

4<sup>th</sup> International Conference on

# Palliative Care, Medicine and Hospice Nursing

August 27-28, 2018 | Boston, USA

## Older adults homelessness in the metro Minnesota: Barriers to re-housing and challenges for case management

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**Summary:** The older adult chronic (long-term) homeless is rapidly increasing in Minnesota. Long-term homelessness is defined as “a lack of a permanent place to live continuously for a year or more, or at least four times in the past three years” (Minnesota). The proportion of the homeless older adults age 55 and older nearly doubled between 2009 and 2012 and has increased by 8 percent since 2012. Currently, 9% of single homeless individuals in metro Minnesota are aged 55 and older (Wilder Foundation Study 2015). Homelessness as a significant public health issue. People who are chronically homeless have higher mortality and morbidity rates compared to the general population. Approximately half of the medical expenditures for the homeless individuals account for emergency room use. As such, uncontrolled chronic conditions along with premature aging contributes to increases in health care costs for homeless older adults. Homelessness is preventable with affordable housing options, lifestyle change, and sufficient social support.

**Methods/Settings:** Catholic Charities (CC) of Saint Paul and Minneapolis provides social services and housing to homeless individuals and families in the Twin Cities. This pilot study examines the qualitative data on how case management services are provided to the older adults who are homeless through the CC Adult Services Section and what challenges they experience while working with the older adults. Specifically, the lead researcher employed key informant interviews of case managers working with older adults from different age groups and client charts reviews.

**Results:** The major reason why people became homelessness later in life is poverty and not enough affordable public housing, age limit 62+ for senior subsidized housing, health issues and/or disability, loss of income due to loss of jobs or low income, financial abuse, death of life partner, lack of social support, drug or alcohol abuse. Major barriers to rehousing for the older adult include high rent, inability to find the job due to lack of knowledge of digital technologies, criminal or eviction history, long waiting list for public/subsidized housing, group Residential Housing program (GRH) policies and eligibility criteria (the homeless individual needs to be homeless for at least one year, have disability and have a medical document from primary doctor). Also, people with certain felonies cannot get into a nursing home, even if they have served their time. Some of these felonies are domestic abuse and sex offenders.

**Conclusion:** The data from this study indicate that the causes that contribute to raising older adult homelessness are not limited only to the poverty and not enough affordable housing. There are also gaps in social services delivery due to ageism; gaps in long-term care and public housing policies that leave certain categories of the older chronic homeless adults on the other side of the society.

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