

2025 Adult Arrestee Drug Use in the San Diego Region

August 2026

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Highlights

Four in five adults booked in a local jail tested positive for a substance

In 2025, 80% of adults in our sample tested positive for either marijuana or another illicit substance, including methamphetamine (meth), cocaine, opiates, and PCP. Over one-fourth (28%) of respondents tested positive for multiple substances.

Over half of respondents tested positive for methamphetamine

Meth use remains prevalent in the region. Over two-thirds (66%) reported ever trying it, and just over half (54%) tested positive at the time of interview. Compared to other substances, meth had the highest frequency of recent use, averaging 19.1 days in the past 30 days.

Tranquilizers were the most commonly misused prescription drugs

Nearly half (46%) of respondents reported using prescription drugs without a valid prescription. Tranquilizers (e.g., Xanax, Valium) were the most commonly misused substances, reported by 27% of respondents. This marked a 10 percentage point increase from the previous year.

Fentanyl was the most frequently cited drug leading to an overdose

Over one in four (26%) respondents reported ever experiencing a drug overdose, and among those, the majority (62%) identified fentanyl as the substance involved.

Intentional use of fentanyl-containing meth has declined substantially over time

Among adults who had ever used meth, 21% reported using it with fentanyl. Of those, the percentage of adults who report intentionally seeking fentanyl-containing meth has declined year over year, from 21% in 2023 to 12% in 2024 and 8% in 2025.

Most respondents have experienced housing instability

Nearly three-fourths (74%) of respondents reported ever being unhoused, and nearly half (46%) said they were currently experiencing homelessness.

Background

This CJ Bulletin, 2025 Adult Arrestee Drug Use in the San Diego Region, is one publication in a series that highlights findings from data collected as part of the San Diego County Substance Use Monitoring (SUM) program (formerly known as Substance Abuse Monitoring). This bulletin includes information pertaining to lifetime and recent self-reported drug use, perceived risk and availability of different drugs, characteristics of the population interviewed, and how these factors may be related to drug use.

Since 2004, when federal funding for the Arrestee Drug Abuse Monitoring (ADAM) program was suspended, San Diego has been the only site to continue this project uninterrupted. With funding from the SANDAG Criminal Justice Clearinghouse, these data have been reported on an annual basis, providing useful information to policy makers, law enforcement, prevention, and treatment professionals regarding drug use trends and involvement in other risky or illegal behavior over time. In 2025, this data collection effort was generously supported by the San Diego County Human Services Agency, Behavioral Health Services. Their support, as well as the cooperation of the San Diego County Sheriff's Department, is gratefully acknowledged.

As part of this project, adults booked in local jails are approached (using a random sampling method) within 48 hours of their booking. If an individual is available and willing to participate in a confidential interview, they are asked a series of questions related to their drug use history and provide a voluntary urine sample for drug testing. In 2025, a total of 258 adults completed the interview and provided a valid urine sample for analysis. This sample includes 181 males (70%) and 77 females (30%), all interviewed at Vista Detention Facility, San Diego Central Jail, or Las Colinas Detention and Reentry Facility.

What information is collected through these interviews?

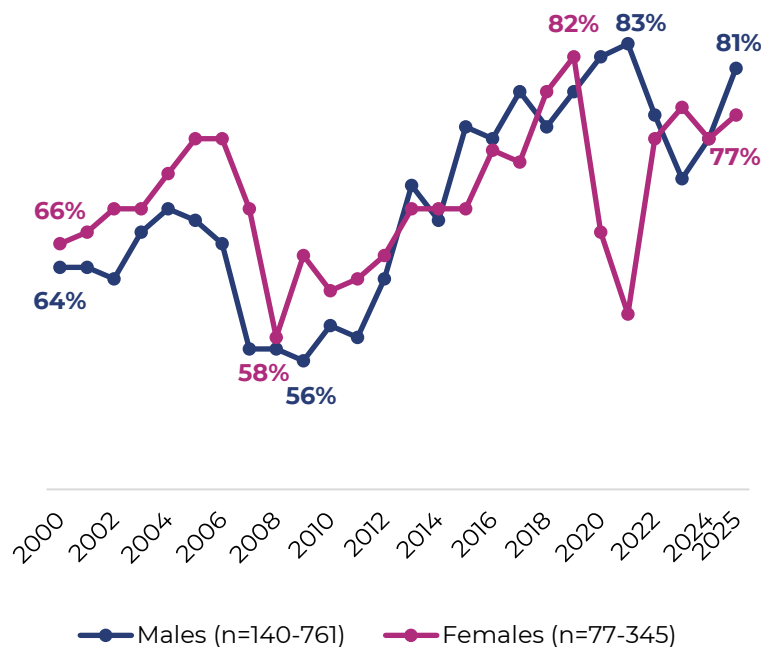
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Substance Use Findings

How many adults tested positive for illicit substances?

In 2025, 80% of adults in our sample tested positive for either marijuana or another illicit substance, including meth, cocaine, opiates, and PCP.¹ Positive rates were similar between males and females, marking a shift from recent years (Figure 1). In 2021, the largest gap between male (83%) and female (60%) positive rates was recorded, possibly reflecting pandemic-related changes in drug availability, enforcement practices, or booking patterns. By 2024, positive rates were identical for males and females for the first time. In 2025, however, the male positive rate increased from 72% to 81%.

Figure 1: Percentage of Adult Males and Females Positive for a Drug (2000-2025)



Note: Prior to 2013 and since 2015, the percentage of positive was based on marijuana, meth, cocaine, opiates, and PCP. In 2013 and 2014, the PCP test was replaced with a test for alcohol.
Source: SANDAG, 2025

What were the characteristics of the adults interviewed?

Among the 258 adults who completed interviews and provided urine samples, 70% were male and 30% were female. Participants were 48% Hispanic/Latino(a), 30% White, 15% Black/African American, 4% other, and 3% Asian or Pacific Islander. Participants ranged in age from 18 to 70 years (37.7 years on average). Overall, 12% were younger than 25, 50% were 25–39, and 38% were 40 or older.

Participants were geographically diverse, with the largest proportion living in the Central Major Statistical Area (MSA) of the County (31%). Most participants were single (74%), while 16% were divorced, separated, or widowed, and 10% were married.

The most serious booking charge was most commonly a violent offense (37%), followed by property (24%), drug (22%), and 'other' offenses (17%) (any offense that falls outside of the main three categorizations).

¹ The drug test panel continues to include marijuana despite California voters approving Proposition 64 in 2016. Marijuana will continue to be tested while it remains illegal federally because changes in use pre- and post-legalization are expected to continue to be an issue of interest.

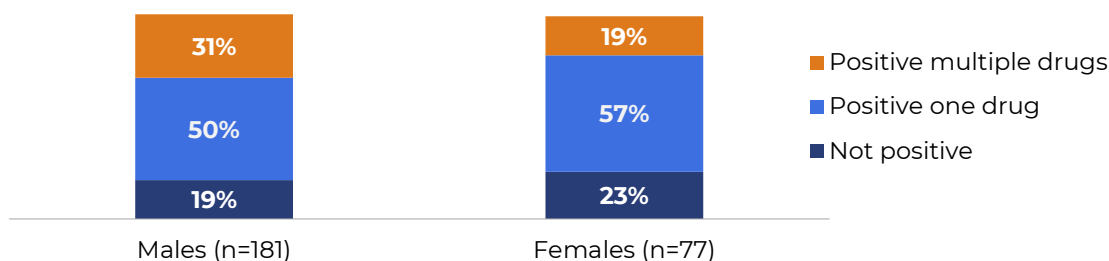
How many adults are polydrug² users?

In 2025, over one-fourth (28%) of respondents tested positive for multiple drugs, with this pattern more common among males (31%) than females (19%) (Figure 2). Among respondents with more than one drug detected, nearly all (94%) tested positive for two substances, while only 6% tested positive for three. Marijuana (96%) and methamphetamine (88%) were the drugs most frequently detected in these cases, whereas cocaine/crack was present in 17% of cases and opiates³ and PCP were each detected in just 3%.

How many adults in jail tested positive for just marijuana?

43% of respondents who tested positive for marijuana in 2025 did not test positive for anything else, but 57% did – either for meth, opiates, crack/cocaine, or some other combination.

Figure 2: Percentage of Positive Tests for Multiple Drugs by Gender (2025)

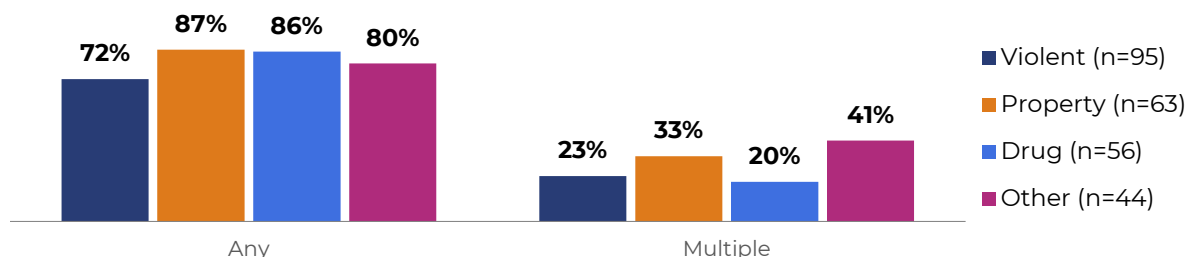


Note: Due to rounding, percentages may not add to 100.
Source: SANDAG, 2025

How do test rates vary by respondents' highest charge?

Because individuals may have been booked on multiple charges, participants were classified according to their highest charge. Drug detection rates were similar across charge categories, with no statistically significant differences observed. The proportion testing positive for any drug ranged from 72% among those whose highest charge was a violent offense to 87% among those with a property-related offense (Figure 3).

Figure 3: Positive Test for Any or Multiple Drugs by Highest Booking Charge (2025)



Note: "Other" charges include a range of offenses. Examples include probation violations, probation revocations, obstruction of justice, and public disturbance. Cases with missing information not included.
Source: SANDAG, 2025

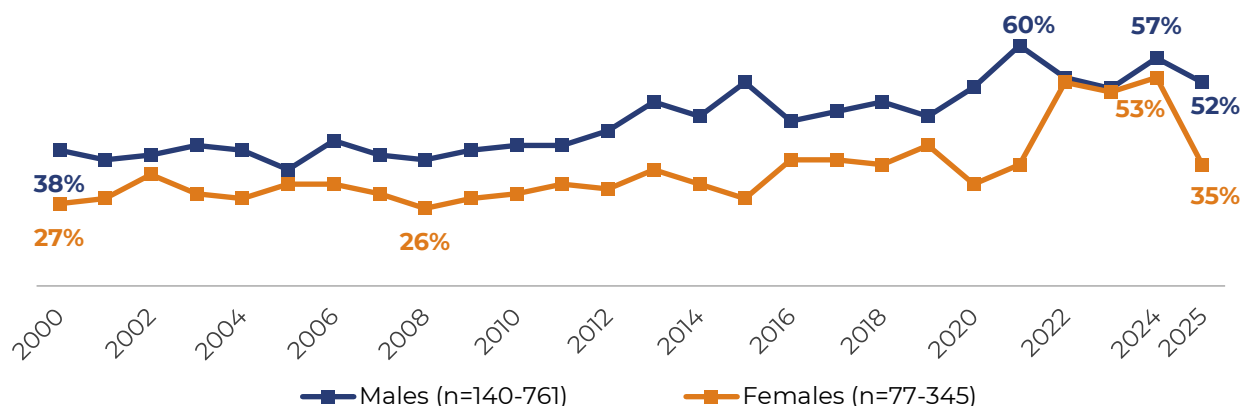
² Polydrug use refers to the use of two or more psychoactive drugs in combination to achieve a particular effect.

³ A positive opiate drug test indicates the use of opiates other than heroin, including morphine, hydrocodone, hydromorphone, and codeine. However, a key limitation of this test is that it does not yet detect synthetic opioids such as fentanyl.

How have positive rates by drug changed over time?

Nearly half (47%) of all respondents tested positive for **marijuana** in 2025. Among females, the positive rate decreased substantially from a record-high of 53% in 2024 to 35% in 2025 (Figure 4). The percentage of males testing positive also declined. Demographic patterns revealed higher positive rates among younger respondents: 77% of adults under 25 tested positive, compared to 50% of those aged 25–39 and 34% of those aged 40 and older. Across racial and ethnic groups, Black/African American individuals had higher positive rates (69%) compared to White (44%) and Hispanic (41%) individuals. All differences observed were statistically significant.

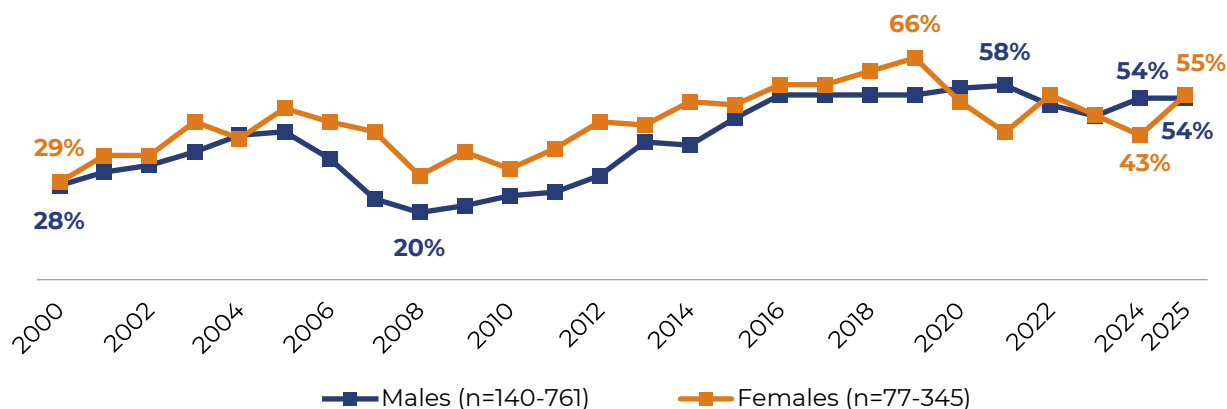
Figure 4: Percentage of Positive Tests for Marijuana by Gender (2000-2025)



Source: SANDAG, 2025

Since 2015, roughly one in two respondents have tested positive for meth. In 2025, over one half of respondents (54%) tested positive at the time of interview, with males testing positive at a higher rate than females (Figure 5). In contrast to marijuana, where younger age was associated with higher positive rates, meth positivity increased with age: 69% of respondents aged 40 and older tested positive, compared to 49% 25–39 year olds and 30% of those under 25. Positive rates also varied by race/ethnicity, with White individuals having the highest positivity (63%), followed by Black/African American (54%) and Hispanic/Latino(a) individuals (49%), although these differences were not statistically significant.

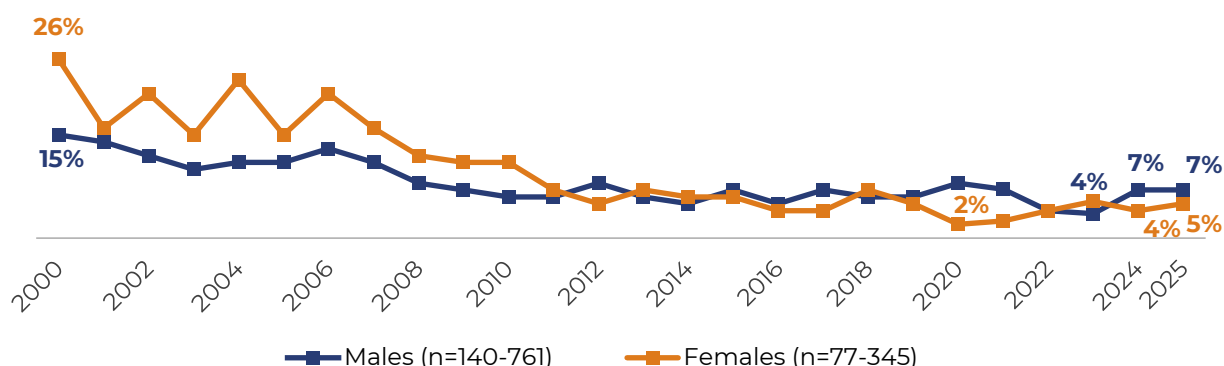
Figure 5: Percentage of Positive Tests for Meth by Gender (2000-2025)



Source: SANDAG, 2025

The percentage of adults testing positive for **cocaine** has sharply declined over the past two decades, with rates among females falling from 26% in the year 2000 to 5% in 2025 (Figure 6). Among males, positive test rates dropped by nearly half over the same period (from 15% to 7%). While female rates were consistently higher through the early 2000s, in recent years, positive test rates for both groups appear to have stabilized at relatively low levels. There were no significant differences found across gender, age, or race/ethnicity.

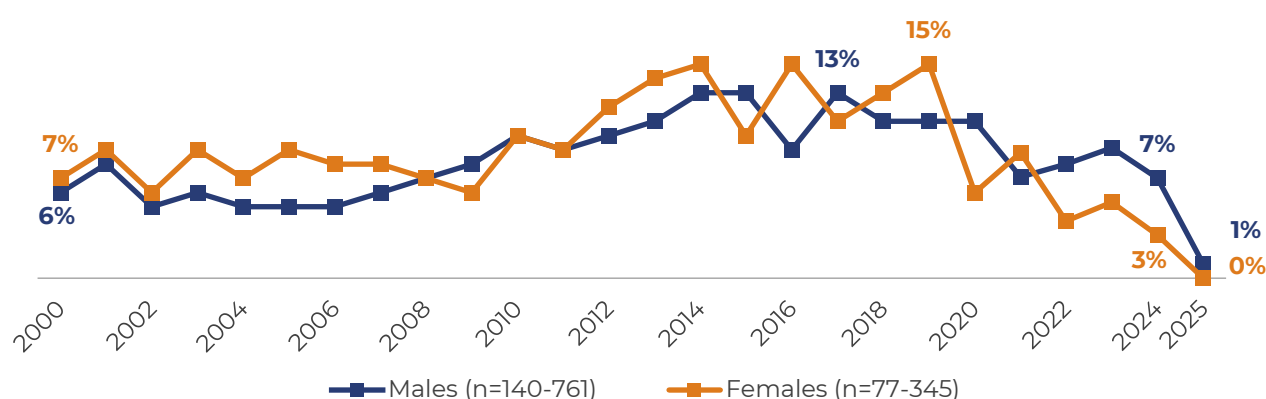
Figure 6: Percentage of Positive Tests for Cocaine by Gender (2000-2025)



Source: SANDAG, 2025

Positive test rates for **opiates**⁴ have remained low throughout the study period. Although rates increased modestly between 2010 and 2018, peaking at 15% among females and 13% among males, they have steadily declined since then (Figure 7). By 2025, no females and only two males (1%) tested positive for opiates, marking the lowest rates observed during the study period.

Figure 7: Percentage of Positive Tests for Opiates by Gender (2000-2025)



Source: SANDAG, 2025

Similar to opiates, only two individuals (1% of all respondents) tested positive for **PCP** in 2025 (not shown). Both were White, aged 25 to 39, and had a history of homelessness.

⁴A positive opiate test indicates the use of opiates other than heroin (e.g., morphine, hydrocodone, hydromorphone, and codeine) but does not detect synthetic opioids such as fentanyl.

How do characteristics of drug use vary by drug type?

Marijuana was the most commonly used drug among respondents, with 92% reporting lifetime use. It was also the earliest initiated drug, with first use occurring before age 15 on average. Among those who ever used, 71% reported using it in the last 12 months (Table 1).

Meth was the second most commonly tried drug, used by two-thirds (66%) of respondents, with an average initiation age of 21.1 years. Meth had the highest use in the last 12 months, at 79%, as well as the most days used in the past month, averaging 19.1 days (Table 1).

Cocaine was tried by 58% of respondents and at the second youngest average age (20.7), following marijuana. Over one-fourth (27%) reported use in the past 12 months, but recent use was relatively low, averaging 4.9 days in the past 30 days (Table 1).

Heroin was tried by nearly one-third (30%) of respondents and had the oldest average age of first use at 23.6 years. Similar to cocaine, 27% of those who ever used it reported doing so in the last 12 months. Recent use averaged every other day, at 14.8 days out of 30 (Table 1).

Crack was tried by 28% of respondents, with an average initiation age of 22.7 years. Only 10% of those who ever tried it reported use in the past 12 months (Table 1).

Table 1: Self-Reported Drug Use Patterns for Common Illicit Drugs (2025)

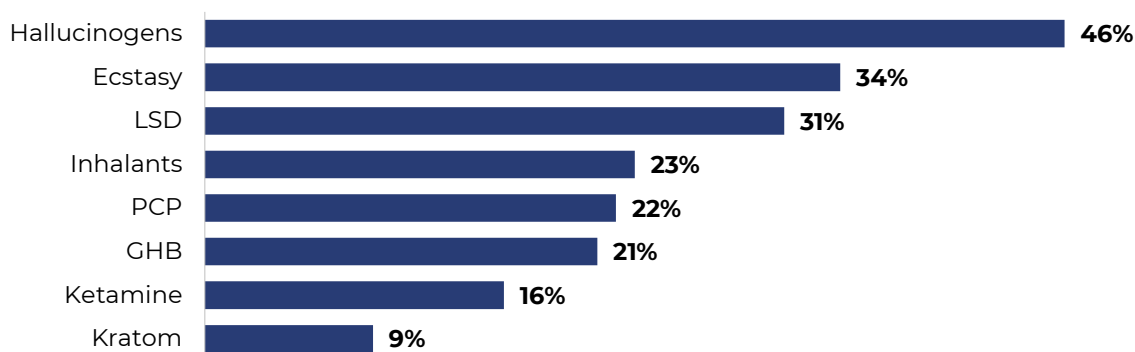
Drug Type	How many have ever tried?	What was the average age at first use?	Of those who have tried it, how many used in the last 12 months?	Of those who have used in the past 30 days, how many days did they use on average?
Marijuana	92%	14.7	71%	16.9
Meth	66%	21.1	79%	19.1
Cocaine	58%	20.7	27%	4.9
Heroin	30%	23.6	27%	14.8
Crack	28%	22.7	10%	--

Source: SANDAG, 2025

In addition to the five primary drugs examined, respondents also reported lifetime use of other illicit substances, including hallucinogens (46%), ecstasy (34%), LSD (31%), inhalants (23%), PCP (22%), GHB (21%), ketamine (16%), and kratom (9%) (Figure 8). Although lifetime use of these substances was generally lower than that of the more commonly reported drugs, several showed notable increases in 2025. Hallucinogen use increased from 37% to 46%, inhalant use increased from 17% to 23%, ketamine use doubled from 8% to 16%, and kratom use increased from 2% to 9%.⁵ While it is too early to determine whether these changes represent longer-term trends, they warrant continued monitoring in future years.

⁵ Kratom is a tropical tree native to Southeast Asia with leaves that contain compounds with psychotropic effects. There is no statewide legislation or regulation of kratom in California, so it remains legal and accessible to possess, consume, or sell in most jurisdictions. However, two cities—San Diego and Oceanside—have enacted local bans.

Figure 8: Percentage of Respondents Who Report Using Illicit Substances (2025)



Total = 258

Source: SANDAG, 2025

What does the drug market landscape look like?

Over the years, respondents have been asked a series of questions about what drugs they have obtained, what they traded to get them (cash and/or non-cash means), how easy they were to obtain, and whether they were acquired in the same area where the respondent reported living. The data presented here reflect only those who reported obtaining each drug in the past 30 days.

As Table 2 shows:

- Across the five listed substances, marijuana was most likely to be reported as “very easy” to obtain (67%), while heroin and cocaine were the least (31%).
- Most respondents who obtained these drugs in the last 30 days did so within the major statistical area (MSA) where they lived.⁶ Marijuana, fentanyl, and meth were most commonly obtained locally. In contrast, only 43% of those who obtained heroin in the past 30 days did so within their local area.
- Cocaine was most commonly obtained through non-cash means (77%), while fentanyl was most often paid for with cash (66%).

Table 2: Drug Acquisition Patterns Among Respondents Who Obtained Each Drug in the Past 30 Days⁷

Category	Marijuana (n=148)	Meth (n=120)	Heroin (n=14)	Cocaine (n=30)	Fentanyl (n=36)
“Very easy” to obtain	67%	50%	31%	31%	44%
Got in same MSA where they live	74%	72%	43%	68%	74%
Paid with cash	55%	56%	36%	47%	66%
Got with non-cash ways	65%	65%	64%	77%	50%

Note: Crack is excluded from the table due to a small sample size in 2025 (n=4).

Source: SANDAG 2025

⁶ There are seven MSAs in the San Diego region. To view these on a map, visit: <https://sdgis.sandag.org/>.

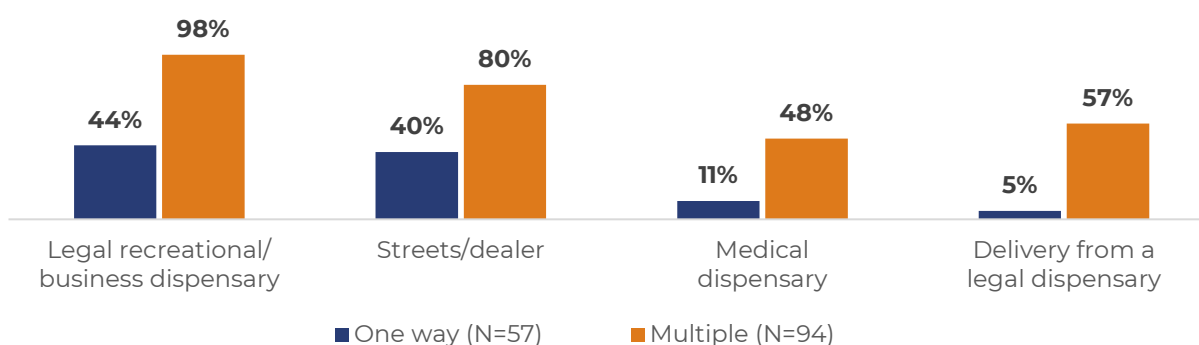
⁷ Percentage comparisons should be interpreted with caution, as sample sizes vary across drug types.

How respondents obtain marijuana

Since California legalized recreational marijuana through the passing of Proposition 64 in 2016, access to the drug has changed considerably. Understanding how respondents acquire marijuana, whether through legal or non-legal means, is important for interpreting patterns of use, availability, and preferences. The following analysis examines these key points:

- The **two most common** ways to obtain marijuana over the past 12 months were from a legal recreational/business dispensary (77%) or from a street dealer (65%).
- Regardless of whether respondents used one or multiple sources, the most commonly reported source was a legal recreational/business dispensary (Figure 9). Still, a majority (80%) of those using multiple sources still obtained marijuana from a street dealer, indicating that despite legalization, illicit markets remain an important source.

Figure 9: Methods of Obtaining Marijuana in the Past 12 Months



Note: Cases with missing information not included. Percentages based on multiple responses.

Source: SANDAG, 2025

Respondents' preferred sources followed a similar pattern, with half (50%) choosing legal recreational or business dispensaries as their preferred method. Figure 10 highlights the reasons behind these preferences. Those favoring legal recreational/business dispensaries most often cited better quality and safety, while those opting for street purchases emphasized ease, convenience, and the absence of taxes.

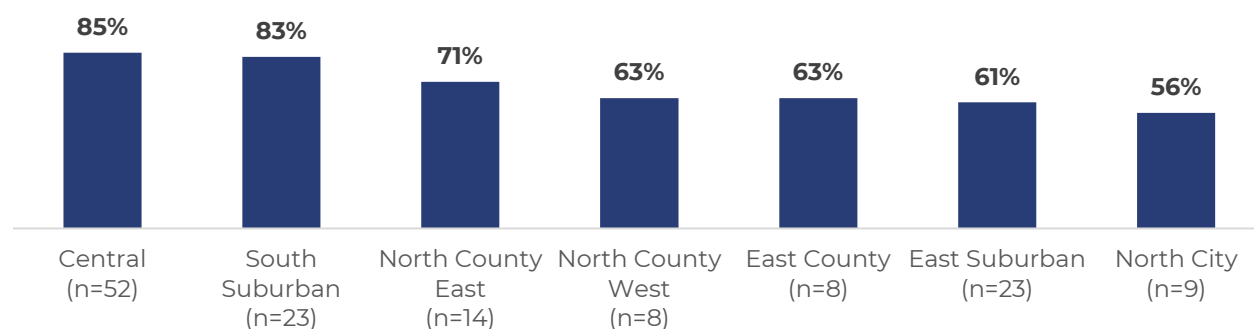
Figure 10: Top Reasons for Preferring Different Means of Obtaining Marijuana

Recreational	Medical	Delivery	On Street
Better quality: 36%	Better quality: 82%	Convenient: 81%	Easier: 58%
Safer: 33%	Easier: 36%	Easier: 63%	No taxes: 28%
Easier: 29%	Safer: 27%		Convenient: 25%

Source: SANDAG, 2025

Residents across San Diego County generally reported obtaining marijuana at a recreational/business or medical dispensary in the MSA where they lived, ranging from 56% in North City to 85% in Central (Figure 11).

Figure 11: Percentage of Residents Who Obtained Marijuana at a Recreational/Business Dispensary in the Same MSA in Which They Live



Note: Percentages should be compared with caution due to varying sample sizes. Cases with missing information not included.

Source: SANDAG, 2025

What do respondents report about alcohol use?

The majority of interviewed adults (83%) reported ever binge-drinking in their life (defined as five drinks or more for males and four drinks or more for females during one occasion).

Additional analyses revealed that:

- Those under the age of 25 reported binge drinking in the past 12 months at higher rates (76%) than those aged 25–39 (62%) and those over 40 (53%).
- Nearly two-fifths (38%) drank alcohol in the 24 hours prior to their arrest. Females reported this at a higher rate than males (47% versus 35%, respectively).
- On average, respondents were 17.5 years of age when they first had a binge drinking episode.

Figure 12: Respondent Alcohol Use History by Gender

Males (n=60-158)	Females (n=31-77)
• 84% ever binge drank • 17.5 average age first binged • 58% binge drank past 12 months • 36% binge drank past 30 days • 35% drank alcohol in the 24 hours leading to current arrest	• 81% ever binge drank • 17.6 average age first binged • 66% binge drank past 12 months • 43% binge drank past 30 days • 47% drank alcohol in the 24 hours leading to current arrest

Note: Cases with missing information not included.

Source: SANDAG, 2025

What does the data tell us about tobacco use and vaping?

Given the growing popularity of e-cigarettes and vaping products, respondents answered a series of questions regarding their vaping history, the types of products they had ever used, and the frequency of their vaping, if applicable. Tobacco use is examined first to provide context for participants' overall nicotine exposure and to establish a baseline for interpreting vaping behaviors. This distinction is particularly important given the increasing preference for e-cigarettes over traditional tobacco products among younger generations.

Tobacco use:

- Overall, 61% of adults reported currently using tobacco products, with males more likely to report doing so than females (65% versus 51%).
- Usage was highest among Black/African American (74%) and White (70%) respondents, compared to 54% of Hispanic respondents.
- Among different age groups, higher percentage of older respondents said they use tobacco: 70% of those aged 40 and over compared to 57% under 25.
- Only 14% reported tobacco was the first substance they ever used, much lower than marijuana (46%) and alcohol (31%).

Vaping history and trends:

- Over two-thirds (67%) of adults interviewed reported ever vaping.
- Vaping was more prevalent among younger adults, with nearly three-quarters (73%) of respondents under age 25 reporting use compared with 60% of those aged 40 and older.
- Flavored nicotine was the most commonly reported vaping product, with 90% of respondents indicating they had used it, substantially exceeding the use of THC/marijuana (52%) and non-flavored nicotine (24%).

Among respondents who had ever vaped, more than three-quarters (76%) reported vaping in the past 30 days, averaging 17.8 days of use during that period.

How much meth and heroin do respondents purchase?

Respondents who reported obtaining meth or heroin for their own personal use were asked about the quantity they most recently acquired. These questions were intended to characterize the typical amount of each drug obtained in a single purchase for personal consumption. Because respondents reported quantities using a variety of measures—including grams, dollar amounts, lines, and hits—only responses reported in sizeable units that could be standardized were converted to grams and included in this analysis. Among those with usable responses, participants reported obtaining an average of 2.0 grams of meth and 1.0 gram of heroin for personal use (Figure 13).

Figure 13: Amounts of Meth and Heroin Obtained for Personal Use

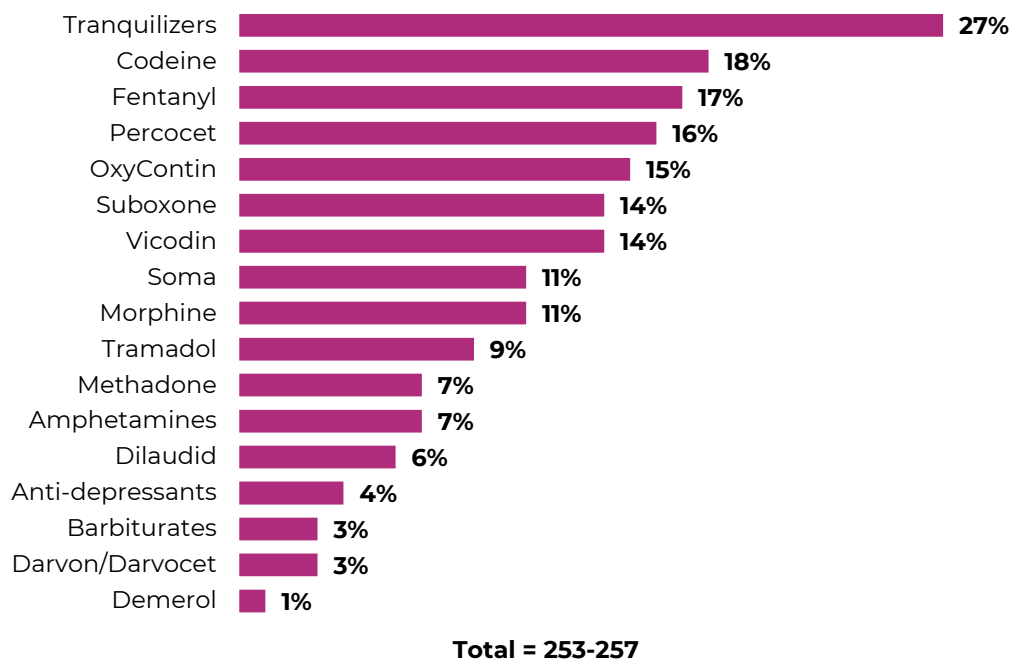
Meth (N=93)	Heroin (N=33)
Median amount obtained: 2 grams	Median amount obtained: 1.0 gram
Range: 0.1 to 28 grams	Range: 0.2 to 28 grams

Note: Cases with missing information not included.
Source: SANDAG, 2025

What do we know about illegal prescription drug use?

Respondents described whether they had ever used prescription drugs with a prescription (legally), without a prescription (illegally), or both. In 2025, nearly half (46%) of respondents reported ever using a prescription drug without a valid prescription. The most commonly reported drugs were tranquilizers (e.g., Xanax and Valium), codeine, and fentanyl (Figure 14).

Figure 14: Percentage of Respondents who Reported Using Prescription Drugs Without a Prescription



Note: Cases with missing information not included.

Source: SANDAG, 2025

While reported rates of non-prescribed drug use were similar across genders, higher rates were reported among White (56%) respondents, compared to Black/African American (45%) and Hispanic (41%) respondents.

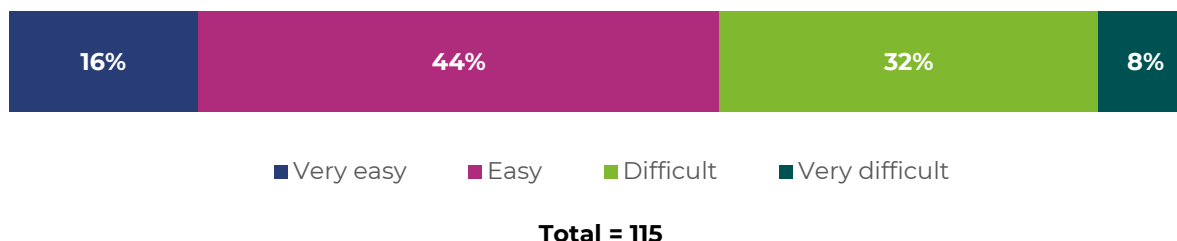
Figure 12: Characteristics of Respondents who Illicitly Used Prescription Drugs



Source: SANDAG, 2025

Respondents who reported ever using prescription drugs without a prescription were asked about the ease of illegally obtaining these drugs. Over three-fifths (60%) of users said it was “very easy” or “easy” to obtain, a rate that has remained consistent in recent years (Figure 16).

Figure 13: Perceived Ease of Obtaining Prescription Drugs Without a Prescription



*Note: Cases with missing information not included.
Source: SANDAG, 2025*

The most common ways respondents obtained prescription drugs illegally were being given them (82%), purchasing them from someone (45%), or stealing them from another person (14%) (Figure 17). Among those who were given prescription drugs, the most common sources were friends (62%) and casual acquaintances (47%), although nearly one in five (19%) reported receiving them from a stranger. Some respondents reported behaviors that carried additional health or legal risks. One in three (33%) who had illegally purchased prescription drugs suspected that the pills they bought were counterfeit. Additionally, a small proportion (8%) reported engaging in "doctor shopping" to obtain prescriptions, more than half (57%) of whom said they were successful.⁸

Figure 14: Sources of Prescription Drugs by Method of Acquisition

Given (82%)	Bought (45%)	Taken or stolen (14%)
Friend 62%		Family 53%
Casual acquaintance 47%		Friend 40%
Family member 20%		Casual acquaintance 40%
Stranger 19%		Stranger 27%

*Note: Percentages exceed 100% due to multiple responses. Cases with missing information excluded.
Source: SANDAG, 2025*

What does fentanyl use look like among the adult population in San Diego County jails?

Given the widespread concern over the high risk of overdose and fatality associated with fentanyl, a closer look was necessary to understand the patterns, characteristics and motivations of fentanyl use within San Diego County. Findings reveal that in 2025, nearly one-fourth (23%) of respondents reported ever using fentanyl, with 17% indicating they had used it illegally, without a prescription. The risks associated with fentanyl are reflected in overdose experiences: more than one-fourth (26%) of respondents reported a drug overdose, and among those, nearly two-thirds (62%) identified fentanyl as the substance responsible.

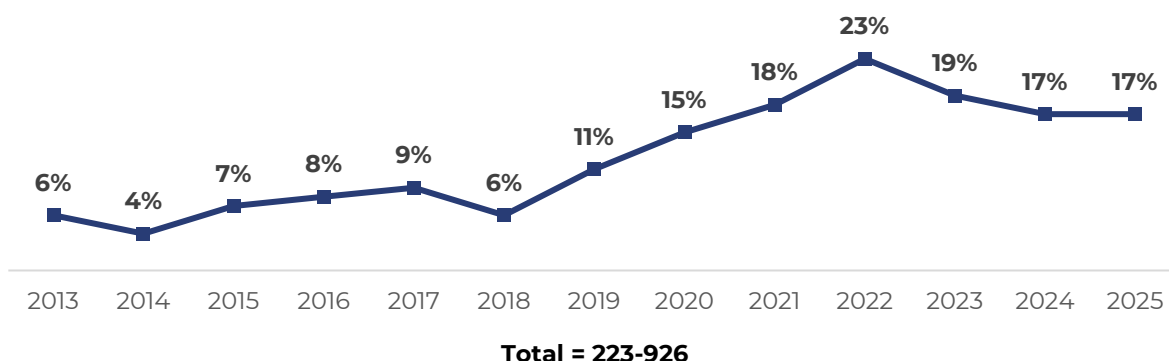
Fentanyl is a potent synthetic opioid typically used in medical settings for severe pain mitigation. Illicit fentanyl use has become increasingly common and fatal.

⁸ "Doctor shopping" is the practice of attempting to persuade a doctor(s) to prescribe a drug that is not actually needed for a mental or medical condition.

Rates of fentanyl use

As part of the broader set of drug use questions, respondents were asked if they ever used fentanyl with a prescription (legally), without a prescription (illegally), or both. Nearly one in five (17%) interviewed adults reported illegally using fentanyl, a proportion unchanged from 2024 (Figure 18). After reaching a peak of 23% in 2022, the prevalence of non-prescription fentanyl use has remained relatively stable in the last three years of this study.

Figure 18: Illegal Use of Fentanyl Over the Years (2013-2025)



Source: SANDAG, 2025

Characteristics of fentanyl users

Respondents who reported ever using fentanyl without a prescription displayed distinct social and behavioral characteristics, exhibiting higher rates of health-related risk factors than those who did not report fentanyl use (Table 3). Most notably, nearly all who reported use (95%) reported a history of homelessness, compared with 69% of non-users. Individuals who reported use also experienced substantially greater overdose risk, with more than two-thirds (68%) reporting a previous overdose compared with just 16% of non-users. They were also more likely to report that substance use had resulted in a psychotic episode (30% vs. 19%).

Consistent with these greater levels of need, fentanyl users were more likely to have received substance use treatment (66% vs. 36%) but were also considerably more likely to report being unable to access treatment when they sought it (43% vs. 16%). Awareness of overdose prevention resources was likewise higher among people with a history of use, with 82% reporting they knew where to obtain naloxone compared with 49% of non-users. While differences by race and ethnicity were modest, respondents who reported illegal fentanyl use were more likely to be White (43% vs. 29%) and less likely to be Black (7% vs. 17%).

Table 3: Demographics and Characteristics of Fentanyl vs. Non-Fentanyl Users

Characteristics	Illegal fentanyl use (N=41-44)	No fentanyl use (N=185-197)
White	43%	29%
Hispanic	41%	47%
Black	7%	17%
Have ever been unhoused	95%	69%
Previous arrest	89%	77%

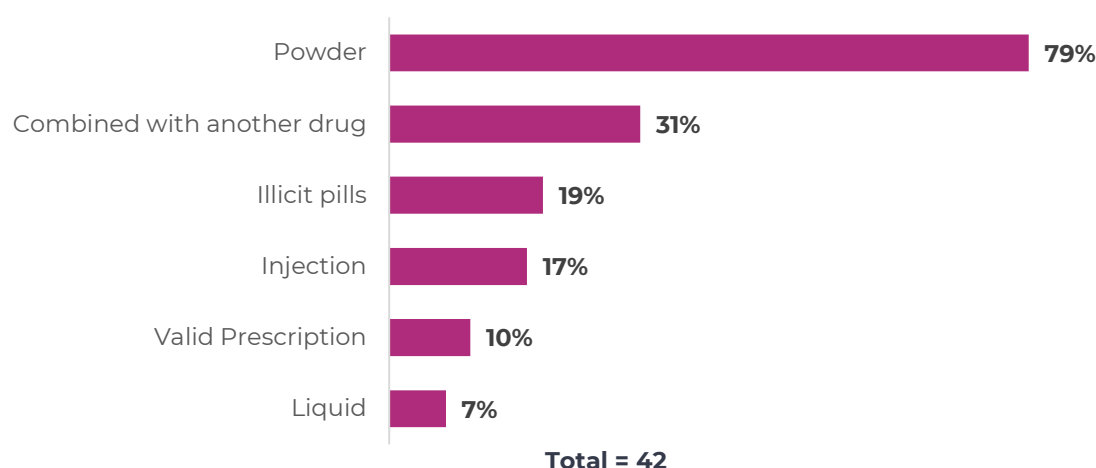
Characteristics	Illegal fentanyl use (N=41-44)	No fentanyl use (N=185-197)
Diagnosed with mental disorder	41%	34%
Drug use led to psychotic episode	30%	19%
Drug use led to crime to support habit	61%	26%
Previous drug overdose	68%	16%
Received substance use treatment	66%	36%
Sought treatment but found it unavailable	43%	16%
Know where to get naloxone	82%	49%

Source: SANDAG, 2025

Methods of use

To better understand how fentanyl is used, respondents were asked about the ways in which they administer or consume it. Among those who had used fentanyl without a prescription, powder was the most commonly reported form (79%), while liquid forms (e.g., nasal spray or eye drops) were the least common (Figure 19). Among respondents who reported mixing fentanyl with another substance, nearly all cited meth.

Figure 19: Common Forms in Which Fentanyl is Consumed



Note: Percentages exceed 100% due to multiple responses. Cases with missing information excluded.
Source: SANDAG, 2025

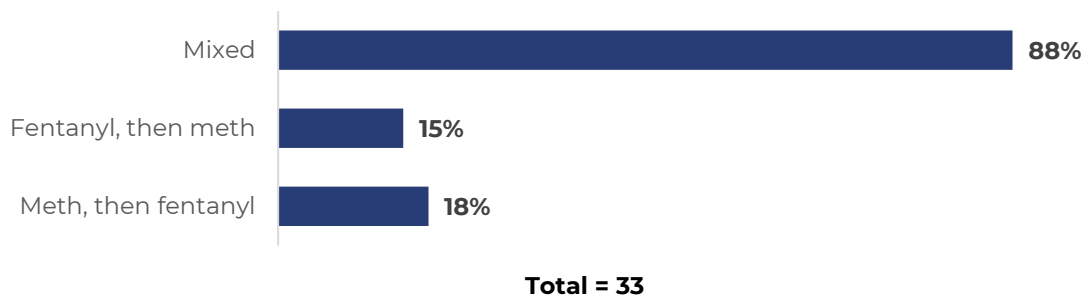
Fentanyl and meth

Considering that fentanyl is commonly used in conjunction with other drugs, respondents were asked about their experiences using meth and fentanyl together. Among adults who reported ever using meth, over one in five (21%) said they had also used it with fentanyl.

However, intentionally seeking meth containing fentanyl was less common and has declined over time. In 2025, only 8% of adults that had used meth reported intentionally seeking meth with fentanyl, down from 12% in 2024 and substantially lower than the 21% reported in 2023. Among respondents who had used both substances together, most (88%) said they mixed the drugs before use, a notable increase from 59% in the year prior (Figure 20). Although

additional years of data are needed to confirm a trend, this increase may indicate more intentional co-use of the two substances.

Figure 20: Reported Methods of Consuming Meth and Fentanyl

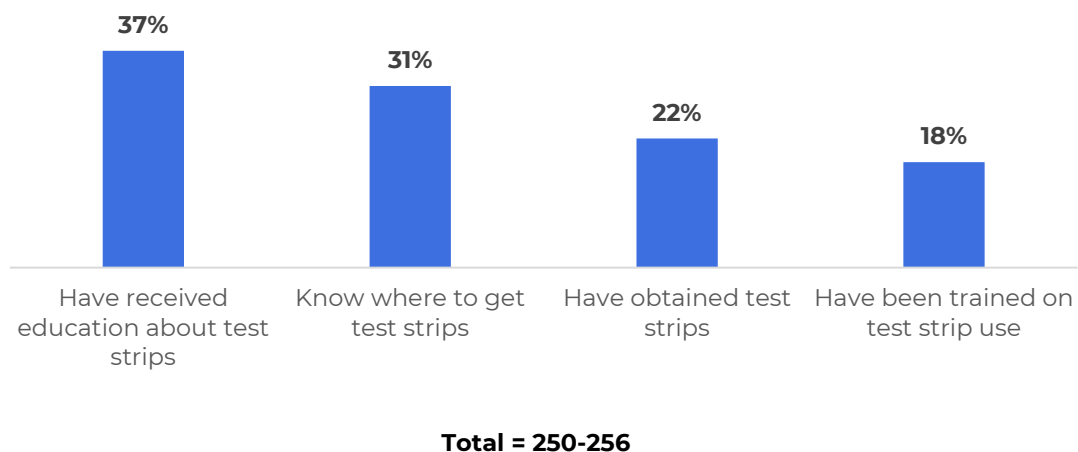


Note: Cases with missing information not included. Percentages based on multiple responses.
Source: SANDAG, 2025

Test strips and unintentional consumption

To better understand precautionary behaviors around fentanyl use, respondents were asked about their awareness and use of fentanyl test strips. While awareness of test strips was moderate, fewer respondents reported having direct experience using them. More than one-third (37%) reported receiving information or education about fentanyl test strips, and nearly one-third (31%) knew how to obtain them (Figure 21). However, fewer reported being trained to use them (18%) or having ever obtained test strips (22%).

Figure 21: Percentage of Respondents with Fentanyl Test Strip Knowledge



Note: Cases with missing information not included. Percentages based on multiple responses.
Source: SANDAG, 2025

Among those who had used test strips, 59% reported ever receiving a positive result. When respondents were asked how a positive fentanyl test result would influence their drug use, half (50%) said they would no longer use the substance, while 40% reported that a positive result would not change their behavior. A small number (7%) said they would reduce the amount they used.

Notably, one in three (33%) interviewed adults believed that a drug they had used in the past contained fentanyl, even though they had not been told so, based on how the drug affected

them. Together, these findings highlight both ongoing concerns about unintended fentanyl exposure and an opportunity to expand access to harm reduction tools.

Motivations and deterrents for purchasing fentanyl

Despite the rise of illegal fentanyl use in recent years, the majority of interviewed adults (90%) said they would not purchase a drug if they knew it contained fentanyl. Of the 26 individuals who said they would, the most common reasons cited included opiates being their drug of choice (46%), a desire for a stronger high (33%), and its effectiveness for pain relief or sleep (17%). Notably, among those willing to purchase fentanyl-laced drugs, the majority (81%) said they are currently doing so intentionally.

Counterfeit oxycodone pills (M30s or “blues”)

Given the increasing prevalence of counterfeit oxycodone pills—commonly referred to as “M30s”, “blues”, or “M-boxes”—interviewees were asked about their use of these pills.⁹ In 2025, 15% reported ever consuming “blues,” marking a 6% increase from the previous year. Among those individuals, 12 (32%) reported use within the last 12 months, primarily through smoking.

The majority of users (79%) were aware that the pills likely contained fentanyl at the time of consumption, indicating a level of risk awareness. Notably, 28% reported experiencing an overdose after using “blues.” Among the 16 individuals who had experience with both “blues” and powder fentanyl, 13 (81%) expressed a preference for powder fentanyl, most often citing stronger potency (46%) and perceived better quality (31%) as reasons for their preference.

Risk Factors and Support Needs

Prior Justice System Involvement and Criminal Activity

Understanding individuals’ prior involvement with the justice system provides essential context for assessing their risk of recidivism. This section covers key risk factors such as: respondents’ histories of arrests and incarcerations, drug distribution, gang involvement, and experiences related to sex-work.

Arrests and incarcerations

- For many respondents, involvement with the justice system began during youth. In 2025, more than one-third (37%) reported having been arrested as a juvenile or minor. Male respondents were significantly more likely than female respondents to report a juvenile arrest history (41% versus 27%).
- Among those who reported a juvenile arrest, the most common first arrest offenses were property crimes (47%), violent crimes (25%), and drug-related crimes (13%).
- Nearly four in five respondents (79%) reported at least one prior adult arrest, with a median of six previous arrests.
- The average age at first adult arrest was 22.7 years for males and 24.3 years for females.
- Over three in four respondents (76%) had been previously held or served time in jail, and 29% had served time in prison.

⁹ Daniulaityte, Raminta et al. 2022. “They Say It’s Fentanyl, but They Honestly Look like Perc 30s’: Initiation and Use of Counterfeit Fentanyl Pills.” *Harm Reduction Journal* 19 (1). <https://doi.org/10.1186/s12954-022-00634-4>.

- When asked about the nature of their first adult arrest, most respondents cited property crimes (29%), drug-related offenses (29%), or violent crimes (20%).

Involvement in drug distribution

- One in three (33%) respondents reported involvement in drug sales or distribution. Males were significantly more likely than females to report this (38% versus 23%).
- For many, involvement was recent; 40% said their participation occurred within the past 12 months.

Cross-border drug trafficking

- In 2025, 16% of interviewees reported being approached to transport or assist in bringing drugs across the U.S.–Mexico border, while 12% said they had actually crossed the border to do so.
- When asked why they transported drugs, 59% said they were paid to do so, 41% reported doing it for personal use, and 15% said they intended to sell the drugs themselves (respondents could select more than one reason).
- Among those who reported traveling to Mexico for drugs, the substances most commonly obtained were methamphetamine (37%), heroin (27%), marijuana (23%), and powder cocaine (23%).

Criminal involvement

- 79% prior arrests
- 37% arrested as a juvenile
- 33% have participated in drug distribution
- 33% committed a crime to support drug habit
- 12% crossed the border to transport drugs into the U.S.

Exchanging sex/pimping/pandering

- 12% approached for pimping/pandering
- 9% history of exchanging sex and/or sexual favors for money, drugs, or other things

Gang involvement

- 30% history of gang involvement
- Involvement began at 16 years of age, on average

Post-incarceration support

- 27% received re-entry services
- Housing was the main need reported after incarceration

Link between crime and drug use

- One in three (33%) interviewed adults reported ever committing a crime to support a drug habit.
 - This percentage was significantly higher for those who said they had previously been convicted of a felony (50%) compared to those who had not (21%).
 - A majority of respondents who reported committing a crime to support a drug habit also had a history of meth use (94%).
 - Most often, these crimes were property offenses (86%).
- A separate question asked participants if they had ever committed a crime while under the influence of drugs, of which 42% said they had. At the time of committing the crime(s), most respondents reported having been under the influence of meth (75%), fentanyl (17%), marijuana (13%), or heroin (11%).

Exchanging sex/pimping/pandering

- In 2025, 12% of respondents said they had ever been approached by someone offering to pimp or prostitute them.
 - This was significantly more common among females (22%) than males (8%).
 - Individuals with a history of homelessness were significantly more likely to report this experience (15%) compared to those who have never been unhoused (3%).
- Slightly under one in ten (9%) said they had ever exchanged sex for money, drugs, or other things.
 - Most (59%) were male.
 - The average age at which respondents first exchanged sex for something was 23.3 years (range: 13 to 42).
 - The majority who reported ever exchanging sex for money or other things also reported a history of homelessness (95%).

Gang Involvement

- Nearly one-third (30%) of respondents reported some type of gang involvement, beginning at an average age of 16 (range: 5 to 37).
- Among those who reported any type of gang involvement, 64% said they had this contact within the past five years.
- Among those, 13 adults (29%) said they spend time with a gang but have never been members, while 11 (24%) disclosed being current gang members. A combined 20 individuals (44%) mentioned no longer being affiliated, either through ending formal membership or ceasing to hang out with them.
- When those individuals who ended their affiliation with a gang were asked why they had done so, they most frequently reported having gotten tired of the lifestyle (58%), having a family intervention (11%), wanting to avoid or get out of the criminal justice system (11%), or acknowledging the risks (11%).
- Those who reported a history of gang affiliation were significantly more likely to have been arrested as a juvenile (53%) compared to individuals without a gang-related history (29%).

Post-incarceration supervision and support

- Among respondents who had served time in prison, 80% reported having been on parole, including 30% who were still on parole at the time of the interview.
- Similarly, among respondents with a history of arrest, nearly three-fourths (72%) reported having been on probation, and 41% were currently on probation.
- Despite the high prevalence of post-release supervision, just over one in four respondents (27%) who had spent time in custody reported receiving reentry services either during incarceration or after their release.
 - Specifically, 20% reported receiving reentry services while in custody, and 19% reported receiving support after release.

- When asked about their biggest needs upon reentry after incarceration, the most common responses were housing (30%), employment (26%), substance use treatment (13%), and transportation (13%).

Mental Health Challenges

Mental health has been a key area of focus within broader substance use monitoring, given its strong links to substance use and justice system involvement. This section summarizes reported mental health conditions, treatment history, medication adherence, and experiences with suicidal ideation.

- Over one in three (37%) adults reported they had ever been diagnosed with a mental or psychiatric disorder. Black/African American and White individuals were significantly more likely to be diagnosed (50% and 49%, respectively) compared to Hispanic/Latino(a) individuals (28%).
- The vast majority of those with a diagnosis (85%) said they had been prescribed medication for their disorder. Of those 80 adults, 39% had a current prescription and of those, 29% were not taking them as prescribed.
- Over one in four (28%) reported they had previously stayed overnight for mental health treatment at a hospital or facility.
- Of those who had ever been admitted to a mental health or psychiatric facility for at least an overnight stay, the median number of stays was 2 (range: 1 to 57). On average, they were 25 years old when they were first admitted (range: 6 to 55).
- Over half (57%) of those who had been admitted to a mental health facility said they were under the influence of alcohol or other drugs at the time it happened. Most respondents reported being on meth (53%).
- Psychosis is a condition characterized by delusions and hallucinations and is commonly associated with mental illness. Respondents were asked if they had ever taken a drug that led to a psychotic episode. Around one in five (21%) responded affirmatively, with meth most frequently cited as leading to this occurrence (78%).
- Almost one-third (31%) reported being diagnosed with attention deficit disorder (ADD) or attention deficit hyperactivity disorder (ADHD), and a majority of them were prescribed medication for it (71%). Of those with a prescription, around half (52%) said they began using another drug as a substitute for their ADD or ADHD medication.
- One-fifth (20%) of respondents said they had attempted suicide and 35% said they had seriously thought about it. Individuals with a mental health diagnosis were significantly more likely to report a suicide attempt (40% versus 9% without a diagnosis).

Mental Health Challenges

37% mental or psychiatric diagnosis

85% said they had been prescribed medication for their disorder.

29% not taking current medication for mental health issues as prescribed

28% admitted overnight to a mental health facility. Over half were under the influence when it happened.

21% experienced drug-induced psychosis; meth was the most common catalyst (78% of cases)

35% seriously considered suicide

20% previously attempted suicide

Social Determinants of Risk and Well-being

Education, employment, family support and stable housing are critical to reducing recidivism risk. This section covers information on respondents' educational attainment, employment status, health insurance coverage, family and child welfare involvement, and histories of homelessness and foster care. Housing instability was widespread among respondents and often linked to prior justice involvement, substance use, and systemic barriers to stability.

Education, employment, and insurance

- Nearly half of all respondents (44%) reported having a high school diploma or GED, and 29% said they had some college experience or a two-year associate degree.
- At the time of their arrest, 38% of respondents were employed (full- or part-time), 25% were unemployed but actively seeking work, and 21% were unemployed and not looking.
- Fewer than one-fifth of respondents (16%) reported not having health insurance at the time of the interview.
- Fewer than one in ten respondents (8%) reported having previously served in the military; the majority (79%) of whom had been discharged at the time of the interview.

Foster care involvement

- One in seven (14%) adults reported having been in foster care, and 43% of those said they aged out of the system—meaning they exited foster care upon reaching the maximum eligible age.

Dependent children

- Fifty-nine percent (59%) of interviewed adults reported having children.
- Over one-fourth (28%) reported prior Child Welfare System (CWS) contact, and 20% (eight individuals) had an open case at the time of the interview.

Homelessness

- Nearly three-fourths (74%) of respondents reported having ever been unhoused, and nearly half (46%) said they were currently experiencing homelessness.
- Respondents first became unhoused at a median age of 25 (range: 1 to 65).
- In the 12 months prior to the interview, 27% said they were unhoused most of the time, 30% of respondents reported having spent most of the past 30 days with no fixed place to stay.
- The most commonly reported reasons for losing housing included loss of family (23%), drug use or addiction (23%), financial hardship (17%), being kicked out or running away from home (15%), job loss (13%), and threat of violence or abuse (10%). Several individuals also cited mental health issues, divorce, incarceration, and disability.
- Around one in six (16%) individuals who had been unhoused in the past 12 months said they had stayed in a shelter during that time. Among those who had not used shelters, reasons included restrictions or rules at shelters (23%), safety concerns (16%), waitlists (16%), and having pets or loved ones that could not stay there with them (9%). Other reasons included personal preference, pride, having somewhere else to stay, or not knowing how to access shelter services.

- Individuals with a previous arrest were asked where they spent their first night after their most recent release from jail. The second most common response, after their own home (44%), was on the street (25%).

Figure 22: Key Indicators of Criminal Justice Involvement and Homelessness

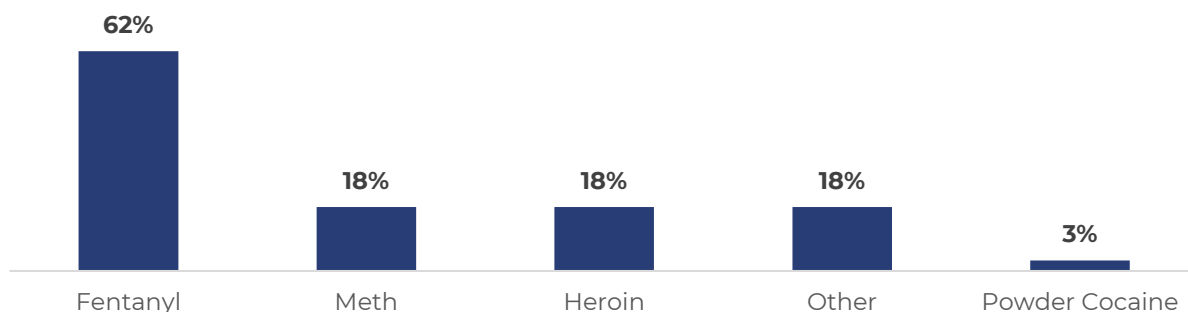


Source: SANDAG, 2025

Overdose histories

In 2025, over one in four (26%) respondents reported ever experiencing a drug overdose, representing an increase of 6% from the previous year. Among those who had overdosed, fentanyl was the substance most frequently cited as leading to an overdose, with 62% identifying it as a contributing factor (Figure 23). However, the survey did not distinguish whether fentanyl was used alone or concurrently with another drug.

Figure 23: Substances Associated with Reported Overdoses



Note: Percentages exceed 100% because respondents could select multiple substances.

Source: SANDAG, 2025

Harm reduction and safety tools

In 2025, participants were asked new questions about whether they had ever received information or education on a range of harm reduction and safety topics. Nearly two-thirds (64%) reported receiving education about naloxone (Narcan), while 37% reported having learned about fentanyl test strips. Far fewer respondents reported receiving information about the Good Samaritan Law or overdose protection laws (15%) or local prevention and treatment resources (14%).

Among those who had received information, the most common sources were friends (28%), healthcare providers (19%), and community agencies (16%). Smaller proportions identified correctional staff, police, clinical staff within correctional facilities, emergency medical services, and family members as sources of information. Despite awareness of these harm reduction topics among many respondents, nearly one-third (32%) reported never having received any education on them, highlighting an important gap in outreach and education efforts.

Naloxone knowledge and usage

A series of new questions also assessed respondents' knowledge of and experience with naloxone, a medication used to reverse opioid overdoses.

- Just over one-third of respondents (38%) reported having received training on how to administer naloxone.
- More than one-quarter (27%) had used it to reverse an overdose in another person, while 21% reported having naloxone administered to them during an overdose.

Access and awareness were more widespread than formal training.

- Over half of respondents (56%) knew where to obtain naloxone, and 40% had obtained it at some point.
- Among those who had acquired naloxone, most (76%) reported currently having access to at least one dose.

These findings suggest that while many respondents are familiar with naloxone and a substantial proportion have direct experience with overdose response, there are still opportunities to expand training.

Substance use treatment

Beyond harm reduction, respondents were also asked about their experiences with substance use treatment, offering a broader picture of recovery pathways and barriers to care.

- About two-fifths of respondents (41%) reported having received substance use treatment at some point in their lives. Among those, 75% said their most recent treatment episode was successful.
- On average, respondents had been admitted to treatment 3.3 times (range: 1 to 30).
- Among those who did not successfully complete treatment, the most commonly cited reason was wanting to resume substance use (35%), while others reported that the program was too strict, too long, or that they had been removed from treatment.
- When asked about their most recent treatment admission, an almost equal percentage of respondents said it was court-ordered (51%) versus voluntary (49%). There was no significant difference in outcomes between the two groups.
- One in five (20%) respondents said they had tried to access substance use treatment at one point but found it unavailable. Nearly all of these individuals (88%) also reported a history of homelessness.
- The type of treatment they were seeking was most often inpatient care (56%), followed by detox services (19%).
- Nearly a quarter (24%) of respondents said they have been offered drug or alcohol treatment as a condition of probation or parole. The most commonly reported was drug court (53%), a specialty court for drug-addicted offenders. Of these 60 adults, a vast majority (88%) accepted this offer.
- When asked if they thought they could benefit from treatment right now (at the time of interview), 43% responded affirmatively. Among them, the most commonly cited substance they wanted help for was meth (67%), followed by fentanyl (20%) and marijuana (9%).

Risky behaviors related to alcohol and substance use

Criminal and other risky behaviors of justice-involved adults with substance use issues can affect others in the community. These behaviors may include driving while impaired, sharing syringes, or entering workplaces under the influence.

- More than one-third (36%) of interviewed adults reported ever being arrested for driving under the influence (DUI). Among those, 70% said their most recent DUI involved alcohol, 7% drugs, and 23% both.
- Among drug-involved DUIs, they most frequently involved meth (54%).
- Prior to their most recent DUI incident, 37% consumed alcohol at home, while 33% reported drinking at a bar.

In the **12 months** preceding the interview, many respondents reported engaging in behaviors or experiencing consequences that highlight public safety and health concerns:

- **34%** rode with a driver under the influence
- **30%** drove under the influence
- Of those with employment, **30%** went to work under the influence and **25%** missed work due to drinking or using drugs
- **30%** have gone to an emergency room for an alcohol/drug-related issue
- **23%** have injected drugs, and of those, 36% shared needles and/or works
- **15%** had health problems related to their substance use
- **8%** were involved in a domestic violence altercation while under the influence

Awareness of Legal Reforms

Legal reforms such as Proposition 47 are intended to reshape sentencing, expand opportunities for record reduction, and increase access to services. However, these potential benefits depend on people knowing that the policies exist. In 2025, awareness of Proposition 47 remained limited, with only one in five (20%) respondents reporting they had heard of the law, including 29% of respondents with a prior felony conviction.

Even among those who were aware of Proposition 47, relatively few (22%) had petitioned to reduce a prior offense, suggesting that awareness alone may not be sufficient to translate policy changes into action. In November 2024, California passed Proposition 36, which modified several elements of Proposition 47. Awareness of this newer reform was also limited amongst 2025 respondents, with only 21% reporting they had heard of it.

Summary

This bulletin provides an in-depth look at drug use patterns, behaviors, and life circumstances among adults booked into local San Diego County jails. The findings portray a high-risk substance use landscape, where widespread drug use intersects with housing instability, persistent illicit markets, and growing overdose risk. Methamphetamine remains the dominant substance, while fentanyl has become an increasingly significant driver of harm, contributing to a greater share of overdoses. At the same time, rising misuse of prescription medications, continued polysubstance use, and increases in the use of other recreational drugs point to a broadening pattern of substance use.

Beyond drug use, the data reveal strong associations between life risk factors, mental health, and crime. Many respondents reported mental health diagnoses, suicide attempts, and histories of homelessness or time in foster care—experiences that often co-occur with drug use and justice system involvement. The results also highlight unmet needs for intervention. While many respondents were aware of or had experience with naloxone and overdose response, fewer reported receiving broader harm reduction education or information about available prevention and treatment resources. Notably, nearly half of respondents expressed interest in treatment at the time of interview. Together, these patterns underscore the importance of addressing not only substance use itself, but the broader social and behavioral health factors that drive and sustain it.