

AGING IN PLACE WITH PERMANENT SUPPORTIVE HOUSING

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Permanent supportive housing (PSH) is effective at ending chronic homelessness. PSH should also be designed to accommodate and address accelerated aging experienced by homeless adults in order to help them age in place once they are housed.

SNAPSHOT FINDINGS:

- Overall, 90% of PSH residents aged 39 years or older reported two or more chronic physical or mental health conditions. (Henwood, Lahey, Rhoades, Winetrobe, and Wenzel, 2017).
- Adults entering PSH have a high prevalence of geriatric conditions, including falls, difficulty with walking and balance, urinary incontinence, and frailty (Henwood, Lahey, Rhoades, Pitts, Pynoos, and Brown, forthcoming).
- PSH residents have higher rates of geriatric conditions than a population-based comparison group over 2 decades older (Henwood, Brown, Pitts, and Pynoos, forthcoming).

POLICY IMPLICATIONS AND RECOMMENDED NEXT STEPS:

PSH investments and accommodations should include:

- Health care coordination as part of a larger suite of supportive services, with a focus on chronic disease self-management in addition to housing retention services.
- Specific modifications to PSH units to accommodate the health-related limitations of older tenants, such as providing adequate lighting and handrails to prevent falls.
- Investments in workforce development to ensure that case managers are trained in geriatric care.



Significant resources are being invested to build new PSH units in greater LA

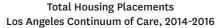


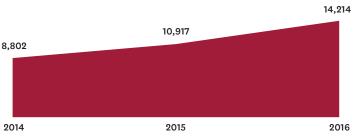
Proposition HHH provides approximately \$1.2B over 10 years to help produce roughly 10,000 new units of PSH. New and existing units must include accommodations to help residents cope with accelerated aging.











LA CoC exclude Glendale, Pasadena, and Long Beach CoCs

BACKGROUND AND RESEARCH MOTIVATION:

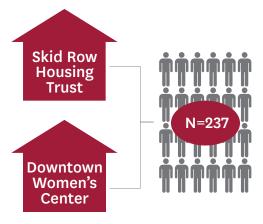
Nearly 25% of the Los Angeles County homeless population is 55 years or older (LAHSA, 2018). These individuals experience accelerated aging including early onset of geriatric conditions two decades before other adults (Brown et al., 2016; Brown, Kiely, Bharel, & Mitchell, 2012).

In 2016 in Los Angeles County, over 14,000 individuals moved out of homelessness into PSH. Understanding the prevalence of geriatric conditions among the target population for new and existing PSH units is necessary to recognize and meet the needs of those who will be housed in Los Angeles over the next decade.

RESEARCH METHODS:

A 2017 study by Henwood, Brown, Rhoades, Pitts, and Pynoos (forthcoming) examined the prevalence of geriatric conditions in a sample of formerly homeless adults living in permanent supportive housing in Los Angeles. Interviews and physical examinations were conducted with 237 residents aged 45 and older from two permanent supportive housing organizations in Los Angeles. The interviews covered demographics, health and wellbeing, healthcare access, nutrition and food insecurity, and socioeconomic status. Participants reported if they had difficulty performing activities of daily living, such as bathing, dressing, and eating, and instrumental activities of daily living, such as taking transportation and managing medications and money.

A second study by Henwood, Lahey, Rhoades, Winetrobe, and Wenzel (2017) showed that the health of adults moving into permanent supportive housing appeared worse than previously suggested by the



A total of 237 individuals Skid Row Housing Trust and Downtown Women's Center were interviewed for this study.

literature on homelessness. Interviews were conducted with 421 homeless individuals recently entering PSH. Eligible participants included adults aged 39 or older who were homeless, moving into PSH within 20 miles of downtown Los Angeles, spoke either English or Spanish, and who did not have minor children. Structured interviews were conducted by trained interviewers. Participants were asked about self-reported health. Health conditions were assessed with an item adapted from the National Health Interview Survey.

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