Grief and Loss as a Contributing Factor in the Homelessness of Older Adults:

A Qualitative Study

By

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Abstract

Objective: Little research exits on how grief and loss contributes to the homelessness of older male adults. This paper will review the available literature on grief and loss and homelessness and explore how grief and loss has factored into the experiences of homelessness for 20 older adults at The Good Neighbours Club.

Methods: 20 members were recruited from The Good Neighbours Club to voluntarily participate in a half hour in person qualitative interview with the club social worker. The interviews explored members' successes and challenges, relationships and supports, career, housing, impact of grief and loss, life lessons, and life improvements with both their personal lives and the drop in centre.

Results: Grief and loss was reported to significantly impact the majority of men who were interviewed for this study. According to these older adults, separation and divorce, injury on the job, substance use, insecure employment and financial problems resulting from job loss were instrumental factors which led many of them to become homeless as older adults.

Conclusion: There is little research available on this topic and future research needs to be done to further investigate how grief and loss contributes to homelessness in older men. It appears as though many older adults who have become homeless later on in their lives experienced significant losses throughout their lives. This coupled with insecure finances and employment and ongoing substance use issues have led them into a cycle of homelessness and poverty which has been difficult to both navigate through and successfully overcome.

Literature Review

The Good Neighbours' Club is a non-profit drop-in centre in downtown Toronto that services older men experiencing homelessness and social marginalization. Some of the services provided here include meals, laundry and shower facilities, clothing, social work services, a mailing address and many other health and entertainment services for its members. The club provides services to over 200 men over the age of 50 daily and has over 5000 members in its records. Many of the members present day attitudes, beliefs, mental and emotional health and living accommodations have been significantly impacted by their life experiences. Many of our active members have experienced homelessness, poverty and the social stigmas associated with it.

There is limited research available that explores older men's life experiences and how grief and loss may have contributed to their current housing situations (Cohen, 1999). The causes of homelessness vary. One theory suggests that the aging homeless populations have been stereotyped by many professionals in our society (McDonald, Dergal, Cleghorn, 2007). There are reports that many professionals view the older homeless people as stubborn, closed-minded and depressing to work with (Amodeo, 1990). This segregation by professionals is exacerbated by the many literary sources comparing the elderly homeless to the skid row stereotype characterized in the late 1960's. Here they have labelled homeless men as hopeless, worthless and substance users (Fischer, & Breakey, 1991). In addition, the elderly homeless populations have a reputation of being difficult to work with (Crane, 1998). Research indicates that the majority of older adults experiencing homelessness are incredibly difficult to locate and keep track of, to establish trust with and interview (Crane, 1998). Some researchers attribute this to many of the homeless wanting to avoid stigmatization, hospitalization and being forced to take medications (Keigher, Berman, & Greenblatt, 1991). For this reason, many avoid shelters and health care facilities and are often wary of strangers. Furthermore, many older adults living in the shelter system and on the streets are victimized by the younger homeless population (Amodeo, 1990).

With an expected increase in the number of older adults living on the streets in the next few decades, there is an increasing need for more research and literature on homelessness with this population (Cohen, 1999). With the baby boomer generation entering their late adult years it is estimated that there may be up to a 50 percent increase in the number of elderly homeless between the ages of 50-65 in the next 15 years (Cohen, 1999). In the United States it is estimated that as many as 60,000 to 400,000 people over the age of 50 are homeless (Crane, & Warnes, 2001). It is plausible that these rates may double within the next three decades for adults between the ages of 50-65 years (Cohen, 1999). With the current population of homeless people over age 50 in Canada estimated to be between 2-27 percent of the total homeless population, this may present a serious issue to Canadians in the future (McDonald et al. 2007).

Research indicates that there are various characteristics attributed to the differences in the homeless population (Crane, Byrne, Fu, Lipmann, Morabelli, Rota-Bartelink, Ryan, Shea, Watt, & Warnes, 2005). For example, Hecht and Coyle (2001) compared older and younger homeless populations and found that the younger homeless population were more likely to have histories of drug use whereas the older adults were more likely to have histories of alcohol abuse. Also, the older adults reported greater access to social services compared to the younger populations who reported greater access to social supports. Interestingly, the older participants cited alcohol abuse and illness as contributing factors to their homelessness whereas the younger participants

reported domestic violence and release from prison as the main contributors to their experience of homelessness.

Cohen (1999) explored the gender differences in older homeless adults and found that the research suggested more males were homeless and living on the streets. He suggested that in North America, some studies reported a male-to-female ratio as high as 5:1. Women are reported to have easier access to subsidized housing and social services because they are more likely to have experienced an abusive relationship, have dependants rely on them and are often stereotyped as needing more support than men (Cohen, 1999). It is also suggested that women are more likely to become homeless later than men, with many reporting homelessness in their mid-fifties (McDonald, 2005). Cohen, Ramirez, Teresi, Gallagher and Solovasky (1997) found that homelessness in women was a result of grief (i.e. family crises or mental illness) whereas men related it to financial challenges. The study also showed that psychiatric symptoms in the participants were exhibited in 42% of the women interviewed, but only 9% of the men.

Research suggests that there are differences between people who have been homeless for most of their lives and those who became homeless in later life (Shinn, Gottlied, Watt, & Bahl, 2007). According to Crane et al., 2001, those who experience homelessness at an older age were more likely to have sustained residency for most of their lives, been married or widowed, be in a current romantic relationship, have raised a family and still be in contact with family and have worked steadily until retirement. Gottlied, Watt, and Bahl (2007) studied the unconventional and conventional lives of individuals who were homeless. They found that those individuals who led conventional lives prior to becoming homeless on average experienced homelessness 15 years later than those who lived unconventional lives. In studies done in Toronto on ethnicity indicated that 55% of elderly people who recently became homeless were born outside of Canada where as 29% of older adults' experiencing homelessness over a long period of time were reported to be born outside of Canada (McDonald et al. 2007).

According to Warnes and Crane (2006), there are important factors in both the macro and micro lives that contribute to experiences of both homelessness and poverty. Macro environment refers to factors like as social services, available resources, structural economy, and policy condition. It also includes poverty rates, job availability, availability of affordable or subsidized property and the process and requirements to apply for government benefits and pensions (Main, 1996). Furthermore, personal incapacity, experience, vulnerability and behaviour refer specifically to the micro environment as does traumatisation, addiction, relationships, legal status, financial status, general health and a variety of factors from a person's past and present (Main, 1996). Although some research indicates that these life triggers will increase the likelihood of homelessness, many adults are able to maintain normal lives (Crane, 1994). Warnes et al. (2006) added that experiencing such macro or micro life factors does not necessarily lend one to become homeless. According to Crane (1994), homelessness can result from several factors such as poor coping skills, weak support systems and mental health issues. Although the root causes of homelessness vary, many researchers attribute shortages in affordable housing, unemployment and poverty to the widespread problem (Hecht, & Coyle, 2001). British research supports this notion, indicating the main cause of homelessness there to be a lack of affordable rental housing (Crane et al. 2005). Warnes and Crane (2006) suggested that there has been a drastic reduction in public housing construction and an increase in subsidized housing areas that have been taken over by middle and high class developers. According to these researchers, insufficient wages and income levels, employment opportunities, demographic changes and social assistance policies contribute to homelessness, especially for those who encounter life

crises (Warnes and Crane, 2006). Conversely, Ropers (1994) attributes homelessness and socio-economic breakdown to industrial change and unemployment. Individuals have become socially isolated and disenfranchised in part due to economic depressions and innovations in technology. Job displacements within society and loss of income result in low self esteem and socially isolation (Ropers, 1994). For many men, the loss of employment opportunities and housing often leads them to a drifter's lifestyle which increases their risk for homelessness later in life (Crane, & Warnes, 2001). According to Tully and Jacobson (1995), industrial change and economic recessions have led many men seeking seasonal employment to travel from location to location. Research suggests that a drifter's pathway into homelessness occurs because their lifestyles. It is common for many who live a drifter's lifestyle to not have married or developed permanent social supports. They tend to work and live in single-sex settings where heavy drinking is common and they rely on temporary housing accommodations like hostels between jobs. As a result, the drifter's lifestyle actually familiarizes them to a homeless lifestyle (Crane et al. 2001). Crane et al. (2001) found that some men in their 40s and 50s have become homeless after losing their employment. It is suggested that aging impacts work performance leading some men to have difficulty keeping up with their younger employees.

Many studies cite the inability to maintain financial stability as a primary contributor to homelessness (McDonald, 2005). In a study by Crane, Byrne, Fu, Lipmann, Morabelli, Rota-Bartelink, and Ryan (2005) 36.7% of participants reported financial problems as the primary reason their homelessness. Others attributed their current situation to the loss of employment, rent increases, problems with social service benefits or housing subsidy payments. According to Crane et al. (2005), 25% of the participants reported having poor money budgeting and management skills and 27% reported an inability to make rent or mortgage payments. Financial difficulties are of particular concern for those elderly who are retired, live alone and have little social supports (McDonald, 2005). In Ontario elderly females on average do not qualify for as much financial compensation from the Canada Pension Plan (CPP) as do elderly men. This is due in part to women making lower contributions over their lifetime to CPP. In addition, Old Age Security and Guaranteed Income Supplement programs provide a maximum of 1000 dollars a month, which for many older adults who do not have a retirement fund is their entire income. Elderly individuals who are in the top end of the lower tax bracket must pay high taxes on their income and have to consider claw backs on their pensions. Pension may also be cut by 65-75% with the death of a spouse (McDonald, 2005). Other seniors upon retirement run into financial difficulties when they do not apply for Old Age Security (Hecht et al. 2001). According to Hecht et al. (2001), many older adults have become accustomed to receiving wages and paying bills and were unaware of the financial benefits available to them or did not understand the application process. Not applying for seniors benefits can result in unpaid rent and utilities, putting them at risk for eviction.

The breakdown of the childhood home has been shown to be a risk factor for homelessness (Keigher et al. 1991). Many individuals experiencing homelessness reported living on the streets for the first time before the age of 18 after running away from negative home environments, orphanages or foster care (Herman, Sussar, Struening, & Link, 1997). According to research by Herman et al. (1997) many homeless individuals disclosed family histories of marital infidelity, alcohol and substance use, trauma and a death of a parent. In addition, many reportedly enlisted in the army in an attempt to escape personal traumas at home. Interestingly, histories of binge drinking and few social supports were also cited by those soldiers at the time of their discharge. Negative childhood experiences appear to have a significant impact later in

life. For some individuals maintaining regular employment, permanent residence and meaningful relationships has been quite difficult. It is important to acknowledge, however, that many who have experienced dysfunctional childhoods have gone on to live normal lives. Herman et al. (1997) reported that many adults who have grown up in dysfunctional childhood homes have never experienced homelessness (Herman et al. 1997). Although Susser, Moore and Link (1993) found a dysfunctional childhood to be a risk factor for homelessness later in life, Cohen (1999) suggested factors other than a dysfunctional childhood contributed to a late onset of homelessness.

The breakdown of a marriage has been demonstrated to increase the likelihood of becoming homeless later in life (Warnes et al. 2006). Research by Wilson (1995) in Scotland identified the breakdown of a marriage as the main cause for older homeless men reporting to local authority housing departments. Wilson (1995) found that 56 men and 17 women associated the breakdown of marriage with their homelessness. Of these, 35% reported a separation after the age of 50. Interestingly, other factors reported in marital breakdowns included alcoholism, violence and mental illness (Wilson, 1995). Shinn et al. (2007) found that for older men the death of a spouse was a large predictor for homelessness in later life. A study by Crane and Warnes (2001) supports these findings. They reported 83% of the respondents who become homeless after the age of 50 identified the death of their spouse as the main cause. The majority of these older adults were married for more than 25 years, had children and were employed until the time of retirement. Most of these participants sold their homes, reporting it was too painful to remain in the home after their spouse died. Stroebe and Stroebe (1983) found an increase in suicide attempts, alcohol use and hospitalizations for mental health reasons after the death of a spouse. The death of a significant other has been shown to be extremely stressful, requiring significant lifestyle adjustments. According to Stroebe and Stroebe (1983) three quarters of those individuals who became homeless after the death of a spouse came from dysfunctional childhood homes. Many also disclosed histories of alcohol abuse and mental health problems. These researchers suggested that many of these homeless older adults lost the stability provided by partners when they died (Stroebe et al. 1983).

Mental health issues are significant risk factors for homelessness in the elderly and are described in literature as the underlying cause for homelessness (Crane, 1998). Mental illness affects an individual's ability to cope, often leaving them vulnerable and without adequate social or family supports (Crane, 1998). Those experiencing homelessness often report high rates of mental health issues in comparison to the general public (Lehman, & Cordray, 1993). Mental illness is said to contribute to housing instability in the elderly population, with many suffering from substance use, Schizophrenia, mood disorders and memory problems (Goldstein, Luther, Jacoby, Haas, & Gordan, 2008). Crane (1998) found high rates of paranoia among many of homeless older adults. Warnes and Crane (2006) interviewed 109 homeless individuals over the age of 50 in a shelter environment. Of these participants, 42% reported heavy drinking and 31% reported having symptoms of a mental health issue prior to becoming homeless. Although Crane (1998) suggested the deinstitutionalization of the mental health system had a significant impact on homelessness rates, it was later discovered that the problem was related to issues within the community which included poor service integration, a declining number of long term care beds, failures in the mental health community service programs and short stay hospitalizations for psychiatric admissions (Craig, & Timms 1992).

This paper will explore the past life experiences of twenty members of The Good Neighbours Club and will examine how experiences of grief and loss contributed to their

homelessness. The information gathered in these qualitative interviews will provide a deeper understanding of the factors that contribute to homelessness later on in life. The data collected from our members is invaluable to developing programs to better assist older adults and individuals at risk for homelessness. This study will also contribute to literature that focuses specially on the role of grief and loss in older adults' experience of homelessness.

Objective

The goal of this qualitative study is to explore how grief and loss contributes to the experience of homelessness in older men.

Characteristics of Study Participants

Older men over the age of 50 were recruited from The Good Neighbours Club to participate in this study. Members who were currently homeless, who had previously experienced homelessness or who had experienced stress related to their housing were invited. Women were not eligible for this study as The Good Neighbours Club consists of men only.

Methods

From March 2010 to June 2010, members from The Good Neighbours Club were invited by the club social worker and social work intern to voluntarily participate in this study. Notices were posted throughout the club advising of the details regarding this study. There were no incentives given out to members who participated in the interviews. A sample of 20 participants was selected using a purposive sampling technique. Only active members of The Good Neighbours Club were invited to participate. While some members approached the social work department about these interviews, other members seeking social work assistance were offered an opportunity to participate at a mutually convenient time. An interview guide of 22 open ended questions was created by the club social worker and social work intern and grouped into the following themes: Life Lessons, Successes and Challenges, Relationships and Supports, Career, Housing, Reactions to Loss and Life Improvements. All of the interviews were done in person by the social worker at The Good Neighbours Club and lasted for approximately half an hour.

Data Collection

Members of The Good Neighbours Club were informed that their participation in the study was anonymous, confidential and voluntary. Their responses were recorded and documented by hand during the in person interviews. These interviews were not audio recorded in order to protect the members' privacy and confidentiality. The documents were secured and locked in a desk drawer in the locked social work office. The main themes from the data were collected and disseminated to the management at The Good Neighbours Club.

Results

The members of The Good Neighbours Club reported separation and divorce, injury at work, substance use, insecure employment and limited financial resources as the primary contributors to their homelessness. Three individuals reported no housing issues at all. All of these factors represent different forms of loss and were reported to have significantly impacted the members' lives.

Discussion

Loss knows no bounds, crossing races, gender, socioeconomic status and class. At some point in time, everyone encounters a form of grief and loss. Grief is the response to loss and often significantly impacts an individual's life just as much as the death of a significant other (Dyer, 2006). Grief can also result from the loss of a job, property, income, home and the ending of a relationship. For others, the loss of role, identity, independence, freedom, safety and religious beliefs can be difficult to process and work through (http://dying.about.com/od/lossandgriefterms/Loss_Grief_and_Bereavement_Terms.htm).

Family Background

The majority of our interviewees reported being brought up in a two parent household and all had siblings. Given the ages of the participants, many reported their parents filling traditional gender roles with their mothers staying at home while the fathers were the main breadwinner. Many described their parents as religious and were brought up in faith based family environments. Approximately half of the members came from households where both parents were employed. 30 % of the members disclosed family histories of substance use and 15% of our members reported histories of trauma and abuse. Furthermore, 15% of those surveyed described their home environments as positive, 15% reported growing up outside of Canada and 15% came from well to do families.

Impact of Loss

Although 15% did not report any significant impact from losses experienced, 85% of the members of The Good Neighbours Club felt significantly impacted by their experiences of loss. Common experiences of a death of a parent, divorce or separation, loss of job or injury on a job were reported by many of the members. Many attributed their sense of failure to the failure of their marriages. Some reported the loss of their career and income as a contributing factor to the breakdown of their marriages. Grief and loss can often be the impetus for positive change and growth. For some of our members, they accepted their experiences of loss as a natural part of the life cycle. Some viewed it as a chance to rebuild their lives, viewing acceptance of their life events as more important than dwelling on it. Some reported that believing in oneself helped them to persevere and empower them to move on. Conversely, others found it very difficult and may have experienced prolonged grief reactions. Some of these members reported that such

negative life events had "taken away their only purpose", leaving them without a meaningful life. Some indicated that constantly rebuilding their lives was tiresome, especially when they lost everything they had to substance use. Others found themselves reminiscing about what could have been.

More than half of the members interviewed disclosed histories of alcohol and drug use, only 35% reported no such issues. Many reported family histories of both substance use and mental health. Situational stressors often led them to cope through use of substances and others suggested using was socially accepted in their culture. Some of the members indicated that using substances helped them to relax, to forget about their negative experiences and to become numb. Interestingly, others acknowledged the positive effects of euphoria helped them to become more social with friends. Unfortunately, there were detrimental costs to such substance use with many of the members losing friends, family, income, property and employment. Others felt that the substance use wasted their life opportunities, hindered their employment and for some impacted their intellect.

Although all of the members interviewed had established careers and were successful before the onset of their homelessness, many were left afterwards trying to pick up the pieces of their broken lives. The members of The Good Neighbours Club reported careers in financial services, the trades, entrepreneur, air force, post office, corrections, truck driving, culinary arts, interior decorating and song writing.

Lessons Learned

The life lessons suggested by the members of The Good Neighbour's Club seem to resonate with many of their life's experiences. For some, the growth and positive outlook despite the tragedies faced throughout their lives speaks to their innate resilience. Yet for others, the unspeakable events they endured have left them with significant emotional scars and despite this they manage to muster up enough inner strength to continue on each day. Some of the life lessons shared include working hard, staying focussed, pursuing education, not giving up, having goals and travelling and experiencing what the world has to offer. Others learned not to take life seriously, to respect both yourself and others, to follow your instincts, to be faithful to others and to be easy on yourself, to have a sense of humour, to be patient and in the end to realize that nothing is impossible and you are not alone. Upon reflecting on their life experiences, some members learned that life is not fair, people are not trustworthy, that what you have can be taken away quickly, that you get in life what you put in, that if you lack willpower- you lack success and that life inevitably changes. To conclude, two members sum it up nicely, "**life is great without it you're dead**" and "**to understand the present you must know the past to realize your future**".

Successes & Challenges

Many of those interviewed associated their life successes with their careers, travels, creativity, property, financial savings, independence, resilience, children and family, music awards, professional athleticism, entrepreneurial skills and the ability to support family abroad.

The main challenges they were presented throughout their lives include illness, loss of relationships, unemployment, homelessness, mental health, prejudice, trauma, death of close friends and family, loneliness, loss of artistic abilities, substance use, crime, education, immigrating to Canada, incarceration, work related stress, Canadian political system and their family history.

Improvements in life

As expected, many interviewees suggested that housing and financial resources would significantly improve their current life situation. It was also noted that improvements in health, sobriety, employment opportunities, relationships and community activism would be beneficial.

The members' interviewed describes The Good Neighbour's Club as a family. They see it as helpful, a place to go, like 'heaven' and a good stepping stone. They feel it provides them with a meaning and purpose as well as an opportunity to get away from the unfortunate situations in the local shelters. For others, it demonstrates how worse off some are it today's society. They describe it as a place to meet new friends, a place to get food, socialization, stability, and a daily routine. They acknowledge the volunteer opportunities available within it. According to members, it is a motivation to learn, to contact family, to increase one's awareness of community services as well as an opportunity to reduce stress. Not only do they see it as a place to come and go but they also feel that it highlights what the community is lacking for older adults. The following quote sums up the gap our club fills, "**if it wasn't for here I'd be stumbling down the street, living under a bridge**".

Areas for improvement in The Good Neighbour's Club were discussed with the members interviewed. Ideas put forth include food banks, full time housing workers, offering activities and a gym, incorporating spirituality, offering services geared towards career and education and individual counselling. They also proposed that the staff become more receptive to internal volunteer recommendations and that less staff and more committed volunteers are necessary. The members also advocated for a bigger space and more seating on the first floor.

Limitations

The objective of this qualitative study was to explore whether grief and loss contributed to our members experience of homelessness. Due to the small sample size and subjective nature of this study, the results can not be generalized to the public. The use of open ended questions leaves room for interpretation by the researcher, effectively limiting its validity and reliability. Since

this study lacks statistical significance it is therefore not representative. This study only interviewed men over the age of 50, future research should look into the role that gender plays in homelessness for all older adults.

<u>Funding</u>

<u>Conclusion</u>

It is apparent that some older adults are significantly impacted by the losses and traumas they experience throughout their lives. Many of the members at The Good Neighbours' Club have shared experiences in separation and divorce, injury on the job, substance use, insecure employment and financial problems resulting from job loss. Although some have managed to overcome these experiences others have been scarred emotionally, mentally and physically. The loss of employment, a marriage and family members to death frequently results in the use of alcohol and drugs as a means to cope and survive such tragedies. For those interviewed, the experience of homelessness occurred later in life, after they had achieved successful careers and established family lives. It is evident that many older adults have great difficulty breaking the cycle of poverty that they find themselves in once they become homeless. Barriers to stable housing, employment and income have detrimental effects on relationships and health. Older adults are the most vulnerable members of our society and they should be the most valued members of our communities. The reality of homelessness and the emotional, mental and physical toll it takes is quite evident to those working in the field. When homelessness is the leading domino on the board life, it seemingly strikes and disrupts every aspect of one's life. What is scary is how homelessness can happen to anyone. A simple illness can lead to loss of employment, loss of income, loss of property and in the end the loss of a meaningful relationship. The loss of a stable life can open the door for temptations to numb oneself through other means. The hurdles we experience in life often present us with opportunities to grow as well as highlight our innate resiliencies. Every individual learns from their past experiences and grows as a result. However, one must also acknowledge the inner strength it takes to survive some of the struggles faced when life presents you with a poor hand of cards to play. For some older adults, the experience of homelessness coupled with previous losses and added stressors are almost too much to endure and overcome. The research attained from this qualitative study certainly indicates that grief and loss plays an important role in the older adult's experience of homelessness. It should not be left up to the homeless individual to combat this epidemic alone. Loss is an inevitable part of life and research on older adults and homelessness is necessary in order to combat this growing social problem. Grief and loss as it relates to homelessness is an area ripe with opportunities for future research and exploration.

Acknowledgements

Appendix

Interview Guide

Life Lessons

- What has life taught you about yourself?
- What has been the greatest lesson you have learned to date?
- What wisdom would you pass on to the younger generation?

Successes/Challenges

- What has been your greatest success?
- What would you say contributed to this?
- What has been your greatest challenge in life?

Relationships/Supports

- Where do you go now to get the support and resources you need to live?
- What suggestions would you give to make people better at helping you?
- Could you describe what your family life was like growing up?

Career

- What was the best job you ever had?
- What has your experience of the working world been like for you?

Housing

- Have you ever experienced stress related to your housing arrangements?
- What factors have contributed to your current housing situation?

Reactions to Grief

- What brings you joy in your life?
- Have you ever felt like your life was not worth living? What helped you through it?
- Have you ever served in the military? Could you tell me about this?
- Were there stressful situations that led you to use alcohol or drugs? How did this help you? What did this cost you?
- What other life events have been difficult for you to work through?
- To what degree has loss affected your life?

Life Improvements

- What needs to happen in your life to improve it?

- How has The Good Neighbours' club impacted your life?

- What professionals have you found helpful throughout your life?

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