

Eastern Kentucky University

Encompass

Honors Theses

Student Scholarship

Fall 11-30-2020

Rethinking Rural Homelessness: A Comparison of the Causes, Solutions, and Services for Persons Experiencing Homelessness in Appalachia Versus Urban Areas in the United States

Casey Frommeyer

Eastern Kentucky University, casey_frommeyer1@mymail.eku.edu

Follow this and additional works at: https://encompass.eku.edu/honors_theses

Recommended Citation

Frommeyer, Casey, "Rethinking Rural Homelessness: A Comparison of the Causes, Solutions, and Services for Persons Experiencing Homelessness in Appalachia Versus Urban Areas in the United States" (2020). *Honors Theses*. 783.

https://encompass.eku.edu/honors_theses/783

This Open Access Thesis is brought to you for free and open access by the Student Scholarship at Encompass. It has been accepted for inclusion in Honors Theses by an authorized administrator of Encompass. For more information, please contact Linda.Sizemore@eku.edu.

EASTERN KENTUCKY UNIVERSITY

Rethinking Rural Homelessness:

A Comparison of the Causes, Solutions, and Services for Persons Experiencing
Homelessness in Appalachia Versus Urban Areas in the United States

Honors Thesis

Submitted

in Partial Fulfillment

of the

Requirements of HON 420

Fall 2020

By

Casey Frommeyer

Mentor

Dr. James N. Maples

Department of Sociology

Abstract

Rethinking Rural Homelessness:

A Comparison of the Causes, Solutions, and Services for Persons Experiencing Homelessness in Appalachia Versus Urban Areas in the United States

Although homelessness in urban areas has been analyzed extensively, there is little research and data on homelessness in rural areas, specifically in Appalachia. The goal of this research is to shed some light on rural homeless experiences by comparing them to their urban counterparts. Four people from organizations that work with persons experiencing homelessness were interviewed using a snowball sample and asked questions which compare the causes, services, and solutions for homelessness in rural and urban areas. Based on these interviews, it can be concluded that the issues people experiencing homelessness go through, such as mental health problems and stigma, are similar throughout rural and urban locations, but the causes, services, and solutions for homelessness in Appalachia are distinct to the region and vary from those in urban areas. Some key differences include the visibility of persons experiencing homelessness, the impact of poverty and the opioid epidemic, and the types of barriers on rural and urban care centers. Acknowledging what makes homelessness in Appalachia unique can guide programs and services in their pursuits of preventing and ending homelessness.

Table of Contents

Abstract.....	ii
Acknowledgements.....	iv
Introduction.....	v
Literature Review.....	2
Methods.....	7
Analysis.....	11
Discussion.....	14
Conclusion.....	18

List of Figures

Figure 1: County Economic Levels.....	5
Figure 2: Subregions of Appalachia.....	5
Figure 3: Drug Overdose Rates.....	6

List of Tables

Table 1: Interview Instrument.....	8
Table 2: Codes and Descriptions.....	9

Acknowledgments

I would like to express my gratitude to everyone who played a role in my research and writing of this paper. First, Dr. James Maples for guiding my interest in the topic, introducing me to new literature, and teaching me how to conduct research in the social sciences. Next, the four people I interviewed for sharing their wisdom and experiences with me. Lastly, I'd like to thank my family and friends for their love and support.

Introduction

Appalachian studies is a relatively new field of study with its first well known scholarship originating from Berea College in 1962. *The Southern Appalachian Region: A Survey*, underwritten by Berea College president W.D. Weatherford, is commonly referred to as the beginning of the Appalachian studies movement. The project aimed to gather exhaustive data about the region “so that people of the Appalachian area could better understand their own worth and ability as well as inform the federal government about the level of poverty and lack of economic opportunity in the region” (Berea College 1962). During this time, there was a noticeable lack of research on the contemporary state of Appalachia and minimal historical literature (Munn 1996). Following this, abundant research has been published about a wide variety of disciplines including art, music, religion, labor issues, history, and health care. However, there is surprisingly little published on homelessness in Appalachia.

Additionally, urban homelessness has been studied extensively, but homelessness in rural places in America is rarely acknowledged by current research. The goal of this paper is to begin to fill the gaps in research on Appalachian homelessness by uncovering what

makes it unique when compared to urban homelessness. Acknowledging the differences between the homeless experience in both areas can help us better assist persons experiencing homelessness and prevent people from experiencing homelessness in the first place.

This research explores the differences between the causes of homelessness, services offered, and possible solutions for persons experiencing homelessness in Appalachia versus urban areas. Four semi-structured interviews with people who work directly with persons experiencing homelessness were used to collect data, which was coded and analyzed for similarities and differences. Although there are many similarities in rural and urban homeless experiences, there are several factors, ranging from the causes to the types of assistance available, that make homelessness in Appalachia distinct.

Literature Review

About 100 million years ago, a meteorite struck the earth in what is now Middlesboro. The movement of tectonic plates had prepared the way, and the meteorite landed in the right place for erosion to form the Cumberland gap. Pioneers like Daniel Boone and three fourths of settlers traveling to Kentucky passed through this gap (Diggs 2019). The coal, copper, and gold in the mountains also formed 100 million years ago and have been both a blessing and a curse to Appalachian people. When the industrial revolution spread to Appalachia, it seemed like a great opportunity for people to make money, but it was largely based on extractive industries, which increased absentee land ownership and environmental damage, both of which negatively impact the economy (Diggs 2019).

Only 1 percent of the population, along with absentee owners, corporations, and government agencies, own 53% of the land. The remaining 99% of locals only own 47% of the land. This negatively impacts communities in a multitude of ways. Absentee land owners are more likely to damage the environment and affordable and adequate housing is difficult to come by since most of the landowners value their land for the minerals in it or the lumber on it and don't want to build houses. This contributes to the lack of affordable housing, environmental degradation, and keeps people from feeling connected to their land (Appalachian Land Ownership Task Force 1983).

The corporations that own the mountains also cause poverty among locals. Especially in the past, coal miners worked in dangerous conditions for little pay. Since coal was the only job opportunity, the communities were dependent on the mines. With increasing environmental regulations, the demand for coal is decreasing (Eller 2008). Living paycheck to paycheck is common in Appalachia, so if a mine closes or a company goes bankrupt, people have no income to fall back on. This is one of the many causes of homelessness in the region.

Poverty in Appalachia directly connects to homelessness, so understanding what has affected poverty is crucial. Before WWII, plentiful coal, copper, and other minerals were discovered in the mountains, so mines began to open and people sold their land to absentee owners. This created work in a previously isolated area that lacked jobs, so people started working for the mines for very little pay, but it was still more than they were making before (Eller 1982).

During the Great Depression, work slowed down again because the mines couldn't afford modern equipment so their coal prices couldn't compete with mines outside

Appalachia. The region suffered from unemployment during this time. Then, WWII increased the demand for metals, lumber, and coal to run factories in the North, and Appalachia experienced a few years of prosperity. The mines got better equipment and people had steady jobs and more income than ever before (Eller 1982).

This was short lived, however, and after the war most mines and mills closed down and unemployment went back up. The postwar economy increased out-migration, absentee land ownership, environmental devastation, agricultural collapse, rising unemployment, and limited non-resource extraction economic development created systematic problems (Eller 2008) Families who had enough money moved North to cities in Ohio and Illinois, where they faced even more hardship from housing discrimination and a lack of jobs that paid well and had benefits. People in the North referred to Appalachians as hillbillies and had stereotypes of immoral, violent and backwards behavior (Eller 1982).

It has been difficult for the people remaining in the mountains to recover from losing most of the jobs and a large portion of their population. The region is still faced with extreme poverty. Highways, cars, and big box stores like Walmart have helped people get what they need better than in the past, but the health outcomes, access to high paying jobs and education, and affordable housing in Appalachia still aren't close to equal with those in other areas of the US (Eller 1982).

The heart of the Appalachian region, central Appalachia, is located within the Blue Ridge, Cumberland, and Alleghany mountain chains. It encompasses all of Appalachian Kentucky and parts of West Virginia, Virginia, Tennessee, and North Carolina. This research is focused on central Appalachia, specifically in Eastern Kentucky. Poverty is

severely impacting this region. In 2016, 21 of 120 counties in Kentucky made the top 100 poorest list, and most of these counties are in Eastern Kentucky (ARC 2016). The Appalachian Regional Commission classifies most of Eastern Kentucky as distressed, which is their lowest economic rating. Figure 1 shows distressed counties. Figure 2 shows the subregions of Appalachia.

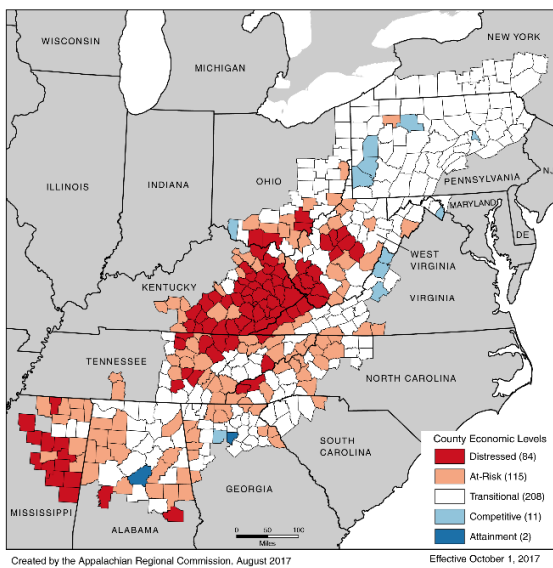


Figure 1: County Economic Levels

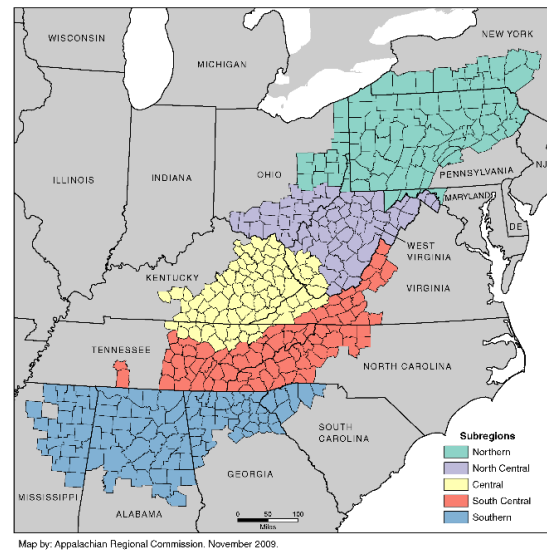


Figure 2: Subregions of Appalachia

Eastern Kentucky is also struggling from the opioid epidemic. Figure 3 shows drug overdose rates in Appalachia. Central Appalachia appears to have the highest rates of overdosing. In Clay county, 2.2 million doses of hydrocodone were prescribed in one year. There are only 21,000 people living in Clay county, so this means doctors prescribed about 150 doses for each person (Galewitz 2017). This overprescribing along with heroin and fentanyl becoming more common in the region has led to 4 Eastern

Kentucky counties being in of the top 10 counties for highest opioid abuse hospitalization rates (Maser 2017).

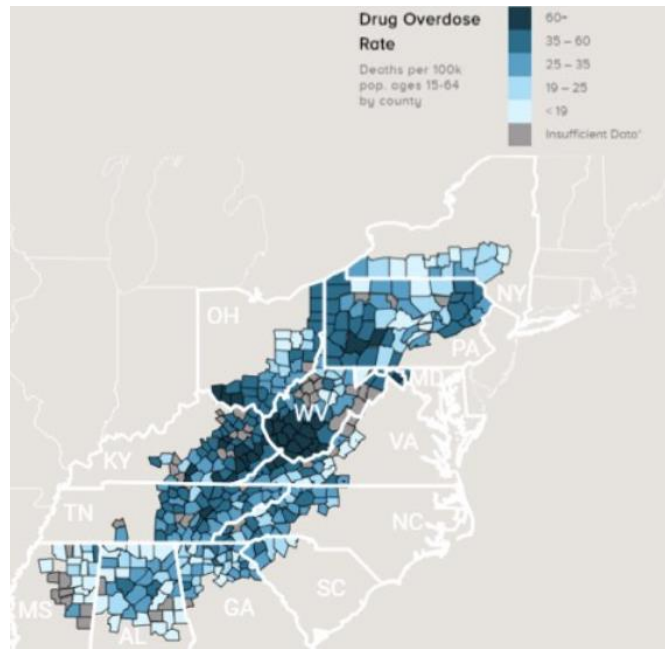


Figure 3: Drug overdose rates

In Clay county, over 60% of renters spend more than one third of their income on housing, categorizing them as cost-burdened. This means that they may not be able to afford repairs and maintenance. In rural areas where housing and jobs are widely dispersed, there is a high demand for affordable rentals near work, however 38% of a small survey group said that they would not move because of living on family land (Patrick 2017). With difficult to obtain housing, opioid addiction, and structural poverty, living in central Appalachia can prove difficult even for people who have lived in the area for generations.

Methods

The goal of this research is to highlight the differences between the causes, services and solutions of homelessness in Appalachia and urban areas. Due to a lack of existing research on this subject, the researcher conducted interviews with people who work with individuals experiencing homelessness. This study collected data via semi-structured interviews. Table 1 lists questions in the interview guide. The questions examine each organization's policies, missions, and experiences with persons experiencing homeless to explore the following hypotheses:

H1: Reasons persons experience homelessness in rural areas are different from those in urban areas,

HA: Reasons persons experience homelessness are the same in both rural and urban areas.

H2: Services offered by rural care centers will vary from their urban counterparts,

HA: Services offered in rural and urban areas are the same.

H3: Solutions to resolve homelessness in rural areas are different than those in urban areas,

HA: Solutions to resolve homelessness are the same in rural and urban areas.

The first couple questions shown in Table 1 aim to get to know the interviewee's organization to investigate H2 by comparing rural and urban care centers. Asking about the causes of homelessness directly acknowledges H1. The question regarding approaches to helping people corresponds to H3. The remaining questions were included to further compare any other differences between rural and urban homelessness.

Table 1: Interview Instrument
What is your organization's mission?
What term do you use to describe people experiencing homelessness?
How does your organization define someone as homeless?
What issues are people experiencing homelessness dealing with?
What are causes of homelessness?
How has your approach to helping people changed over the years?
Where are the people your organization serves from? Do they identify as Appalachian?
How has the pandemic affected your work and homeless populations?

This study used snowball sampling approach in recruiting respondents. A total of four interviews were conducted via phone to collect qualitative data comparing the causes, services, and solutions for homelessness in Appalachia with urban areas. The calls lasted from 12 to 35 minutes and were recorded using the Rev Recorder app.

The data was then coded to identify broad themes from across the interviews. Finding codes from the interviews identifies similarities and differences between them and helps find answers to the research questions. Coding involves a two-step process of open and focused coding. In open coding (the first step), the researcher established codes (or terms) which described the content of the interviews. In focused coding (the second step) the researcher adjusts codes by choosing to expand or collapse them and then use these new codes to recode all interviews. In all, 29 codes were established in the interviews. These are described in Table 2.

Some of the codes, such as Covid-19 and Definition, are present in every interview and especially important since they are directly asked about. Others, such as Stigma and Choice, are only discussed in certain interviews. The codes will be further examined in the analysis section.

Table 2: Codes and Descriptions	
K-Count	Monitors the amount of people sleeping outside in KY
Organization Type	Is it a government agency, nonprofit, etc?
Vocabulary	What do they call people experiencing homelessness?
Issues	Describes what people experiencing homelessness are dealing with
Causes	Describes what can cause a person to experience homelessness
Covid-19	Explores how the pandemic affects both the organization and the people they serve
Contrast	Highlights the differences between Appalachia and urban areas

Grants	Most nonprofits interviewed generate funds from grants
HUD	US Department of Housing and Urban Development
Transportation	How people get from place to place
Definition	How does a person/organization define homeless
Stigma	Feeling of shame/disgrace associated with a circumstance
Domestic violence	Violent behavior in the home
Substance abuse	Harmful use of psychoactive substances including drugs and alcohol
Mental health	a person's condition with regard to their psychological and emotional well-being
Choice	Some people choose to be transient
Lack of resources	A common issue in rural areas
Section 8	Government funded housing
Encampment	An area where many people are living in tents, RVs, not inside
Eviction	Being forced out of a place one rents
Documents	Drivers license, birth certificate, social security card
Housing	Where one stays
Hierarchy of needs	Shelter is a physiological need (bottom of pyramid)
Medications	Prescriptions one is meant to take consistently
Transient	Someone who isn't sleeping outside but doesn't have a place of their own
Relapse	To fall back into a previous state after some time of improvement
Rural	A remote area that is more spread out than urban or suburban

Case manager	Someone who oversees a client's case related to human services
Poverty	The state of being poor

Analysis

Table 3 shows when each code came up in interviews and when the code was used. This helps identify themes brought up in multiple interviews. Some codes were in all four interviews because they are part of a question that was asked to everyone such as Covid-19, while some only came up in a few interviews.

Table 3: Codes and Timestamps				
Code	KY River Foothills	Berea PD	Baptist Health	New Vista
Case Manager	4:20	NA	NA	14:40
Causes	12:30	NA	6:00	8:36
Choice	12:45	8:55	NA	NA
Contrast	6:20	7:30	16:30	20:10
Covid-19	13:56	10:10	17:52	7:00
Definition	8:57	1:51	4:10	4:03
Documents	10:30	NA	5:30	6:09
Domestic Violence	NA	NA	9:30	NA
Encampment	18:55	2:25	NA	21:13

Eviction	14:45	10:10	NA	NA
Grants	4:04, 4:53	NA	NA	NA
Hierarchy of Needs	NA	NA	10:10	16:20
Housing	5:03	3:14	NA	6:45
HUD	4:30	NA	NA	1:45, 4:12, 17:18
Issues	9:52	5:10	9:20	5:20
K-Count	20:45	NA	NA	20:10
Lack of resources	10:30	3:09	NA	19:45
Medications	NA	NA	11:00	7:12, 14:00
Mental Health	12:35	5:30, 6:14	4:50, 9:30	4:50
Organization type	3:48	NA	NA	1:45
Poverty	NA	NA	NA	10:13
Relapse	15:00	NA	NA	NA
Rural	NA	8:55	NA	19:43
Section 8	13:25	NA	NA	NA
Shelter	9:25	NA	12:00	14:40
Stigma	9:57	NA	17:00	NA
Substance abuse	10:13	5:30	9:45	13:58
Transient	9:30	2:10, 7:38	NA	NA
Transportation	5:50, 10:21	NA	NA	6:04
Vocabulary	8:09	1:28	NA	3:35

All four interviews had the code for contrast, since the goal of the research was to show how rural and urban homelessness are different. They all consider Covid-19, definitions of homelessness, and issues people experiencing homelessness deal with since the interview instrument directly asks about these things. They also all mentioned mental health and substance abuse.

This is significant because all four people interviewed, working in rural and urban identified mental health and substance abuse as issues people experiencing homelessness deal with and as causes of homelessness. This is a similarity between rural and urban homeless experiences, which is important to note when looking for differences. Eastern Kentucky is struggling with the opioid epidemic, so substance abuse could be particularly associated with homelessness in Appalachia more so than in urban areas with lower rates of opioid prescriptions.

75% of interviews discussed housing. The first two were people working in a more rural setting and they mentioned the lack of affordable housing. The third was someone working in Lexington and she mentioned the housing first model. Both mentioned housing but in different and notable contexts. The lack of affordable housing is a problem in Appalachia that can cause people to be homeless, one of the distinguishing traits of Appalachian homelessness. In contrast, the interview discussing housing first didn't mention a lack of affordable housing, and instead talked about a modern approach to helping people exit homelessness that is more common in urban areas.

Encampments came up in 75% interviews. That is another code which distinguishes rural and urban homeless. 50% discussed people choosing to be transient or homeless. 50% also discussed stigma and transportation being more significant issues in Appalachian populations.

This data does show similarities between rural and urban homeless experiences, but there are also a plethora of differences. This means that the null hypotheses are rejected. The causes, services, and solutions for people experiencing homelessness in Appalachia are unique when compared to urban homelessness.

Discussion

Most interviewees use the term “person experiencing homelessness” to describe someone who lacks stable housing. Saying that someone is experiencing something such as “person experiencing a mental health crisis” or “person experiencing substance abuse” is more respectful than using adjectives to define them such as “homeless person.” A representative from a local police department uses the term “homeless individual” or “misplaced individual.” The term used seems to vary from person to person, but does not seem to be linked to Appalachia or the rest of the country.

The main distinguishing trait of Appalachian homelessness is how hidden it is. All four interviews discussed “encampments” which are areas not meant for human habitation with multiple people sleeping in tents, RVs, or trailers. There is also a large population of “transient” people who may not sleep outside, but they do not have their own place to sleep long term. Those who live in encampments and transient individuals

are considered “literally homeless” under HUD’s Criteria for Defining Homelessness. This definition states that an individual is in Category 1, “Literally Homeless”, if they lack regular and adequate nighttime residence, which would include camping. This is different than typical “urban” homelessness where people are in the streets and in shelters.

The K-Count is an annual count of persons experiencing homelessness conducted by the KHC. It only counts individuals who are in HUD’s Category 1, literally homeless, and are sleeping outside. This number is used to determine how federal funds should be used. Since Appalachia has a large population of transient people couch surfing and this count does not include them, we can assume that homelessness is underreported and the states do not receive the right amount of funds to deal with this.

Some individuals chose to live in encampments or to stay with friends or family temporarily instead of living in their own stable residence. According to a few interviewees, this is becoming more common. They might choose this lifestyle because of their upbringing, substance use or mental health conditions. It is important to consider an individual’s choices when trying to provide care, but also to acknowledge that most individuals experiencing homelessness did not choose to be without stable housing.

A representative for the Berea Police Department (interview 2) said. “I see a lot of people that just choose to be homeless in the younger generation. They don’t want the responsibility. They don’t want to have a 9 to 5. But they’re living their best life according to them,” when asked how homelessness differs in Houston where she used to work and Berea. She also stated that most of the people who choose to be homeless are

transient and not sleeping outside. From this, it can be concluded that central Appalachia has more transient people who choose to be homeless than urban areas.

Another trait that makes homelessness in Appalachia unique is the lack of resources in rural places. Urban regions often have more shelters, food banks, services, and community outreach than rural regions. The behavioral health clinical manager at Baptist health explained, “In rural Appalachia you have to think about the geographical demands of the area. It’s not as developed and things are physically more spread out and not as developed and therefore lacking population and resources compared to an urban development area. There’s also a lot more shame and stigma in the culture so folks might be more reluctant to reach out for help.” This quote summarizes a few big differences in rural and urban homelessness. Most interviews discussed lack of resources and transportation as issues persons experiencing homelessness go through. Fewer of these resources can cause more people to experience homelessness and can keep people from getting back on their feet. Cities may have public transport, but in rural Appalachia transportation can be a problem for anyone who doesn’t own a car. Shelters in rural areas are more rare and typically high-barrier, while urban areas have both high-barrier shelters and rapid rehousing programs that use a Housing First approach.

Housing First is a homeless assistance approach statistically more successful than traditional high-barrier homeless shelters. High-barrier means that to be helped, individuals must pass drug tests and follow other rules to be deemed ready for housing. This approach only helps the people most likely to get housing on their own and excludes the most vulnerable people. Housing First gives housing to the people who need it most without requiring participation in other services. Since shelter is part of the foundation of

Maslow's hierarchy of needs, having this need met can help a person meet the rest of their needs. Rapid rehousing without requiring people to change their behavior to qualify is cheaper than running a shelter and has a higher rate of successfully keeping people housed.

Most of the hardships faced by people experiencing homelessness are consistent across all regions. Not having a mailing address or documents such as a social security card or birth certificate is a common problem that can keep someone from getting a job or an apartment. Lack of transportation can also keep someone from going to work. Mental health issues, substance abuse, and domestic violence were all common themes from the interviews. All of these issues are connected back to poverty.

Although only one interview directly talked about poverty, all four mentioned things related to poverty. A quote from the final interview reviews the many factors affecting the cycle of poverty, "From the moment of conception, you are already at a disadvantage compared to someone who's not living in poverty. That can have to do with access to healthcare, your ability to take off work to be able to have prenatal care in general, when you're born, you're probably born somewhere that has lower socioeconomic status, might have more crime, might have more violence, schools may not be as good, if there's more crime and violence there might be more police so there's a higher likelihood you'll get picked up for a crime and have a criminal record. If you don't complete school, that has trajectory as far as your income... There's a higher likelihood of childhood trauma which is linked to so many other things like substance, use, mental health, serious medical conditions... So there are a lot of issues that are all kind of tied into poverty." Poverty has been a problem in Appalachia for decades. The absentee land ownership, opioid

epidemic, and decreasing jobs and population have created the perfect conditions for poverty and homelessness to thrive.

Conclusion

Understanding the differences between rural and urban homelessness is important to consider when trying to help prevent and solve homelessness. Appalachian homelessness is more hidden, making it difficult to get an accurate count of persons experiencing homelessness, which can negatively impact the amount of funding states receive to provide services for people. There is a perfect storm of issues in Appalachia that are linked with experiencing homelessness: the opioid epidemic, lack of resources, and lack of jobs make the region difficult to live in. These factors cause and exacerbate homelessness in Appalachia, but do not affect urban areas as severely. The services to help people exit homelessness also differ, high-barrier programs are more prevalent in Appalachia while urban areas often have more Housing First based programs.

More research should be done to accurately assess the homeless situation in central Appalachia. Only four interviews are not enough to truly understand the causes, services, and solutions for homelessness. People experiencing homelessness should be interviewed instead of just the people who work with them, and significantly more interviews should be conducted in order to establish more beneficial services for preventing and solving homelessness.

Even before more research is conducted, support services in both rural and urban areas would benefit from increased funding. Especially during the COVID-19 pandemic, care

centers often can not help everyone get into permanent housing. Having the funds to use a Housing First approach would be ideal. Establishing services that prevent homelessness is important too, from developing higher paying jobs in places with fewer resources, to having community action agencies that can help people pay for things before they experience homelessness. Homelessness in Appalachia may be distinct in multiple ways, but more support is needed in both urban areas and in Appalachia.

References

- Appalachian Land Ownership Task Force. (2015). Who Owns Appalachia: Landownership and Its Impact. Lexington, KY: *The University Press of Kentucky*.
- Bellaw, J. R., Shamblin, S. R., & Williams, N. F. (2012). Conceptualizing Homelessness in Rural Appalachia: Understanding Contextual Factors Relevant to Community Mental Health Practice. *Rural Mental Health*, 3-9.
- Blaustein, Richard. (2003). The Thistle and the Brier: Historical Links and Cultural Parallels Between Scotland and Appalachia, *McFarland*, 2003: 47-8.
- Carey, M. C. (2017). The News Untold: Community Journalism and the Failure to Confront Poverty in Appalachia. *Morgantown, WV: WV University Press*.
- Caton, C., Wilkins, C., & Anderson, J. (2007). People who experience long-term homelessness: Characteristics and interventions. *Toward Understanding Homelessness: The 2007 National Symposium on Homelessness Research*, 1-12.

Diggs, N. B. (2020). In Search of Appalachia. *Lanham, MD: The Rowman & Littlefield Publishing Group.*

Eller, R. D. (1982). Miners, Millhands, and Mountaineers: Industrialization of the Appalachian South, 1880-1930. *Knoxville: University of Tennessee Press.*

Eller, R. D. (2008). Uneven Ground: Appalachia Since 1945. *Lexington, KY: The University Press of Kentucky.*

Eller, Ronald D, Phil Jenks, Chris Jasparro, and Jerry Napier. (1994). Kentucky's Distressed Communities: A Report on Poverty in Appalachian Kentucky. *Lexington: Appalachian Center, University of Kentucky.*

Fowler, J. D. "Appalachia's Agony: A Historiographical Essay on Modernization and Development in the Appalachian Region." *Filson Club History Quarterly* 72:3 (1998): 305–328

Galewitz, P. (2017). The Pharmacies Thriving in Kentucky's Opioid-Stricken Towns. *The Atlantic.*

- Hilton, T., & DeJong, C. (2010). Homeless in God's country: Coping strategies and felt experiences of the rural homeless. *Journal of Ethnographic & Qualitative Research*, 5, 12–30.
- Kiffmeyer, T. J. (2008). Reformers to Radicals: The Appalachian Volunteers and the War on Poverty. *Lexington: University Press of Kentucky*.
- Lee, R. C. (2016). Family homelessness viewed through the lens of health and human rights. *Advances in Nursing Science*, vol. 35, E47-E59.
- Maser, J. (2017). Perry County Has Highest Opioid Abuse Hospitalization Rate at Nearly 6%. *Dexur*.
- Minnery, J. (2007). Approaches to Homelessness Policy in Europe, the United States, and Australia. *Journal of Social Issues*, vol. 30, 1-18
- National Coalition for the Homeless. (2009). Mental illness and homelessness. *NCH Reports*.
- Parker, D. R. (2015). An inexpensive, interdisciplinary, methodology to conduct an impact study of homeless persons on hospital based services. *Journal of*

Community Health: The Publication for Health Promotion and Disease Prevention, vol. 40, 41-46

United States Interagency Council on Homelessness. (2018). *Kentucky Homelessness Statistics*.

Vance, R. B., & Ford, T. R. (2015). *The Southern Appalachian Region: A Survey*. Lexington, KY: *The University Press of Kentucky*.

Zhang, Z., Infante, A., Meit, M., English, N., Dunn, M., & Bowers, K. (2008). An analysis of mental health and substance abuse disparities and access to treatment services in the Appalachian region: Final report presented to the Appalachian Regional Commission. *National Opinion Research Center at the University of Chicago and East Tennessee State University*.