

# Tracking the homeless

*Home is the place where, when you have to go there,  
They have to take you in.*

Robert Frost, "The Death of the Hired Man"

The homeless are the poorest of the poor. Not only do they lack material resources, but they lack human resources as well—friends or family who will take them in. Yet poverty research has largely neglected the problems of this group, in part because its members do not readily lend themselves to scientific investigation. By definition they are hard to locate. As a result, most of the studies of the homeless use samples that are not representative (such as individuals at a particular shelter or on a particular street at a given time) and generate only descriptive information. (For published estimates of the size of the homeless population, see box, p. 22.)

A longitudinal study of the homeless poses much greater problems. People difficult to locate are even more difficult to locate more than once. And yet a study of individuals over time is crucial to address the most salient questions about homelessness: Not just who are likely to be homeless, but what happened to cause their present circumstances, how long they remain homeless, and how—if ever—they escape. A study over time can also address the dynamics of homelessness: How do people manage to survive life on the street? Where do they get help? How do they spend their time? What impact has homelessness on their physical and mental health? What social service agencies succeed in aiding them? It is to answer just such questions that two affiliates of the Institute, Irving Piliavin and Michael Sosin, have undertaken a longitudinal analysis of homelessness in Minneapolis, Minnesota, supported chiefly by the Office of the Assistant Secretary for Planning and Evaluation in the U.S. Department of Health and Human Services.<sup>1</sup>

## The Minneapolis study

Minneapolis was selected for the study because of its size, location (not too far from Madison), and because the researchers had established a working relationship with the Hennepin County Community Services Department (HCCS).<sup>2</sup> Among its other contributions, the HCCS supplied a project coordinator who was known both to the homeless and to those who serve them.

An initial sample of 339 men and women representing a cross section of the homeless population of Minneapolis and an additional 113 men and women who had recently become homeless (in the previous two weeks) were interviewed between November 1985 and March 1986. A second round of interviews with the 271 members of the original sample who could be found was carried out between April and June 1986. And a final round of interviews (of 170 members of the original group) was conducted in December 1986.

To ease the problems of access and cooperation, interviewers were recruited among individuals who had worked previously with the homeless. They received special training to enable them to assess in general the emotional and physical well-being of sample members.

The initial sample was located through contact with community agencies that serve the homeless: daytime drop-in centers, agencies furnishing free meals, and temporary shelters. Individuals were classified as homeless if they fell into one of the following categories: (1) they were staying for at least one day but for less than seven days with a friend or relative, not paying rent, and were aware that the situation was only temporary; (2) they were living in selected boardinghouses for less than seven days, with the rent paid by a welfare agency on a short-term basis; (3) they were sleeping in some temporary, free shelter; or (4) they spent their nights in such places as abandoned buildings, automobiles, alleys, or doorways.

Four methods were employed to keep track of the respondents for subsequent interviews. Individuals familiar with the homeless were hired to contact them. Posters were put up in agencies that served the homeless, informing them about follow-up interviews. Whenever possible first-wave respondents provided interviewers with the names and addresses of friends, relatives, and agencies who would be likely to know of their whereabouts, and the respondents were sought for subsequent interviews through these contacts. Finally, all first-wave participants were given postcards to mail to the project staff in four months, saying how they could be contacted. As an incentive to respond, participants were paid for their time. Nevertheless, the attrition rate was very high (40 percent between waves one and two), requiring some adjustments in the statistical analysis.

Though the survey is complete, the analysis of the data is only now producing results.

## Description of the homeless

The initial questionnaire was designed to gain as full a description as possible of the characteristics of the respondents. Table 1 presents a breakdown of the characteristics of the cross-section sample, and compares the Minneapolis sample with two other samples of the homeless, one drawn from a Chicago study and one in urban Ohio.<sup>3</sup> The three studies concur in revealing that the homeless are predominantly male, single, living alone, disproportionately non-white, and have little attachment to the labor force. They

**Table 1**  
**Comparisons of the Homeless of**  
**Minneapolis, Urban Ohio, and Chicago**

	Minneapolis (N=339)	Urban Ohio (N=790)	Chicago (N=722)
<b>Sex</b>			
Male	84.7%	81.0%	75.5%
Female	15.3	19.0	24.5
<b>Race</b>			
White	43.2	59.0	30.7
Black	26.2	33.6	53.0
Native American	22.9	n.a.	5.1
Hispanic	6.8	3.8	6.9
Other	.9	n.a.	.0
<b>Age</b>			
18-24	21.0	n.a.	11.4
25-34	42.0	n.a.	27.0
35-44	25.0	n.a.	26.5
45+	12.0	n.a.	35.2
Mean age	32.3	33.0	39.0
<b>Highest grade completed</b>			
Less than 9	14.5	17.2	7.6
9-11	38.0	36.2	37.2
High school graduate	32.2	30.5	31.6
Some college	15.3	15.5	29.7
Mean grade completed	10.9	n.a.	n.a.
<b>Ever been married</b>	47.5	53.2	43.2
<b>Current marital status</b>			
Never married	52.5	46.8	56.8
Now married	8.1	9.0	6.9
Divorced or separated	35.0	39.0	31.9
Widowed	3.9	4.4	4.3
<b>Children</b>			
Yes	53.0	n.a.	53.8
No	47.0	n.a.	46.2
<b>Living alone</b>	81.3	n.a.	91.4
<b>Crime</b>			
Any prior convictions	54.0	n.a.	n.a.
Any prior imprisonment	20.7	n.a.	16.6
<b>Highest weekly adult family income (median), 1977 dollars</b>	\$236.44	n.a.	n.a.
<b>Utilization of welfare programs</b>			
Ever used any	89.7	n.a.	n.a.
AFDC	2.9	a	6.0
General Assistance	54.6	a	22.0
Food Stamps	51.0	a	n.a.
Emergency Assistance	11.5	a	n.a.
Veterans Benefits	2.1	n.a.	n.a.
Social Security	3.3	n.a.	n.a.
SSI	1.8	n.a.	6.0

	Minneapolis (N=339)	Urban Ohio (N=790)	Chicago (N=722)
<b>Psychiatric history</b>			
Any prior hospitalizations	18.5	30.6	23.0
Time since first hospitalization (median)	8 yrs	n.a.	n.a.
Time since last release (median)	2 yrs	b	b
<b>Homelessness</b>			
Length of current spell (mean/median)	14.4 mos/4 mos	20.5 mos	21.7 mos
Total length of all spells (mean/median)	2.8 yrs/1 yr	n.a.	n.a.
How long ago first became homeless (mean/median)	5.7 yrs/3 yrs	n.a.	n.a.
Had prior homeless spells	57.8%	n.a.	n.a.
<b>Employment</b>			
Any work last month	36.3	22.2	38.9
Worked full-time last month	4.1	8.9	n.a.

**Sources:** For Minneapolis, Piliavin and Sosin study; for Ohio, Dee Roth, Jerry Bean, Nancy Lust, and Traian Saveanu, *Homelessness in Ohio: A Study of People in Need* (Columbus: Ohio Department of Mental Health, 1985); for Chicago, Peter H. Rossi, Gene A. Fisher, and Georgianna Willis, *The Condition of the Homeless of Chicago* (Amherst, Mass.: Social and Demographic Research Institute, 1986).

**Note:** n.a. = not available.

<sup>a</sup>Twenty-three percent of the Ohio sample reported receipt of public welfare in the past month and 12.6 percent reported receipt of Social Security during the same period.

<sup>b</sup>In Chicago, 54 percent of the sample members had been released within a year of their interviews, and 27 percent had been released 3 years or more prior to their interview. In urban Ohio, 45 percent had been released within 2 years of their interview and 22 percent had been released five or more years prior to their interview.

tend as well to be relatively young and to have below-average education, low prior incomes, and few job skills. Their highest family income (asked only in the Minneapolis study) indicates that they have always been at the low end of the income scale, though they often reported having had steady jobs at some time in the past.

Although some of the homeless in all of the samples had been in mental hospitals, in no case was the proportion over 30 percent. It was found in Minneapolis (not shown on the table) that those who had been institutionalized owing to mental illness had been in hospitals an average of 4.3 times (a median of 2). In 4 percent of the Minneapolis sample, first-time homelessness preceded first hospitalization, and in 12 percent of the sample, first homelessness followed first hospitalization. The data suggest, among other things, that the causal link between mental illness, hospitalization, and subsequent homelessness may not be as strong as suggested by previous reports.<sup>4</sup>

## The Number of Homeless

Not since the Great Depression has homelessness been the national issue that it is today. Although skid rows have long existed in every large city, the situation of the homeless has not generally aroused sympathy. Rather, the inhabitants of shelters and the streets have been dismissed as shiftless and shifty inebriates: able-bodied men who refuse to work. This view was expressed in 1893 in one of the first studies of homelessness. J. J. McCook estimated the number of tramps to be 45,845, or one-quarter of one percent of the adult male population of the country.<sup>1</sup>

More recent estimates of the homeless have ranged between the U.S. Department of Housing and Urban Development (HUD) estimate of 250,000–300,000 and that of advocates for the homeless, who say there are 2 to 3 million homeless.<sup>2</sup>

A study by Richard B. Freeman and Brian Hall is consistent with the HUD figure. By using their estimates of what proportion of their time the homeless in shelters spent on the street, and what proportion of their time the homeless on the street spent in shelters, these researchers interpolated from a convenience sample in New York City that, based on an estimate of 76,500 homeless in shelters in 1983, there were approximately 246,500 homeless persons in the United States in that year.<sup>3</sup>

Freeman and Hall found, however, that HUD had underestimated the number of homeless families by not includ-

ing those receiving vouchers to live in welfare hotels and motels rather than shelters. Their estimate of homeless family members in 1983 was 32,000, compared to the HUD estimate of 14,500.

They found that although 1983 was a recession year, the number of homeless has grown since then. They estimate "that the homeless population was on the order of 343,000 to 363,000 by 1985, 23 to 30 percent larger than in 1983."<sup>4</sup>

A few studies that have attempted to actually count the homeless in large cities diverge in their estimates from 0.1 percent of the population to over 1 percent.<sup>5</sup>

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<sup>1</sup>McCook, "Tramp Census and Its Revelations," *Forum* 15 (August 1893), 758–759.

<sup>2</sup>*A Report to the Secretary on the Homeless and Emergency Shelters* (Washington, D.C.: HUD, 1984); Mary Ellen Hombs and Mitch Snyder, *Homelessness in America: A Forced March to Nowhere* (Washington, D.C.: Community for Creative Non-Violence, 1982).

<sup>3</sup>"Permanent Homelessness in America?" Working Paper no. 2013, National Bureau of Economic Research, Inc., Cambridge, Mass., September 1986.

<sup>4</sup>*Ibid.*, p. 8.

<sup>5</sup>For a discussion of these counts see Peter H. Rossi, Gene A. Fisher, and Georgianna Willis, *The Condition of the Homeless in Chicago* (Amherst, Mass.: Social and Demographic Research Institute, 1986), Appendix A.

Piliavin and Sosin found that homelessness is a recurring rather than permanent state. The median homeless period (based on the sum of the separate spells) was one year in the Minneapolis sample, but the first homeless spell for sample members took place, on average, six years earlier. Those with repeated bouts of homelessness reported being homeless, off and on, for about 44 percent of the time since their first spell.

Of additional interest was the discovery that in the Minneapolis sample, 38 percent had received some form of out-of-home care as children. This is approximately ten times what might be expected from a representative U.S. sample. It may indicate permanent problems of those who need out-of-home care, flaws in the foster-care system, or simply that these people have no place where "they have to take you in."

## The new homeless

Table 2 compares those in the Minneapolis sample who had previous homeless episodes with those who were homeless for the first time. The first-time homeless are more likely than those with a history of homelessness to be women, parents, married, and on the streets with others. They are also less likely to have been hospitalized for mental illness or convicted of crimes. And they are less likely to be binge drinkers. Nevertheless, some of the new homeless are without permanent housing for a long time. They report their average current spell as lasting close to a year, although the median is three months.

## Patterns of escape

Second-wave interviews focused on the present living arrangements of sample members as well as their patterns of

**Table 2**

**Characteristics of the Previously Homeless and the First-Time Homeless: Cross-Section Sample**

	With Prior Homeless Episodes (N=196)	First Homeless Episode (N=143)
<b>Race</b>		
White	47.4%	37.3%
Black	21.1	33.1
Native American	24.2	21.1
Other	7.2	8.5
<b>Sex</b>		
Male	87.8	80.4
Highest weekly family income in 1977 dollars (median)	\$238	\$235
Age (mean)	32.8	31.6
Education in years (mean)	10.7	11.1
Alone on streets	85.6	75.4
Ever married	43.9	52.4
Currently married	4.6	12.9
Has parented children	51.3	55.2
Ever in mental hospital	22.7	12.7
Ever convicted of crime	65.5	38.5
Ever in placement out of home as a child	45.4	29.4
As child, ever in		
Foster home	29.6	21.0
Group home	17.3	10.5
Other placement	26.7	14.7
Has been binge drinker	52.0	23.1
Has gone to welfare for help	92.9	85.3
Mental hospital admissions (mean number)	2.0	2.0
<b>Homelessness</b>		
Length of current spell		
(mean/median)	1.4 yrs/120 days	347 days/90 days
Total length of all spells (mean/median)	4.3 yrs/3 yrs	347 days/90 days
How long ago first became homeless (mean/median)	9.2 yrs/8 yrs	347 days/90 days
Worked any in past 30 days	46.7%	35.7%

exits and returns to homelessness during the period following their first interview. The questionnaires repeated some first-wave questions about such topics as welfare use, health, and drug and alcohol use to determine the effects of time on the condition of the respondent.

Astonishingly, though the second interviews were only six months after the first, three-fourths of the homeless had

found places to live at least once. Furthermore, among those who did so, the majority then became homeless one more time during the same period, and 55 percent of these managed to exit again. Table 3 presents the relevant data about exits from homelessness between waves 1 and 2. A look at the place to which the homeless escape shows that most are likely to find refuge either with a friend or relative or in a boardinghouse arrangement, usually with the county paying the rent. About 32 percent exited to a place of their own.

The high turnover rate suggests that the measure of exiting used in the initial analysis—off the streets for at least two weeks—may not reflect a “true” exit. The researchers are exploring the use of a longer time period or taking into account the quality of the exit. Clearly in a place like Minneapolis many of the homeless find some place to escape from the elements for part of the time in the winter months. Temporary refuge when the temperature is below zero may not constitute a permanent exit, even though it lasts for several months.

**The long-term homeless**

The data from the Piliavin and Sosin study indicate that the homeless, like the welfare population, consist of two distinct groups: those for whom homelessness is a temporary condi-

**Table 3**

**Exit Information across Minneapolis Cross-Section Samples (between Waves 1 and 2)**

Category		Size of Sample
Off the streets at least once (%)	76	202
Continuously homeless (%)	24	202
Average no. days of first exit off streets	83	151
Median no. days of first exit off streets	77	151
Returned to streets after first exit (%)	52	151
Returned to streets and exited second time (%)	55	78
Average no. days last exit off streets (including those whose spell is cut short by date of interview)	51	39
Median no. days of last exit off streets (including those whose spell is cut short by date of interview)	48	39
First exiters who remained off streets through second interview (%)	50	153
Ever exited streets to		
Friend or relative's house (%)	44	198
Own place (%)	32	198
Room-and-board facility (%)	20	198
Jail or prison (%)	6	198
Hospital or treatment facility (%)	7	198

**Table 4**  
**Distinguishing Characteristics of the Long-Term Homeless in Minneapolis**

Category	Percentage in Category Who Are Homeless Longer Than Two Years	Number in Category
Black	22.7%	88
Nonblack	43.1	239
With special training	34.5	177
Without special training	41.2	153
Ever in foster placement	47.2	127
Never in foster placement	31.5	203
Mental hospitalization prior to first homelessness	25.0	40
Mental hospitalization following first homelessness	100.0	17
Never in a mental hospital	35.6	267
Currently alone	41.7	266
Not currently alone	18.0	61
Currently with child(ren)	0	17
Not currently with children	39.4	310
Currently married	19.2	26
Not currently married	39.7	300
Ever in prison	65.7	67
Never in prison	30.4	260
Ever convicted of a crime	49.4	176
Never convicted of a crime	23.7	152
At least one late stage alcoholism symptom	52.2	134
No symptoms	27.6	196
Binge drinking within past 30 days	57.7	130
No binge drinking	24.5	200
Younger than 25 when first became homeless	51.9	156
Age 25 or older when first became homeless	24.3	173
Worked less than 55% of adult life	49.0	157
Worked 55% or more of adult life	27.3	165
Highest earned weekly income (in 1977 dollars) was below the median of \$213	34.2	146
Highest earned weekly income (in 1977 dollars) was at or above the median of \$213	40.6	143

**Note:** Based on the cross-section sample, N=330, 37.5 percent (124 individuals) were homeless longer than two years.

tion and those for whom it is a way of life. The characteristics of those who have been homeless for longer than two years during their lives are presented in Table 4. Alcoholics, those with prison records, and those who were in a mental hospital following a first bout of homelessness are very likely to be among the long-term homeless. Over 50 percent of the individuals in these categories remain homeless for over two years. On the other hand, no families with children were among the long-term homeless, and only a small proportion of those currently married (less than 20 percent) were. A larger proportion of nonblacks (43.1 percent) were homeless for over two years than were blacks (22.7 percent).

### Understanding the phenomenon of homelessness

A number of explanations have been put forward to explain homelessness. First, the homeless may have personal pathologies which lead them to be on the streets. The most common of these are thought to be mental illness and alcoholism. Second, the homeless may lack human capital. That is, they may be incapable, owing to lack of education, training, or discipline, to hold a job that will enable them to pay rent. Their lack of capital may be aggravated by a shortage of low-cost housing in some areas of the country, as single-room occupancy (SRO) hotels in downtown areas are torn down and replaced by high-rises.<sup>5</sup> It has also been suggested that the homeless prefer life on the streets.

Currently Piliavin and Sosin are trying to determine how well these explanations predict (1) who has been homeless for a long period; and (2) who is likely to exit from homelessness. At least for the former question, so far no evidence has been uncovered to support the theory of a "preference" for street life. Poverty and pathology both seem to play a role.

An understanding of the sort of help the homeless require should aid all those who will be receiving funds from the emergency homeless aid legislation, signed by President Reagan July 22, 1987. This bill authorizes more than a billion dollars to aid the homeless over a two-year period. Some money will be going directly to communities. Community action agencies will receive \$70 million over fiscal years 1987 and 1988 to fund a wide range of programs: health care grants to deliver outpatient health services; emergency mental health services; grants to innovative community providers of mental health services and treatment of alcohol and drug abuse; emergency shelter grants; rehabilitation of shelters and SRO hotels; transitional housing programs for the homeless handicapped, mentally ill, and families with children; and job-training programs. As more is known about the circumstances of the homeless, specific programs are more likely to yield positive results. ■

<sup>1</sup>This paper was written with the assistance of Herb Westerfelt, who provided all of the tables.

<sup>2</sup>Both Piliavin and Sosin have worked extensively in Hennepin County (Minneapolis). Piliavin worked on a large-scale study of the response of AFDC recipients to the separation of social services from welfare payments

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### Institute Publication on Homelessness

Irving Piliavin, Michael Sosin, and Herb Westerfelt, "Conditions Contributing to Long-Term Homelessness: An Exploratory Study." IRP Discussion Paper no. 853-87, 1987.

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(see Tom McDonald and Irving Piliavin, "The Effects of Separation of Services and Income Maintenance on AFDC Recipients," IRP Discussion Paper no. 528-78, 1978). Sosin studied emergency assistance programs and special needs programs in Minneapolis (reported in Joel F. Handler and Sosin, *Last Resorts* [New York: Academic Press, 1983]) and the kinds of assistance provided by the private sector (reported in Sosin, *Private Benefits* [Orlando, Fla.: Academic Press, 1986]).

<sup>3</sup>See Peter H. Rossi, Gene A. Fisher, and Georgianna Willis, *The Condition of the Homeless of Chicago* (Amherst, Mass.: Social and Demographic Research Institute, 1986); and Dee Roth, Jerry Bean, Nancy Lust, and Traian Saveanu, *Homelessness in Ohio: A Study of People in Need* (Columbus: Ohio Department of Mental Health, 1985). The differences between the samples seem readily explained by the differences between the cities. Minneapolis sample members, for example, are much more likely than respondents in Ohio and Chicago to be receiving public assistance, because Minneapolis has a more generous program. The relatively large number of Native Americans in the Minneapolis sample reflects the number of Native Americans in the city and easy access to the city from Indian reservations. The higher proportion of women in the Chicago sample may reflect the lower AFDC benefit levels and the higher cost of housing in that city.

<sup>4</sup>Various studies have reported that up to 90 percent of the homeless may be mentally ill. See, for example, Ellen Bassuk, Lenore Rubin, and Alison Lauriat, "Is Homelessness a Mental Health Problem?" *American Journal of Psychiatry* 141 (December 1984), 1546-1550.

<sup>5</sup>According to Piliavin, homelessness in different places may have different origins. Housing inflation does not seem to be a major factor in Minneapolis, though a recent article by Thomas J. Main ("The Homeless Families of New York," *The Public Interest*, No. 85 [Fall 1986], pp. 3-21) suggests that in New York, where the shortage of low-cost housing is severe, some homeless families may be shopping for a better housing situation. At any rate one report indicates that 89 percent of the families who apply for emergency housing would decline a barracks shelter.

## Recent books by IRP researchers

### *Poverty Policy and Poverty Research: The Great Society and the Social Sciences*

by Robert H. Haveman

University of Wisconsin Press, 114 N. Murray Street, Madison, WI 53715, 1987 (\$37.50)

Poverty research was launched in 1965, a year after Lyndon Johnson declared "unconditional war on poverty." It mushroomed throughout the country over subsequent years until 1980, when it underwent first retrenchment and then, following resurgence in the numbers of the poor, a renaissance. In this book Robert H. Haveman measures the growth from 1965 to 1980 in federal expenditures on poverty research studies, evaluates the contribution of this research to basic knowledge and to research methods, and describes its influence on the social sciences.

That influence included development of the field of policy analysis and evaluation research, which drew government, academe, and members of the interested public into closer communication, opening new career possibilities for those concerned with application of research findings. Meanwhile social experimentation, econometric advances involving selectivity bias, and microsimulation modeling advanced the disciplines upon new paths.

The Epilogue reviews the years since 1980 and asks what lies ahead for poverty-related social science.

### *Fighting Poverty: What Works and What Doesn't*

Edited by Sheldon H. Danziger and Daniel H. Weinberg

Harvard University Press, 79 Garden Street, Cambridge, MA 02138, 1986 (cloth, \$27.50; paper, \$10.95)

Two decades after President Johnson initiated the War on Poverty, it is time for an assessment of its effects. In this book a distinguished group of economists, sociologists, political scientists, and social policy analysts provide that assessment. The numbers tell us that spending on social programs has greatly increased, yet poverty has declined only slightly. Do the numbers alone give an accurate picture? Have the government's efforts, as some critics claim, done more harm than good?

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