



January 30, 2020

Mr. Rigo Saborio
President and CEO
St. Barnabas Senior Services
675 South Carondelet Street
Los Angeles, CA 90057

Dear Mr. Saborio,

We are writing to you—a member of the California *Master Plan for Aging Stakeholder Advisory Committee*—to ask that you consider the following information and recommendation as you provide input to the Administration on the development of the *Master Plan*.

The Corporation for Supportive Housing (CSH), Los Angeles Aging Advocacy Coalition (LAAAC), and Shelter Partnership are concerned about the increasing numbers of older adults experiencing homelessness. We are working collaboratively to address the issue in Los Angeles. As a Los Angeleno and leader in the older adult services sector, we are sure that you share our concerns.

The Los Angeles Homeless Services Authority (LAHSA) reports that according to the 2019 Greater Los Angeles Homeless Count there are 13,606 adults age 55 and older experiencing homelessness in the Los Angeles Continuum of Care.¹ This older adult age group makes up 23 percent of the homeless population in Los Angeles County and is expected to grow rapidly over the next decade. Older adult homelessness in Los Angeles reflects a problem facing California as a whole, where more than one third of the State's homeless population of 151,280² is estimated to be age 51 or older.³

Experiencing homelessness puts older adults at greater risk of poor health outcomes and more susceptible to geriatric conditions, falls, and depression. Homelessness also reduces life expectancy and increases mental health and substance abuse challenges.⁴ Moreover, as individuals experiencing homelessness age, they are likely to incur increasingly greater health care costs from hospitalization and nursing home placements.⁵ Research has shown that permanent supportive housing, which combines long-term, affordable, and sustainable housing with support services, effectively reduces homelessness. For older adults, permanent supportive housing combined with specialized older adult services such as

¹2019 Greater Los Angeles Homeless Count—Aging Population—55 and Over, Los Angeles Continuum of Care. Retrieved from <https://www.lahsa.org/documents?id=4017-hc2019-aging-population-data-summary>

² Newman, Katelyn (2019). "Homeless Spike in California Causes National Rise," *US News and World Report*. Retrieved from <https://www.usnews.com/news/best-states/articles/2019-12-26/homelessness-spike-in-california-causes-national-rise-for-third-year-in-a-row>

³ 2017 AHAR: Part 2 Estimates of Homelessness in the United States, Section 2, published October 2018, page 2-8 Retrieved from <https://files.hudexchange.info/resources/documents/2017-AHAR-Part-2-Section-2.pdf>

⁴ Homeless Policy Research Institute (2019). Older Adults Experiencing Homelessness. Retrieved from <https://socialinnovation.usc.edu/wp-content/uploads/2019/08/Older-Adults-Literature-Review-Final.pdf>

⁵ Culhane, D., Metraux, S., & Kuhn, R. (2018). A Data-based Re-design of Housing Supports and Services for Aging Adults Who Experience Homelessness. Retrieved from <https://www.aisp.upenn.edu/wp-content/uploads/2019/01/LA-County-Report.pdf>

geriatric health care, in-home support services, transportation, mobility assistance, and age-appropriate community activities and socialization can work particularly well.⁶

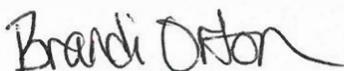
Studies further reveal that helping individuals experiencing homelessness move into housing and then providing intensive case management using evidence-based models of engagement such as motivational interviewing and trauma-informed care, allows for meaningful access to care and improved health outcomes, while also decreasing costs for acute hospitalization⁷ and nursing home care.⁸ Three services are key to helping older adults at risk of or experiencing homelessness access permanent supportive housing with services:

- **Housing navigation** to meet people on the streets, form trusting relationships, engage them in participating in services, connect to local homeless systems, and assist in completing paperwork needed to access housing.
- **Tenancy transition services** to help people move into and stabilize in housing.
- **Tenancy sustaining services**, intensive case management promoting housing and health stability.

We ask that the Stakeholder Advisory Committee incorporate a recommendation for housing **navigation, tenancy transition services, and tenancy sustaining services** into the California *Master Plan for Aging*. All older adults deserve the right to housing stability. In making this recommendation you will help to ensure that fewer older adults fall into homelessness as more stay housed. Ultimately, you will positively impact the lives of thousands of older adults throughout California.

Thank you for considering this request. If you have questions or need additional information, please contact Gretchen Brickson via email at gretchen.brickson@csh.org or by phone at (646) 983-5156.

Sincerely,



Brandi Orton
Managing Director
L.A. Aging Advocacy Coalition



Ruth Schwartz
Executive Director
Shelter Partnership



Sharon Rapport
Director for CA Policy
Corporation for Supportive Housing

Cc: California *Master Plan for Aging* Stakeholder Advisory Committee Members

⁶ Henwood, B. F., Katz, M. L., & Gilmer, T. P. (2014). Aging in place within permanent supportive housing. *International Journal of Geriatric Psychiatry*, 30(1), 80–87. <https://doi.org/10.1002/gps.4120>

⁷ Linkins, supra. The calculated costs avoided are based on average reductions in emergency department (ED) visits and inpatient days for Medi-Cal patients at rates the Office of Statewide Health Planning and Development (OSHPD) reported as costs for hospitals connected to frequent user programs. Rates averaged \$305 per ED visit and \$2,161 per inpatient day. OSHPD 2006 data. Retrieved at www.OSHPD.gov.

⁸ David Buchanan, Romina Kee, Lisa Sadowski, et. al., “Effect of a Housing & Case Management Program on Emergency Department visits and Hospitalizations Among Chronically Ill Homeless Adults: A Randomized Controlled Trial.” *American Journal Public Health*. (May 2009) 301;17.