

Center on Maintaining Preferred Aging Services & Solutions (COMPASS)

Mission Statement : To empower underserved senior adults in Eastern NC through fulfilling unmet needs and creating opportunities for self-sufficiency.

COMPASS

Goals and Strategies

Goal 1: Fund raising and staffing for organizational development serving the mission.

- a. Hire an intern to staff funding initiative (GoFundMe).*
- b. Develop medium range marketing strategy.*
- c. Solicit corporate partners.*
- d. Develop strategic partnerships with other non-profits and local foundations.*

Goal 2: Assist Area Agency on Aging (AAA) and provider network in achieving their programmatic missions.

- a. *Fund staffing for individual case management provision.*
- b. *Develop gap payment program for homeless seniors that are not otherwise eligible for benefits.*
- c. *Work with local faith-based organizations on program implementation.*
- d. *Develop transportation alternatives, e.g. ride sharing.*
- e. *Encourage and develop technological solutions to isolation and distance challenges, e.g. on-line health care.*

Goal 3: Provide transitional housing alternatives for homeless seniors.

- a. Develop programmatic solutions for housing homeless seniors. Utilize Crisis Center, CADA, DSS, other non-profits to find temporary transitional shelter.*
- b. Develop a program to pay for temporary accommodations.*
- c. Working with strategic partners in friendly communities, construct temporary, transitional housing on a small, or micro scale, that blends into the fabric of a community.*

Goal 3 – strategy c

While this is a long term goal, we are making progress. We are continuing to work towards a site selection, partnership building and fund raising to make affordable housing for seniors a reality for those seniors falling through the social service safety nets in our region.

The Problem...Homeless Older Adults

We have identified a couple of significant barriers for older adults between the ages of 50 and 62 in our region.

- lack of sufficient resources & supportive services
- growing homelessness & thus a lack of access to existing supportive services

A man with a beard and thinning hair is sitting on a dark asphalt surface. He is wearing a black leather jacket over a white t-shirt, light blue jeans, black socks, and grey sneakers. He is holding a rectangular piece of brown cardboard in front of him with both hands. The cardboard has the words "I USED TO BE YOUR NEIGHBOR" written on it in black marker. The background is a light-colored wall with horizontal lines. The man's expression is somber as he looks down at the sign.

I USED TO
BE YOUR
NEIGHBOR

Homeless Older Adults

“Studies across the U.S. have shown a clear upward trend in the proportion of ‘older’ people (aged 50-64) among the homeless population. This is a group which frequently falls between the cracks of governmental safety nets. They are not old enough to qualify for Medicare, however, when their physical health is assaulted by poor nutrition and severe living conditions they may eventually resemble someone much older.”

<http://nationalhomeless.org/issues/elderly/>

Homeless Older Adults

“There is a relatively low percentage of ‘elder’ (aged 65 and over) homeless people among the current homeless population. This smaller proportion may be due to the increased availability of successful safety net programs, which only kick-in at a certain age including:

- *Subsidized housing – Available at age 62*
- *Medicare – Available at age 65*
- *Social Security benefits – Available at age 65”*

<http://nationalhomeless.org/issues/elderly/>

Why is this an issue?

“Unhoused older adults face some serious challenges to their well-being relative to younger adults. Homeless persons between ages 50 and 62 often have similar healthcare needs to housed people 10-20 years older.”

Why is this an issue?

“Studies show that older homeless adults have higher rates of geriatric syndromes, including problems performing daily activities, walking, vision and hearing, as well as falls and frailty when compared to the general population.”

<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3671483/>

Why is this an issue?

“Older homeless people are also more likely to suffer from cognitive impairments compared to younger homeless adults – Older homeless are likely to suffer from impairments resulting from depression or dementia, which can contribute to the worsening of their physical health.”

<http://nationalhomeless.org/issues/elderly/>

Gaps in Benefits

- *Many older homeless persons are entitled to Social Security benefits. However, these benefits often fail to cover the cost of housing.*
- *In 2010, the monthly SSI payment for an individual was \$703 – well below the poverty line.*

<http://soclosetohomeless.org/elder-homelessness/>

Lack of Affordable housing

- Increased homelessness among elderly persons is largely the result of poverty and the declining availability of affordable housing.
- There are at least nine seniors waiting for every one occupied unit of affordable elderly housing nation-wide. Furthermore, the waiting list for affordable senior housing is often three to five years.

<http://www.nationalhomeless.org/factsheets/Elderly.pdf>

Taking Action!

“Greater recognition of the older/elder homelessness issue is needed. Federal, state, and local authorities, as well as nonprofit service providers, have to be made aware of the specific needs and challenges faced by older adults and elderly persons who are homeless. For instance:

- *Older homeless adults are best served by professionals who understand geriatric healthcare principles and who are sensitive to the fears and concerns of older individuals.*
- *Expanding the range of targeted populations eligible for supportive services to include more older homeless persons' under the age of 65 will help bridge the gap in benefit accessibility.”*

<http://nationalhomeless.org/issues/elderly/>

Taking Action!

In a study conducted by Boston Health Care for the Homeless, “the average annual health care cost for individuals living on the street was \$28,436, compared to \$6,056 for individuals in the cohort who obtained housing.”

<http://bgc.pioneerinstitute.org/containing-the-cost-of-medicaid-by-providing-housing-for-homeless-individuals/>

Taking Action!

What successful action looks like in Texas!

<https://youtu.be/27XDnHnzdck>

Taking Action!

As mentioned, COMPASS, the Upper Coastal Plain Area Agency on Aging, and the Upper Coastal Plain Planning and Development Services Department are currently in the process of identifying potential locations, partners and funding sources to take action.

The following slides provide some visual ideas of possible solutions....

Tiny-House Communities Across the U.S.



Source: Tiny House Community













Wish It ★ Dream It ★ Do It