More are homeless. On any given night, an estimated 8,600 people are homeless in Minnesota. This is nearly 2.5 times the estimate made in October 1991. The estimate is based on:

- 7,121 homeless men, women, unaccompanied youth, and children who were staying in Minnesota's shelters and transitional housing programs on the night of October 26, 2000
- 51 who were in detox facilities on the same night
- An estimated additional 1,424 in unsheltered locations

More are working. In nine years the proportion of homeless adults working full- or part-time has more than doubled from 19 percent in 1991 to 41 percent in 2000. The proportion working full-time has more than tripled from 7.5 percent to 26 percent. Over one-quarter of all homeless adults now report their main source of income is from steady employment. However, 68 percent earn less than $10 an hour, and 39 percent earn less than $8 an hour. To afford an average one-bedroom apartment in the Twin Cities area ($664 in 2000) would require an hourly wage of about $12.70.

More are people of color. While the overall racial composition of Minnesota's adult population is about 94 percent white, the homeless adult population is 34 percent white, 47 percent African American, 11 percent American Indian, 1 percent Asian, and 8 percent other (including mixed race). People of color now make up 66 percent of homeless adults, up from 59 percent in 1991. Youth of color are also disproportionately represented among the homeless, though not to the same extent.

More are children. Homeless children today outnumber Minnesota's entire homeless population in 1991. On the night of the survey, 3,122 children were in shelters, transitional housing, or on the streets with their parents. In 2000, one-third of all homeless adults - 10 percent of men and 66 percent of women - had at least one child under 18 with them. These homeless children are at significant risk of serious health, emotional, and behavioral problems. School-age children are also at higher risk for school problems or repeating a grade, and more parents report these problems in 2000 than in 1997.

More are mentally ill. Thirty-seven percent of homeless adults have serious mental illness, up from 32 percent in 1997, which was also an increase from 1994. Other aspects of health remained fairly steady. Over one-third reported that they needed to see a doctor for a physical health problem, and 30 percent for an emotional or mental health problem, and more than half had dental problems that needed attention. 19 percent had been diagnosed with alcohol abuse disorder, and 13 percent with drug abuse disorder, both slightly down from 1997. Childhood sexual abuse (24%) and physical abuse (33%) are about as common among homeless adults as in 1997, but the prevalence among homeless youth has grown to 28 percent for sexual abuse and 47 percent for physical abuse.
How many people are homeless in Minnesota?

On the night of October 26, 2000, Minnesota's 188 shelters and transitional housing programs were providing a temporary place to stay for 7,121 homeless men, women, unaccompanied youth, and children. An additional 51 homeless people were staying in detox facilities. Using conservative estimates based on studies done elsewhere of the harder-to-find homeless, another 1,424 people were staying in places not meant for human habitation (such as in cars, under bridges, and in abandoned buildings), and another 12,733 were "doubling up" temporarily with family or friends. The total estimated number of people homeless or precariously housed in Minnesota on this night, or any other recent night, is 21,329.

Since the statewide homeless survey was first conducted in October 1991, the total number of homeless people receiving shelter has grown by 149 percent — or more than doubled. The number of homeless children in 2000 is more than the total for people of all ages nine years ago. While the total state population grew (from 1989 to 1999) by about 12 percent, the number of men receiving shelter services has grown (from 1991 to 2000) by 58 percent, the number of sheltered women has grown by 157 percent, and the number of children in emergency and transitional housing has increased by 257 percent.

Most of this increase has been in people using transitional housing. Emergency shelters served 44 percent more people in 2000 than in 1991 and battered women's shelters served 73 percent more, while transitional housing services increased by 366 percent, or more than quadrupled.

It may fairly be asked whether the growth in the number of sheltered homeless people simply reflects a growth in the capacity of the system to serve them. Perhaps the actual number of homeless people stayed the same over the 1990s, while more shelter providers reached a higher and higher proportion of them. However, shelter census reports collected quarterly by the state show that the number of homeless people turned away for lack of capacity grew faster than shelter capacity. The evidence indicates that the total number of homeless in the state has increased at least as fast as the estimates in this study.

Source: Wilder Research Center; data provided by shelter service providers across the state.

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<thead>
<tr>
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</thead>
<tbody>
<tr>
<td>Shelter capacity per night</td>
<td>3,168</td>
<td>5,017</td>
<td>5,559</td>
</tr>
<tr>
<td>Turnaways per night</td>
<td>201</td>
<td>676</td>
<td>467</td>
</tr>
<tr>
<td>Turnaways as % of capacity</td>
<td>6.3%</td>
<td>13.5%</td>
<td>8.4%</td>
</tr>
</tbody>
</table>

Source: Wilder Research Center calculations, based on data from Department of Children, Families & Learning.
Who is homeless in Minnesota?

- Average age: 40 for men, 32 for women, 15 to 16 for youth.
- Minorities are greatly and increasingly over-represented.
- Most are not newcomers to Minnesota.

Homeless adults (age 18 and older) had an average age of 36 (40 for men, 32 for women). People age 55 and over made up 5 percent of the homeless adult population. The oldest person interviewed was 80. Unaccompanied youth (age 17 and younger) had an average age of 15.7; the youngest was 10. Compared to 1997, youth were about the same age in 2000, and homeless adults were slightly older.

Both adults and youth were approximately evenly split between men and women. Among adults, men predominated in emergency shelters and in non-sheltered locations, and women were the majority in transitional housing and battered women’s shelters. The gender gap narrowed somewhat in 2000.

Racial and cultural minorities were more likely than whites to be homeless. The table below shows the racial distribution of surveyed adults and youth, and the 1999 (most recent available) estimates for the total Minnesota population in the same age ranges.

Compared to 1997, the 2000 adult homeless population was more concentrated among minority group members, while the youth population was slightly more white.

Twenty-four percent of homeless adults had less than a high school education, and 48 percent had completed high school or a GED but no more. 28 percent had some amount of post-secondary education. These figures show a rise in education level from 1997, when 30 percent had not completed high school or a GED.

Sixteen percent of homeless adults, and 31 percent of adult men, were veterans, up from 13 percent and 26 percent in 1997.

Seventy-two percent of homeless adults had lived in Minnesota for the past three years or more. Of those who had lived in Minnesota for two years or less, 32 percent had lived in Minnesota before. These figures are unchanged from 1997.

<table>
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<tr>
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</thead>
<tbody>
<tr>
<td>46.7%</td>
<td>2.6%</td>
<td>African American</td>
<td>24.9%</td>
</tr>
<tr>
<td>10.5%</td>
<td>0.9%</td>
<td>American Indian</td>
<td>20.0%</td>
</tr>
<tr>
<td>0.9%</td>
<td>2.1%</td>
<td>Asian/Pacific Islander</td>
<td>0.5%</td>
</tr>
<tr>
<td>34.3%</td>
<td>94.4%</td>
<td>White</td>
<td>46.3%</td>
</tr>
<tr>
<td>7.6%</td>
<td>--</td>
<td>Other, including mixed race</td>
<td>8.3%</td>
</tr>
<tr>
<td>6.5%</td>
<td>1.7%</td>
<td>Hispanic or Latino origin (may be of any racial origin)</td>
<td>6.6%</td>
</tr>
</tbody>
</table>

Sources: Homeless data from Wilder Research Center; 1999 population estimates from the State Demographic Center at Minnesota Planning. (Data on mixed race is not available for the general population.)
Employment and income

- Employment continues to grow sharply.
- 26% are working full time.
- Wage rates and monthly incomes remain low.
- Housing affordability is a growing factor in homelessness.

Forty-one percent of adults were employed, and 26 percent were employed full time. 29 percent of adults reported steady employment as their main source of income. All of these are significantly higher than in 1997, when 34 percent were working (17% full time) and 23 percent had a steady job as their primary source of income. These figures have risen steadily since 1991, when only 19 percent were working (8% full time).

The average monthly income of all homeless adults, from all sources, was $622. One-third had incomes above $700 per month. Adjusting for inflation, incomes in 2000 were very similar to 1997.

Asked to name the biggest barriers or problems to getting a job now, unemployed homeless adults focused first on lack of transportation (25%, up from 21% in 1997), physical health (24%, up from 19%), and lack of housing (22%, up from 12%). Among parents, the top barrier was inability to find or afford child care (41%).

Housing affordability

As this survey illustrates, homelessness involves many factors beyond the purely financial. However, the gap between wages and housing costs plays an increasing role in Minnesota homelessness.

This gap was highlighted in a January 2001 report by the Office of the Legislative Auditor. The report stated that average rents in the Twin Cities area increased 34 percent between 1990 and 1999, while the median household income of renters grew by only 9 percent. Rents rose most sharply in the last few years, and the rental market is projected to become even tighter during the decade to come.

The Legislative Auditor’s report estimated that the average rent in the Twin Cities area was $664 for a one-bedroom apartment and $815 for a two-bedroom apartment in 2000.

The commonly accepted definition of housing affordability is no more than 30 percent of income for low-income households because, above this amount, not enough money remains to weather financial setbacks.
More than 10 percent of working homeless adults earn less than $6.00 per hour. At this pay rate, even two full-time workers in the same household would pay 32 percent of their income for a typical one-bedroom apartment, or 39 percent for a two-bedroom apartment. A single adult would spend 48 percent of income for a typical efficiency apartment, at $504 monthly rent.

Over one-third of Minnesota's working homeless adults earn $6.00 to $7.70 per hour. A full-time worker in this pay range could afford a monthly rent of $312 to $400. A typical one-bedroom apartment in the Twin Cities metropolitan area would take 50 to 64 percent of their income.

About one-third of working homeless adults earn $7.70 to $9.60 per hour, making rents of $400 to $500 affordable. The average one-bedroom apartment would cost 40 to 50 percent of the monthly income of a full-time worker in this range.

More than 20 percent of working homeless are earning $9.60 to $12.00 per hour. In this range, they could afford $500 to $625 per month for housing, which is still less than the average rent for a one-bedroom apartment.

A significant proportion of homeless adults report problems with credit, evictions, or bad rental history, and over half say the lack of affordable housing is a barrier to getting housing. If a person is evicted, the resulting unlawful detainer remains in their record for years, and makes it almost impossible to compete with other renters in a tight housing market. In this way, high rents and low vacancy rates often combine with low wages to create a cycle that is difficult to break.

### Housing history and reasons for homelessness

- 60% of adults are homeless for the first time.
- Half have been homeless for 6 months or less.
- Many were abused or institutionalized as children.
- 41% of homeless adults were released from an institution, homeless program, or treatment center in the past year, and 49% of those had no stable place to go.
- A growing proportion of homeless youth have a history of sexual or physical abuse.
- Reports of "survival sex," in exchange for basic necessities, are becoming more common among homeless youth.

Among adults, 60 percent were experiencing homelessness for the first time. Half had been without regular housing for six months or less, although 16 percent had been homeless for three years or longer. 56 percent of youth reported being in their first experience of homelessness. Half had been homeless for three months or less, and 12 percent had been homeless for one year or longer.

Compared to 1997, slightly more adults had been homeless before. The current homeless episode was somewhat longer in 2000. For youth, about the same proportion were homeless for the first time in 2000, and the average length of time for which they had been homeless was somewhat shorter than in 1997.

The main reasons adults said they left their last housing included a mix of economic and personal reasons. The main reasons cited were:
evicted (33%); unable to afford rent (23%); abuse (18%); other relationship problem (28%); drinking or drug problem (21%); substandard or unsafe housing (15%); and violence in the neighborhood (14%).

Nineteen percent of homeless youth left home because of abuse, and over half (55%) because of other relationship problems. Their main reasons for not returning home were: at least one adult in the household won't tolerate their being around (50%); adults in the household don't attend to their basic needs (30%); alcohol or drug use by a parent or other household member (30%); the danger of physical abuse (24%); not enough space for everyone (21%).

Many homeless adults had troubled childhoods. Twenty-eight percent had at least one kind of institutional placement as a child, and at least 8 percent had been homeless as a child. The most common institutional placements were foster homes (16%), detention centers (12%), and facilities for people with mental disorders (6%). Other traumatic childhood experiences included childhood physical abuse (25% of men, 40% of women) and childhood sexual abuse (12% men, 37% women). All of these rates were almost exactly the same as in 1997 except for childhood physical abuse of men, which was down from 28 percent to 25 percent.

Among youth, the prevalence of physical abuse rose from 1997 to 2000, from 32 percent to 40 percent for males and from 43 percent to 53 percent for females. Similarly, the number reporting sexual abuse rose from 6 percent to 14 percent for males and from 37 percent to 41 percent for females. More homeless youth also said they had engaged in "survival sex" (in exchange for shelter, clothing, food, or other necessities) — that proportion rose from 10 percent in 1997 to 15 percent in 2000. Fewer youth in 2000 were parents (8%, down from 17% in 1997).

Forty-four percent of adults had lived in some kind of institution or treatment facility as an adult. Forty-one percent had been released from an institution or from a housing facility or program in the past year. Of these, 49 percent reported that they did not have a stable place to live when they left.

Financial factors were by far the most common current barrier to housing cited by homeless adults. Over half (54%) of all homeless people identify "There is no housing I can afford" as a main reason preventing them from getting housing now. Other major barriers include credit problems (31% overall, 45% of parents), no local rental history (20% overall, 13% of parents), a criminal background (21% overall, 8% of parents), court eviction or bad rental history (24% overall, 31% of parents), and the cost of application fees (18% overall, 24% of parents).
Families with children

- One-third of homeless adults (10% of men and 66% of women) have children with them.
- An increasing percentage of homeless parents report their children have learning and school problems.
- Serious physical, emotional and behavioral problems are much more common among homeless children than among Minnesota children in general.

On the night of the survey, 3,122 children under age 18 were in shelters, transitional housing, or on the streets with their parents.

Thirty-four percent of homeless adults (10% of men and 66% of women) had children age 17 or younger with them. This is about the same proportion as in 1997. Parents were more likely to be served in battered women's shelters or transitional housing, where they made up 56 percent and 45 percent of the households, than in emergency shelters (23%) or on the streets (9%).

On average, parents had 2 to 3 children with them. The average age of children was 7 (up slightly from 1997), and one-third were age 4 or younger. About half (53%) of families had been homeless for six months or less, while 29 percent had been homeless for a year or longer.

Nine unaccompanied youth had children of their own with them (4.5% of all homeless youth surveyed, down from 12% in 1997).

Homeless parents reported that their children faced a variety of problems. Sixteen percent reported having a child with a serious health problem, and 21 percent a child with a serious emotional or behavior problem.

Of parents with school-age children, 41 percent had a child with learning or school problems (up from 36% in 1997). Twenty-six percent had a child who had repeated at least one grade (up from 20% in 1997). Thirteen percent had a child who had trouble going to school because of their housing situation, the same proportion as in 1997.

During the previous 12 months, 10 percent of parents had been unable to obtain needed health care for their children, 14 percent had been unable to obtain needed dental care, and 32 percent had been unable to obtain needed child care. During just the past month, 11 percent reported their children had skipped meals because there wasn't enough money to buy food.

Problems of homeless children

<table>
<thead>
<tr>
<th>Problem</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Learning or school problems</td>
<td>41%</td>
</tr>
<tr>
<td>Parents unable to obtain needed child care in the past year</td>
<td>32%</td>
</tr>
<tr>
<td>Repeated a grade</td>
<td>26%</td>
</tr>
<tr>
<td>Emotional or behavior problem</td>
<td>21%</td>
</tr>
<tr>
<td>Chronic or severe physical health problem</td>
<td>16%</td>
</tr>
<tr>
<td>Unable to obtain needed dental care past year</td>
<td>14%</td>
</tr>
<tr>
<td>Trouble attending school due to homelessness</td>
<td>13%</td>
</tr>
<tr>
<td>Skipped meals in past month</td>
<td>11%</td>
</tr>
<tr>
<td>Unable to obtain needed health care in the past year</td>
<td>10%</td>
</tr>
</tbody>
</table>
Fewer homeless parents reported being unable to obtain child care (down from 46% in 1997 to 32% in 2000).

Among the homeless, parents are more likely than single adults to be people of color. They are less likely to have been homeless for over a year, less likely to have had recent drug or alcohol treatment or a serious mental health diagnosis, and less likely to have a high school education. They are equally likely to have been living in Minnesota for at least two years, or to be working full-time.

**Services used and services needed**

- **Homeless adults mainly report receiving basic survival services for health care, food, and clothing.**
- **The main service needs they report are for longer-term issues — help finding jobs and financial assistance.**
- **Transportation appears to be a more serious problem than in the past.**
- **For homeless youth, the greatest reported needs are for a job, school or training, and financial assistance. Food also appears to be a growing need.**

Nearly all the services most frequently used by homeless adults address immediate and basic needs (medical, food, clothing). The most commonly reported services used in the previous month: publicly funded medical benefits of various types (59%), Food Stamps (41%), clothing shelves (40%), hot meal programs (31%), drop-in centers (25%), food shelves (24%), and transportation assistance (21%). Notable changes (of more than three percentage points either way) since 1997: Food Stamps (up from 38% to 41%), and hot meal programs (up from 27% to 31%).

Of all the services they had received in the past month, adults reported the following as the most helpful: Medical Assistance (29%), Food Stamps (24%), free or almost free clothing shelves (17%), hot meal programs (16%), drop-in centers (13%), and housing assistance (12%).

![Most helpful services received by adults](chart)

The services homeless youth received were quite different. The most commonly mentioned kinds were drop-in centers (35%), outreach services (35%), Medical Assistance (29%), hot meal programs (20%), transportation assistance (20%), food shelves (18%), free or almost free clothing shelves (18%), Food Stamps (18%), and job assistance (18%).

Youth said that the most helpful services were drop-in centers, cited by 38 percent (up from 23% in 1997), outreach services, cited by 31 percent (not asked in 1997), and Medical Assistance (cited by 25%, the same as in 1997). Youth also reported getting more help in 2000 from food shelves and hot meal programs. Job training was considered one of the most helpful services by only 4 percent in 2000, down from 13 percent in 1997.

Respondents were asked about their main needs, aside from housing. Adults most frequently
mentioned a job (36%), financial assistance (20%), transportation (18%), school or training (11%), and medical care (11%). Fourteen percent of parents mentioned child care. These are similar to 1997 figures, with a four percentage point rise in transportation needs and a three percentage point drop in school or training needs.

Youth most often mentioned a job (35%), school or training (30%), financial assistance (26%), food (16%), and clothing (13%). The only notable change from 1997 was an increase in the mention of food, up from 12 percent to 16 percent.

Twenty-four percent of adults, and 63 percent of families, were receiving MFIP (welfare) benefits at the time of the survey. Seventy-four percent of families had received MFIP during the past 12 months. Of these, 31 percent had been sanctioned. In comparison, figures from the Minnesota Department of Human Services show that 25 percent of the general MFIP population were sanctioned over the course of a comparable 12-month period. Twenty-eight percent of homeless MFIP recipients were exempt from work requirements at the time of the interview, compared with 12 percent of the general MFIP population at any given time.

### Physical and mental health

- **35%** of homeless adults say they need professional care for a physical health problem. Over half need dental work.
- **37%** visited an emergency room in the past 6 months, an average of 2.5 times.
- **38%** have a diagnosed mental illness, up from 32% in 1997.
- **15%** have a "dual diagnosis" of mental illness and alcohol or drug disorder.
- **32%** consider themselves alcoholic or chemically dependent.

On the day of the survey, 35 percent of homeless adults said they needed to see a health professional for a physical health problem, 30 percent for an emotional or mental health problem, and 13 percent for an alcohol or drug problem. Fifty-four percent needed to see a dentist. These rates are close to those reported in 1997.

Half (51%) had received care for at least one illness during the previous 12 months, and 37 percent had received care in an emergency room during the previous six months. People who had used the emergency room averaged 2.5 visits during this period.

Twenty-eight percent reported various barriers that kept them from getting needed health care. The main barriers reported were no money (33%) and no insurance (28%).

Mental illness affects a growing proportion of homeless Minnesotans. Thirty-eight percent (up from 32% in 1997) had been told by a doctor or nurse, within the past two years, that they had schizophrenia, manic-depression, some other type of delusional disorder, major depression, anti-social personality disorder, or post-traumatic stress disorder. Twenty-nine percent had received outpatient care for mental health problems at some time in their lives, and 18 percent had previously lived in a facility for people with mental health problems.
Fifteen percent had a dual diagnosis of at least one mental illness and a drug or alcohol disorder. Nineteen percent had been diagnosed with alcohol abuse disorder, and 13 percent with drug abuse disorder (both very close to 1997 levels). Thirty-two percent consider themselves alcoholic or chemically dependent, about the same as in 1997. Thirty-eight percent had been in a drug or alcohol treatment facility, 19 percent within the past two years. Thirty-one percent had ever been in an alcohol or drug outpatient treatment program.

Of the 5 percent of homeless adults whose most recent institutional experience had been a drug or alcohol treatment facility, just over half (51%) had had no stable place to live when they left the facility, although 70 percent had been offered follow-up or aftercare.

For slightly fewer than 2 percent of homeless adults, the most recent institutional stay was in a mental hospital, and 45 percent of those had been released without a stable place to stay. Just over half (52%) had been offered follow-up or aftercare.

### Technical notes

This report presents findings from a survey of homeless people conducted by Wilder Research Center, with the help of more than 500 trained volunteers, on October 26, 2000. Fifty-three percent of the known adult population of homeless shelters and transitional housing programs participated in this survey.

Because long-term homeless individuals have a greater chance of being homeless on any given survey date than do people who are homeless for only a brief time, they appear more numerous in a single-night count than they would over the course of a year. The results describe those who are homeless at any given time, some of their experiences prior to losing their housing, and the kinds of help they might need.

The findings are representative of the total sheltered population of the state, and of the non-sheltered individuals who were contacted. They do not represent the unknown number of non-sheltered homeless who could not be located, nor do they represent those at imminent risk of losing housing or those who are doubled up with friends or family.

After interviewing a random sample of sheltered adults, interviews were weighted to reflect the known population of 3,820 sheltered adults across the state on the date of the survey. The 381 interviews with non-sheltered homeless adults were not weighted because the total non-sheltered population is not known. The total weighted adult sample size is therefore the 3,820 weighted sheltered adults plus the 381 unweighted non-sheltered adults, or 4,201. The sample of 209 unaccompanied youth is unweighted because, as with the non-sheltered adults, the total population is not known. (A full description of weighting methodology can be found in the full report at www.wilder.org/research)
Definitions

This study uses a definition of homelessness closely based on the one established by Congress for programs operated by the U.S. Department of Housing and Urban Development:

A homeless individual is anyone who (1) lacks a fixed, regular, and adequate nighttime residence or (2) has a primary nighttime residence that is a supervised, publicly or privately operated temporary living accommodation, including emergency shelters, transitional housing, battered women's shelters; or any place not meant for human habitation.

The two categories of people included in the federal definition but not included in this survey are: (1) those at risk of immediate eviction and (2) those recently homeless but now in supportive housing that is not time-limited.

Homeless youth, in this study, are those who currently have no parental, substitute, foster, or institutional home to which they can safely go. They are unaccompanied by an adult and have spent at least one night either in a formal emergency shelter, improvised shelter, doubled-up, or on the street.

"Street" homelessness (non-sheltered): Wilder Research Center worked with street outreach workers throughout the state to locate people in non-sheltered locations including hot meal sites, drop-in centers, encampments, and other outdoor locations. Non-sheltered persons stay in cars, abandoned buildings, tents or makeshift shelters, or hallways of apartment buildings. They may also spend the night in places open 24 hours a day or on a bus or train. Some go back and forth between non-sheltered sites and emergency shelters on different nights.

<table>
<thead>
<tr>
<th>Emergency shelters</th>
<th>Battered women's shelters</th>
<th>Transitional housing</th>
</tr>
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<tbody>
<tr>
<td><strong>Access</strong></td>
<td></td>
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<tr>
<td>• Walk in or referred by a social service agency</td>
<td>• Walk in or referred by an agency or advocate</td>
<td>• Walk in or referred by a social service agency or shelter program</td>
</tr>
<tr>
<td>• If space is limited, may be selected by lottery</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Services</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Safe sleeping space</td>
<td>• Safe refuge for women and their children when fleeing an abusive situation</td>
<td>• Housing and support services</td>
</tr>
<tr>
<td>• Most open only evenings and overnight; rarely available for people who work nights and sleep days</td>
<td>• Legal advocacy and moral support for women while they work on a longer-term solution to their situation</td>
<td>• Must be willing to work with a case manager to set family and housing stability goals to prevent future homelessness</td>
</tr>
<tr>
<td>• Some sites provide other services like hot meals, health care, employment and/or housing information, and connections to other services</td>
<td>• Some sites provide other services like hot meals, health care, employment and/or housing information, and connections to other services</td>
<td>• Most are family-focused, but some serve other specific populations such as veterans, single adults, or persons with special needs</td>
</tr>
<tr>
<td><strong>Length of stay</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Up to 30 days</td>
<td>• Until safe housing can be arranged; usually up to 30 days</td>
<td>• Up to 24 months</td>
</tr>
</tbody>
</table>
For more information about the study, contact Greg Owen at 651-647-4612 or Ellen Shelton at 651-637-2470.

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Greater Minnesota Housing Fund
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