CURA POLICY BRIEF

CENTER FOR URBAN AND REGIONAL AFFAIRS

Why Homeless Individuals "Get Stuck": A Closer Look at Shelter Use and Intervention Points in Hennepin County

This study is an assessment of how well homelessness programs funded by Hennepin County, in partnership with other agencies and organizations, are meeting the needs of the long-term homeless population. The study draws on newly available data on public and private shelter use to determine the nature and extent of long-term homelessness in Hennepin County.

HIGHLIGHTS

- More than three-fourths of shelter clients spent one month or less in shelter; 27% spent only one night, half spent less than seven days, and only 2% spent more than 180 days in shelter.
- Between 6 and 12 months, the probability of exiting from shelter drops dramatically. There is a notable increase in the probability of re-entering for people that have had more than one episode of shelter use.
- Users of mostly public and mostly private shelters did not have a significantly different average number of nights in shelter; however a mixed-use group had disproportionately more nights in shelter.
- Women had longer stays in shelter and were also more likely to receive a housing voucher.
- Analysis of a small sample of voucher recipients suggests that Housing First vouchers are not disproportionately distributed among users of mostly public and mostly private shelters; however, a group of mixed-use shelter users appeared to be underrepresented among voucher recipients.
- Most cities in Hennepin County are using the HUD definition of long term homelessness, although some incorporate separate measures of chronic and episodic homelessness. In addition, a small number of cities do not reference disability in their definition of long-term homelessness.
- Focus group interviews provided a nuanced picture of when and how people get stuck in shelter; shelter preference appeared to vary based on personal priorities.
- Shelter users in focus groups reported that the main reasons people get stuck is lack of information and addiction, followed by poverty/unemployment and disability.

KEY FINDINGS ....

From the literature review

• The long-term homeless includes both the episodic and chronic homeless, who disproportionately use services and shelter bed days.

• The major risk factors associated with length of homelessness are functioning and coping skills, age, arrest history, poor health, lack of support systems, and institutional incentives.

From focus groups

• Lack of information and addiction, followed by poverty/unemployment and disability, were cited as the main reasons people "get stuck" in homeless shelters.

• Participants seemed unaware of services to prevent people from getting stuck, but suggested one-on-one counseling and more aggressive case management services were necessary.

From data analysis

• 27% of individuals spent only one night in shelter, 50% spent six or fewer nights, 77% spent 1 to 30 nights, and 2% spent 181 or more nights in shelter.

• 76% of individuals experience a single spell of homelessness; 2% experience four or more spells.

• There is a statistically significant difference in the average number of nights in shelter by gender—women spend a greater number of nights in shelter and men experience shorter spells of homelessness than females

BACKGROUND ....

Heading Home Hennepin was launched by Hennepin County and the City of Minneapolis in 2006 as a 10-year plan to end homelessness in Hennepin County, and has since developed into a collaboration among Hennepin County government and nonprofit organizations that address issues of homelessness. A recent effort undertaken by Heading Home Hennepin is the Currie Avenue Partnership, a new partnership between the County, downtown businesses, and the faith community represented by Downtown Congregations to End Homelessness (DCEH). For the Currie Avenue Partnership, Housing First group residential housing (GRH) vouchers were distributed to 150 long-term homeless residents of the public shelters on Currie Avenue. To qualify for a voucher, participants had to be homeless and had to have been diagnosed with a disability, either mental or physical, that made it impossible for them to work for at least one month. Under the Housing First GRH program, participants give up the $203 in General Assistance they could be eligible for, and instead are provided with a rent-free apartment, case management services, and a personal-needs allowance of $89 each month. This effort is intended to get more people out of the shelter system and into permanent housing.

A recent report from Wilder Foundation analyzes shelter use patterns in Minnesota based on longitudinal information from the federally mandated Housing Management Information System (HMIS). In line with national data, those who stayed at emergency shelters for 30 days or less in Minnesota made up 74% of shelter clients. Another 22% stayed in shelters for one to three months, 3% stayed between three and six months, and only 1% stayed for a period greater than six months. The median length of time an individual spent in emergency shelter during 2008 was 15 days.

An ongoing challenge for Hennepin County is to assess how well programs like the Currie Avenue Partnership are meeting the needs of the long-term homeless population. This study draws on newly available data on public and private shelter use to determine the nature and extent of long-term homelessness in Hennepin County.

METHODOLOGY ....

The research team used four research methods: a literature review, qualitative analysis of focus group interviews, quantitative analysis of public and private shelter data, and an environmental scan.

Focus group interviews were held at a private shelter, a public shelter, and a permanent supportive housing site. Staff at these locations were given a screening tool prior to the interviews that was designed to ensure each group was representative of the overall long-term homeless population with respect to gender (90% men, 10% women), ethnic diversity, and length of homelessness. Participants were given a $10 gift for their participation. The research team used NVivo software to analyze the results of the focus groups and identify major themes.

The research team also analyzed public and private shelter data from the Homeless Management Information System (HMIS), available through Heading Home Hennepin. The U.S. Department of Housing and Urban Development (HUD) mandates the use of HMIS, which records longitudinal client data on shelter use for shelters across the country. This study included information on public and private shelter use from 2007 to 2009.

The environmental scan included six cities: Chicago, Illinois; Miami, Florida; Los Angeles, California; Portland, Oregon; Denver, Colorado; and St. Louis, Missouri. These cities represent diverse geographic regions across the United States and have well-defined plans for ending homelessness. All use some definition of chronic homelessness and provide housing services directed to that population.

CONCLUSIONS

The quantitative data analysis demonstrates that after six months and up to twelve months, an individual's probability of leaving the shelter system decreases. In addition, men have a 15% higher probability of exiting shelter than women in any given month. The qualitative analysis came to a different conclusion, as most focus group participants defined "getting stuck" as a condition specific to each individual's circumstances and not dependent on length of time in shelter. Many participants used language that echoed contemporary addiction theory, saying that each individual needed to hit "rock bottom" before they would be ready to put in the tremendous amount of work needed to exit the system. The literature review reached a similar conclusion, suggesting that a model of evaluating individuals based on their personal risk factors for long-term homelessness would be more effective than using a fixed length of time of homelessness.

The data analysis showed that the majority of individuals experiencing homelessness used primarily public shelters. A smaller number used primarily private shelters, and about the same number used a mix of both public and private. The quantitative shelter data analysis showed that contrary to what was expected, there were not large differences in length of stay between clients who primarily used either public or private shelters. However, clients who stayed in a mix of public and private shelters experienced a disproportionately high number of nights in shelter.

An analysis of a small number of individuals in the data set (26) who received Housing First certificates suggests that certificates had been distributed proportionately to shelter clients by shelter type, so that the largest number of certificates went to clients of public shelters, and a smaller number to those who used private shelters or a mix of shelters. The population that appears to be underserved by the existing certificate distribution guidelines is homeless individuals using a mix of public and private shelters, as they also tend to have longer stays in shelter.

POLICY IMPLICATIONS

The primary policy implications of this analysis revolve around the definition of *long-term homelessness*, and specifically eligibility for long-

MISSION STATEMENT

The Center for Urban and Regional Affairs (CURA) is an applied research and technical assistance center that connects the resources of the University of Minnesota with the interests and needs of urban communities and the region for the benefit of all. CURA pursues its urban and regional mission by facilitating and supporting connections between state and local governments, neighborhoods, and nonprofit organizations, and relevant resources at the University, including faculty and students from appropriate campuses, colleges, centers or departments.

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term homeless certificates. The research suggests that shelter clients begin to get "stuck" in shelter earlier than the one-year deadline and that by intervening earlier, Heading Home Hennepin might be able to serve the same population more efficiently and effectively. Exactly when to intervene is more difficult to tease out; anecdotal evidence suggests that 3 months may be a critical point for some, whereas the quantitative analysis suggests that the critical point is closer to the existing definition (somewhere between 6 to 12 months). Regardless, earlier intervention is a potential cost-saving strategy, but only if those who have a higher risk of getting stuck can be targeted. As a result of this research, the Currie Avenue Partnership GRH program began to focus on people in shelter who were there more than 150 days, the point at which people "get stuck."

To determine whether Heading Home Hennepin should intervene earlier, further research should be done on the costs and benefits of such intervention. The costs of long-term homelessness can be huge. Consequently, targeting interventions earlier at those who are at risk of becoming long-term homeless could prove cost beneficial. It is notable that the greatest reduction in shelter use could be accomplished by targeting people with a high number of *nights* in shelter, rather than those with a high number of *spells*. The cost savings from these prevented nights in shelter would need to be weighed against the cost of providing permanent housing and services to those clients.

The second recommendation is that Heading Home Hennepin should consider developing assessment tools that would more accurately predict which individuals have a high risk of getting stuck in long-term homelessness. More detailed assessment would require more time from an already overburdened shelter staff, and shelter clients may view the additional informational requests as unduly intrusive. However, the literature, the qualitative analysis, and the quantitative analysis all support the development and use of such a tool. The issue at hand is targeting the appropriate services to the right individual or groups of individuals at the optimum time; this is an extremely difficult task when the only thing known about the individual is their social security number and gender.

The final recommendation is that Hennepin County use pooled information on private and public shelter use to more accurately target housing assistance services. The analysis of a small number of Housing First voucher users suggests that the only population of shelter users that is currently underrepresented in the distribution of Housing First vouchers is the "mixed-use" population, which tends to use both public and private shelters. This group may be missed by shelter operators in both public and private shelters, because neither has a full picture of the extent of shelter use by individuals in this mixed group. This finding is similar to the literature review finding that the "episodic homeless" are often missed in counts of the chronic homeless population because they transition in and out of homelessness and other mediating institutions. With greater cooperation between shelter providers, as well as other agencies that serve the homeless, it may be possible to ensure that all individuals at risk of chronic homelessness are receiving needed services.