



NATIONAL COALITION *for* HOMELESS VETERANS

The Age Structure of Contemporary Homelessness: Evidence and Implications For Public Policy

Dennis P. Culhane, Stephen Metraux, Thomas Byrne, Magdi Stino, and Jay Bainbridge | [Full Report](#)

Quick Takeaways

- Single adults who are homeless are mainly comprised of persons born during the latter part of the baby boom era whose high risk for homelessness has continued as they have aged.
- Adults in sheltered families show no indication of any progressive aging of the heads of households.
- The health problems faced by the single adult homeless population means that health care providers will increasingly be required to provide care for chronic conditions.
- The homeless assistance system needs to be prepared to address the housing needs of an aging homeless population.

“Birth Cohort Phenomenon”

Findings show diverging trends in aging patterns for single adults and adults in families over the past 20 years. Among single adults, the bulk of the sheltered population is comprised of persons born during the latter part of the baby boom era whose high risk for homelessness has continued as they have aged. In contrast, among adults in sheltered families, there is no indication of any progressive aging of the family household heads.

This aging among the single adult homeless population holds even after accounting for the aging of the overall U.S. population. **Research has consistently demonstrated differences in the characteristics of adults who are homeless accompanied by families and those who are homeless as individuals. Families presenting themselves as homeless are predominantly headed by single women with young children, while the single adult population is predominantly male.** Although children are not included in this age distribution, the predominant sheltered family in all years consists of young parents with preschool age children.

The poor single parent (mostly female headed) families have consistently faced an increased risk of homelessness when the mothers and children are relatively young. The peak period of risk for the mothers has been between the ages of 21 and 24, a time when they were likely to be parenting infants and toddlers. However, after this initial period of homelessness, these household types tend to not sustain their level of homelessness risk on aging. The primary risk of homelessness still remains among families in their early parenting years.

Programs should pay special attention to the developmental stage of these families, in which the mothers may have little labor market experience and need parenting supports, and in which the children are presumably in need of engagement in early care and education programs. High rates of subsequent foster care placement and under-enrollment of homeless children in early care and learning programs suggest the need for such supports.

The report finds that the aging of the single adult homeless population is primarily the result of a large number of persons from the same age cohort cycling through homelessness over time. This finding suggests that the homeless assistance system will face an increased need for less intensive forms of housing assistance that are suited to the needs of older persons experiencing short-term housing crises. The report recommends that homeless assistance services that focus on prevention and rapid rehousing be also accompanied by the development of best practices for serving older persons in such program frameworks. These findings highlight how the aging of the single adult homeless population is likely to be accompanied by complicated challenges associated with increased morbidity, disability and medical frailty among persons in this population.

These health problems mean that the health care providers who serve homeless populations will increasingly be required to provide care for chronic conditions and that homeless service providers need to be prepared to address the housing needs of an aging homeless population.