



*Building and Disseminating Knowledge*

## Demographics of Homelessness Series: *The Rising Elderly Population*

M William Sermons and Meghan Henry

*Inside*

Homelessness among the Elderly

Demographic Changes among the Elderly

Projected Increase in Homelessness among the Elderly

Pathways into Elder Homelessness

Precariously Housed Elder Adults

Chronically Homeless Older and Elderly Adults

Federal Housing Assistance for the Elderly

A Call to Action and Inquiry

There is some troubling evidence that homelessness is beginning to increase among elderly adults. In addition, there are demographic factors—such as the anticipated growth of the elderly population as baby boomers turn 65 years of age and recent reports of increases in the number of homeless adults ages 50 to 64—that suggest a dramatic increase in the elderly homeless population between 2010 and 2020. While the country’s changing demographics may make this finding unsurprising, it has serious implications for providers of homeless services and should be deeply troubling to the policymakers that aim to prevent poverty and homelessness among the elderly through local and federal social welfare programs. This paper provides an assessment of the recent and projected changes in homelessness among the elderly and assesses the ability of public affordable housing programs to handle the projected growth in elderly persons at-risk of housing instability and homelessness.

### Homelessness Among the Elderly

While there is a fair amount known about elders experiencing poverty and about the general homeless population, there is relatively little known about the elderly homeless population. This section details what we know from existing research about incidence and growth of homelessness among the elderly.

#### *Incidence*

The elderly population has historically been underrepresented among the homeless population. The limited national homelessness data that have been collected over the past two decades are consistent in revealing that homelessness is much

more prevalent among younger adults than among older adults and the elderly. A 1996 national study by the Urban Institute found that, while those over age 55 represented 28 percent of the general adult population, they made up only 8 percent of the homeless population.<sup>1</sup> This underrepresentation is also reflected in HUD’s 2008 annual homelessness data, which reveal that the incidence of sheltered homelessness among adults over 18 years of age is 55 per 10,000, while the annual incidence among those ages 62 and older is 9 per 10,000.<sup>2</sup> While these findings speak to the relative infrequency of homelessness among the elderly, any level of homelessness among the elderly is concerning.

#### *Changes*

There is very limited national data on the changing demographics of the homeless population, but the data that do exist show that homelessness among the elderly and older adults is modestly increasing. HUD’s first Annual Homelessness Assessment Report to Congress (AHAR), which covered a three-month period ending in April 2005, estimated that 2.4 percent of sheltered homeless adults were older than 62 years of age.<sup>3</sup> HUD’s fourth AHAR, which covered the twelve-month period ending September 2008, showed that 2.8 percent of sheltered homeless adults were older than 62 years of age.<sup>4</sup> To the extent that the two data points are comparable, they suggest very modestly increasing representation of the elderly among the homeless.

While the national data show only modest increases in the representation of the elderly among the homeless population, there is some city-specific research that shows more rapid increases in homelessness among adults ages 50 and older, but not necessarily among the elderly.

Who is considered elderly? This paper focuses on homelessness and economic vulnerability among elderly and, to a lesser extent, older adults. The Census Bureau defines the elderly as those ages 65 and older. As much of the analysis in this paper is based upon Census data, we define the term “elderly” as those over 65 years of age unless otherwise specified. U.S. Department of Housing and Urban Development (HUD) reports on homelessness include an ages 62 and older age category, which is also considered “elderly” for the purposes of this report. “Older adults” are those between ages 50 and 64 unless otherwise specified.

*City-specific research shows more rapid increases in homelessness among adults aged 50 and older.*

- Researchers studying the street homeless population in San Francisco found that from the period 1990–1994 to 2000–2002, the representation of those ages 50 and over went progressively from 11.2 percent to 32.3 percent.<sup>5</sup>
- Data from New York City indicates that the median age of the homeless population in New York City went from 28 to 42 years of age from 1987 to 2005.<sup>6</sup>
- A study of the homeless population in Massachusetts found homelessness among those ages 55 and older increased from 8 percent of the homeless population in 1999 to 14 percent in 2003.<sup>7</sup>
- A study by the Chicago Alliance to End Homelessness and Loyola University found that homelessness is increasing among adults between the ages of 50 and 64, but not among those over the age of 64.<sup>8</sup>

The limited existing research tells a story of increasing homelessness among adults ages 50 and older and more modest increases among the elderly population. The trend is suggestive of an increase in the elderly homeless population over the next few decades as the current older adult population reaches and exceeds age 65.

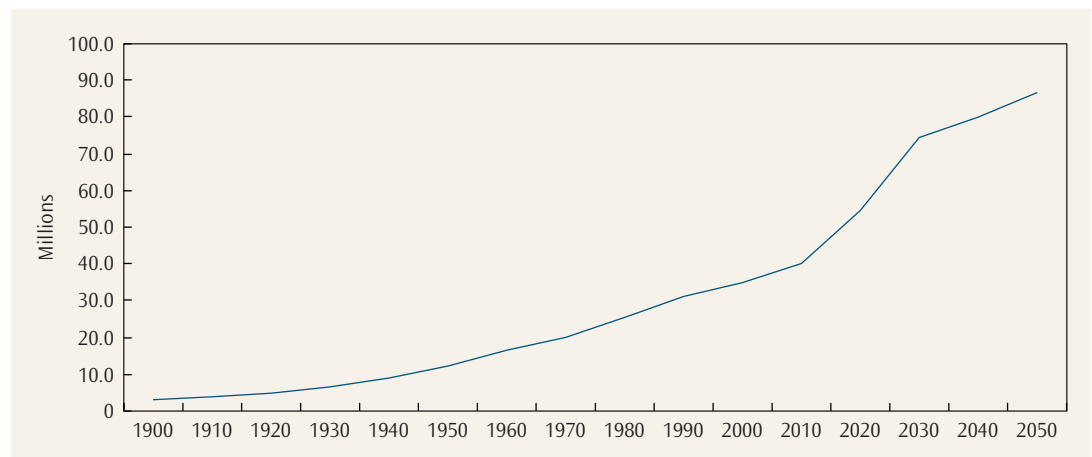
### Demographic Changes Among the Elderly

This paper predicts that homelessness among elderly persons will increase substantially over the next decade. There are two primary demographic factors that contribute to the projected increase in homelessness among the elderly. One is the overall growth in the elderly population, which is expected to more than double in size between now and 2050. The other factor is the relative stability in the proportion of the elderly population facing economic vulnerability. Together, these factors signal an increase in elder economic vulnerability and homelessness.

#### The Growing Elderly Population

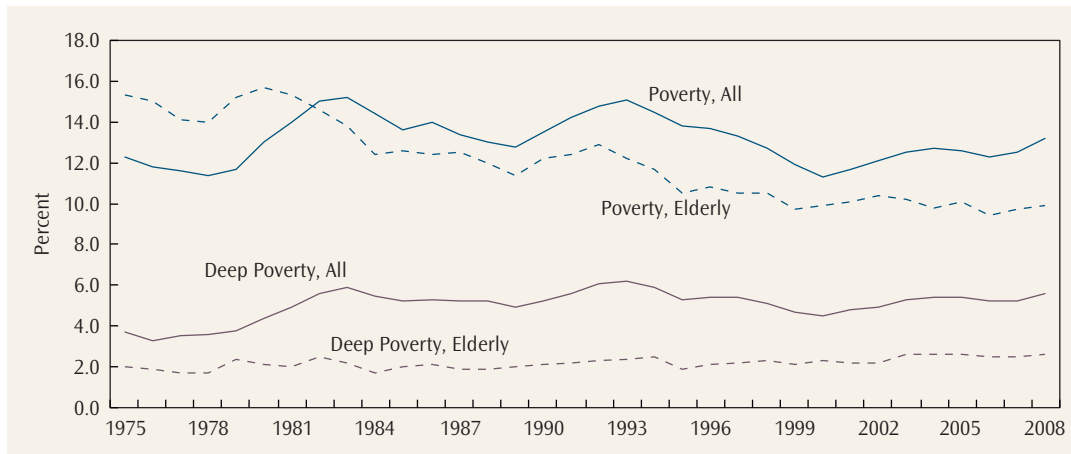
There are more Americans over the age of 65 today than ever before and the number is rapidly increasing. During the past century, the number of elderly people has grown from 3.1 million in 1900 to 37 million in 2008—an increase of over 1,100 percent. The proportion of elderly Americans has also increased since 1900, when adults ages 65 and older made up only 4.1 percent of the population.<sup>9</sup> Today, at 37 million, elderly Americans make up 12.6 percent of the population.<sup>10</sup> This demographic shift means that we have become an older nation, with the median age at almost 37 years old—the country’s

**Figure 1. Historical and projected U.S. elderly population**



Source: Based on U.S. Census estimates and projections.

**Figure 2. Poverty and Deep Poverty, 1975–2007**



Source: U.S. Census Bureau, Current Population Survey, Annual Social and Economic Supplements.

*In 2008, there were over 969,925 elderly persons living in deep poverty.*

highest median age on record. Further, the U.S. Census Bureau projects that by 2050 there will be approximately 89 million people over the age of 65, which more than doubles our current elderly population.<sup>11</sup> This projected increase in elderly Americans, illustrated in Figure 1, merits significant attention at the federal policy level. An increased number of elderly persons will mean an increased need for federal programs aimed at preventing economic vulnerability among older persons.

### *Economic Vulnerability among the Elderly*

The most common measure of economic instability among the elderly is poverty. Poverty among elderly Americans has been relatively low since the 1960s. In 1959, the poverty rate for elder Americans was 35 percent. This fell to approximately 15 percent by 1975, due in large part to increases in government programs such as Social Security.<sup>12</sup> Since that time, poverty rates among the elderly have steadily declined, remaining between 9 and 11 percent for the past decade. According to the 2008 American Community Survey, 9.9 percent of people over 65 years of age had annual incomes below the poverty threshold of \$10,326 for a single person and \$13,030 for a couple.<sup>13</sup>

A measure of even greater economic vulnerability is the proportion of elderly persons in deep poverty—earning only half of the poverty threshold. In 2008, there were over 969,925 elderly persons, or 2.6 percent of the elderly population, in deep poverty.<sup>14</sup> Figure 2 shows the trends in rates of poverty and deep poverty for both the general population and the elderly population since 1975 and reveals that the deep poverty rate among elderly persons has remained around 2 percent since 1975. Federal programs such as Social Security, Supplemental Nutrition Assistance Programs (formerly known as the Food

Stamp Program), and housing programs directed to the elderly have helped decrease the number of persons over 65 years of age living in precarious housing situations due to insufficient income. Despite the overall effectiveness of these programs, some elderly people are not prevented from experiencing economic hardship and homelessness.

### **Projected Increase in Homelessness among Elderly**

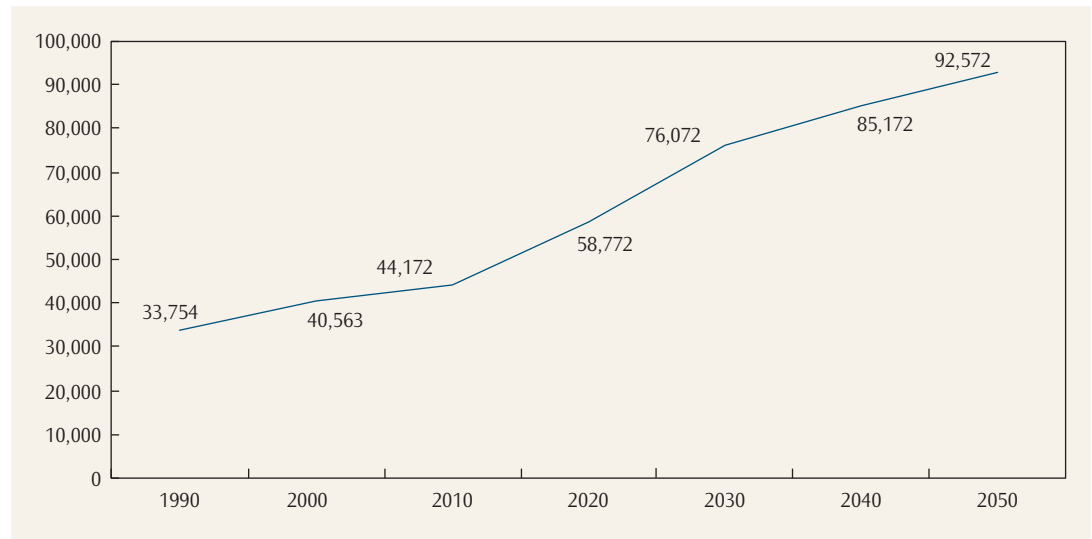
In the most recent AHAR, HUD estimates that there were 43,450 sheltered homeless people over the age of 62 in 2008.<sup>15</sup> Because of anticipated increases in the elderly homeless population as the general population ages, a projection of the elderly homeless population is made in this paper. It is based on the following assumptions:

- The elderly population will increase as projected by the U.S. Census Bureau through 2050.
- The rate of deep poverty in the elderly population will remain constant at 2 percent through 2050, as it has remained since 1975.
- The 2008 ratio of 1 sheltered elderly homeless person to every 22 elderly persons in deep poverty remains constant thorough 2050.

The resulting projection of the elderly homeless population is illustrated in Figure 3. It shows that homelessness is projected to increase by 33 percent from 44,172 in 2010 to 58,772 in 2020 and will more than double between 2010 and 2050, when over 95,000 elderly persons are projected to be homeless.<sup>16</sup>

This projected increase in homelessness among elderly persons is alarming. The remainder of this paper is focused on pathways into elder homeless-

Figure 3. Projection of elderly homelessness



Source: Calculations performed by authors.

*The proportion of elderly Americans has increased since 1900, when adults aged 65 and older made up only 4.1 percent of the population. In 2008, elderly Americans make up 12.6 percent of the population.*

ness and actions that can be taken to end homelessness among elderly persons.

### Pathways Into Elder Homelessness

To the extent that both political will and resources have been committed to preventing elder homelessness and destitution, the natural next question is: How does homelessness among the elderly and older adults occur?

The two basic pathways are the aging of the chronically homeless population and new homelessness among elderly adults who did not experience homelessness prior to turning 65 years of age. Research into this question is rare, but two regional studies provide evidence supporting each of the two pathways.

The Shelter Partnership conducted an extensive study of the older and elderly homeless adults that presented at the Los Angeles area's largest homeless shelter. This study examined the differences between those ages 50 to 61 and those ages 62 and older. The study revealed that 28 percent of homeless persons over 62 years of age came to the shelter directly from the streets, 25 percent came from another shelter, and 15 percent were living with family or friends prior to homelessness. For those between ages 50 and 61, 37 percent arrived from the streets, 19 percent arrived from another shelter, and 10 percent were living with family or friends.<sup>17</sup> The high percentage of older and elderly homeless adults coming to the shelter from the streets and other shelters highlights the first pathway—the aging of the chronically homeless.

An international, three-city study points more toward the second pathway—new homelessness

among formerly stably-housed elders. Boston was one of the three cities (and only U.S. city). The data from Boston revealed that most elderly homelessness people were newly homeless with a history of stable adult employment. Most were last housed in a private rental unit and a plurality had lived alone. The common causes of their homelessness were, in decreasing order of frequency: financial problems, mental health problems, relationship breakdown, physical health problems, and issues related to work.<sup>18</sup> A Chicago study also looked at homeless adults over 50 years of age and found the following reasons as common causes of their homelessness: recent job loss, drinking problems, discontinued/inadequate public assistance, inadequate income, disagreement with family or friends, and injury or illness on the job.<sup>19</sup>

Understanding the pathways into homelessness for the elderly is important when determining the right policy response. Those older Americans who become homeless as senior citizens require more preventive action. Federal housing programs are fundamental in reducing the economic hardship experienced by the elderly whose only income is often Social Security and/or Supplemental Security Income. Alternatively, those older adults—ages 50 to 64—who are chronically homeless and remain homeless as they age have intensive housing and service needs that must be addressed to end their homelessness. Both pathways are addressed in the following sections.

### Precariously Housed Elderly Households

At its root, homelessness is the result of an inability to afford housing. With rising housing costs, elderly

households often must choose between housing and other basic needs such as food and medical care. Housing cost burden exists when a household pays more than 30 percent of their income on housing costs. This burden is considered “severe” when the portion of a household’s income dedicated to housing exceeds 50 percent. This housing expense can leave a household economically vulnerable. This is particularly concerning for elderly people who often rely on a fixed income. In 2007, over 8.7 million households with a householder over the age of 65 experienced housing cost burden. This represents 38 percent of all households with an elderly householder. Further, over 4.8 million of them experienced severe housing cost burden, accounting for approximately 21 percent of total elderly households.<sup>20</sup>

In recent years, the increase in the rate of severe cost burden among elderly households has outpaced the overall growth of elderly households. While the share of total households headed by a person over the age of 65 remained relatively unchanged between 2001 and 2007, the percent of elderly households experiencing a severe housing cost burden increased by over 14 percent. Further, while elderly households constituted over one-quarter (26 percent) of the total number of severely cost burdened households in 2007, they accounted for only 20 percent of total households.<sup>21</sup> This overrepresentation of severely cost-burdened elderly households among all households, as well as the faster rate of growth among severely cost burdened elderly households, has significant policy implications. Federal housing policy should be expanded and adjusted to meet the needs of poor and vulnerable Americans—who increasingly are our elderly.

### Chronically Homeless Older and Elderly Households

Chronically homeless older adults who age into elderly homelessness often have critical health and service needs in addition to their obvious housing needs. Homeless seniors are more likely to experience multiple medical issues at a time and often have chronic illnesses that go untreated. Exposure to harsh weather and the often unhealthy environment of shelters can affect the susceptible health and well-being of the elderly population. Substance use disorders, particularly alcoholism, are not uncommon among the elderly homeless population and are often presented alongside mental health disorders, especially among the chronically homeless population. The mental health issues of the elderly are also particularly important when examining the reasons that older people become or remain homeless. Mental illnesses associated with memory loss, for example, can

affect the ability to secure housing as acquiring housing often involved multiple appointments and self-initiated persistence.<sup>22</sup>

Elderly chronically homeless people often require intensive service coordination. This helps them transition into permanent housing smoothly and ensures they remain there. Case management is often critical in coordinating care—primary health care, housing assistance, food, and other services can get lost without some assistance and supervision. Elderly homeless people often face barriers to accessing resources and benefits such as Social Security, Medicare, and Supplemental Security Income (SSI). They may not know that they are eligible for such benefits, they may not know where to start, and/or they may have a hard time following up with service providers, meeting appointments, or completing the necessary paperwork due to health limitations (mental or physical).<sup>23</sup> A coordination of services, coupled with housing assistance, can help homeless or formerly homeless seniors age in their own housing with dignity.

### Federal Housing Assistance for the Elderly

There are a few federal programs that provide housing assistance to seniors. These programs provide the housing safety net for the most vulnerable low-income people. According to the 2007 American Housing Survey, 6 percent of elderly households either lived in housing owned by a public housing authority or identified themselves as recipients of some form of housing subsidy.<sup>24</sup> While this is likely an underestimate, it still represents over 1.3 million households. This section outlines the primary federal rental housing assistance programs that support seniors. Because there are many state and local programs that support seniors, this is not a comprehensive account of all housing services for the elderly.

**Section 202 Supportive Housing for the Elderly Program.** Created in 1959, Section 202 is a project-based housing program that provides housing and supportive services to very low-income elderly households. Eligible persons must be over 62 and have incomes at or below 50 percent of the area median income (AMI).<sup>25</sup> This program is the only government-subsidized program dedicated exclusively to senior housing. There are currently over 300,000 units of Section 202 housing and for each unit that becomes available there are an estimated ten seniors waiting.<sup>26</sup>

**Public Housing.** Public housing is a federally subsidized housing program providing units to persons at or below 80 percent of AMI. While open to all persons below this income threshold, most

*Homelessness is projected to increase by 33 percent from 2010 to 2020 and will more than double between 2010 and 2050.*

*Federal housing policy should be expanded and adjusted to meet the real-time needs of poor and vulnerable Americans—who increasingly are our elderly.*

Public Housing Authorities (PHA) target funds to those at very low or extremely low-income levels. Some PHAs give preference to elderly applicants. Currently, 31 percent—or over 350,000 public housing units—have a senior householder.<sup>27</sup>

**Housing Choice Vouchers (Section 8).** The Housing Choice Voucher Program provides tenant-based and project-based housing assistance to persons with incomes at or below 50 percent of AMI. Approximately 17 percent of the 1.9 million vouchers currently in use are being utilized by senior citizens.<sup>28</sup> The demand for vouchers far exceeds the supply of vouchers, with average waiting lists ranging from 5 to 10 years in some cities.

**Project-Based Section 8.** Project-based Section 8 is a public-private partnership in which the owner (private or non-profit) signs a contract with HUD to provide affordable rental units to low-income tenants. There are currently 1.27 million units of Project-based Section 8, and approximately 50 percent are occupied by elderly householders. With the exception of a small number of units for homeless people, there have been no units added under this program since the mid 1980s. Further, the total number of these units has been declining by over 10,000 a year as owners choose not to renew their expiring contracts.<sup>29</sup>

**Section 515 Rural Rental Housing Program.** Section 515 is a federally subsidized program providing rental assistance to rural areas. This program serves very low and extremely low income persons, with about half of the units being allocated to seniors. Since the program's creation in 1962, over 523,000 units have been built. At its peak in 1979, 38,650 units were created; this figure dropped to 1,621 in 1994 and to only 486 units in 2006. In recent years, funding has been limited, with approximately 1,000 units funded each year. In new construction projects, 95 percent of the eli-

gible participants must have incomes at or below 50 percent of the AMI, compared with 75 percent at existing projects. Elderly households occupy 58 percent of the units.<sup>30, 31</sup>

Table 1 reveals that together, these programs provide approximately 1.9 million units to low-income elderly households. However, these programs have long waiting lists spanning several years, an indication that the number of units both affordable and available to elderly households is insufficient. While federal programs targeted to the elderly have helped lessen the number of precariously housed elderly households who fall into homelessness, the number of units is not keeping pace with the increasing demand. If the deep poverty projections hold true, the government will have to fund between 700,000 and 822,000 additional units through these programs by 2020 simply to maintain the current deficit.<sup>32</sup>

### A Call to Action and Inquiry

In the coming years, the United States will experience a monumental societal shift as baby boomers become senior citizens. Meeting the needs of this population, particularly the economically vulnerable portion of the population, will be one of the greatest domestic policy challenges in our lifetime. Social Security, Medicare, and housing programs targeting the elderly will be critical for meeting the challenge and reducing risk of homelessness. Below is a list of recommendations to reduce and eventually eliminate homelessness among elderly persons in the United States.

1. **Increase the supply of subsidized affordable housing on which economically vulnerable elderly persons rely.** In addition to the Section 202 Supportive Housing for the Elderly Program, elderly persons also make up

**Table 1. Housing Units Serving Elderly Households by Program**

Program	Number of Units with Elderly Households	Percent of Program Serving Elderly
Section 202	300,000 units	100%
Public Housing*	359,882 units	31%
Housing Choice Vouchers (Section 8)	323,000 subsidies	17%
Project-Based Section 8	624,750 units	49%
Section 515 (Section 521)	303,340 units	58%

\* Center on Budget and Policy Priorities, “Decade of Neglect has Weakened Federal Low-Income Housing Programs: New Resources Required to Meet Growing Needs,” 2009, <http://www.cbpp.org/cms/index.cfm?fa=view&id=2691>.

either the majority or a large fraction of the beneficiaries of the other federal affordable rental housing programs—public housing, Housing Choice Voucher Program (Section 8), Project-Based Section 8, and the Section 515 Rural Rental Housing Program. These programs must be preserved and expanded to keep pace with expected increases in demand and to provide a way of providing housing stability for the tens of thousands of elderly persons who experience homelessness every year. Capitalization of the National Housing Trust Fund, which will be used to build, rehabilitate and preserve housing for the lowest-income households, will be a critical element of ensuring that the programs upon which elderly persons depend are adequately sized.

2. **Create sufficient permanent supportive housing to finish the job of ending chronic homelessness.** The aging of the chronically homeless population from the older adult to the elderly age group is one of the ways that homelessness among elderly persons is expected to grow in the coming years. This pathway can be largely averted if the job of ending chronic homelessness is successfully completed in the next 10 years. This requires the creation of sufficient supportive housing units to house the approximately 120,000 persons who are chronically homeless today. Because of the progressive health care and support needs of this population, it is critical that this population receives housing combined with flexible and adaptive support services.
3. **Research to better understand the needs of the homeless elderly population.** One of the recurrent themes of this paper is the paucity of information available about the elderly homeless population. Research is needed to better understand the characteristics of the population. Specifically, research is needed into the patterns of homelessness and mainstream service utilization, the frequency and duration of homeless episodes, and health status and functionality of elderly homeless people. This information is necessary to form a typology of the elderly homeless population that can be used to better plan and target effective interventions, including supportive housing and homelessness prevention strategies.

The existence of homelessness among the elderly indicates that our safety nets are failing our most vulnerable citizens. However, with thoughtful and strategic planning, we can greatly reduce elderly homelessness and prevent the population at-risk from experiencing homelessness. Addressing the unmet housing and service needs of our at-risk and homeless elderly, as well as understanding the

characteristics and needs of the elderly population at-risk of homelessness can help us end elder homelessness. As a nation, we are judged by how we care for our most vulnerable citizens. It is a failing of public policy that any of our elderly are homeless. To fail to act would be, in short, irresponsible.

### Endnotes

1. Burt, M., Aron, L., Lee, E., and Valente, J., *Helping America's Homeless*. Washington, DC: Urban Institute Press, 2001.
2. Based on Department of Housing and Urban Development's Fourth Annual Homelessness Assessment Report to Congress and the 2008 U.S. Census Population Estimates.
3. U.S. Department of Housing and Urban Development, *First Annual Homelessness Assessment Report to Congress*, Office of Community Planning and Development, 2007.
4. U.S. Department of Housing and Urban Development, *2008 Annual Homelessness Assessment Report to Congress*, Office of Community Planning and Development, 2009.
5. Hahn, J., Kushel, M., Bangsbert, D., Riley, E., Moss, A., "The Aging of the Homeless Population: Fourteen-Year Trends in San Francisco," *The Journal of General Internal Medicine* 21(7), 2006, 775–778.
6. Dennis Culhane, "Home Economics," *Boston College Magazine*, Winter, 2005.
7. Maschede, T., Sokol, B., Raymond, J., "Hard Numbers, Hard Times: Homeless Individuals in Massachusetts Emergency Shelters, 1999–2003," *University of Massachusetts, Center for Social Policy*, 2004.
8. Chicago Alliance to End Homelessness and Loyola University, *Homeless Over 50: The Graying of Chicago's Homeless Population*, 2008.
9. He, W., Sengupta, M., Velkoff, V., and DeBarros, K., "65+ in the United States: 2005," *Current Population Reports: Special Studies*, U.S. Census Bureau, 2005, <http://www.census.gov/prod/2006pubs/p23-209.pdf>.
10. Authors' calculations based on U.S. Census Bureau, *American Community Survey*, 2008 data.
11. He, W., Sengupta, M., Velkoff, V., and DeBarros, K., "65+ in the United States: 2005," *Current Population Reports: Special Studies*, U.S. Census Bureau, 2005, <http://www.census.gov/prod/2006pubs/p23-209.pdf>.
12. Purcell, P., "Income and Poverty Among Older Americans in 2007," *CRS Report for Congress*, Congressional Research Service, 2008 <http://www.aging.senate.gov/crs/pension35.pdf>
13. U.S. Census Bureau, *Current Population Survey, Annual Social and Economic Supplements*, <http://www.census.gov/hhes/www/poverty/histpov/hstpov5.xls>.
14. U.S. Census Bureau, *Current Population Survey, Annual Social and Economic Supplements*, <http://www.census.gov/hhes/www/poverty/histpov/hstpov5.xls>.
15. U.S. Department of Housing and Urban Development, *2008 Annual Homelessness Assessment Report to Congress*, Office of Community Planning and Development, 2009.
16. The methodology used for this projection was adapted from National Alliance to End Homelessness, "Homelessness Looms as Potential Outcome of Recession", 2009.
17. Shelter Partnership, Inc., "Homeless Older Adults Strategic Plan", 2008.

*With thoughtful and strategic planning, we can greatly reduce elderly homelessness and prevent those at-risk from becoming homeless.*

18. Crane, M., Byrne, K., Fu, R., Lipmann, B., Mirabelli, F., Rota-Bartelink, M.A., "The causes of homelessness in later life: findings from a 3-nation study," *Journal of Gerontology Series B* 60(3),S152–S159.
19. Chicago Alliance to End Homelessness and Loyola University, *Homeless Over 50: The Graying of Chicago's Homeless Population*, 2008.
20. Author's calculations based on U.S. Census Bureau, *American Housing Survey*, 2007 data.
21. Author's calculations based on U.S. Census Bureau, *American Housing Survey*, 2007 data.
22. U.S. Department of Health and Human Services Bureau of Primary Health Care, *Homeless and Elderly: Understanding the Special Health Care Needs of Elderly Persons Who are Homeless*. <http://bphc.hrsa.gov/policy/pal9907.htm>
23. U.S. Department of Health and Human Services Bureau of Primary Health Care, *Homeless and Elderly: Understanding the Special Health Care Needs of Elderly Persons Who are Homeless*. <http://bphc.hrsa.gov/policy/pal9907.htm>
24. Author's calculations based on U.S. Census Bureau, *American Housing Survey* 2007.
25. Commission on Affordable Housing and Health Facility Needs for Seniors in the 21st Century Attachment 4: *Federal Housing Program Descriptions*, Final Report of the Seniors Housing and Health Care Facilities Commission, Washington, D.C., 2002. [http://govinfo.library.unt.edu/seniorscommission/pages/final\\_report/programInformation.html](http://govinfo.library.unt.edu/seniorscommission/pages/final_report/programInformation.html).
26. American Association of Homes and Services for the Aging, "Section-by-Section of Section 202 Reform Bill, S. 118: Section 202 Supportive Housing for the Elderly Act of 2009", 2009, <http://www.aahsa.org/article.aspx?id=6562>
27. Center on Budget and Policy Priorities, "Preserving Safe, High Quality Public Housing Should be a Priority of Federal Housing Policy", 2008.
28. Commission on Affordable Housing and Health Facility Needs for Seniors in the 21st Century, *Final Report to Congress* 2002.
29. Center on Budget and Policy Priorities, "Decade of Neglect has Weakened Federal Low-Income Housing Programs: New Resources Required to Meet Growing Needs," 2009, <http://www.cbpp.org/cms/index.cfm?fa=view&cid=2691>.
30. Housing Assistance Council, *Section 515 Rural Rental Housing: An Asset for Rural America*, 2002.
31. Strauss, L., "Section 515 Rural Rental Housing," *National Low Income Housing Coalition*, 2009, [http://www.nlihc.org/detail/article.cfm?article\\_id=6077&cid=23](http://www.nlihc.org/detail/article.cfm?article_id=6077&cid=23).
32. 700,000 units from CBPP estimate of units to get to 1999 deficiency and 822,000 units based on the number of current units in the programs outlined as percent of elderly households. Those households served in these programs represent 5 percent of all elderly households. If you assume 5 percent onto the 2020 projection, you get 2.72 million units, 822,000 over the current number.

**THE NATIONAL ALLIANCE TO END HOMELESSNESS** is a non-partisan, mission-driven organization committed to preventing and ending homelessness in the United States. The Alliance is a leading voice on the issue of homelessness. The Alliance analyzes policy and develops pragmatic, cost-effective policy solutions. The Alliance works collaboratively with the public, private, and nonprofit sectors to build state and local capacity, leading to stronger programs and policies that help communities achieve their goal of ending homelessness. We provide data and research to policymakers and elected officials in order to inform policy debates and educate the public and opinion leaders nationwide.

**THE HOMELESSNESS RESEARCH INSTITUTE**, the research and education arm of the National Alliance to End Homelessness, works to end homelessness by building and disseminating knowledge that drives policy change. The goals of the Institute are to build the intellectual capital around solutions to homelessness; to advance data and research to ensure that policymakers, practitioners, and the caring public have the best information about trends in homelessness and emerging solutions; and to engage the media to ensure intelligent reporting on the issue of homelessness.



Incidence The elderly population has historically been underrepresented among the homeless population. The limited national homelessness data that have been collected over the past two decades are consistent in revealing that homelessness is much more prevalent among younger adults than among older adults and the elderly. A 1996 national study by the Urban Institute found that, while those over age 55 represented 28 percent of the general adult population, they made up only 8 percent of the homeless population.<sup>1</sup> This underrepresentation is also reflected in HUD's 2008 annual homelessness data... Homelessness and poverty are interrelated.<sup>[1]</sup> There is no methodological consensus on counting the homeless and identifying their needs; therefore in most cities only estimated homeless populations are known.<sup>[7]</sup> Part of a series on. Living spaces. Main. 8.1 Demographics. 8.2 Statistics for developed countries. 8.3 Developing and undeveloped countries. In its Recommendations for the Censuses of Population and Housing, the CES identifies homeless people under two broad groups: (a) Primary homelessness (or rooflessness). This category includes persons living in the streets without a shelter that would fall within the scope of living quarters; (b) Secondary homelessness. Demographics of Homelessness Series: The Rising Elderly Population. January 2010. M. William Sermons. Meghan Henry. Read more. Article. Gender Differences in Older Homeless Adults: Findings in a Homeless Sample from Little Rock. Demographics of Homelessness Series: The Rising Elderly Population. Washington, D.C.: Homelessness Research Institute; 2010. Pathways into Elder Homelessness. Although a number of safety net programs exist for the elderly, those between ages 50 and 64 often fall through the cracks despite having similar physical health to those much older due to daily stress, poor nutrition, and living. 1. Aging and Housing Instability: Homelessness among Older and Elderly Adults. 3 M William Sermons and Meghan Henry, Homelessness Research Institute, The Demographics of Homelessness Series: The Rising Elderly Population, (April 2010), available at, [http://www.endhomelessness.org/files/2698\\_file\\_Aging\\_Report.pdf](http://www.endhomelessness.org/files/2698_file_Aging_Report.pdf). 4 The Elder Economic Security Index, average housing expenses for a renter in a one bedroom apartment in California is \$882, <http://www.basiceconomicsecurity.org/EI/location.aspx>. Special Challenges of the Aging Homeless Population. Older adults struggling with homelessness face a unique set of challenges. Premature Aging Homelessness can age a person prematurely and lead to life expectancies that can be years lower.