

Homelessness in Minnesota

Summary of the Findings from the 2015 Minnesota Homeless Study

About the study

Beginning in 1991, Wilder Research has conducted a statewide study every three years to gather data that will help better understand the prevalence, causes, circumstances, and effects of homelessness in Minnesota.

The study includes a count of the number of people who were homeless on a single night and face-to-face interviews with people throughout the state who are considered homeless according to the federal definition.

The most recent study was conducted on October 22, 2015 by 1,100 volunteers and program staff in more than 370 locations across Minnesota.

Why this study is important

The Minnesota Homeless Study is considered to be the most comprehensive source of descriptive information about homeless adults, youth, and children in the state. Wilder Research produces the study with a unique partnership made up of hundreds of nonprofit organizations, service providers, state agencies, homeless advocates, and volunteers in order to gather critical data on homelessness. The resulting reports provide detailed information on the background and characteristics of those experiencing homelessness, conditions that contribute to homelessness, and barriers to obtaining and retaining safe and stable housing. Organizations and government agencies use the data to: identify and address systemic issues; guide services, programs, and policies to support Minnesotans experiencing homelessness; and track progress in efforts to reduce and ultimately eliminate homelessness in Minnesota.



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Gathering the data

The 2015 study included 3,672 face-to-face interviews with adults and unaccompanied youth in emergency shelters, domestic violence shelters, transitional housing programs, and non-shelter locations such as meal sites, service centers, encampments, and other places not intended for housing. The survey was translated into languages most often needed. This year, 25 interviews were completed in Spanish, 15 in Somali, and 2 in Hmong. In addition to the interviews, shelter staff provided counts of adults, youth, and children staying in all emergency shelters, domestic violence shelters, transitional housing, and a few Rapid Rehousing programs and emergency service voucher sites.

What we learned

On October 22, 2015, Wilder Research counted a total of 9,312 people experiencing homelessness in Minnesota. The number of people counted in the 2015 study under-represents the total homeless population. Many of those experiencing homelessness outside the shelter system are not found on the single night of the study, including youth who couch hop or find temporary places to stay, as well as people living in greater Minnesota where there are fewer shelters. Our counts and other research allow us to estimate how many people will be homeless throughout the year. In 2015, an estimated 15,000 people were homeless on any given night in Minnesota, with nearly 40,000 Minnesotans experiencing homelessness that year. These estimates do not include people on American Indian reservations or school-age children with parents staying in temporary, doubled-up arrangements defined as "homeless" under the McKinney-Vento Act.

Homelessness is down in Minnesota for the first time since 2006.

The number of people experiencing homelessness on a single night decreased by 9 percent between 2012 and 2015, following a jump of 32 percent between 2006 and 2012. In the 7-county Twin Cities metro area, there was a decrease of 8 percent between 2012 and 2015, while in greater Minnesota this decrease was 13 percent. The decrease in greater Minnesota is likely due in part to difficulties finding people staying outside the shelter system.





Young people are most at risk of experiencing homelessness.

Of all age groups, children and youth age 24 and under are the most likely to be homeless in Minnesota. This includes children with their parents (35%) and youth (minors and young adults) on their own (16%). While the population of children experiencing homelessness with their parents decreased by 7 percent from 2012 to 2015, they still represent over one-third of the overall homeless population. Nearly half (47%) of these children are age 5 or under. One-quarter of parents report having a child with an emotional or behavioral problem, and over 34 percent report that their school-age child has been a victim of bullying.

African Americans and American Indians also face a disproportionate risk of homelessness.

African Americans and American Indians are far more likely to be homeless than members of other races. African Americans make up 39 percent of homeless adults, but only 5 percent of adults statewide. American Indians make up 8 percent of homeless adults, compared to 1 percent statewide.

The number of homeless older adults age 55 and older are increasing, but they are still the least likely to be homeless.

Adults age 55 and older who are homeless increased by 8 percent since 2012. There was a notable increase in the number of older adults in Twin Cities metro emergency shelters, where the number of older adults increased by 21 percent since 2012. However, the growth in the number of homeless older adults is similar to the growth of this age group in the overall Minnesota population. 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. For instance, older homeless adults were more likely than other homeless adults (71% vs. 51%) to have reported a chronic health condition.

Eight percent of homeless adults have served in the military.

This proportion is the same as the overall adult Minnesota population and similar to previous surveys. Nearly half (43%) of homeless Veterans report having service-related health problems. Of these, mental health and hearing problems are the most common. Fewer than half of Veterans who are homeless report currently receiving any Veteran benefits.

Top reasons Minnesotans are homeless

Not enough affordable housing. Adults most often reported leaving their last housing due to their inability to afford rent or mortgage (36%), and 22 percent reported there is no housing available they can afford. Forty-one percent of homeless adults are on a wait list for subsidized housing, and another 14 percent cannot get on the wait list because it is closed. A general rule for

housing affordability, especially for lower-income households, is that housing should cost no more than 30 percent of monthly income. At the time of the study, fair market rent determined annually by the federal government was \$796 per month for a one-bedroom apartment in the Twin Cities and \$558 per month in greater Minnesota. Both exceed the \$550 median monthly income among homeless adults.

Lack of employment. The lack of employment and income are key reasons why people become homeless and primary barriers to becoming stably re-housed. Nearly one-third (30%) report losing a job or having their hours cut as a reason for losing housing, and 38 percent of homeless adults report a lack of job or income as a main barrier to obtaining housing. Almost two-thirds of homeless adults are unemployed. The median length of time people have been unemployed is 23 months, which is unchanged since 2012.

Obstacles to maintaining housing: Chronic health conditions. More than half (60%) of homeless adults report a significant mental illness. This includes being diagnosed with at least one of the following: anxiety or panic disorder (42%), major depression (39%), bipolar disorder (22%), personality disorder such as antisocial or obsessive compulsive disorders (15%), schizophrenia (7%) or other paranoid or delusional disorders (6%). Fifty-one percent have a chronic health condition. The most common reported were high blood pressure (30%), asthma (20%), other respiratory problems (12%), other heart or circulatory problems (11%), and diabetes (9%). One in five (21%) homeless adults has been diagnosed with a substance abuse disorder. This includes either alcohol abuse (16%) or drug abuse (14%) disorders. Eighty-three percent of homeless adults have either significant mental illness, chronic health condition, substance abuse disorder, or evidence of a traumatic brain injury. Forty-four percent have more than one of those conditions.

Obstacles to maintaining housing: Abuse and violence. Violence is a common experience for those who lack housing. Thirty-five percent of homeless women are homeless as a result of domestic abuse. Nineteen percent of homeless adults report being physically or sexually assaulted while homeless. More than 37 percent of homeless adults (50% of women and 24% of men) report they have stayed in an abusive relationship because they had nowhere else to live, and 21 percent report leaving their last stable housing because of abuse by someone they lived with. Thirty-nine percent of adults and 46 percent of youth were physically abused as a child.

Ripple effects caused by discrimination in housing and other systemic inequities.

There continue to be glaring and persistent racial disparities in the populations of Minnesotans experiencing homelessness. Racial disparities occur among all age groups, genders, and geographic locations. Thirty-nine percent of homeless adults in Minnesota are African American, but African Americans make up only 5 percent of Minnesota's total population. American Indians make up 8 percent of the adult homeless population, but represent only 1 percent of adults in Minnesota. Nearly three-quarters (73%) of homeless youth are African American, American Indian, Asian, Hispanic or of mixed race. But youth in these groups

represent only 26 percent of Minnesota's total youth population.¹ Nine percent of homeless adults and 18 percent of homeless youth identify as lesbian, gay, bisexual, transgender, or questioning (LGBTQ). Historical trauma and generational impacts of discriminatory housing policies and other systemic inequities have contributed to the overrepresentation of people of color and those who identify as LGBTQ in Minnesota's homeless population.

Conclusions

Homelessness is not only painful and stigmatizing for those experiencing it, but it is also seemingly intractable for those trying to fix it. Despite vigorous and targeted efforts to reduce homelessness, and despite many individual success stories, new people come into the shelter system every day. However, the overarching positive finding of Wilder Research's ninth triennial statewide study is that the total number of homeless people decreased for the first time since 2006. In all likelihood, the numbers we found would be significantly higher were it not for the wide range of supportive services available in Minnesota. Nonetheless, on one October night in 2015, we found a total of 9,312 people experiencing homelessness in Minnesota. Children who were with their parents make up over one-third of this figure (35%).

While the total number of people experiencing homelessness in Minnesota dropped by 9 percent from the 2012 study, an alarming number of adults, youth, and children still experience homelessness each day. We must address two fundamental issues if we are to see these numbers continue to decline: the availability of affordable housing and providing individuals and families with the supports they need to remain stably housed. Neither issue is simple.

Finding affordable and accessible housing

The 2015 study shows us that 41 percent of homeless adults are currently on a waiting list for subsidized housing, with an average wait time of nearly a year. An additional 14 percent report they are unable to get on a waiting list because those lists are closed. The private housing market is not particularly well suited to serve those with the least income, especially when vacancy rates are low, as they are now. Consequently, most of the work of creating affordable housing, including permanent supportive housing with services, falls to the nonprofit and government sectors. For those who need ongoing supportive services to stay in housing, new supportive housing developed as part of the regional and statewide plans for ending homelessness has been successful. However, the availability of supportive housing, as well as rental units for low-income people, does not meet the need.

¹ U.S. Census Bureau. 2014 American Community Survey 1-year Estimates [statistics from data file]. Retrieved from <u>http://factfinder2.census.gov</u>

Maintaining housing

With regard to maintaining stable and affordable housing, the picture is perhaps even more complicated. Over the years the study has been conducted, we have seen measurable increases in the level of distress among those experiencing homelessness. For instance, we have consistently asked about five serious challenges that may impact an individual's ability to keep stable housing; these include: serious mental illness, chronic physical health problems, traumatic brain injury, chemical dependency, and a recent history of incarceration. In 2003, 77 percent of adults had at least one of these five barriers. In 2015, 83 percent had at least one of these barriers. This illustrates the increased share of individuals who may need community supports to live independently, even if reasonably priced housing opportunities are more available. As a state, we need to create more affordable housing, but we also need to ensure that additional supports are available for individuals and families to maintain that housing once they have it. This is especially important for the growing proportion of people who have more serious barriers to living independently.

Preventing homelessness

We must also consider the fact that the numbers in this report represent only those who are currently homeless. The study estimates that 150 or more Minnesotans become newly homeless each week. To fully address the issue of homelessness in Minnesota, we have to examine the range of ways in which an individual or family may become homeless in the first place and what it might take to interrupt such an occurrence before it happens. Preventing homelessness takes a broad array of supports, including support from family and community, and services provided by the public and private sector. These collectively make up our social safety net, but most are better designed to lift the fallen than to stabilize those about to fall. With rare exception, the public safety net has been strained in recent years, and funding support, adjusted for inflation, has been reduced at the same time that economic obstacles have multiplied.

While the number of those experiencing homelessness decreased between 2012 and 2015, we still need to address homelessness in a more effective and comprehensive way than we do now. To do so, we must agree on the dimensions of the problem, use strategies that are known to work, broaden public awareness and commitment to solving the problem, expand the safety net to better catch those at risk of losing housing, and back up these efforts with resources that match the need.



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Here for good.

For more information

This summary presents highlights of the <u>Homelessness in Minnesota:</u>. <u>Findings from the 2015 Minnesota Homeless Study</u>. For more information about this report contact Wilder Research at 651-280-2700 For more information on homelessness in Minnesota, go to <u>mnhomeless.org/</u> NOVEMBER 2016