

2012 Minnesota Homeless Study

Homeless Children and Their Families

On any given night, more than 3,500 children in Minnesota are homeless, and half are age 5 and younger.



Homelessness is especially traumatic for children. Studies of homeless children show that they have more health problems than children with housing, more trouble learning to develop healthy relationships, and more difficulty staying on track in school. Long-term studies show that they are more likely than other children to be homeless as adults, and that young adulthood is a particularly risky time of life for them. Homeless parents have high rates of chronic physical and mental illness, and many mothers are homeless as a result of domestic violence.

This report is based on the 2012 Minnesota statewide homeless survey, the latest in a series of triennial surveys conducted since 1991 to document the needs and characteristics of homeless adults, youth, and children across Minnesota. Other than small, specialized studies, most surveys of homeless people include only adults, and provide little information about the children who are with them. The Minnesota homelessness study is one of the richest sources of point-in-time and trend data about homeless children and their parents.

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What do we mean by homeless?

A homeless adult is any person whose primary nighttime residence is a supervised, publicly- or privately-operated temporary living accommodation, including emergency shelters, transitional housing, and battered women's shelters; or whose nighttime residence is not meant for human habitation, such as under bridges or in cars. This is based on a definition by the U.S. Congress.

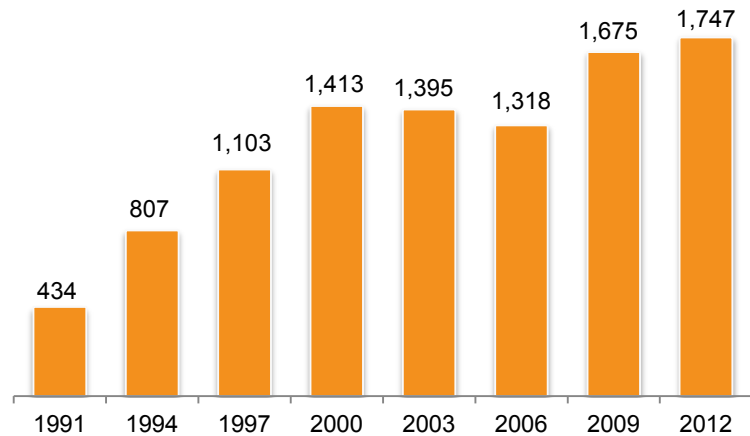
By law, this definition is expanded for youth age 17 or younger to include those who stay temporarily in other people's homes, with or without their parents, because they have nowhere else to live.

In 2009, the definition for adults also expanded to include a small proportion of those who stay temporarily in other people's homes: if they have children with them, have a history of residential instability, and have a serious barrier to housing or employment.

Key facts at a glance

On October 25, 2012, counts conducted in shelters as well as interviews conducted in non-shelter locations show that 1,747 families were homeless in Minnesota.

TRENDS: NUMBER OF HOMELESS FAMILIES IN MINNESOTA



These families included 5,591 people; of these, 63 percent were children with their homeless parents. Two-thirds of homeless families (68%) were currently staying in the metro area.

Most homeless parents with children were staying in transitional housing programs (51%), followed by emergency shelters (26%), and battered women's shelters (10%). An additional 221 families were interviewed in non-shelter locations.

PEOPLE IN FAMILIES IN SHELTERED AND UNSHELTERED SETTINGS

	In shelters	In non-shelter locations	Total
Number of families	1,526	221	1,747
Number of parents in families	1,757	288	2,045
Number of children with parents	3,145	401	3,546

The number of homeless families and children is rising.

Following decreases in 2003 and 2006, the number of homeless children and families has increased to its highest level since the study began in 1991. The number of homeless children in 2012 is more than four times greater than the 875 found in 1991. These findings parallel national studies that also show faster growth in the numbers of homeless families than among homeless single adults.

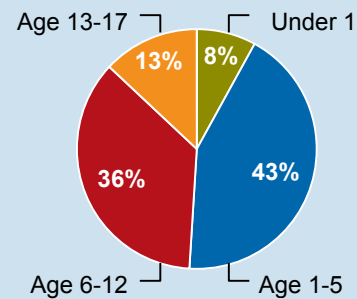
Homeless children tend to be young. Fifty-one percent of homeless children were age 5 or younger (including 8% who were less than 1 year old). Thirty-six percent were age 6 to 12, and 13 percent were 13 to 17. The proportion of children in these age groups is similar across both the metro area and greater Minnesota.

Many homeless parents have children who are not with them. Nearly half (47%) of all homeless adults were parents of children age 17 or younger, yet only 25 percent had at least one child with them. Seven percent of homeless parents reported they did not have their children with them because of program restrictions at the shelter.

While single adults head most homeless families, a growing number are headed by couples. Most homeless households with children were headed by single adults, especially single females. In 2012, 17 percent of homeless families with children were headed by couples, a 22 percent increase in two-parent homeless families since 2009. Some families avoid shelters, because some shelters exclude fathers and older male children for safety reasons. Two-caregiver families were more common in greater Minnesota (21% vs. 15%) and non-shelter settings (30% vs. 15%).

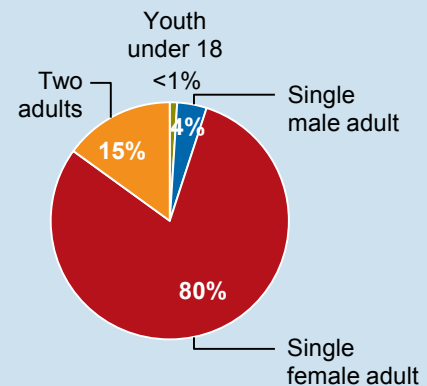
AGES OF HOMELESS CHILDREN

Statewide

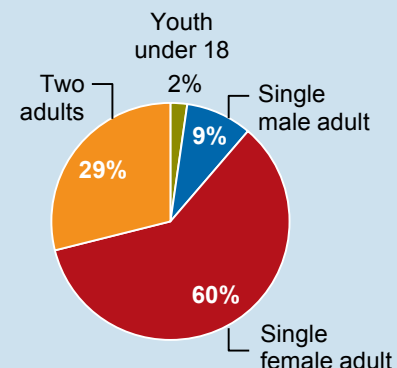


A SINGLE WOMAN HEADS MOST HOMELESS FAMILIES IN MINNESOTA

Heads of sheltered families (N=1,526)

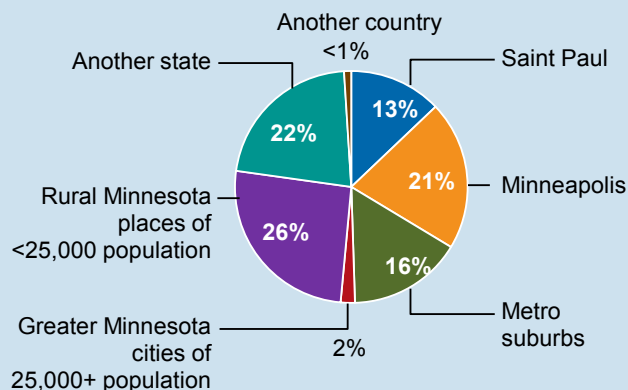


Heads of unsheltered families (N=221)

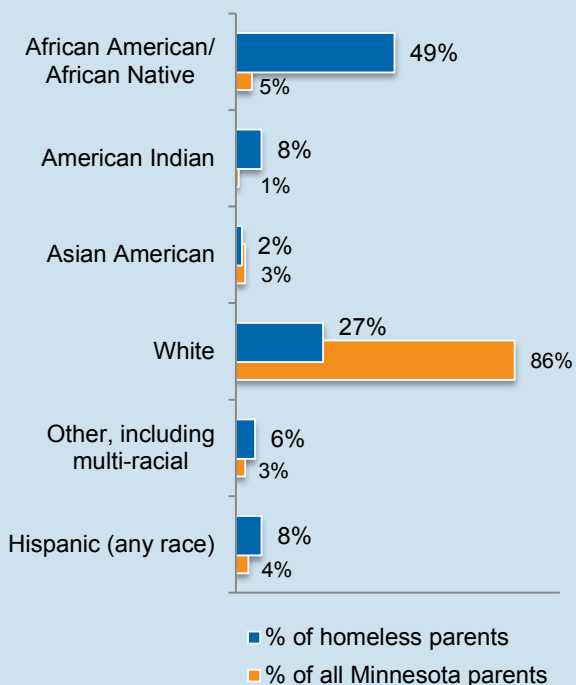


Source: Wilder Research, 2012.

WHERE PARENTS LAST HAD REGULAR HOUSING



RACE AND ETHNICITY OF HOMELESS PARENTS



Sources: Data on homeless parents, Wilder Research, 2012.
Data on general population, U.S. Census Bureau 2012 American Community Survey.

Shelters are less available in greater Minnesota.

Greater Minnesota parents were less likely to be in emergency shelters than metro area parents (13% vs. 33%) and more likely to be in non-sheltered or unknown arrangements (27% vs. 4%). They were more likely to have patched together a series of informal arrangements including spending time temporarily in other people's homes.

Most families lived in Minnesota before becoming homeless.

Three-quarters (76%) of homeless parents had their last regular housing in Minnesota. Half (50%) had their last housing in the seven-county Twin Cities area, including 16 percent who were living in the Twin Cities suburbs when they became homeless. Most of those who became homeless in greater Minnesota were living in rural areas (places of less than 25,000 population).

African Americans make up nearly half of homeless parents; racial disparities are severe.

Compared to their representation in the overall Minnesota population, African American and American Indian families are more likely to be homeless than other racial or ethnic groups. African Americans are 5 percent of Minnesota parents but half of homeless parents in Minnesota, while American Indians are only 1 percent of all Minnesota parents yet 8 percent of homeless parent.

A deeper look

Keep in mind that the information presented comes from a one-night survey. People who are homeless frequently or for a long time are more likely to be found by such a study than people who are homeless only once or for a short time. This means that:

- The actual number of homeless families is almost certainly under-represented in this study, since parents with children tend to be homeless for shorter times than adults without children.
- This study will tend to under-report the characteristics that are more common among families who are homeless for only a short time. For example, since women in short-term shelters are more than twice as likely to be fleeing domestic violence (compared to women in longer-term transitional housing), the true incidence of this problem among all homeless families over the course of a year is higher than the 27 percent found in this one-night study.
- Many of the sections in this report update information from a similar report developed from previous surveys. When meaningful, other years are cited as points of comparison.

Children's health, nutrition, and mental health

Studies show that children in poor families have more physical and mental health problems than those in non-poor families, and homeless families have even more health issues than poor families. While homelessness has lasting consequences for children at any age, the effects are especially harmful in the earliest years of life.

Poor health among homeless adults and children probably reflects a mix of cause and effect, and it is difficult to separate the influences of homelessness and poverty, since most homeless families are also poor. On the one hand, people who live in poor neighborhoods are exposed to more environmental hazards (including



lead, poor air and water quality, and crime) that can cause physical and mental disabilities. On the other hand, some people with disabilities are more likely to be or become poor as a result of a decreased ability to work or to make and maintain strong social networks.

Homeless children are often separated from their parents. Some shelters, to protect vulnerable clients, do not allow older boys or fathers to stay in the same place as women and younger children. In some jurisdictions, children may be placed in foster care if their parents become homeless. Sometimes homeless parents prefer to place children unofficially with family or friends in order to keep them housed. Whether or not children stay with their parents during an episode of homelessness, the experience is likely to interfere with their development of skills for forming and maintaining healthy, stable relationships.

Chronic or severe physical health problems. Fifteen percent of homeless parents reported that at least one of their homeless children had a chronic or severe physical health problem.

Access to health care. Most homeless parents reported being able to obtain health care for their children when needed, but 6 percent reported that there had been occasions during the past year when they had been unable to obtain needed physical health care for them. Ten percent had been unable to obtain needed dental care, and 5 percent had been unable to obtain needed mental health care. Parents in greater Minnesota were somewhat more likely to report having difficulty obtaining dental care for their children (13% were unable to obtain it in greater Minnesota, compared to 9% in the metro area). Parents not using shelter programs were generally less able to obtain all kinds of health care when needed.

Missed meals. Eleven percent of homeless parents reported at least one child had to skip meals in the previous month because there had not been enough money to buy food. This is up slightly from the 8 percent who reported children missing meals in 2009. There were more reports of missed meals among families not in shelters (17% vs. 11%).

Emotional or behavioral problems. Twenty-six percent of homeless parents reported that at least one of their children had an emotional or behavioral problem that interfered with their daily activities. Parents in greater Minnesota were somewhat more likely to report emotional or behavioral problems among their children than in the metro area (29% vs. 25%).

These health and nutrition measures are similar to those found in 2009 overall. However, in 2012, we observed a greater level of difficulty for children with parents in outreach settings (those not found in shelters). Among this group of families, 12 percent of parents reported an inability to secure needed dental care for their children, 17 percent said their children had had to skip meals in the past month, and 9 percent reported they had been unable to obtain needed health care for children in the past year.

Separation from parents. Of homeless people who had any minor children, nearly half (48%) reported that at least one child was not staying with them on the night of the survey. This included 79 percent of male parents, but only 32 percent of female parents. Seven percent of homeless parents reported they did not have their children with them because of program restrictions at the shelter.

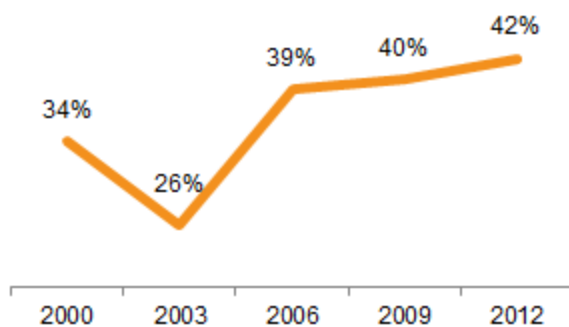
Seven percent of parents report that there is a child protection case open for one or more of their children. These parents are more likely to also report having children who are not with them (38% vs. 19%).

Children's education

Although education is an important pathway out of poverty, poverty itself can introduce serious barriers to getting an adequate education, of which homelessness is one of the more serious. Unsafe or unstable housing and frequent moves often reduce attendance and impair children's ability to concentrate. Other barriers to homeless children's school attendance and success include problems with transportation, difficulty obtaining prior school records, crowded or unfamiliar settings that interfere with sleep, and lack of appropriate hygiene, clothing, and school supplies. Federal law requires that schools help homeless children to overcome some of these barriers.

Early care and education. Forty-two percent of parents with children under 6 reported having at least one child enrolled in Head Start or some other early education program. This number is up slightly from the 40 percent in 2009 and 39 percent in 2006, and particularly higher than in 2003 (26%) and 2000 (34%). About one-third (34%) of parents were unable to obtain regular child care when they needed it during the previous year, the same proportion as in 2009. Parents of children age 5 or younger only were much more likely to report problems obtaining child care (41%) than parents with only school-age children (17%). Families where a father was present were less likely to have trouble obtaining child care (29% vs. 36%), and slightly more likely to have a child in early education (44% vs. 40%).

ENROLLMENT IN HEAD START OR OTHER EARLY EDUCATION



Learning or school problems. Forty-seven percent of homeless parents reported that at least one of their children age 6 or older had a learning or school problem. Eleven percent reported a child had repeated a grade. Parents in greater Minnesota were more likely to report that their child was a victim of bullying (41% vs. 28%) and/or had difficulties with peer relationships (31% vs. 20%).

School attendance. Eighty-seven percent of homeless parents reported that all of their school-age children attended school on the date of the survey. This percentage has been close to 90 percent since the study began in 1991. Attendance tends to be higher in the metropolitan area (89% vs. 84%).

Thirteen percent of parents reported that their children had trouble going to school because of their housing situation, a slight increase from 11 percent in 2009 and rates below 10 percent in 2003 and 2006. Not surprisingly, the problem was greatest among the small number of families not living in shelters, where 31 percent had trouble attending school.

Parents' housing history and access to housing

In Minnesota and nationwide, there is a growing gap between housing costs and wages, especially for workers with less than a college education. There is no place in the United States where a full-time, minimum-wage worker can afford the fair market rent for a one-bedroom apartment (defined by the U.S. Department of Housing and Urban Development). The most common reason cited among homeless parents for having left their last housing situation was being unable to afford the rent or monthly payments (40%). At the same time, federal housing subsidies for poor households are also shrinking.

The shortage of affordable housing is clearly a large contributing factor to the causes of homelessness among families and single adults. It also increases the length of time that people are homeless, making it hard for them to move out of shelters and thereby free up space for other homeless people.

In the 2009 study, we saw clear evidence that the shortage of affordable housing was made much more acute by losses in family income due to the recession and the accompanying foreclosure crisis. Some of these issues remained prevalent in 2012. For example, foreclosure rates remained high, although monthly median income for homeless parents increased slightly since 2009.

The cycle of homelessness

For many in the homeless population, their first experience with homelessness is as a child.

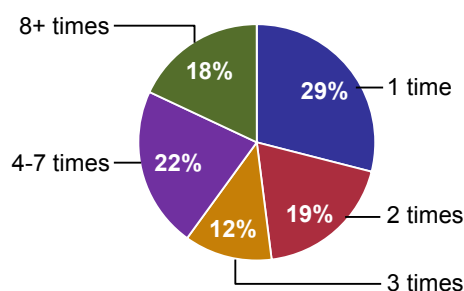
Nearly one-third of homeless parents (30%) had their first experience with homelessness when they were less than 18 years of age. This is even more true among parents of young children age 0 through 5; 43 percent of these parents reported first experiencing homelessness as a child.

These figures point to a disturbing cycle of homelessness that must be reversed if we want to end homelessness among children and families.

Prior experiences with homelessness. Twenty-nine percent of homeless parents reported that this was the first time they had been homeless (the same percentage as for homeless non-parents). Just over half (51%) had experienced at least three episodes of homelessness.

Thirty percent of homeless parents (and 43% of homeless parents with children age 0 through 5 only) had themselves first experienced homelessness as a child, down slightly from 34 percent in 2009. This pattern of transmitting homelessness from one generation to the next, if it continues, may make it much more difficult for Minnesota to end homelessness.

NUMBER OF TIMES PARENT HAS BEEN HOMELESS



Childhood stress and cross-generational poverty. A large body of research consistently shows the link between high levels of stress and decreased success in a variety of areas, including school, work, and relationships. “Toxic stress” is different from normal levels of stress, which help to promote resilience. Children and families in poverty typically experience the accumulation of many chronic stresses—including concerns for safety, inadequate sleep, inadequate nutrition, and disrupted relationships due to frequent moves. Racial discrimination is another cause of chronic stress for many children and parents.

Chronic stress causes damage to the body and brain, reduces overall physical health, and contributes to poor outcomes for children by limiting short-term working memory, which is critical to learning and judgment.¹ If chronic poverty is combined with other risk factors, such as neglect or abuse, or exposure to parental mental illness or substance abuse, or exposure to violence, the odds of long-term damage to the child’s learning capacity are multiplied. However,

¹ Evans, G.W., & Schamberg, M.A. (2009). “Childhood poverty, chronic stress, and adult working memory.” *Proceedings of the National Academy of Sciences*, 106(13), 6545-6549.

these effects can be minimized through effective services to children and their families.²

Parents with a prior history of homelessness were more likely than those who were first experiencing homelessness to report that their children had emotional or behavior problems that interfered with daily activities (28% vs. 22%) and to have trouble obtaining needed child care (37% vs. 26%).

Previously-homeless parents reported higher rates of most adult health disabilities than did parents who were homeless for the first time, as well as more experiences of violence and lower employment rates.

Length of time homeless. About 4 in 10 parents (39%) had been homeless for a year or more. The prevalence of long-term homelessness was similar among parents in the metro area and greater Minnesota.

The proportion of parents who had been homeless for a year or more grew from 14 percent in 1991 to 44 percent in 2009, falling slightly in 2012 to 39 percent. This general increase may reflect the shortage of affordable housing to move to after a temporary shelter stay.

Unsheltered families. Fourteen percent of parents were not using the shelter system at the time of the survey, much lower than the proportion of non-parenting adults not using shelters (33%). This proportion was much higher in greater Minnesota (32%) than in the metro area (5%), similar to 2009. Because this study is not designed to find all homeless people not using shelters, we do not know how many more unsheltered families there were in Minnesota. Evidence from other studies suggests that our findings accurately reflect a common pattern in which homeless families outside of urban areas are less likely to use shelters.

One quarter (25%) of homeless parents had spent at least one night in October doubled up with friends or family. Only nine percent had spent any nights outside, or in a vehicle or abandoned building.

During October 2012, non-parenting adults in the survey stayed outside for an average of 5.7 nights, compared to an average of 0.8 nights for homeless parents. Parents in greater Minnesota also spent more nights outside (1.2 average) than did metro-area parents (0.6 average).

During the same period, non-parenting adults reported an average of 4.6 nights doubled up, compared to an average of 4.1 nights for parents. Parents in greater Minnesota spent more nights doubled up (7.2 average) than did metro-area parents (2.7 average).

Unsuccessful attempts to access shelter. Parents were slightly less likely than non-parenting adults to have been turned away in attempts to obtain shelter. Nineteen percent of parents said they had been turned away in the preceding three months due to lack of bed space, compared to 23 percent of non-parents. When this happened, parents were most likely to end up sleeping in a friend or family member's house (46% of those turned away, compared to 23% of non-parents). Next most common was sleeping in a car, abandoned building, or outside (15% of parents, 17% of non-parents), followed by another shelter (15% of parents, 19% of non-parents), and a motel or other place for which they were given a voucher (13% of parents, 4% of non-parents).

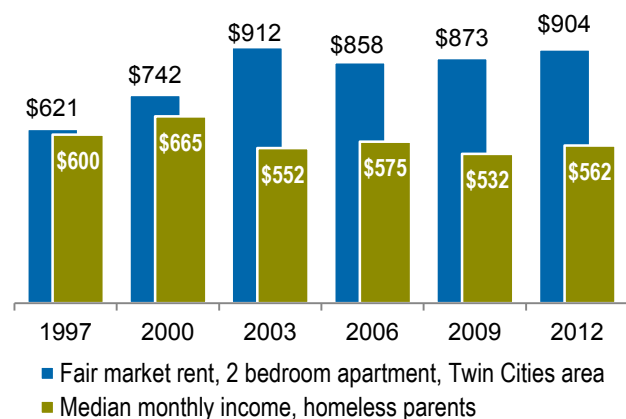


² See, for example, Shonkoff, J.P. (2010). "Preventing toxic stress in children." *Preventionworks* (newsletter of Prevent Child Abuse Minnesota), Fall/Winter 2010. Reprinted by permission from Project Syndicate and available at: <http://www.project-syndicate.org/commentary/shonkoff1/English>

Ability to pay rent. Asked what prevented them from getting housing, homeless parents most commonly mentioned the lack of available housing they could afford. Homeless parents said they could afford to pay an average of \$427 per month (median=\$400). In the metro area, parents said they could pay \$477 per month (median=\$500), and \$321 (median=\$300) in greater Minnesota.) This includes the 13 percent of parents who said they could not pay anything at all. Standard guidelines consider housing affordable if it costs no more than 30 percent of a household's monthly income; this is especially important for low-income families, who do not have as much left for basic needs after paying for housing.

The figure below compares fair market rent and the *actual* median total monthly income reported by homeless parents since 1997. Income is up slightly from 2009, but so are the rates for fair market rent.

COMPARING FAIR MARKET RENT AND MEDIAN MONTHLY INCOME OF HOMELESS PARENTS IN MINNESOTA



Sources: Homeless data, Wilder Research. Fair market rents, Wilder calculations using data from U.S. Department of Housing and Urban Development.

Size of apartment needed. Forty-seven percent of parents said they would need two bedrooms, and 40 percent said they would need three or more. Units with three or more bedrooms are particularly hard to find in the housing market.

Access to subsidized housing. On the date of the survey, over half (55%) of homeless parents were on a waiting list for subsidized housing, and had been waiting for an average of 14 months. Another 21 percent had tried to get on a waiting list but were unable to because it was closed. During the past two years, 5 percent had received a housing voucher they were unable to use because no landlord would accept it (4% metro, 8% greater Minnesota).

Long-term homeless families and those in transitional housing were more likely to be on a waiting list for subsidized housing.

Parent health and disabilities

Personal characteristics and experiences also can contribute to homelessness, and are more likely to contribute to loss of housing among families who have fewer resources. Studies elsewhere have found that homeless parents are more likely than other parents to have chronic health conditions and mental health problems (especially depression). Such problems do not always interfere with stable employment or housing, but the fewer other personal, social, and financial resources a person has, the greater the chance they will be unable to weather typical crises.

Chronic physical health problems. Forty-eight percent of homeless parents report having at least one serious, chronic physical health problem (such as asthma, high blood pressure, or diabetes). This includes 50 percent of metro area parents, and 43 percent of parents in greater Minnesota. Of the parents with chronic health problems, 26 percent had not received care for one or more of their conditions during the previous year.

Mental health problems. Nearly half (45%) of parents reported being recently told by a medical professional that they had a serious or persistent mental health disorder, slightly lower than non-parents (50%). The most common mental health problem reported by parents was major depression (37%), followed by post-traumatic stress disorder (23%) and bipolar disorder (16%). Rates of mental health problems have been rising steadily since the survey began in 1991. In 2012, mental illness rates for homeless parents were higher in greater Minnesota compared to the metro area (60% vs. 48%). Among those reporting a serious mental illness, 19 percent in greater Minnesota and 23 percent in the metro area reported that they had not received either in-patient or outpatient care for their mental health in the past two years.

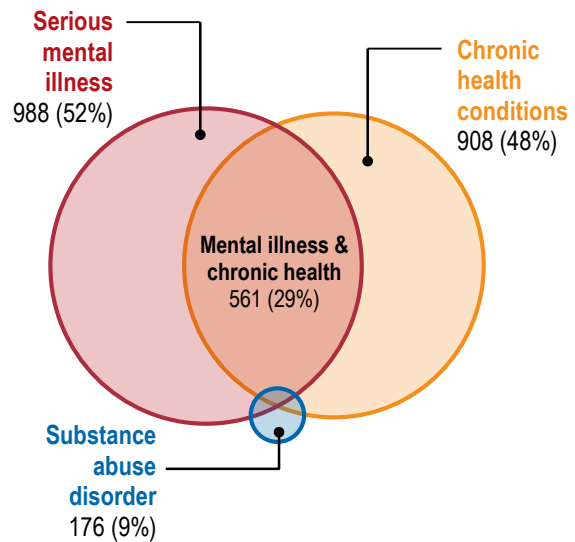
Substance abuse. Twelve percent of homeless parents considered themselves to be alcoholic or chemically dependent, compared with 33 percent of non-parenting homeless adults. Six percent reported that they left their last housing because of a drinking or drug problem, compared with 22 percent of homeless non-parents. Nine percent said that a health professional had told them in the last two years that they had an alcohol and/or drug abuse disorder, compared to 27 percent of non-parenting homeless adults. Seven percent of parents had a dual diagnosis of at least one mental health problem and a drug or alcohol abuse disorder. This is less than one-half of the rate for homeless non-parents (20%) in 2012.

Parents who suffer from depression. Studies show that mild to severe depression is common among parents who are struggling with poverty. It is estimated that at least one in ten infants in poverty is being raised by a mother with severe depression – a condition in which the mother is unable to respond to the child's needs adequately, reducing the child's ability to develop language, self-regulation, and skills to explore the environment.³ These risks are multiplied by the fact that depressed mothers are more likely than similarly

poor mothers to also suffer from domestic violence and substance abuse, which create additional vulnerabilities for their infants.

INCIDENCE AND CO-OCCURRENCE OF HEALTH CONDITIONS AMONG HOMELESS PARENTS

Total homeless parents surveyed: 1,903 (100%)
 Proportion with neither serious mental illness, chronic health conditions, or substance abuse disorder: 548 (29%)
 Proportion with all three: 71 (4%)



Parents' needs for health care. At the time of the survey, 41 percent of parents felt they needed to see a medical professional about an emotional or mental health problem. This was higher than the 35 percent of parents who expressed such a need in 2009. Only 3 percent felt they needed to see a health professional about an alcohol or drug problem (the same as in 2009).

About half of all homeless parents had either a serious mental illness (52%) or a chronic health condition (48%), while 29 percent suffered from both. Fewer homeless parents (9%) had a substance abuse disorder (substantially less than the 22 percent of the overall homeless population). Only 29 percent of homeless parents did not have a chronic physical health problem, mental health problem, or substance abuse disorder. Parents who had such problems were more likely than non-parents to have received care for them within the past 12 months: 73 percent of parents had received care for each such problem they had, compared to 67 percent of non-parents.

³ Vericker, T., Macomber, M., & Golden, O. (2010). *Infants of depressed mothers living in poverty: Opportunities to identify and serve*. The Urban Institute.

Domestic violence. Thirty-one percent of mothers reported that they were homeless because of domestic abuse. These rates are higher in greater Minnesota (38%) than in the Twin Cities metro area (29%). Parents in greater Minnesota were also more likely than metro area parents to report seeking medical care for injuries caused by violence (14% vs. 9%), and having stayed in an abusive situation for lack of any other housing option (47% vs. 40%).

Criminal history. Over one-quarter of homeless parents (29%) had a history of incarceration at some time in their lives, including as a juvenile for more than a week (17%), in a county jail or workhouse for a month or more (18%), or in a state or federal prison (6%). Seven percent of parents had been incarcerated within the past two years. Long-term homeless parents, and those not in the shelter system, were especially likely to have been incarcerated within the past two years.

Employment and income of parents

For most people, employment is the way to acquire the income needed to afford housing. Work is also increasingly a necessary condition for receiving a variety of forms of public assistance, including welfare, SNAP (Supplemental Nutrition Assistance Program), and child care subsidy. However, as mentioned above, some people may be unable to earn enough in a full-time job to afford housing.

People without housing usually find it harder to keep or get jobs. In addition, many of the health conditions and problems that are more common among homeless people also interfere with employment, including chronic physical health conditions and mental illness. The extra care needs of children with health or mental health problems can also make it hard for parents to maintain stable employment. Other employment barriers common among people experiencing homelessness include lack of reliable child care and transportation, and lack of education and training suitable for the jobs that are available.

Employment. Thirty-three percent of homeless parents were working at the time of the survey; 11 percent were working full-time. Those proportions are greatly reduced from the peak employment rates found in 2000. Employment rates are higher for parents than for other homeless adults (33% vs. 20%). Among parents, rates were lowest for those staying in battered women's shelters (16%) and emergency shelters (22%). Those in transitional housing had the highest rates of employment (43%).

Of parents who were employed, 62 percent earned wages of less than \$10 per hour. Among metro-area parents, 57 percent earned less than \$10 per hour, compared with 71 percent in greater Minnesota. Parents not in shelter programs and American Indian parents more often reported low hourly wages.

Twenty-eight percent of homeless parents had left their last housing because they had lost a job or had their hours cut, one of the most common reasons given.

Sources of income. Among homeless parents, 27 percent reported their main source of income was from steady employment (26% in the metro area, 29% in greater Minnesota). Forty-four percent reported the Minnesota Family Investment Program (MFIP, or welfare) as their main source of income.

Job loss and loss of benefits. Twenty percent of unemployed homeless parents had been laid off in the preceding six months. This is nearly three times the percentage in 2003. Of this group, only 5 percent had received unemployment benefits in the previous year.

Child support. Forty-two percent of parents reported that there was an order for at least one of their children to receive child support. Of these parents, 58 percent of men reported that support was being provided for all of their eligible children, but only 32 percent of women said it was. Sixteen percent of all parents, and 36 percent of those with child support orders, reported receiving at least some income from child support in the month of the survey.

Some issues to consider

Homeless families and children have made up the fastest-growing segment of homeless people in Minnesota since the statewide homeless survey began in 1991, a troubling trend. Equally troubling is the fact that so many of these children – about half – are age 5 or younger, and particularly vulnerable.

Although parents are less likely than non-parenting adults to be turned away in attempts to obtain shelter, parents' ability to find shelter in greater Minnesota is especially problematic. While most homeless families are in some type of transitional housing program or shelter, parents in greater Minnesota are less likely to be in emergency shelters and more likely to be in non-sheltered situations compared to metro area parents.

Homeless parents also face serious challenges such as chronic physical and mental health issues. These challenges, coupled with the lack of affordable housing – especially housing with a sufficient number of bedrooms to accommodate all of the children in the family – pose ongoing and serious threats to homeless families' ability to obtain housing.

They also pose considerable risk to the health and overall well-being of children of homeless parents. While most homeless parents report that their children are at least attending school, nearly half have children who are coping with a learning or school problem. Many of these children are also contending with emotional and behavioral problems, or their own physical health problems. However, while more young children (age 5 or under) could benefit from enrollment in an early childhood program or childcare, the good news is that the proportion enrolled has increased over the years.

The facts that so many of these homeless parents experienced homelessness themselves as a child (especially parents of very young children), and that families are experiencing homelessness for longer and longer periods of time, speak to a cycle that is difficult to end. The factors contributing to family homelessness are complex, and no simple answers exist. Action is needed that addresses the pervasive issue of insufficient affordable housing and also provides parents and children with supportive services that consider their unique circumstances and developmental needs.



About the study

Data sources

The statewide homeless study is based on two data sources:

Interviews. Face-to face interviews were completed with 4,563 adults and unaccompanied youth experiencing homelessness on October 25, 2012.

Shelter census count. Detailed information about the total number of men, women, and children in residence on the night of the study was gathered from all providers of service in emergency shelters, time-limited transitional housing programs, domestic violence shelters, and emergency service voucher sites.

Types of shelter or non-shelter settings referenced in this report

Interviews were conducted in 390 shelters, temporary housing programs and in non-shelter locations throughout the state. We distinguish three types of shelter programs that serve homeless people:

- **Emergency shelters** – A safe place to sleep, generally open only evenings and overnight. May provide meals, housing information, and other services.
- **Battered women's shelters** – Safe refuge and advocacy for women and their children when fleeing an abusive situation.
- **Transitional housing** – Time-limited, subsidized housing that involves working with a professional to set and address goals to become self-sufficient.

For homeless people interviewed who were not in shelters on the date of the study, information from the survey gives some insight into the settings in which they had spent the most time in October. For analysis and reporting, we have identified two groups:

- **Informal arrangements** – People in this group were more likely to be in a house, apartment, or room in which they were allowed to stay on a temporary basis; or a motel room that they paid for (not provided by a voucher).
- **Unsheltered** – People in this group were more likely to be in cars, transportation depots, 24-hour businesses, buildings that are abandoned or unfit for habitation (lacking plumbing, electricity, or heat), or outdoor locations.

Data weighting

It is not possible to interview every person staying in shelters on the date of the study, although in 2012, nearly two-thirds (62%) of sheltered adults were interviewed. Therefore, survey results for sheltered adults have been statistically adjusted (or weighted) to reflect the actual adult populations residing in emergency shelters, battered women's shelters, and transitional housing programs (2,326 men and 2,412 women) on the day of the study. We do not weight the data collected from persons interviewed in non-shelter locations, because we do not know the actual number of people who were on the streets or not staying in shelters on the day of the study.

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FOR MORE INFORMATION

Find detailed results, data tables, special reports, and study methods from the 2012 and earlier studies at <http://www.wilder.org/Wilder-Research/Research-Areas/Homelessness/Pages/default.aspx>



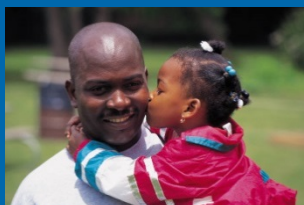
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Homeless Children and Their Families

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