homeless older adults (age 55+), where 35% of those interviewed identified as African American (compared to 3% of the Minnesota older adult population) and 8% identified as American Indian (compared to 1% of the Minnesota older adult population) (Figure 5).

5. Race of homeless older adults compared to all older adults in Minnesota, 2018



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

Numbers do not include results from interviews conducted in partnership with six of Minnesota's Native American tribes. For full results see http://mnhomeless.org/minnesota-homeless-study/American-Indian-reservations-2.php

A look at characteristics: Homeless older adults interviewed on the night of the study

The following is a snapshot of key characteristics of the 740 homeless adults age 55 and older who were interviewed on October 25, 2018. Some characteristics are analyzed by age group (55-61 vs. 62 and older) because there are differences in medical and financial benefits that can be accessed by those 62 and older. Other comparisons outlined here reflect differences by gender and geography.

Demographics

- 75% of homeless older adults were male, compared to 53% in the overall Minnesota homeless adult population
- 58% were people of color
- 41% had never married, 38% were divorced, 9% were separated, 8% were widowed, and 4% were currently married
- 74% were living in the Twin Cities metro area, and 26% were living in greater Minnesota
- 94% lived in Minnesota most of the time between birth and age 16, and 63% had lived in Minnesota for 20 or more years

Subsidized housing

Over half (53%) of older adults experiencing homelessness said they were on a waiting list for subsidized housing, and an additional 19% reported that they could not get on a waiting list because the list was closed at the time they applied. Those under 62 had been on a waiting list for an average of 14 months, while those 62 and older had been on a waiting list for an average of 9 months. This is consistent with information shared by service advocates who report that it is easier to address housing needs for older adults experiencing homelessness once they become eligible for Social Security at age 62.

History of homelessness

- 61% had been homeless for at least a year
- 50% met the federal definition of chronic homelessness, including 54% of men and 40% of older women

- 31% were experiencing homelessness for the first time, including 29% of older adults age 55-61 and 38% of those age 62 and older
- 45% of homeless older men and 56% of homeless older women experienced homelessness for the first time at age 50 or older; the average age that older adults were first homeless was 43 years
- 79% had their last regular housing in Minnesota, including 43% who had their last housing in Minneapolis or Saint Paul

Sheltered and unsheltered homelessness

- Three-quarters (75%) spent more than a week in shelter in the past 30 days; 55% had spent all of the last 30 days in shelter (48% of older adults in greater Minnesota and 58% of older adults in the Twin Cities metro)
- 13% spent more than a week doubled up with others, and 3% spent more than a week in regular housing
- 44% reported that in the last 30 days they had spent at least one night outside, in a vehicle or vacant building, or in some other place not intended for habitation (51% of older adults in greater MN and 42% of older adults in the Twin Cities metro)
- 29% had spent half or more of the last 30 days outside or in another place not intended for habitation; 14% said they had spent all of the last 30 days outside
- 30% were unable to obtain shelter because of a lack of available bed spaces at some point in the last three months

Education and employment

- 83% had completed high school or received a GED
- 41% had attended some college or completed a degree
- 15% were employed; 6% were working full time
- 59% had been unemployed for more than four years, including 54% of adults age 55-61 and 71% of adults age 62 and older
- 32% of unemployed homeless older adults were looking for work, including more than one third (37%) of adults age 55-61 and about one quarter (23%) of adults age 62 and older

Military service

- 23% of homeless older men had served in the U.S. military, compared to 8% of homeless younger men age 18-54
- 31% of homeless older Veterans had served in a combat zone
- 47% of homeless older Veterans reported having service connected injuries or illnesses, mostly mental health (47%) or hearing (32%) problems
- 47% of older homeless Veterans were receiving Veterans' benefits of some kind, mostly VA medical benefits (40%), service compensation (18%) or VA disability pay (16%)

History of social service and treatment placements

 49% had lived in an alcohol or drug treatment facility, including 54% of men and 36% of women

- Homeless older adults age 55-61 were more likely than those age 62 and older to have lived in an alcohol or drug treatment facility (53% vs. 41%)
- 32% had lived in a half-way house
- 28% had lived in a mental health facility
- 17% had lived in a group home
- 12% had lived in foster care
- Homeless older women were less likely than homeless older men to have ever experienced any kind of social service or treatment placement (60% vs. 74%)

Incarceration history

- 53% reported that they had been incarcerated at some time in their life, including 61% of homeless older men and 29% of homeless older women
- 25% had been released from jail or prison within the last two years

Violence and abuse

- More than one-third (36%) reported that they were physically or sexually abused, or were neglected as a child. Compared to older men, older women have higher rates of each of these kinds of maltreatment, and they are especially more likely to have been victims of sexual abuse (27% vs. 9%)
- 17% reported being attacked or beaten while homeless, including 27% of homeless older women and 14% of homeless older men
- Older women were more likely than older men to say they had stayed in an abusive relationship because they did not have any other housing options (38% vs. 18%)

A deeper look at needs

As noted earlier, the number of older adults experiencing homelessness is growing, and so is the complexity of the need. While they are still a small percentage of the overall homeless population, we can expect to see the number of homeless older adults continue to increase as the population of older adults grows in general. In addition, older adults on a fixed income may become homeless due to increased economic vulnerability. The issues facing the aging population in general exist for older adults who are homeless, but are magnified due to the difficult circumstances and conditions associated with being homeless.

Income and employment

While older adults experiencing homelessness had a higher monthly median income than those age 25-54 (\$750 vs. \$436), fewer reported that their main source of income was from steady employment (11% vs. 25%). Homeless adults age 62 and older had a higher median monthly income than those age 55-61 (\$800 vs. \$722).

Unemployed older adults experiencing homelessness reported that their main barriers to employment are:

- Poor physical health (49%)
- Mental and chemical health problems (19%)
- Age (15%)
- Lack of transportation (15%)
- Lack of housing (12%)

General Assistance and Social Security are a critical aspect of support for older adults experiencing homelessness (Figure 6). Seventy percent listed General Assistance or some type of Social Security as their main source of income in the month of the survey. Compared to homeless older adults age 55-61, those age 62 and older were more likely to receive Social Security (39% vs. 4%) and less likely to receive General Assistance (6% vs. 22%).

6. Main source of income for homeless adults age 55 and older (Top 4), 2018

Main source of income	Older adults age 55-61	Older adults age 62+	Total
SSDI (Social Security Disability Insurance)	40%	34%	38%
General Assistance	22%	6%	17%
Social Security	4%	39%	15%
Steady or temporary employment	14%	6%	11%

Housing

When given a list of potential reasons, the most frequent reasons why homeless older adults left their last regular or permanent housing were:

- Eviction or lease not renewed (42%)
- Could not afford the rent (39%)
- Lost their job or had their hours cut (29%)
- Had a break-up with a spouse or partner (21%)
- Had unsafe housing (20%)

Homeless adults age 55-61 were more likely than those 62 and older to say they lost their housing because they could not afford the rent (43% vs. 30%), or lost their job or had their hours cut (33% vs. 18%). Older women were more likely than older men to say they lost their housing due to abuse by someone they lived with (22% vs. 8%). The percentage who said they lost housing due to eviction did not vary by age group or gender.

The main barriers to obtaining permanent housing were:

- Lack of affordable housing (49%), including 46% of homeless older men and 58% of homeless older women; this overall percentage increased from 19% in 2015
- Credit problems (32%), including 37% of homeless adults age 55-61 and 21% of homeless adults 62 and older; this overall percentage increased from 16% in 2015
- Criminal background (26%), including 29% of homeless older men and 16% of homeless older women; this overall percentage increased from 18% in 2015
- Eviction actions or bad rental history (25%), including 21% of homeless older men and 35% of homeless older women

Eighty-four percent reported that they only need a one-bedroom or studio apartment, which would still be out of reach for many, given average incomes. Figure 7 illustrates the financial challenges faced by Minnesota's older adults experiencing homelessness in securing affordable housing.

7. Fair market rent versus income, by region, 2018

	Fair market rent (FMR) for a 1-bedroom apartment	Monthly income at which FMR would be affordable	Median monthly income, homeless older adults
Twin Cities metro	\$864	\$2,880	\$750
Greater Minnesota	\$613	\$2,043	\$725

Source. U.S. Department of Housing and Urban Development (2018).

Health and wellness

Many older adults experiencing homelessness suffer from more than one chronic health condition, which can have a multiplying impact when coupled with lack of stable housing. Seventy-five percent of older adults reported a chronic physical health problem (Figure 8). High blood pressure, severe chronic pain, diabetes, chronic heart problems, and asthma were the conditions most often reported.

Over half (54%) reported a serious mental illness, and 21% reported a substance abuse disorder. Fourteen percent had the co-occurrence of chronic physical health, mental health, and substance use disorder.

Thirty-two percent reported a history of symptoms suggesting traumatic brain injury. Thirty-eight percent reported feeling confused, having trouble remembering things, or having trouble making decisions (to the point that it interfered with their daily activities) (Figure 8), and 27% reported that their physical or mental health conditions made it difficult to manage their daily activities.

8. Health-related issues of homeless older adults age 55 and older, 2018

Health-related issues	Older men	Older women	All older adults
Chronic physical health condition	72%	84%	75%
Serious mental illness	50%	67%	54%
Anxiety disorder	31%	51%	36%
Major depression	34%	43%	36%
Traumatic brain injury history	29%	39%	32%
Substance abuse disorder	22%	16%	21%
Physical or mental health condition makes daily activities difficult	24%	35%	27%

Rates of medical coverage are high, with 82% saying they had medical coverage or health insurance. Three-quarters (76%) said they had used public medical benefits in the past year (Figure 9).

Many of the differences between homeless older adults in the Twin Cities metro area and greater Minnesota, as well as those age 55-61 and age 62 and older that existed in 2015, diminished in 2018. An exception is that, compared to homeless adults age 55-61, those age 62 and older were less likely to report serious mental illness (45% vs. 58%). Differences in health status and needs related to gender are highlighted in Figures 8 and 9.

9. Health access and coverage for homeless older adults age 55 and older, 2018

Health access and coverage	Older men	Older women	All older adults
Need to see a professional about a physical health problem	44%	53%	46%
Need to see a professional about a mental health problem	28%	30%	29%
Need to see a dentist about tooth or gum problems	47%	54%	49%
Used public health benefits in the past year	74%	81%	76%
Had medical coverage or insurance in October	81%	87%	82%

Service use

Food supports, in the form of hot meal programs and food stamps, were the most commonly used forms of assistance, and among the most helpful services received by older adults experiencing homelessness (Figure 10). In 2018, nearly three-quarters (72%) said they used a hot meal program, an increase from 45% who said this in 2015. Fifty-seven percent received SNAP or food stamps in October. The overall trends in Minnesota Homeless Study data show that SNAP or food stamp assistance has decreased since 2012. This may be due in part to increased eligibility restrictions for adults without disabilities. Forty-five percent of older adults said hot meals were the most helpful service they received, and 39% said SNAP/food stamps were the most helpful.

Free medical and dental clinics, clothing, transportation assistance, and drop-in centers were also commonly used and considered helpful by older adults experiencing homelessness.

10. Types of assistance received by older adults experiencing homelessness in October 2018

	Percentage who received the service during October	Of those who received the service, percentage who say it is service that has helped the most
Food assistance		
Food stamps/SNAP	57%	39%
Free hot meals	72%	45%
Food shelf	34%	14%
Health-related services		
Medical or dental clinic	46%	26%
Emergency room	24%	9%
Mental health clinic	17%	8%
Transportation assistance (including bus cards)	41%	21%
Free/almost free clothing	41%	13%

	Percentage who received the service during October	Of those who received the service, percentage who say it is service that has helped the most
Outreach-related		
Drop-in center services	35%	12%
Outreach services	23%	9%
Help getting an ID	16%	6%
Free voice mail or cell phone	15%	4%
Help getting financial or other public benefits	16%	5%
Help finding a job	8%	2%

Access to resources

Homeless older adults' access to resources such as a government ID, a computer, and a cell phone with a data plan, varies by gender and geography.

- 70% have a valid ID, including 73% of those living in the Twin Cities metro area and 65% of those living in greater Minnesota
- 56% have a cell phone with data plan to access the internet, including 67% of homeless older women and 53% of homeless older men
- The percentage of homeless older adults with a cell phone and data plan increased from 41% in 2015 to 56% in 2018.

Key differences between homeless adults age 55+ and those under age 55

Figure 11 presents key differences in demographics; health and wellness status; education, employment, and income; service and resource use; and exposure to violence and adverse childhood experiences by two age groups: homeless adults age 25-54 and 55 and older. The figure shows that while older homeless adults are less likely than their younger counterparts to be employed, have a serious mental illness, or been in a recent violent or abusive relationship, they are more likely than younger homeless adults to be staying in emergency shelters, divorced, have a chronic physical health condition, have higher income, and receive some form of Social Security benefit.

11. Key differences between homeless adults age 25-54 and 55+, 2018

Homeless adults age 25-54 Homeless adults age 55+
53% 75%
metro area 65% 74%
Iters 34% 50%
18% 38%
nad contact with family 39% 46%
ealth condition 44% 75%
32% 46%
al about a physical health problem 35% 46%
or other health condition that limits 49% 62% they can do
o for medical care 69% 79%
ess 66% 54%
al about a mental health problem 40% 29%
nd income
na or GED 81% 83%
27% 15%
\$436
SSDI, or SSI benefit 20% 55%
al Security, SSDI, or SSI is main 38% 68%
61% 57%
n 63% 72%
e most helpful 34% 45%
ta plan 64% 56%
ences and violence
75% 58%
48% 29%
ionship because they did not have 42% 23%
ationship (in past 12 months) 27% 10%

Considerations

The unprecedented growth of the older adult population will undoubtedly shape the characteristics of Minnesota's homeless population during the next two decades. While adults age 55 and older now make up just 10% of people experiencing homelessness, it is the most rapidly growing segment of the homeless population.

The current growth in the homeless older adult population will continue to affect the demand for affordable housing; health care, including acute care and care for complex conditions; nonprofit service provision; and a range of public programs. These growing needs may be on a collision course with the persistent threat of program and budget cuts proposed by the current administration to the U.S. Department of Housing and Urban Development budgets (Weiss, 2019).

To address the needs of this growing population in Minnesota, it will be necessary to bring together service providers, government agencies, advocates, housing developers, and others to formulate long-term strategies and solutions. Some of the key elements that need consideration in future planning efforts include the following;

- Recognize and design services that address the complexity of health care needs among older adults experiencing homelessness. Health-related problems for homeless older adults are both more common and more complicated than for those of similar ages who have the advantage of permanent housing. Homeless older adults often face multiple issues related to mental health, substance abuse, cognitive impairment, physical health conditions, and disabilities. Any potential health improvements for homeless older adults will be highly dependent on finding and maintaining stable housing for this population. Without such efforts, service providers will need to continue providing high levels of crisis-focused support.
- Expand housing opportunities for older adults whose backgrounds make them more difficult to house. Many housing options have eligibility or screening criteria. For instance, some senior housing requires an older adult to be over the age of 62. Others screen out people who have previous criminal records or poor credit, rental, or job histories. Still others require older adults to be sober or actively addressing mental health issues. Advocates for older adults experiencing homelessness in both the Twin Cities metro and greater Minnesota report more difficulty in finding housing opportunities for those who have not yet qualified for Social Security benefits. To address housing needs in this "younger" older adult population, new housing opportunities will be necessary, including targeted supportive housing programs, group residential programs, and single room occupancy housing. In particular, although many older adults also qualify for housing available to any adult age 18 or older, they may require settings and a range of services that are better equipped to address the complexity of their needs and increased vulnerabilities.

- Create more affordable housing options for older adults. Older adults living in poverty are particularly affected by the lack of affordable housing. A recent study by the Minnesota Housing Partnership (2019) found that in 2017, 57% of all older adult renters are cost burdened and spend more than 30% of their income on housing, often forcing them to choose between paying for housing or basic needs like food or medicine. Because of the extremely tight housing market and low vacancy rates in Minnesota, the competition for affordable housing greatly exceeds the demand of the growing group of low-income older adults in our state.
- Address the lack of capacity in the formal shelter system. Shelters are generally at capacity in Minnesota and many older adults are staying outside of the formal shelter system. In addition, most shelters do not have the capacity to provide the level of care that older adults may need, particularly those with multiple complex conditions. Newer programs, such as medical respite, often have limited capacity and can only provide short-term support. Meeting the future needs of this growing population of older adults experiencing homelessness will require additional shelter capacity, affordable housing opportunities more closely aligned with the needs of this population, and the resolve to address these circumstances despite current political divides. The alternative is another decade of growing homelessness among Minnesota's poorest older adults.

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