

Federal Resource: Case Scenarios

Case Scenario #1 John

John has been living in emergency shelter on and off for about two years but does not qualify as chronically homeless. When not in shelter, John typically stays with friends or stays in his car, which has becoming increasingly expensive to maintain. John works sporadically and has some disability income along with his “under the table” income. John has a number of housing barriers including two past evictions for drug use and a criminal conviction from a few years back. One main challenge John expresses is that he needs to find a permanent place to live where he can also maintain some custody of his four-year old daughter, who requires child care. John is also hoping to find more permanent, part-time work that will allow him to keep some of his disability income but supplement it with part-time employment. John has a disability and would qualify for PSH, but no PSH is available in the community. It is not clear if John would actually need PSH even if it was available.

What do you NOT know about John that would be helpful in determining the best program or intervention for his needs?

Knowing what you DO know, what are some of John’s key barriers/opportunities that might help guide the best intervention or program for him?

What are a few things that must be considered when enrolling John and beginning the housing search process?

What are the primary housing barriers you need to focus on in rapidly connecting John to housing?

What key services or skills must the RRH provider have to best assist John in obtaining and maintaining his housing?

Case Scenario #2 The Smith Family

Brenda is a single mother with two children under the age of 6. She served in the military during the early years of the Operation Iraqi Freedom but has since gone through a series of bad relationships and found herself living in a women's shelter with her children. Brenda has an 80% service connected disability designation from VA meaning her income is about 58% of Area Median Income. Brenda has consistent income in this regard, but she is not able to navigate the housing search process and needs help "pulling things together". Her children both attend school in a nearby county and transportation has been difficult; the school has sent multiple notices regarding the kids missing school. Brenda is concerned her kids might be taken away from her and is desperate to find a reasonable place to live. Brenda has signaled her desire to work but is visibly stressed and distraught when meeting with her shelter case manager.

What do you NOT know about Brenda's family that would be helpful in determining the best program or intervention for his needs?

Knowing what you DO know, what are some of Brenda's key barriers/opportunities that might help guide the best intervention or program for her?

What are a few things that must be considered when enrolling Brenda's family and beginning the housing search process?

What are the primary housing barriers you need to focus on in rapidly connecting Brenda to housing?

What key services or skills must the RRH provider have to best assist Brenda maintaining her housing?

Case Scenario #3 Jim Wilkins and Alexis Thompson

Jim and Alexis have been living in their car for about three months. Neither of them is working but both have had steady jobs in the past. They were asked to leave their last apartment due to non-payment of rent, but it is unclear if any formal eviction was filed. Jim and Alexis also have a dog which they refuse to “give up” for housing. When asked if either of them have served in the military, John responds “I ain’t no Veteran anymore”. They also report a history of drug abuse and have been deliberately parking their car away from their old neighborhood to avoid contact with some of their old friends. Both report being sober, but Alexis admits they occasionally use to dull the stress. She is adamant they could both maintain sobriety in housing and if they were able to find jobs. Jim also has serious lung problems and reacts poorly to dust and other allergens.

What do you NOT know about Jim and/or Alexis that would be helpful in determining the best program or intervention for his needs?

Knowing what you DO know, what are some of their key barriers/opportunities that might help guide the best intervention or program for them?

What are a few things that must be considered when enrolling them and beginning the housing search process?

What are the primary housing barriers you need to focus on in rapidly connecting them to housing?

What key services or skills must the RRH provider have to best assist them in maintaining their housing?

Case Scenario #4 Margaret

Margaret has been homeless for over a year and has a diagnosed mental health disorder. She qualifies as chronically homeless and scores high on the CoC's prioritization list. However, no PSH is available at this time. Margaret has, to date, resisted housing services, but last week she approached a Coordinated Entry access point asking for help. Outreach staff reports this is a major breakthrough and hope a housing connection can be made quickly while Margaret is willing to engage. Margaret has very little rental history and states she has never managed an apartment completely on her own. She's never held a lease. Her credit is neither good or bad – she's had very few financial things in her name in the past. Margaret does not have income. She has refused the application process in the past but would likely qualify for some form of disability income. She also volunteers at a local church a couple of days a week.

What do you NOT know about Margaret that would be helpful in determining the best program or intervention for his needs?

Knowing what you DO know, what are some of Margaret's key barriers/opportunities that might help guide the best intervention or program for them?

What are a few things that must be considered when enrolling her and beginning the housing search process?

What are the primary housing barriers you need to focus on in rapidly connecting her to housing?

What key services or skills must the RRH provider have to best assist her in maintaining their housing?