The State of Homelessness in San Diego and Solutions at Work

In May 2022, the Regional Task Force on Homelessness (RTFH) published the results of their annual Point-in-Time count which took place in February 2022.

The results from the count show a 10 percent increase in homelessness in the San Diego region from the same time in 2020, when the count was last conducted. In San Diego, there are no fewer than 8,427 individuals experiencing homelessness on a given night.

Point-in-Time Count Number and Methodology

RTFH has been clear that the Point-in-Time count results serve as a starting point and should be considered a minimum estimate of the number of individuals experiencing homelessness on that single night in February. It does not show the influx of people in and out of homelessness from week to week or day to day. As published in a separate report, RTFH estimates more than 36,500 San Diegans interacted with the homeless services system in the twelve months from October 1, 2020, through September 30, 2021.

Despite its limitations, the Point-in-Time count is largely similar from year to year, giving us useful insights into the problem. The 10% increase in homelessness seen in the San Diego community over the past two years is notable and disappointing. We can’t help but look at these numbers and feel frustrated.

Like many in the community, we ask: How is it, after the boost of funding and increase of homeless services over the past few years, that the number has only increased?

The truth is that the increased focus on homelessness over the past couple years has made a difference. However, at the same time that thousands of neighbors left homelessness behind, even more were falling into homelessness and becoming trapped by the treacherous cycle of severe poverty.

Impacts of COVID-19

The economic effects of COVID-19 shutdowns, job loss, and hospitalizations are being felt more acutely by low-income individuals and families who had the least access to the resources that would help them avoid homelessness.

In 2020, 80% of job losses were among the lowest quarter of wage earners (Gould and Kandra 2021), as service industries such as restaurants and hotels shuttered in response to the pandemic. While it’s difficult to track the exact long-term impacts of these job losses, recovery is evidently still in progress.

Even with unemployment support, the American Rescue Plan Act, and eviction moratoriums on a federal and state level, in early 2021, 37 percent of adults went into debt by using credit cards and loans for routine expenses even after receiving stimulus payments ( Household Pulse Survey Public Use, U.S. Census Bureau). By the end of 2021, 20 million households reported having too little to eat and 10 million households were behind on rent. By early this year, 3 million fewer people are employed than before the pandemic (Center on Budget and Policy Priorities).

All of this points to the fact that hardship on middle class Americans could’ve been far worse without pandemic-related interventions, but the impacts of COVID-19 are still felt disproportionately by those with the least room in their budgets, specifically people in poverty.

There is Always Hope

We’ll be discussing the impact of rising supply, food, and housing prices later in this report. However, it’s critical to note up front that these factors squeeze low-income individuals and families into making difficult decisions between critical needs: housing, healthcare or food.

All of these economic effects paired with other challenges, such as substance use disorders, mental health, justice system issues and dangers of encampments, have created a situation in which falling into homelessness has become easier while escaping it is increasingly more difficult.

However, despite the many challenges faced by the San Diego community as a whole and that our neighbors on the streets face on an individual level, there is always reason to hope.

Every day, there are innovative, compassionate, and life-changing solutions being piloted, developed, and implemented. Every day, people are finding the strength to move forward and leave homelessness behind. Every day, we move closer to a robust homeless services system with the economic and social safety net programs and policies necessary to make a lasting difference.

We are happy to share with you the flickers of light we see on the horizon and the solutions needed to truly prevent and end homelessness, one life at a time.
Overview of Key Issues & Summary Solutions

Issue 1 - Affordable Housing and Cost of Living

About Affordable Housing and the Cost of Living

Impacts of Increased Cost of Living and Housing Costs

With the average home price hovering near $1 million and the average apartment renting for more than $2,700 a month, many San Diegans struggle simply to keep a roof over their heads. And the problem is only getting worse: San Diego rents in 2022 are up by 18.84% compared to 2021.

A person working a full-time minimum job makes $2,600/month before taxes. Yet, the average cost of a studio apartment in San Diego is $2,000/month. This means they would be spending 77% of their gross income on housing alone. According to the National University System Institute for Policy Research, approximately 28% of the San Diego workforce over the age of 15 earns the equivalent of a full-time minimum wage salary or less. That’s a significant portion of the population. Additionally, disabled people living on Supplemental Security Income (SSI) receive an average of $1,000/month. According to RentCafe, only 1% of apartments rent for less than $1,000/month in San Diego.

Unfortunately, our low-income neighbors are becoming even more squeezed by the rising costs of inflation as well. The U.S. Bureau of Labor Statistics reports that April 2022 consumer prices are up 7.9 percent from a year ago. There are more and more individuals and families entering into dire situations where they are forced to make decisions between critical line items: Food or housing, gas or healthcare.

The cost of housing is largely driven by the competitive nature of the current rental and housing market: limited supply, high demand and low vacancy rates. Vacancies in housing are rare, considering the occupancy rate for stabilized apartment complexes is 97.6% in 2022. For every listing on the market there are approximately 29 people competing for the rental. So, if an individual or a family loses their housing for one reason or another—their lease ends, their rent increases outside of their budget, or the property manager plans to renovate—they can have a matter of a month to find a home they can afford in a very competitive market. In this scenario, it’s easy to imagine how one can become homeless.

Given all of this, it is not surprising that a recent study found that a lack of affordable housing was the single strongest predictor of rates of homelessness in a given community.

Solutions

Build More Affordable Housing

The most critical way to alleviate the pressure of rising rents on low-income San Diegans is to build more affordable housing options in the community. In 2017, Father Joe’s Villages announced the Turning the Key Initiative to expand on its existing portfolio of housing and build 2,000 additional units of affordable housing in San Diego. In 2020-2022, Father Joe’s Villages opened both Benson Place and Saint Teresa of Calcutta Villa communities—offering nearly 500 affordable housing units combined. Now, Father Joe’s Villages has over 300 units in the development pipeline, on top of the nearly 900 affordable and supportive housing units it already offers in the community.

Streamline Construction and Funding for Affordable Housing

Our policymakers must address limits to building housing in the first place—such as simplifying the funding process for affordable housing developments or alleviating the red tape erected for developers to build much-needed high-density housing. A streamlined permitting and funding process will make it easier, faster and less costly for our region to meet demand for housing.

Subsidies for Seniors

In September 2021, Serving Seniors released a report titled Senior Homelessness: A Needs Assessment. In the report, Serving Seniors found that “more than half (56%) of those interviewed report an additional $300 or less of monthly income would increase their rent security.” Ultimately, Serving Seniors suggested the expansion of shallow-subsidy programs and the establishment of a permanent financial subsidy program for older adults. Shallow-subsidies divert current federal reimbursement funds for emergency shelter beds toward stipends that keep seniors in existing housing and divert them from the shelter system. This would result in approximately $375 per month to help seniors with rising costs and keep them from ending up on the streets.
About Health Care & Homelessness

Downward Spiral of Health & Homelessness

One study conducted by the Boston Health Care for the Homeless Program showed that the average life expectancy for people experiencing homelessness in select cities was between 42 and 52 years. Among homeless populations, rates of diabetes, hypertension, heart attack, HIV, depression, and Hepatitis C are significantly higher than housed populations.

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Pain, chronic illness and disability can prevent individuals from being able to secure income and housing. In this way, burdened by medical bills and unable to work, poor health can be the primary cause of homelessness. Alternatively, health issues can also be caused by the brutal and often traumatic nature of homelessness or can make pre-existing issues much worse. In this way, health and homelessness can compound the negative consequences of both, making overcoming homelessness even more difficult for the people we serve.

Use of Emergency Services

Unfortunately, many homeless people lack a source of primary care, and instead rely on acute services, like emergency medical care and hospitals. Because of the harsh nature of homelessness—exposure to weather and the elements, the influence of instability on mental health, the health impacts of poorer nutrition and less comfort, the regular use of substances (by some)—our neighbors living without shelter for long periods of time will more often need emergency medical care and psychiatric assistance.

Unfortunately, the current hospital system is set up to treat the immediate medical concerns of people experiencing homelessness and then immediately release them to the streets. This creates a cycle of people being released and readmitted repeatedly because they don’t have the facilities and resources to recover on the streets and hospitals are ill-equipped to address the underlying health and housing issues. This cycle of people going to hospitals and emergency rooms, to the streets and back again, results in thousands of dollars in medical bills.

Access to Behavioral Health Care

Since the loss of federal funding for mental health hospitals in the 1980’s and the loss of tens of thousands of beds in State Hospitals, behavioral health services in California have been woefully underfunded, resulting in long wait times for patients who need immediate care.

The San Diego Business Journal reported that patients waited an average of nearly 14 days for post-hospital behavioral health care in 2018—a number that had been steadily increasing since 2014. Although similar data is not available for 2021, we know that the need for behavioral services and understaffing has only increased during the COVID-19 pandemic. Across Federally Qualified Health Centers in San Diego, for example, there has been a significant waitlist for therapy appointments due to staffing shortages and an increase in community need.

Sadly, there is also a portion of the population who suffer from Serious Mental Illness and are unable to seek help, even if it was readily available. Furthermore, they are unable to address their immediate needs, living in squalor and hunger on the streets. Many of these neighbors, due to the severity of their illness, do not have the capacity to make informed decisions about their health and wellbeing.

Solutions

Recuperative Care

Recuperative Care provides people who are experiencing homelessness with temporary shelter following a hospital discharge, to prevent them from falling back onto the streets while ill and recovering. Father Joe’s Villages currently offers 28 beds of Recuperative Care and contracts with all seven health plans in San Diego to provide care.

Expanding Behavioral Health

The rate of serious mental illness in California increased by more than 50 percent from 2008 - 2019, and the pandemic has likely only exacerbated those rates further in the past year (SAMHSA). More robust behavioral health service options are critically necessary to meet this rising need, not just to benefit people experiencing homelessness but also to save money and save lives.
all Californians. Crisis services, community based living options, same-day services, and early intervention programs for children need to be built out in our community so that people are able to get critical care that will help them maintain self-sufficiency and wellness.

Conservatorship
San Diego needs better tools to intervene in severe cases of human suffering. Under conservatorship, a judge appoints a caretaker to oversee a person’s medication, financial decisions and other activities when they have demonstrated consistently that they are unable to care for themselves. For example, one of the biggest challenges those on the streets face is a lack of personal safety. They constantly must worry about being attacked or having their things stolen or lost. Medications are very frequently lost or stolen, making managing acute and chronic health issues very challenging. At Father Joe’s Villages, we work with patients of our Village Health Center first and foremost to get housing so that medications are not lost or stolen and so that their health conditions don’t worsen from the exposure and stress of the streets. In this way, obtaining that housing is often a critical step to achieving better health outcomes or even to saving a life.

Viewing Housing as Healthcare
The concept of “housing as healthcare” supports the idea that those who are homeless must get housing in order to improve their health. Often the social issues that people face, such as extreme poverty and food insecurity, are inseparable from their health issues. For example, one of the biggest challenges those on the streets face is a lack of personal safety. They constantly must worry about being attacked or having their things stolen or lost. Medications are very frequently lost or stolen, making managing acute and chronic health issues very challenging. At Father Joe’s Villages, we work with patients of our Village Health Center first and foremost to get housing so that medications are not lost or stolen and so that their health conditions don’t worsen from the exposure and stress of the streets. In this way, obtaining that housing is often a critical step to achieving better health outcomes or even to saving a life.

Issue 3 - Substance Use

About Substance Use
If one were to ask Father Joe's Villages' Outreach and Street Health teams the question "What is the number one barrier facing neighbors living on the streets?" their immediate and unified answer would be substance use. Substance use is causing massive devastation and suffering on the streets of San Diego. It is important to note that not all people experiencing homelessness struggle with substance abuse; however, it is a major barrier among many chronically homeless individuals living outside in encampments and on sidewalks.

Determining the Rate of Substance Use
Despite the fact that substance use is a major known issue by homeless service providers, the San Diego region does not currently have an accurate picture of the size of the problem. Only 9 percent of 2022 Point-in-Time count survey participants reported that they have a substance use disorder (San Diego Union-Tribune, RTFH). However, this number is gained solely through self-reporting where people may inaccurately deny substance use. The U.S. Substance Abuse and Mental Health Services Administration reported in 2010 that 34.7% of all sheltered adults who were homeless had chronic substance use issues. Various studies largely agree that approximately one third of individuals who are homeless experience issues with substance use (Polcin et al, 2016). By comparison, approximately 15% of all Americans have a substance use disorder, showing that people who are homeless experience substance use disorder at a rate more than twice as high as the average person (SAMHSA).

As further evidence of this troubling situation, the number one cause of death among people experiencing homelessness is overdose, which is only getting worse. While the latest numbers for San Diego are not out yet, the San Diego Coroner's office’s most recent mid-year report listed overdose as the overwhelming leader in unintentional deaths. Such deaths caused by drugs, medication, and/or alcohol increased by 67% year over year.

People who are homeless experience substance use disorder at a rate more than twice as high as the average person.
Similarly, the LA Times reported that a 56% increase in deaths within the homeless population in Los Angeles was largely driven by increased overdose deaths which jumped from just over 400 in the pre-pandemic year to 715 last year. This mirrors Father Joe’s Villages’ own experience in which the number of times staff have had to administer emergency doses of Narcan, a medication used to treat known or suspected opioid overdoses, has risen dramatically in recent years.

**Reasons for Higher Prevalence Among People Who Are Homeless**

Why is substance use at a higher prevalence for people experiencing homelessness? Whether a person starts using drugs or alcohol before or after they become homeless, the state of homelessness does nothing to support recovery or abstinence. Due to the many barriers that result from not having a home, our neighbors often report feeling powerless and hopeless, which in turn encourages neighbors to look for ways to feel better in ways they can control.

Oftentimes, substance use begins as a way to cope with mental illness and the stress of poverty. Frequently, people are facing a history of acute trauma from childhood, military service, or even their time on the streets, and experience the cycle of depression and self-medication as a result. Drugs and opioids are more accessible through distribution, and additives like fentanyl are making them cheaper and more dangerous. Escaping from the horrors of homelessness by getting high or drunk is easier and deadlier than ever.

**COVID-19 and Substance Use**

Sadly, the COVID-19 pandemic has only increased substance use. According to one study published by Kenneth Dodge et al in December 2021, “The rates of alcohol or illicit substance use problems increased from pre-pandemic to post-pandemic onset from 13% to 36%” in the U.S. in general. People had higher chances of relapse as their support systems fell away. In-person meetings, for example, were exchanged for virtual options, which are much more difficult for people experiencing homelessness to access.

**Solutions**

In general, as a community, San Diego needs to prioritize models that employ immediate resources, empathy, client choice and a medical understanding of substance use disorder, and we need to build out these resources on a much larger scale.

**Same-Day and Diverse Services**

When an individual makes the decision to address their addiction, we must have treatment options available immediately, before neurological dependencies and past traumas have the chance to take hold and drive them back to using. Yet there is a lack of available treatment options in our community, making it even more difficult for people to gain access to resources when they’re ready to take the next step. Programs that offer immediate entry and on-the-spot support from an Alcohol and Other Drug (AOD) Counselor can help people onto the right path at the critical moment. Father Joe’s Villages’ substance use disorder services at the Village Health Center offers walk-in services 8:30 am - 4:30 pm Monday through Friday.

Additionally, it is critical to offer a variety of service options to fit the varied needs of people with substance use disorder. These choices would offer an array of the types of treatment available, including Medication-Assisted Treatment, harm reduction models, inpatient and outpatient services, 12-step or group-based services, both sober and low-barrier shelters, and housing.

**Medication-Assisted Treatment**

Medication-assisted treatment (MAT) offers medication in combination with counseling and behavioral therapies to help address both the physical and the psychological impacts of substance use. According to SAMHSA, use of FDA-approved medications in combination with evidence-based therapies can be effective in the treatment of substance use disorder and may help recovering users stay in treatment longer, extending periods of sobriety and paving the way for successful recovery. MAT also makes people less likely to die from substance use. Father Joe’s Villages offers MAT through the Village Health Center and is piloting the integration of MAT with Street Health services that travel out into the community to offer health services to people living on the street.

**Harm-Reduction**

For some people, stopping substance use may not be possible due to the health impacts of quitting or the severity of their disorder. Harm-reduction practices can help neighbors minimize negative health, social and legal impacts as a result of substance use, moving them closer to recovery, even if they are not ready to completely stop use at the present time. This approach sets people up to more successfully exit homelessness as well. Father Joe’s Villages’ Alcohol and Other Drug (AOD) Counselors, behavioral health clinicians, tenant services staff and primary care team use harm-reduction approaches to empower people to make their own goals and give them access to the tools they need to achieve those goals. This way, neighbors learn to reduce the negative consequences of drug or alcohol use and feel that they have control over their futures.
Sober and Non-Sober Shelter and Housing Options

By offering a diverse range of shelter and housing solutions in the community, we empower our neighbors with options that meet them where they are in their journey.

Based on consistent feedback from those with lived experience, it is clear that some neighbors in recovery require a completely sober shelter environment to thrive. Likewise, others without substance use barriers choose to live in an environment without drugs and alcohol, especially parents with small children. These neighbors might be looking for a program with clear rules and consequences for substance use, distancing them from the behaviors and temptations of use. Along this line, for neighbors with children who would benefit from a more structured environment, beginning in the fall of 2022, Father Joe’s Villages is piloting the Family Empowerment Program that will provide a sober-living shelter for ten families with a heavy focus toward helping parents find and maintain employment. This pilot program will add another option in the community so that people can access services that best fit their needs.

At the other end of the spectrum, most shelters or housing funded by local, state or federal governing bodies are required to be “low-barrier” shelters, which often means they do not require sobriety for entry. Based on feedback from some neighbors, this approach is critical in order to ensure that they take advantage of available shelter options. They may not be mentally or physically ready to commit to sobriety, leading them to refuse any option that requires that they completely quit using alcohol or other drugs. Moreover, removing them from the triggering environment of the streets where they are surrounded by substance use can help them make steps toward recovery and behavioral wellness and can allow staff members an opportunity to help them in achieving those goals.

In the fall of 2022, Father Joe’s Villages is piloting the Family Empowerment Program that will provide a sober-living shelter for ten families with a heavy focus toward helping parents find and maintain employment.

Issue 4 - Designated areas for homelessness and encampments

About the Locality of Encampments

Enforcement and Construction Causing Crowding

When our supporters have the opportunity to tour the Father Joe’s Villages’ campus in the East Village, they often remark on the number of encampments in the area. Critics have often complained that Father Joe’s Villages’ services draw people to the area, but the truth of the matter is that the East Village has a long history of being the settling ground for people experiencing homelessness. The St. Vincent de Paul Center was built on 15th St and Imperial in 1985 specifically because that’s where we knew our services would make the greatest difference. There are a few key reasons why this area has become an especially dense location for homelessness in the downtown San Diego area.

As noted above, homelessness is associated with many quality of life or “survival” crimes, such as sleeping in store fronts or camping on sidewalks. Local agencies are able to influence through enforcement, ticketing, and waste disposal where people are able to settle. A natural result of this is that they tend to push neighbors from areas where there are more residences and businesses to underdeveloped areas where fewer people will submit complaints.

The second influencing factor of where people settle is construction. Over the past ten years, the frenzied construction of luxury apartments and condominiums in the East Village and Downtown area has resulted in less unattended sidewalk space on which people can reside. Therefore, they were pushed into the corner of East Village that was still largely undeveloped. You can see this movement over the years through the numbers of the monthly Make Change Count conducted by the Downtown Partnership, which show a movement between the different parts of East Village from month to month with the largest concentration in South East East Village where there is the least amount of construction and enforcement.

Additionally, hidden places, such as encampments under overpasses, on the side of freeways, and in canyons, have received a lot of additional attention over the past few years. Many are being cleared to protect from fire danger and to get people to move closer to services. People have to move to a new place and they will settle where they’re allowed to settle—which, for many years, has been the East Village and downtown area.

Consequences of Designating Specific Areas for Homelessness

When people are only allowed to settle in limited spaces, it can cause several issues as a result of overcrowding. First, people will typically have more conflict and feel that they need...
to defend their property when they are forced into very tight living spaces. Second, it creates an easily identifiable area for drug dealers and gangs to target vulnerable people for dealing and theft—essentially an open-air drug market. Lastly, overcrowding in a specific area can create a risk of public health crises.

In April 2022, the Downtown San Diego Partnership counted over 1,400 individuals living on the streets of Downtown, including an area that was previously not counted, rivaling the highest count of unsheltered people in San Diego since 2017. As a reminder, in 2017, San Diego saw the outbreak of Hepatitis A, which was largely caused by people living in close proximity to one another without access to bathrooms or hygiene services. At the end of the epidemic, there was a total of nearly 600 cases and 20 deaths as a result of Hep A. In 2021, we saw the Shigella outbreak, which again arose out of unsanitary encampments.

While many may cite shelters as the reasonable alternative to encampments, based on feedback we receive from those living on the streets, shelter is not always the first choice for a variety of reasons. Whether it’s due to post-traumatic stress disorder and serious mental illness, substance-use disorder, or general distrust of the system after years of trauma, there will always be those who cannot or will not enter shelters.

In addition to being unsightly, encampments are sources of trash and excrement, exacerbate challenges related to drug dealing, and can result in public health challenges. It’s understandable that local residents and public officials alike are frustrated by their existence. However, at the same time, the residents of these encampments are humans living in poverty, often experiencing severe mental illness and/or substance use disorders. Disbursing encampments does not address the root cause. There have to be reasonable and safe alternatives for those living on the streets.

**Solutions**

**Safe Villages**

Safe Villages are transitional communities of tents, cottages, “pallet” homes or other types of temporary housing, arranged in campgrounds or in parking lots that also include basic amenities such as restrooms and shared cooking facilities. They are monitored by security and staff and often provide access to supportive services and housing navigation to help people find permanent housing. Safe Village communities have been created in Los Angeles, Fresno, Portland, San Francisco, Seattle and other cities, demonstrating a reduction of public health concerns such as waste and trash and offering an alternative to tents blocking sidewalks and streets in certain areas. They provide a cleaner, more secure environment for people who are unwilling to enter shelter, while also bringing them closer to services that can actually end their homelessness for good. Father Joe’s Villages has been exploring Safe Village options and supports the creation of this kind of community as a strategic alternative shelter type in a broader continuum, as long as it has the right level of security and service support.

The San Diego Day Center for Homeless Adults offers a safe place to rest during the day, along with other essential resources.

**Awareness and Prevention**

It’s critical that law enforcement agencies, elected officials, and local residents are cognizant about how enforcement and construction pushes people into specific areas. By taking a macro-level look at where people are “allowed” to stay, we can develop a better understanding of the consequences of enforcement actions and greater consideration of the distribution of tents and encampments to benefit the safety and public health of our community.

**Outreach & Day Centers**

Whether it’s due to PTSD and mental illness, substance-use disorder, or general distrust of the system after years of difficulty, shelter is not always the first choice for some individuals on the streets. Outreach teams, Day Centers, and services that provide for basic needs, like meals, are needed to build relationships with those who cannot or will not enter shelters, and ultimately to alleviate their suffering.

The San Diego Day Center for Homeless Adults provides a safe space where people experiencing homelessness can spend time during the day. Critically, it also provides restrooms, showers, laundry, storage, a mailing address and serves as an intake center for people living on the streets.

Father Joe’s Villages’ Outreach Services team canvases the streets to offer assistance to people experiencing homelessness. For those ready to accept help, they offer them space in one of Father Joe’s Villages shelters. They also work to connect them with other resources such as meals, showers, medical care and more that will help them out of homelessness and improve their quality of life. Because both Outreach and the Day Center connect with people on a daily basis, they are able to establish rapport and trust that can make all the difference in getting someone connected with the services they need.
About the Intersection of Homelessness and the Justice System

Criminalization of Homelessness

Homelessness and the criminal justice system can be greatly intertwined due to “survival” crimes and/or crimes that occur as a result of substance use disorder (aka drug possession, etc.). In many communities, homelessness itself is treated as a crime. Homeless people are often arrested for actions conducted as a result of their homelessness, such as seeking shelter in private property or sleeping on a park bench or in their car, which results in tickets, fines, penalties, and jail costs that the person cannot afford to pay and may make it more difficult for them to find a job or rent an apartment. It is important to note, however, that the likelihood of these actions being prosecuted depends on the priorities of the City’s most current administration.

The Unhelpful Cycle of Jail and Homelessness

According to a report by the Prison Policy Initiative, formerly incarcerated people are almost 10 times more likely to be homeless than the general public. This is largely because of the cycle of jail and homelessness.

The fees of prison and jail result in increased debts that prevent neighbors from being able to save for or secure housing. A competitive housing market means landlords can be choosy. Property owners and public housing authorities have the ability to implement their own screening criteria to determine if an applicant merits housing, and most exclude formerly incarcerated people. As a result, many formerly incarcerated neighbors don’t have the means to break free from homelessness.

In addition, the stigma of having a criminal record can prevent individuals from being able to obtain employment. Many jobs screen the records of applicants to eliminate new hires they consider to be potentially risky, which often includes formerly incarcerated people. Moreover, many of these individuals have limited education and work experience, which makes it difficult for them to secure employment after they are released from jail or prison.

Additionally, according to the U.S. Department of Justice, jail and prison time does little to help neighbors recover from substance use disorders. Drug/alcohol intoxication was found to be the third leading cause of death in prisons (after illness and suicide) in 2018 (E. Ann Carson, 2023). The National Institutes of Health reports that 65% percent of the United States prison population has an active substance use disorder.

Lack of Enforcement Against Drug Dealing

Without the simple ability to lock their front door, and due to their increased vulnerability, people experiencing homelessness are often targeted by gangs, drug dealers, and other local criminals. Isolation, health problems, traumatic events, and lifestyle-exposure all significantly increase the odds of being victimized. For this reason, homeless individuals experience violent victimization at a rate of 14-21% (Fitzpatrick, LaGory, & Ritchey, 1999; Lee & Schreck, 2005), which is seven times the likelihood of the general population to experience a violent crime (Truman, 2011).

Drug dealers are able to target people who are homeless inessantly and aggressively, threatening their wellbeing if they don’t buy or participate.

At the same time, police are often overburdened and understaffed in their efforts to remove these aggressors from the streets. During COVID-19, courts were closed which created a tremendous backlog of cases, resulting in it being more difficult than ever to build a case against and convict drug dealers. Additionally, the current atmosphere around policing and the difficulty of the job has created heavy attrition in the police force, with many feeling vilified or that they are not able to make a positive impact in their community through policing. This means that, despite the police force’s best efforts, drug dealers are able to continue violent pedaling and pushing on the streets of San Diego.

Solutions

An Aggressive Stance Against Dealing

Police play an important role in removing criminals who are targeting vulnerable populations from the streets and they need and deserve the resources to do so. Although it may be easier to target users of illicit substances, there are often only negative impacts to incarcerating people with substance use disorders. However, we do support police taking an aggressive stance against the dealers who distribute harmful drugs and create a dangerous environment on the streets of San Diego. This may mean more resources must be
invested into expanding courts and police investigations in order to build cases against and prosecute dealers.

**CARE Court and Similar Programs**

As mentioned above, there are no productive consequences currently offered for substance use in our current justice system. For that reason, in the case of extreme substance use disorders, service providers must stand by and watch because they are unable to help if that person does not have the capacity to accept help. Doing nothing means some of these individuals will die alone on the streets, but often providers’ hands are tied in terms of intervention. That’s why Father Joe’s Villages supports court-level interventions that offer intensive behavioral health and substance use disorder treatment services in place of incarceration.

Senate Bill 1338 or “CARE Court” is one such proposal running through the California Assembly at this time, which would “authorize specified persons to petition a civil court to create a voluntary CARE agreement or a court-ordered CARE plan and implement services...to provide behavioral health care, including stabilization medication, housing, and other enumerated services to adults who are suffering from schizophrenia spectrum and psychotic disorders and who meet other specified criteria.” While the percentage of those on the streets suffering from The commonality of co-occurring psychotic disorders is relatively low, and those who would qualify for this kind of extreme intervention represent an even smaller percentage, and substance use means it is clear that a number of neighbors living on the street would benefit from this program. CARE Court or a similar service-based court program would be a great first step to offering new tools to service providers and justice systems to help people access critical and life-saving behavioral health services right when they need them most.

In Spanish, the verb to hope is “esperar.” The fact that it is also used to mean “to wait” is indicative of an understanding that an inherent part of hope is expectation. We wait with anticipation that something positive will happen.

Of all of the solutions mentioned in this report, perhaps the most critical is the need to create hope. When people feel that they have no option for a brighter future or an alternative to homelessness – they can’t afford housing, they can’t qualify for or maintain a job, they have no options to address their substance use or mental illness – they give up. Hope is fundamentally created by providing options that offer viable paths out of their current situation and showing each person that they’re worthy of something better. At Father Joe’s Villages, we believe in each person’s capacity for change and our staff work each and every day to help our neighbors believe it too.

Without a support system, without love, and without hope, neighbors languish on the streets, stuck in cycles of depression, anxiety, and substance use. However, Father Joe’s Villages shows them that there are still people who care and who believe in a better future for them, even if at first they themselves do not. We invite them in without judgment and then empower our neighbors to understand and learn about the impact of decisions they make. At the same time, we offer positive alternatives to the obstacles that might hinder their journey out of homelessness.

As has been described, our neighbors are facing enough barriers – whether it’s housing, healthcare, substance use, or mental illness. That’s why we as a community must create opportunities.

However, Father Joe’s Villages can’t do this alone. It takes the collective will of a community to create the systems and opportunities necessary to help each and every person out of homelessness. It takes all of us to expand programs and services so that each and every person can find solutions tailored to their specific situation. Together, we can envision and create a better tomorrow where each San Diegan can say with assurance: Hope Lives Here.

**Conclusion and a Note on Hope**

In Spanish, the verb to hope is “esperar.” The fact that it is also used to mean “to wait” is indicative of an understanding that an inherent part of hope is expectation. We wait with anticipation that something positive will happen.

Of all of the solutions mentioned in this report, perhaps the most critical is the need to create hope. When people feel that they have no option for a brighter future or an alternative to homelessness – they can’t afford housing, they can’t qualify for or maintain a job, they have no options to address their substance use or mental illness – they give up. Hope is fundamentally created by providing options that offer viable paths out of their current situation and showing each person that they’re worthy of something better. At Father Joe’s Villages, we believe in each person’s capacity for change and our staff work each and every day to help our neighbors believe it too.

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