

# **Report on Homelessness in North Dakota 2007**

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**North Dakota Coalition for Homeless People  
Statewide Point-in-Time Survey and Study of Homelessness  
January 25, 2007**



## Acknowledgements

The North Dakota Coalition For Homeless People (NDCHP) would like to acknowledge the hundreds of volunteer hours contributed by the Continuum of Care Needs Assessment Committee, the network of regional homeless coalitions, and the many caseworkers and staff of local agencies in conducting the 2007 Statewide Point-in-Time Survey of Homeless People. The Coalition also thanks the many homeless individuals and families who provided valuable information that will be used to improve the delivery of housing and services in our communities. The high-level of participation across the state in providing the information for this report ultimately guides local communities, reservations, and the state of North Dakota in addressing the social tragedy of homelessness.

## Definition of Terms

To assist our readers, definitions are provided for the following terms used throughout this report:

<p><b>Literally Homeless</b> - People who stay in emergency shelters or transitional housing. This category also includes unsheltered homeless people who sleep in places not meant for human habitation (for example: street, parks, abandoned buildings, dumpsters, subway tunnels) and who may also use shelters on an intermittent basis.</p>
<p><b>Precariously-Housed</b> - People who are at imminent risk of becoming literally homeless at any time. They may be temporarily doubled up with friends or relatives, or staying in a motel when they accumulate enough money for a room.</p>
<p><b>Overall Homeless</b> – In this report the overall homeless population includes both the literally homeless and the precariously housed.</p>
<p><b>Chronically Homeless</b> - An unaccompanied homeless individual with a disabling condition who has either been continuously homeless for a year or more, or who has experienced at least four episodes of homelessness within the past three years. To be considered chronically homeless, person must have been sleeping in a place not meant for human habitation and /or in emergency shelter during that time.</p>
<p><b>Long-Term Homeless</b> – Includes chronically homeless individuals and also includes families that have been homeless (lacking a permanent place to live) for a year or more, or has had four or more episodes of homelessness in the last three years. In addition, the person or family member has a disabling condition which limits their activities of daily living. This group does not exclude families who are temporarily living doubled up and not in a position to contribute to the household.</p>

## Data Collection

The 2007 Point-in-Time Survey was distributed to 200 organizations including emergency shelter providers, transitional housing providers, social services agencies, community action agencies, human service centers, housing authorities, healthcare providers, emergency food pantries, soup kitchens, faith-based organizations, and law enforcement agencies.

## Data Preparation, Analysis, and Report Production

This report was produced in collaboration with the talented staff of:

DH Research  
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# Executive Summary

The North Dakota Coalition for Homeless People presents this 2007 Report on Homelessness in North Dakota. The purpose of the report is to increase understanding about homelessness in our communities, and to advance efforts that will ultimately end the housing crisis that daily impacts more than 600 homeless men, women, and children in North Dakota. Key findings are derived from a statewide point-in-time survey of homeless people that has been conducted annually for several years by trained surveyors.

This study begins with a look at the demographics and characteristics of people who are literally homeless. Their homelessness is the result of a lack of resources, bad choices, and/or misfortunes. The numbers of people who are literally homeless in North Dakota seem low when compared to other places. However, our shelters are continuously over crowded and the people seeking housing and services are becoming increasingly difficult to serve. While 5,000 North Dakotans are estimated to experience homelessness at least once over the course of a year, homelessness is mostly hidden in our communities. Perhaps only shelter providers and the homeless people they serve fully understand that homelessness is a real fact of life in our communities.

In addition to the homeless in the shelter system, this study includes information gathered from more than 200 respondents who are precariously housed, without a permanent residence, temporarily doubled up with family or friends, or living in motels for as long as they can pay for a room. In this situation, they are in serious risk of being added to those who are in shelters or on the streets. This group identified themselves as homeless because they did not have a permanent home of their own. This is a side of homelessness that is quite common in our communities, but often ignored. It is almost impossible to get an accurate count of this group. It is particularly characteristic of homeless youth referred to as “couch surfers.” It is also characteristic of homelessness on North Dakota reservations. Most often, people in these circumstances do not receive the services they need to regain self-sufficiency.

While for most people the duration of homelessness is short, too many North Dakotans are homeless for long periods of time. Addictions and mental illness, histories of criminal backgrounds and bad credit, and mistrust of the system contribute to repeated and longer episodes of homelessness. This study includes a section that looks at the characteristics and needs of individuals who are identified as the long-term homeless.

Finally, the study analyzes North Dakota’s homeless population by region. The characteristics of the homeless population differ from one community to the next. For this reason this report provides information that pertains to eight separate regional areas.

The North Dakota Coalition for Homeless People supports the direction that North Dakota communities are taking to alleviate homelessness. In 2006, several North Dakota communities declared “its time to stop counting and start taking action.” Public officials and non-profit agencies in major cities and reservations of North Dakota formed planning groups committed to a common goal - ending long-term homelessness over the next 10 years. The traditional system that serves the homeless, while successful for many homeless individuals and families, has limitations and does not meet the needs of today. The evidence of this is seen in our overcrowded shelters and in the numbers of long-term homeless. The common goal of ending long-term homelessness brings public officials, service providers, housing providers, businesses, law enforcement, and other stakeholders together to utilize their strengths as a community to effectively provide lasting solutions through permanent supportive housing, and divert individuals and families from long-term homelessness.

# Key Findings

## PURPOSE

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The purpose of this study is to assess the extent of homelessness in the state of North Dakota and to identify the most common characteristics of homeless people, the primary reasons for homelessness, and the most important basic service needs of homeless people in our state.

The comprehensive data collected with this survey provides information that will:

- Increase awareness of homelessness in our communities;
- Support policy change and funding;
- Help community partners (service providers, policy makers, etc.) to better understand homelessness and to work together to solve homeless issues;
- Assist local officials and homeless providers to develop strategic plans for providing housing and services needed in their communities;
- Assist the North Dakota Interagency Council on Homelessness, the North Dakota Coalition for Homeless People, and Regional Homeless Coalitions in their work to end long-term homelessness in North Dakota.

## METHODOLOGY

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The 2007 Point-in-Time Survey was distributed on January 16, 2007, to 200 North Dakota agencies that typically have contact with people who are homeless. The survey mailing list included agencies that provide housing for the homeless, social services agencies, community action agencies, human services centers, law enforcement agencies, healthcare providers, emergency food pantries, soup kitchens, housing authorities, and faith-based organizations

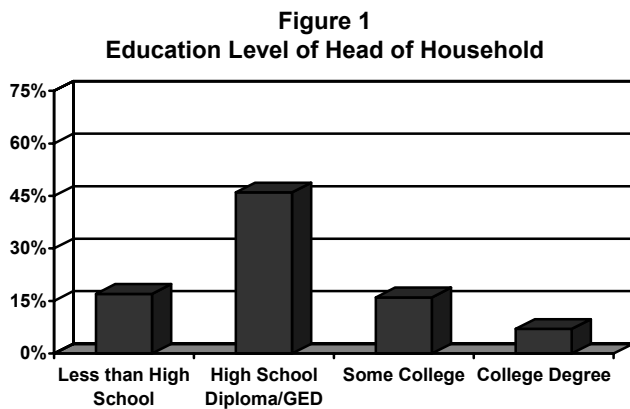
Survey teams in eight regional jurisdictions coordinated the canvassing of their areas. The survey of sheltered and unsheltered homeless was conducted on January 25, 2007, in accordance with guidelines issued by the U.S. Department of Housing and Urban Development. In completing surveys, agency staff provided direct assistance to homeless people as needed. The results of the surveys are unduplicated counts. A federally accepted definition of who should be considered homeless was given to each surveyor. Information relating to demographics, education, employment, income, common characteristics, and service utilization was collected. A 90% participation rate was achieved with the 2007 survey.

# HOMELESS POPULATION

On January 25, 2007, there were 636 homeless persons in North Dakota identified as literally homeless: 463 adults, 151 children, and 22 persons for whom age was not known. Among these persons are 372 unaccompanied adults, one unaccompanied youth, and 87 families with minor children. In order to fully understand the challenges facing these households and identify the most beneficial means of assisting them, one must first become familiar with who they are, where they are, and how they got there.

## Demographics

Among the adults for whom gender is known, 66% are male and 34% are female. More than half of the homeless population is white (58%), while about one-third is American Indian (31%), 5% are black and 2% are of another race. (Information on race was not available for 4% of the individuals.)



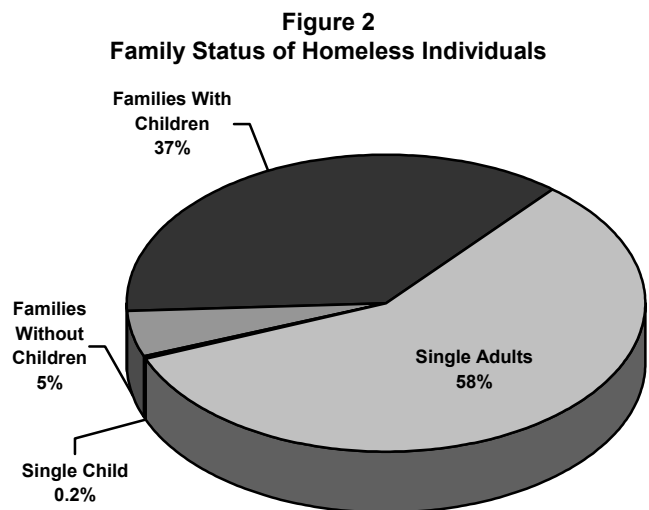
Fifteen percent of the households were new to the community within seven days prior to the survey and were already homeless before they came to the community in which they were surveyed.

Only 17% of homeless heads of household don't have a high school diploma or GED. Approximately half (46%) have completed their secondary education, while another 16% attended some college and 7% are college graduates. (Figure 1)

Overall, the average homeless adult is 39.3 years old, though men tend to be slightly older (41.6 years) and women tend to be younger (34.7 years). Unaccompanied adults are significantly older on average than those who have family members with them (41.3 years compared to 32.5 years among those in families). The average homeless child in North Dakota is 6.6 years old.

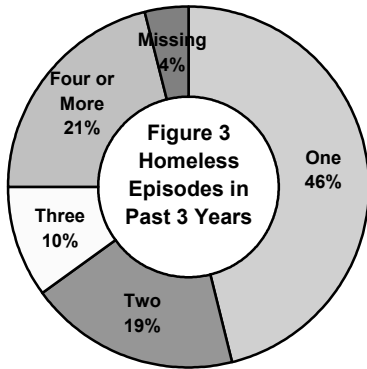
Of the 460 households counted, 70 include children under eighteen, 4 contain children who are eighteen or older, 26 include a spouse or partner, and 3 include other family members. Two of the households are headed by a youth under eighteen, 39 are headed by a young adult between eighteen and twenty-one, and 398 have heads of household who are over twenty-one. (The ages of 21 heads of household are not known.)

Of the 636 individuals counted, 372 (58%) are single adults, one (0.2%) is a single youth, 30 (5%) are members of families without youth, and 233 (37%) are living in families with minor children. (Figure 2)



The night of the point-in-time survey, a majority of the homeless stayed in an emergency shelter (62% of households). Half as many were in transitional housing (31% of households) and a small number were unsheltered, sleeping in abandoned buildings, automobiles or outdoors (7% of households). In the unsheltered group there were 35 people in families with children, 22 unaccompanied individuals, and two people in a family without children.

### Frequency and Length of Homelessness



This is the only episode of homelessness in the past three years for about half (46%) of the households that make up the homeless population. Nineteen percent have been homeless once before and 10% have been homeless twice before this current episode. For one in five homeless households (21%), this is at least the fourth time they have experienced homelessness in the past three years. (Four percent of the households didn't indicate how many times they had been homeless.) (Figure 3)

Just as important, if not more important than how often people indicated they had been homeless, is how long they had been without a permanent home. Overall, respondents indicated they had been living in shelters, transitional housing or on the streets for an average of 1.8 years. The median length of a current homeless episode was 0.5 years, which means just as many had been homeless for half a year or less as had been homeless for half a year or longer. (Table 1)

For respondents who had been homeless less than one month, the average was 10.4 days, with a median of 8.0 days. For those who had been homeless at least a month, but less than a year, the average was 4.0 months, with a median of 3.0 months. Among those who had been homeless for a year or longer, the average length of their homelessness was 4.0 years, with a median of 3.0 years. (Table 1)

**Table 1  
Length of Homelessness**

	Number of Households*	Average Length of Time	Median Length of Time
Overall	442	1.8 years	0.5 years
Homeless for a year or longer	180	4.0 years	3.0 years
Homeless for a month to a year	208	4.0 months	3.0 months
Homeless for less than a month	54	10.4 days	8.0 days

\*Information regarding length of homelessness was not provided for 18 households.

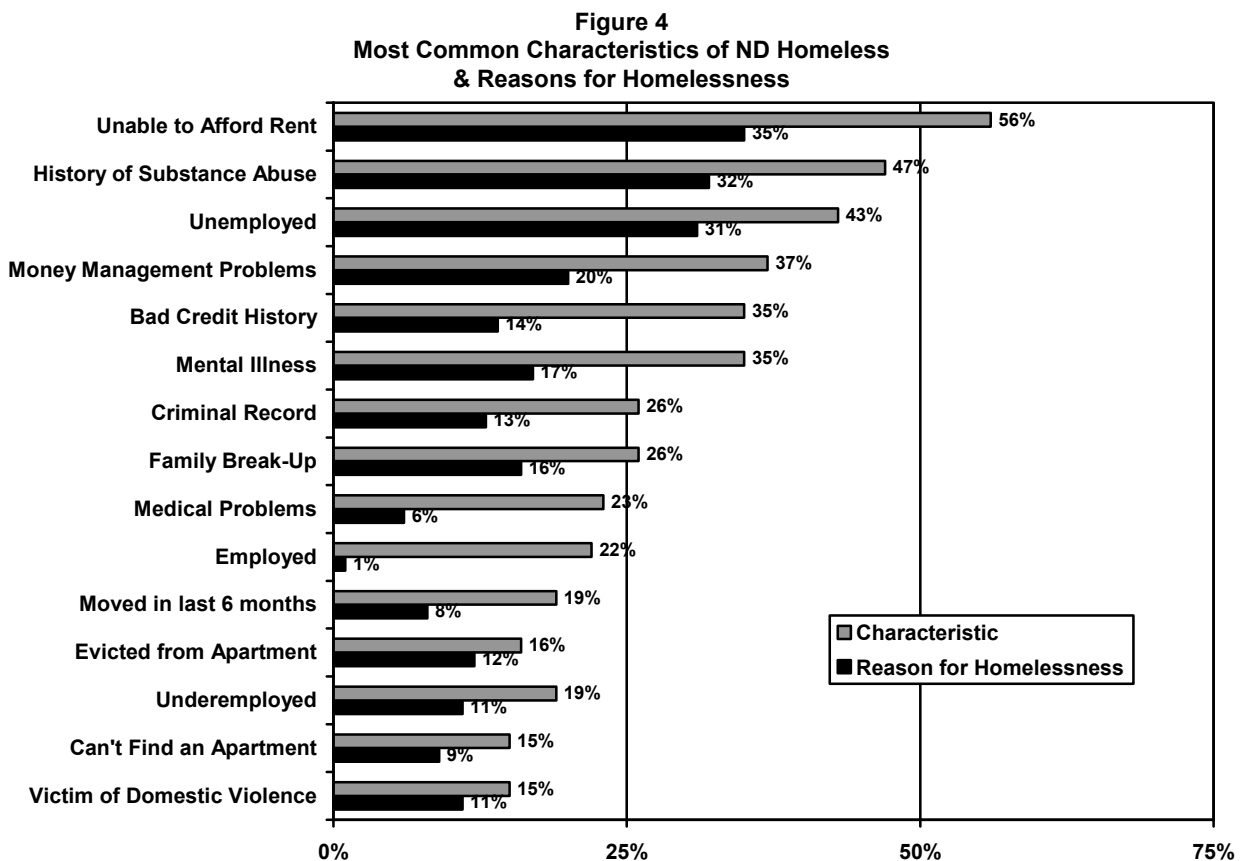
### Veterans

Sixty-seven (15%) of the homeless households are headed by a veteran. Only one of these households is a family and less than one in five are receiving veteran's benefits. Veterans are much more likely than the general homeless population to be classified as long-term homeless (45% compared to 25% overall).

## Common Characteristics

Economic strife, substance abuse and mental illness are the biggest issues facing the homeless in North Dakota. More than half (56%) are unable to afford rent and nearly as many have a history of substance abuse (47%). Forty-three percent of respondents were unemployed, 37% had money management problems, and 19% were underemployed. Conversely, 22% of the respondents indicated they were employed. (Figure 4)

Health issues such as mental illness (35%) and medical problems (23%) are also somewhat common among homeless individuals, as are a bad credit history (35%) or a criminal record (26%). A family break-up has affected 26% of the homeless and 15% are victims of domestic violence. One in five moved to the community in which they were surveyed in the last six months (19%), 16% were evicted from their apartments, and 15% couldn't find an apartment to rent. (Figure 4)



## Reasons for Homelessness

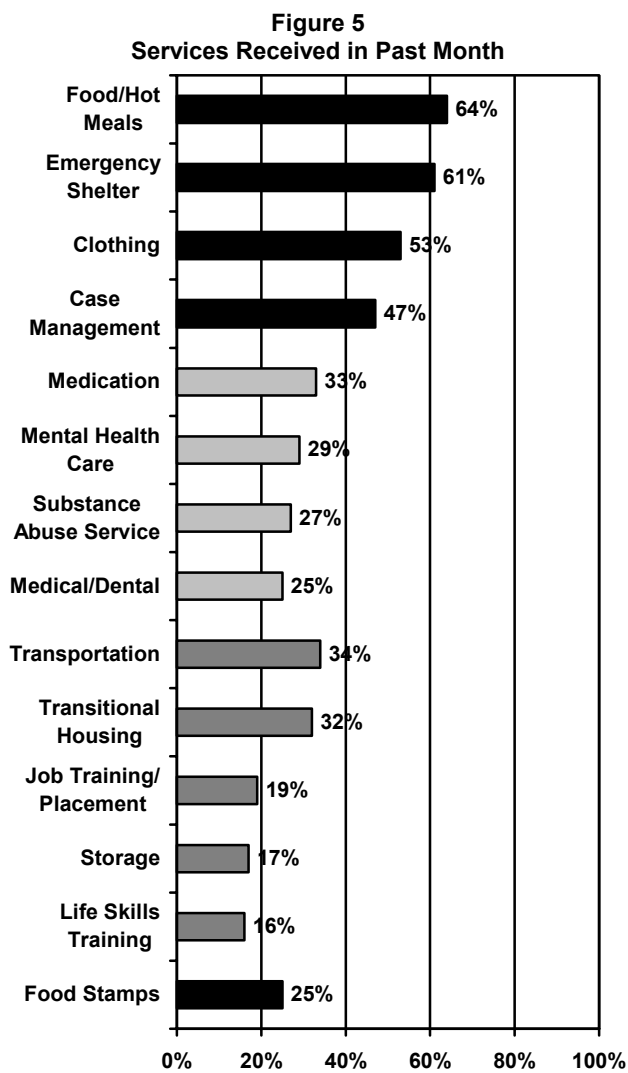
The reasons homeless individuals most often identified as the cause of their homelessness were generally the same as the characteristics they most commonly share. The reasons most often identified were an inability to afford rent (35%), substance abuse (32%), and unemployment (31%). Money management problems (20%), mental illness (17%), and a family break-up (16%) were also frequently cited, as were bad credit (14%), a criminal record (13%), and underemployment (11%). Less prevalent reasons cited were being evicted from an apartment (12%) and domestic violence (11%). (Figure 4)

## Sources of Income

Half (48%) of the homeless in North Dakota have a job, which is the most common source of income among them. Other common income sources include food stamps (21%), family or friends (13%), and Social Security (11%). Medicaid (8%), SSI (8%), TANF (6%), and asking for money on the streets (6%) are less common, as are child support (3%), veteran’s benefits (3%), and selling blood/plasma (2%). The most uncommon sources of income among the homeless are unemployment benefits (1%), pensions (0.4%), and prostitution (0.2%).

## Service Utilization

Services that meet individuals’ basic needs are the ones most commonly used: food/hot meals (64%), emergency shelter (61%), clothing (53%), and case management (47%). (Figure 5)



Health-related services are the next most widely used type of assistance among homeless individuals. One-third receive medication and nearly as many receive mental healthcare (29%). Substance abuse services and medical/dental are also frequently utilized, with one in four respondents using each. (Figure 5)

Various forms of stabilizing assistance are also commonly used. One-third use transportation (34%) and just as many use transitional housing (32%). Job training/placement (19%), storage (17%), and life skills training (16%) are used less often. It should be noted that stabilizing services are the type of services homeless persons are most apt to be waiting to receive. Twenty-four percent are waiting for permanent housing, 14% are waiting for transitional housing, and 13% are waiting for job training or placement. Furthermore, 10% are waiting to receive help with transportation and 9% are waiting on housing planning. (Figure 5)

Food stamps are the mainstream resource most frequently used by homeless individuals, with one-fourth of the respondents receiving them. Other mainstream resources, such as SSI (7%), TANF (7%), and veteran’s benefits (3%), are used much more infrequently. (Figure 5)

Permanent housing and transportation are the services most difficult for the homeless to access. They are cited as being hard to obtain by 17% and 14% of respondents, respectively. As far as what would be most helpful in obtaining housing, a job or a better job is most frequently named (16% of respondents).



## PRECARIOUSLY HOUSED POPULATION

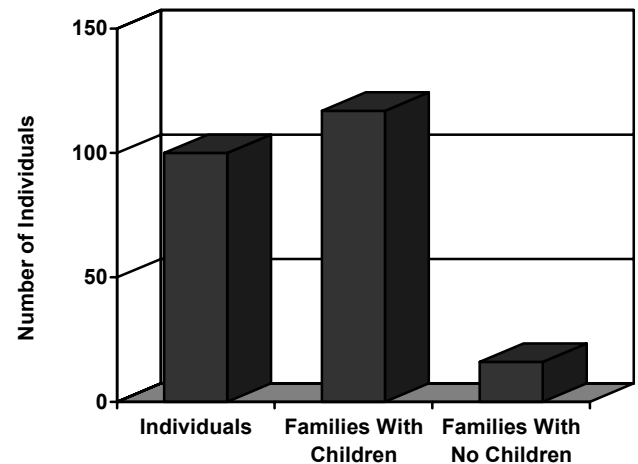
In addition to the 636 individuals in the state who are literally homeless, another 233 people are precariously housed in motels (43 individuals) or staying with friends or family (190 individuals) and are in imminent danger of becoming homeless. This at-risk group is comprised of 100 men, 68 women, 61 children, and 4 persons for whom age and/or gender is not known.

Compared to those who are literally homeless, the precariously housed in North Dakota are more apt to have family members with them. While 100 (43%) of the individuals living in motels or with others are unaccompanied adults, 117 (50%) are living in families with children and 16 (7%) are living in families without children. (Figure 6)

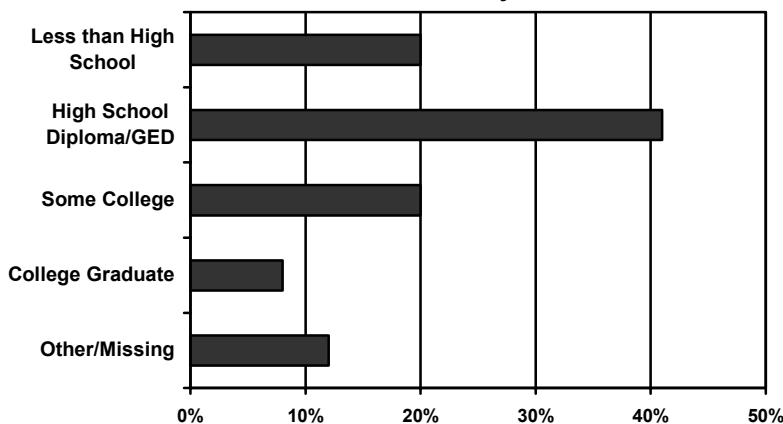
The precariously housed also tend to be younger than their literally homeless counterparts. The average age for men is 34.4 years and the average age for women is 29.9 years. Of the 145 households identified as precariously housed, 38 (26%) are headed by someone 21 or younger.

Nearly three out of four (73%) precariously housed individuals are American Indian; one in four (24%) are white. This is significantly different from the literally homeless population where 58% are white and 31% are American Indian.

**Figure 6**  
Family Status of Precariously Housed Individuals



**Figure 7**  
Education Level of Precariously Housed



Seventy percent of precariously housed households are headed by someone with at least a high school diploma or GED; only 20% have less than a high school education. (The education level of 10% of the individuals is not known.) Twenty-eight percent of the respondents have attended at least some college, which includes 8% who are college graduates. (Figure 7)

When compared to the literally homeless population, precariously housed individuals have been homeless just as

long and just as often. They have been without a home for an average of 1.4 years, with a median of 0.5 years. Forty-two percent have only been homeless once and this is the second time 20% have been without a permanent home.

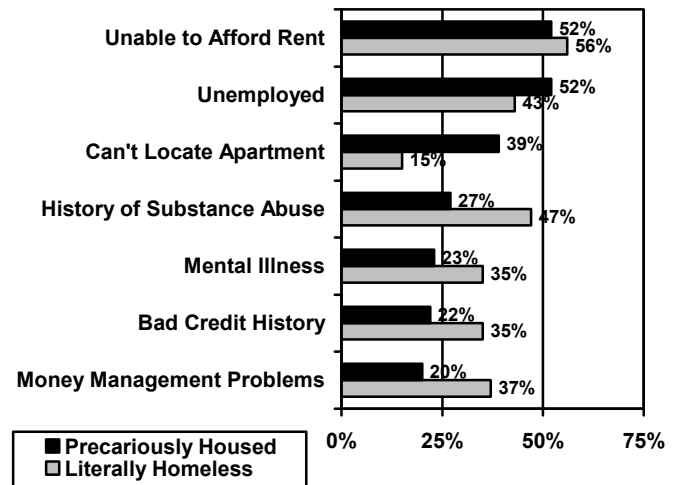
Two out of five (39%) precariously housed individuals have a job. Other common sources of income include food stamps (29%), family or friends (27%), and general assistance (14%).

## Common Characteristics & Reasons for Homelessness

The most commonly shared characteristics among the precariously housed are also the most common reasons for their homelessness: unemployment; an inability to afford rent; and not being able to locate an apartment. Half of the precariously housed population is affected by unemployment and/or an inability to afford rent. Unlike the literally homeless, substance abuse, mental illness, money management and credit history are less of an issue. Conversely, the inability to locate an apartment is more than twice as prevalent among the precariously housed. (Figure 8)

The inability to locate an apartment is also listed as a reason for being homeless much more frequently by the precariously housed than by the literally homeless (27% compared to 9%). Other common reasons for the precariously housed being homeless are unemployment (25%) and not being able to afford rent (22%).

**Figure 8**  
Common Characteristics of Precariously Housed Compared to Literally Homeless



## Service Utilization

In comparison to the literally homeless, persons who are precariously housed receive far fewer services. The most highly utilized services are food stamps (30%), food/hot meals (28%) and mental healthcare (21%), which are each used by less than one-third of the households. While one might assume, based upon their differing characteristics, that the needs of the precariously housed are different and/or not as numerous as those of the literally homeless, there seems to be another underlying issue. The precariously housed have a more difficult time accessing services than the literally homeless. Many find it hard to

obtain emergency shelter (41%) or permanent housing (40%). Transportation (30%), transitional housing (26%), relocation assistance (24%), job training/placement (23%) and clothing (21%) are also difficult for the precariously housed to access. The lack of emergency shelter may be the primary reason why these individuals are precariously housed. On the other hand, emergency shelter might be the only obstacle standing between them and a permanent residence. This group feels more available housing (20%) and shelter/transitional housing (14%) are the things that would be most beneficial in finding or obtaining permanent housing. (Table 2)

**Table 2**  
Services Received in Past Month

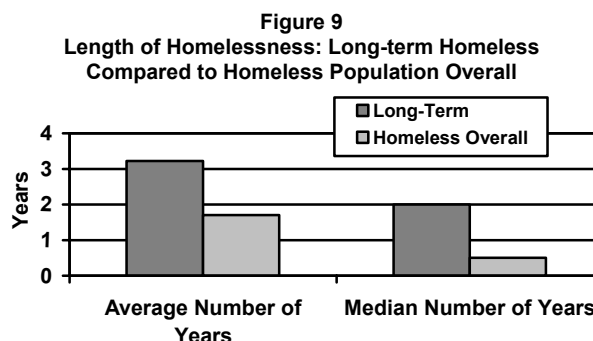
Service	Precariously Housed	Literally Homeless
Case management	15%	47%
Clothing	12%	53%
Emergency shelter	11%	61%
Food stamps	30%	25%
Food/hot meals	28%	64%
Job training/placement	5%	19%
Life skills training	5%	16%
Medical/dental	15%	25%
Medication	16%	33%
Mental healthcare	21%	29%
Permanent housing	1%	2%
Relocation assistance	2%	3%
Storage	7%	17%
Substance abuse services	5%	27%
Transitional housing	4%	32%
Transportation	13%	34%

## LONG-TERM HOMELESSNESS

One in four homeless persons in North Dakota are contending with long-term homelessness, which means they have a disabling condition and have either been homeless for at least a year or have been homeless four or more times in the past three years. Of the 215 individuals this definition applies to, 188 are adults, 21 are children, and the age of six respondents is unknown.

### Length of Homelessness

By definition, the primary difference between the long-term homeless and the overall homeless population is how long and how frequently they have been without a permanent residence. The average length of a homeless episode overall is 1.7 years, with a median of 0.5 years. Among the long-term homeless, an average episode lasts 3.2 years, with a median of 2.0 years. (Figure 9)



In addition, the long-term homeless are more than twice as likely as the general homeless to have been homeless four or more times in the past three years (48% compared to 21% overall). The long-term homeless are less likely to have been homeless once (36% compared to 45% overall), twice (10% compared to 19% overall) or three times (5% compared to 10% overall).

### Demographic Differences

The long-term homeless are more likely than the general homeless population to stay in transitional housing (32% compared to 20% overall) and they are less likely to be staying with friends or family (13% compared to 22% overall). They are also more likely to be men (75% compared to 64% overall) and less likely to be accompanied by a family member (23% compared to 46% overall). (Table 3)

**Table 3**  
Demographics of Long-Term Homeless

	Long-Term Homeless	Homeless Overall
In transitional housing	32%	20%
Doubled up	13%	22%
Precariously housed in motel	4%	5%
Emergency shelter	46%	47%
Unsheltered	5%	7%
Male	75%	64%
Female	25%	36%
Unaccompanied adult	77%	54%
With family	23%	46%
White	57%	49%
American Indian/Alaskan Native	34%	42%
Other/Missing	8%	9%
High school diploma or less	71%	63%
Post secondary	19%	25%
Missing	11%	12%
Average age of adults	41.9 yrs	37.8 yrs

The long-term homeless are more likely than the homeless population overall to be white (57% compared to 49% overall) and less likely to be American Indian (34% compared to 42% overall). Post-secondary education or training is somewhat less common among the long-term homeless than it is among the homeless overall (19% compared to 25% overall). (Table 3)

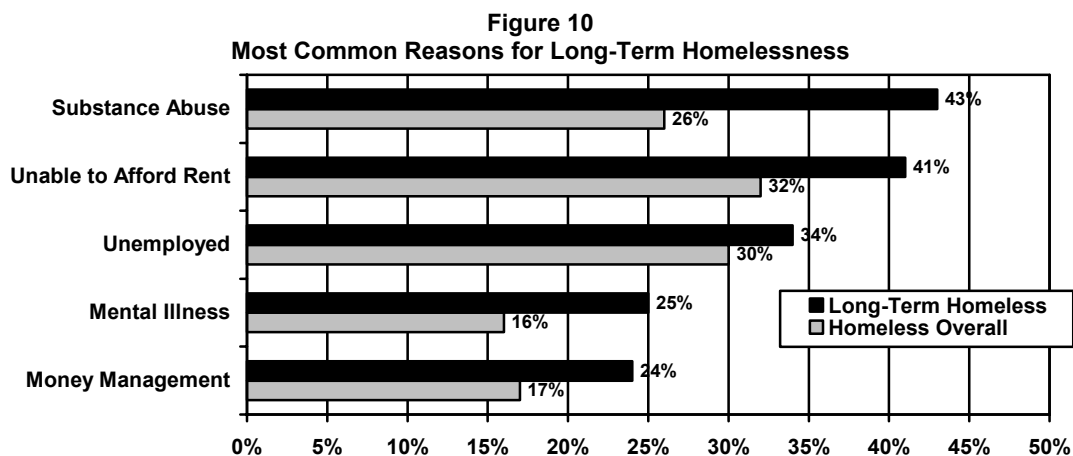
Age is another demographic that differs between the long-term homeless and the homeless population overall. With an average adult age of 41.9 years, the long-term homeless tend to be older than the general homeless population, whose average adult age is 37.8 years. (Table 3)

## Common Characteristics

In order to be classified as long-term homeless, an individual must be affected by one of the following disabilities: a history of substance abuse, mental illness, medical problems, developmental disability or HIV/AIDS. Because of this requirement, the prevalence of many of these characteristics is much greater among the long-term homeless. Other traits more common among the long-term homeless than the general homeless population include an inability to pay rent, money management problems, and a criminal record.

## Reasons for Long-Term Homelessness

The most common reasons for long-term homelessness are the same as homelessness overall: substance abuse; an inability to afford rent; and unemployment. The crucial difference appears to be in the pervasiveness of each. All three of the top reasons, along with mental illness and money management problems, are more common among the long-term homeless than the general homeless population. Forty-three percent of the long-term homeless suffer from a history of substance abuse (compared to 26% overall), 41% aren't able to pay rent (compared to 32% overall), and 34% are unemployed (compared to 30% overall). In addition, 25% face mental illness (compared to 16% overall) and 24% have money management problems (compared to 17% overall). These higher incidence rates signify what appears to be the actual cause of their extended homelessness: most, if not all, are facing multiple obstacles in obtaining a permanent residence. (Figure 10)

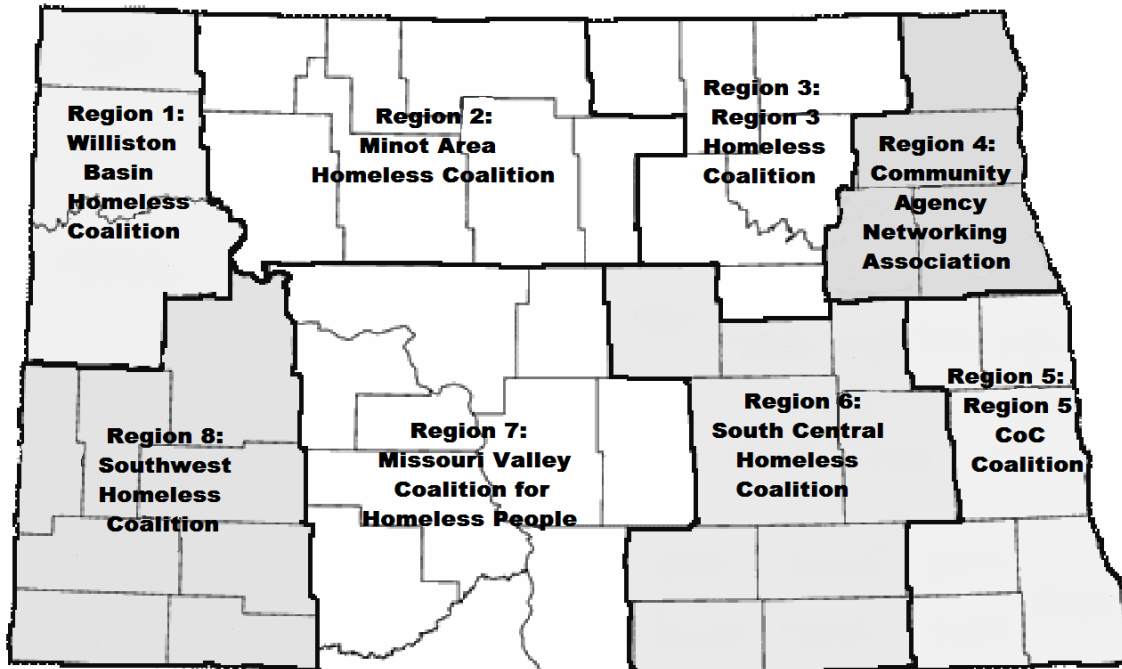


## Utilization of Services

Compared to the general homeless population, the long-term homeless are more likely to receive clothing, food/hot meals, medication, substance abuse services, and transitional housing. They are less apt to receive food stamps, which are also less commonly cited as a source of income. There are no significant differences between the long-term homeless and the general homeless population in regard to difficulty accessing services or services considered most beneficial in obtaining housing.

## REGIONAL DIFFERENCES

North Dakota is divided into eight planning regions, as illustrated in the map below. Differences between the homeless populations of each region are noted in this section. Unless otherwise noted, findings in this section pertain to the overall homeless.



The number of homeless individuals and households in each of the eight regions are as follows:

**Table 4**  
Homeless in North Dakota by Region

	Adults	Children	Total Individuals	Total Households	Literally Homeless	Long-Term Homeless
<b>Region 1</b>	6	0	6	5	6	4
<b>Region 2</b>	28	13	44*	27	28	3
<b>Region 3</b>	106	53	159	86	20	24
<b>Region 4</b>	88	27	124*	94	117	26
<b>Region 5</b>	201	35	249*	208	230	87
<b>Region 6</b>	35	0	35	35	31	21
<b>Region 7</b>	163	83	247*	146	199	50
<b>Region 8</b>	4	1	5	4	5	0
<b>Total - ND</b>	631	212	869*	605	636	215

\*Age is missing for 26 individuals: 3 from Region 2, 9 from Region 4, 13 from Region 5 and 1 from Region 7.

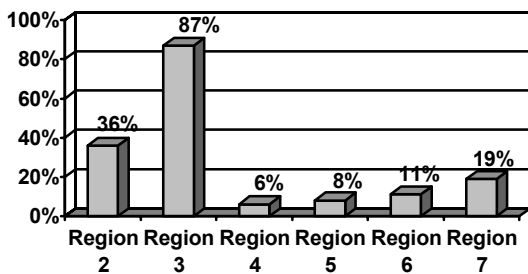
## Region 1 and Region 8

Both Region 1 and Region 8 had too few homeless individuals on the night of the point-in-time survey to be included in any regional comparisons. It is very important to note, however, that such small numbers of homeless individuals are not typical for either of these regions. Those who provide services to the homeless in these areas have reported serving unprecedented numbers in 2006.

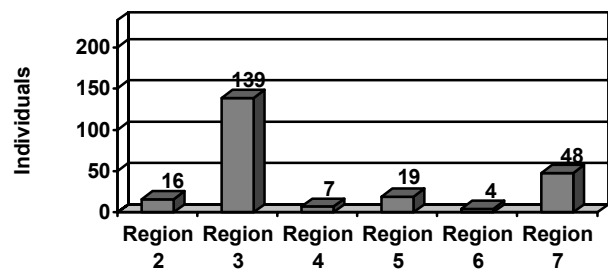
## Precariously Housed Population

The precariously housed homeless are largely clustered in Region 3. A majority of survey respondents who are precariously housed live on the Turtle Mountain Reservation in Region 3 and account for most of that region's total homeless population. Region 2 ranks second in the proportion of their total homeless population that is precariously housed. Region 7 also contains a high number of precariously housed individuals compared to other regions. The higher number of precariously housed individuals in Region 2 and Region 7 are due to increased efforts by survey teams to locate respondents. (Figures 11 and 12)

**Figure 11**  
Proportion of Precariously Housed to Homeless Population Overall by Region



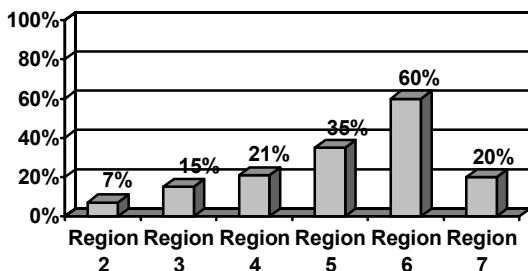
**Figure 12**  
Count of Precariously Housed Homeless by Region



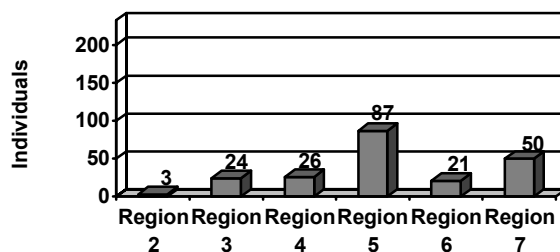
## Long-Term Homelessness

Long-term homelessness is more of an issue in eastern North Dakota than it is in the western half of the state. Region 6 has the biggest proportion of long-term homeless in the state, meaning the homeless in this region are more apt to be considered long-term than the homeless in other regions. This higher rate of long-term homelessness can be attributed to the long periods of time individuals stay in transitional housing provided by the North Dakota State Hospital located in Region 6. Region 4, Region 5, and Region 7 have the largest numbers of long-term homeless, a result of the large numbers of homeless in Grand Forks, Fargo, and Bismarck. (Figures 13 and 14)

**Figure 13**  
Proportion of Long-Term Homeless to Overall Homeless Population by Region



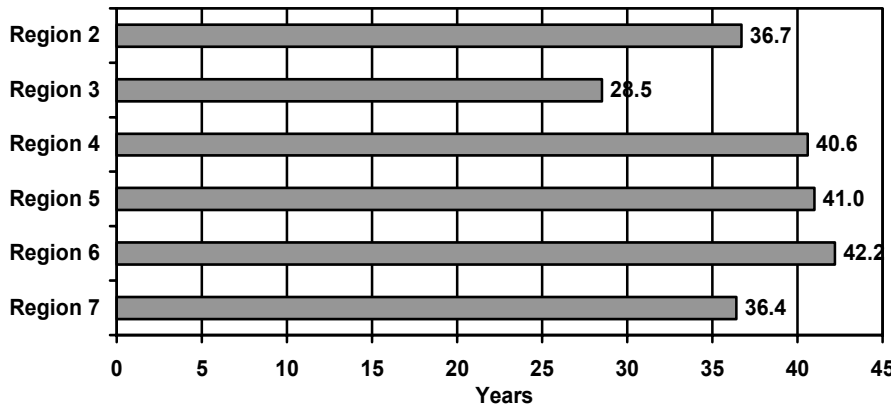
**Figure 14**  
Count of Long-Term Homeless by Region



## Demographics

There are significantly higher proportions of homeless men in Region 4 (76%), Region 5 (69%), and Region 6 (69%). Men are outnumbered by women only in Region 2 (43%). Compared to other regions, homeless individuals in Region 2 (52%), Region 3 (97%), and Region 7 (45%) are more apt to be American Indian; this is presumably due to tribal land being located in and/or near these areas. The homeless in Region 6 are much more likely to be white than they are in other regions (83%) and there is a higher percentage of homeless individuals who are Black/African American in Region 4 (8%) and Region 5 (7%).

**Figure 15**  
Average Age by Region



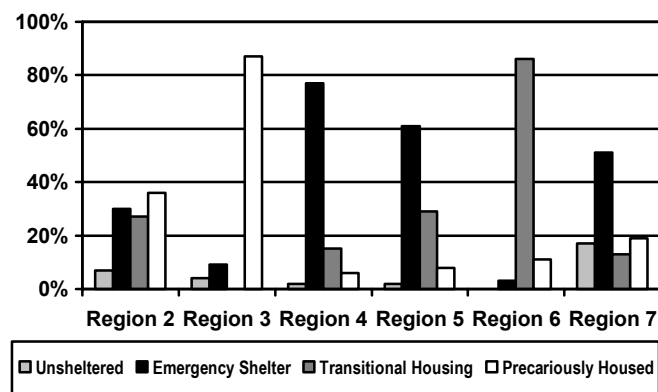
Compared to other regions, homeless individuals are older in Region 4, Region 5, and Region 6. In Region 3, the homeless tend to be younger and the households were much more apt to be headed by someone who is 21 or younger (35%). Region 6 households, on the other hand, are more likely to be headed by someone over 21 (94%). (Figure 15)

Region 7 has the highest percentage of homeless heads of household who do not have a high school diploma or GED (28%). Those in Region 6 are the least likely to have received any post-secondary education (14%).

Homeless households are more apt to consist of a family in Region 2 (33% of households), Region 3 (42% of households) and Region 7 (32% of households); families are significantly less common in Region 4 (15% of households), Region 5 (12% of households) and Region 6 (0% of households).

Homeless individuals in Region 7 are more likely than others to be unsheltered (17%). Emergency shelters are more commonly used by those in Region 4 (77%) and Region 5 (61%); they are less commonly used by those in Region 3 (9%) and Region 6 (3%). Transitional housing is more common among the homeless in Region 6 (86%); it is less common in Region 3 (0%), Region 4 (15%) and Region 7 (13%). Being doubled up or precariously housed occurs much more frequently in Region 3 (87%). (Figure 16)

**Figure 16**  
Where Slept Last Night by Region



The average current homeless episode is longer in Region 4 (2.3 years), Region 5 (2.1 years), and Region 6 (2.0 years) than in other regions. Length of homelessness is shorter in Region 2 (0.5 year) and Region 7 (1.0 year). Frequency of homelessness is lower in Region 6, where 63% of the households are experiencing homelessness for the first time and none have been homeless four or more times in the past three years.

## Common Characteristics

Substance abuse, domestic violence and money management problems are less commonplace among the homeless in Region 2, but the inability to locate an apartment are more common. Homeless individuals in Region 3 are more likely to be unemployed and/or unable to locate an apartment; they are less likely to have money management problems or a criminal record. Criminal records are less common among those in Region 4, as is a history of substance abuse. (Table 5)

Homeless individuals in Region 5 are more likely than those in other regions to have a history of substance abuse, money management problems, a bad credit history, mental illness, medical problems and/or a developmental disability. They were also more apt to be unemployed. (Table 5)

Likelihood of mental illness, substance abuse and money management problems are higher among the homeless individuals in Region 6. Apartment evictions and psychiatric hospital discharges are also more common among this group. They are less likely to be affected by unemployment, a family break-up, domestic violence or an inability to afford rent. (Note that the North Dakota State Hospital is located in Region 6.) (Table 5)

Region 7's homeless are more likely than others to have a criminal record and/or bad credit. In addition, they are more apt to be a parolee or probationer, employed and/or unable to locate an apartment. (Note that the State Penitentiary is located in Region 7.) (Table 5)

**Table 5**  
**Characteristics of the Homeless: Significant Differences Between Regions**

	More Frequent	Less Frequent
Bad credit history	Region 5 (44%) Region 7 (32%)	
Can't locate an apartment	Region 2 (26%) Region 3 (38%) Region 7 (30%)	
Criminal record	Region 7 (38%)	Region 3 (15%) Region 4 (12%)
Developmental disability	Region 5 (13%)	
Discharged from psychiatric hospital	Region 6 (43%)	
Employed	Region 5 (31%) Region 7 (25%)	
Evicted from apartment	Region 6 (23%)	
Family breakup		Region 6 (9%)
History of substance abuse	Region 5 (58%) Region 6 (60%)	Region 2 (7%) Region 4 (21%)
Medical problems	Region 5 (31%)	
Mental illness	Region 5 (40%) Region 6 (83%)	
Money management problems	Region 5 (45%) Region 6 (57%)	Region 2 (22%) Region 3 (16%)
Parolee or probationer	Region 7 (17%)	
Unable to afford rent		Region 6 (20%)
Unemployment	Region 3 (62%) Region 5 (51%)	Region 6 (20%)
Victim of domestic violence		Region 2 (7%) Region 6 (6%)



## Primary Reasons for Homelessness

A lack of available apartments is a more serious issue in Region 3 than in any other area. Not being able to find an apartment is also a more common reason for homeless in Region 7, as are an inability to pay rent, criminal records, and being new to a community. Personal economics and substance abuse are more frequent causes of homelessness in Region 5, while family issues are more often to blame in Region 2. Mental illness, substance abuse, criminal records, and apartment evictions are more common causes of homelessness in Region 6 than in most areas. (Table 6)

**Table 6**  
**Reasons for Homelessness: Significant Differences Between Regions**

	More Frequent	Less Frequent
Can't locate an apartment	Region 3 (33%) Region 7 (21%)	
Criminal record	Region 6 (26%) Region 7 (24%)	
Evicted from apartment	Region 6 (23%)	
Family breakup	Region 2 (56%)	
History of substance abuse	Region 5 (40%) Region 6 (43%)	Region 2 (4%)
Mental illness	Region 6 (74%)	
Money management problems	Region 5 (26%)	
Moved in last 6 months	Region 7 (25%)	
Unable to afford rent	Region 5 (41%) Region 7 (33%)	
Unemployment	Region 5 (38%)	
Victim of domestic violence	Region 2 (41%)	

## Sources of Income

In comparison to others, Region 6 is the most unique in terms of income sources. Region 2 and Region 3 also have a number of differences in contrast to other areas. Region 4 and Region 7 do not significantly differ much from other regions and Region 5 does not differ at all in regard to income sources. (Table 7)

**Table 7**  
**Sources of Income: Significant Differences Between Regions**

	More Common	Less Common
Asking for money on street		Region 2 (0%) Region 4 (1%) Region 6 (0%)
Child support		Region 6 (0%)
Family or friends	Region 3 (35%)	Region 2 (7%) Region 6 (0%)
Food stamps	Region 3 (43%)	Region 6 (3%)
General assistance	Region 3 (31%)	
Job	Region 4 (55%) Region 6 (66%) Region 7 (55%)	Region 3 (21%)
Medicaid	Region 2 (19%) Region 6 (23%)	
Social Security	Region 6 (46%)	
SSI	Region 6 (29%)	
TANF	Region 2 (15%) Region 3 (16%)	Region 6 (0%)

## Utilization of Services

While the homeless in Region 6 are the least likely to stay in an emergency shelter, they are more likely than those in other regions to use many of the other services. Homeless individuals in Region 3, on the other hand, are the least likely to use services. Service utilization in these areas is undoubtedly linked to accessibility: Region 3 has the most accessibility issues and Region 6 has the least. (Table 8)

**Table 8**  
**Service Utilization: Significant Differences Between Regions**

	Used More	Used Less
<b>Basic Needs:</b>		
Emergency shelter	Region 4 (70%) Region 5 (72%)	Region 6 (6%)
Food/hot meals	Region 5 (73%) Region 6 (91%)	Region 2 (33%) Region 3 (24%)
Clothing	Region 5 (63%)	Region 3 (12%)
Case management	Region 6 (91%)	Region 3 (1%) Region 4 (18%)
<b>Healthcare Needs:</b>		
Medical/dental	Region 6 (40%)	
Mental healthcare	Region 6 (86%)	
Medication	Region 6 (83%)	Region 3 (10%) Region 4 (14%)
Domestic violence services	Region 2 (44%)	
Substance abuse services	Region 5 (38%)	
<b>Stabilizing Needs:</b>		
Life skills training	Region 6 (31%) Region 7 (23%)	
Job training/placement	Region 6 (63%)	
Storage	Region 5 (22%) Region 6 (31%)	
Transitional housing	Region 6 (77%)	Region 3 (0%)
Transportation	Region 6 (94%)	Region 3 (8%)

When it comes to services that would be most beneficial in obtaining housing, those in Region 3 are much more likely than others to name more available housing (31%). More available housing (15%) is also more frequently mentioned in Region 2, as is affordable housing (30%). The homeless in Region 5 are more likely than those in other regions to cite a job/better job (21%) and/or addiction services (12%) as needed services. Shelter/transitional housing (15%) and permanent housing (14%) are more apt to be named by those in Region 7.

## Difficulty in Accessing Services

The homeless in Region 6 are the least likely to experience difficulty in accessing services, while those in Region 3 are the most likely to encounter difficulties. (This finding is reinforced, and its consequences are demonstrated, by the service utilization rates in each of these regions.) Permanent housing (50%), transportation (45%), transitional housing (44%), emergency shelter (43%) and relocation assistance (41%) are all cited as being difficult to obtain by large numbers of homeless individuals in Region 3. Other services that are reported as being hard to access in Region 3 include job training/placement (35%), clothing (34%) and housing planning (26%). Access to permanent housing (27%) is also an issue in Region 7.