Feature: The Challenge of Responding to Elderly Homelessness

Introduction: Homelessness is an Ageing Policy Issue

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Older people have historically not been a focus in homelessness research and policy. However, as a result of a growing awareness of the ageing of the population, the pioneering work of organisations and research providing fresh understanding, there is an increased recognition of the issues.[1] A vital task has been to highlight the distinctive nature of older people's homelessness and show how service responses need to be shaped by the current needs and the life history of the person in housing crisis.[2]

This paper aims to provide a précis of key issues that need to underpin Australia's response to older people's homelessness. First, is a brief review of research showing distinctive pathways into homelessness for older Australians.[3] Second, services and how they engage with older people and affordable appropriate housing within the context of addressing homelessness is discussed. The conclusion outlines that a range of housing and support options is important to respect the needs, preferences and living arrangements of older Australians in housing crisis. As such, an effective response rests on the integration of housing, homelessness and aged care sectors.

Pathways into Homelessness

International evidence consistently demonstrates that the experiences of older homeless people are diverse and that homelessness risk accumulates over time.[4] Research undertaken in Australia and internationally has consistently shown there are distinct pathways into later life homelessness.[5] Recent research utilising the client records of 561 older people in housing crisis around Australia assisted by Assistance with Care and Housing for the Aged (ACHA), found 69 per cent

of the sample were identified as first-time homeless; 23 per cent as long-term homeless; and nine per cent as transients.[6]

1. The first-time homeless had a conventional housing history. Most were private renters whose housing was at risk due to unaffordable rents, eviction, accessibility problems and family problems (carer stress, overcrowding, breakdown in family relationships, elder abuse). This group largely had long-term stability in work and housing.

2. The long-term homeless had experienced iterative homelessness which continued into later life. This group of people often has complex needs often associated with substance misuse, and poor physical and mental health.

3. Transients including itinerant workers and people who had lived abroad for long periods. This transient lifestyle continued in older age or resulted in housing insecurity.

Understanding the distinctive nature of older people's homelessness has implications for service and housing responses. Arguably Australia's response to older people's homelessness stands apart from other countries.[7] In part this is due to evidence that more generous welfare systems may be more likely to protect citizens from entering homelessness and consequently older people's homelessness is not presenting as a social problem.[8]

Service Responses and Housing

Paramount to the consideration of service responses and models of housing is the understanding that older people experiencing

homelessness have led diverse lives. It is also important to recognise the support needs related to ageing, frailty, culture and gender. Firstly, engaging with older people in housing crisis is discussed, followed by models of housing.

Engaging with Older People in Housing Crisis

People experiencing homelessness for the first time in later life have limited experience with welfare agencies. They view their circumstances as a housing difficulty, not homelessness and are unlikely to access homelessness services.[9] On the other hand, older people (predominately men) who have lived in marginal and crisis accommodation may have long engaged with welfare agencies. A useful way of thinking of services is describing them as generic or specialist in relation to older people. Arguably each service type has historically been underpinned by different priorities.

Older people tend to under-utilise the Specialist Homelessness Services, (SHS)[10] with people aged 55 and over constituting around six per cent of clients. As a generalist program providing crisis and temporary accommodation and support, SHS do not target older people. Further, older people are unaware of SHS, unwilling to use them, and or unable to access them.[11] Older people are in housing crisis, and SHS's are not in a position to provide assistance with long-term housing. For example, domestic violence remains the main reason older women seek assistance from SHS.[12] SHS have played an important role in supporting homeless women. However, older women without dependent children are precluded from utilising many crisis and transitional housing options as families are a priority. Further, older women

report violence and intimidation within the homelessness service systems.[13]

Assertive outreach within welfare agencies and hospital emergency departments purposively engage vulnerable older people. Workers over time build a relationship with an older client who is living in a boarding house or sleeping rough and presents as wary and isolated so they can assist clients with supports when needed.[14] This sustained relationship is paramount in assisting older people with complex health needs (in some cases alongside impaired cognition).

ACHA is the main service for older people in housing crisis. Underpinning this program of 58 agencies is recognition that older people are at risk of premature entry to aged care if unable to access appropriate housing. As a linking agency with a holistic focus, ACHA assists in finding housing, advice on housing applications, advocacy to landlords, and facilitating access to legal, financial, welfare and community aged care services.[15] ACHA remains a small program with limited coverage across Australia but stands apart internationally as an appropriate program design for assisting older people with holistic, person-centred and flexible attributes.[16] This program recognises specialist skills are needed in assisting older people particularly those with care and support needs.[17] This skill base continues to bridge aged care and housing sector practice. ACHA service providers identify that with provision of affordable housing, the majority of older people could be successfully assisted.

Importantly, rapid rehousing is supported in Australian and the United Kingdom (UK) research with the finding that older people settle well often without the need for ongoing support if they are rehoused in a timely manner.[18]

Other specialised assistance for older people has been developed in Australia in response to growing numbers of older people presenting in housing crisis. Victoria's Home at Last offers advocacy, coordination of service provision, timeliness of assistance, emotional support and a focus on tangible housing and service outcomes. Importantly they run a state-wide gateway. Their person-centred approach

reduces the abject stress associated with the risk of homelessness.

Australia has effective programs and arguably flagship agencies that engage and assist older people in housing crisis. However, they remain underdeveloped with few agencies and many older people not accessing assistance.

Models of Housing

A number of factors inform how we think about housing for older people.

First, home and place are critical determinants of wellbeing for older people and represents an effective and cost efficient use of health care services.[19] This underpins advocating the retaining of housing, or a quick return to housing for older people.[20]

Second, secure appropriate housing is the platform for the effective conduct of tailored home support central to Australian's aged care policy.[21]

Third, the appropriateness of permanent rather than temporary housing is paramount given our understanding that older Australians at risk of homelessness are largely subject to eviction, unable to afford market rates of rent, and face accessibility concerns.[22] With appropriate housing, this group of people will remain largely independent.

Fourth, older people with substantive health and cognitive concerns can also be housed with intensive support packages in the community whilst some may be best suited to residential aged care (see Wintringham).

Yet in Australia both seniors and homelessness sectors are limited by assumptions on older people's needs and appropriate styles of accommodation. Specifically, constructs exist on the appropriate design for senior's housing on one hand, and for formerly homeless people on the other. Given the evidence that older people experiencing homelessness in Australia are largely independent, specialised housing for the homeless does not appear warranted.

There are risks that the legacy of specialised accommodation associated with the homelessness

sector, transitional and shared accommodation is central to policy and service responses without considering mainstream forms of housing.[23] The following discussion considers contemporary housing models for older people.

Retirements villages are a dominant form of seniors housing within Australia. While most of the Australian retirement village sector is not affordable housing there are rental retirement villages managed by the not for profit sector (ECH Inc., South Australia; Harmony, Victoria are examples). There are also villages that include accommodation for former homeless people who are independent but have alcohol and drug addiction concerns[24] (see Wintringham).

Retirement villages offering affordable seniors housing provided by the not-for-profit sector in Australia is seen as a different approach from assisting older people who are homeless or at risk of homelessness. However, they provide affordable accessible housing in communities close to amenities suitable for financially disadvantaged older people. There remains a disconnect within the sector that low income older people with few resources are at risk of homelessness and part of policy and program discussions about homelessness.[25]

This may be due to a lack of recognition of the conventional housing history of the large majority of older people in housing crisis.

Contemporary forms of high density housing in Australia incorporate accessible design alongside community integration. This form of social housing is an alternative to marginal housing such as inner city 'hotels' and rooming houses. High density housing, consisting of studio or one bedroom apartments is the predominant form of housing in the United States (US) and the UK for older people with a history of homelessness.

Australian public housing developments specifically for low income older people offer exemplars of high density housing designed to assist residents to live independently with socially connected lives (such as Smart Street, Fairfield). This form of housing is an appropriate model —

affordable, accessible, with access to community services — for independent older people who have experienced homelessness.

There are examples in Australia where older people with complex needs are housed in a number of public housing estates (such as Older Person's High Rise Support Program). On site case managers ensure isolated and vulnerable tenants are linked to supports and services. Many of the tenants live with mental illness, drug or alcohol dependence and acquired brain injury. This program offers intensive support to enable vulnerable older people to continue living in public housing.

A wide range of housing fits with the descriptor of shared accommodation. Quality boarding houses managed by the community housing sector in the inner suburbs of Melbourne and Sydney largely accommodate older men although there are new initiatives for older women.

There has been a range of seniors shared housing such as co-housing and Abbeyfield that have operated successfully in Europe but with less success in the US, Canada and Australia. In Australia, there are number of examples of shared housing for older women; some highly successful and yet other examples have had limited take up. It is imperative there is an understanding of the preferences of future tenants.

Two contrasting examples were evident in a recent study.[26] The first model was affordable housing for older women which operated like a share house for five older women. It had limited take up by women. The second example of a shared house for elderly Indigenous women managed by a caretaker is an exemplar. This culturally appropriate form of housing is in contrast to the overcrowding and difficulties experienced by older indigenous people in some communities where overcrowding and humbugging can be an issue.[27]

Residential aged care facilities are also important for older people. Important steps have been made to address the historical failure of Australia to engage with the social problem of older people experiencing homelessness.[28] In recent years homeless older Australians have been included as a *special needs* group under the *Aged Care Act 1997* thereby facilitating access to residential care. Wintringham, St Bartholomew's, Mission Australia have facilities for older people with complex health needs. However, this program remains underdeveloped.

Conclusion

Addressing older people's homelessness requires long-term policies to prevent people from arriving in later life without secure income and housing; an expansion of housing and care services for older people; and outreach and gateway services to assist older people to deal with housing crises and navigate through service systems. These challenges need to be met against the backdrop of a rapidly ageing population. Without secure housing Australia's strong emphasis on community aged care and homelessness prevention is comprised. Housing is an aged care issue.

Endnotes

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