CASE IN POINT: Baby Busted: The Growth in Homelessness Among the Baby Boomer Generation

A surprising number of older Americans are homeless or at risk of becoming so. Professional services are vital to this population’s quality of life.

By Jeff Yungman

EARN 5 CSA CE CREDITS
After you have read this article and the accompanying case study, you have the option to earn 5 CSA CE credits by completing an online multiple choice quiz. Go to www.csa.us/page/Journals, then scroll down to the section entitled “CSA Journal: Earn 5 CSA CE Credits.”
NOW YOU CAN EARN 5 CSA CE CREDITS

After you have read this article and the accompanying case study (page 83), you have the option to earn 5 CSA CE credits by completing an online multiple choice quiz. Go to www.csa.us/page/Journals, then scroll down to the section entitled “CSA Journal: Earn 5 CSA CE Credits.”
A surprising number of older Americans are homeless or at risk of becoming so. Professional services are vital to this population’s quality of life. **By Jeff Yungman**

Sam Norman was in his sixties when he first became homeless. His military career ended when the government found out he was gay. This revelation also permanently alienated his family. However, Sam recovered careerwise and spent a majority of his working life with Kroger Co. grocery stores.

Sam’s life began to unravel in 2013 when his partner passed away. Depression due to his partner’s death took its toll, and Sam lost his apartment. In the homeless shelter, Sam was able to work with the Supportive Services for Veteran Families (SSVF) program representative, who found housing for him. Sam was able to maintain his new apartment for a couple of years. However, his depression worsened and he spent the following two years bouncing between the homeless shelter, the local Veteran’s Administration (VA) hospital, and various residential care facilities where he was placed by VA social workers. Eventually, he was asked to leave these facilities due to his demanding behavior, including smoking indoors. Sam’s outlook was bleak.
There is no question that with the aging of the baby boomers, those born between 1946 and 1964, the country is getting older. What is much less acknowledged is that the problem of senior homelessness is growing as well. While it may be the conventional wisdom that it is rare for an older adult to be homeless, that assumption is not correct. In reality, the homeless are aging faster than the general population. These older Americans will require increasing amounts of innovative health care, low-cost housing solutions, and legal assistance, as well as supportive services within the community.

The age of those who are considered the senior homeless varies from research study to research study. However, the consensus is that the age for the “older homeless” is over fifty, with those between the ages of fifty and sixty-five being at the greatest risk because they are beyond the most viable working years and not yet eligible for the government’s safety nets. Approximately half of America’s homeless are over age fifty. The Homeless Research Institute estimates that the population of older adults who are homeless could more than double from 44,000 to 95,000 by the year 2050 (Goldberg & Barrington, 2016).

In spite of the magnitude of the problem, there is little or no research available to break down the homeless older adult population by gender or marital status. The author is not familiar with any shelters specifically for either older women or married couples. While it might be assumed that couples who receive two checks for Social Security or through a pension would be better off than an individual (who must pay the same for a room or apartment), that’s not always the case. If couples are receiving Supplemental Security Income (available to low-income individuals who have either never worked or who haven’t earned enough work credits to qualify for Social Security Disability Income), Social Security looks at entire household income, so having two checks does not help much. However, if couples are receiving Social Security Disability Income or Social Security retirement benefits, then two checks could help prevent homelessness.

**Two Homeless Populations**

Recent research studies have found that there are two distinct populations of homeless seniors (Brown, Goodman, Tieu, Ponath, & Kushel, 2016). The first are chronic homeless adults who became homeless at a younger age. These individuals have been on the streets for almost a generation due to a variety of issues, primarily poor mental health and/or substance use. They do not have stable housing and have settled into patterns that they seem unable or unwilling to break.

These older adults are wary of the crowded conditions at shelters. They are more likely to stay on the street, relying on public places or makeshift arrangements for sleeping.

The second group consists of older adults who have become homeless after a lifetime of housing stability. Many lost a significant amount of equity in their homes, or lost their homes entirely due to foreclosure, during the Great Recession of 2008. Older adults who rent are economically vulnerable, especially when a booming economy creates a scarcity of affordable housing. They often are living on a fixed income and pay too large a proportion of their income for housing to be sustainable. The reality is that with a high housing cost burden and limited income, these older adults reach a point where they can no longer afford to pay their rent.

There are a number of other factors that have increased the risk of homelessness for older adults. They have decreased economic security due to stagnating wages or are working past retirement age at low-paying jobs because they have no retirement savings. In many cases, their pension plans have disappeared and they have difficulty accessing public benefits. In addition to difficulties finding housing they can afford for the long term, these older adults who are newer to the streets became homeless due to one or more of the following factors: job loss, lack of family support, loss of a life partner, and reduced social welfare protections.

**Health Issues**

No matter how an older adult becomes homeless, the average life span for a person living on the streets is only about sixty-four years, fourteen years shorter than the average American. According to the National Coalition for the Homeless, a fifty-year-old living on the street possesses the physical traits of a seventy-year-old (Senior Navigator, 2018). Older homeless people also experience chronic illnesses and geriatric conditions at rates similar to, or higher than, housed adults fifteen to twenty years their senior (Kushel, 2018). As a result, adults age fifty and older who are homeless have a mortality rate four times higher than the general population (Staff, 2016).

Homeless older adults have health issues that are hard to treat while living on the street, and risk developing chronic diseases prematurely. Older adults, in general, already have higher high health care costs. As a result, those who are homeless often do not have the resources to pay for treatment, or are not aware...
that they are eligible for benefits such as Medicaid or Medicare. They often do not seek preventive or early treatment for their health conditions. Consequently by the time they do turn for help in the medical community, their condition is so severe it requires an emergency room visit. These conditions may include chronic pulmonary disease, heart disease, diabetes, hypertension, urinary incontinence, tuberculosis, visual impairment, cognitive impairment including memory loss, Alzheimer’s disease and/or dementia, and other health problems brought on by poor nutrition or sleep deprivation.

Even when homeless older adults are fortunate enough to remain relatively healthy, age itself plays a factor in their ability to function on a daily basis. They are subject to a geriatric condition called “frailty,” which is defined as an accumulation of deficits in physical, psychological, and social domains leading to adverse outcomes such as disability and mortality. Another condition affecting the population is “weathering,” or premature aging from exposure to prolonged stress (In Focus, 2013). Homeless older adults are also more susceptible to falls and deficits in the ability to perform activities of daily living (ADL) such as bathing, eating, dressing, and going from one place to another. As with other older adults, this can be due to loss of mobility, flexibility, strength, and energy, but in the homeless population these effects are exacerbated by premature aging. Often the only option for older adults with these function problems are nursing homes. Homeless adults are often unaware of, or unable to access, an alternate resource through Medicaid or other funding sources. Since placement in a nursing home depends on adequate funding, older adults who are chronically homeless end up in an “institutionalization circuit,” going between living on the street, to a homeless shelter, to living in an institution such as jail or a psychiatric hospital (Goldberg & Barrington, 2016).

In addition, older adults who are homeless are easy prey for criminals. They are more prone to be a victim of a crime than a perpetrator of one, and more likely to be ignored by law enforcement if they attempt to file a report. The National Coalition for the Homeless in their publication, No Safe Street: A Survey of Hate Crimes and Violence Committed against Homeless People in 2014 & 2015, found that 38 percent of homeless individuals who were victims of crime were age fifty or older. Those older adults were often victims of violence, in particular robbery, with money, personal identification papers, medication, and clothing being the items taken from them.

**Supportive Services**

The key to stable housing and an end to homelessness is finding the resources to either get housed and off the street or to prevent eviction in the first place. There has been a great deal written about the supportive services that older adults who are homeless can utilize to address their homelessness. In a special report, Justice In Aging presented a number of actions that need to be taken to address the crisis of homelessness among older adults (Goldberg & Barrington, 2016). Their recommendations included the following measures:

- Increasing and/or expanding income supports.
- Making healthcare affordable and accessible.
- Targeting health care programs and supportive services (risk screening, geriatric nursing triage, medical respite facilities) to the needs of older homeless adults.
- Creating more affordable, accessible housing.
- Developing permanent supportive housing (housing plus counseling services).
- Expanding the availability of low-cost legal services.
- Increasing outreach efforts to older adults.
- Offering more mental health and substance use treatment.
- Providing transportation, financial counseling, and education and training to those who need it.

**Legal and Social Services Are Key**

Remarkably, of those actions listed by Justice In Aging, the one that is often overlooked is low-cost legal services, when in fact legal services can and do play a significant role in ending homelessness for older adults. One example of that assistance is eviction prevention. Research shows that tenants with legal representation at an eviction hearing are less likely to be evicted than unrepresented tenants, regardless of the merits of their respective cases. Holistic legal services provided to older adults at risk of homelessness can serve to address other housing areas as well. Such areas include dispute mediation between tenant and landlord, finding emergency financial assistance to prevent an eviction, providing assistance
to secure other income to prevent further eviction actions, and offering budget or money management support.

One organization that provides this array of services to older adults at risk of becoming homeless is Bronxworks' Senior Homeless Prevention Program. Located in New York City, the Senior Homeless Prevention Program utilizes a client triage system to determine whether a tenant needs representation by a lawyer or social services case management, or both. The program's case management model involves a case manager helping tenants access all the resources they need to prevent eviction and achieve housing stability (Rubel, 2017). The model is elder-specific and assesses whether the tenant has issues with:

- cognitive functioning,
- life-threatening diseases,
- ADL skills,
- financial management,
- mental health,
- elder abuse,
- assisted living arrangements, and
- medical providers.

While legal services for tenants are often provided by public interest law organizations, they do not have to be the only source of legal representation in landlord/tenant matters. This representation can also be provided by pro bono (donating their services) lawyers who agree to limit their services to just the eviction matter. These attorneys may also choose to participate in housing courts, available on designated days in some jurisdictions to provide legal and supportive services for individuals who are being evicted.

Eviction prevention is just one of the many areas where legal services can work to prevent homelessness among older adults. For those who are homeless, legal services can play an important role in navigating the complex application for a variety of services. These may include obtaining Social Security benefits or legal identification, representation in guardianship/conservatorship matters, and placement in safe and appropriate housing.

Given that lack of adequate income is a major cause of homelessness among older adults, legal representation for seniors in Social Security matters can make the difference between being housed or living on the street. Applying for Social Security benefits can be a daunting task for anyone; utilizing the assistance of a lawyer greatly improves an individual's chances of both navigating the process and being approved for benefits. Lawyers versed in the Social Security process are able to assist clients in determining whether to apply for Social Security retirement or disability benefits, and/or Supplemental Security Income. The lawyer can then assist with completing the various forms required for approval of benefits, provide representation at appeal hearings before an administrative law judge, explain income and resource limits, and apply for a representative payee if needed.

**Conclusion**

During one stay at a local homeless shelter, Sam met with the lawyer on staff there. The lawyer completed a health care power of attorney, durable power of attorney, and a living will for Sam. Since Sam had no one else, the staff lawyer agreed to be his agent in these documents. As his agent, the lawyer remained in contact with Sam as he moved from place to place.

In the summer of 2018, Sam, now seventy, contacted the lawyer and advised him that he was in a hospice facility after a stage 4 lung cancer diagnosis. He asked the lawyer to meet with him to draw up his last will and testament. The lawyer obliged, and the will was completed. Although Sam was still smoking, he felt happy for the first time in years with both his living arrangement and the care he was receiving. Sam had come to terms with his health. Although it had taken some time and support from various sources, Sam will be able to live out the remainder of his life housed and cared for.

While living on the street is a risky proposition for anyone, the risks significantly increase for older adults. The number of older adults who are homeless continues to increase. Preventing homelessness among this population should be a priority. Ending, or at least limiting, the number of older adults who are homeless is possible if those working with these individuals have a better understanding of the causes of homelessness and the problems that people who are homeless face. A better understanding of these issues can then translate into the creation of programs specific to the needs of this vulnerable older population.

Portions of this article were previously in an article for *Bifocal*, a Journal of the ABA Commission on Law and Aging, Volume 39, No. 5, May-June 2018.
ANN / SIXTY YEARS OLD

Ann had multiple health problems, and, although she did not like living in public housing, she had no other option. Ann requested legal assistance in her ongoing dispute with the housing authority over how much back rent she owed. During a torrential rainstorm, her apartment flooded. Ann had to buy new furniture to replace the furniture that was damaged from water and as a result she fell behind in her rent. A pro bono lawyer represented Ann at an informal hearing with the Housing Authority. There were clearly some discrepancies between what Ann thought she owed in back rent and what the Housing Authority claimed she owed. The matter was not resolved and two months later the Housing Authority filed to evict Ann.

Ann’s lawyer requested an eviction hearing on the matter. At the hearing her lawyer, using Ann’s receipts and evidence offered by the housing authority, was able to demonstrate to the magistrate judge that the housing authority used two ledgers that listed varying amounts of back rent Ann allegedly owed. The magistrate ruled that Ann only owed $472 in back rent, not the $1,115 that the housing authority claimed she owed.

The housing authority retained outside counsel to appeal the magistrate’s decision. Ann was again represented by her lawyer and the magistrate again ruled in Ann’s favor. The counsel for the housing authority then filed a motion to appeal the magistrate’s decision to the state court of common pleas requesting that the magistrate’s decision be reversed. At the hearing Ann was again represented. The presiding judge dismissed the housing authority’s motion and Ann has remained housed while she looks for housing more to her liking.

OSCAR / NINETY-TWO YEARS OLD

A World War II veteran, Oscar was, to put it mildly, set in his ways. And at age ninety-two, he had every right to be. Oscar requested legal services because he had been served with an eviction notice for nonpayment of rent. He maintained that he had paid his rent and did not understand why he was being evicted. Oscar was represented by a lawyer from legal services.

At the hearing, it was determined that a veterans’ assistance agency had agreed to pay Oscar’s outstanding rent, but had failed to do so as promised. Oscar’s lawyer contacted the agency and representatives agreed to pay the back rent.

During the course of representing Oscar, his lawyer determined that Oscar was not receiving his full pension from a former employer due to unnecessary deductions for medical insurance. Since Oscar was a veteran and received all his medical services through the local Veterans Health Administration, he did not need that insurance. His lawyer contacted the former employer and Oscar’s monthly pension was increased by two hundred dollars a month.

Three months later, Oscar received another eviction notice. This time he was being evicted for the as-yet-unresolved nonpayment of rent and also for allegedly being a public health hazard, as a result of having too much “stuff” in his apartment. At the eviction hearing, Oscar’s lawyer requested that Oscar be given thirty days to clean his apartment. The magistrate granted the request. With the help of seven law students, Oscar’s lawyer was able to satisfactorily clean out the apartment to the extent that, for the first time in months, Oscar was able to sleep in his bed instead of sleeping in a chair.

At the subsequent hearing, the Magistrate deemed that Oscar’s apartment was not a public health hazard and agreed with Oscar’s lawyer that all late fees and court costs Oscar allegedly owed should be thrown out. This action reduced the back rent Oscar owed from $513.29 to $49.63, which the veterans’ assistance agency gladly paid. The agency also agreed to work with Oscar to create a budget for him in order to prevent further eviction notices.

Discussion

The two profiles illustrate the role a lawyer can play in eviction matters to prevent an older adult from becoming homeless.

In the first profile, Ann had tried to negotiate with the housing authority without success. It was clear that the housing authority was determined to obtain what they claimed Ann owed them, despite their questionable bookkeeping. Ann may have been
able to state her case at the first hearing, but without legal representation it is doubtful, due to her lack legal knowledge and court procedure, that she would have prevailed in either the appeal hearing before the magistrate or in the court of common pleas. Had she appeared in court unrepresented, it is quite likely that at age sixty and with serious health conditions, Ann would have been evicted and on the street. The importance of legal representation in eviction matters cannot be overstated.

While the second profile again dealt with an eviction matter, it is illustrative of how holistic advocacy, volunteers, and case management can all play a role in preventing an eviction that keeps an older adult from being homeless. Oscar’s lawyer not only represented him at his eviction hearings, but he was also able to find a way to increase Oscar’s monthly income and recruit volunteers to address the alleged public health hazard Oscar’s apartment presented. In addition, a social services agency stepped forward and provided both financial assistance and money management support that will help prevent future eviction threats. Although the effort made to assist Oscar was not a formalized arrangement, it was similar to the work done on a daily basis by the Bronxworks’ Senior Homeless Prevention Program that is cited in the article. «CSA

Jeff Yungman is the director of One80 Place Legal Services in Charleston, South Carolina. After leaving the New Orleans Police Department, Jeff obtained a master’s in social work and a master’s in public health from Tulane University. In 1999 he became clinical director of One80 Place, a homeless shelter in Charleston. In 2004, Jeff enrolled in the Charleston School of Law. Upon graduating he remained at One80 Place to provide free legal services and holistic advocacy to any individual in the Charleston area who is homeless. In 2010 Jeff was appointed to the ABA Commission on Homelessness and Poverty and is currently a liaison with the Commission.

The American Bar Association Commission on Homelessness and Poverty is committed to educating both its members and the public on the ways in which the legal community and advocates can assist those in need. The Commission is available to provide technical assistance to lawyers interested in getting involved with representing older adults in these matters. For more information, please visit ambar.org/homeless or contact Commission Director Kelly Russo at Kelly.Russo@americanbar.org.

■ REFERENCES


brown, r.t., goodman, l., tieu, l., ponath, c., & kushel, m. b. (2016). pathways to homelessness among older homeless adults: results from the hope home study. plos one, 11(5).

doyle, k.=. (2016, march 01). homeless people face age-related conditions earlier than people ... retrieved from https://www. reuters.com/article/us-health-homeless-aging idUSKCNOW35KV
hecht, c. (2016, september 29). a third of the homeless people in america are over 50. i’m one of them. retrieved from https:// www.nytimes.com/first-person/2016/9/29/12941348/homeless-over-50-statistic
put an end to senior homelessness. (2016, august 4). retrieved from https://www.usnews.com/opinion/articles/2016-08-04/ ending-senior-homelessness-is-a-national-priority
simmons staff. (2016, september 29). aging on the streets: america’s growing older homeless population. retrieved from https://socialwork.simmons.edu/blog/aging-on-the-streets-americas-growing-older-homeless-population/