

# Los Angeles Older Adults System Modeling Project Summary

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## Introduction

Older Adults are an increasingly large subset of the homeless population and in order to meet their unique needs increased focus must be placed on understanding how the homeless system can best respond to this population. During the 2020 Point in Time Count, nearly 15,000 Older Adults, disproportionately people of color, were experiencing homelessness on a single night and over 40,000 Older Adult households are experiencing homeless every year. All indications are that this epidemic will only increase. Los Angeles has been working in multiple ways to address the crisis of Older Adults experiencing homelessness in recent years and is in a unique position because of those efforts to begin designing a comprehensive systemic response to Older Adult homelessness. The development of a System Model specifically focused on Older Adults 50+ is an effective tool to support the community in planning and making strategic investment decisions.

## Key Takeaways

*Non-congregate shelter:* COVID-19 necessitated reimagining the shelter system, which temporarily housed numerous people in large congregate spaces. The rapid development of non-congregate shelter, primarily utilizing individual hotel rooms, was necessary to combat the spread of COVID-19. The use of non-congregate shelter has resulted in such positive outcomes for individuals there is a desire to utilize this model permanently, particularly for Older Adults. Lived experience stakeholders universally supported the placement of nearly all Older Adults into non-congregate shelter, sighting the increased privacy, dignity, autonomy, safety, and stability of non-congregate shelter. The unique needs of Older Adults are more effectively served through this model. Due to these program recommendations, the system model proposes the development of non-congregate shelter to meet 90% of the shelter needs for the Older Adult population. Meeting this recommendation will require significant investment in developing and maintaining non-congregate shelter well past the end of the current pandemic.

*Long-term subsidies:* The current system inventory is insufficient to meet the needs of Older Adults experiencing homelessness both in scale (not enough housing) and scope (not the right mix of housing). Permanent Supportive Housing, which combines non-time-limited subsidies with intensive support services, is the only long-term housing option available in the homeless crisis responses system. Many older adults do not qualify for this program (targeted to chronic homeless and people with disabilities). Yet, due to either fixed incomes or very limited opportunities for increased income, the temporary support available through Rapid Rehousing programs does not effectively meet the needs of many older adults experiencing homelessness. The wait lists for affordable housing outside of the homeless system are too long to be a viable resource. These Older Adults need a readily available permanent subsidy that meets their housing needs and allows them to access services and systems of care both in and out of the homeless system. The system model proposes the development of Dedicated Affordable Housing within the homeless system, available specifically to those experiencing homelessness and targeted to Older Adults. This subsidy could be either project-based or scattered sight, but the social and emotional needs of Older Adults may be best met with a project-based model.

*Integrated systems of care:* There are substantial services available to Older Adults experiencing homelessness, but the systems that deliver them are disjointed and often difficult to navigate. A coordinated response between the homeless response systems, aging systems, medical systems, and behavioral health systems would increase the likelihood that Older Adults get their needs met and avoid costly duplication. This coordinated response would also decrease the burden on each individual system. This integration needs to occur at both the program level, such as services being offered within a project-based housing model, and at the system level through increased communication and shared strategies.

### Process Summary

The LA Homeless Services Authority (LAHSA) and the United Way partnered with Abt Associates to complete the system modeling process. A workgroup of 20 people representing 15 different agencies with knowledge of serving Older Adults experiencing homelessness was assembled to develop the system modeling. Additionally, a stakeholders group of Older Adults with lived experience of homelessness was consulted multiple times during the project and weighed in on each element of the modeling process. A larger stakeholder group with over 100 invitees was convened three times throughout the process to provide additional input. These participants met regularly over the course of five months to develop Program Models outlining the necessary components of a continuum of programs to meet the needs of Older Adults and a set of System Recommendations to serve Older Adults more effectively, as well as developing the inputs for the system modeling tool. Their expertise was critical to envisioning the comprehensive system for Older Adults contained within this modeling.

### Impacts of COVID 19

The COVID 19 pandemic has had significant impact on the homeless response system, changing the way people experiencing homelessness are sheltered and resulting in never-before-seen investments in the system. COVID 19 also impacted the work of the system modeling. This modeling process was conducted completely virtually, necessitating creative problem solving and being nimble to adapt a process that is most often conducted during long in-person work sessions. While the impacts on the way business is conducted and services are delivered during the pandemic is clear, the long-term impacts of the pandemic on the population of persons experiencing homelessness is still unclear. It is easy to speculate that the economic downturn associated with the pandemic will result in increased homelessness; the eviction moratorium and rental assistance has diminished or delayed that impact. The eviction moratorium put in place by Governor Newsom expires September 30, 2021. How different populations will be impacted by eventual evictions is still unknown, so it is not clear if there will be an influx of Older Adults into the homeless system.

Conversely, Los Angeles has received hundreds of millions of dollars in COVID 19 relief funding. Much of this investment was initially targeted towards sheltering and housing Older Adults, as they were designated most at risk of contracting COVID 19. Strategic investment of the unprecedented funding as a result of COVID 19 could significantly change the number and make up of persons experiencing homeless in Los Angeles. The full impact of COVID 19 funding will not be realized for years. Because of the number of unknowns as a result of COVID, the current system modeling does not account for these factors and is based instead on the trajectory of the system prior to the pandemic. The modeling tool is fully customizable, so as additional data is available, the community can recalculate the needed investment based on the new information reflecting the impact of COVID 19.

## Inventory Recommendations

Meeting the needs of Older Adults will require substantial new inventory and investments. Beginning in year 2022, the Los Angeles is projected to have 48,982 Older Adults experiencing homelessness. The chart below details the units and associated costs necessary to order to fully meet the needs of those households based within the recommended system that has been designed through this process. The results section of the full system model report details out the projections for households, units and costs for the next five years. These cost estimates include operating costs (rent and support services) but do not include development or acquisition costs. These are total costs, including the cost of currently inventory, not all new costs.

<b>Program Models</b>	<b>Year 1 Number of Units/Slots</b>	<b>Year 1 Costs Per Intervention</b>
<b><i>Annual HH in the System</i></b>	48,982	\$6,130,368
Prevention (slot)	367	\$8,168,256
Diversion (slot)	163	\$408,046,275
Non-Congregate Shelter (bed)	7,605	\$19,739,200
Congregate Shelter (bed)	845	\$102,820,500
Recuperative Care (bed)	1,878	\$115,914,700
Rapid Rehousing (slot)	7,348	\$201,111,880
Dedicated Affordable Housing (unit)	12,245	\$376,340,139
Permanent Supportive Housing (unit)	22,043	\$111,795,180
Residential Care (unit)	4,899	\$1,238,271,318