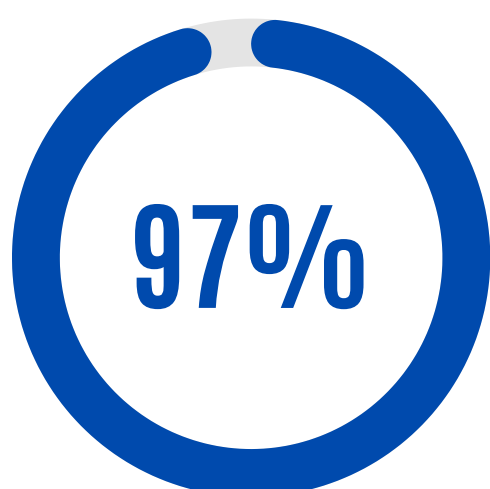
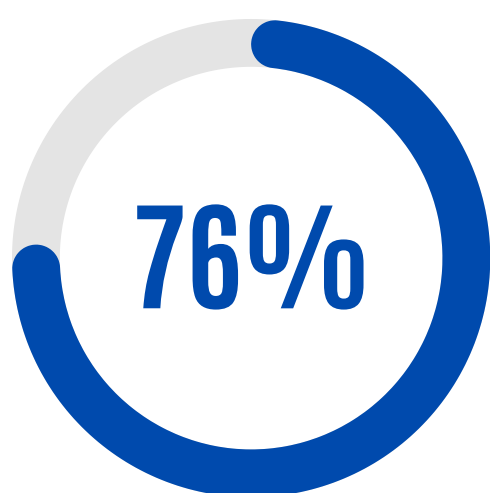


"Homeless Recidivism" Final-Research Data Highlights

30 Participants - Currently Experiencing Homelessness

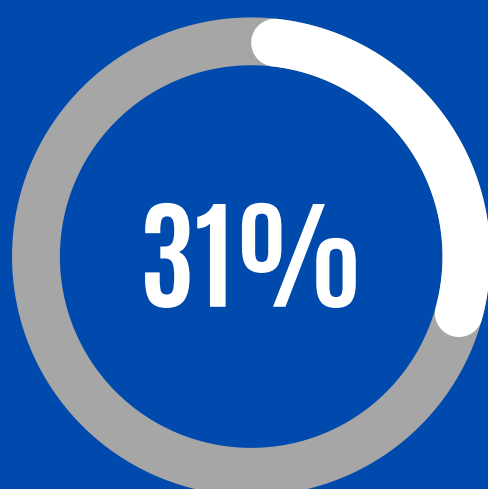


29 of 30 Participants Identified Some Form of Healthcare Issue/Concern (Physical, Behavioral, or Addiction). This Equates to 97% of Participants.



22 of 29 Participants Identified Emotional/Trauma Related Concerns. This Equates to 76% of Participants.

9 of 29 Participants with Health Concerns were Currently Receiving Treatment. This Equates to 31% of Participants.



16 of 30 Participants Utilize the Local Library to Obtain Social Services Information.

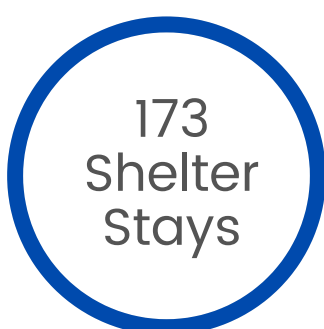


18 of 30 Participants Sought Assistance from resources when at risk of becoming homeless.



19 of 30 Participants Remain in the City/State of Their First/Original Homeless Event.

“Homeless services are too difficult to understand. I can’t get assistance because I don’t fall into a program category or criteria. I’m homeless, so how can I not be eligible for a homeless program?” Research Participant



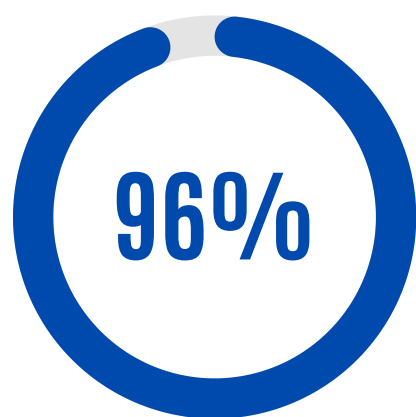
173 - Average Number of Shelter Stays/Nights per Participant (28 of 30) (2 Participants Identified as Never Staying in a Shelter)



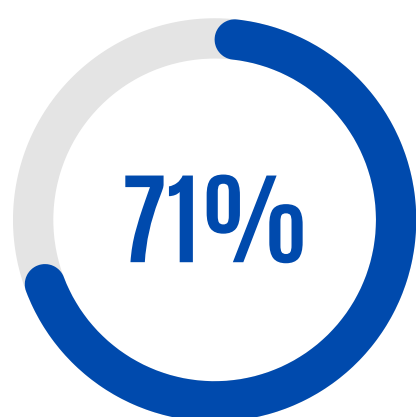
\$5,017.00 - per Participant Cost of Shelter Stays/Nights (173). (Estimate - \$29 Nightly Shelter Cost - per Person)

1 Jan 2022

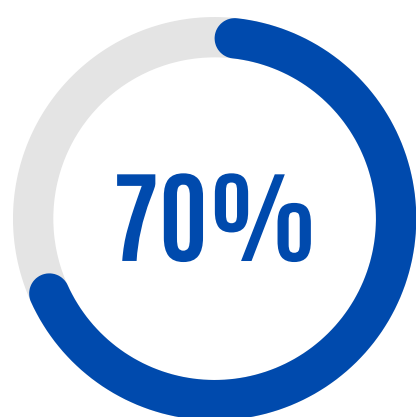
InspireRealChange



27 of 28 (96%) Participants Who Previously Stayed in a Shelter had Unsuccessful Shelter Exits/Outcomes (Returned to Homelessness).



20 of 28 Participants (71%) Who Previously Stayed in a Shelter Self-Exited Shelter/Exited by Choice.



14 of 20 Participants (70%) Participants with Shelter Self-Exit Reason: Needs Not Being Addressed

100% of Participants (6) Who Were Previously Housed Through a Housing Assistance Program Recidivated Back into Homelessness



100% of Participants - Positive Perspective of a Consolidated Triage Model of Care”

43%

12 of 28 Participants Received an Initial Case Management Assessment in a Shelter

5.5

5.5 Days - Average Number of Days to Receive Initial Case Management Assessment in a Shelter

57%

16 of 28 Participants Did Not Have a Case Manager Assigned During Shelter Stay

Research Data Analysis | Solution Focus

- Reform Case Management Through Integration of Biopsychosocial (BPS) Model of Social Services Care.
- Homelessness is a Trauma, Which Required Implementation of Trauma-Informed Care Model.
- Prioritize/Refocus Client Care/Case Management higher than Housing-First Model.
- Implement Quality Biopsychosocial (BPS) Assessments to Enhance Case Management for Clients (shelter entry/triage center)
- Consolidated Social Care Center Utilizing a Triage Model Approach to Increase Accessibility/Services to Unsheltered Individuals.