



UNSHELTERED ENCAMPMENT OUTREACH STUDY

San Joaquin County Unsheltered Outreach Survey
Findings, Results, and Recommendations 2023

Prepared by



In Partnership with



United Way of San Joaquin County

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Dedication

*This report is dedicated to the numerous people experiencing
homelessness in San Joaquin County;
To a legion of caring professionals and community members helping
find pathways to healing, housing, and hope; and
To everyone who lifted their voices and had the courage to share
their stories for this report.*

About This Report

By any measure, homelessness in the United States is both a humanitarian and economic crisis. Let us begin with this simple statement: the issues related to homelessness are many-faceted and not easily solved. This report does not pretend to be a “solution” to the crisis we face across San Joaquin County. Instead, the report’s goal is to serve as a vehicle for all of us to better understand the gravity of why people experience homelessness from the perspective of those who are living unsheltered during that moment in time.

Over 300 people from each city in our county provided our listening teams with in-depth interviews as part of this unique study. The voices we heard were deeply moving, heartfelt and, at times, challenging to hear due to the raw nature of the conversations. The data is an outcome of those bare-boned and honest dialogs.

Each face-to-face interview, hosted under a bridge, in a food line, or at a car serving as a home for a family, gave us newfound insights and awareness to shift our thinking about homelessness and why we must begin to understand how our existing city homeless action plans might use this information to adjust planning, course correct prior assumptions, or advance resource deployment.

Homelessness touches every segment of the community, regardless of race, gender, age, or economic status, but its impact is not evenly distributed. Homelessness is as much of a diversity and racial injustice issue as it is an economic one. For example, African Americans represent only 13.4 percent of the U.S. population but account for 39 percent of those who are homeless and more than 50 percent of homeless families and children. This finding illustrates the disparate impact

that economic inequality and the lack of economic mobility have on the ability to find certain affordable housing. Our interviews time and time again recognized that disparity and the personal economic challenges which have left many vulnerable to homelessness due to race.

While data is critical to our understanding of poverty and homelessness, this report suggests that listening and empathy are equally powerful. “If we learn to regard people less in what they do, and more in the light of what they suffer,” we might then enable ourselves to chart a better course to help those whose needs are unparalleled to our own and thus create solutions, policies, and systems which can make a lasting impact on reducing and preventing homelessness.



Letter From the Committee

The birth of this report, of this process, was initiated during the midpoint of the COVID-19 pandemic in 2020. Our initial assumption was to reach out to the unsheltered homeless with the goal of gaining their perspective on why they were living in such challenging circumstances and to understand their reluctance to seek support within our existing shelter systems or grasp their unwillingness and aversion to leaning into care for behavioral or physical conditions. Most importantly, we truly wanted to hear, firsthand, if our current processes in addressing the growing homelessness issues in San Joaquin County (SJC) were relevant. We knew that if we listened, we could find greater resolve, better planning, and stronger systems of support for the over 2,000 people living unsheltered in our cities.

As we began the process of gathering teams of volunteers for this task, the COVID-19 pandemic continued to escalate, and as a result, we put the project on hold until which time we could recommit ourselves without excessive risk to the health or safety of our listening teams. During that hiatus, we consulted with experts and agencies including, the San Joaquin County Continuum of Care, the U.S. Department of Housing and Urban Development (HUD), and others listed on the Project Team, to refine our survey process, test our methodology and improve our line of questioning. In some ways, the hiatus helped us create a better approach to hearing the stories of those living unsheltered.

The goals of the survey included the following:

- Understand the life experiences that may have contributed to an individual becoming homeless
- Further learn of the factors, such as poverty, unemployment, and lack of affordable housing, which contributed to homelessness
- Help decision makers and city leaders advocate for and allocate resources that can serve the unique needs of individuals experiencing homelessness

Our interview tools were also varied. With the support of San Joaquin County Office of Education's CodeStack Academy they built and coded a new form of a transactional interviewing tool using a digital app to collect information from each individual interviewed. We measured this against a standard paper and pen version to test our ability to collect data, maximize the interest of each individual participant in the interview process and ensure that both the digital and paper option worked.

Our partnership with San Joaquin Data Cooperative amassed qualitative and quantitative data, which touched on various topics such as current living arrangements, health and well-being, services and resources, family/partners, and COVID-19 effects. Their expertise and acumen in data collection and resultant tabulation of that data yielded a report analysis that we are very proud of as a collective team.

During an unprecedented year, SJC has remained steadfast in its commitment to addressing homelessness. Every city within the county developed new shelter systems, tiny homes, navigation centers, or emergency shelters. Existing shelter providers have been blessed with unprecedented funding due to the pandemic and have used those resources to increase bed capacity, staff, and resources for the unsheltered to receive care and treatment for physical and psychological maladies.

About the Project Team

For over a year, in and out of our pandemic existence, this report was crystalized due to the diligence and expertise of the following members of this Listening Tour of the Unsheltered. Their dedication to this important process has given us the vision, foresight, and support to share our findings across San Joaquin County in hopes of using this information as a tool to forge ahead in our path to reduce homelessness and understand the complex experiences of those who find themselves without a roof over their heads.

Without these individuals, we might never have heard the voices of people whose lives have been transmuted by economic hardships, poverty, and abuses of all types.

Let this report be a beginning, not an end.

CodeStack Statement

CodeStack is the software engineering division of the San Joaquin County Office of Education.

CodeStack's mobile application development team along with CodeStack Academy students created the Project Homebound mobile application for both Google's Android OS and Apple's iOS as a secure, efficient, and electronic surveying tool. The Project Homebound app included input validation, offline mode, duplicate checks, GPS location tracking, photos and more for the data collection of the study.

Data is key in identifying solutions to multi-layered complex problems like homelessness. CodeStack specializes in building and leveraging software as the vehicles for collecting such data and is passionate about doing its part to serve the community.

And the “every other year” Point-in-Time (PIT) Count was hosted in January 2022 to conduct a census of the homeless yielding further demographic insights into those who are living in unsheltered and sheltered circumstances. And, this year, a study of unsheltered Foster Youth was disseminated as a means to track Transitional Age Youth ages 18-24 who were homeless.

A key component of this report was capturing the needs and hardships of the unsheltered community through a first-hand perspective rather than perceived needs. The creation of this report unfolds the stories of those experiencing homelessness, while also revealing the greatest needs and areas of improvement among our service providers.

While we know there is no singular solution to ending homelessness, it is our hope that this report can be used in a number of ways to drive the development of solutions to these challenges and to return humanity towards housing, prevention education, and redirecting copious resources to agencies who can detect and treat early signs of behavioral or mental health concerns, thereby reducing the likelihood of individuals and families slipping into homelessness.

Let this report be the beginning of an ongoing conversation that ultimately results in our communities retrieving their humanity and building stronger systems of support in making homelessness rare, brief, and non-recurring.



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Acknowledgments



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Health Services**

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Lodi Committee on Homeless

Kathryn Siddle, Lodi Committee on Homelessness



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The Echo Chamber

Anthony Robinson, Executive Director



Tracy Community Connections Center

Wayne Templeton, Board Member/Volunteer



Emergency Food Bank

Leonard Hansen, CEO

Alexandra Marapao, Lead Nutrition Educator & Pantry Developer

Data Collection Methods

The developed survey collected both quantitative and qualitative data that touched on various topics, such as current living arrangements, health and well-being, services and resources, family/partners, and COVID-19 affects. The type of survey developed was a paper version as well as a mobile app version. Both were disseminated through different areas of the county, including Stockton, Lodi, Manteca, and Tracy. During the months of October and November 2021, volunteers surveyed homeless individuals at various locations, including parks, street

encampments, churches, and other open spaces. As an incentive to take our survey, individuals who participated in the survey were provided a gift card for their time. In addition, 23 referrals were made to social workers for families who had taken the survey, which included referrals to CVS Pharmacy for the COVID-19 vaccine, St. Mary's Dining Room, and the Emergency Food Bank.

A total of 338 printed surveys and 6 mobile app surveys were completed (344 surveys overall). After data cleaning in which

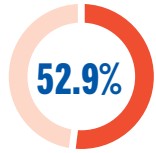
duplicates were removed along with data from individuals who were not considered unsheltered in the past week, a total of 243 surveys were used for the main analysis of this report. It is important to note that not every participant answered every question. Because of this, the number of respondents for specific questions will be included for reference throughout the report.



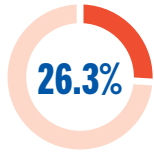
Key Findings

What we have learned from survey participants

Homelessness and Shelter Usage



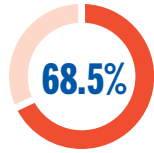
slept in encampments during the past week



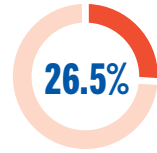
slept on a street/sidewalk/alley during the past week



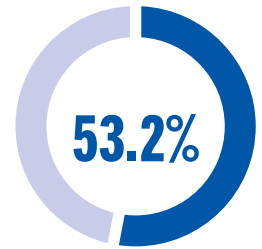
slept in car during the past week



say the most important factor in deciding where to stay is access to resources



have been homeless for 5 years or more



have stayed in a shelter overnight

Many unsheltered individuals are experiencing difficulty with employment and income

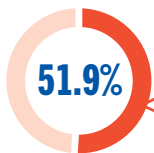


are not currently working and earning money



became homeless because of a job loss/income reduction

Negative life experiences have affected over half of survey participants

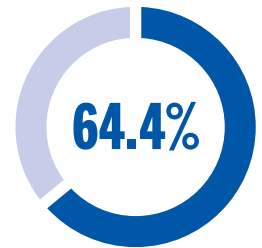


Encountered negative life experiences

Of those who encountered negative life experiences:

70.6% Trauma/PTSD

60.3% Domestic Violence



felt safe or very safe in shelters

Unsheltered individuals are accessing local services



83.7%

use services to get food, meals, clothing, or hygiene items for basic living



85.8%

get hot meals from a church or dining hall



63.7%

get grocery boxes or bags from a food bank



82.1%

get free hygiene supplies or clothing from outreach teams or a clothes closet

Survey Findings

Survey Locations

Volunteers surveyed various locations around San Joaquin County to capture the voice of unsheltered individuals. Locations where the 243 surveys were administered included the cities of Lodi, Manteca, Stockton, and Tracy (Table 1.1).

CITY	COUNT	%
Lodi	25	10.3%
Manteca	37	15.2%
Stockton	124	51.0%
Tracy	41	16.9%
Not listed	16	6.6%

TABLE 1.1 SURVEY LOCATIONS (N=243)

Demographic Characteristics

Several demographic questions were asked of participants to gain insight on the local unsheltered population's characteristics. Ages of survey participants ranged from 18 to 78, with the average age being 47.

Of the respondents who noted their gender (n=223), 59.6% were male, 39.9% were female, and 0.4% identified as non-binary.

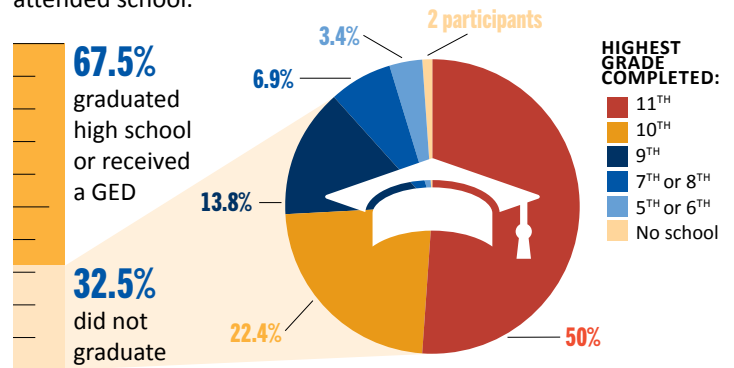
In regard to race, 49.7% of participants who responded to the question stated they were white, 30.5% Black or African American, 5.9% American Indian or Alaska Native, 2.7% Native Hawaiian or Other Pacific Islander, 0.5% Asian, 7.0% were two or more races, and 3.7% noted they were an "Other" race. Additionally, 30.3% stated that they were Hispanic or Latino (Table 1.2). Table 1.2 provides the composition of San Joaquin County with regard to race/ethnicity for comparison with the reported composition of survey participants (2020 ACS 5-Year Estimates*).

UNSHeltered Survey Participants	SAN JOAQUIN COUNTY*	
	%	%
American Indian or Alaska Native	5.9%	2.1%
Asian	0.5%	18.5%
Black or African American	30.5%	8.3%
Hispanic or Latino	30.3%	43.0%
Native Hawaiian or Other Pacific Islander	2.7%	0.9%
White	49.7%	64.5%
Two or more races	7.0%	5.6%
Other	3.7%	---

TABLE 1.2 PARTICIPANT RACE/ETHNICITY (N=187)

Participants were also asked to share their level of education. Of respondents who shared their high school education (n=234), many (67.5%) graduated high school or received a GED, while 32.5% noted they did not. Of those who graduated or received a GED, 6 had some college education, 1 participant had a bachelor's degree, and another participant had their Certified Nurse Assistant certificate.

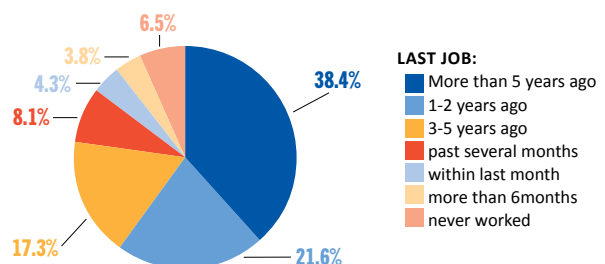
Of the participants who noted they did not graduate high school, the highest grade completed by half of them (50.0%) was 11th grade, 22.4% noted their highest grade completed was 10th grade, 13.8% 9th grade, 6.9% 8th or 7th grade, and 3.4% 6th or 5th grade. In addition, two participants noted that they never attended school.



When asked if participants were currently working and earning money (even part time), 234 responded, with 88.5% noting "no" and 11.5% noting "yes".



Of those who noted they were not working, 185 shared the last time they had a job, with 38.4% indicating that it had been more than 5 years since they last had a job, 21.6% noting that it had been 1 to 2 years, 17.3% saying 3 to 5 years, 8.1% stating that their last job was within the past several months, 4.3% stating that they held a job within the last month, and 3.8% indicating that it had been more than 6 months ago. In addition, 6.5% said that they had never worked.

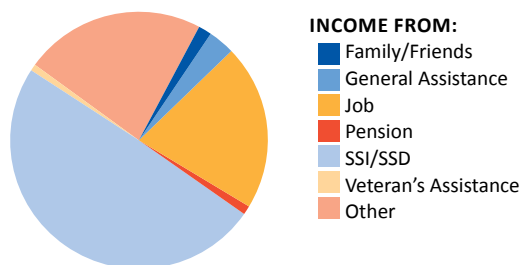


Participants who were not currently working were asked what they think keeps them from being able to work. Table 1.3 details the different responses from those individuals.

	COUNT	%
Disability/Injury	77	44.3%
No permanent address/Hygiene	65	37.4%
Transportation	36	20.7%
Mental Health/Depression	31	17.8%
Substance Use	19	10.9%
Job Skills	13	7.5%
Education	10	5.7%
Other	34	19.5%

TABLE 1.3 WHAT DO YOU THINK KEEPS YOU FROM BEING ABLE TO WORK? (N=174)

Survey respondents were asked about their income. 235 participants responded and less than half (48.9%) noted that they have a regular income or get money regularly from sources. When asked where their income comes from, 49.6% stated from SSI/SDI, 20.9% from a job, 3.5% general assistance, 1.7% from family or friends, 0.9% veteran’s assistance and another 0.9% from a pension (Table 1.4). It is important to note that some respondents reported multiple sources of income.



	COUNT	%
Family or Friends	2	1.7%
General Assistance	4	3.5%
Job	24	20.9%
Pension	1	0.9%
SSI/SSD	57	49.6%
Veteran's Assistance	1	0.9%
Other	26	22.6%

TABLE 1.4 WHERE DOES YOUR INCOME COME FROM? (N=115)

When asked about how much the participant thought they could afford on rent every month, 34.7% said “they could afford nothing,” 25.2% less than \$400, 19.7% said \$401 to \$600, 15.6% \$601 to \$1,000, and 4.8% more than \$1,000 (Figure 1.1).

Ten participants noted that they have served in the military. Five served in the U.S. Army and four participants each were in the National Guard, Navy, Air Force, and Marines. In addition, one participant served in the German Army.

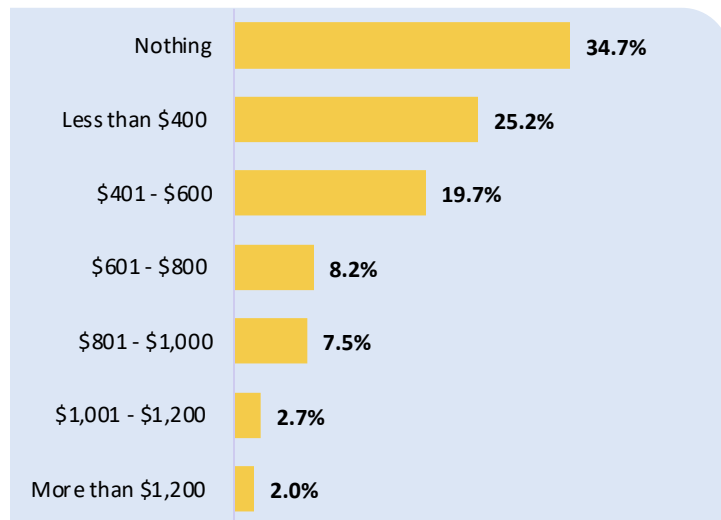


FIGURE 1.1 ABOUT HOW MUCH DO YOU THINK YOU COULD AFFORD TO SPEND ON RENT EVERY MONTH? (N=147)

When asked how long after separating from the military did the participant become homeless, eight responded, with 75.0% noting more than 5 years, 12.5% indicating 1 year or less, and another 12.5% stating 1-3 years.

Current Living Situation

Included in the Unsheltered Outreach Survey were questions surrounding ones’ current living situation. Questions included asking what life experiences had contributed to their homelessness, where they had stayed in the past week, and how long they had been homeless.

Survey participants were asked what life experiences contributed to them being homeless. Table 1.5 details the responses of those who shared the different life experiences that contributed to them being homeless. Participants were able to share multiple experiences. The data shows that a high majority, 184 participants, indicated that losing employment or housing was part of what contributed to them becoming homeless.

	Count	%
Job loss/Income reduction	81	36.7%
Asked to leave shared residence	53	24.0%
Eviction	50	22.6%
Drug/Alcohol Abuse	43	19.5%
Divorce/Separation/Breakup	36	16.3%
Conviction or Incarceration	33	14.9%
Illness	21	9.5%
Other	46	20.8%

TABLE 1.5 DID ANY OF THE FOLLOWING LIFE EXPERIENCES CONTRIBUTE TO YOU BEING HOMELESS? (N=221)

When asked where they had been sleeping at night in the past week, 240 participants responded and over half of them (52.9%) had slept in a tent or encampment, over a quarter (26.3%) slept on a street/sidewalk/alley, 20.0% slept in a car, 4.6% at the home of a friend or family member, and 2.5% stayed at a shelter (Figure 1.2). Please note that some individuals had multiple responses as they stayed in different places throughout the week.

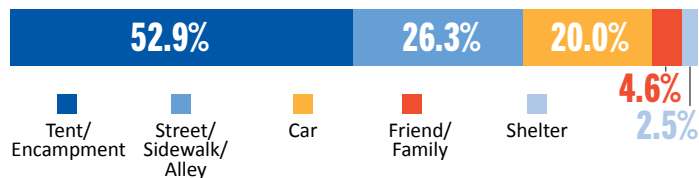


FIGURE 1.2 OVER THE PAST WEEK, WHERE HAVE YOU BEEN SLEEPING AT NIGHT? (N=240)

When asked for the most important factor(s) in making their decision of where they stay, 197 responded and shared their multiple responses in which 68.5% stated access to resources, another 61.9% noted a feeling of safety or belonging was most important, 51.3% said the proximity to people they know who live nearby, and 31.0% noted the physical space or materials available to make a safe place to stay (Table 1.6).

	COUNT	%
Access to resources such as food, hygiene, or medical services	135	68.5%
Feeling of safety or belonging, with other people here	122	61.9%
Proximity to people I know who live nearby to this place	101	51.3%
Physical space or materials for me to make a safe place to stay	61	31.0%
Other	16	8.1%

TABLE 1.6 WHICH WAS THE MOST IMPORTANT FACTOR IN MAKING YOUR DECISION WHERE TO STAY? (N=197)

Participants also shared how long they had been homeless, which ranged from less than a week to more than 5 years (Figure 1.3).

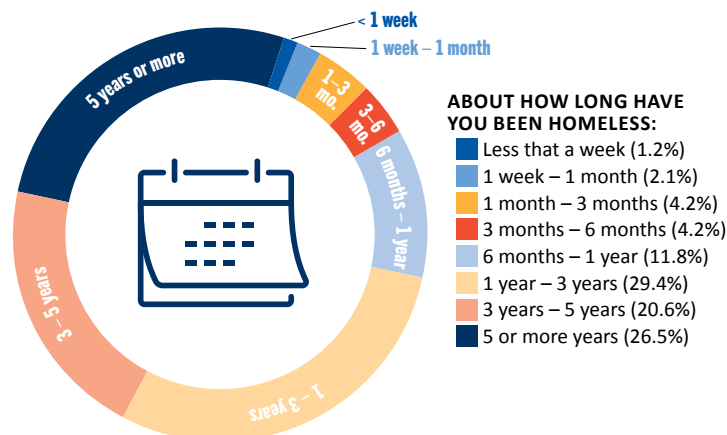


FIGURE 1.3 ABOUT HOW LONG HAVE YOU BEEN HOMELESS? (N=238)

History/Experience with Shelters

Though the individuals in this analysis are considered unsheltered based on the fact that they noted they had slept in a tent/encampment, car, street, etc., during the past week of participating in the survey, some individuals had previously also stayed in a shelter. The experiences of these individuals were captured. In addition, participants who had never stayed overnight in a shelter were asked to share what prevents them from utilizing this option.

When asked if they had ever stayed in an overnight shelter, 53.2% (126 of 237 participants) said they had. Examples of shelters they noted having stayed at included:

- DAWN House
- Gleason House
- Gospel Center Rescue Mission
- Haven of Peace
- Heritage Home
- His Way Community Church
- Hope Harbor
- Inner City Action
- McHenry House Tracy Family Shelter
- Mourfield House
- Raymus House
- Stockton Shelter for Homeless
- The Salvation Army
- Turlock Gospel Mission
- Local warming centers

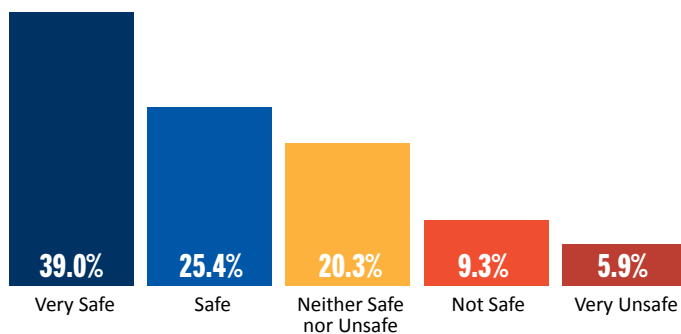
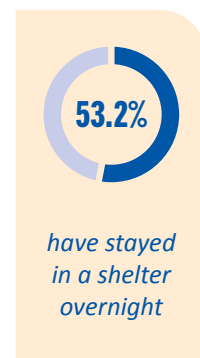
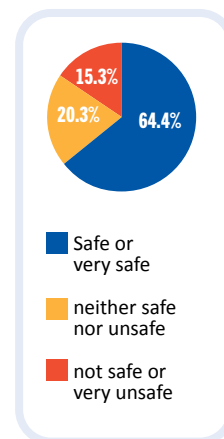


FIGURE 1.4 HOW WOULD YOU DESCRIBE THE SAFETY OF LOCAL SHELTERS YOU HAVE STAYED IN? (N=118)

118 individuals rated the safety of local shelters they have stayed in and 64.4% noted that they felt safe or very safe, 20.3% said they felt neither safe nor unsafe, and 15.3% felt not safe or very unsafe (Figure 1.4).

Individuals who have stayed at a shelter were also asked if they ever had issues when using shelters and 64 said they had and shared those issues. These issues ranged from safety concerns, not feeling welcome, having a curfew, and not being able to be with their partner or bring a pet (Table 1.7).



	Count	%
Bad experiences/Safety concerns	26	40.6%
Did not feel welcome	19	29.7%
Curfew	14	21.9%
No beds available	11	17.2%
Not able to bring a pet	11	17.2%
Not able to be with my partner	7	10.9%
Not able to bring belongings	4	6.3%
Other	13	20.3%

TABLE 1.7 DO YOU EVER HAVE ANY PROBLEMS WHEN USING SHELTERS? (N=64)

	Count	%
Not able to bring a pet	19	23.8%
Bad experiences/Safety concerns	11	13.8%
Did not feel welcome	11	13.8%
Not able to be with my partner	11	13.8%
Curfew	9	11.3%
No beds available	2	2.5%
Not able to bring belongings	2	2.5%
Other	40	50.0%

TABLE 1.8 WHAT DO YOU THINK PREVENTS YOU FROM USING SHELTER SERVICES? (N=80)

In addition, the participants who had not ever stayed in an overnight shelter also shared what they believe prevents them from utilizing shelter services (Table 1.8). Though half (50%) of the participants chose “other” in response to what prevents them from using shelters, only a few shared further details; for example, shelter “rules”, “being surrounded by people”, and “not being able to get clean [of drug usage]”.

Chronic Homelessness

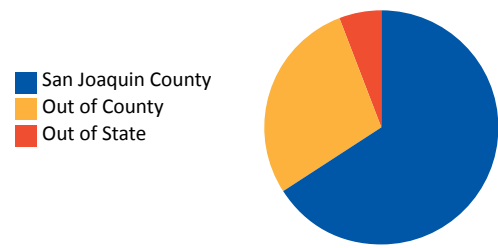
Survey participants were asked questions to determine if they had experienced chronic homelessness by how often they had been homeless over a three-year period as well as how often they had to move or relocate.

When asked during the past three years how many times they had experienced homelessness, 150 responded in which 66.7% noted 1-3 times, 12.7% said 4-6 times, and 20.7% 7 or more times.

When asked if in the past three years they had a place to live that they thought would be their permanent home, 237 responded and, of those, 57.4% stated “no”.

In addition, when respondents were asked how many times they had to move or relocate to a new place, the responses ranged from 0 to 50 times, with an average of 5 times.

Survey respondents were asked to share what city they last lived in before the most recent time they had become homeless, and 215 responded to the question.



Though many (66.0%) noted that they came from a city within San Joaquin County, 28.4% came from out of the county and 5.6% came from out of state (Table 1.9).

	Count	%
Lathrop	3	1.4%
Lodi	10	4.7%
Manteca	21	9.8%
Ripon	1	0.5%
Stockton	91	42.3%
Tracy	15	7.0%
Woodbridge	1	0.5%
Out of County	61	28.4%
Out of State	12	5.6%

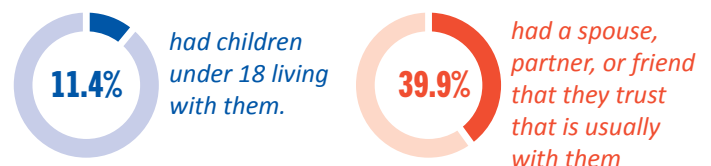
TABLE 1.9 WHERE DID YOU LAST LIVE BEFORE THIS MOST RECENT TIME YOU BECAME HOMELESS? (N=215)

Spouses/Partners and Children

Some unsheltered individuals may have partners and/or children that also stay with them. Participants of the Unsheltered Outreach Survey were asked if they had a spouse, partner, or friend that they trust who is usually with them, and 233 responded with 39.9% saying they did. In addition, of those, 77.4% noted that their spouse, partner, or friend sometimes contributes to the cost of living.

114 participants stated that they had children, with the average number of children being three. These participants were then asked if they have any of their children under 18 living with them, and thirteen (11.4%) stated they did. The range of number of children under 18 living with these participants was 1 to 6 children, with the average being 3.

23 of the 148 participants who had a partner and/or child(ren) stated that they would like to be connected with a social worker who works with homeless families after the survey interview.





Participants responded that they own a pet



58.9%
believe their pet **does not** affect ability to find shelter or housing.

41.1%
believe their pet **does** affect ability to find shelter or housing.

Pets

Along with partners or children, unsheltered individuals may also have pets that stay with them. When asked if they owned any pets, 240 participants responded with, 33.8% of them saying they did own a pet. The number of pets they owned ranged from 1 to 6 pets, with an average of 2 pets. When asked if their pet(s) had any health issues that need veterinary assistance, 77 participants responded in which 34.6% stated “yes”. The health issues noted by 28 of these individuals included injuries, vaccines, needing to be spayed or neutered, and their pet being pregnant (Table 1.10).

	Count	%
Injury	4	14.3%
Malnourished	0	0.0%
Pregnant	1	3.6%
Needs vaccines	13	46.4%
Spay/Neuter	8	28.6%
Other	8	28.6%

TABLE 1.10 DOES YOUR PET HAVE ANY HEALTH ISSUES THAT NEEDS VETERINARY ASSISTANCE? (N=28)

Participants with pets were asked if they believe their pet has affected their ability to find shelter or housing. 73 participants responded in which 41.1% said “yes” and 58.9% said “no”.

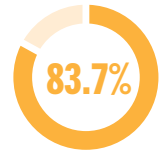
How often do you...	Once	Every now and then	At least once a week	Most days a week	Daily
get hot meals from a church or dining room? (n=163)	3.1%	28.8%	17.8%	25.2%	25.2%
get grocery boxes or bags from a food bank? (n=125)	5.6%	52.0%	33.6%	6.4%	2.4%
get free hygiene supplies or clothing from outreach teams or a clothes closet? (n=138)	2.9%	50.7%	24.6%	12.3%	9.4%

TABLE 1.11 SERVICE UTILIZATION

Service Utilization

Capturing what services unsheltered individuals utilize in the community was important. This informs us regarding what is assisting individuals and what may need to be further funded and offered.

Out of 233 participants who responded, 83.7% stated that they use services to get food, meals, clothing, or hygiene items for basic living.



use services to get food, meals, clothing, or hygiene items for basic living.

Of the participants who shared whether they receive food stamps or not (231), over half of the participants (56.7%) noted they did.

In regard to services:

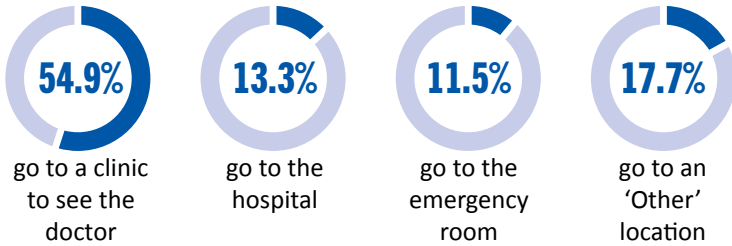
- 85.8% of survey participants who responded (211) noted that they get hot meals from a church or dining hall.
- 63.7% get grocery boxes or bags from a food bank (215 responding participants).
- 82.1% get free hygiene supplies or clothing from outreach teams or a clothes closet (212 responding participants).

These percentages indicate to us that many unsheltered individuals are utilizing available services. Table 1.11 details the frequency participants utilize the above services.

Health and Well-Being

A majority of participants (76.1%) noted that they had health insurance and several questions were asked to learn where unsheltered individuals are utilizing health services as well as questions regarding their health and well-being.

When asked if they had a regular doctor they go to when they are sick or hurt, 235 responded and 46.8% of them said they did. 113 participants shared where they go when they are sick or get hurt.



Over half of them (54.9%) stated they go to a clinic to see the doctor, 13.3% go to the hospital, 11.5% go to the emergency room, and 17.7% noted they go to an 'Other' location. Please note that some respondents had multiple responses.

Survey participants were also asked whether they had ever been told by anyone or had reason to believe they had certain health conditions. The responses of 174 individuals who believe they had health conditions are displayed in Table 1.12.

When asked if they had ever experienced trauma, abuse, domestic violence, human trafficking, or foster care in their lifetime, over half (51.9%) of participants noted that they had, with an astounding 70.6% of them experiencing trauma and/or PTSD (Figure 1.5). Please note that some participants listed multiple responses.

In addition, 33.6% of 232 participants said they had received treatment for behavioral health or substance abuse at a support group such as County Mental Health, St. Joseph's, and Recovery House.

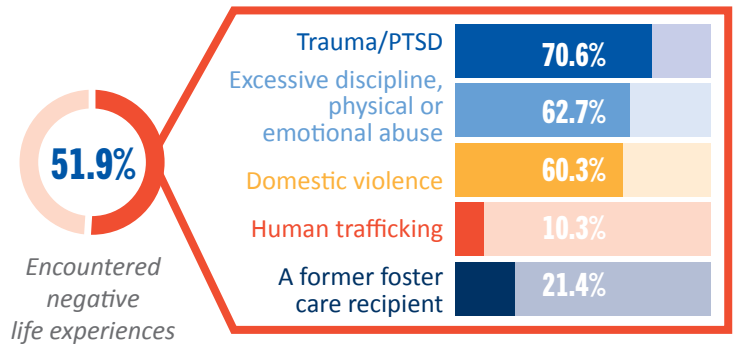


FIGURE 1.5 EXPERIENCED NEGATIVE LIFE EXPERIENCES, BY TYPE (N=126)

Hospital and Emergency Services

Along with learning whether unsheltered individuals regularly see a doctor, it was also important to learn how often they are using hospitals and emergency services.

Participants were asked if in the past year they had ever needed emergency health care, such as as going to a hospital or having an ambulance come to you, and 48.9% of 229 responded that they had.

On average, during the past year, these individuals have ridden in an ambulance 2 times, visited the emergency room 3 times, and stayed in the hospital overnight 4 times. In addition, the median number of times per year a participant stayed in the hospital overnight was 2. The average number of nights stayed in the hospital was 11, with the median number at 6 stays during the past year.



PARTICIPANT HOSPITAL STAYS PER YEAR

Health Condition	Count	%
Substance use disorder (alcohol, marijuana, opioids, etc.)	102	58.6%
Physical disability that limits mobility	78	44.8%
Mental illness (bipolar disorder, clinical depression, schizophrenia, etc.)	69	39.7%
Chronic health condition (cancer, COPD, diabetes, hepatitis, HIV/AIDS, etc.)	63	36.2%
Skin condition (rash, eczema, MRSA, etc.)	23	13.2%
Any other disability or health condition	31	17.8%

TABLE 1.12 PARTICIPANTS WITH HEALTH CONDITIONS, BY TYPE (N=174)
174 OUT OF THE 243 RESPONDENTS INDICATED HAVING A HEALTH CONDITION

COVID-19 Impact

The COVID-19 pandemic has had significant impacts on most people and imaginably more so for those who were unsheltered. It was important to include questions in this survey specific to COVID-19 in order to learn specifically how it has impacted the local unsheltered community.

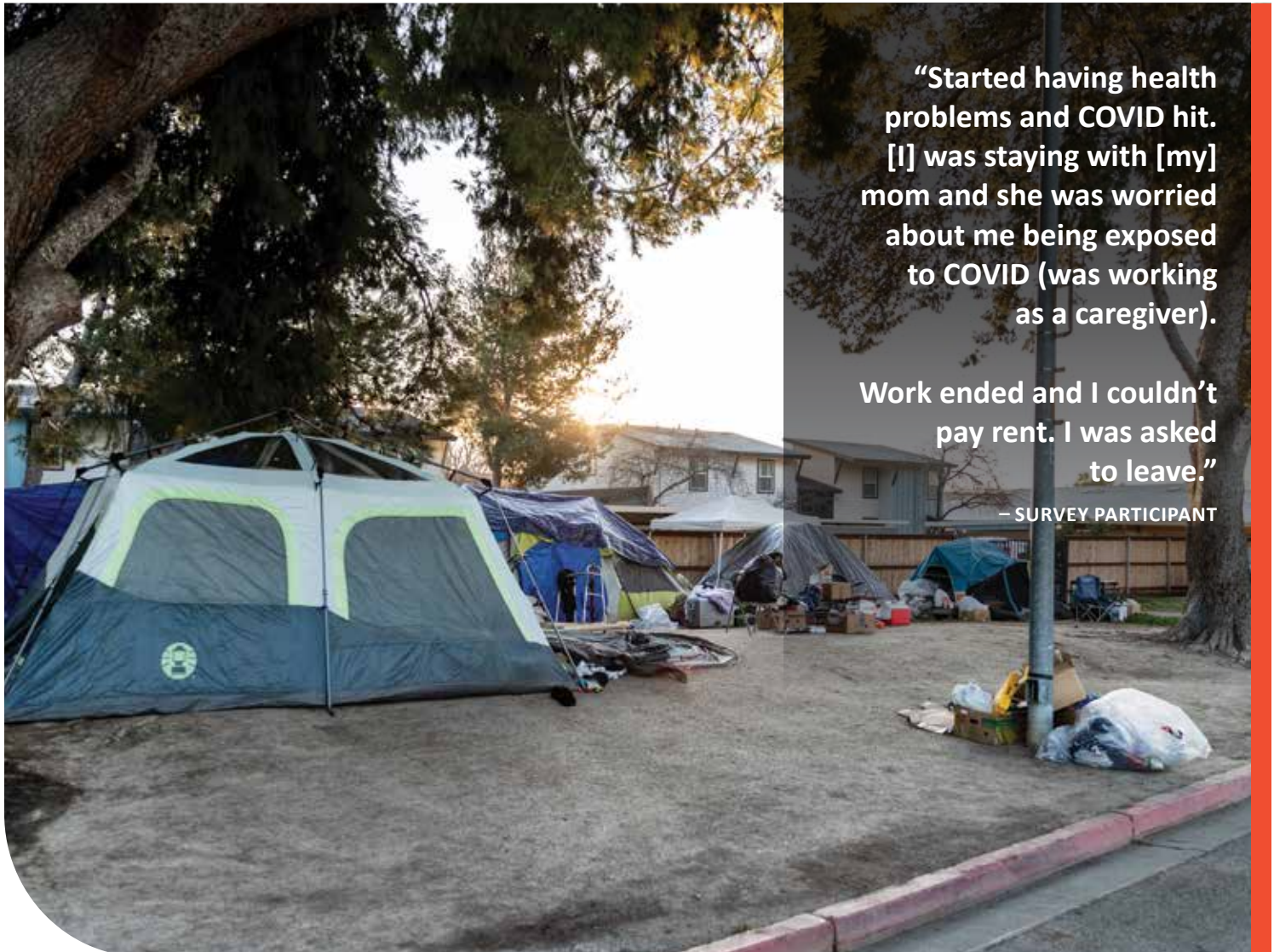
	Count	%
Difficulty getting basic needs met	39	38.6%
Job loss	31	30.7%
Stress/Strain on relationships	31	30.7%
Grief/ Loss of loved one	30	29.7%
Housing loss	29	28.7%
Exposed/Contracted COVID	18	17.8%
Lack/Loss of health care	13	12.9%
Lack/Loss of mental health	6	5.9%
Other	10	9.9%

TABLE 1.13 HOW HAVE YOU BEEN AFFECTED BY THE COVID-19 PANDEMIC? (N=101)

There were 101 participants who stated that they were affected by the COVID-19 pandemic because of job or house loss, difficulty getting basic needs met, being exposed to COVID, etc. (Table 1.13). In regard to whether COVID-19 had impacted where an individual stayed, 224 responded and, of those, 38.4% noted it did.

A majority (84.0%) of 237 participants noted that they know where to go if they or a friend wanted a COVID test or vaccine, and 46.2% of 236 participants said they had already been vaccinated against COVID-19.

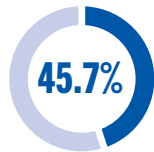
When asked what else could be done to help unsheltered homeless stay safe from COVID, 195 participants had multiple responses. Many respondents (62.1%) said more masks, gloves, and sanitizer would help, 59.0% said bathrooms/hygiene stations, 32.3% COVID testing, 28.7% vaccinations, and 15.9% selected 'Other'.





Police Contact

Under half (45.7%) of the survey participants had reported having contact with police or law enforcement during the past year. These individuals were asked to share their experience of these contacts.



of the survey participants reported having contact with police or law enforcement during the past year.

The type of police or law enforcement contact of 105 participants included being helped, being made to leave a place, receiving a ticket, being arrested, and being put in jail. Half (50.5%) of the respondents noted that they were made to leave a place (Figure 1.6).

Participants were asked if in the past year they had ever stayed in a holding cell, jail, or prison, including short term and longer stays, and 43 participants said they had. Participants who indicated that they had stayed in a holding cell, jail, or prison were asked whether that was a short term or longer stay. Nights stayed for those participants ranged from 1 night to 180 nights (6 months), with a median of 5 nights.

Even though many of the responding individuals noted that their contact with police or law enforcement included being made to leave a place or being ticketed, arrested, and/or jailed, a majority of participants seem to note being treated fairly during these encounters. When asked if participants overall felt that they were treated fairly during encounters they've had, 91 responded, with 62.6% stating that they were and over a third saying that they were not (Figure 1.7).

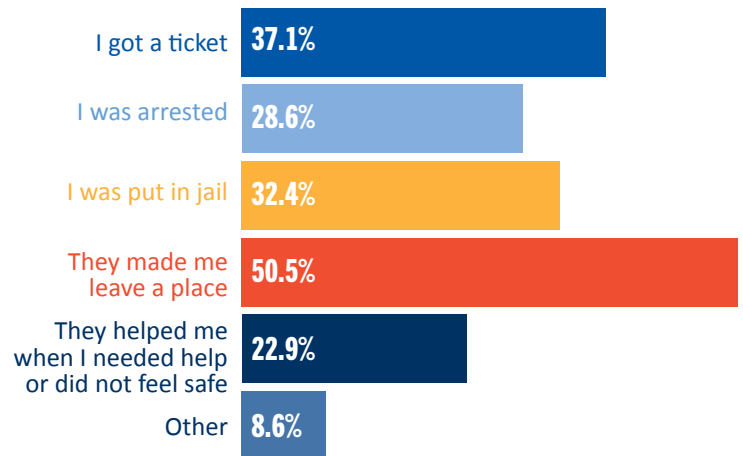


FIGURE 1.6 POLICE/LAW ENFORCEMENT CONTACTS (N=105)

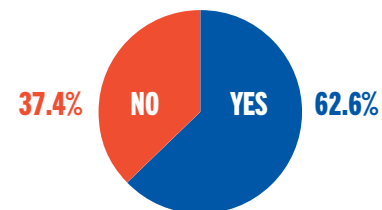


FIGURE 1.7 OVERALL, DO YOU THINK YOU WERE TREATED FAIRLY IN THE ENCOUNTERS YOU HAD? (N=91)

A Deeper Look

Comparing Group Data

Taking a further look into the data revealed differences between groups of survey participants. Here we look at individuals who have utilized overnight shelters compared to those who have not, homeless experiences for unsheltered individuals by race/ethnicity, and experiences for those who reported having behavioral health or substance use conditions and trauma versus those who have not. In addition, we looked at the experience of unsheltered older adults aged 55 and older.

Shelter Users vs. Non-Shelter Users

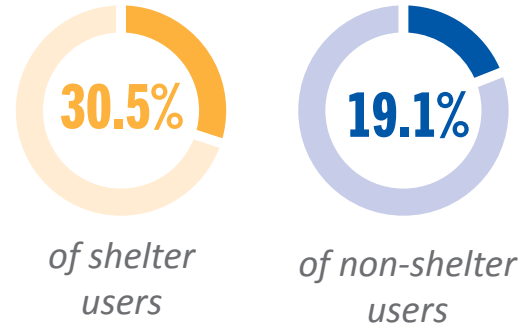
In this section, we look at the differences between shelter users versus non shelter users. Of the total 344 completed surveys, 200 noted having ever stayed overnight in a shelter and 116 noted that they never have.

In regard to what life experiences contributed to participants being homeless, the top response for shelter users and non-shelter users remained job loss and/or income reduction (Figure 2.1). Among shelter users, however, there is a higher percentage of individuals noting that divorce/separation/breakup and drug/alcohol abuse as life experiences that contributed to their homelessness.

In regard to length of time homeless, there was not a large difference between shelter users and non-shelter users that were homeless less than 5 years; however, shelter users reported being homeless for 5 years or more at a higher percentage than non-shelter users (30.5% compared to 19.1%).

When comparing how many times individuals experienced homelessness over the past three years, shelter users reported experiencing homelessness more times than survey respondents who had never used a shelter (Table 2.1). The median number

Has Been Homeless for 5 or More Years



of times an individual had to move or relocate was the same for both groups of survey respondents (2 times). In regard to whether participants had a place to live in the last three years that they thought would be their permanent home, 47% of shelter users noted “yes” to this question, compared to 41% of those who have not used a shelter (Figure 2.2).

	Shelter Users	Non-Shelter Users	Difference
1-3 times	70.5%	78.8%	8.2%
4-6 times	10.9%	7.6%	3.2%
7 or more times	18.6%	13.6%	4.9%

TABLE 2.1 OVER THE PAST 3 YEARS, HOW MANY TIMES DID YOU EXPERIENCE HOMELESSNESS?

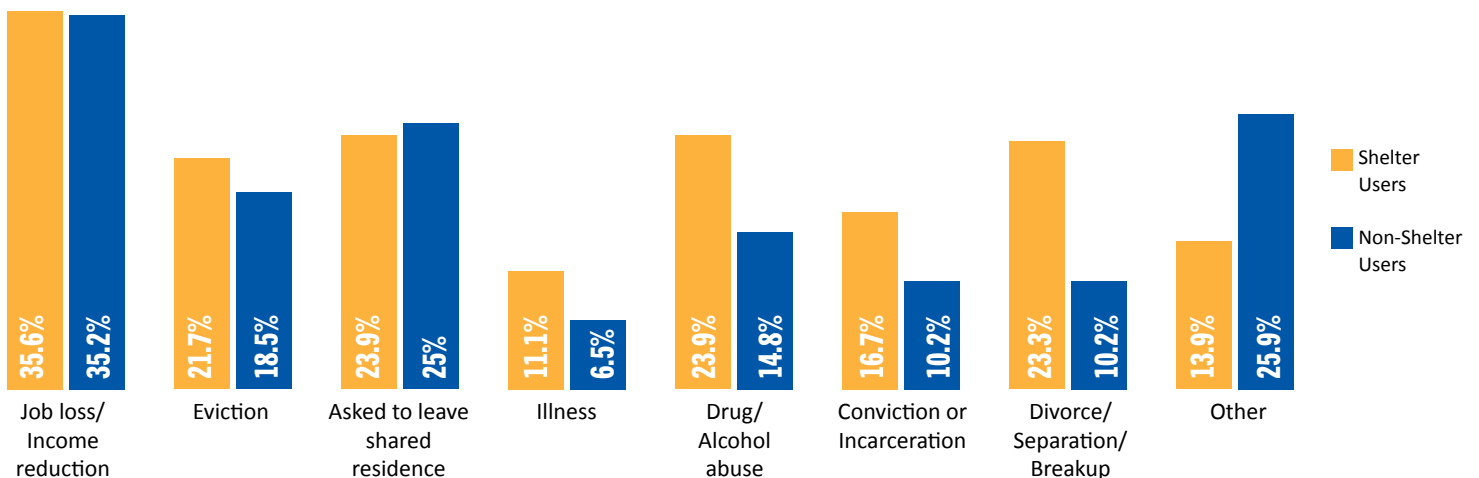


FIGURE 2.1. DID ANY OF THE FOLLOWING LIFE EXPERIENCES CONTRIBUTE TO YOU BEING HOMELESS?

As expected, a much higher percentage of non-shelter users reported having pets compared to those who utilize the shelter (40.9% versus 20.2%). In addition, a slightly higher percentage of non-shelter users reported having a spouse/partner/friend and/or child living with them (Figure 2.3). Shelter users had an average of 3 children with them while those not utilizing the shelter had an average of 4 children with them.

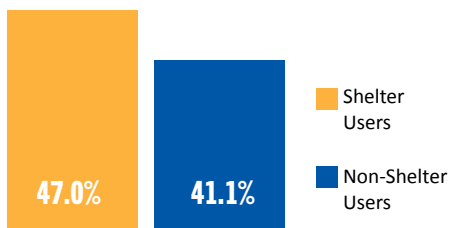


FIGURE 2.2 HAD A PLACE TO LIVE IN THE PAST 3 YEARS THAT THEY THOUGHT WOULD BE THEIR PERMANENT HOME

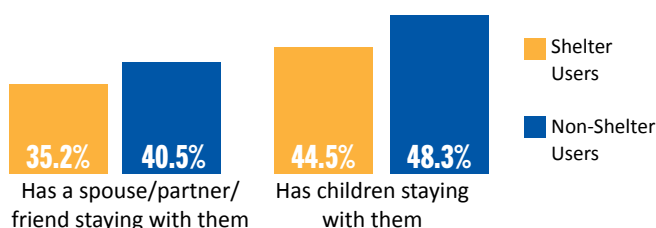


FIGURE 2.3 HAS A SPOUSE/PARTNER/FRIEND OR CHILD(REN) STAYING WITH THEM

	Shelter Users	Non-Shelter Users	Difference
SSI/SSD	48.3%	46.5%	1.8%
Job	20.3%	27.9%	7.6%
General assistance	11.0%	0.0%	11.0%
Family or friends	2.5%	0.0%	2.5%
Veteran's assistance	0.8%	0.0%	0.8%
Pension	0.8%	0.0%	0.8%
Other	16.1%	25.6%	9.5%

TABLE 2.2 WHERE DOES YOUR INCOME COME FROM?

"I've been disabled most of my adult life. I was in a county in the foothills and lost my housing. Came to Lodi for the shelter bed."

– SURVEY PARTICIPANT

The majority of both groups of survey participants reported not currently working and earning money (87.8% of shelter users and 87.4% of non-shelter users). However, 13.5 percentage points more of shelter users than non-shelter users reported receiving regular income or money from any sources.

Non-shelter users reported having income coming from a job, SSI/SSD or other sources, while shelter users noted these sources in addition to receiving general and veteran assistance, pension, and assistance from family or friends (Table 2.2)."

Of those who noted they were not working, 8.8 percentage points more shelter users than non-shelter users noted that a disability or injury keeps them from working (Table 2.3). In addition, 4.3 percentage points more of shelter users noted that job skills were what keeps them from working.

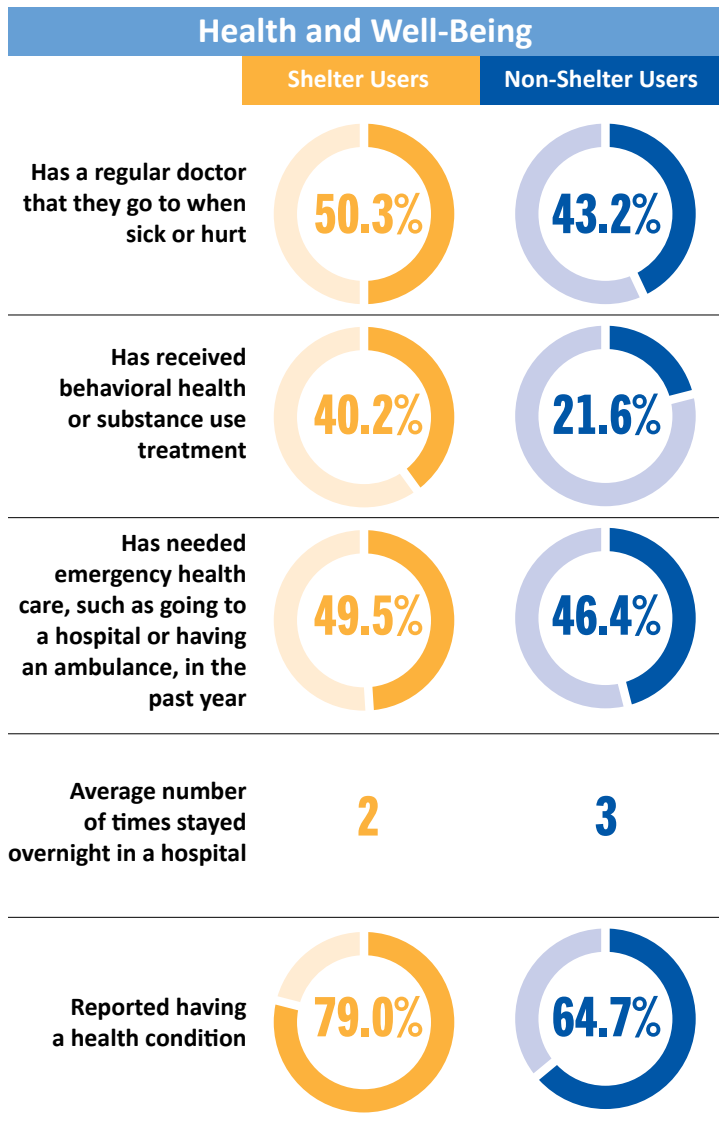
	Shelter Users	Non-Shelter Users	Difference
Disability/ Injury	42.9%	34.1%	8.8%
Substance use	9.2%	9.8%	0.6%
Mental Health / Depression	16.0%	15.9%	0.1%
Job Skills	8.0%	3.7%	4.3%
Education	6.7%	4.9%	1.9%
No permanent address/ Hygiene	31.9%	31.7%	0.2%
Transportation	19.6%	17.1%	2.6%
Other	18.4%	23.2%	4.8%

TABLE 2.3 WHAT DO YOU THINK KEEPS YOU FROM BEING ABLE TO WORK?

	Shelter Users		Non-Shelter Users		Difference
	Count	%	Count	%	
Do you ever use services to get food, meals, clothing or hygiene items for basic living?	194	85.1%	110	76.4%	8.7%
Do you ever get hot meals from a church or dining room (like St. Mary's)?	174	89.7%	96	79.2%	10.5%
Do you ever get grocery boxes or bags from a food bank?	177	55.9%	98	66.3%	10.4%
Do you ever get free hygiene supplies or clothing from outreach teams or a clothes closet?	176	77.8%	96	81.3%	3.4%

TABLE 2.4 SERVICE UTILIZATION

There were also differences seen between the two groups with accessing services. Table 2.4 (displayed on the previous page) shows us that shelter users noted receiving hot meals from a church or a dining room 10.5 percentage points more than non-shelter users. With regard to receiving grocery boxes or bags from a food bank, non-shelter users noted utilizing this service more (66.3% compared to 55.9%).



Half (50.3%) of shelter users stated that they have a regular doctor they go to if they are sick or get hurt, while 43.2% of those who had not stayed in a shelter noted that they do. Slightly more shelter users than non-shelter users noted needing emergency health care, such as going to the hospital or having an ambulance come to them (49.5% versus 46.4%).

In regard to hospital stays, the average number of occurrences for shelter users was 2, while the average number for non-shelter users was 3.

In addition, the median number of nights shelter users stayed overnight in the hospital was 4, while the median number of nights for non-shelter users was 3.

	Shelter User	Non-Shelter User	Difference
Chronic Health Condition	36.7%	33.3%	3.4%
Skin Condition	13.9%	12.0%	1.9%
Mental Illness	34.8%	38.7%	3.9%
Substance Use Disorder	53.2%	57.3%	4.2%
Physical Disability that limits mobility	47.5%	40.0%	7.5%
Any other disability or health condition	19.0%	10.7%	8.3%

TABLE 2.5 REPORTED HAVING ONE OR MORE OF THE FOLLOWING HEALTH CONDITIONS

Health conditions among shelter users and non-shelter users varied (Table 2.5). Overall, 79% of shelter users reported having one or more health condition, while 64.7% of non-shelter users reported having one or more.

When asked if they had ever received behavioral health or substance use treatment, 21.6% of non-shelter users noted they had and nearly double (40.2%) the percentage of shelter users noted they had.

In both groups, around half reported having certain negative life experiences (52.5% shelter users and 48.3% non-shelter users); however, there was a larger percentage of shelter users noting that they had experienced trauma/PTSD in their life (Figure 2.4).

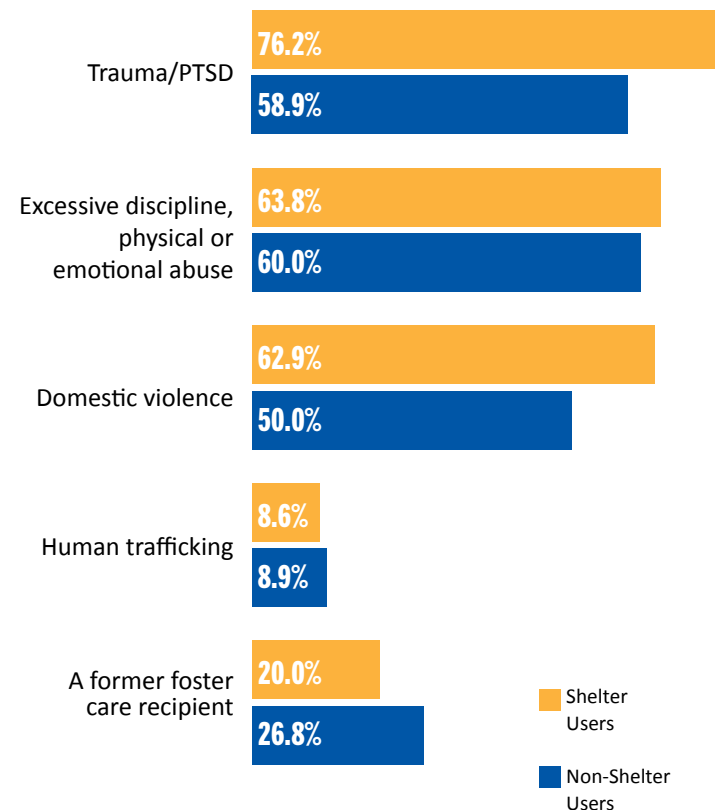


FIGURE 2.4 IN YOUR LIFETIME, HAVE YOU EVER EXPERIENCED

Unsheltered Groups

Here we take a deeper look at the 243 participants who noted on the survey that within the past week they were unsheltered at some point (i.e., not only staying in a shelter and/or a family or friend's home). Here we will share the most notable differences between the unsheltered groups.

Race/Ethnicity

There were 59 unsheltered individuals who noted they were Latinx (Hispanic or Latino/a), 57 noted Black or African American, and 93 white. One in three (33%) individuals who identified as white shared that they had been homeless for 5 years or more, compared to 19% of Hispanic individuals, and 15.8% Black or African American individuals. In addition, among these groups, there was a range of individuals who believed in the past three years that there was a place they thought would be their permanent home (Figure 2.5).

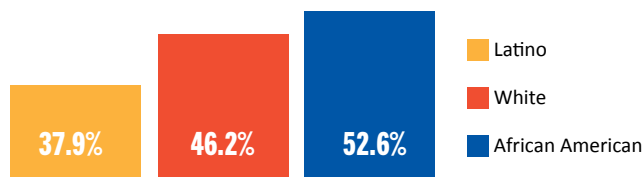
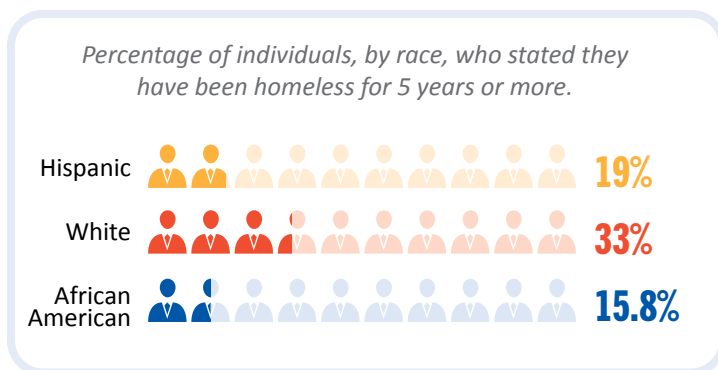


FIGURE 2.5 OVER THE PAST 3 YEARS, DID YOU EVER HAVE A PLACE TO LIVE THAT YOU THOUGHT WOULD BE YOUR PERMANENT HOME?

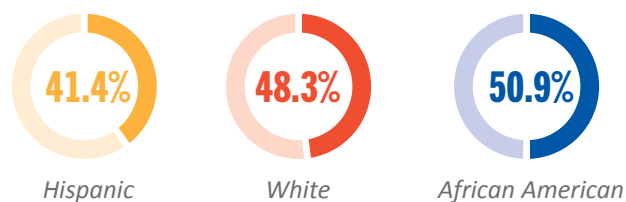


FIGURE 2.6 DO YOU HAVE ANY REGULAR INCOME OR DO YOU GET MONEY REGULARLY FROM ANY SOURCES?

In regard to income, there was variation among groups. Just over half of African American survey participants, 48.3% of white individuals, and 41.4% Hispanic respondents stated that they have a regular income. (Figure 2.6).

	African American	Hispanic	White
SSI/SSD	71.4%	40.9%	48.7%
Job	14.3%	40.9%	20.5%
Other	10.7%	13.6%	23.1%
General assistance	3.6%	4.5%	5.1%
Veteran's assistance	0.0%	0.0%	0.0%
Family or friends	0.0%	0.0%	2.6%

TABLE 2.6 WHERE DOES YOUR INCOME COME FROM?

There was also variation in the source of income; for example, 71.4% of African American individuals received SSI/SSD compared to 48.7% of white and 40.9% of Hispanic respondents (Table 2.6). Also, 40.9% of Hispanic individuals noted their income coming from a job, compared to 20.5% white and 14.3% African American.

Among these groups, employment remained low with 17.9% of Hispanic participants noting that they were currently working and earning money, while 11% of white participants and 7.1% of African American participants noted working at a job for money (Figure 2.7).

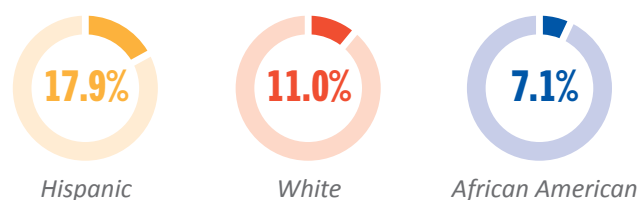
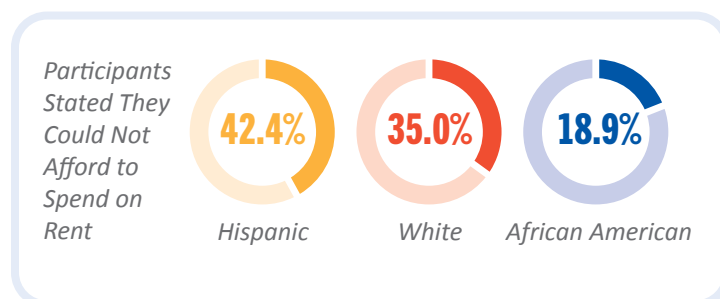


FIGURE 2.7 ARE YOU CURRENTLY WORKING AND EARNING MONEY?

Table 2.7 details multiple responses of individuals who noted they were not currently working; they also shared what keeps them from being able to work. While across the groups many of the reasons for not working were similar, there were some reasons that varied more than others. For example, whereas 16.2% of Hispanic individuals noted mental health/depression as the reason for not working, 8.5% of white individuals and 5.1% African American individuals cited mental health/depression as the reason. In addition, when participants were asked how much they could afford to spend on rent, 42.4% of Hispanic participants noted they could not afford anything on rent, 35% of white individuals also noted this, as well as 18.9% of African American individuals.



	African American	Hispanic	White	All Races
Uses services to get food, meals, clothing, or hygiene items for basic living	85.5%	85.5%	76.7%	83.7%
Gets hot meals from a church or dining room	94.1%	83.3%	82.9%	85.8%
Gets grocery boxes or bags from a food bank	66.7%	61.1%	57.7%	63.7%
Gets free hygiene supplies or clothing from outreach teams or a clothes closet	80.4%	77.8%	80.5%	82.1%

TABLE 2.8 SERVICE UTILIZATION BY RACE/ETHNICITY

“I had pneumonia and was in the hospital for a month. Didn’t have insurance and couldn’t pay the bills. Credit was very bad and couldn’t get ahead. Lost [my] job.”

– SURVEY PARTICIPANT ON HOW THEY BECAME HOMELESS

In regard to service utilization, there was high usage among all races. Table 2.8 details utilization among participants that noted they were African American, Hispanic, and White along with the percentage of utilization among all races.

With a few exceptions, the health and wellbeing of race groups were also fairly similar across the board. Most notably, participants were asked if they had any health conditions, such as chronic health, skin conditions, mental health, etc.

	African American	Hispanic	White
Disability/injury	35.6%	23.5%	27.4%
Substance abuse	3.4%	7.4%	7.7%
Mental health/depression	5.1%	16.2%	8.5%
Job skills	5.1%	5.9%	5.1%
Education	1.7%	10.3%	3.4%
No permanent address/hygiene	20.3%	20.6%	22.2%
Transportation	11.9%	8.8%	12.8%
Other	16.9%	7.4%	12.8%

TABLE 2.7 WHAT DO YOU THINK KEEPS YOU FROM BEING ABLE TO WORK?

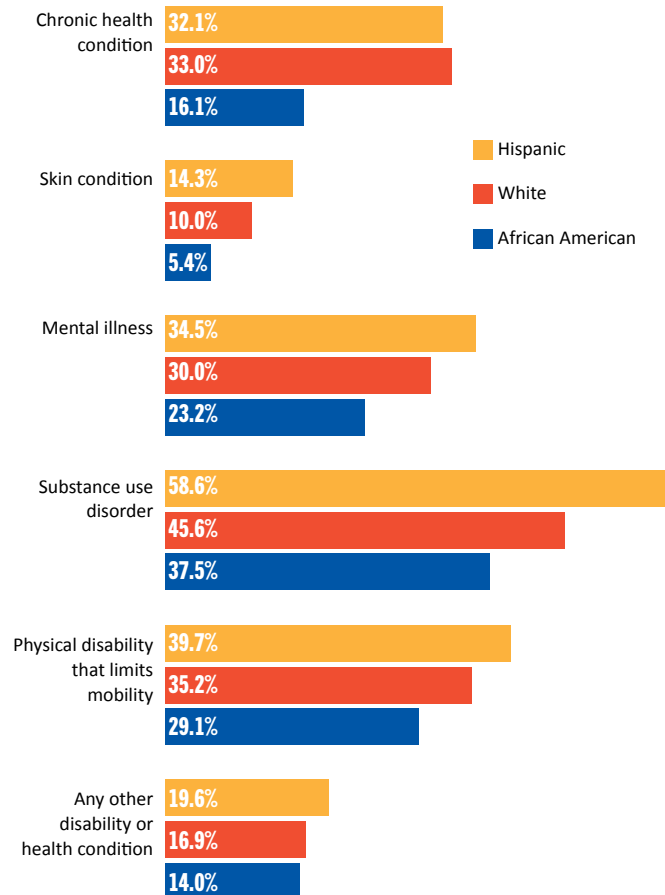


FIGURE 2.8 HEALTH CONDITIONS BY RACE/ETHNICITY



Health and Well-Being			
	Hispanic	White	African American
Has a regular doctor that they go to when sick or hurt	43.9%	50.0%	41.8%
Has received behavioral health or substance use treatment	29.1%	34.8%	29.8%
Has needed emergency health care, such as going to a hospital or having an ambulance, in the past year	49.1%	51.1%	40.0%
Reported having a health condition	79.3%	83.5%	57.1%



Of white participants, 83.5% noted they did have a health condition, compared to 57.1% of African American participants noting they had a health condition. Figure 2.8 (displayed on the previous page) further breaks down the types of health conditions reported by survey participants as well as the differences across racial groups. In all but one type of condition (chronic health), higher percentages of Hispanic individuals noted having the various conditions, followed by white participants, then African American participants.

With regard to negative lifetime experiences, a higher percentage of Hispanic participants noted experiencing trauma/PTSD and excessive discipline, physical, or emotional abuse, with white participants having higher percentages for being in foster care at some point in their life (Figure 2.9). In addition, African American participants had higher percentages for domestic violence and human trafficking.

There was a larger variance among groups in regard to whether they had any contact with police or law enforcement in the past year, with 72.4% of white participants, 52.8% of Hispanic participants, and 36.1% of African American participants stating they did have contact (Figure 2.10). A majority of all those who indicated having contact with police or law enforcement noted that they believe they were treated fairly during the encounters they had, including nearly 3/4 of African American respondents.

Trauma/PTSD



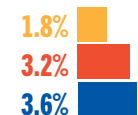
Excessive discipline, physical or emotional abuse



Domestic violence



Human trafficking



A former foster care recipient



FIGURE 2.9 EXPERIENCED NEGATIVE LIFETIME EXPERIENCES BY RACE/ETHNICITY

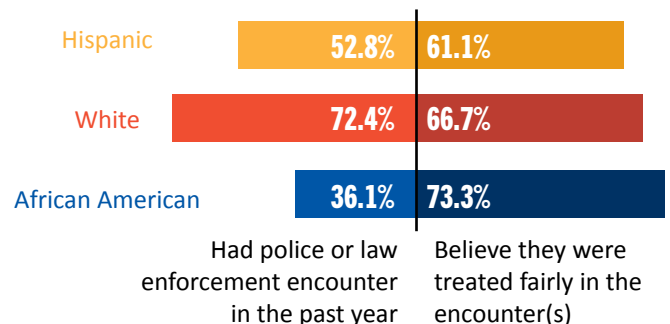


FIGURE 2.10 POLICE/LAW ENFORCEMENT ENCOUNTERS BY RACE/ETHNICITY

Experiences of Older Adults (Ages 55+)

Here we took a look at the experiences of unsheltered individuals who were age 55 or older at the time of completing the survey compared to those under age 55. There was a total of 64 participants reporting their age was 55 or older and 141 participants noting they were under age 55. In the 55+ age group, the average age was 60, while the average age for the under 55 group was 41 (Table 2.9).

	Minimum	Maximum	Average
Under 55	18	54	41
55+	55	78	60

TABLE 2.9 SURVEY PARTICIPANT AGE GROUPS

In regard to employment and income, there was contrast between the two groups of survey participants. More individuals in the 55+ group noted receiving an income or money regularly than in the under 55 group (61.3% compared to 42.6%). In addition, 14.7% of the under 55 age group noted they were currently working and earning money versus 6.5% of the 55+ age group. The top two reasons for not being able to work for both groups was disability/injury and no permanent address/hygiene, with a higher percentage of those aged 55 and older noting disability/injury (36% compared to 26.9%).

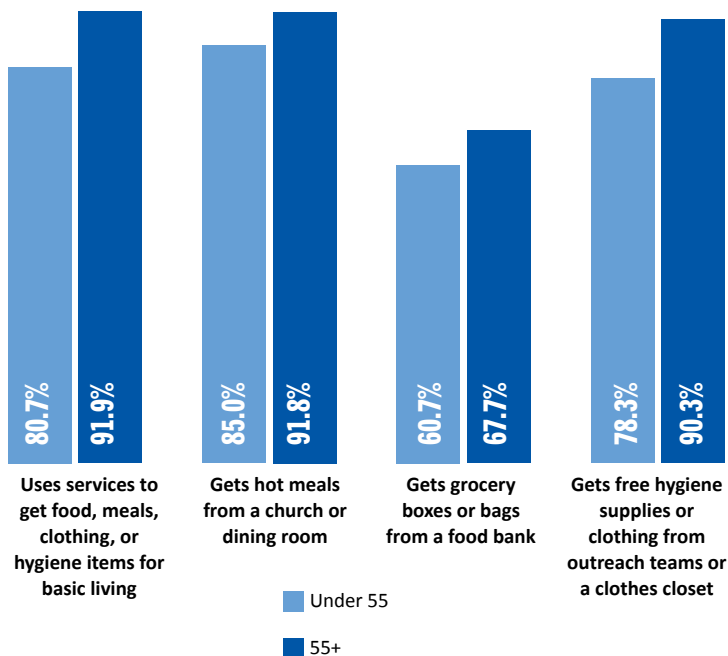
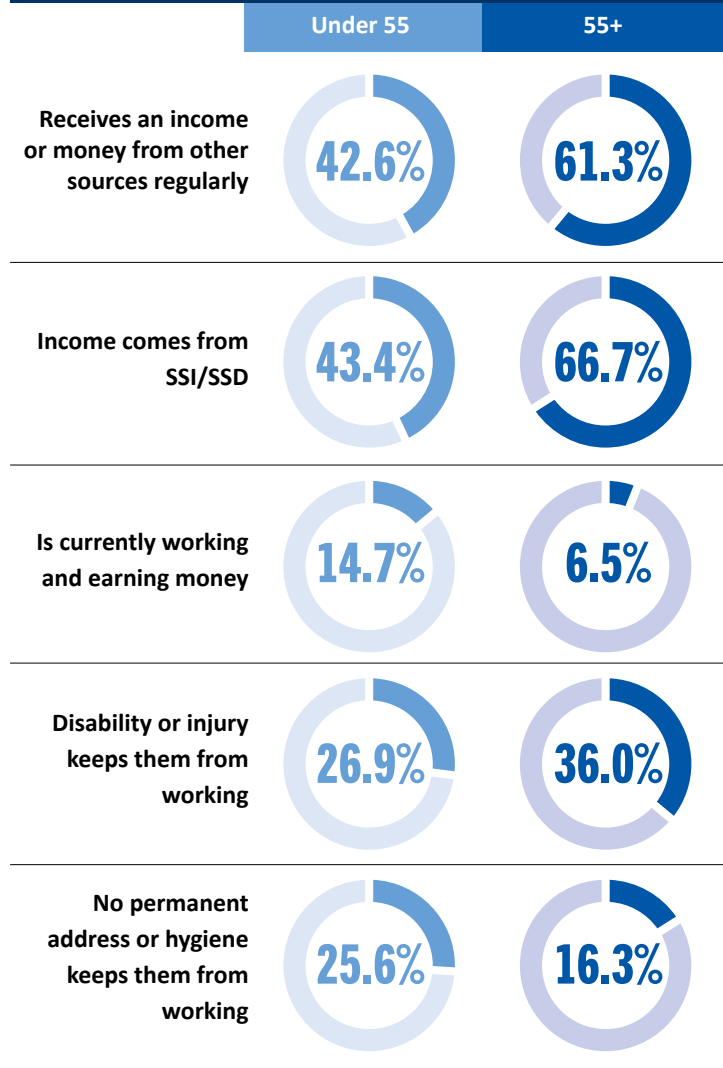


FIGURE 2.11 SERVICE UTILIZATION BY AGE GROUP

Those who noted being 55 and older noted graduating high school or receiving a GED at a slightly higher percentage than under 55 individuals (72.1% compared to 65.2%).

With respect to living situation, over a quarter (27.4%) of individuals 55 and older stated they had a spouse, partner, or friend that

Employment and Income



usually stays with them, compared to 45.6% of individuals under 55 who have someone staying with them. A higher percentage of under 55 also noted that in the past three years they had a place that they thought might be their permanent home (48.6% versus 35.5%).

Service utilization remained high among both groups, however, more individuals aged 55 and older noted utilizing services (Figure 2.11). In fact, the high majority (91.9%) of individuals 55+ stated they use services to get food, hot meals, clothing, and/or hygiene items for basic living.

As one might expect, the health and well-being of older individuals varied from younger individuals. For instance, 79.4% of those 55+ reported having a health condition, compared to 70% of those under 55. When looking at the breakdown of the different health conditions reported, there were large differences in some conditions, such as chronic health conditions and physical disability, with the older group reporting a higher percentage (Figure 2.12). However, the data also shows that more individuals under age 55 noted having a regular doctor that they go to when they are sick or hurt (54% compared to 39.7%).

Health and Well-Being		
	Under 55	55+
Has a regular doctor that they go to when sick or hurt	54.0%	39.7%
Has received behavioral health or substance use treatment	38.5%	28.6%
Reported having a health condition	70.0%	79.4%

Emergency health care was fairly similar for both groups, with 48.9% of those under 55 and 52.5% aged 55+ noting they needed emergency healthcare in the past year. In addition, those under 55 noted staying overnight in the hospital during the past year an average of 4 times, compared to an average of 3 times for those 55 and older.

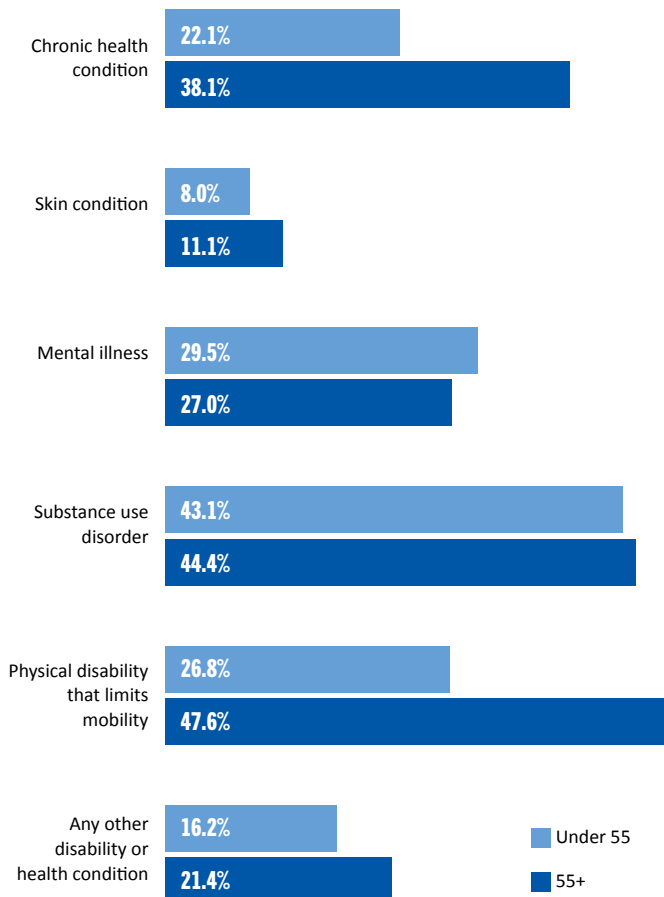


FIGURE 2.12 HEALTH CONDITIONS BY AGE GROUP

As with physical health conditions, notable difference between groups was seen regarding mental health. While just a slightly higher percentage of individuals under 55 noted having a mental illness (29.5% compared to 27%), there was a larger gap between those who had received treatment for behavioral health. In fact, there was a difference of 10 percentage points between age groups of those who had received behavioral health or substance use treatment (38.5% under age 55, compared to 28.6% age 55+).

Trauma/PTSD



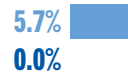
Excessive discipline, physical or emotional abuse



Domestic violence



Human trafficking



A former foster care recipient



FIGURE 2.13 EXPERIENCED NEGATIVE LIFETIME EXPERIENCES BY AGE GROUP

When asked about different life experiences one has gone through, ten percentage points more of those 55 and older noted experiencing trauma/PTSD (Figure 2.13). In addition, more individuals under age 55 had at some point been a foster care recipient and 5.7% had experienced human trafficking, compared to no individuals 55 and older reporting experiencing human tracking.

Lastly, while more individuals under 55 noted having police encounters in the past year (64.1% compared to 43.4%), those 55 and older reported that they were treated fairly during those encounters at a much higher percentage (Figure 2.14).

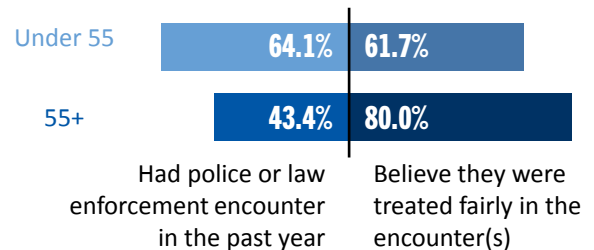


FIGURE 2.14 POLICE/LAW ENFORCEMENT ENCOUNTERS BY AGE GROUP

Self-Reported Mental Illness and/or Substance Use Disorder

In the following section we look at the different experiences between unsheltered individuals who reported having a substance abuse disorder or mental illness, such as bipolar disorder, clinical depression, schizophrenia, etc., versus those who reported they do not. Of 240 individuals who answered questions on mental illness and substance use, just over half (53.8%) noted having a mental illness and/or substance use disorder.

Of those who reported they had a mental illness and/or substance use disorder, over half (53.5%) noted they were white when asked about their race/ethnicity, followed by 34.2% who noted they were Hispanic or Latino and 25.3% who noted they were Black or African American. In regard to gender, 57.4% of those reporting a mental illness/substance use disorder were male, with 41.8% female and 0.8% non-binary.

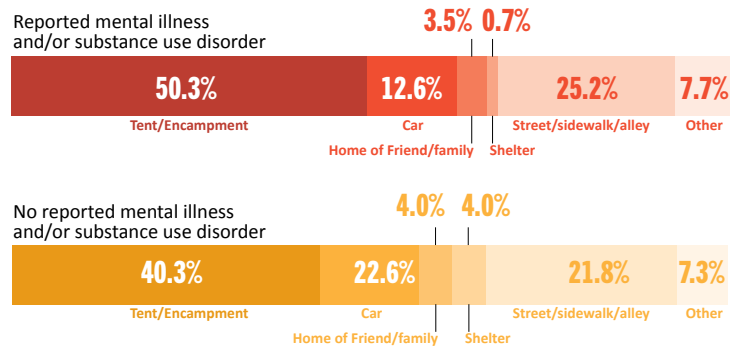
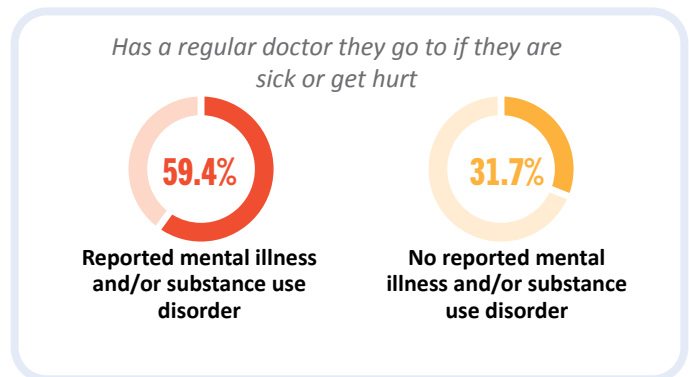


FIGURE 2.16 OVER THE PAST WEEK, WHERE HAVE YOU BEEN SLEEPING AT NIGHT?

A higher percentage of individuals with mental illness/substance use disorder reported having a spouse, partner, or friend they trust that usually stays with them (44.8% compared to 34%).

In regard to utilization of services, service utilization was high for both groups. However, as one may anticipate, individuals who reported a mental illness and/or substance use disorder had higher percentages of health and well-being challenges, such as having chronic health conditions and emergency health care usage.

Nearly double the percentage of those with reported mental illness/substance use disorder have a regular doctor they go to when they are sick or get hurt (59.4% versus 31.7%).



“Don’t judge just because someone is homeless. There’s a lot of us who don’t have mental health, drug, or alcohol problems. And nobody is beyond hope!”

– SURVEY PARTICIPANT

With regard to income, employment, and education, those with mental illness/substance use disorder did not show much of a difference compared to those who reported not having a mental illness and/or substance use issue.

There were slight differences in life experiences that contributed to their homelessness; for example, the percent of those who stated conviction or incarceration was an experience that contributed to them being homeless was nearly double for those who had a mental illness and/or substance use disorder (Figure 2.15 on previous page). In addition, ten percentage points more of those with a mental illness/substance use disorder had been sleeping in a tent or encampment at night during the past week (Figure 2.16).

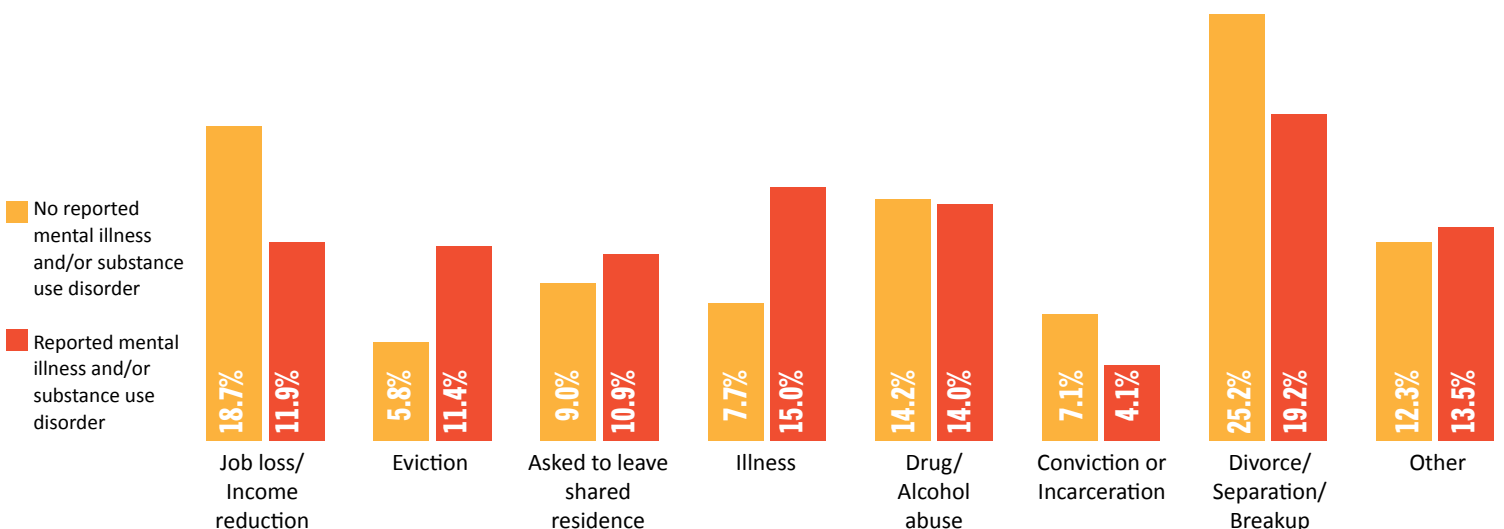


FIGURE 2.15 DID ANY OF THE FOLLOWING LIFE EXPERIENCES CONTRIBUTE TO YOU BEING HOMELESS?

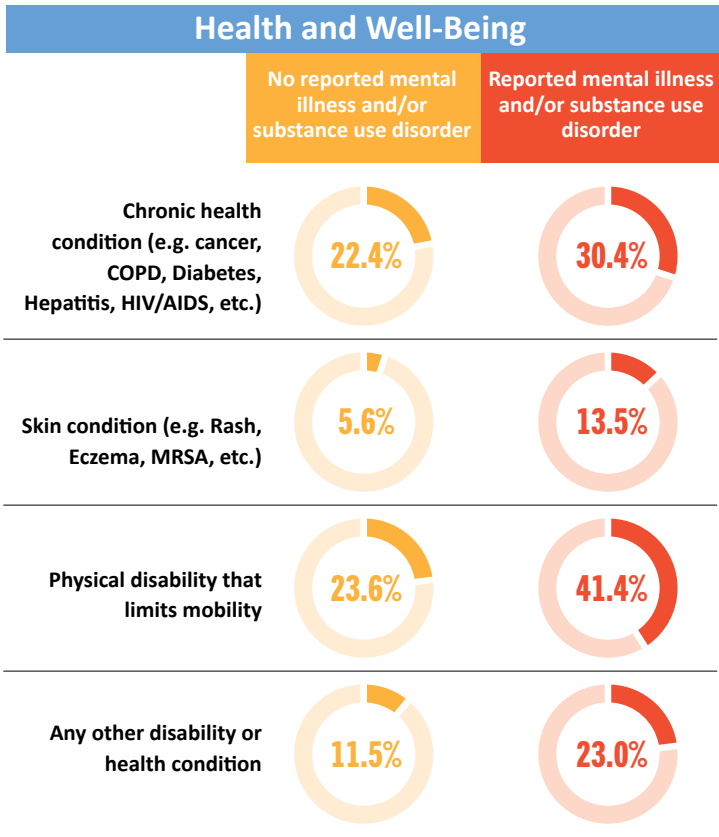


FIGURE 2.17 HEALTH CONDITIONS

In addition, 53.2% of individuals with a mental illness/substance use disorder needed emergency health care in the past year, compared to 44% of those who did not have a mental illness/substance use disorder. Figure 2.17 displays the higher percentages for those with mental illness and/or substance use disorder with other health conditions.

Table 2.10 shows us that whether having a reported mental illness and/or substance use disorder or not, similar percentages of unsheltered individuals in the survey faced certain lifetime experiences.

Individuals with a mental illness/substance use disorder had a higher percentage (64.4%) of encounters with law enforcement in the past year than those who did not report a mental illness/substance use disorder (39.8%) (Figure 2.18). In addition, those with a reported mental health/substance use disorder had a much lower percentage reporting that they were treated fairly during encounters they had with law enforcement (56.6% compared to 73%.)

In your lifetime, have you ever experienced?	Reported mental illness and/or substance use disorder	No reported mental illness and/or substance use disorder
Trauma/PTSD	31.7%	30.3%
Excessive discipline, physical or emotional abuse	28.2%	27.6%
Domestic violence	26.2%	28.9%
Human trafficking	5.0%	2.6%
A former foster care recipient	8.9%	10.5%

TABLE 2.10 IN YOUR LIFETIME, HAVE YOU EVER EXPERIENCED?

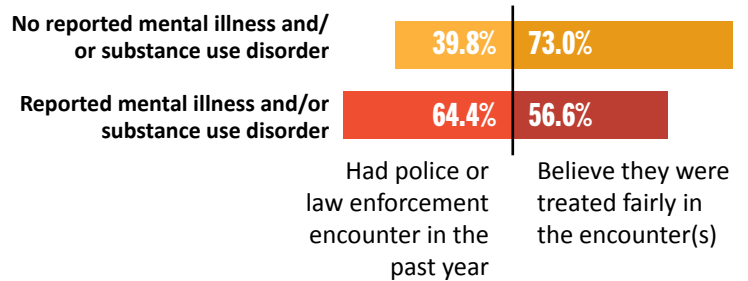


FIGURE 2.18 POLICE/LAW ENFORCEMENT ENCOUNTERS

Self-Reported Trauma or PTSD

Of the 243 survey participants who completed a survey, 36.6% of them noted experiencing trauma or PTSD in their lifetime (89 individuals). This section will highlight the more pressing disparities between these two groups.

Figure 2.19 shows that people with trauma/PTSD have a higher chance of having regular income from any sources (55.2% compared to 45.3%).

There was a small difference in whether the respondents currently had a job (10.3% to 12.2%). The top three reasons people with trauma/PTSD gave for not being able to work were disability/injury (46.1%), no permanent address/hygiene (33.7%), and transportation (22.5%; Table 2.11). They also indicated “education” more often than those without trauma/PTSD (9.0% to 1.3%). More of the people with trauma/PTSD graduated from high school or got a GED (72.7% compared to 64.4%).

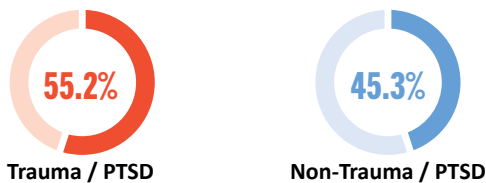


FIGURE 2.19 HAS A REGULAR INCOME FROM ANY SOURCE

Three-quarters (74.5%) of those with trauma or PTSD reported being able to pay more than “nothing” for rent every month (compared to 59.8%), 29.1% could afford less than \$400, another 25.5% could afford \$401 to \$600, and 10.9% could afford \$601 to \$800. However, those with trauma/PTSD are less likely to afford rent of \$801 or more (9.1% compared to 14.1%). It appears that those with PTSD can afford a low yet consistent rent due to SSI/SSD (58.7% compared to 48.3%), and 21.7% from other forms of income, yet only 13% earn income from a job, whereas 30% of those who did not have trauma/PTSD have income from a job.

	Trauma/ PTSD	Non-Trauma/ PTSD	Difference
Disability/injury	46.1%	23.4%	22.7%
Transportation	22.5%	10.4%	12.1%
No permanent address/hygiene	33.7%	22.7%	11.0%
Mental health/depression	18.0%	9.7%	8.2%
Education	9.0%	1.3%	7.7%
Substance abuse	12.4%	5.2%	7.2%
Job skills	7.9%	3.9%	4.0%
Other	11.2%	15.6%	4.3%

TABLE 2.11 WHAT DO YOU THINK KEEPS YOU FROM BEING ABLE TO WORK?

Health Care

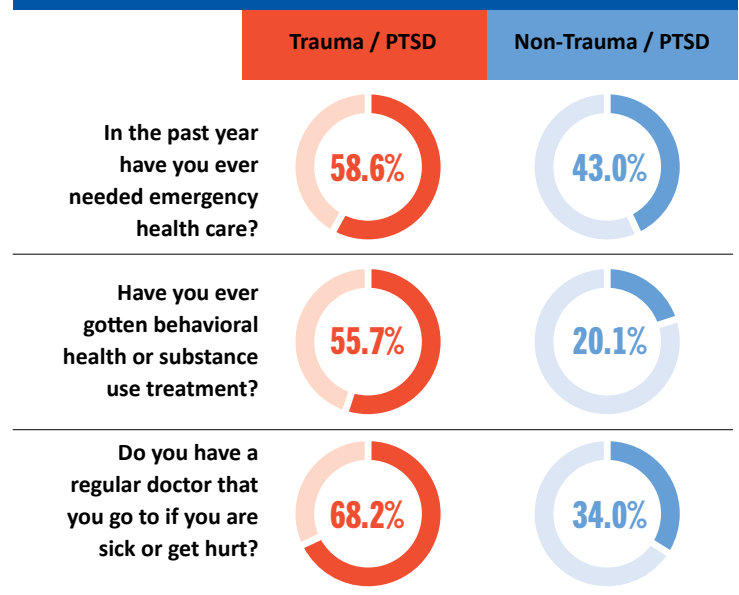
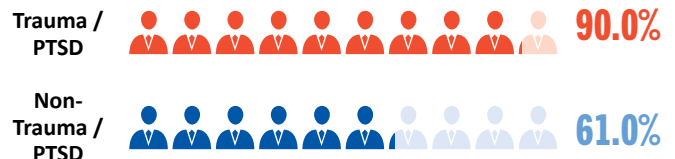


FIGURE 2.20 HEALTH CARE

People with PTSD receive SNAP food stamps at higher rates (64.3% to 52.4%). These respondents also have a greater need for health insurance, and it shows in their higher rate of having insurance (like MediCal, Kaiser, or something else) more often (86.0% to 70.1%), along with their medical history.

Two-thirds of the respondents with PTSD have a regular doctor that they go to when they get sick or hurt (68.2% compared to 34%) (Figure 2.20). While these respondents manage PTSD in their lives, half 55.7% reported having behavioral health or substance use treatment, compared to 20.1% who do not have PTSD.

Those with PTSD reported health conditions (90.9%) more than those without PTSD (61.0%)



Those with PTSD reported health conditions (90.9%) more than those without PTSD (61.0%): chronic health conditions (37.6%). In addition, those who indicated having trauma/PTSD also noted having a mental illness at a higher percentage than those with no trauma/PTSD (50.6% versus 16.9%), (Table 2.12).

More than half (64.0%) of respondents with trauma/PTSD also experienced excessive discipline, physical or emotional abuse, 60.7% domestic violence, 22.5% were a former foster care recipient, and human trafficking (10.1%) (Figure 2.21).

	Trauma/PTSD	Non-Trauma/PTSD	Difference
Has any health condition	90.9%	62.7%	28.2%
Chronic Health Condition(e.g. cancer, COPD, Diabetes, Hepatitis, HIV/AIDS, etc.)	37.6%	20.9%	16.7%
Skin Condition (e.g. Rashed, Eczema, MRSA, etc.)	15.1%	6.8%	8.3%
Mental Illness (e.g. Bipolar Disorder, Clinical Depression, Schizophrenia, etc.)	50.6%	16.9%	33.7%
Substance Use Disorder (Alcohol, Marijuana, Opioids, etc.)	58.3%	35.6%	22.8%
Physical Disability that limits mobility	51.2%	23.0%	28.2%
Any other disability or health condition	25.8%	13.3%	12.5%

TABLE 2.12 HEALTH CONDITIONS

A former foster care recipient



Domestic violence



Excessive discipline, physical or emotional abuse



Human trafficking



FIGURE 2.21 EXPERIENCED NEGATIVE LIFE EXPERIENCES

Respondents with trauma/PTSD are more likely to report being homeless longer than a year (78.2% to 75.5%). Over the past 3 years, more than 4 in 10 (44.3%) respondents with trauma/PTSD thought they might be living in a place that could be their permanent home. A similar percentage have a pet (32.6% to 34.4%) and/or a spouse, partner, or friend that is usually with them (39.1% to 40.4%).

Both participants with and without trauma/PTSD indicated that job loss or income reduction contributed to them being homeless (31.8% and 39.7% respectively). As seen in Figure 2.22, divorce, drug/alcohol abuse, and eviction as a contributor to participants homeless had similar percentages, however, conviction/incarceration had a large percentage point difference between the two groups (22.4% trauma/PTSD compared to 10.3% no trauma/PTSD).

Respondents were asked where they had been sleeping overnight in the past week. Those with trauma/PTSD reported sleeping on the streets, sidewalk, or alley at higher rates (31.5%) than those who did not have trauma/PTSD (23.2%), while those without trauma/PTSD were more likely to sleep in their car (23.2% compared to 14.6%), (Figure 2.23).

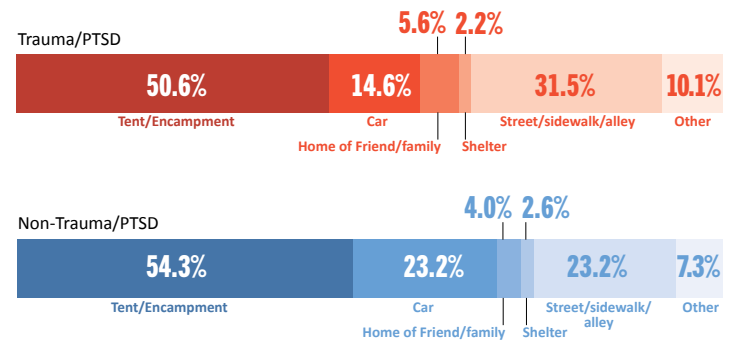


FIGURE 2.23 OVER THE PAST WEEK, WHERE HAVE YOU BEEN SLEEPING AT NIGHT?

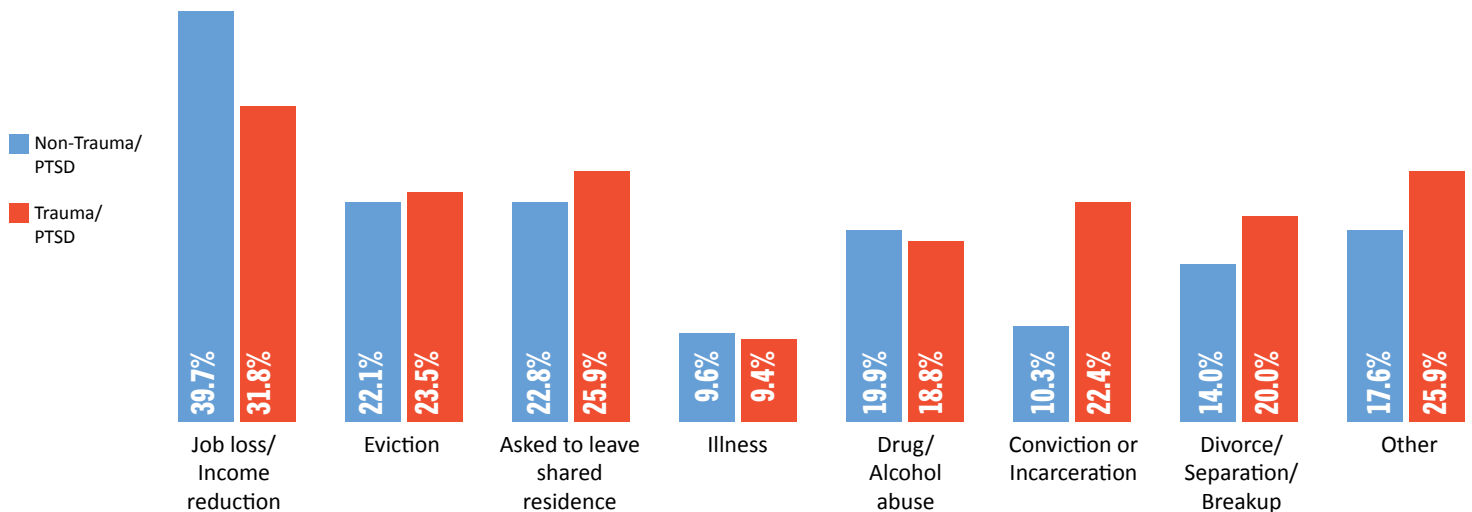


FIGURE 2.22 DID ANY OF THE FOLLOWING LIFE EXPERIENCES CONTRIBUTE TO YOU BEING HOMELESS?

Conclusion and Recommendations

The following recommendations come from conversations with experts in the field.

While social services are being used, many are underutilized. Shelter usage is an example where nearly half (46.8%) of respondents reported never having stayed overnight in one of the local shelters. Among those that said they had used a shelter, 51% (64 of 126) reported that they had experienced a problem when using them and 41% (26/64) reported having a bad experience/safety concerns. Table 1.8 provides some support for policy recommendations to increase shelter utilization, including those that enhance feelings of safety, create more flexible curfews, establish a more welcoming environment, and permit partners and pets.

Related to Table 1.3, perhaps more shelters could provide mailing addresses and hygiene supplies, as well as linkages to other needed services (e.g., health and mental health services, substance abuse rehab, transportation). Table 1.3 shows that 44.3% of respondents are prevented from working because of a disability. Policy recommendations could think about how to streamline access to SSI disability benefits and increase the number of mainstream housing vouchers available for people who are homeless with a permanent disability. Since 20.7% of respondents said “transportation” issues prevent them from working, policy recommendations related to increasing access to public transportation, such as zero-fare transit, appear warranted.

Evidence suggests that, for many people experiencing homelessness, significant life events, such as job loss, eviction, or a breakup, contributed to their becoming homeless. Many respondents (184 of 221) indicated that losing employment or housing was part of what contributed to them becoming homeless. These experiences are important to recognize when discussions around the extent to which a person “chooses” to be homeless arise.

Looking at Table 1.5, 36.7% of respondents reported that “job loss/income reduction” contributed to their homelessness, which supports policy recommendations that connect people to related services upon loss of a job or reduction of income (e.g., mandatory notice of unemployment benefits and a campaign to ensure compliance). Similarly, with 22.6% of people reporting that they became homeless after eviction and 24% reporting becoming homeless after being asked to leave a shared residence, perhaps a policy recommendation related to mandatory notice of housing options and/or referrals to housing agencies would assist. With 19.5% of respondents saying that drug/alcohol abuse contributed to their homelessness, policy recommendations that increase access to rehab services, especially when coupled with housing, job training, health and hygiene services, family law support, expungement and other legal services for reentry from incarceration, and other wraparound services.



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In Partnership with



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