LIMITATIONS: Traditional programs/services to help the chronically homeless are very expensive and fail to get results. New York City spends $62 million annually to shelter 2,500 chronic cases. In San Diego, 15 chronically homeless individuals racked up 417 emergency room visits in 18 months with bills upwards of $100,000 each.

STRENGTHS: In Malcolm Gladwell’s article titled “Million Dollar Murray,” Murray Barr thrived in the in-house arrest treatment program. It enabled him to sober up, find a job, and accumulate significant savings.

Limitations: Despite the growth of Housing First programs, 85,000 people experience chronic homelessness on any given night, 53,000 without shelter. According to the National Housing Institute, the focus on chronic homelessness has resulted in reduced funding and shelter beds for women and children.

STRENGTHS: The Homelessness Research Institute reports chronic homelessness dropped 30% since 2007. From 2013-14, chronic homelessness in Ohio dropped 20%. Utah’s Homeless Task Force reports it costs $8,000 per person/per year to provide permanent supportive housing versus $20,000 for traditional programs.

INDIVIDUAL

The three most common causes of chronic homelessness among individuals are *mental health issues, substance abuse, and chronic health problems.*

SYSTEMIC

Enormous sums of money are being spent on the chronically homeless (shelter stays, emergency room visits, ambulance service, jail stays, etc.) under the traditional housing readiness model used by some cities/shelters. Despite great expense to health care and social service systems, the chronically homeless tend to remain homeless under the housing readiness model.

* In “Million Dollar Murray,” Malcolm Gladwell asserts that chronic homelessness is hard to solve because individuals who fall in this category represent the most difficult cases in the homeless population. These homeless individuals suffer from mental illness, physical disabilities, and addiction. These problems require time, attention, and lots of money.
* The Housing Readiness model is prone to failure because it attempts to force individuals with addiction, mental health issues, and chronic health conditions into ongoing treatment programs that they may not be ready for before providing them with the stability of permanent housing. As a result, they frequently experience setbacks and remain homeless.

**PSL PROBLEM-SOLVING ANALYSIS GRAPHIC ORGANIZER**

**STRENGTHS AND LIMITATIONS OF POSSIBLE SOLUTIONS**

SYSTEMIC

The Housing First model, pioneered in the 1990s and popularized in the last decade, suggests that the chronically homeless have the best chance of improving if they have a stable home, access to counseling, and control over their treatment program.

INDIVIDUAL

Traditional programs/services to help the chronically homeless include temporary shelters with medical, behavioral, and mental health services as well as substance abuse treatment programs. These programs typically attempt to manage the symptoms of the chronically homeless.

**WHAT CAN BE DONE TO SOLVE THE PROBLEM?**

**WHY MIGHT THIS BE A PROBLEM?**

**CAUSES**

**PROBLEM**