

AGING VETERANS:

COMMUNITY STRATEGIES FOR COMPLEX NEEDS

IN CALIFORNIA

Senior veterans are not tracked in California. Data about their needs and the services they are accessing is not collected at the state or local levels. Swords to Plowshares knows from direct experience that the needs among homeless and formerly homeless aging veterans are great. They are older, sicker, and poorer than their civilian peers.

In California, veterans **55+ years** represent about 69% of the veteran population (1.18 million veterans)

25% are over 75 years old



THE ISSUE

The legacy of neglect regarding Vietnam veterans has now resulted in a growing population of chronically homeless veterans struggling with complex physical and mental health needs.

Providers are not aware of the impact of military service, eligibility for veteran care, or how the VA and the community work together. Information and cross-collaboration among systems of care is needed to:

RECOGNIZE UNIQUE NEED AMONG AGING VETERANS

UNDERSTAND VETERAN-SPECIFIC ISSUES THAT IMPACT THEIR ACCESS TO CARE

TREAT THE GROWING CRISIS OF HOMELESS VIETNAM ERA VETERANS

FINDINGS

- Providers are seeing increase in age-and-veteran-related issues: late-onset stress symptomology (LOSS), poverty, diabetes, cardiovascular disease, mobility issues, dementia, traumatic brain injury, etc.
- The majority of senior veterans are **not** enrolled in VA healthcare and seek care from community systems. This makes screening for veteran status crucial.
- Older veterans (age 51 or older) represent 50% of all homeless veterans, compared to 19% homeless non-veterans. The number of homeless veterans over the age of 55 is projected to increase dramatically over the next decade.
- The deterioration of physical health can exacerbate or even trigger the onset of PTSD symptoms as the veteran ages.
- Some veterans lose housing due to limited care services onsite, including accessibility resources and case management.
- Behavioral health issues prevent veterans from participating in and retaining transitional/permanent supportive housing and programs, adult day health services, and in-home supports
- Isolation and care reluctance: Older veterans with PTSD are more likely to report little or no social support and a higher prevalence

WE NEED TO BETTER UNDERSTAND THE LANDSCAPE OF CARE FOR OLDER VETERANS.

- There is a disconnect between VA and community services and a lack of understanding of how aging veterans access multiple systems of care.
- Systems of care are fragmented, with a lack of “warm hand-offs” between VA, county, and community-based services.
- Veterans and providers may not be aware of the benefits of veteran-specific care.
- Seniors and adults with disabilities: systems of care need to identify number of veterans they are serving.
- Community agencies need to be educated in veteran culture and health outcomes to engage veterans productively and make appropriate referrals.
- Need resources for staffing and ADA accommodations in housing programs.
- Increase access to veteran in-home supportive services.

SOURCES

Friedman & Schnurr, 1995; Schnurr et al, 2000; Plassman et al, 2000; Dohrenwend et al, 2006; Yaffe and Lindquist, 2010; Durai et al, 2011; Johnson et al, 2012; Steinman et al, 2012; Bagalman, 2013; Weiner, et al, 2013; Blais et al, 2015; Hermes, et, 2015; NCPTSD, 2015; Bastian et al, 2016; Smith et al, 2016; Bundy et al, 2018.

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SOLUTIONS

Veterans like those we serve have nowhere to go as they age and need a higher level of care.

California needs affordable Medicare/Medical funded Board & Care Homes

The Veterans Homes of California need to prioritize homeless veterans for admissions at all levels of care

PROFILE OF SWORDS TO PLOWSHARES' CLIENTS

Swords to Plowshares serves homeless and low-income veterans in the Bay Area with counseling and mental health services, case management, housing placement and eviction prevention, employment, legal services for VA benefits and supportive housing.

More than ½ of the 3,000 veterans we serve are over 55 years old

They are significantly aged beyond their years as are all homeless individuals

Our residents in supportive housing represent the San Francisco homeless veteran population

We operate 503 units of supportive housing – 462 are permanent housing units; 65% are seniors

Nearly 40% of our residents are African American compared to 6% of all San Franciscans



HIGH ACUITY

Take for example one of our housing sites, 250 Kearny Street, which houses 135 veterans. Through coordinated entry with San Francisco, chronically homeless veterans were prioritized for this housing. Their health issues are complex and they require a higher level of care to remain stably housed. Many are actively abusing substances well into their senior years and are resistant to treatment.

Service assistants who assist with activities of daily living help many veterans maintain their housing and a newly assigned VA nurse on-site helps with medical care.

Without access to nurses, these veterans rely on emergency care.