

OLD AND HOMELESS,  
A SECOND LOOK AT  
TWO SURVEYS

by

BRIAN T. BIGELOW  
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## **ABSTRACT**

This study investigated the comparison between the Rich et al (1995) study done in Tampa Bay, Fl and Burt et al (2001) national study. Rich et al conducted a study of elder homeless Americans and later, Burt et al conducted a replication study on a national level using a similar study.

My secondary analysis of the data covered four aspects: Demographics between the two groups of respondents; current housing issues; current alcohol, drug and mental health issues; and finally homeless services being used by both homeless, formally homeless and never homeless respondents. This was all compared to those that were 55 and older and those that were under 55.

Recommendations were made concerning improvement of senior's health services by the government, and the need for more research into determining the overall seemingly underrepresented elderly homeless population.

I would like to dedicate this thesis to my parents, who have always believed that I could be successful in earning my Masters degree.

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## CHAPTER ONE: INTRODUCTION

In 1973, Howard Bahr and Theodore Caplow published what is now a well-known ethnography of homeless men in New York City's Bowery. The authors conducted fieldwork in the late 1960s on homeless men and reported the findings in a book entitled *Old Men, Drunk and Sober* (Bahr and Caplow 1973).

The title of the book gives clues to what 1960s-era homeless people were like; the first was that the homeless population was largely made up of men (Bahr and Caplow 1973). In a survey by Bogue (1963) in Chicago in the 1950s, women accounted for no more than 3% of the homeless population. Now in the 21<sup>st</sup> century, men still make up the largest portion of the homeless, but the population of homeless women is on the rise; in most studies, they comprise a quarter to a third of the total.

The second clue to the demographics of the homeless population is that most of the homeless were alcoholics. The "Drunk and Sober" part of the title was a phrase used by the authors to convey that homeless men were either active alcoholics or in recovery. Today, drug addiction, mental illness, alcoholism, and often some combination of the three are experienced by most of the homeless population (Baum and Burnes 1993).

Finally, Bahr and Caplow's (1973) title suggests that the homeless population of that era was disproportionately elderly, and this has changed dramatically in the years since. According to Wright and his colleagues, "the most surprising demographic fact about the homeless of today is that they are relatively young; the average age of homeless adults falls somewhere in the low to middle thirties in practically all

studies"(1998 16-17). In fact, if anything, the elderly homeless are significantly *under-represented* among contemporary homeless populations. Most studies show the elderly to comprise less than 5% of the total homeless population, while the elderly (over 65) make up just over 12% of the total population of the United States. Thus, while the homeless of today are still mostly men (Hope and Young 1986) and still have alcohol or substance abuse problems (Wright, Rubin and Devine 1998), they are not older people; in fact, they are most likely to be young (Crane 1999).

Most social observers of the contemporary homeless scene have noted that the numbers of homeless people on the streets of our cities exploded in the 1980s and have continued to increase since (Crane 1999; Wright, Rubin and Devine 1998). With the explosion in the homeless population there has been any number of conferences (Daly 1992; Drake 1989) and likewise, an outpouring of research, but one is still hard-pressed to come up with more than a handful of books and articles dealing specifically with the elderly homeless (Crane 1999).

Just as the number of homeless increased in the 1980s, so too did the number of books on the topic (Paschke and Volpendesta 1991; Rossi, 1989; Wright 1997; Wright, Rubin and Devine 1998). A search for non-academic books on Amazon.com on July 8, 2003 turned up 992 books on the homeless, and scholarly articles have also increased (Hoch and Slayton 1989; Kleinig 1993; McChesney 1990; Taueber and Seigal 1991). And yet, despite all the attention to the problem, studies specifically of the elderly homeless are rare. Despite this vast outpouring of research articles on the homeless, when people look back on the early years of the 21<sup>st</sup> century and ask what is currently known about

the elderly homeless, the answer is "surprisingly little". This is unfortunate for two reasons: First, the burdens of advanced age being added to the obvious burdens of homelessness must produce a subgroup within the homeless population with particularly acute and unmet needs that deserve attention and analysis. Second, as the average age of the United States' population continues to increase, one can anticipate a growth in the elderly homeless population over the next few decades.

In the first chapter, I layout the background of homeless people in general, and also a more concentrated section on the topic of this paper: Older homeless people. I also review the pertinent literature on the topic.

In the second chapter, I introduce the Tampa Bay study by Rich et al (1995), which is the basis for my thesis. Next, I introduce Burt et al (2001), a study known as the National Survey of Homeless Assistance Providers and Clients (NSHAPC), that expanded on the findings of Rich et al (1995) and whose survey data are analyzed here. The focus of my research is to compare the two studies and report on similarities and differences. I also discuss the methods that I use to compare the two sets of data. In the third chapter, I present the results of my analysis. This chapter has four parts. The first examines at the demographics of the homeless, the second examines housing issues, the third part examines health-related issues and the fourth examines utilization of homeless services.

In the fourth chapter, I discuss my findings, report on issues related to the data, and present conclusions. My conclusions examine future ways of looking at the homeless problems as well as policy changes that I feel might be conducive to better resource management.

In appendix A, I have put the tables from the Rich et al (1995) data dealing with the demographics of those who were interviewed. In appendix B, I have presented the tables used in the demographics in the Burt et al (2001) data, and appendix C has the results of the comparison between the two surveys.

## **Growing Old (er)**

In looking at how the elderly homeless might be different from other homeless, it is important to point out that all older people will have age related problems regardless if they are homeless or not. While some might have dementias, these are rare even late in life, but are still most often found in the elderly (Gatz, Kasl-Godby and Karel 1996). Brain functioning slows down later in life, often called the Classic Aging Pattern (Moody 1994). The pattern is an age related problem that shows a steady decline of verbal and performance intelligence among people over 60.

While long-term memory is not affected by age in most people (Quadagno 1999), it will certainly be affected by long-term drug or alcohol use. Short-term memory will be able to be used by an older person, but it will take them longer to recall something than a younger person (Quadagno 1999).

According to research, the likelihood of a person qualifying for a psychiatric diagnosis of depression declines with age (Skodel and Spitzer 1983; Gatz and Hurwicz 1990; Blazer et al 1991), but this could be caused by how depression is defined (Quadagno 1999). "Current psychiatric diagnoses of major clinical depression exclude

much of the sadness and malaise caused by illness, grief, poverty, restricted activity, and physical disability" (Quadagno 1999; p 156). Chronic conditions, conditions that do not have a cure (McLeroy and Crump 1994), are more likely to be experienced later in life (Quadagno 1999). Poor health becomes associated with older age as chronic conditions increase (Quadagno 1999). Other factors are associated with a person's socioeconomic status (SES). People who are well off are often healthier in old age, but a homeless person is not likely to have a high SES, and is therefore more likely to be in poor health (Rogers, Rogers and Belanger 1992).

The point that I am making in these preceding paragraphs is that older homeless persons can expect to have all the ailments of the physical body and mind that come with aging. When housing issues are factored in, we must keep both issues in mind when analyzing the situation of the elderly homeless.

## CHAPTER TWO: LITERATURE REVIEW

I begin with a review of the most current work on elderly homeless people in the United States, focusing on Rich et al. (1995) as augmented with other literature that has appeared after 1995. My research is based on a secondary analysis of the NSHAPC data, so I focus the literature review on the issues and findings that the NSHAPC allows me to replicate. The main focus is on what areas of the Rich et al's (1995) survey of 103 elderly homeless people in Tampa, Florida, were replicated in the newer and more detailed NSHAPC study assembled by Burt et al (2001).

I searched online at Cambridge Scientific Abstracts and "Psych. Info." For published articles that dealt directly with the elderly homeless by using key words like "elderly homeless", homelessness, age, and homeless. While there were 614 "hits", only four dealt with the subject of the elderly homeless and only one since Burt et al's (2001) study national study on the homeless. Three of the four articles were included in this secondary analysis' literature review section, and the fourth was an international survey and therefore not included.

So far, only one book has been published with a survey about the elderly homeless. In 1995, *Old and Homeless- Double Jeopardy: an Overview of Current Practice and Policies*, was published by Diane Wiatt Rich, Thomas A Rich, and Larry C. Mullins. One can also find a handful of journal articles dealing with this subgroup. This thesis is an effort to add to the knowledge of older homeless people in the 21<sup>st</sup> century. When a large, national survey on the homeless was made available to

researchers for secondary analysis, the principal investigator Dr. Martha Burt, let it be known in a personal communication that there had not been an attempt by any scholar to examine the elderly homeless in this data file. The survey is the National Survey of Homeless Assistance Providers and Clients (NSHAPC), conducted by Martha Burt and associates in 1996, as reported in her book, *Helping America's Homeless* (2001). The goal of this thesis is to examine this data to increase our academic knowledge about the elderly homeless and, where possible, to extend and update findings from Rich et al (1995) and other studies. One of the issues in looking at the elderly homeless is their under representation in the amount of homeless people counted.

According to Wright, Rubin and Devine (1998), there are two hypotheses that could explain this deficit. The first is that when people turn 65, they are now eligible for a range of benefits: subsidized elderly housing, Medicare and Social Security benefits. The second hypothesis is that people who are older are less likely to survive to age 65; indeed, most homeless men appear to die in their fifties (Wright and Weber 1987; Hibbs, Benner, Klugman, Spencer, Macchia, Mellinger, and Fife (1994). The age that a homeless person lives to is just one of the many differences that separate homeless people into different groups, to look at the problems of older homeless and not take into consideration their unique issues is to miss important facts.

As I have written about earlier, homeless people cannot just be easily put into one convenient category. While only about 25% to 33% of the homeless are chronically homeless, most of the people that are looked at as homeless are episodically homeless (Wright and Weber 1987, Sosin, Piliavin and Westerfelt 1990). These people are homeless for some time, then have periods of relative stability.

While large numbers of children were born to middle class families in the post World War II era (baby boomers), large numbers of children were also born to poor families as well. While successful boomers would often go on to college, college was not in the cards for the poor baby boomer children (Wright, Rubin and Devine 1998). Therefore, when we look at a homeless member of the baby boomer cohort, the reasons that person is homeless is going to depend on which class they were raised in, and these reasons mean that just because two people are baby boomers and homeless does not mean that their needs will be the same (Wright, Rubin and Devine 1998).

While even the literature recognizes that the elderly is underrepresented in modern counts of homeless people (Wright, Rubin and Devine 1998), the literature also points out that the elderly homeless have unique issues (Wright and Weber 1987; Hibbs et al (1994). It is this under representation that Rich et al (1995) wanted to study and to look at some of unique issues. Therefore, the best place to look about the demographics and special needs of elderly homeless is in the Rich et al (1995) Tampa Bay study.



## CHAPTER THREE: THE TAMPA BAY STUDY

Loosely, this thesis is construed to be a replication and extension of the Rich et al survey of elderly homeless people in Tampa. With the cooperation of the Hillsborough and Pinellas Counties homeless coalitions, a survey was conducted in those counties (Tampa Bay, FL metro area) to better determine the needs of the elderly homeless population. One hundred three adults over the age of 50 were interviewed, with about half of the respondents living in shelters and the other half living in areas not specifically designed for habitation: woods and parks, vehicles, abandoned buildings and other areas.

The 103 older homeless adults (OHA) were identified and interviewed using the homeless services networks in the Tampa Bay area. Clinicians administered the field survey from the Mature Adult Counseling Center of the Florida Mental Health Institute, University of South Florida. The survey contained background information on reasons for being homeless, attitudes about being homeless, mental health, and other aspects of homelessness. The next few paragraphs discuss selected findings from the Rich et al (1995) survey.

As shown in table A1 fifteen percent reported working in a labor pool and about 7% report employment assistance, but most of these elderly homeless people did not have jobs. Most of the services requested are for survival assistance and are not rehabilitative in emphasis (Table A1). Interestingly, nearly 90% of the elderly homeless reported receiving help with meals, but just 1% reported receiving help with their

permanent housing. This illustrates the tendency of homeless services to emphasize amelioration of conditions over permanent solutions.

When Rich et al (1995) asked about the reasons for being homeless, responses indicated that problems with rent and rent deposits were the most important, followed by alcohol abuse and loss of job (Table A2). Commonly cited "reasons for being homeless" like drugs, alcohol abuse or mental illnesses were cited only by small percentages. Less than two in five (37.9%) specifically mentioned alcohol abuse as a reason for their homelessness and just fewer than five percent (4.9%) mentioned mental illness (Rich et al 1995). In contrast, economic factors strictly dominated the discussion: three quarters (75.7%) said they were homeless because they could not afford to pay rent and two thirds (68.0%) likewise cited their inability to pay a security deposit (Rich et al 1995). Other economic factors that figured prominently in their responses included loss of job (35.0%), being "sick and unable to work" (28.2%) (Rich et al 1995).

Being homeless is closely related to feeling isolated and alone and being estranged from one's family is often discussed as a principal reason why people are homeless. Over 60 percent of the sample reported that they do not have any close associates whether family or friends (Table A3). The 26 percent that said they had friends were referring mostly to "street friends" (p. 123, Rich et al 1995).

More than three quarters (77.5 percent) said there were not any advantages of being homeless (Table A4), but about 14% indicated that they liked the lack of responsibility and did see some other advantages with being on the street (Rich et al 1995).

Concerning sample demographics in tables A5 and A7, about 48% were aged 50-55, 25% were between the ages of 56-60, and most of the remainder were between 60 and 75 years old, with only 1% over 76. Most (85.4 percent) of the respondents were male and 69.9 percent were black (Rich et al 1995). The overall mean age was 57.5 years, the median was 56.0 years, and the mode was 54 years.

It is hard to know with what these findings should be compared. This particular project only surveyed elderly homeless people. The data set does not contain a comparable group of elderly non-homeless and because of the absence of a comparison standard, it is difficult to assess the significance of the results.

Burt's data offer the chance to compare Rich et al's (1995) research to a nationally representative study, the purpose of this thesis. So far as I am aware this paper will be the first to see if Rich et al's findings can be replicated in more representative national data.

## Data and Methods

My study extends what was done in Rich et al's study by using a nationally representative survey. It also tries to research some areas that Rich et al did not cover. The study is based on the National Survey of Homeless Assistance Providers and Clients (NSHAPC) conducted in 1996.

The NSHAPC covers the entire United States, looking at homelessness in the 1990s. It examines precursors to being homeless such as childhood experiences, prior homeless episodes, and adult behaviors that might lead to being homeless. The results are taken from 76 primary sampling areas. These 76 sampling areas included the 28 largest metropolitan statistical areas (MSAs) in the United States; 24 small and medium sized MSAs, selected at random to be representative of geographical regions (northeast, south, mid-west and west) and size; and 24 rural areas (groups of counties) selected at random from a sampling frame defined as "the catchment areas of Community Action Agencies, and representative of geographical regions" (Burt et al 2001). In New England, the actual areas sampled were parts of counties.

In their attempt to locate homeless people, Burt et al (2001 p.27) used, "in one sense, an old fashioned, cross-sectional, single point-in-time study". Burt et al (2001 p.27) reported that they "did everything possible to collect information that could be used to approximate longer time periods." The study began by identifying and collecting information about all the programs serving homeless people within each of the 76 sampling areas. Programs were defined as soup kitchens, homeless shelters, and other places whose main purpose was to help poor and homeless people.

The programs had to have an emphasis on serving the homeless, but did not have to serve the homeless exclusively. The programs had to offer direct services and be physically located within the boundaries of the sampling area (Burt et al 2001). In rural areas, an exception was made so that the programs did not have to have their emphasis on homeless people only. Sixteen types of homeless assistance programs were defined.

Census bureau interviewers were sent to each of the sampled programs to interview program clients. Great care was used to determine the actual housing status of those being interviewed. Respondents were asked to provide the researchers with their history that would allow them to be labeled as homeless. It asked them where they stayed: Vans and cars, hospitals, shelters, food kitchens and other places that were not meant for habitation so as to verify them as homeless. The authors warn, "estimates vary widely" (of the number of homeless persons) not only because the period of time looked at changes, but "even within time periods of the same length at different times of the year."

Data were obtained in three ways. First, telephone interviews were conducted with representatives of 6,307 service locations offering 11,983 homeless assistance programs. Second, surveys were mailed and received from 5694 of these programs. These two methods yielded information about service providers and comprise what is called the provider file. Third, interviews were conducted with 4,207 clients. This study deals only with the results from the client survey.

For the purpose of this study, “older homeless adults” are defined as those older than 55, which is also the definition used in Rich et al (1995). Defining the elderly homeless as those aged 55 and older is appropriate because being out on the streets causes a person to age prematurely and is also necessary to have an adequate sample size. Table B1 lists the total sample by age and sex.

According to Table B2, there are the total numbers of people surveyed by age, gender, and homelessness status. All together, there are 252 currently homeless people over age 55 in the data for me to analyze, more than twice the number of elderly homeless in the Tampa Bay survey.

## CHAPTER FOUR: RESULTS

This chapter has four subsections: the first portion is the demographics, second is the respondents' current housing status, third are the issues facing the respondents that might have contributed to their homelessness, and the fourth is the respondents' use of homeless shelter services regardless of homeless status. All of the tables in subchapter 1 are comparable to those found in Rich et al (1995).

### Demographics

Among the currently homeless people in the data (N = 2,953), 68% are men and 32% are women (Table B1). Altogether, there are 4,180 people in the table: 2953 currently homeless people, 685 formerly homeless people, and 542 never-homeless people. Of all the people represented in the table (N = 4,180), 71% are currently homeless. Focusing on the never homeless in Table B2, 65% of the men (N = 229) and 65% of the women (N = 313) are under age 55. In the subsequent tables, both men and women are analyzed together.

Substantively, it is very interesting that the elderly proportion among the never homeless is HIGHER than in the other two groups. Of the total never-homeless (N = 542), over 23% are 65 or older, whereas among the currently homeless (N = 2,953), under 2% are 65 or older. This suggests that many elderly non-homeless people live close enough to the economic "edge" that homeless services must be used to stretch otherwise tight economic budgets, this is a phenomenon worth further study. This

could be caused by the fact that older people are having a tight budget and need help to get through their financial short comings by using services set up for homeless people.

What do other demographic data from the Burt survey tell us about the modern elderly homeless? Quite different from the image of Bahr and Caplow the elderly homeless do not seem to fit into any one category, instead they have many different backgrounds.

For example, the results show that 50% (N=3474) of the under 55 population were never married as compared to 19.0% (N=536) for the 55 and older group so there is a big difference in marital rates for the two groups (Table C-1). Within younger homeless people, less are likely to marry, but older homeless people who have married are likely to be estranged or widowed and will not have the marital relationship that could help weather a tough economic spell.

In Rich et al, there were almost 46% (N=103) of respondents that reported being divorced, while 33% (N=103) reported being divorced in Burt et al. There was also a higher percentage of respondents that reported never being married (28%) in Rich et al's study, instead of 19.0% reporting to never being married in Burt's data.

The results (Table C-2) also show large differences in the racial composition of the two groups. Among the younger homeless (N=1957), 47% were white, 44% black, and 9% were of other ethnicities, whereas among the elderly homeless (N=1685), 64% were white, 28% were black and the remainder (7%) were of other ethnicities. Thus, whites are noticeably over-represented among the older group.

There could be several reasons for these results. One possibility is that blacks have shorter life spans than whites (Eshleman and Cashion 1985) and might have a



lesser chance to survive until age 55. It is also possible that blacks have stronger social support networks at advanced ages, and therefore have a lesser chance of being homeless later in life. Nothing in the data allows me to choose between these or other possible explanations.

Concerning parental status (Table C-3) 63% of those under 55 (N=3436), reported having children, as opposed to 71% (N=528) of those 55 and older. There is also a difference in veteran's status (Table C-4). Just over 20% of those under 55 were veterans and about 32% of those 55 and older were veterans. This difference might reflect the differences in rates of service in various eras, and it might reflect that service benefits for more recent veterans are more generous than for older veterans, causing younger veterans to be less likely to be homeless.

In sum, important demographic differences between younger and older homeless people are revealed in the NSHAPC. Among the older homeless, the rates of marriage were higher, those who were veterans were more likely to be homeless, and were more likely to have children.

Within those people responding in table C5 to the survey question asking "Is this a transitional Shelter?" about 92% (N= 1068) of those under 55 and about 96% (N=310) over 55 answered no, with an overall response of 93% (N=1275) saying that they were not living in a situation that was a transitional shelter.

## **HOUSING**

This section deals with the housing situation of the NSHAPC respondents. These issues deal not only with where the respondent was living at the time of the survey, but also with where they had been living recently. When the respondents were asked (Table

6) who owned the place in which they were living, about 75% (N=568) of those over 55 said that they owned the place, while only 58% (N=221) of those under 55 said they owned their place of residence. Among those living "in someone else's place", 48% (N=317) of those 55 and older said that it was another relative's place, while 72% (N=47) of those under 55 said that it was another relatives place. From these findings, younger people were more likely to have closer ties with relatives than older people.

Table C7 reports further details about housing situations. When asked if their housing situation was stable, most (89.8%) of those 55 and older reported yes, compared to 75% of those under age 55. It is higher for older people, even though they have been shown to have less social networks than younger people (Eshleman and Cashion 1985). For those 55 and older, there were only 24% (N=246) that reported having help with their rent or mortgage, while 82% (N=650) of those under 55 reported having help with their rent or mortgage. The question as asked does not specify from whom the help is coming, so there is a possibility that those people over 55 could have been receiving pensions or Social Security and not looked at that as 'help'.

A hotel or motel was defined as a place where the respondent would stay with rooms that they would pay for. Hotels and motels are often used to house the homeless when shelters are overfilled. The tendency to report staying in a hotel or motel was about the same for both groups. Both groups were equally as likely to report having a housing voucher to offset the cost of housing, and there was not much difference in spending any recent time in prisons or jails. Further reports indicated there was not much difference between groups in which individuals slept in a vehicle.

Of those 55 and under, 6% (N=2506) stayed in an abandoned building while only about 3% (N=214) of those 55 and older reported staying in an abandoned building. The physical aspect of getting into and out of a building might be a hindrance for older people, or they might be trying to avoid a physical confrontation with others in that building. In Rich et al (1995), an 'abandoned building' was listed as a vacant building, and only about 2% (N=103) stayed there.

There is a common stereotype of the homeless person sleeping on park benches, in alleys and in cardboard boxes (Bahr and Caplow 1973). For the housing question, "outside location" was defined: as on the street, in a park, under a culvert, in a cardboard box, on a bench, in a campground, etc. There was not much difference between the two groups, meaning that as reported, the tendency to sleep outdoors does not depend on age.

Homeless people aged 55 and older were more likely to report that they had been on a lease, owned a home, or their name was on a lease 86% (N=213) than those under 55 78% (N=2496), but the difference is not large. This would make sense because the older a person is the more chances they would have had to be qualified to own, or have a rent or lease in their name.

Of those respondents that reported owning a house or having a lease for a room or apartment, of those over 55, only 42% (N=89) reported it being an apartment and about 32% said it was a house. This compares to those under 55, in which almost 34% (N=812) said they had owned a house and almost 48% (N=1147) reported that they had ever leased a room or apartment.

In table C11, when asked if anyone had lived with them (including children, youth or adults), people over 55 responded with 51% (N=212) saying that they were living alone, without a spouse or children. About 49% reported they had lived with others. This compared with those under 55, when 33% (N=2405) said that they had lived alone and 67% (N=2405) reported that they had lived with others.

The 55 and older group was much more likely to have lived with others than the under 55 group. The 55 and over group is more likely to have had family or the chance to make friends in their lives than the under 55 group. This does run against research that shows that older people in general are less likely to have social support networks to rely on (Eshleman and Cashion 1985).

Respondents were asked if they had spent any of the previous 30 days before living in a friend's apartment, room, or house. Among those 55 and older, only 2% (N=213) said that they had, compared to 32% of those under 55 (N=2499), a very large difference. This finding, unlike the previous paragraph, is consistent with other published works showing that older people have fewer (or weaker) social networks.

Respondents were asked if they had been in the care of a mental institute for any part of the previous 30 days, those younger than 55 years old were slightly more likely to have been in a mental health institute than those 55 and older. The younger homeless were slightly more likely to report yes than the older homeless. This might be due to the younger homeless being more likely to have family members that involuntarily commit them than older people, who might not have any relatives left (at least none that care if appropriate mental health care is administered.)

## **Social Services**

Many homeless people depend on social services to survive. Do younger and older homeless people utilize services differently? Concerning food security respondents were more likely to report getting enough food if they were 55 and older than younger respondents. About 4.5% of respondents 55 and older reported not having enough food occasionally, versus 9.0% of those under age 55. The only study that I could find dealing with this issue of enough food for the elderly was a study done by the Economic Research Service (2002), titled Household Food Security in the United States. In that study, persons “older than 51 years old” as the standard and therefore direct comparisons were not possible.

The NSHAPC also asked the respondents if they had seen an outreach worker coming to them in an outdoor setting to offer a blanket, to see if they were okay, or to offer other help to them. About 8% (N=2505) of those respondents under 55 replied yes, they had been offered help, while those 55 and older reported yes 3% (N=213) of the time. Concerning utilization of “drop in” centers and food pantries, the rates were very similar between the two groups.

## **CHAPTER FIVE: CONCLUSION**

One issue that the authors did address was the inability of the NSHAPC to collect data on "street people", those that did not use shelters or other homeless facilities. The

other issue was the inability to collect data in communities with little or no homeless shelter programs (Burt et al 2001). There might be differences in homeless persons that use services compared to those that do not, and this issue was not accounted for in the two surveys by Rich and Burt.

Another issue that Rich et al (1995 p.4) dealt with was their assertion that "the numbers of homeless people are difficult to count and estimate" and "this is especially true for subgroups, such as older homeless". Burt's conclusion about counting the homeless is similar.

Comparing the two surveys was very difficult; even though Burt et al wrote that their survey was based on the Rich et al data, they did not always compare well. For example: It was tough to compare groups of Hispanics because the two surveys did not present the data in a way that could be easily compared. While Rich et al just asked if the respondent was Hispanic, Burt et al asked which group of Hispanics a person fit into: Cuban, Puerto Rican, etc.

This thesis had several intentions when it was first conceived: increase the published knowledge of the conditions of elder Americans; compare the two surveys on elderly homeless people by Rich et al (1995) and Burt et al (2001); and finally to look at the data that had been added to Burt et al's (2001) survey beyond where Rich et al had gone. With the many graphs that are in the three appendixes, I feel that I have displayed the data that was already collected in a much neater and more organized fashion than previously.

While my next job was to compare two surveys, the data in the two surveys are not easily compared. While Burt et al's survey seemed to be influenced by Rich et al,

the former did not ask all the same questions as the latter, making a direct comparison of findings very difficult. Many of the questions in Rich et al's book dealt with mental illnesses to include suicidal behavior (Rich et al 1995, p. 136), which Burt et al lacked.

Some things that were discovered in the Burt et al (2001) data could have a bearing on future policy making. One such example was the finding that elder persons made up a higher percentage of the people using homeless person's programs than did those under 55. This would leave much more in the way for the government to help out these people; while they are able to afford some sort of shelter- and therefore they are not homeless- their financial status is not good enough to cover buying other necessities like food.

When looking at the housing situation, people over 55 were more likely to have owned a house when they were younger when compared to those under 55. This may indicate that when these people are older, if they are now homeless, something is keeping them from being able to afford some type of shelter. This might be an age related expense, such as trying to keep up with medical bills or no longer having a spouse that takes care of them financially. This would bring up the idea that more affordable housing is needed.

Another finding was that those older than 55 were more likely to have been in the military than those under age 55. This not only highlights again the differences between the two age groups, but that it is not possible to just lump the two groups together when trying to look at their problems.

One area of future research could be to look at the difference in homeless rates for men and women under 55 and for those 55 and older. While the homeless are more likely to be men under 55, the rates are almost even at ages 70 and beyond.

While there is more information now available, my hope is that research will continue; regardless of the continued research however, without a firm policy to counteract the elderly homeless people's situation, the suffering will continue.



## **APPENDIX: A - THE BURT ET AL SURVEY**

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Table A1  
Services Received by Elderly Homeless (N=103)

Services	Percentage Receiving Services
Assistance with meals	89.3
Assistance with clothing	60.2
Assistance with food	32.0
Transitional housing	24.3
Emergency shelter	23.3
Emergency health care	15.5
Labor pool	14.6
Day shelter	12.6
Primary health care	10.7
Mental health counseling	10.7
Employment assistance	6.8
Assistance with transportation	6.8
Assistance with rent	2.9
Education/training	1.9
Childcare	1.0
Permanent housing	1.0
Assistance with utilities	0.0
Other assistance	3.9

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Source: Rich et al (1995)

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Table A2  
Reasons Given for Being Homeless (N=103)

Reasons	Percentage
Cannot afford rent	75.7
Cannot afford deposit	68.0
Alcohol abuse	37.9
Lost Job	35.0
Sick and unable to work	28.2
Left adult family	14.6
Newly released from jail/ Legal problems	8.7
Newly released from hospital	7.8
Divorce	7.8
Abandoned by spouse/family	6.8
Asked by family/friends to leave	6.8
Mental illness	4.9
Drug abuse	4.9
Prefers street life	3.9
Home foreclosed	2.9
Home condemned	2.9
Spouse abuse	1.9
Fire, Flood, etc.	1.0
Other	15.5

---

Source: Rich et al (1995)

Table A3  
Close Associates of the Elderly Homeless (N=103)

Associates	Percentage
None	62.1
Friends	26.2
Family	6.8
Family and friends	4.9

---

Source: Rich et al (1995)

Table A4  
Reported Advantages of Being Homeless (N=102)

Advantages	Percentage
None	77.5
No responsibility	13.7
Other advantages	8.8

---

Source: Rich et al (1995)

Table A5  
Reported Age of Respondents (N=103)

Age Range	Percentage
50 to 55	47.6
56 to 60	25.2
61 to 65	16.5
66 to 70	4.9
71 to 75	4.8
76 to 85	1.0

---

Source: Rich et al (1995)

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Table A6  
Reported Sex of Survey Respondents (N=103)

Sex	Percentage
Male	85.4
Female	14.6

---

Source: Rich et al (1995)

## **APPENDIX: B - THE BURT ET AL DEMOGRAPHICS**



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Table B1  
Reported Sex of Respondents in Burt et al

	Men	Women	Total
Under 55	85.8	87.1	86.3
55 – 64	9.6	6.3	8.4
65 +	3.4	6.6	5.3
N=	2630	1544	4180

---

Source: Burt et al (2001)

---

Table B2  
 Detailing the breakdown of Respondents with Regards to Being Homeless, Formerly Homeless, or Never Homeless.

	Homeless			Formerly Homeless			Not Homeless		
	Men	Women	Total	Men	Women	Total	Men	Women	Total
Under 55	89.5	95.6	91.5	79.1	83.7	81.0	64.6	64.5	64.5
55-64	8.3	3.2	6.7	13.2	11.3	12.4	14.4	10.9	12.4
65+	2.1	1.2	1.8	7.7	5.0	6.6	21.0	24.6	23.1
N=	2004	949	2953	403	282	685	229	313	542
Row %	67.8	32.2	100.0	58.8	41.2	100	42.3	57.7	100

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Source: Burt et al (2001)

## **APPENDIX: C - THE RESULTS**

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Table C1  
Marital Status At the Time of Reporting by Respondents

	Married Now	Widowed	Divorced	Separated	Never Married	N=
Under 55	10.2	2.6	22.8	13.5	50.6 = 100%	3474
55 and Older	12.3	24.8	33.4	9.7	19.0 = 100%	536
Rich et al	3.9	13.6	45.6	8.7	28.2 = 100%	103

---

Source: Rich et al (1995) and Burt et al (2001)

---

Table C2  
Ethnic Make-up of Survey Respondent

	White	Black	Native American	Other	Total	N=
Under 55	46.5	44.2	4.9	4.2	=100%	1957
55 and Older	64.2	28.5	3.0	4.3	=100%	1685
Rich et al	69.9	26.2	N/A	1.0	=100%	103

---

Source: Rich et al (1995) and Burt et al (2001)

---

Table C3  
Respondent's Child status

	Has Children	No Children	Don't Know	Total	N=
Under 55	62.7	37.1	0.1	=100%	3436
55 and Older	71.2	28.6	0.2	=100%	528

---

Source: Burt et al (2001)

---

Table C4  
Respondent's Reported Military Service History and Status

	On Active Duty	Not Currently Active	Reserves	Never in any Service	Don't Know	Total	N=
Under 55	0.4	18.2	0.8	80.6	0.0	=100%	3460
55 and Older	0.7	30.1	1.1	68.0	0.0	=100%	535

---

Source: Burt et al (2001)

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Table C5  
Respondent's Report If they Currently Live In A Transitional House for Homeless  
Persons?

	Yes	No	Total	N=
Under 55	8.4	91.6	=100%	1068
55 and Older	4.2	95.8	=100%	310

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Source: Burt et al (2001)



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Table C6  
Report by Respondent on Who Owns the Place the Respondent Currently Lives In?

	Respondent Owns	Service Provider	Someone Else	Parent	Other Relative	Friend	Other	Don't Know
Under 55	58	9.4	32.4	25.3	19.0	44.3	10.1	0.2
N=	568	92	317	80	60	140	32	4
55 and Older	74.7	9.1	15.9	2.1	47.9	35.4	14.6	0.3
N=	221	27	47	1	23	17	7	0

---

Source: Burt et al (2001)

Note: Several different graphs were used to make this graph; therefore figures will not add up to 100%

---

Table C7  
The Current Living Situation and Location of Survey Respondents

	Under 55	55 and Older	Rich et al	N for Burt data
Respondent can sleep At the same location for the next 30 days	75.2	89.8		368
Had help with Mortgage	42.0	24.4		896
Stayed in Motel	4.3	5.6		2721
Had a room voucher	1.6	0.5		2720
Stayed in Jail	0.9	0.0		2721
Stayed at an outside Shelter	17.0	15.9	37.9	2721
Stayed in a vehicle	6.0	6.5	5.8	2721
Stayed in a vacant Building	6.1	2.8	1.9	2720
Had a place they paid Rent	78.4	86.4		
Had their own apartment	89.1	60.0		

Statistics are reported from those responding 'yes' to the survey questions, and multiple responses were possible. Data sections left blank in Rich et al column are there because there was not a corresponding question to Burt et al.

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Source: Rich et al (1995) and Burt et al (2001)

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Table C8  
 Has the Respondent EVER had a place they paid Rent, their Name Was on the Lease,  
 or they Owned?

	Yes	No	Don't Know	Total	N
Under 55	78.4	21.5	0.1	=100%	2496
55 and Older	86.4	13.6	0.0	=100%	213

---

Source: Burt et al (2001)

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Table C9  
When Was the Last Time Respondent Had Their Own Apartment?

	Never Had an Apartment	N
Under 55	89.1%	110
55 and Older	60.0%	5

---

Source: Burt et al (2001)

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Table C10

Did Respondent Stay in a House, Apartment, Room, or other Place During the last 30 days?

	House	Apartment	Room	Other	Don't Know	Refused	Total	N
Under 55	33.8	47.7	16.7	1.7	0.1	0.0	=100%	2405
55 and Older	31.6	42.0	23.6	1.9	0.9	0.0	=100%	212

---

Source: Burt et al (2001)

---

Table C11  
Did the Respondent Live with Anyone Else?

	Lived with Self Only	Lived with Others	Total	N=
Under 55	33.0	67.0	=100%	2405
55 and Older	51.4	48.6	=100%	212

---

Source: Burt et al (2001)

---

Table C12  
Report of where the Respondent Stayed the Past 30 Days

	Stayed With a Friend	Stayed in A Foster Home	Stayed in a Mental Institute	Spent Time at VA	Migrant Camp
Under 55	34.9%	0.9%	7.6%	4.4%	0.6%
N=	2499	2497	2499	2500	2499
55 and Older	24.9%	0.9%	6.6%	8.5%	0.8%
N=	213	212	213	213	213

---

Source: Burt et al (2001). This graph is made up from several tables from the original survey, and will not add up to 100%

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Table C13  
How Long Did Respondent Spend In a Nursing Home or Boarding Home?

	Less than 1 Week	1 to 6 Months	13 to 24 Months	Total
Under 55	57.1	28.6	14.3	=100%
55 and Older	0.0	0.0	0.0	=0.0%

---

Source: Burt et al (2001)



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Table C14  
How the Respondents Viewed their Food Situation

	Enough and liked food	Enough food, but not liked	Not Enough food Sometimes	Not Enough Food	Don't Know	Total	N
Under 55	33.4	40.0	17.4	9.0	0.1	=100%	3469
55 and Older	45.1	37.7	12.7	4.5	0.0	=100%	536

---

Source: Burt et al (2001)

---

Table C15

Did Respondent Receive Help Offered By an Outreach Worker?

	Help Offered	No Help Offered	N=
Under 55	7.7	92.3	2505
55 and Older	3.3	96.7	213

---

Source: Burt et al (2001)

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Table C16  
Where did Respondent Receive Food?

	Food Pantry	Mobile Source
Under 55	8.6%	9.3%
N=	3448	3450
55 and Older	8.9%	11.7%
N=	531	532

---

Source: Burt et al (2001). Of those respondents that reported getting food from a source that helped people obtain food.

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