Assessment of the Provision and Use of Emergency Assistance, Family Homeless Prevention and Assistance Program, and Shelter in Hennepin County

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Executive summary

Over 1,400 families experience homelessness every night in Hennepin County, and thousands more are at serious risk of entering shelter (Hennepin County Office to End Homelessness, 2017). In order to more effectively target services, county officials would like to understand the demographic characteristics and service use patterns of families at risk of entering shelter. This project aims to provide Hennepin County with more information about who is accessing its services and when they are accessing them; specifically addressing these questions:

- How do families who receive Emergency Assistance (EA), Family Homeless Prevention and Assistance Program (FHPAP), or enter shelter compare across demographics and service use?
- Of those who received EA, FHPAP, or shelter services, how many also received services (i.e., EA, FHPAP) before and when?
- To what extent do families that come to the county for homelessness prevention or homelessness assistance follow Hennepin County's expected pathway of services: emergency assistance, community prevention (FHPAP), and shelter?
- Of those who received prevention (i.e., EA, FHPAP), how many also entered shelter within one year? Does Hennepin County target its services (i.e., EA, FHPAP) to those most at risk of entering shelter?

Our research team conducted quantitative analysis on household heads who received homelessness prevention and assistance services from the County. Data on household heads included demographics and use of other county-administered government services. Samples were constructed to look backwards and forwards from families' interactions with homelessness prevention and assistance services to understand the use and effectiveness of these services.

Our research found the majority of families accessing preventive services had a female head of household between the ages of 25 to 34 with one to two children. Relative to their populations in Hennepin County, African American families were disproportionately represented in use of preventative services and shelter. American Indian families were disproportionately represented in shelter and underserved by EA and FHPAP.

The vast majority of families had some level of prior interaction with government services. 92% of families that entered shelter used county administered government services in the year prior to entry. Additionally, families in shelter accessed cash services within the past 12-months (65%) at a significantly higher rate than those in who received EA (46%) or FHPAP (42%). Over 25% of all families had some level of involvement with Child and Adult Protection (SSIS), and 49% of families who entered shelter interacted with SSIS.

This report also examined which County services families accessed and at what times. Homeless prevention agencies in Hennepin County operate under a "prescribed pathway of service"—a guideline that recommends accessing services in a certain order. Our analysis revealed families rarely follow this prescribed pathway. In fact, only 18.8% of families in shelter even applied for

EA in the year prior to entry. Additionally, only 2.2% of families who received an EA denial applied for FHPAP support as the pathway recommends.

This report concludes with recommendations for Hennepin County to more precisely target EA and FHPAP services to those most at risk of entering shelter.

Introduction

This project studies the interactions between families at risk of homelessness in Hennepin County and their use of county-administered services to mitigate experiences of homelessness. Hennepin County has established a pathway of services designed to improve families' housing stability and prevent families from experiencing homelessness. This pathway includes Emergency Assistance (EA) and the Family Homeless Prevention and Assistance Program (FHPAP), which aim to prevent families at risk of homelessness from ultimately experiencing homelessness and entering shelter.

Currently, it is unclear the extent to which families follow this pathway, and therefore the effectiveness and efficiency of this pathway is worth further study. To reduce family homelessness, it is vital that Hennepin County identifies and understands those underserved by the preventative interventions of this pathway.

Through quantitative analysis, this report measures the extent to which families access homelessness prevention services. Analysis separates household heads who received services from Hennepin County into three cohorts: those that applied for EA, those that applied for FHPAP, and those that entered shelter. Each cohort includes information on an individual's gender, age, race, number of children, immigration status, and their use of other governmental benefits. Using this information, the research team studied families' interactions with the County's pathway of services to understand the effectiveness and equity of delivery of these services.

Background

State of the problem

Homelessness is a persistent and complex challenge in Minnesota. Every three years Wilder Research conducts a highly regarded one-night statewide survey to document the prevalence of homelessness in Minnesota. In Wilder Research's recent 2018 homelessness study, they counted 10,233 individuals experiencing homelessness on one given night across the state (Wilder, 2019). Despite declining rates of homelessness between 2012 and 2015, the overall number of people experiencing homelessness in 2018 exceeded peak 2012 levels and was up 10% over 2015 (Wilder, 2019). Additionally, the number of people not residing in a formal shelter, for example, staying outside or doubling up in temporary living situations, increased from 1,662 individuals in 2015 to 2,694 individuals in 2018, a 62% increase (Wilder, 2019). Notably, those

experiencing homelessness in the Twin Cities metro account for 66% of the state's total population of those experiencing homelessness (Wilder, 2019).

Beyond understanding the prevalence of homelessness in Minnesota, several key findings have emerged from Wilder's 2015 and 2018 homelessness research studies. First, children and youth are most at risk of experiencing homelessness. Children age 17 or younger with parents constitute 32% and unaccompanied youth (age 24 or younger) represent an additional 15% of all individuals experiencing homelessness in Minnesota (Wilder, 2019). Another key finding from the 2015 study is that people of color, particularly African Americans and American Indians, are disproportionately affected by homelessness in Hennepin County and across the state (Wilder, 2015). Third, the primary, and at times compounding, reasons people experience homelessness include a lack of affordable housing, unemployment, and other obstacles to maintaining stable housing such as chronic illness and historic or current abuse or violence (Wilder, 2015). With homelessness on the rise in Minnesota, there remains a substantial need for preventive services and shelter.

Historical Efforts of Hennepin County

Over the last twenty-five years, Hennepin County has worked to address the persistent and devastating challenge of homelessness through multiple programs and initiatives. Hennepin County has a "right to shelter" policy, commonly referred to as a Shelter All policy (National Alliance to End Homelessness, 2005). However, in 1993 due to a growing demand for shelter, Hennepin County and the Minnesota Housing Finance Agency collaborated to establish a new program, the Minnesota Family Homeless Prevention and Assistance Program (FHPAP; National Alliance to End Homelessness, 2005). FHPAP is described in greater detail in the *Program Design* section below.

In 2006, "Heading Home Hennepin" launched a bold 10-year initiative to end homelessness in Minneapolis and Hennepin County. The plan included six goals: prevention, outreach, housing opportunities, service delivery, systems improvements, and self-support (Hewitt, 2017). The final report on the plan celebrated progress and new partnerships while acknowledging that after a decade of aggressively working to address homelessness, the issue still exists. External events, including the 2008-2009 housing market crash and the Great Recession, led to increased housing instability and homelessness. In 2017, nearly 9,000 individuals approached the County for homeless services for the first time (Hewitt, 2017).

With the official Heading Home Hennepin initiative coming to a close, the County launched the Coordinated Entry System in April 2016. Coordinated Entry is a system that prioritizes the most vulnerable for housing placement (Hewitt, 2017). In the program's first year it referred 963 single adults and 701 families to housing (Hewitt, 2017). Later in 2016 the Adult Shelter Connect system launched, a one-step system to reserve shelter beds. This system provides people with more certainty of where they will stay each night. These systems, among others are coordinated by the Continuum of Care, the current County-wide effort to prevent and end homelessness.

Programs Designed to Prevent Homelessness

Emergency Assistance
Emergency Assistance (EA) is Hennepin County's primary program providing financial assistance to families experiencing financial emergencies. EA is administered by the County and funded by the Minnesota Family Investment Program's (MFIP) emergency funding (Minnesota Department of Human Services, 2007). EA provides short-term financial assistance to families at risk of losing their housing or facing eviction. Its intention is to support residents in maintaining their housing and preventing evictions and homelessness. EA funds can help with housing costs, such as rent, security deposits, utility bills, repairs, moving expenses, among others (Hennepin County, n.d.).

In Hennepin County, EA operates with a $12.5-million annual budget and spends more on EA than any other county in Minnesota (Minnesota Department of Human Services, 2007). Between 2004 and 2012, the average EA payment was $1,228. An analysis of EA between 2009 and 2010 showed that during this 18-month timeframe, over 16,500 families received EA. Single-adult families represented 67% of recipients, roughly 95% of applicants were females, and over 60% of families had 1 to 2 children. The majority (80%) of recipients were people of color, with over 60% of recipients being African Americans (Ely, González, Hermanson, Winters, 2014). Despite this allocation of resources, two-thirds of individuals surveyed after exiting Hennepin County's 4th district Housing Court had never heard of EA (Hennepin County Office of Housing Stability, 2017).

To receive EA, families must follow an established process and meet certain qualifications before funds can be distributed. Families need to apply in-person at either the Health Service building or a local county service office. Applying requires filling out an application documenting their residency, income, family size, housing costs, and other information requested about their household. Within 30 days families receive a decision regarding their application. Families must meet income guidelines and be able to prove their housing crisis is resolvable based on their current available resources and housing costs. The crisis situation impacting a family's ability to pay for housing must be non-recurrent and pertain to a specific crisis episode, rather than be an ongoing issue of resource instability. For those who do receive assistance, the amount they receive depends on the family's need and the EA funds available in Hennepin County. Families cannot use EA more than once within a 12-month period.

Hennepin County homelessness prevention service providers have noted that the EA program is difficult for clients to navigate and unclear in regard to eligibility requirements and program policies. Providers mentioned the 30-day application processing time is too long to prevent homelessness for families in crisis, and that the County's definition of a "resolvable" crisis is discretionary and a barrier to families obtaining needed assistance. In general, navigating the system from a client's perspective was noted as a challenging or even unwelcoming experience; some providers even mentioned that clients are discouraged by county employees from even applying (Holdener, Nelson, Quint, Rea, Svitavsky, Uhrich, Whelan, Zanoni, 2018).

Family Homeless Prevention and Assistance Program (FHPAP)
The Family Homeless Prevention and Assistance Program (FHPAP) was established in 1993 by

the Minnesota Legislature. The program intends to serve individuals and families at-risk of becoming homeless through the delivery of prevention services. Minnesota Housing administers FHPAP to subcontracted local agencies through a request for proposal process (Minnesota Housing, 2019). FHPAP is part of Hennepin County's Continuum of Care for housing services and provides services to individuals and families to prevent homelessness, or otherwise quickly resolve homelessness. The FHPAP budget in Hennepin County is around one million dollars and there are nine FHPAP service providers in Hennepin County (Interview, Hennepin FHPAP). To receive FHPAP services in Hennepin County, a family must have first been denied EA, be at or below 200 percent of the Federal Poverty Guidelines, and be homeless or at "imminent risk" of homelessness. Imminent risk includes being likely to lose housing within 30 days and having a tangible threat of eviction. Clients are referred to organizations that implement FHPAP services through their EA denial, by other assistance programs, or by word of mouth. Families must fill out an application and provide materials to supplement their application, such as income verification.

Once completed, providers determine their eligibility for assistance (Hennepin County, 2018). Due to the limited funds available, providers must use their discretion to determine who should receive services and who is likely to benefit the most. There is a cycle each month where funds become available to grantees, however resources are often exhausted quickly and are unavailable until the next month's grant distribution cycle. Typically, individuals need to contact these programs within this brief window to receive FHPAP funds. Providers note this process is not efficient in targeting those most in need of services (Holdner et al., 2018). A new tool has been developed to target families applying to FHPAP called the Minnesota Homelessness Prevention Assistance tool that will be implemented starting July 1, 2019. This new tool was designed to assist providers in verifying client eligibility, identifying the households most at risk of experiencing homelessness, and ultimately reducing the number of people who become homeless (Hennepin County, 2018).

FHPAP has two main types of assistance: case management and direct/financial assistance. Case management includes working with families to develop a housing stability plan and providing client advocacy services to resolve the housing crisis (e.g., housing search, landlord mediation, system navigation, employment services, public benefit application). Direct/financial assistance includes rent or utility assistance, security deposit funds, or other uses of funds to prevent homelessness. The majority of the FHPAP assistance in Hennepin County is one-time financial assistance, but families can receive services for longer periods of time (Hennepin County, 2018).

Shelter

Hennepin County's homelessness service model seeks to prevent shelter entry and works under the principle that experiences of homelessness should be, "rare, brief, and non-recurring" (Heading Home Hennepin, 2017). Efforts are focused on preventing shelter entry to the extent possible for families, operating under the assumptions that shelter is resource intensive for systems and disruptive for families (The National Alliance to End Homelessness, 2005). Families in emergency situations unable to secure housing can seek temporary placement in family shelter due to the county's Shelter for All policy (i.e., families have a right to shelter). People Serving People and St. Anne's Place are the two county-funded shelters, an additional family shelter, the Drake Hotel, is designated as overflow. People Serving People is the main

family shelter, with 99 rooms (Office to End Homelessness, 2019). Shelter usage has changed over time in the County and need has outpaced shelter capacity. Recently, shelter use has decreased from its peak in 2013 of 1,572 families to 1,146 families in 2017 (Heading Home Hennepin, 2017). As of the beginning of 2019, the average weekly count of families staying in Hennepin County Emergency Shelter was 150 families (Office to End Homelessness, 2019).

Families enter shelter by first applying in-person to the Hennepin County Shelter Team at a shelter office location. Families must provide copies of their children's birth certificates, their photo identification, documentation verifying the family is experiencing homelessness (such as an eviction notice, letter from landlord, etc.), as well as proof of their current income (which is used to pay for their shelter stay). Families are then placed in one of the two contracted family shelters. Once entering shelter, families are screened and prioritized for additional homelessness services (Rapid-Rehousing, Permanent Supportive Housing) using the Vulnerability Index – Service Prioritization Decision Assistance Tool (VI-SPDAT). Depending on the current demand, the VI-SPDAT is completed within two weeks to two months. While in shelter, families develop a case plan; meeting with a Family Advocate weekly to set goals to achieve their case plan and re-voucher for their shelter stay. In order to re-voucher for another week of shelter, families must apply to two jobs (if applicable) and research two housing options per-day. A small percentage of families may be chosen to receive Rapid-Rehousing while in shelter. These families work with a Housing Worker who helps them find secure stable housing. Most of the individuals in shelter do not receive housing case management services beyond general advocacy services. Families have resources at the shelter, such as a computer lab, housing information, bus cards, and are connected to community resources to help them secure housing. Ultimately, the families are responsible for finding their own housing and employment and connecting to resources outside of shelter.

Clients' Perceptions of Services

Hennepin County's Office to End Homelessness is conducting a qualitative assessment of clients' perceptions and knowledge of preventive services (Hennepin County Human Services Integrated Planning and Analysis). Though the assessment is still underway, staff completed interviews with 26 individuals who accessed shelter within the last year. The majority (85%) of respondents were aware of the County's Emergency Assistance program, but only 31% applied for it. Of those who were aware of EA but did not apply, many expressed frustrations at the complexity of the process and the lack of assistance helping them navigate it. One individual had difficulty "figuring out how to connect to the right places," while another lamented the "communication was off" with their case management team. Other respondents stated they "didn't know what to do" in the application process and that the "system is very overwhelming;" similarly, another respondent found "the forms were a little complicated. [I] Didn't know you had to apply for different services." These responses provide greater context to the 88% of participants who said they would like more assistance in navigating the variety of County resources and services.

Literature review

Prevention strategies and services

To meet the unique circumstances of families facing homelessness, Hennepin County employs a wide array of services to address each situation. Each prevention strategy can be evaluated across two metrics: effectiveness and efficiency; effectiveness refers to strategies that either prevent someone from becoming homeless or end homelessness, whereas efficiency refers to the provision of these services in a manner that ensures they are directed towards those who would otherwise become homeless (Burt & Pearson, 2005). Prevention services and strategies fall into three categories: (1) primary prevention, (2) secondary prevention, and (3) tertiary prevention (Culhane, 2011). Hennepin County's efforts, and those which will be the focus of this project, focus on primary and secondary prevention.

Primary prevention orients efforts towards households before a crisis is experienced which would precipitate imminent homelessness (Culhane, 2011). Included in primary prevention efforts are cash assistance (Emergency Assistance), housing vouchers, social welfare initiatives including TANF, SSI, and EITC, and some components of FHPAP (Culhane, 2011). The central challenge of primary prevention efforts is who to direct services to because not every family at risk of homelessness experiences it.

Some studies have found a correlation between receiving Emergency Assistance and avoiding shelter. A 2005 HUD study found that just 2% to 5% of families that received cash assistance became homeless twelve months later. This is substantially lower than the 20% of families that became homeless with no interventions (Burt, 2005). In another study, researchers from the University of Notre Dame compared outcomes for two groups: people who called into the Chicago Homelessness Prevention Center when Emergency Assistance funding was available and those who called when no funds were available. Researchers found those who called in when funds were available were 65% less likely to enter shelter than those who called when funds were not available (Wilson Sheehan Lab for Economic Opportunity, 2015).

Even if it does not prevent shelter entry, emergency financial assistance does seem to reduce the total number of nights spent in shelter. In New York City, the Department of Homeless Services estimated families who received emergency financial assistance spent 25.3 fewer nights in shelter per year than families of similar circumstances who did not receive these services (Rolston, Geyer & Locke, 2013).

Secondary prevention shifts from those on the verge of homelessness to those who have just entered shelter, prioritizing swift exit from shelter to housing (Culhane, 2011). FHPAP in Hennepin County includes components, particularly those focused on rapid exit from shelter, which would be classified as secondary prevention. Lastly, tertiary prevention focuses on reducing the duration of homelessness for those in need of intensive and long-term assistance to exit homelessness due to special needs or barriers to obtaining stable, long-term housing (Culhane, 2011).

To effectively target homelessness prevention services, it is crucial to understand these three levels of homelessness prevention and those who would most benefit from each type of service. Some households do not need any or all of these to ensure they avoid or exit homelessness and obtain secure housing.

Differences across service use

Research has found homelessness is disproportionately experienced by certain groups more than others. African Americans constitute over 55% of the homeless population in Hennepin County, despite representing just 13% of the County's population. Moreover, American Indians represent 6% of the homeless population in Hennepin County, despite accounting for just 1% of the County's population (Wilder Research, 2015). Three out of four homeless children in Hennepin County are with a single female caregiver (Wilder Research, 2016). This is consistent with the finding that family households experiencing homelessness tend to be predominantly headed by women and are younger than those who enter shelter alone (Culhane et al., 2007).

Service navigation challenges

There is strong consensus in the literature that many, if not most, individuals at risk of homelessness lack the knowledge about available preventive services and programs (HUD, 2010). Moreover, there is a lack of educational infrastructure to make these programs more well-known in respective communities. Across locations and demographics, individuals often do not understand what benefits they qualify for, leading them to forgo services that could prevent eviction or homelessness (Bonin, 2010).

Beyond individuals experiencing homelessness, many service providers have a limited understanding of the process. Social service delivery is often complicated, requiring years of working in the field to learn how to navigate the system. Additionally, social workers have one of the highest turnover rates of any profession in the nation, and not many employees stay in one position long enough to become a reliable source of this information (Wagaman, 2015).

Our research identifies gaps particularly in Hennepin County's understanding of its pathway (i.e., Emergency Assistance to FHPAP to Shelter) to prevent homelessness. Hennepin County's innovative and responsive services to homelessness have situated it as a leader in the homelessness policy arena. Its leadership is evident in the inclusion of its efforts in a study commissioned by the national Department of Housing and Urban Development studying six regions across the United States in regard to effective homelessness prevention services (Burt & Pearson, 2005). What remains of interest to Hennepin County is the extent to which these services, in sum, are provided efficiently and effectively to prevent homelessness or ensure rapid exit from homelessness.

Research questions

The goal of this research is to gain a better understanding of how Hennepin County's homelessness prevention services are being utilized. With this knowledge, Hennepin County will be able to reduce homelessness by identifying gaps in service and will be able to more accurately target its services to families most at risk of entering shelter. The research questions pursued in this study include:

1. **Characteristics analysis:** How do families who receive EA, FHPAP, or enter shelter compare across demographics and service use?

2. **Service pathway:**
   A) **Retrospective:** Of those who received EA, FHPAP, or shelter services, how many also received services (i.e., EA, FHPAP) before and when?

   B) **Prospective:** To what extent do families that come to the county for homelessness prevention or homelessness assistance follow Hennepin County's expected pathway of services: emergency assistance, community prevention (FHPAP), and shelter?

3. **Risk assessment & targeting:** Of those who received prevention (i.e., EA, FHPAP), how many also entered shelter within one year? Does Hennepin County target its services (i.e., EA, FHPAP) to those most at risk of entering shelter?

Quantitative Methods

Hennepin County's Office of Housing Stability provided datasets of families who accessed county homelessness services, including EA, FHPAP, and family shelter services, between 2015 and 2018. Hennepin County constructed the datasets by merging the name, date of birth, and social security numbers of FHPAP and shelter recipients to the MAXIS system. EA applicants and data were merged by MAXIS number. Hennepin County provided an analysis sample which included 18,740 unique de-identified person ID numbers, with information on demographic characteristics and additional county-level service use.

Information on family demographics included race, date of birth, immigrant status, and gender of the applicant or recipient, and the number of adults and children in the household at the earliest date they appear in the sample. In terms of county services for homelessness, the data included information on EA applications and the subsequent results, FHPAP use recorded by month, and shelter stays recorded in days. Information on other county-level government services included Minnesota Family Investment Program (MFIP), Supplemental Nutrition Assistance Program (FS), Diversionary Work Program (DW), Family Stabilization Services (FSS), MinnesotaCare (HC), and Child and Adult Protection System (SSIS).

Characteristics analysis: *How do families who receive EA, FHPAP, or shelter compare across demographics and service use?*

To compare families receiving EA, FHPAP, and shelter, a sample was created that identified and consisted of each household head's earliest use of each service between January 1, 2017 and June 30, 2018. The creation of this sample resulted in three cohorts reflective of each service. By selecting the latter 18-months of the dataset provided by Hennepin County, retrospective information about those in each cohort could be gleaned from analyzing each ID's service activity in the 12-months preceding their use of EA, FHPAP, or shelter.

Since household heads may receive more than one type of homeless prevention service, it is possible for them to appear more than once in the data set. Across the three cohort samples there was one instance of a discrepancy between the date of birth and another between the numbers of children listed for the same household head. To resolve the date of birth discrepancy, the date of birth that was most consistent across datasets (e.g., the same date of birth listed for both EA and shelter use) was selected. To resolve the number of children discrepancy, the number corresponding to the largest family size was selected.

Age was calculated by subtracting the household head's date of birth from the date at the earliest point of the household head's contact with government services for homelessness within the constructed sample period (between January 1, 2017 and June 30, 2018). For the EA cohort, the earliest point of contact was the EA application date. For the FHPAP cohort, the earliest point of contact was the date when the FHPAP service was provided. For the shelter cohort, the earliest point of contact was the date when the family arrived in shelter.

Immigration status was included in the data but changed temporally. Immigration statuses of those in the three cohorts was identified at the nearest date prior to each household head's use of services; more accurately capturing the current state of reality when each household head accessed the service. Roughly 8.9% of the entire three cohort sample had an immigration status that differed from "citizen." For meaningful analysis considering this small percentage, immigration statuses were combined into three groups: (1) lawful permanent resident, lawfully residing, and non-immigrant; (2) deported, remove within one year, and undocumented; and (3) asylee and refugee.

There were 79 household heads in the FHPAP cohort and 111 household heads in the shelter cohort that appeared to have "missing" or no demographic or retrospective government service use data. An additional analysis was conducted to determine whether there was reason to believe these household heads were lacking a successful match in the MAXIS system. Demographic and government service use data, not bounded by the retrospective timeframe, was merged with the 190 household heads' IDs to determine whether these individuals matched with any of the other data. None of the 190 household heads matched with the merged data suggesting these individuals lacked a match in the MAXIS data, and therefore these household heads were dropped from the sample because we could not accurately determine whether data was missing in the MAXIS system or it did not exist.

For both the EA and FHPAP cohorts, there were cases where the dates of initial use of EA or FHPAP coincided with use of shelter services, which may indicate families were using EA to pay for shelter stays or using FHPAP as rapid rehousing when exiting shelter. To focus on the use of EA and FHPAP intended to prevent homelessness, household heads in the EA or FHPAP cohorts with overlapping shelter use were moved into the shelter cohort. A household head in the EA cohort was defined to have overlapping shelter usage under the following conditions: the EA benefit recipient month was the same as the shelter usage month, or the shelter check-in was between the EA application date and 30-days after the EA approval date. These rules moved 1,123 household heads from the EA cohort. A household head in the FHPAP cohort was defined to have overlapping shelter usage if the FHPAP benefit recipient month was the same as the shelter usage month. This rule moved 45 household heads from the FHPAP cohort.

After resolving the issues discussed above, the EA cohort consisted of 2,688 household heads, the FHPAP cohort consisted of 347 household heads, and the shelter cohort consisted of 1,280 household heads.

To analyze how each cohort compared across demographics and government service use, each household head had (to the extent it was recorded in MAXIS): date of birth, gender, race, immigration status (prior to service use), number of children, and prior months of government service use (within the 12-months prior; families with 13 months of usage used the benefit into the current month they received EA, FHPAP, or shelter).

Government services included: MFIP, FSS, DW, FS, HC, and SSIS. Government service use within the 12-months prior was calculated by counting the number of months a household head used the benefit prior to and including the month they received either EA, FHPAP, or entered shelter. For the EA, FHPAP, and shelter cohorts, the reference date used to calculate prior service use was the first of the month in which the household head received EA or FHPAP or entered shelter. Services were then counted using the number of months the household head used the benefit in the prior 12-months into the current month they received EA, FHPAP, or shelter. To broadly understand government service use, two additional analyses determined the extent to which household heads used cash services (MFIP, FSS, DW), and any services (cash, FS, HC) within the prior 12-months.

Movement through the Service Pathway: Retrospectively and Prospectively

Retrospective and prospective analysis provided information about how families at risk of or experiencing homelessness moved through the County's pathway of services.

Retrospective: *Of those who received FHPAP, EA or entered shelter, how many also received services (i.e., EA, FHPAP) before and when?*

The retrospective data looked backwards from families' entrance into one of the three cohorts (defined above), providing information on the services received in the 12-months prior to entering the pathway of services. Reference dates to measure prior use included: the EA approval date for the EA cohort, FHPAP service date for the FHPAP cohort, and the check-in date for the shelter cohort.

The data recorded if a household head was accepted or rejected for EA, separating the dataset into three groups: total EA applications, EA approvals and EA denials, to compare EA approval and denial numbers across all three cohorts. Similarly, prior FHPAP and shelter use across the three cohorts was analyzed; these were not broken down by approval or denial.

Prospective: *To what extent do families that come to the county for homelessness prevention or homelessness assistance follow Hennepin County's logical pathway of services: emergency assistance, community prevention (FHPAP), and shelter?*

The prospective analysis looked forward after a family accessed homelessness services, providing information about families' specific paths in the year following their entrance into the County's pathway of services for homelessness.

To examine how household heads moved through the homelessness prevention system, a prospective analysis of service use within a year following program entry was conducted. The sample included all cases that applied for EA between October 1, 2015 and July 1, 2017 or who began using FHPAP between December 7, 2015 and July 1, 2017. The EA cohort included all EA applications with an application date that occurred during this period. Because an initial approval for FHPAP may trigger multiple months of service use, FHPAP records were collapsed into spells of service use; an FHPAP spell started at the date of initial FHPAP service receipt and ended when a household head no longer received FHPAP services for three consecutive months.

To assess only the funds from these programs that were truly for preventing shelter entry, the sample was further restricted by removing observations where the EA application or the FHPAP spell start date was on the same day or during a shelter spell. Shelter spells were defined to end when a family exited shelter and remained out of shelter for 30 days.

For both the EA and FHPAP cohorts, time to shelter entry was determined by comparing dates of shelter entry to the EA application or the initial FHPAP receipt date to assess how many EA applicants or FHPAP recipients entered shelter in the following year. Similar analyses were conducted to determine how many cases received FHPAP in the year following their EA application.

Risk Assessment and Targeting: *Of those who received prevention (i.e., EA, FHPAP), how many also entered shelter? Does Hennepin County equitably target its services (i.e., EA, FHPAP) to those most at risk of entering shelter?*

To illuminate those most at risk of entering shelter, a logistic regression was run using the prospective sample described above, which includes all cases that applied for EA or started an FHPAP spell prior to July 1, 2017 but excluded cases with overlapping shelter use. The dependent variable was whether the household head entered shelter within one year. The final regression sample was 17,634 observations. Demographic characteristics (i.e., gender, age, race, and immigration status) were included as independent variables as well as an indicator for EA applications, EA denials and FHPAP use. Given the short timeframe of data available for

analysis, the regression did not include indicators for the use of county services in the year prior to program entry.

The reference category for gender was female, compared to male. For age, the reference category was 25 to 34 years of age, compared to 15 to 24 years of age, 35 to 44 years of age, 45 to 54 years of age, and 55 years of age or more.

The reference category for race was White, compared to Black and African American, American Indian, and an additional category comprised of Asian or Pacific Islander, Multiracial, and those with races were recorded as "Unable to Determine." Due to small sample sizes of those in the additional category, analyzing the nuances between these racial groups was not possible, though the research team would have liked to explore this further. Hispanics were also included in the additional race category to prevent collinearity with the immigration status variable.

For immigration status, the reference category was non-immigrant and compared to an immigrant category that encompassed all reported immigration statuses (i.e., undocumented, deported, refugee, asylee, lawful permanent resident, and lawfully residing). In cases where household heads had multiple immigration statuses recorded on different dates but were associated with the same service application date, the observation with the immigration status that was closest to and before the application date was kept, and other duplicate observations were removed.

Limitations of Quantitative Results

These datasets provided a wealth of information, while also presenting limitations. The three-year span of data provided a limited window into family's interactions with Hennepin County homelessness prevention services. Crises are not often linear nor always resolvable, and thus families facing housing crises often navigate back and forth through the system. The data is unable to speak to families' experiences and interactions with the system outside of the three-year data time frame. Additionally, due to a constrained time frame of data, boundaries were imposed to create and identify characteristics of the sample. Any interactions with the system that occurred outside of these imposed boundaries were not captured in the data, and therefore important characteristics or pathways of service use may have been omitted from analysis.

The data did not include information about what EA services paid for. With more refined data we could have only removed the EA cases that overlapped with shelter because they were paying for shelter stays, instead of removing all EA cases that overlapped with shelter stays.

Demographic and government service use information were matched with FHPAP and shelter information using household head name, date of birth, and social security. This matching procedure might have been inaccurate as name, date of birth, and/or social security information might not have been inputted or was inputted incorrectly, resulting in a lack of match in the MAXIS system and the exclusion of some household heads.

This project provides a prospective analysis of household heads likelihood of entering shelter after receiving or being denied EA or FHPAP. The analysis is limited to the characteristics of household heads provided in the data (gender, age, race, immigration status, number of children, government service use). These constraints limit the predictive characteristics used to understand household heads' likelihood of entering shelter after interacting or not interacting with the County's homelessness prevention services.

It cannot be concluded that those who never accessed services necessarily resolved any housing crisis. Analysis in this report measures use of county shelters, but not other measures of housing instability, such as entering private shelter, doubling up, or living in places not meant for human habitation. Furthermore, the data used to answer these research questions does not necessarily reflect alternative pathways and resources (e.g., family or informal community support systems) used by those who experience housing crises and do not seek services from the County.

This data and its results cannot claim causality. There were no controls to assess the extent to which families received other resources to stabilize or resolve their crises outside of resources from the County. Additionally, there were no comparison groups to which families could be compared against in order to understand what would have happened had they not received county services. At most, this data and its results can speak to associations between the experiences of families and the use of county services.

Lastly, quantitative data provides insight into general trends across experiences but cannot entirely speak to the nuances between the experiences of those in the data. Hennepin County is currently conducting qualitative analysis which would add to the findings of this project.

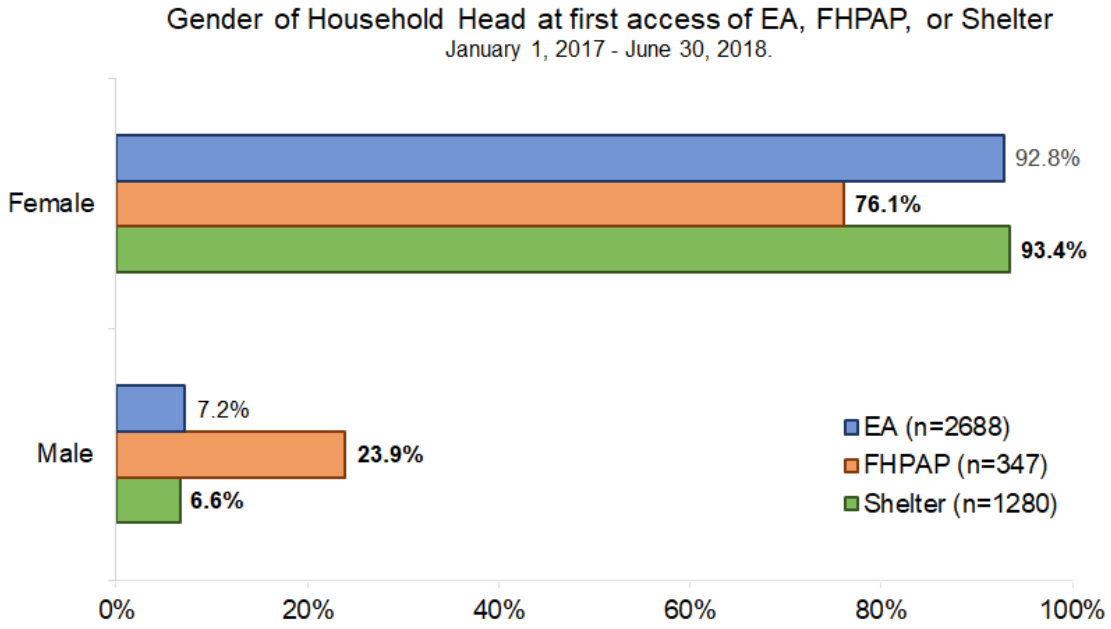
Analysis of Quantitative Results

Characteristics analysis: *To what extent do families that come to the county for homelessness prevention or homelessness assistance follow Hennepin County's logical pathway of services: emergency assistance, community prevention (FHPAP), and shelter?*

Demographic Information
Figures one through four (and Table 4 in Appendix) present demographic information: gender, age, race, immigration status, and number of children, by the three cohorts of service use (i.e., EA, FHPAP, shelter) to determine how these cohorts compare demographically.

Women constituted the majority (over 75%; see Figure 1 below) of household heads accessing EA, FHPAP, and shelter. This finding is consistent with the literature that family households experiencing housing crises tend to be predominantly headed by women (Culhane et al., 2007). Despite constituting the majority of household head users, the proportion of women in the FHPAP cohort was significantly less than the proportion of women in the EA or shelter cohorts. A lesser proportion of women accessing FHPAP could be attributed to differences in coding household heads between HMIS (Homeless Management Information System) and MAXIS.

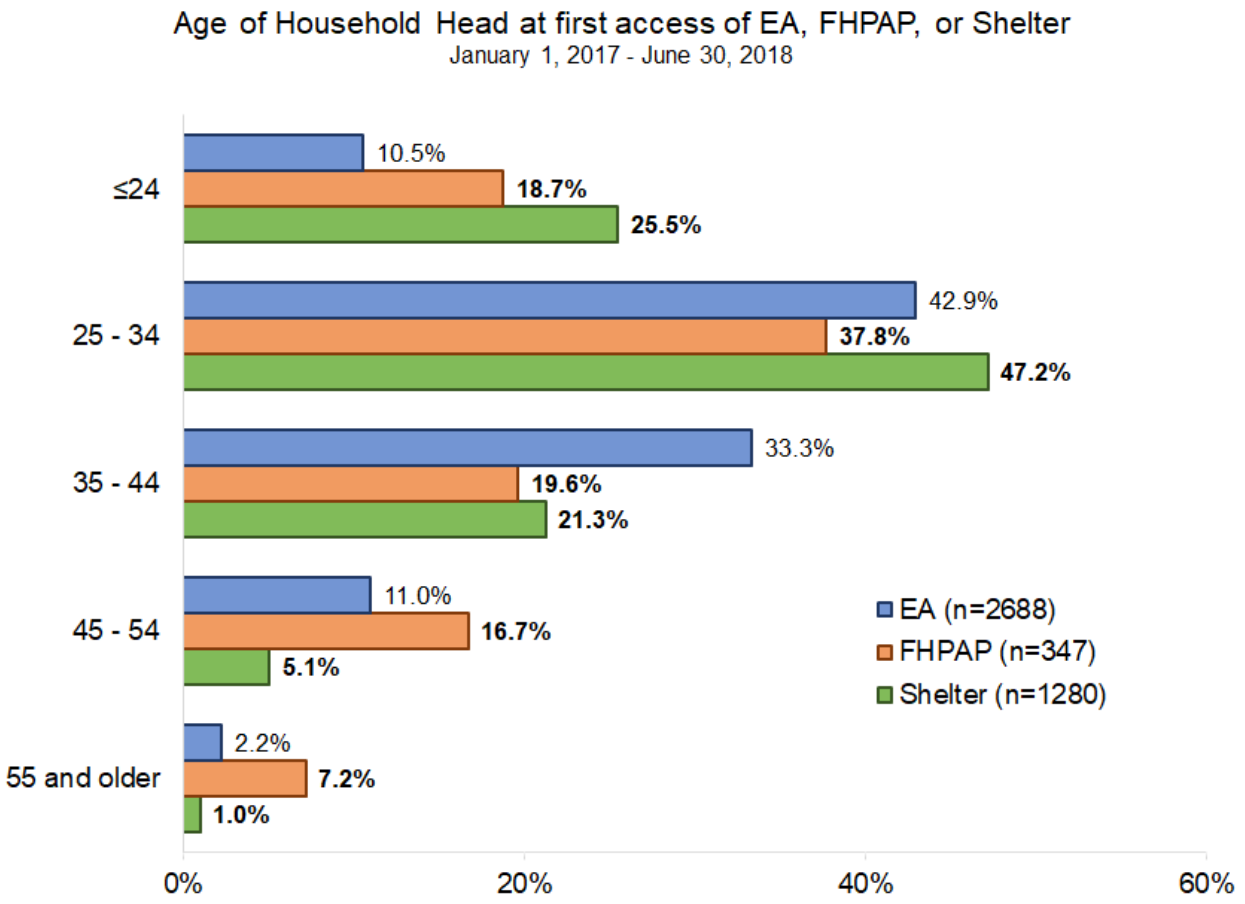
Figure 1.



Note: Bolded shelter percentages indicate significant difference between proportions in the shelter and EA cohort. Bolded FHPAP percentages indicate significant difference between proportions in the FHPAP and EA cohort.

Across all three cohorts, the majority of household heads (43% of EA, 38% of FHPAP, and 47% of shelter; see Figure 2 below) accessing services were between the ages of 25 to 34. The proportion of those between the ages of 15 to 24 and 25 to 34 in the shelter cohort (25.5% and 47.2%, respectively) were significantly greater than the proportions in the EA (10.5% and 42.9%, respectively) or FHPAP (18.7% and 37.8%, respectively) cohorts. This finding is consistent with the literature which identifies young adults as a higher risk population for homelessness. Additionally, the proportion of those aged 15 to 24 in the FHPAP cohort (18.7%) was significantly greater than those in the EA cohort (10.5%). These findings suggest the County's targeting of EA and FHPAP may not be reaching this high-risk young adult population.

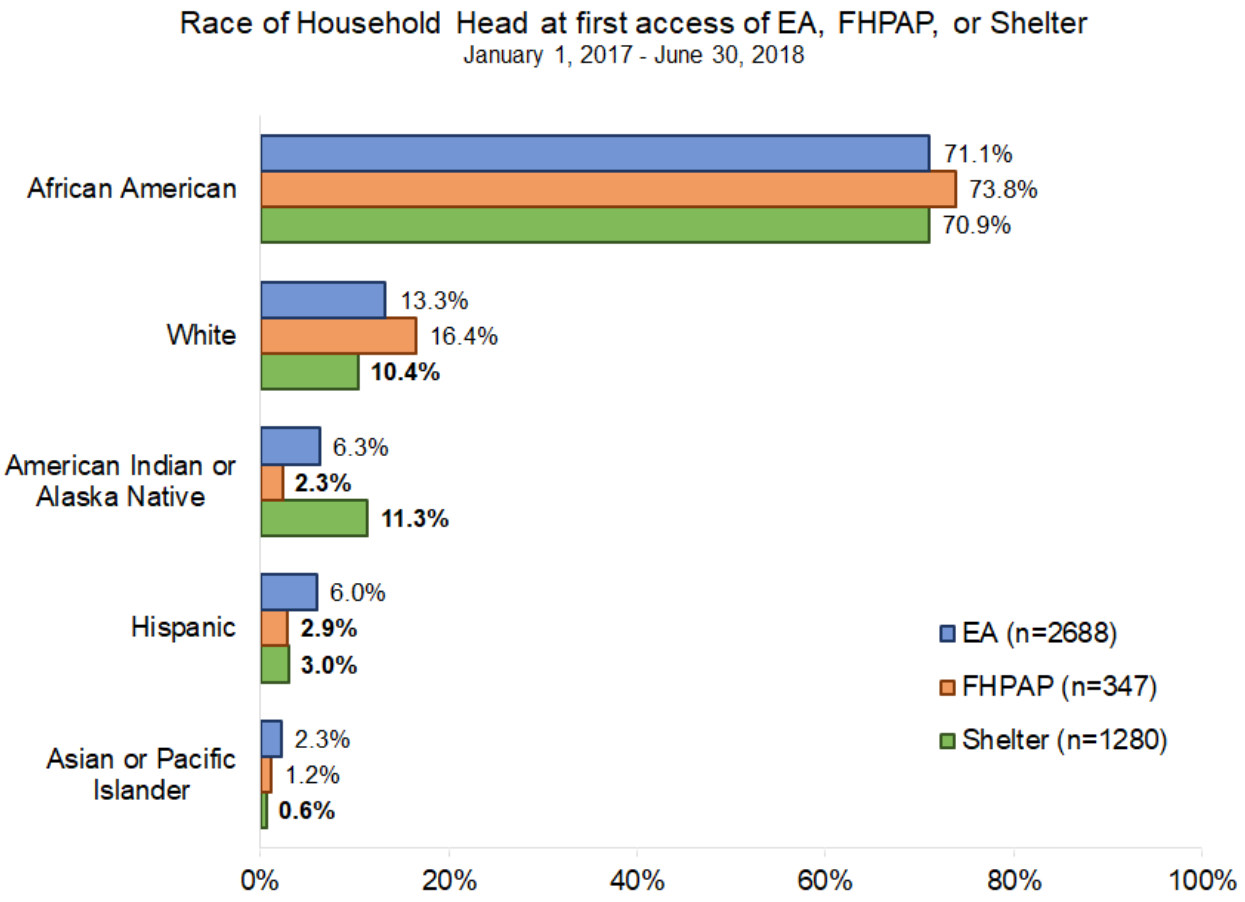
Figure 2.



Note: Bolded shelter percentages indicate significant difference between proportions in the shelter and EA cohort. Bolded FHPAP percentages indicate significant difference between proportions in the FHPAP and EA cohort.

In terms of race, African Americans constituted the largest proportion of those accessing each of the three services (nearly 70% of each cohort; see Figure 3 below; Table 1 in Appendix), but there were no significant differences between the proportions of African Americans who received EA, FHPAP or entered shelter. The proportion of American Indians or Alaskan Natives in the shelter cohort (11.3%) was significantly greater than the proportion of those in the EA (6.3%) or FHPAP (2.3%) cohort. These findings suggest American Indian or Alaska Natives are under targeted by EA and FHPAP services relative to the proportion entering shelter. The proportion of white household heads was significantly lower in the shelter cohort (10.4%) than in the EA (13.3%) or FHPAP (16.4%) cohorts, as were the proportions of Hispanics and Asian or Pacific Islanders. It is possible that EA over targets these racial groups relative to the proportion of each group entering shelter. Additionally, cultural factors could provide protective factors to prevent shelter entry (e.g., living nearby or with extended family or close community members).

Figure 3.

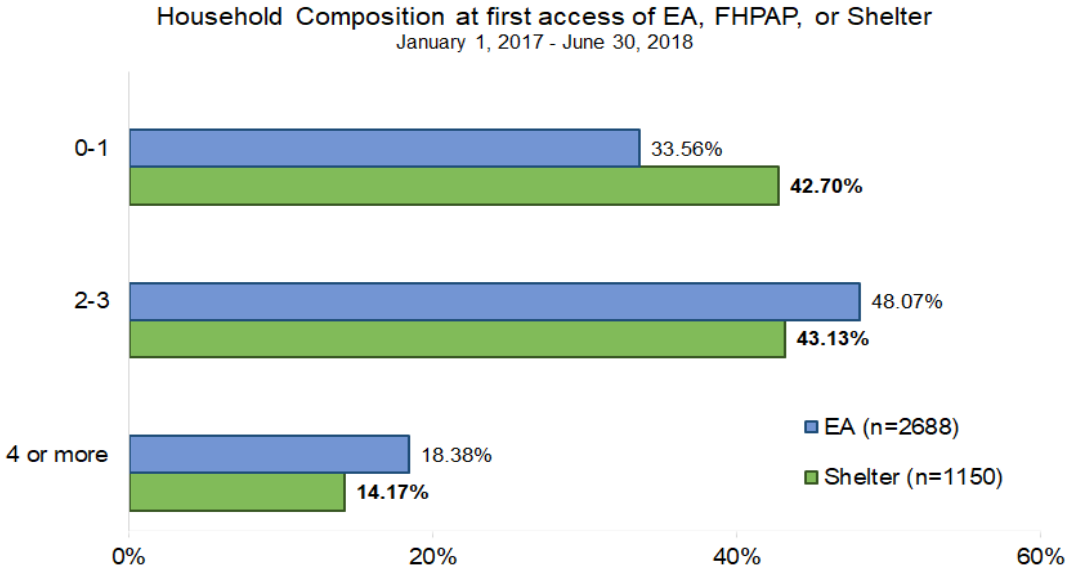


Note: Bolded shelter percentages indicate significant difference between proportions in the shelter and EA cohort. Bolded FHPAP percentages indicate significant difference between proportions in the FHPAP and EA cohort.

Overall, immigrants comprised less than 10% of household heads in the total sample (see Table 2 in Appendix). The proportion of immigrants in the shelter cohort (3%) and the FHPAP cohort (4%) were significantly lower than the proportion of immigrants in the EA cohort (11%). Immigration could provide a protective factor against entering shelter or accessing FHPAP in that immigrant household heads may be more likely to consolidate housing resources (i.e., living in larger households) or have other forms of community supports.

In terms of household composition, EA typically served larger family sizes (two or more children), whereas shelter served smaller family sizes (zero to one child; see Figure 4 below). The proportion of those in the shelter cohort with 2 or more children (57.3%; totaling percentages for 2 to 3 and 4 or more children) was significantly less than the proportion of those in the EA cohort (66.45%).

Figure 4.



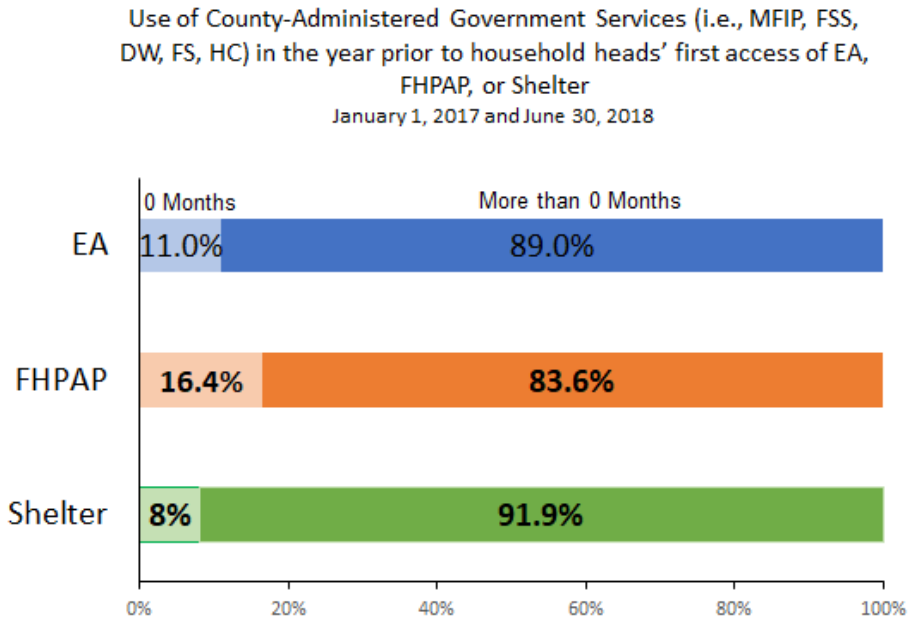
Note: Bolded shelter percentages indicate significant difference between proportions in the shelter and EA cohort. Values for the FHPAP cohort not reported due to over 50% (209) without household composition information. Across all three cohorts, 3.75% (149) household heads had zero children listed.

Use of County-Administered Government Services

Figures five through nine present the usage of or interactions with county-administered government services including the Minnesota Family Investment Program (MFIP), the Supplemental Nutrition Assistance Program (FS), the Child and Adult Protection System (SSIS), Family Stabilization Services (FSS; see Table 3 in Appendix), the Diversionary Work Program (DW; see Table 4 in Appendix), and MinnesotaCare (HC; see Table 5 in Appendix).

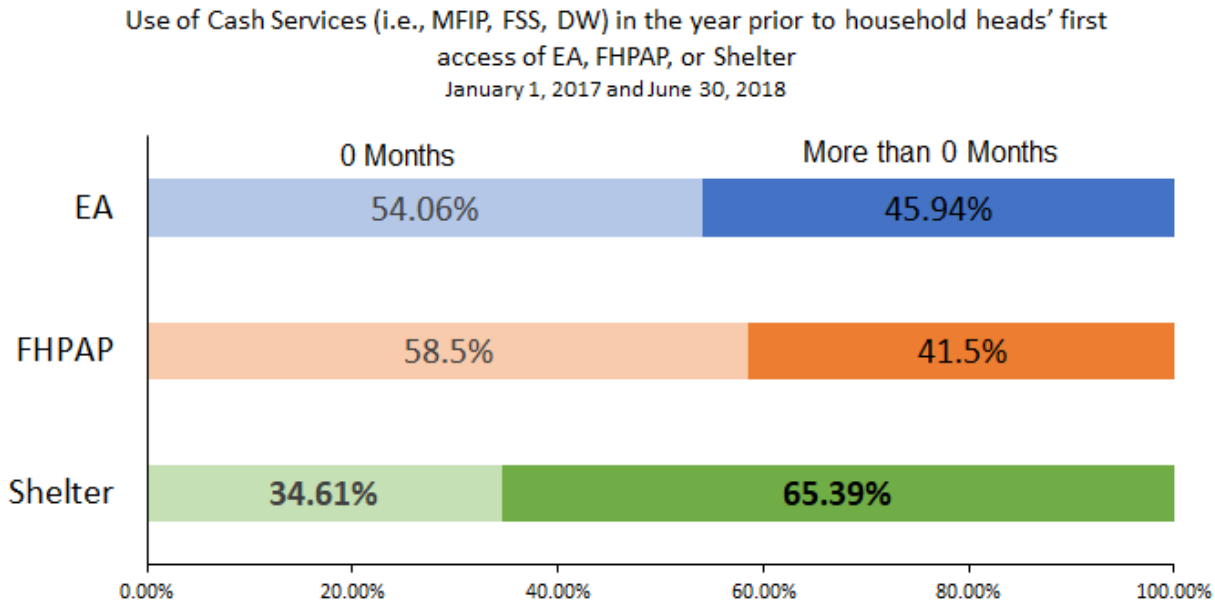
When broadly looking at the use of any county-administered government services (i.e., MFIP, FSS, DW, FS, HC) in the prior year, the proportion of household heads in the shelter cohort with use in the prior year (almost 92%; see Figure 5 below) was significantly greater than those in the EA (89%) or FHPAP (almost 84%) cohorts. Similar trends were found when specifically looking at the use of cash services (i.e., MFIP, FSS, DW; see Figure 6 below) in the prior year. The proportion of those in the shelter cohort who accessed cash services within the past 12-months (65%) was significantly greater than those in the EA (46%) or FHPAP (42%) cohorts.

Figure 5.



Note: Light color on the left represents 0 months of use; dark color on the right represents more than 0 months of use. Bolded shelter percentages indicate significant difference between proportions in the shelter and EA cohort. Bolded FHPAP percentages indicate significant difference between proportions in the FHPAP and EA cohort.

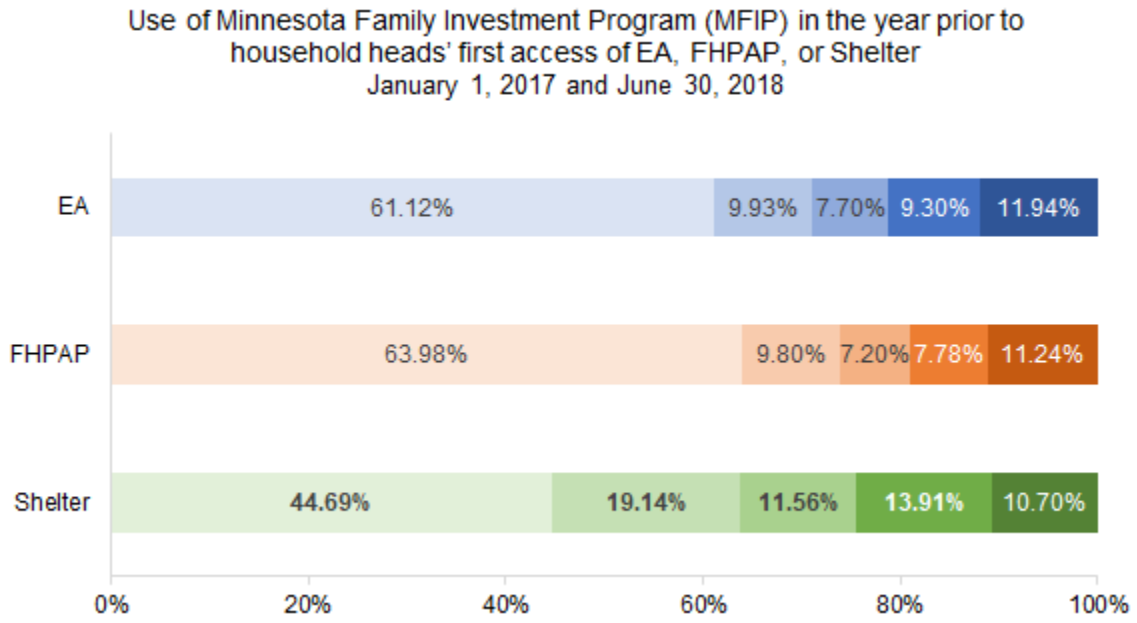
Figure 6.



Note: Light color on the left represents 0 months of use; dark color on the right represents more than 0 months of use. Bolded shelter percentages indicate significant difference between proportions in the shelter and EA cohort.

Months of Minnesota Family Investment Program (MFIP) use in the prior year for each cohort are shown below in Figure 7. The proportion of those in the shelter cohort with 0 months of MFIP in the prior year (nearly 45%) was significantly less than those in the EA (61%) or FHPAP (nearly 64%) cohorts. The proportion of those in the shelter cohort with intermittent use of MFIP (i.e., 1 to 4 months, 5 to 8 months, 9 to 12 months) in the prior year (totaling nearly 45%) was significantly greater than the proportion of those in the EA (totaling nearly 27%) or FHPAP (totaling nearly 25%) cohorts with the same intermittent usage. There were no differences in proportions across the three cohorts in terms of continuous (13 months) usage of MFIP. Similar trends regarding cohorts' intermittent use were found for FSS and DW (see Tables 3 and 4 in Appendix).

Figure 7.

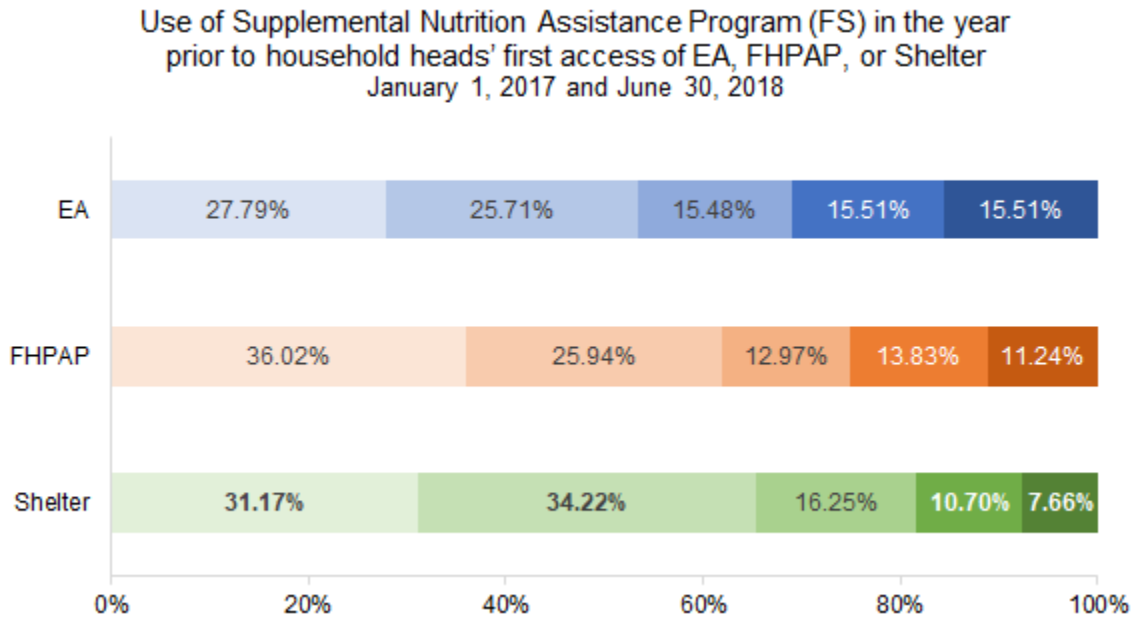


Note: Darkening gradient from left to right represents usage: 0 months, 1-4 months, 5-8 months, 9-12 months, 13 months. Bolded shelter percentages indicate significant difference between proportions in the shelter and EA cohort.

Supplemental Nutrition Assistance Program

FS was one of the most used government services with nearly 70% of household heads in all three cohorts using Supplemental Nutrition Assistance Program (FS) within the past 12-months (see Figure 8 below). Unlike the other government services, those accessing EA had the greatest use; significantly more EA household heads used FS (72%) relative to the FHPAP (nearly 64%) or shelter (nearly 69%) cohorts. Despite overall high levels of use, those in the shelter cohort (32%) still remained more likely to intermittently use FS (i.e., 1 to 4 months) in the prior year as compared to those in the EA (nearly 26%) or FHPAP (nearly 26%) cohorts.

Figure 8.



Note: Darkening gradient from left to right represents usage: 0 months, 1-4 months, 5-8 months, 9-12 months, 13 months. Bolded shelter percentages indicate significant difference between proportions in the shelter and EA cohort.

Health Care

In terms of MinnesotaCare (HC), those accessing FHPAP were the most likely to have used HC in the prior year and to have used it on a more continuous basis (see Table 5 in Appendix). It is possible those accessing FHPAP were more likely than those entering shelter to have used HC because those entering shelter may already be on Medicaid.

Interaction with County-Administered Government Service: Child and Adult Protection System

Across all cohorts, more than 25% of families had involvement with Child and Adult Protection (SSIS) (see Table 1 below). This includes intakes, assessments, and case management service levels and child protection, adult protection, and child welfare work groups. Within the prior 12-months, the proportion of household heads in the shelter cohort with SSIS involvement (nearly 49%) was significantly greater than those in the EA (30%) or FHPAP (nearly 29%) cohorts.

Table 1. *Involvement in Child and Adult Protection (SSIS) in the year prior to household heads' first access of EA, FHPAP, or Shelter between January 1, 2017 and June 30, 2018.*

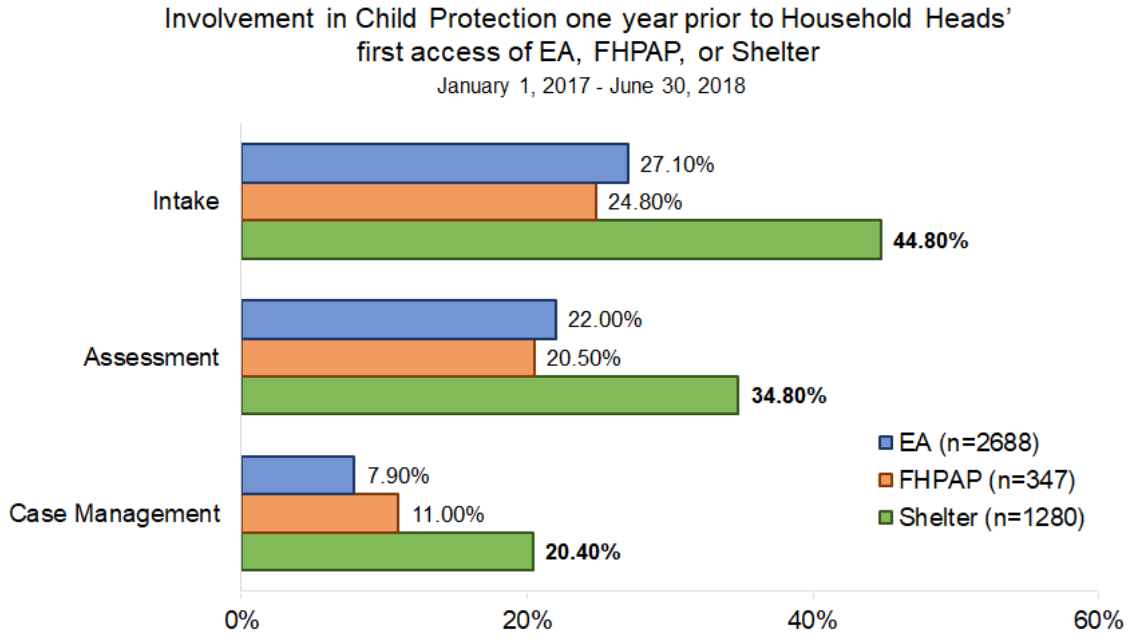
SSIS Involvement	EA	FHPAP	Shelter
Yes	818 *30.4%*	100 *28.8%*	622 *48.6%*[ab]
Total	**2,688**	**347**	**1,280**

Note: Totals exclude 79 FHPAP and 111 shelter household heads that lacked a successful match in the MAXIS system, and 1,123 EA and 45 FHPAP household heads with service dates that overlapped with a shelter stay.
[a]p<0.05; The proportion entering shelter was significantly different from the proportion accessing EA.
[b]p<0.05; The proportion entering shelter was significantly different from the proportion accessing FHPAP.

The majority of involvement with the protection system was concentrated in child protection (CPS; including intake, assessment, and case management), with household heads in the shelter cohort (45%, 35%, 20%, respectively) having significantly greater involvement as compared to those in the EA (21%, 22%, 8%, respectively) or FHPAP (25%, 21%, 11%, respectively) cohorts (see Table 6 in Appendix).

Additionally, with those in the shelter cohort having significantly more case management involvement in the prior year (20%) relative to those in the EA (nearly 8%) or FHPAP (11%) cohorts (see Figure 9 below), the shelter cohort appeared to have a greater likelihood of being involved with the child protection system and be under supervision.

Figure 9.



Note: Bolded shelter percentages indicate significant difference between proportions in the shelter and EA cohort.

Movement through the Service Pathway: Retrospectively and Prospectively

Retrospective: *Of those who received FHPAP, EA or shelter services, how many also received services (i.e., EA, FHPAP) before and when?*

The retrospective dataset looked backwards in the 12-months before a family entered the pathway of services. It examined which programs families accessed or applied for in their 12-months prior. Figures 10 and 11 below represent how many individuals applied for EA before receiving FHPAP or entering shelter. See Table 7 in the Appendix for a complete visualization of how prior service use compares across EA, FHPAP, and shelter use.

EA Prior Service Use

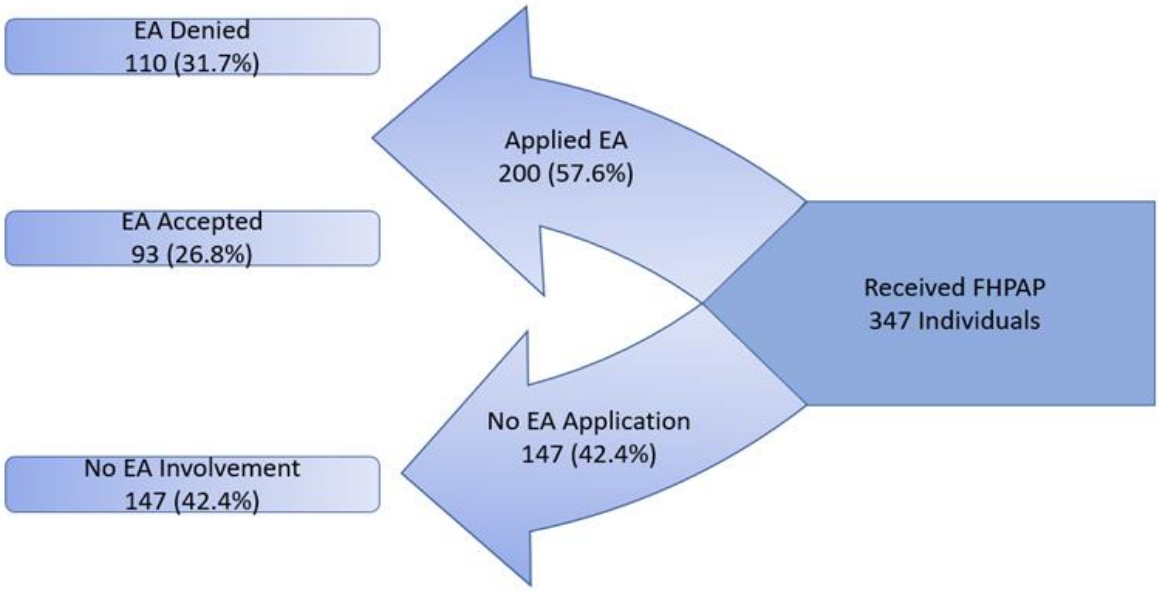
Only 0.15% of EA recipients received EA twice within the year. This is consistent with county policy that EA can only be received once in a 12-month period. Very few household heads entered shelter prior to getting EA, accounting for just 0.56% of the cohort. It is possible household heads with a history of homelessness could be less likely to be approved for EA. It should also be noted that household heads who applied for EA while in shelter were excluded from the sample. The criteria for excluding overlapping shelter and EA spells may also exclude some people entered shelter immediately prior to entering EA.

FHPAP Prior Service Use

Twenty seven percent of FHPAP recipients were approved for EA in the previous year, compared to 32% that were rejected. This is surprising as FHPAP eligibility rules outline an EA denial is required to qualify for FHPAP. This may be due to limitations in the dataset; data was merged in data from the HMIS and MAXIS data sources, and it is possible household heads were inconsistently recorded across these two systems.

Only 4.4% of FHPAP recipients received FHPAP twice in one year. This is consistent with interviews with County officials suggesting it is rare for household heads to receive FHPAP more than once in a year. Additionally, only 6.3% of household heads who received FHPAP had a shelter stay in the preceding 12 months. This does not include household heads who received FHPAP right after entering shelter, which might indicate the provision of rapid rehousing services.

Figure 10. *Retrospective Analysis of Service Pathway: Breakdown of EA Applications one year prior to receiving FHPAP*

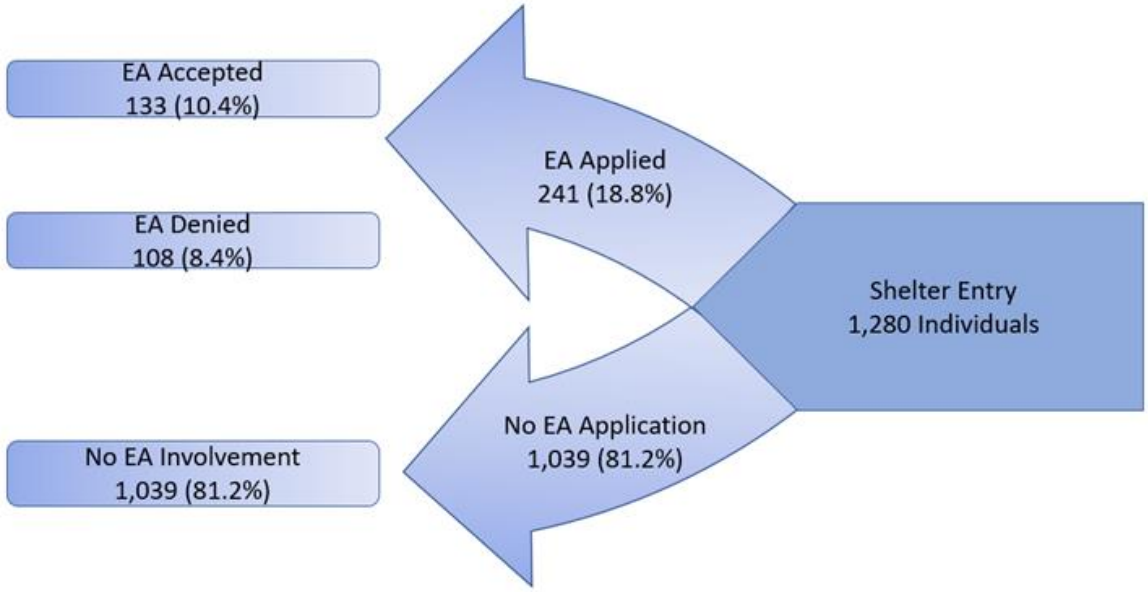


Note: This excludes cases where FHPAP receipt occurred during a shelter stay or on the same day as the start of the shelter spell.

Shelter Prior Service Use

Of household heads who entered shelter, 18.8% applied for EA in the year prior. Of these, 10.4% were approved for EA and 8.4% were denied for EA. As with EA, only a small portion (2.7%) of those in shelter received FHPAP in the last year. Together, no more than 13.1% of the shelter cohort used any EA or FHPAP services in the prior year. Table 7 in the Appendix shows 18.5% of shelter residents had at least one shelter stay in the prior year. This is consistent with prior research documenting that many shelter residents are repeat users.

Figure 11. *Retrospective Analysis of Service Pathway: Breakdown of EA Applications one year prior to entering shelter*



Note: This excludes cases where individuals applied for EA the same day as entering shelter.

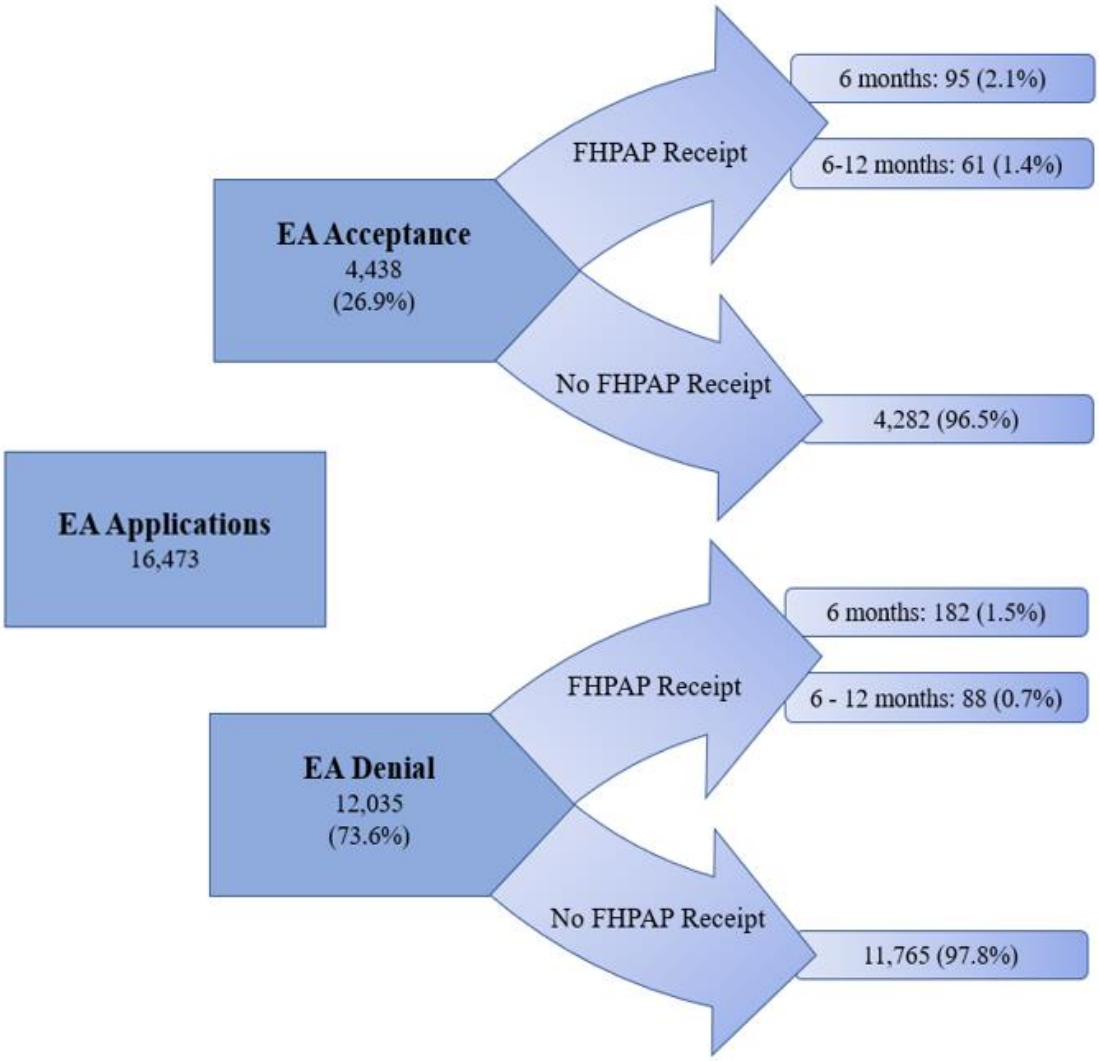
Prospective: *To what extent do families that come to the county for homelessness prevention or homelessness assistance follow Hennepin County's logical pathway of services: emergency assistance, community prevention (FHPAP), and shelter?*

The prospective analysis examined how EA applicants and FHPAP cases move through the systems within one year following EA application or FHPAP receipt. As noted above, the sample includes all EA applications and spells of FHPAP benefit receipt that started before July 1, 2017. Unlike the previous analyses, household heads with multiple EA applications or FHPAP spells may occur more than once in the sample. Approximately 8.7% or 1,578 applications in this sample occurred during a household heads' shelter stay. After exclusion, the final sample included 16,473 EA applications

FHPAP Receipt from EA Application

There are low rates of acceptance to EA and low rates of FHPAP receipt in this sample. Only 26.4% of EA applications are accepted, and only 2.6% (426) of applications received FHPAP. Figure 12 below provides a breakdown of FHPAP receipt from EA applications: 2.2% of cases denied for EA received FHPAP services within one year, and 5.5% of cases that received EA received FHPAP within one year.

Figure 12. *Prospective Analysis of Service Pathway: Breakdown of FHPAP receipt within one year following EA applications occurring before July 1, 2017*



Note: This excludes FHPAP recipients who applied to EA during a shelter stay or on the same day as the start of the shelter spell. The data are coded as cases and do not represent single household heads.

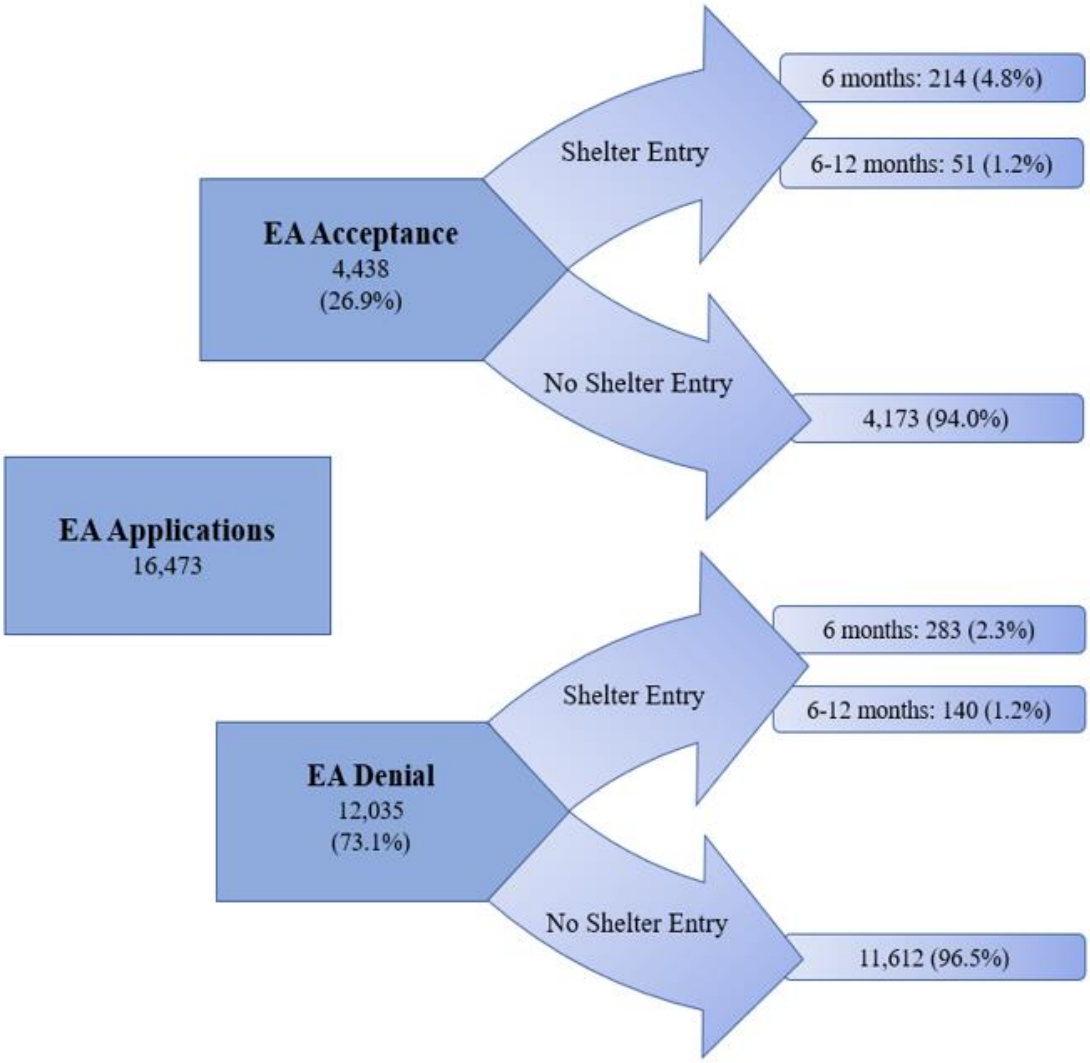
Further examining this data, most cases that do receive FHPAP receive it within 6 months (65.0%) and these cases are more likely to have been denied for EA (66.0%) than approved (34.0%). This low rate of FHPAP receipt could indicate a lack of FHPAP services or funding available for families.

Risk Assessment and Targeting: *Of those who received prevention (i.e., EA, FHPAP), how many also entered shelter? Does Hennepin County target its services (i.e., EA, FHPAP) to those most at risk of entering shelter?*

Shelter Entry from EA Application

Figure 13 demonstrates low rates of shelter entry after EA application and FHPAP receipt. Of all EA applications, 4.2% (688) went on to enter shelter within one year. Among these, 38.5% of applications (265) were accepted to EA and 61.5% (423) were denied. When looking at shelter entry by EA acceptance and denial separately, a slightly higher proportion of cases that received EA (6.0%) entered shelter compared to denials (3.5%) within one year. This might demonstrate that as a group, EA recipients might be slightly more at-risk.

Figure 13. *Prospective Analysis of Service Pathway: Breakdown of shelter entry within one year following EA applications occurring before July 1, 2017*



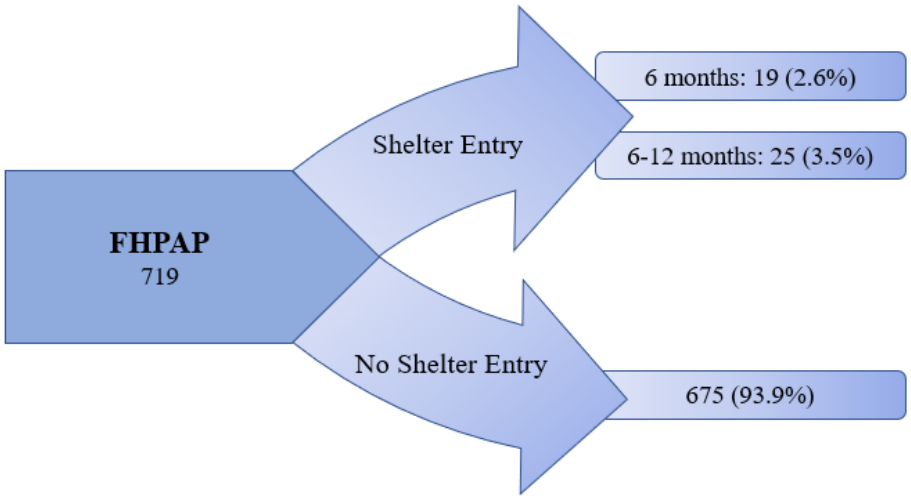
Note: This excludes cases where EA application occurred during a shelter stay or on the same day as the start of the shelter spell. The data are coded as cases and do not represent single individuals.

Due to concerns regarding long lengths of time between EA application and decision point for those facing crisis situations as highlighted by Holdener et al. (2018), the timing of shelter entry following EA applications was further examined. The data show that more than half of the EA applicants who entered shelter did so within 6 months (72.2%). Nearly 26% of all applications (177) entered within 30 days and 41.7% (287) entered within 60 days of EA application. Among those who entered shelter within 60 days, 59.6% were eligible for EA and 42.4% were not. This suggests that although many applications that entered shelter may have been eligible for EA, they may not have received the funds within an appropriate timeframe to resolve a crisis. Therefore, this suggests a need for EA application decisions and funding receipt to be timelier in order to help prevent shelter entry.

Shelter Entry from FHPAP Application

There are low rates of shelter entry among FHPAP cases. Figure 14 below shows that 93.7% of FHPAP cases do not enter shelter within one year after receipt of FHPAP. In total, 6.1% (44 cases) entered shelter within the year following FHPAP receipt, with more cases entering shelter between 6 to 12 months receipt as compared to less than 6 months after receipt.

Figure 14. *Prospective Analysis of Service Pathway: Breakdown of shelter entry within one year following FHPAP receipt occurring before July 1, 2017*



Note: This excludes cases where FHPAP receipt occurred during a shelter stay or on the same day as the start of the shelter spell. The data are coded as cases and do not represent single household heads.

Risk Assessment

To evaluate those most at risk of entering shelter, a logistic regression was run using the prospective sample of 17,634 observations. The regression results are displayed in Table 2.

In terms of access to homelessness prevention services, in comparison to those who received EA, those who received an EA application denial were 36% less likely to enter shelter. This finding aligns with the prospective analysis. While analyzing the reasons for EA denial were beyond the scope of this research, one hypothesis is that some of those who were denied EA may not have met the eligibility requirements and were not facing significant risk of housing instability. FHPAP receipt was not statistically significant in the regression.

The largest proportion of those in shelter were ages 25 to 34 years old, yet in comparison to this group, household heads ages 15 to 24 years old were 38% more likely to enter shelter. This is consistent with Wilder Research's findings that children and young adults under 24 years old are most at risk of experiencing homelessness (Wilder, 2019). Household heads in all other age categories older than the 25 to 34-year-old reference group were less likely to enter shelter, with decreasing odds of shelter entry for each age category.

Race was found to increase the risk of shelter entry for non-white populations. In comparison to white household heads, black and African American household heads were 143% more likely to enter shelter. Most notably, American Indians were 373% more likely to enter shelter than white household heads. Again, these findings reaffirm Wilder Research's conclusion that African Americans and American Indians are disproportionately affected by homelessness in Hennepin County and across Minnesota (Wilder, 2015). The "Other" race category was not statistically significant as compared to white household heads in the regression.

Immigrants were 58% less likely to enter shelter compared to non-immigrants. Gender was not a statistically significant variable in the regression.

Table 2. *Prospective logistic regression of EA and FHPAP receipt before July 1, 2017 and subsequent shelter entry within 365 days.*

Independent Variable	**Sub-categories**	**Odds Ratio** *Standard Error*	**95% Confidence Interval**	
Program type ***(Ref: EA Approved)***	**EA Denied**	0.64* *(0.049)*	0.55	0.74
	FHPAP Receipt	0.94 *(0.160)*	0.67	1.31
Gender ***(Ref: Female)***	**Male**	0.81 *(0.123)*	0.60	1.01
Age category ***(Ref: 25-34)***	**15 - 24**	1.38* *(0.129)*	1.15	1.65
	35 - 44	0.62* *(0.058)*	0.52	0.75
	45 - 54	0.39* *(0.066)*	0.28	0.54
	55 or older	0.16* *(0.072)*	0.06	0.39
Race ***(Ref: White)***	**Black/African American**	2.43* *(0.337)*	1.85	3.19
	American Indian	4.73* *(0.900)*	3.26	6.87
	Other	1.08 *(0.224)*	0.72	1.63
Immigrant status ***(Ref: Non-Immigrant)***	**Immigrant**	0.42* *(0.075)*	0.30	0.60

Note: Dependent variable is shelter entry; n = 17,634. "Other" race category includes Hispanic, Asian or Pacific Islander, Multiracial, Unable to Determine. * p<0.05

Targeting: EA Acceptance or Denial by Racial Category

The literature and the risk assessment above agree that African Americans and American Indians are disproportionately at risk of experiencing homelessness. Knowing this, it is important to evaluate if Hennepin County is targeting EA services to these at-risk populations.

For this reason, Table 3 compares EA approval and denial rates by race. This table shows that the EA approval rate is 34% for American Indians and 28% for African Americans, compared to 22% for those who are white. While African Americans and American Indians are approved for EA at a slightly higher rate than Whites, the average acceptance rate for EA across all racial categories is quite low, only 27%, indicating that nearly three quarters of people who apply for Emergency Assistance are denied.

Due to the small sample size of FHPAP recipients it is difficult to make conclusive comparisons across racial categories.

Table 3. *EA application results by race before July 1, 2017.*

Race	EA Approved	EA Denied	Total
Black or African American	3,195	8,007	11,202
	28.5%	71.5%	100%
American Indian or Alaskan Native	202	387	589
	34.3%	65.7%	100%
White	592	2,104	2,696
	22.0%	78.0%	100%
Hispanic	258	830	1,088
	23.7%	76.3%	100%
Multi-Racial	94	294	388
	24.2%	75.8%	100%
Asian or Pacific Islander	80	292	372
	24.0%	76.0%	100%
Unable to Determine	17	122	139
	12.2%	87.8%	100%
Total	4,438	12,036	16,474
	26.9%	73.1%	100%

Discussion of Quantitative Results

Several themes emerged from the quantitative analysis around demographic disparities, use of Hennepin County services, and service navigation challenges.

Demographic disparities
Race arose as an important characteristic for consideration across the research questions. The data showed that African Americans have a relatively consistent rate of EA, FHPAP, and shelter use, just above 70%, which may suggest successful targeting efforts of EA and FHPAP to this racial demographic. A critical finding was that the American Indian or Alaska Native population was overrepresented in shelter use and received very little FHPAP services. Furthermore, as confirmed by the regression analysis, African Americans and American Indians or Alaskan Natives have significantly increased risk of entering shelter. These high rates of EA use and shelter entry might demonstrate that despite targeting efforts, these populations are experiencing significant challenges with regard to housing stability that current prevention and stabilization services are currently unable to fully attend to.

Women ages 25 to 34 were the most likely to access EA, FHPAP, and shelter, though this demographic group constituted less of a proportion of FHPAP services compared to EA and shelter. As confirmed by the data, specific attention should be given to young household heads ages 15 to 24 are less likely to receive EA and FHPAP, constitute one quarter of the shelter stays, and are particularly at risk of experiencing homelessness.

Service Use
Across all cohorts, those in shelter had the largest proportion of household heads accessing other governmental assistance such as MFIP, FSS, or DW. While this suggests that those entering shelter are disadvantaged and targeted for additional assistance programs, most received these benefits sporadically; very few received continuous benefits that could help provide stability during hardship. However, those who entered shelter had low rates of applying for EA, which may be a point of intervention in the future. Notably, those in shelter experienced significantly more supervision under the Child and Adult Protection System (SSIS) with one in five individuals in shelter under case management services.

Challenges Navigating the Pathway of Homelessness Prevention Services
The data revealed that household heads experienced significant challenges in accessing relevant prevention services. The vast majority (73%) of those who applied for Emergency Assistance were denied, and many applied for EA multiple times. Most surprising was the prospective finding that of those who received an EA denial, only 2% received FHPAP. While FHPAP has limited scope and funding, the program's targeting and communication strategy should be carefully considered.

Considerations for the Future

The results from this research provides an opportunity to reexamine assumptions and patterns in the administration of EA, FHPAP and shelter. In an effort to more effectively deliver services that improve housing stability and prevent homelessness for those most at risk of entering shelter, the following recommendations should be considered.

Increase EA access and outreach for populations most at-risk of shelter entry
This research concluded that most household heads who applied for EA were denied; and for some multiple times over. Given that EA has significant funding available, it is recommended that the EA eligibility and acceptance criteria are reevaluated, and program criteria are made more transparent to increase access to EA for populations most at risk of entering shelter. Additionally, since those who enter shelter infrequently access EA, outreach strategies should be expanded to increase EA receipt. This research supports that certain demographic groups would benefit from increased access to EA, especially younger women under 34 years of age, those who are black or African American, and American Indian or Alaska Native populations. Developing a targeting scorecard that allocates additional points to these at-risk populations could help facilitate incremental increases in EA acceptance.

Advocate for expansion of FHPAP
FHPAP funds grantees that provide vital direct assistance, support services, and case management for those who are at or below 200 percent of federal poverty guidelines and who are homeless or at imminent risk of homelessness. However, given budget and capacity constraints many who could benefit from FHPAP do not currently have access to these services. Simply raising awareness of FHPAP among those who are denied EA will not be effective if FHPAP services are unavailable due to budget constraints. This research supports an expansion of FHPAP; the research team recommends building a coalition to advocate for increased funding from the Minnesota Legislature. Particular emphasis should be given to serving American Indian or Alaska Native populations who face significant risk of experiencing homelessness and are currently underserved by FHPAP. With additional funding, program leaders could consider a specific designation of funds for grantees that specialize in serving American Indian or Alaska Native populations.

Participatory action research
While this quantitative analysis of administrative data illuminates many important learnings, the research team recommends supplementing these findings with qualitative research. The Hennepin County Office to End Homelessness already has a qualitative assessment of clients' perceptions and knowledge of preventative services underway. Given that preliminary findings suggest most clients face obstacles in navigating appropriate service delivery, the next phase of responsive action should be considered. To maximize the effectiveness of program delivery, the research team suggests a participatory action research approach. This approach emphasizes collective inquiry and experimentation that is grounded in experience. Given power structures, most individuals who seek out EA, FHPAP, and shelter have few avenues for their voices and preferences to be heard. Beyond asking clients about their knowledge of preventative services, the research team recommends actively engaging a group of clients in constructive action planning to improve the effectiveness of EA and FHPAP and reduce the risk of shelter entry.

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Appendix

Table 1. *Race of household head at first access of EA, FHPAP, or Shelter between January 1, 2017 and June 30, 2018.*

Race	EA	FHPAP	Shelter	Hennepin County Population
Black or African American	1,910 *71.06%*	256 *73.78%*	908 *70.94%*	*13.40%*
White	357 *13.28%*	57 *16.43%*	133 *10.39%[ab]*	*68.90%*
American Indian or Alaska Native	114 *6.32%*	8 *2.31%[c]*	145 *11.33%[ab]*	*1.10%*
Hispanic	162 *6.03%*	10 *2.88%[c]*	41 *2.95%[a]*	*7.00%*
Multiracial	73 *2.72%*	9 *2.59%*	40 *3.13%*	*3.20%*
Asian or Pacific Islander	69 *2.28%*	4 *1.15%*	8 *0.63%[a]*	*7.70%*
Unable to Determine	8 *0.30%*	3 *0.86%*	5 *0.39%*	*N/A*
Total	**2,688**	**347**	**1,280**	**1,259,428**

Note: The totals exclude the 79 FHPAP and 111 shelter household heads that lacked a successful match in the MAXIS system, and the 1,123 EA and 45 FHPAP household heads with service dates that overlapped with a shelter stay. A household head in the EA cohort was defined to have overlapping shelter usage under the following conditions: the EA benefit recipient month was the same as the shelter usage month, or the shelter check-in was between the EA application date and 30-days after the EA approval date. A household head in the FHPAP cohort was defined to have overlapping shelter usage if the FHPAP benefit recipient month was the same as the shelter usage month.

[a]$p<0.05$; The proportion entering shelter was significantly different from the proportion accessing EA.

[b]$p<0.05$; The proportion entering shelter was significantly different from the proportion accessing FHPAP.

[c]$p<0.05$; The proportion accessing FHPAP was significantly different from the proportion accessing EA.

Table 2. *Immigration Status of household head at first access of EA, FHPAP, or Shelter between January 1, 2017 and June 30, 2018.*

Immigration Status	EA	FHPAP	Shelter	Total
LPR/Other Lawfully Residing/ Non-Immigrant	177 *6.58%*	12 *3.46%[c]*	28 *2.19%[a]*	217 *5.03%*
Deport/Remove Within 1 year/ Undocumented	65 *2.42%*	0 *0%[c]*	7 *0.55%[a]*	72 *1.67%*
Asylee/Refugee	48 *1.79%*	3 *0.86%*	9 *0.70%*	60 *1.39%*
Total Immigrants	**290** ***10.79%***	**15** ***4.32%[c]***	**44** ***3.44%[a]***	**349** ***8.09%***
Total	**2,688**	**347**	**1,280**	**4,315**

Note: The totals exclude the 79 FHPAP and 111 shelter household heads that lacked a successful match in the MAXIS system, and the 1,123 EA and 45 FHPAP household heads with service dates that overlapped with a shelter stay. A household head in the EA cohort was defined to have overlapping shelter usage under the following conditions: the EA benefit recipient month was the same as the shelter usage month, or the shelter check-in was between the EA application date and 30-days after the EA approval date. A household head in the FHPAP cohort was defined to have overlapping shelter usage if the FHPAP benefit recipient month was the same as the shelter usage month.

[a]$p<0.05$; The proportion entering shelter was significantly different from the proportion accessing EA.

[c]$p<0.05$; The proportion accessing FHPAP was significantly different from the proportion accessing EA.

Table 3. *Use of Family Stabilization Services (FSS) in the year prior to household heads' first access of EA, FHPAP, or Shelter between January 1, 2017 and June 30, 2018.*

Months on FSS	EA	FHPAP	Shelter	Total
0 Months	2,240	298	956	3,494
	83.96%	*85.88%*	*74.69%[ab]*	*80.97%*
1-4 Months	152	18	149	319
	5.70%	*5.19%*	*11.64%[ab]*	*7.39%*
5-8 Months	65	8	70	143
	2.44%	*2.31%*	*5.47%[ab]*	*3.31%*
9-12 Months	73	9	47	129
	2.74%	*2.59%*	*3.67%*	*2.99%*
13 Months	158	14	58	230
	5.92%	*4.03%*	*4.53%[a]*	*5.33%*
Total	**2,668**	**347**	**1,280**	**4,315**

Note: The totals exclude the 79 FHPAP and 111 shelter household heads that lacked a successful match in the MAXIS system, and the 1,123 EA and 45 FHPAP household heads with service dates that overlapped with a shelter stay. A household head in the EA cohort was defined to have overlapping shelter usage under the following conditions: the EA benefit recipient month was the same as the shelter usage month, or the shelter check-in was between the EA application date and 30-days after the EA approval date. A household head in the FHPAP cohort was defined to have overlapping shelter usage if the FHPAP benefit recipient month was the same as the shelter usage month. Government services use within the 12-months prior was calculated by counting the number of months a household head used the benefit prior to and including the month they received either EA, FHPAP, or entered shelter. For the EA cohort, the reference date used to calculate prior service use was the first of the month in which the household head received EA. For the FHPAP cohort, the reference date used to calculate prior service use was the first of the month in which the household head received FHPAP. For the shelter cohort, the reference date used to calculate prior service use was the first of the month in which the household head entered shelter. Services were then counted using the number of months the household head used the benefit in the prior 12-months into the current month they received EA, FHPAP, or shelter.

[a]$p<0.05$; The proportion entering shelter was significantly different from the proportion accessing EA.

[b]$p<0.05$; The proportion entering shelter was significantly different from the proportion accessing FHPAP.

Table 4. *Use of Diversionary Work (DW) in the year prior to household heads' first access of EA, FHPAP, or Shelter between January 1, 2017 and June 30, 2018.*

Months on DW	EA	FHPAP	Shelter	Total
0 Months	2,392	313	1,091	3,796
	88.99%	*90.20%*	*85.23%[ab]*	*87.97%*
1 Month	70	5	61	136
	2.60%	*1.44%*	*4.77%[ab]*	*3.15%*
2 Months	72	9	49	130
	2.68%	*2.59%*	*3.83%[a]*	*3.01%*
3 Months	55	4	38	97
	2.05%	*1.15%*	*2.97%[ab]*	*2.25%*
4 Months	99	16	41	156
	3.68%	*4.61%*	*3.20%*	*3.62%*
Total	**2,688**	**347**	**1,280**	**4,315**

Note: The totals exclude the 79 FHPAP and 111 shelter household heads that lacked a successful match in the MAXIS system, and the 1,123 EA and 45 FHPAP household heads with service dates that overlapped with a shelter stay. A household head in the EA cohort was defined to have overlapping shelter usage under the following conditions: the EA benefit recipient month was the same as the shelter usage month, or the shelter check-in was between the EA application date and 30-days after the EA approval date. A household head in the FHPAP cohort was defined to have overlapping shelter usage if the FHPAP benefit recipient month was the same as the shelter usage month. Government services use within the 12-months prior was calculated by counting the number of months a household head used the benefit prior to and including the month they received either EA, FHPAP, or entered shelter. For the EA cohort, the reference date used to calculate prior service use was the first of the month in which the household head received EA. For the FHPAP cohort, the reference date used to calculate prior service use was the first of the month in which the household head received FHPAP. For the shelter cohort, the reference date used to calculate prior service use was the first of the month in which the household head entered shelter. Services were then counted using the number of months the household head used the benefit in the prior 12-months into the current month they received EA, FHPAP, or shelter.

[a]$p<0.05$; The proportion entering shelter was significantly different from the proportion accessing EA.

[b]$p<0.05$; The proportion entering shelter was significantly different from the proportion accessing FHPAP.

Table 5. *Use of MinnesotaCare (HC) in the year prior to household heads' first access of EA, FHPAP, or Shelter between January 1, 2017 and June 30, 2018.*

Months on HC	EA	FHPAP	Shelter	Total
0 Months	1,705	186	889	2,780
	63.43%	*53.60%[c]*	*69.45%[ab]*	*64.43%*
1-4 Months	200	29	75	304
	7.44%	*8.36%*	*5.86%[ab]*	*7.05%*
5-8 Months	230	31	89	350
	8.56%	*8.93%*	*6.95%[a]*	*8.11%*
9-12 Months	206	31	88	325
	7.66%	*8.93%*	*6.88%*	*7.53%*
13 Months	347	70	139	556
	12.91%	*20.17%[c]*	*10.86%[ab]*	*12.89%*
Total	**2,688**	**347**	**1,280**	**4,315**

Note: The totals exclude the 79 FHPAP and 111 shelter household heads that lacked a successful match in the MAXIS system, and the 1,123 EA and 45 FHPAP household heads with service dates that overlapped with a shelter stay. A household head in the EA cohort was defined to have overlapping shelter usage under the following conditions: the EA benefit recipient month was the same as the shelter usage month, or the shelter check-in was between the EA application date and 30-days after the EA approval date. A household head in the FHPAP cohort was defined to have overlapping shelter usage if the FHPAP benefit recipient month was the same as the shelter usage month. Government services use within the 12-months prior was calculated by counting the number of months a household head used the benefit prior to and including the month they received either EA, FHPAP, or entered shelter. For the EA cohort, the reference date used to calculate prior service use was the first of the month in which the household head received EA. For the FHPAP cohort, the reference date used to calculate prior service use was the first of the month in which the household head received FHPAP. For the shelter cohort, the reference date used to calculate prior service use was the first of the month in which the household head entered shelter. Services were then counted using the number of months the household head used the benefit in the prior 12-months into the current month they received EA, FHPAP, or shelter.

[a]$p<0.05$; The proportion entering shelter was significantly different from the proportion accessing EA.

[b]$p<0.05$; The proportion entering shelter was significantly different from the proportion accessing FHPAP.

[c]$p<0.05$; The proportion accessing FHPAP was significantly different from the proportion accessing EA.

Table 6. *Breakdown of Involvement in Child and Adult Protection (SSIS) in the year prior to household heads' first access of EA, FHPAP, or Shelter between January 1, 2017 and June 30, 2018.*

SSIS Involvement Level	EA	FHPAP	Shelter
Intake CPS	728 *27.1%*	86 *24.8%*	573 *44.8%[ab]*
Intake CW	40 *1.5%*	8 *2.3%*	40 *3.1%[a]*
Intake APS	18 *0.7%*	6 *1.7%[c]*	25 *2.0%[a]*
Assess CPS	592 *22.0%*	71 *20.5%*	446 *34.8%[ab]*
Assess CW	31 *1.2%*	7 *2.0%*	28 *2.2%[a]*
Assess APS	1 *0.0%*	1 *0.3%[c]*	5 *0.4%[a]*
Case Management CPS	213 *7.9%*	38 *11.0%[c]*	261 *20.4%[ab]*
Case Management CW	23 *0.9%*	3 *0.9%*	23 *1.8%[a]*
Case Management APS	0 *0%*	0 *0%*	0 *0%*
Total Household Heads	**2,688**	**347**	**1,280**

Note: The totals exclude the 79 FHPAP and 111 shelter household heads that lacked a successful match in the MAXIS system, and the 1,123 EA and 45 FHPAP household heads with service dates that overlapped with a shelter stay. A household head in the EA cohort was defined to have overlapping shelter usage under the following conditions: the EA benefit recipient month was the same as the shelter usage month, or the shelter check-in was between the EA application date and 30-days after the EA approval date. A household head in the FHPAP cohort was defined to have overlapping shelter usage if the FHPAP benefit recipient month was the same as the shelter usage month. Government services use within the 12-months prior was calculated by counting the number of months a household head used the benefit prior to and including the month they received either EA, FHPAP, or entered shelter. For the EA cohort, the reference date used to calculate prior service use was the first of the month in which the household head received EA. For the FHPAP cohort, the reference date used to calculate prior service use was the first of the month in which the household head received FHPAP. For the shelter cohort, the reference date used to calculate prior service use was the first of the month in which the household head entered shelter. Categories are not mutually exclusive.

[a]$p<0.05$; The proportion entering shelter was significantly different from the proportion accessing EA.

[b]$p<0.05$; The proportion entering shelter was significantly different from the proportion accessing FHPAP.

[c]$p<0.05$; The proportion accessing FHPAP was significantly different from the proportion accessing EA.

Table 7. *Retrospective Analysis of Pathways to Service. Breakdown of service use in the year prior to household heads' first access of EA, FHPAP, or Shelter between January 1, 2017 and June 30, 2018.*

Prior Service Use within past 12 months	EA	FHPAP	Shelter
EA application	391 14.55%	200 57.6%%	241 **18.83%**
EA denied	387 14.40%	110 **31.7%**	108 8.44%
EA accepted	4 0.15%	93 **26.8%**	133 **10.39%**
Received FHPAP	26 0.97%	15 **4.32%**	34 2.66%
Received Shelter	15 0.56%	22 6.34%	237 18.52%
Total	2,688	347	1,280

Note: There were 392 documented cases of FHPAP use. However, 45 were used in the same month as using shelter. These 45 cases were moved to the shelter cohort, bringing the total number to 347. This sample also excludes individuals that applied for EA while in shelter; This project is measuring the effectiveness of homeless preventative interventions, it is only concerned with interventions that occurred prior to shelter entry.