

Homeless Older Adults in Minnesota

Key Characteristics of Adults Age 55 and Older from the 2015 Minnesota Homeless Study

About the study

Every three years, Wilder Research conducts a statewide study to better understand the prevalence, causes, circumstances, and effects of homelessness. The study includes face-to-face interviews with people throughout the state who meet the federal definition of homelessness, as well as a count of people who were homeless on a single night in late October. The most recent study was conducted on October 22, 2015. Counts show that 9,312 people were homeless on that night (excluding those on American Indian reservations). Of those, 843 were age 55 or older.

This summary highlights findings from interviews with 569 people who were age 55 and older and experiencing homelessness in Minnesota. Interviews were conducted in emergency shelters, domestic violence shelters, transitional housing, and non-shelter locations such as encampments, hot meal programs, and other drop-in service sites.

Additional fact sheets and reports about Minnesotans experiencing homelessness, including data tables with counts by age group, gender, and individuals versus families can be found at www.mnhomeless.org.

Key findings

Older adults are one of the fastest-growing groups of people experiencing homelessness. After an increase of 48 percent from 2009 to 2012, the number of homeless adults age 55 and older increased 8 percent from 2012 (Figure 1). The largest increase occurred in Twin Cities metro area emergency shelters, where the number of homeless older adults increased by 21 percent since 2012. The 843 homeless adults age 55 and older who were counted in the 2015 study is the largest number of older adults identified since the study began counting this age group in 2009. However, the growth in the number of homeless older adults is similar to the growth of this age group in the overall Minnesota population. It is also important to note that adults age 55 and older make up just 9 percent of the total 2015 homeless population and 27 percent of Minnesota's population (U.S. Census Bureau, 2015 population estimates).

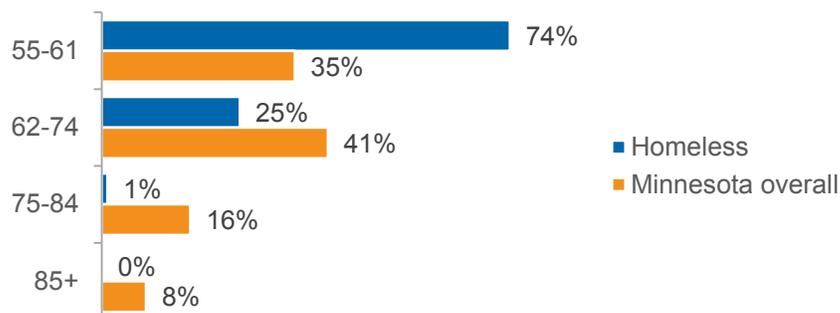
1. Homeless numbers 2009-2015 by age group, and percent change between 2012 and 2015

| | 2009 study | 2012 study | 2015 study | % change (2012-2015) |
|--|---------------|----------------|---------------|----------------------|
| Children (age 17 and under) with parents | 3,251 | 3,546 | 3,296 | -7% |
| Unaccompanied minors (age 17 and under) | 227 | 146 | 213 | +46% |
| Adults (age 18-54) | 5,626 | 5,713 | 4,887 | -14% |
| Older adults (age 55 and over) | 526 | 777 | 843 | +8% |
| Total | 9,654* | 10,214* | 9,312* | -9% |

*Totals include homeless people (of unknown age) in detox on the night of the survey (24 in 2009, 32 in 2012, and 73 in 2015).

Nearly all homeless older adults are under age 75. The average age of homeless older adults is 60, compared to 67 for Minnesota older adults in general. Almost three-quarters (74%) of homeless older adults are in the 55-61 age category, compared to 35 percent of the Minnesota older adult population (Figure 2). Difficult circumstances and conditions associated with being homeless can result in a lower average life expectancy for older adults without permanent housing (National Coalition for the Homeless, 2009).

2. Age distribution of homeless older adult population compared to overall Minnesota older adults, age 55 and over



Source: Minnesota older adult percentages are from U.S. Census 2015 population estimates

The increasing number of homeless older adults with complex health conditions is cause for concern. Seventy-one percent of homeless older adults have a chronic physical health condition, 49 percent have a serious mental illness, and 24 percent have a substance abuse disorder (Figure 3). Sixteen percent report all three: chronic physical health condition, mental illness, and substance abuse disorder. Almost all homeless older adults (89%) report that a disability limits their ability to work or complete activities of daily living (such as eating, bathing, and dressing); 35 percent said a cognitive issue affects activities of daily living. Just 16 percent said they are employed, and poor physical health was cited most frequently as a barrier to obtaining employment. These findings are consistent with other recent studies that have found that homeless older adults have health care needs similar to housed older adults 10 to 20 years older (CSH, 2011).

3. Chronic health conditions for homeless adults age 55 and older, 2009-2015

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

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

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

People of color make up half of homeless older adults; racial disparities are severe. Compared to their representation in the overall Minnesota population, African American and American Indian older adults are more likely to be homeless than other racial or ethnic groups (Figure 4). African Americans are 2 percent of Minnesota adults age 55 and older, but a third of homeless older adults; American Indians are less than one percent of all Minnesota adults age 55 and older, and 7 percent of homeless older adults.

4. Race of homeless older adults compared to all older adults in Minnesota

| | Statewide percentage of homeless older adults Age 55+ | Percentage of all Minnesota older adults Age 55+ |
|----------------------------|---|--|
| White, non-Hispanic | 48% | 93% |
| Person of color | 52% | 7% |
| African American | 34% | 2% |
| American Indian | 7% | <1% |
| Hispanic (of any race) | 6% | 1% |
| Asian/Pacific Islander | 1% | <1% |
| Other/multi-racial | 5% | 1% |

Source: U.S. Census Bureau, 2011-2015 American Community Survey 5-Year Estimates

Nearly half of homeless older adults did not become homeless until they were age 50 or older.

Forty-five percent of homeless older adults did not become homeless until they were age 50 or older. At the time of the survey, 3 in 10 homeless older adults were experiencing homelessness for the first time.

The top three reasons cited for losing their last permanent housing were: eviction or a lease that was not renewed (36%), not being able to afford the rent (35%), or having their job or hours cut (30%).

Most homeless older adults rely on public benefits. Seventy-seven percent of homeless older adults listed General Assistance, Social Security, Social Security Disability Insurance, or Supplemental Security Income as their main source of income in the month of the survey. Homeless older adults had a higher median monthly income compared to homeless adults age 25-54 (\$733 vs. \$520), but relied more on General Assistance and Social Security for their income than homeless adults under age 55.

Other public benefits used by homeless older adults in the past 12 months included medical coverage (74%) and food stamps (SNAP) (63%). Twenty-nine percent of homeless older adults said they needed assistance in applying or reapplying for benefits. Homeless older adults often turn to family for assistance in applying for benefits. However, 45 percent of homeless older adults said it had been more than a month since they had contact with their families.

Many homeless older adults face barriers related to their past criminal background or chemical dependency that make it more difficult to obtain stable housing. People who have a prior history of incarceration have a more difficult time accessing housing, due to rental eligibility and screening criteria. Fifty-three percent of homeless older adults reported that they had been incarcerated at some time in their lives, including 67 percent of men and 15 percent of women. Twenty-seven percent of homeless older adults said that a criminal background had made it difficult for them to get or keep housing, including 35 percent of men and 8 percent of women.

Mental health and substance abuse issues are often made worse by homelessness and need to be addressed in order to restore stable housing. Forty-five percent of homeless older adults had lived in an alcohol or drug treatment facility, including 51 percent of men and 28 percent of women. Twenty-nine percent of homeless older adults had lived in a halfway house, and 24 percent had lived in a facility for persons with mental health problems at some point in their lives. Nineteen percent of older adults reported that substance abuse (their own or by someone in their household) had made it difficult to get or keep housing.

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

The following is a snapshot of key characteristics of the 569 homeless older adults interviewed on October 22, 2015. Some characteristics are analyzed by age group (55-61 vs. 62 and older) because there are differences in medical and financial benefits that can be accessed by those 62 and older. Other comparisons outlined here reflect differences by gender and geography.

Demographics

- 73% were male, compared to 49% in the overall Minnesota homeless adult population
- 52% were persons of color
- 43% were divorced, 36% had never married, 8% were widowed, 8% were separated, and 5% were currently married
- 76% were living in the Twin Cities metro area and 24% were living in greater Minnesota
- 94% were born in the United States and 63% had lived in Minnesota for 20 or more years

Subsidized housing

Forty-five percent of homeless older adults said they are on a waiting list for subsidized housing, and an additional 20 percent reported that they could not get on a waiting list because the list was closed at the time they applied. Those under 62 had been on a waiting list for an average of 13 months, while those 62 and older reported average wait times of 8 months. This is consistent with information reported by service advocates who report that it is easier to address housing needs for homeless older adults once they become eligible for Social Security at age 62.

History of homelessness

- 60% of homeless older adults had been homeless for at least a year
- 51% met the federal definition of chronic homelessness, including 56% of men and 38% of older women
- 30% were experiencing homelessness for the first time, including 27% of older adults age 55-61 and 40% of those age 62 and older
- 28% of men were experiencing homelessness for the first time, compared to 38% of women
- 41% of homeless older men and 58% of homeless older women experienced homelessness for the first time at age 50 or older; the average age that older adults were first homeless was 42 years

- 78% had their last regular housing in Minnesota, including 45% who had their last housing in Minneapolis or St. Paul

Shelter use

- Half of homeless older adult respondents were staying in emergency shelters
- Older men were more likely than older women to say they had ever lived in an emergency shelter (82% vs. 69%)
- Older adults in the Twin Cities metro area were more likely than those in greater Minnesota to say they had ever lived in an emergency shelter (84% vs. 64%)
- 39% of homeless older adults reported that in the last 30 days they had spent at least one night outside, in a vehicle or vacant building, or some other place not intended for habitation, including 45% of those living in greater MN and 37% of those in the Twin Cities metro area
- 22% were unable to obtain shelter because of a lack of available bed spaces at some point in the last three months

Education and employment

- 87% of homeless older adults had completed high school or received a GED
- 46% of older adults had attended some college or completed a degree, including 60% of older women and 40% of older men
- 16% were employed; 6% were working full time
- 58% had been unemployed for more than four years, including 53% of adults age 55-61 and 70% of adults age 62 and older
- 31% of unemployed homeless older adults were looking for work, including a third (34%) of adults age 55-61 and a quarter (24%) of adults age 62 and older

Military service

- 31% of homeless older men served in the U.S. military, compared to 11% of homeless younger men age 18-54. 6% of homeless older women compared to 2% of homeless younger women served in the military
- 25% of homeless older Veterans had served in a combat zone, including 58% of those age 62 and older and 12% of those age 55-61
- 20% of homeless older Veterans had served in Vietnam
- 47% of homeless older Veterans reported having service connected injuries or illnesses, mostly hearing (48%) or mental health (40%) problems
- 49% of older homeless Veterans were receiving Veterans' benefits of some kind, mostly VA medical benefits (34%) or service compensation (34%)

History of social service and treatment placements

- 45% of homeless older adults had lived in an alcohol or drug treatment facility, including 51% of men and 28% of women
- Homeless older adults age 55-61 were more likely than those age 62 and older to have lived in an alcohol or drug treatment facility (47% vs. 38%)
- 29% had lived in a half-way house
- 24% of homeless older adults had lived in a mental health facility
- 15% had lived in a group home

A deeper look at needs

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

Income and employment

While homeless older adults had a higher monthly median income than those under age 55 (\$733 vs. \$520), fewer reported that their main source of income was from steady employment (9% vs. 25%). Homeless adults age 62 and older had a higher median monthly income than those age 55-61 (\$820 vs. \$607).

- 12% had lived in foster care
- Homeless older women were less likely than homeless older men to have ever experienced any kind of social service or treatment placement (48% vs. 68%)

Incarceration history

- 53% of homeless older adults reported that they had been incarcerated at some time in their life, including 67% of homeless older men and 15% of homeless older women
- 13% of homeless older adults had been released from jail or prison within the last two years

Violence and abuse

More than one-third (34%) of homeless older adults reported that they have been physically or sexually abused, or were neglected as a child. Compared to older men, older women have higher rates of each of these kinds of maltreatment, and they are especially more likely to have been victims of sexual abuse (31% vs. 10%).

Thirteen percent of homeless older adults reported being attacked or beaten while homeless, including 18 percent of homeless older women and 11 percent of homeless older men. Older adults living in greater Minnesota were more likely than those in the Twin Cities metro area to say they had stayed in an abusive relationship because they had no other place to live (34% vs. 19%). Older women were also more likely than older men to say they had stayed in an abusive relationship (40% vs. 17%).

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

- Poor physical health (45%)
- Age (17%)
- Lack of housing (14%)
- Lack of transportation (13%)
- Mental health problems (10%)
- Lack of education (8%)

General Assistance and Social Security are a critical aspect of support for homeless older adults (Figure 5). Seventy-seven percent of homeless older adults listed General Assistance or some type of Social Security as their main source of income in the month of the survey; this is almost double the rate of homeless adults under age 55 (42%). Compared to homeless older adults age 55-61, homeless adults age 62 and older were more likely to receive Social Security (42% vs. 7%) and less likely to receive General Assistance (7% vs. 30%).

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

| Main source of income | Older adults age 55-61 | Older adults age 62+ | Total |
|---|------------------------|----------------------|-------|
| General Assistance | 30% | 7% | 24% |
| SSDI (Social Security Disability Insurance) | 21% | 20% | 20% |
| Social Security | 7% | 42% | 16% |
| SSI (Supplemental Security Income) | 17% | 15% | 16% |
| Steady employment | 11% | 5% | 9% |
| Temp work or day labor | 4% | 1% | 3% |

Housing

The main reasons why homeless older adults left their last regular or permanent housing were:

- Eviction or lease not renewed (36%)
- Could not afford the rent (35%)
- Lost their job or had their hours cut (30%)
- Had a drinking or drug problem (21%)
- Had a break-up with a spouse or partner (21%)
- Had unsafe housing (20%)

Homeless adults age 55-61 were more likely than those 62 and older to say they lost their housing because they were evicted (38% vs. 28%), could not afford the rent (38% vs. 26%), or lost their job or had their hours cut (32% vs. 22%). In addition, older men were more likely than older women to say they lost their housing due to a drinking or drug problem (25% vs. 9%).

The main barriers to currently obtaining permanent housing reported by homeless older adults were:

- Lack of job or income (27%)
- Lack of affordable housing (19%)
- Criminal background (18%), including 24% of homeless older men and 3% of homeless older women
- Credit problems (16%)

Seventy-six percent of homeless older adults reported that they could pay \$500 or less per month for rent. The median amount that homeless older adults said they could pay was \$400. Older adults age 55-61 said

they could pay a median amount of \$340 per month, while older adults age 62 and older said they could pay a median amount of \$440.

Eighty-eight percent of homeless older adults reported that they only need a one-bedroom or studio apartment, which would still be out of reach for many, given average incomes. Figure 6 illustrates the difficulty of homeless older adults in greater Minnesota and the Twin Cities metro area in securing affordable housing.

6. Fair market rent versus income, by region

| | Fair market rent (FMR) for a 1-bedroom apartment | Monthly income at which FMR would be affordable | Median monthly income, homeless older adults |
|-------------------|--|---|--|
| Twin Cities metro | \$796 | \$2,653 | \$728 |
| Greater Minnesota | \$558 | \$1,860 | \$736 |

Health and wellness

Chronic health conditions among homeless older adults are common. Seventy-one percent of adults age 55 and older reported a chronic physical health problem (Figure 7). High blood pressure, chronic lung problems, and asthma were the conditions most often reported.

Many homeless older adults also suffer from more than one disability, which multiplies the overall impact of these health conditions. Half of homeless older adults reported a serious mental illness, and a quarter reported a substance abuse disorder. More than a third of homeless older adults (36%) reported a history of symptoms suggesting traumatic brain injury, and a similar percentage (35%) reported feeling confused, having trouble remembering things, or having trouble making decisions (to the point that it interfered with their daily activities).

Rates of medical coverage are high, with 83 percent of homeless older adults saying they had medical coverage. Three-quarters (74%) of homeless older adults said they had used public medical benefits in the past year.

Some differences in health status and needs also exist according to gender, age, and geography, highlighted below and in Figure 7.

7. Health-related issues of homeless older adults age 55 and older

| Health-related issues | Older men | Older women | All older adults |
|--|-----------|-------------|------------------|
| Chronic physical health condition | 68% | 79% | 71% |
| Serious mental illness | 46% | 56% | 49% |
| Traumatic brain injury history | 37% | 33% | 36% |
| Major depression | 28% | 38% | 31% |
| Substance abuse disorder | 28% | 14% | 24% |
| Need to see a professional about a physical health problem | 46% | 61% | 50% |
| Need to see a professional about a mental health problem | 31% | 44% | 34% |
| Need to see a dentist about tooth or gum problems | 55% | 63% | 57% |
| Used public health benefits in the past year | 71% | 82% | 74% |
| Had medical coverage or insurance in October | 83% | 83% | 83% |

Compared to homeless older adults in the Twin Cities metro area, those in greater Minnesota were more likely to report:

- Needing to see someone about a physical health problem (59% vs. 47%)
- Serious mental illness (56% vs. 46%)
- Cognitive difficulties (45% vs. 32%)
- An alcohol or drug disorder (31% vs. 21%)

Compared to homeless adults age 55-61, those age 62 and older were:

- More likely to report chronic health conditions (78% vs. 69%)
- Less likely to report serious mental illness (39% vs. 52%)
- Less likely to report needing to see a professional about a mental health problem (25% vs. 37%)

Service use

Food supports were the most commonly used assistance, as well as among the most helpful services received by homeless older adults (Figure 8). Clothing, transportation assistance, and drop-in centers were also commonly used and considered especially helpful by homeless older adults. Twenty-nine percent of homeless older adults said they needed assistance in applying or reapplying for benefits.

8. Types of assistance received by homeless older adults in October 2015

| | Percent who received the service during October | Of those who received the service, percent who say it is one of 3 services that have helped the most |
|--|---|--|
| Food assistance | | |
| Food stamps/SNAP | 56% | 40% |
| Hot meal program | 45% | 26% |
| Food shelf | 30% | 14% |
| Health-related services | | |
| Emergency room | 28% | 10% |
| Free medical clinic | 26% | 16% |
| Free mental health clinic | 10% | 3% |
| Free dental clinic | 9% | 4% |
| Transportation assistance (including bus cards) | 38% | 23% |
| Free/almost free clothing | 45% | 17% |
| Outreach-related | | |
| Drop-in center services | 33% | 13% |
| Free voice mail or cell phone | 26% | 11% |
| Outreach services | 15% | 4% |
| Help getting an ID | 14% | 6% |
| Benefits related | | |
| Help getting financial or other public benefits | 14% | 6% |
| State or Federal Veterans' benefits | 12% | 8% |
| Employment related | | |
| Help finding a job | 10% | 3% |
| Job training | 5% | 2% |
| Help with legal issues | 10% | 4% |

Access to resources

Homeless older adults' access to resources—identification, access to a computer, and cell phone with a data plan—is varied.

- 72% of homeless older adults have a valid ID, including 79% of older women and 70% of older men
- Homeless older adults living in the Twin Cities metro area are more likely than those living in greater Minnesota to have valid IDs (76% vs. 63%)
- 52% of homeless older adults have access to a computer, including 55% of those living in the Twin Cities metro area and 45% living in greater MN
- 41% of homeless older adults have a cell phone with data plan, including 47% of those living in greater Minnesota and 39% of those living in the Twin Cities metro area

Key differences in comparison with homeless adults under age 55

Figure 9 presents key differences in demographics; health and wellness status; education, employment, and income; and service and resource use of homeless adults by two age groups.

9. Key differences between homeless adults age 25-54 and 55+

| | Homeless adults age 25-54 | Homeless adults age 55+ |
|---|------------------------------|----------------------------|
| Demographics | | |
| Men | 49% | 73% |
| Living in the Twin Cities metro area | 69% | 76% |
| Staying in emergency shelters | 39% | 50% |
| Divorced | 16% | 43% |
| More than a month since had contact with family | 33% | 45% |
| Health and wellness | | |
| Have a chronic physical health condition | 51% | 71% |
| Need to see a professional about a physical health problem | 41% | 50% |
| Have a physical, mental, or other health condition that limits the kind or amount of work they can do | 48% | 61% |
| Have a regular place to go for medical care | 72% | 81% |
| Have a serious mental illness | 64% | 49% |
| Need to see a professional about a mental health problem | 46% | 34% |
| Education, employment, and income | | |
| Have a high school diploma or GED | 77% | 87% |
| Employed | 31% | 16% |
| Median monthly income | \$520 | \$733 |
| Receive General Assistance | 25% | 34% |
| Receive Social Security, SSDI, or SSI benefit | 21% | 53% |
| General Assistance, Social Security, SSDI, or SSI is main source of income | 42% | 77% |
| Service and resource use | | |
| Use meal programs | 36% | 45% |
| Use drop-in centers | 24% | 33% |
| Have access to a computer | 61% | 52% |
| Have a cell phone with data plan | 59% | 41% |

Considerations

The unprecedented growth of the older adult population will undoubtedly shape the characteristics of Minnesota's homeless population during the next two decades. While adults age 55 and older now make up just 9 percent of people experiencing homelessness, it is one of the most rapidly growing segments of the homeless population. In fact, estimates by the Homelessness Research Institute indicate that homelessness for older adults in the U.S. is projected to increase by 33 percent from 2010 to 2020 – from 44,172 people to 58,772 people. The number of homeless older adults will more than double between 2010 and 2050, when over 95,000 older adults are projected to be homeless (Sermons & Henry, 2010).

The expected growth in the homeless older adult population affects the demand for affordable housing, health care, nonprofit service provision, and a range of public programs. These growing needs seem to be on a collision course with the \$7 billion in cuts proposed by the current administration to the U.S. Department of Housing and Urban Development budget. As the Urban Institute has pointed out, this budget would reduce housing subsidies (such as public housing and vouchers) and homeless services for families, Veterans, people with disabilities, and older adults (Cunningham, 2017; Executive Office of the President of the United States, 2017).

To address the needs of this growing population in Minnesota, it will be necessary to bring together service providers, government agencies, advocates, housing developers, and others to formulate long-term strategies and solutions.

Some of the key elements that need consideration in future planning efforts include:

- **Recognize and design services that address the complexity of health care needs among homeless older adults:** Health-related problems for homeless older adults are both more common and more complicated than for those of similar ages who have the advantage of permanent housing. Homeless older adults often face multiple issues related to mental health, substance abuse, cognitive impairment, physical health conditions, and disabilities. Any potential health improvements for homeless older adults will be highly dependent on finding and maintaining stable housing for this population. Without such efforts, service providers will need to continue providing high levels of crisis-focused support. Most shelters do not have the capacity to provide the level of care that this population may need, and programs such as medical respite can only provide short-term support.
- **Expand housing opportunities for older adults whose backgrounds make them more difficult to house:** Many housing options have eligibility or screening criteria. For instance, some senior housing requires an older adult to be over the age of 62. Others screen out people who have previous criminal records or poor credit, rental, or job histories. Still others require older adults to be sober or actively addressing mental health issues. Advocates for homeless older adults in both the Twin Cities metro and greater Minnesota report more difficulty in finding housing opportunities for those who have not yet qualified for Social Security benefits. To address housing needs in this “younger” older adult population, new housing opportunities will be necessary, including targeted supportive housing programs, group residential programs, and single room occupancy housing. Advocates suggest that although many older adults also qualify for housing available to any adult age 18 or older, these types of programs may not address the complexity of their needs or may pose safety concerns due to increased vulnerabilities for some older adults.
- **Create more affordable housing options for older adults:** Older adults living in poverty are particularly affected by the lack of affordable housing. A recent study by Maxfield Research (2016) projected that Minnesota will need another 23,000 affordable housing units by 2020 for low-income older adults. Because of the extremely tight housing market and low vacancy rates, the competition for affordable housing greatly exceeds the demand of the growing group of low-income older adults in our state.

The Minnesota Homeless Study generally uses “weighted” data. Researchers apply a weight to each interview completed in shelters to represent the responses of the entire adult homeless population counted in shelter. However, because of the smaller numbers represented in this report, interview data were not weighted. Therefore, some of the data presented here do not match that reported in the comprehensive report on homeless adults.

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