

# TOWN OF WAYNESVILLE



TASK FORCE ON HOMELESSNESS  
HOMELESS NEEDS ASSESSMENT & COMMUNITY ACTION PLAN



**SEPTEMBER 2021**

**Disclaimer:**

**This document is for review and discussion purposes by the Task Force on Homelessness. It has not been officially approved nor is it in use by the Task Force on Homelessness or any other associated entity.**

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*DRAFT -- Plan Under Discussion, Not Approved*

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# Acknowledgements

Every resident involved with this process has made a valuable contribution and merits recognition. A list of everyone who attended the Community Feedback Open House is provided in Appendix X. Appreciation is also extended to the 224 anonymous residents who completed a community feedback survey, the 57 anonymous neighbors who are homeless and completed a comprehensive survey about their lived experience, the 59 business owners/representatives who completed a survey, and the 31 community stakeholders who participated in one of the seven listening sessions. Gratitude to Grace Church in the Mountains for allowing us to use their facility to host listening sessions.

## Town of Waynesville Board of Alderpersons

Gary Caldwell, Mayor

Julia Freeman, Mayor Pro Tem

Chuck Dickson

Jon Feichter

Anthony Sutton

# Town of Waynesville Administration

Rob Hites, Town Manager

Jesse Fowler, Assistant Town Manager

Eddie Ward, Town Clerk

A special acknowledgment to Julie Grasty, Asset Services Manager, Department of Public Services for assisting the Task Force in accessing meeting space that met COVID-19 guidelines.

*DRAFT -- Plan Under Discussion, Not Approved*

# Task Force on Homelessness

Chief David Adams (Proxy: Lt. Tyler Trantham)

Juleah Berliner

Wanda Brooks

Dale Burris

Nathan Cartwright

Sheriff Greg Christopher (Proxy: Chief Deputy Jeff Haynes )

Bob Cummings

Patsy Davis (Proxy: Brooke Smith)

Commissioner Kevin Ensley

Keri Guidry

Mandy Haithcox

Jon Lynn McDermott

Amy Murphy-Nugen (Chair)

Joslyn Schaefer

Alderman Anthony Sutton

Brandon Wilson

The Task Force would like to acknowledge Bill Guy, Laura Howell, Neese Morris, Linda Nulsen, and Theresa Pierce who were initially appointed to serve. Just as the Task Force was scheduled to begin meeting in March 2020, COVID-19 introduced many uncertainties and unexpected demands for many of us and our neighbors—including changes to family, home, and work responsibilities and schedules, significant challenges for small businesses, and health concerns both directly and indirectly related to the pandemic. Although we were all learning how to navigate the same uncharted sea, we did so in our respective boats. Thank you to our community members who were willing to serve but ultimately unable to do so while navigating these unexpected life challenges. Your willingness to serve is acknowledged and appreciated.

## Acronyms (working list)

CDC	Centers for Disease Control
CoC	Continuum of Care
HIC	Housing Inventory Count
HUD	U.S. Department of Housing and Urban Development
NCCEH	North Carolina Coalition to End Homelessness
PIT	Point-in-Time Count
SAMHSA	Substance Abuse and Mental Health Services
SDoH	Social Determinants of Health
SNAP	Supplemental Nutritional Assistance Program (formerly known as Food Stamps)
SSI	Supplemental Security Income

# Task Force on Homelessness Work Groups

*Housing is healthcare...The primary and essential function of housing—to provide a safe and sheltered space—is absolutely fundamental to the people's health and well-being.*  
—Dearbhail Murphy

As Murphy notes above (Lozier, n.d.), housing is inextricably linked to health and well-being. Consequently, the Task Force used the Social Determinants of Health (SDoH) framework to establish and develop work groups. Social determinants of health are conditions in the environment in which people are born, live, learn, work, play, worship, and age that affect a wide range of health, functioning, and quality-of-life outcomes and risks (Centers for Disease Control, 2021). Conditions (e.g., social, economic, and physical) in these various environments and settings (e.g., school, church, workplace, and neighborhood) have been referred to as “place.” In addition to the more material attributes of “place,” the patterns of social engagement and sense of security and well-being are also affected by where people live. Resources that enhance quality of life can have a significant influence on individual well-being and community health outcomes. Examples of these resources include safe and affordable housing, access to education, public safety, availability of healthy foods, local emergency/health services, and healthy toxin-free environments.

# Social Determinants of Health

Economic Stability	Neighborhood and Physical Environment	Education	Food	Community and Social Context	Health Care System
Employment	Housing	Literacy	Hunger	Social integration	Health coverage
Income	Transportation	Language	Access to healthy options	Support systems	Provider availability
Expenses	Safety	Early childhood education		Community engagement	Provider linguistic and cultural competency
Debt	Parks	Vocational training		Discrimination	Quality of care
Medical bills	Playgrounds	Higher education		Stress	
Support	Walkability				
	Zip code / geography				

**Health Outcomes**  
 Mortality, Morbidity, Life Expectancy, Health Care Expenditures, Health Status, Functional Limitations



(Artiga & Hinton, 2018)

## Community Connections & Social Cohesion

Focus Areas: homeowner support (i.e. impacted by homelessness), support systems for people who are homeless, social cohesion

Keri Guidry, Work Group Lead

Mandy Haithcox, Work Group Notetaker

Michael Blackburn

Wanda Brooks

Dale Burris

Nathan Cartwright

Alderman Jon Feichter

Becca Goldstein

## Economic Stability

Focus Areas: business support, employment/income support for people who are homeless

Alderman Anthony Sutton Work Group Lead

Joslyn Schaefer, Work Group Notetaker

Chief David Adams

Wanda Brooks

Sheriff Greg Christopher

Jon Lynn McDermott

Lt. Tyler Trantham

## Education

Focus Areas: prevention, early intervention

Bob Cummings, Work Group Lead/Notetaker

Patsy Davis, Work Group Lead/Notetaker

## Eviction, Foreclosure, Winter Preparation, & Crisis Response

Focus Areas: eviction and foreclosure prevention & intervention, Winter Cold Grace shelter support, crisis intervention

Brandon Wilson, Work Group Lead

Vicky Gribble, Work Group Notetaker

Mayor Gary Caldwell

Commissioner Kevin Ensley

Christina Hendricks

Barbara Stuteville

## Health

Focus Areas: physical, mental/behavioral health—including substance use

Juleah Berliner, Work Group Lead

Hannah Minick, Work Group Notetaker

Jesse Lee Dunlap

Shawn Hudson

Ronnie Johnson

Neese Morris

Billye Simmers

Kasey Steffan-Valentine

## Executive Summary-Placeholder

# Introduction

## Context: COVID-19 and Community Response

### Homelessness Increasing Nationwide Prior to COVID-19

From January 2019 to January 2020, prior to the impacts of the pandemic, homelessness increased nationwide by 2.2 percent. Notably, increases were experienced by individuals who are unsheltered (7 percent increase from 2019 to 2020), which was connected to an increase in individuals experiencing chronic homelessness (15 percent increase from 2019 to 2020). Since data collection began, 2020 is the first year in which more individuals who were homeless were unsheltered (209,413) than were sheltered (199,478). Further, nationwide, Veteran homelessness did not decline in 2020, which was also the first year homelessness among family households did not decrease in over a decade (U.S. Department of Housing and Urban Development [HUD], 2021c).

Historically, for years prior to the COVID-19 pandemic, homeless services have been under-resourced and not able to fully respond to the needs of people who are experiencing homelessness or at-risk of homelessness (Fessler, 2021). As an additional consequence of the pandemic, there are concerns that homelessness will continue to exponentially escalate when the Center for Disease Control's eviction and foreclosure moratorium ends on July 31, 2021 (Frost, 2021). Although Waynesville and Haywood County may be experiencing an increase in homelessness, the growing challenge is not distinct from the rest of the nation.

### Community Response

During the Fall of 2019, discussions around homelessness were elevated due to concerns raised by business owners in Waynesville's historic Frog Level district. Although it was not the first time homelessness was an issue of discussion in our community, the topic became part of many campaign platforms during the election year. In early 2020, following the election and installation of community leadership, the Town Board created the Task Force on Homelessness and appointed twenty-one members.

## Task Force Charge

The Task Force was given the following charge by the Mayor and Board of Alderpeople.

1. Research the demographics of persons who are homeless in Waynesville and the causes of homelessness;
2. Examine stigmatization, criminalization and discrimination associated with homelessness;
3. Conduct a gap analysis to identify needs, existing community capacity, and additional resources necessary to prevent and respond to temporary and chronic homelessness; and,
4. Developing a collaborative community action plan to fill system gaps and improve existing programs.



In addition, the Task Force agreed to address a continuum of community opportunities and needs:



And, was led by our shared guiding principles:

- Commit to the goals and objectives of the Task Force
- Commit to attending Task Force meetings and actively participate on at least one work group
- Treat everyone with respect
- Practice active listening--listening first to understand
- Offer open-minded consideration--including embracing respectful and productive disagreement and dissent as essential to developing sound decisions
- Focus on issues and avoid personalizing criticism
- Actively engage and also practice self-restraint (i.e. share speaking time)
- Reflect an asset-based, solution-focused, data-informed approach to decision-making
- Expect the process to be messy & uncomfortable at times
- Remember that we are all neighbors
- Remember that all discussions center on fellow human beings; refrain from the dehumanization of any individual or group.
- Share responsibility to hold the Task Force to the above principles.

## Defining Homelessness

The Task Force researched federal definitions of homelessness from the US Department of Housing and Urban Development (HUD), Department of Veterans Affairs and HUD 24 CFR 576.2, which defines "literally homeless" as: An individual/family who lacks a fixed, regular, and adequate nighttime residence.

Through collaboration, we identified other areas in the Town of Waynesville where homelessness occurs and should be accounted for. As a Task Force, we believe to effectively respond to this community challenge, it is critical that we work from a shared definition of homelessness. Further, a localized definition will allow us to more accurately understand and assess our own community.

Listed below is the definition we used to guide our work and also recommend serve as the definition of homelessness in the Town of Waynesville. This recommendation includes definitions from HUD, but also expands on those criteria in order to fully capture the broad spectrum of individuals experiencing homelessness in our community.

### Definition of Homelessness

- i. An individual or family with a primary nighttime residence that is a public or private place not designed for, or ordinarily used as a regular sleeping accommodation for human beings, including but not limited to a car, park, abandoned building, bus or train station, airport, or camping ground; or*
- ii. An individual or family who is residing in what is commonly referred to as a "doubled up" or a "couch surfing" situation in temporary housing; or*
- iii. An individual or family living in a supervised publicly or privately operated shelter designated to provide temporary living arrangements (including congregate shelters, transitional housing, and hotels and motels paid for by charitable organizations or by federal, State, or local government programs for low-income individuals); or*
- iv. An individual who is exiting an institution, including but not limited to jail or prison, where she/he resided and who resided in an emergency shelter or place not meant for human habitation immediately before entering that institution or upon exiting no subsequent residence has been identified; or*
- v. Persons fleeing or attempting to flee domestic violence or interpersonal violence; or*
- vi. An individual or family who will imminently lose their primary nighttime residence, and no subsequent residence has been identified; and the individual or family lacks the resources or support networks needed to obtain other permanent housing; or*

vii. Children and youth who meet the criteria described in the U.S. Department of Education (ED) Subtitle VII-B of the McKinney-Vento Homeless Assistance Act will also meet our definition;

viii. An individual or family that are defined as homeless under the other listed federal statutes such as:

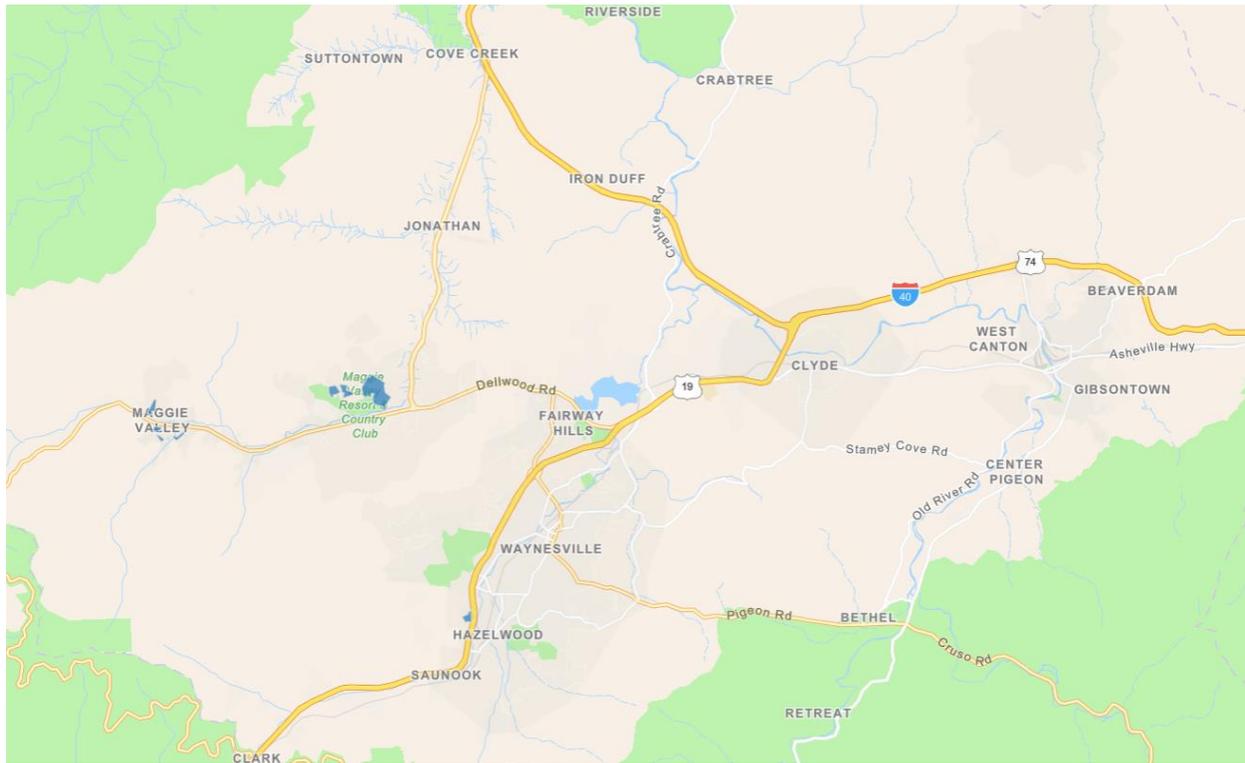
a.) Have not had a lease, ownership interest, or occupancy agreement in permanent housing during the 60 days prior to a homeless assistance application;

b.) Have experienced persistent instability as measured by two moves or more during in the preceding 60 days; and can be expected to continue in such status for an extended period of time due to special needs or barriers.

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# Town of Waynesville Community Profile

Figure X.X Haywood County



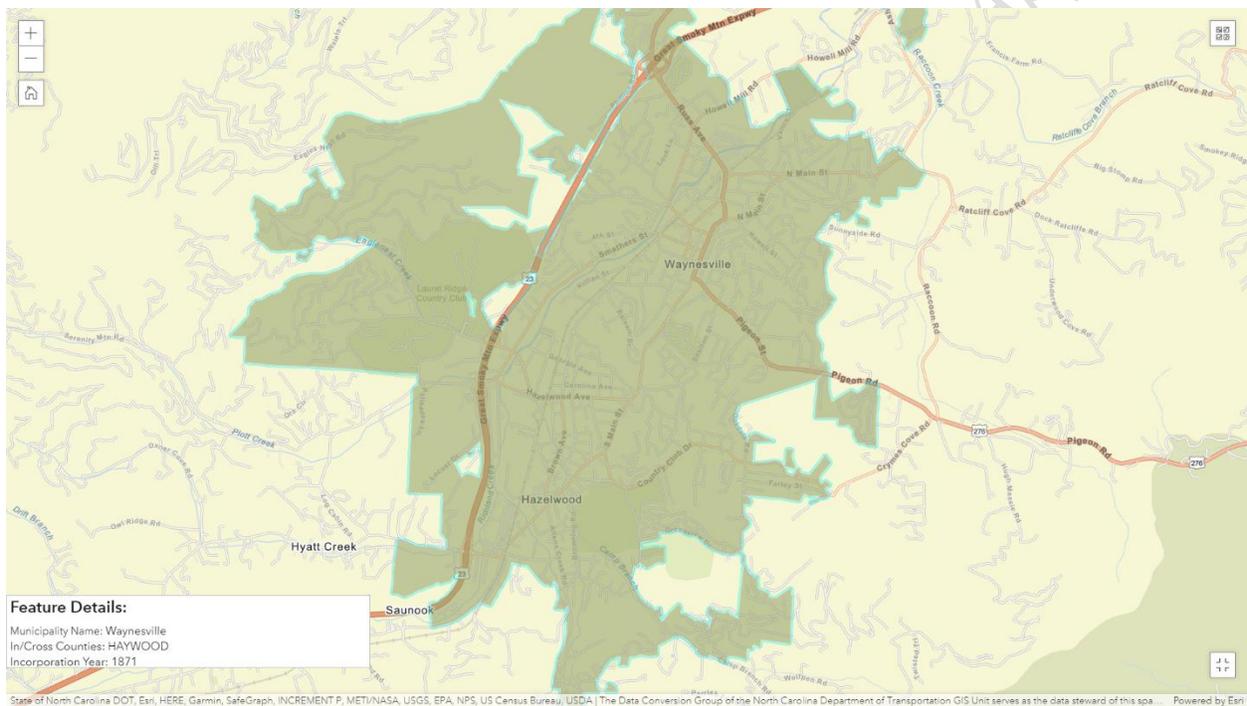
The Town of Waynesville is located in Haywood County, North Carolina. Haywood County is the third largest county in Western North Carolina, following Buncombe and Henderson counties. Haywood County is composed of four towns, Canton, Clyde, Maggie Valley, and Waynesville. In addition to the four towns of Haywood County, it is also home to the Junaluska Assembly. The Lake Junaluska Assembly is a camp and conference center for the Southeastern Jurisdiction of the United Methodist Church in the United States and the headquarters of the World Methodist Council. Waynesville is the county seat and the oldest town in Haywood County.

Waynesville has many geographical assets in and near the community. The Great Smoky Mountain National Park, the most visited National Park in the United States, is near Waynesville, some of which lies in Haywood County. This area has also been designated a Blue Ridge Heritage area and is known for folks arts and crafts. There are fourteen peaks in the Great Smoky Mountains, some of which are at least 6,000 feet in elevation. The Balsam Mountains border Haywood County on the west side. These mountains have seven different types of forests and peaks ranging over 6,400 feet in elevation. Haywood County is also close to the Nantahala National Forest. The Nantahala National Forest ranges 516,000 acres and is North Carolina's largest forest

area, spanning from Waynesville to Murphy, Fontana and Cashiers. These rich geographical and recreational assets attract many tourists and visitors to the area.

Waynesville and Haywood County are in the Southeastern United States, situated 20 minutes west of Asheville, NC and 20 miles east of Cherokee, NC. The following sections discuss social and economic demographic data, including recent trends in population, income and poverty status, housing characteristics, education and employment. Data, when available, for Waynesville, Haywood County, North Carolina and the United States are included for comparative purposes. Unless otherwise indicated, data are derived from the U.S. Census Bureau.

Figure X.X Town of Waynesville



## Population

Waynesville's 2019 population was estimated to be 9,965 people. Waynesville experienced a consistent population over the last decade, which is indicated by a 1.0 percent change since 2010. In comparison, Haywood County recorded a 3.4 percent change in population growth in the same time, which is lower than the state (10.7%) and national (6.8%) rates. Although it is likely Waynesville will record a population increase when the 2020 Census data is released, this consistency likely reflects geographical characteristics that both contribute to the quality of life in Waynesville as well as challenges in increasing the number of affordable housing units. For example, the limited availability of affordable and buildable land.

The racial composition of Waynesville is primarily White (94.7%), reflecting only a slightly more diverse population than Haywood County as a whole (97.0%). Individuals who are American Indians (2.3%, n=227) and Black (2.9%, n=289) respectfully make-up three percent of Waynesville's population. In terms of ethnic identity, Hispanic or Latino/a/X individuals account for six percent (5.8%, n=582) of the population.

There are slightly more females (51.3%, n=5,112) than males (48.7%, n=4853) in Waynesville, reflecting demographic composition at the county (female 51.7%, male 48.3%), state (female 51.3%, male 48.7%), and national (female 50.8%, male 49.2%) levels. However, the median age (48.8 years) in Waynesville is notably older than the state's (38.7 years) and nation's (38.1) median. Further, individuals aged 65 years or older constitute twenty-nine percent (29.1%, n=2,903) of Waynesville's population—nearly double the percent of the state (15.9%) and nation (15.6) for this age group. Conversely, the state (59%) and nation (59.2%) have larger populations among working-age adults, aged 20 to 64 years of age, than both Haywood County (55.5%) and Waynesville (51%). This age composition may have dependency ratio implications. The dependency ratio describes the proportion of individuals who are not typically in the labor force (either children or older adults aged 65+) and individuals who typically are in the labor force.<sup>1</sup> The dependency ratio is a measure that reflects possible financial stress on individuals in the labor force supporting those who are not. It should also be noted that Waynesville's older adults are a significant asset to the community. In particular, many retired individuals share their time, talents and other resources.

Table X.X Total Population

	Waynesville	Haywood County	North Carolina	U.S.
<b>Total Population</b>				
2019 Census estimates	9,965	61,053	10,264,376	324,697,795
2015 Census estimates	9,748	59,170	9,845,333	316,515,021
2010 Census	9,934	58,597	9,271,178	303,965,272

(U.S. Census Bureau, 2019b; 2015; & 2010)

Table X.X Population Change

	Waynesville	Haywood County	North Carolina	U.S.
Percent Change 2015 to 2019	2.2%	3.2%	4.3%	2.6%
Percent Change: 2010 to 2019	1.0%	3.4%	10.7%	6.8%

(U.S. Census Bureau, 2019b; 2015; & 2010a)

<sup>1</sup> See the U.S. Census Bureau [glossary](#)

Table X.X Population, Race and Ethnic Demographics

	Waynesville		Haywood County		North Carolina		U.S.	
<b>Racial and Ethnic Demographics</b>								
American Indian/ Alaskan Native	227	2.3%	707	1.2%	204,106	2.0%	5,643,919	1.7%
Asian	113	1.1%	484	.8%	355,907	3.5%	21,408,058	6.6%
Black or African-American	289	2.9%	957	1.6%	2,360,234	23.0%	45,612,523	14.0%
Native Hawaiian and Other Pacific Islander	.19	.2%	40	.1%	18,280	.02%	1,399,393	.04%
Some Other Race	131	1.3%	641	1.09%	348,302	3.4%	17,589,236	5.5%
White	9,436	94.7%	59,191	97.0%	7,279,065	70.9%	244,597,669	75.3%
Hispanic or Latino/a/X (of any race)	582	5.8%	2,425	4%	962,665	9.4%	58,479,370	18.0%

(U.S. Census Bureau, 2019b)

Table X.X Population, Gender Demographics

	Waynesville		Haywood County		North Carolina		U.S.	
<b>Gender Demographics</b>								
Female Population	5,112	51.3%	31,572	51.7%	5,268,238	51.3%	164,810,876	50.8%
Male Population	4,853	48.7%	29,481	48.3%	4,996,638	48.7%	159,886,919	49.2%

(U.S. Census Bureau, 2019b)

Table X.X Population, Age Demographics

	Waynesville		Haywood County		North Carolina		U.S.	
<b>Age Demographics</b>								
Median Age	48.8		47.6		38.7		38.1	
Age Cohorts								
Under 5	449	4.5%	3,014	4.9%	605,125	5.9%	19,767,670	6.1%
5-9 years	569	5.7%	2,625	4.3%	630,547	6.1%	20,157,477	6.2%
10-14 years	572	5.7%	3,415	5.6%	663,079	6.5%	20,927,278	6.4%
15-19 years	405	4.1%	3,243	5.3%	684,678	6.7%	21,208,186	6.5%
20-24 years	534	5.4%	2,954	4.8%	697,588	6.8%	22,015,108	6.8%
25-34 years	1,054	10.6%	6,819	11.2%	1,362,577	13.3%	45,030,415	13.9%
35-44 years	1,013	10.2%	6,707	11.0%	1,298,033	12.6%	40,978,831	12.6%
45-54 years	1,201	12.1%	8,085	13.2%	1,376,281	13.4%	42,072,620	13.0%
55-59 years	576	5.8%	4,450	7.3%	683,840	6.7%	21,654,255	6.7%
60-64 years	689	6.9%	4,876	8.0%	635,115	6.2%	20,102,159	6.2%
65-74 years	1,568	15.7%	8,603	14.1%	976,794	9.5%	29,542,266	9.1%
75-84 years	899	9.0%	4,656	7.6%	476,222	4.6%	14,972,513	4.6%
85 years and over	436	4.4%	1,606	2.6%	174,997	1.7%	6,269,017	1.9%

(U.S. Census Bureau, 2019b)

## Income, Poverty and Health Insurance

Waynesville's median household income (\$42,796) is notably lower than Haywood County's (\$51,659, difference of \$8,863), the state (\$54,602, difference of \$11,806), and nation (\$62,843, difference of \$20,047). Waynesville also reports lower median wages (\$39,989) for full-time, year-round workers than Haywood County (\$40,914), North Carolina (\$43,409), and the United States (\$48,851). Typically, there is a gender disparity in median wages resulting in an earnings gap by female workers as noted at the county-level (female workers, \$36,166; male workers, \$45,630; median wage gap, \$9,464), state (female workers, \$39,754; male workers, \$47,383; median wage gap \$7,629), and nation (female workers, \$43,022; male workers, \$53,275; median wage gap, \$10,253); however, female employees (\$41,504) in Waynesville are reportedly exceeding earnings of their male (\$38,000, median wage gap, \$3,504) counterparts. Full-time, year-round male workers (\$38,000) in Waynesville experience a median wage gap with their Haywood County (\$45,630; median wage gap, \$7,630), state (\$47,383; median wage gap, \$9,383), and national (\$53,275; median wage gap, \$15,275) counterparts. The consequences of this wage differential may be more effectively

illustrated by considering that the median gap between full-time, year-round male workers in Waynesville could purchase approximately \$635 in housing each month if they were keeping pace with full-time, year-round male workers in Haywood County. Full-time year-round female workers in Waynesville exceed their Haywood County (\$36,166; median wage gap, \$5,338) and state counterparts (\$39,754; median wage gap, \$1,750) and lag national (\$43,022; median wage gap, \$1,518) full-time, year-round female workers. Further underscoring that local wages may not have kept pace with cost of living, twenty-seven percent (26.8%, n=544) of employees in either full-time, year-round work (6.1%, n=174) or part-time work (20.7%, n=370) live in poverty.

Poverty data reflects the impacts of lower household median income and wages in Waynesville. Waynesville's overall poverty rate (18.0%) is higher than Haywood County (13.4%), North Carolina (14.7%) and the United States as a whole (13.4%). The poverty rate among youth in Waynesville is particularly concerning. Youth under 18 years of age in Waynesville experience a thirty-two percent (31.9%, n=599) poverty rate—or, almost double the national rate of twenty percent (20.3%, n=3,948,405). Further, the rate is even higher for youth under 5 years of age who experience a poverty rate of thirty-eight percent (38.3%, n=171).

Poverty experience by race reflects national trends; however, rates are overall higher at the local level. In Waynesville, an individual is more likely to be poor if they belong to an underrepresented population. Although the poverty rate is sixteen percent (15.9%, n=1,433) for Whites, it is forty percent (39.7%, n=29) for Asians, thirty-two percent (32.4%, n=77) for Blacks and African-Americans, and, twenty-four percent (24.0%, n=23) for American Indians. Poverty among Hispanics and the Latino/a/X population (18.6%, n=108) is notable—yet slightly lower than the national rate (19.6%).

Reflecting the poverty rate in the community, it is expected to see a higher Food Stamp/SNAP (Supplemental Nutrition Assistance Program) participation rate in Waynesville (19.4%, n=907) than at the state (12.0%, n=3,204) and national (11.7%, n=14,171,567) levels. Of the Waynesville households receiving SNAP benefits, thirty-eight percent (37.5%) have at least one or more persons in the home who are aged 60 years or older.

Waynesville has a higher disability rate (36.6%, n=1,713) than Haywood (33.5%, n=8,928), North Carolina (26.2%, n=1,039,781), and the United States (25.5%, n=30,781,341). Consequently, it is understandable that our community also has a higher percentage of individuals receiving Supplemental Security Income (SSI), which supports individuals who are older adults, blind, and other people who are disabled and have minimal or income by providing cash assistance to meet basic needs for food, clothing and housing.<sup>2</sup> In Waynesville, eight percent (7.9%, n=369) of residents receive SSI compared

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<sup>2</sup> [Social Security Administration, What is Supplemental Security Income](#)

to seven percent (7.05%, n=1,880) in Haywood County, five percent (4.9%, n=194,574) in North Carolina, and, in the United States (5.3%, n=6,443,122). Mean SSI payments average \$12,395 per year in Waynesville, \$10,953 in Haywood County, \$9,828 in North Carolina, and, \$10,073 in the United States.

Despite a higher poverty rate, Waynesville residents do not access cash payments (TANF) at a notably higher rate (3.4%, n=158) than at the county (1.7%, n=466), state (1.6%, n=63,625), or national (2.4%, n=2,853,791) levels. Further, even with the higher poverty rates—particularly youth poverty rates—the 2019 mean cash assistance payment in Waynesville (\$1,767) is lower than the county (\$3,323), state (\$2,666), and nation (\$3,163).

One last social determinant of health indicator—lack of health insurance—indicates that Waynesville has nearly nine percent (9.3%, n=909) of its population without health insurance. This uninsured rate is fairly consistent with other geographies—Haywood County (9.9%, n=5,982), North Carolina (10.7%, n=1,076,994), and United States (8.8%, n=28,248,613). It should be noted that North Carolina remains one of 12 states that has not expanded Medicaid under the Patient Protection and Affordable Care Act (Kaiser Family Foundation, 2021). This expansion would likely decrease the number of uninsured and underinsured residents in our community and not only improve health outcomes but also potentially housing insecurity (Guth, Garfield, & Rudowitz, 2020; Guth & Ammula, 2021).

Table X.X Median Household Income

	Waynesville	Haywood County	North Carolina	U.S.
<b>Median Household Income in 2019 Inflation-Adjusted Dollars</b>				
	\$42,796	\$51,659	\$54,602	\$62,843

(U.S. Census Bureau, 2019c)

Table X.X Median Earnings for Females and Males

	Waynesville	Haywood County	North Carolina	U.S.
<b>Median Earnings for Workers in 2019 Inflation-Adjusted Dollars: Female and Male Comparison, Full-time, Year-round Workers</b>				
Median, All Workers	\$39,989	\$40,914	\$43,409	\$48,851
Female, Full-time	\$41,504	\$36,166	\$39,754	\$43,022
Male, Full-time	\$38,000	\$45,630	\$47,383	\$53,275

(U.S. Census Bureau, 2019d)

Table X.X 2019 Poverty Status

	Waynesville	Haywood County	North Carolina	U.S.
<b>2019 Poverty Status in Last 12 Months by Percent and Age</b>				
% of all people whose incomes was below poverty in last 12 mos.	18.0% n=1,753	13.4% n=8,057	14.7% n=1,467,591	13.4% n=42,510,843
% of under age 5 and living below poverty	38.3% n=171	33.4% n=988	23.8% n=141,716	20.3% 3,948,405
% of under age 18 and living below poverty	31.9% n=599	22.6% n=2,423	21.2% n=478,877	18.5% n=13,372,778
% of ages 18 to 64 living below poverty	17.6% n=902	13.1% n=4,597	13.8% n=843,693	12.6% 24,545,633
% of ages 65 and older living below poverty	9.2% n=252	7.3% n=1,067	9.1% n=145,021	9.3% n=4,587,432

(U.S. Census Bureau, 2019e)

Table X.X Poverty Status, Female and Male

	Waynesville	Haywood County	North Carolina	U.S.
<b>2019 Poverty Status in Last 12 Months by Percent and Sex</b>				
Female	17.8% n=889	13.6% n=4,236	16.0% n=824,976	14.6% n=23,601,392
Male	18.1% n=864	13.2% n=3,851	13.3% n=642,615	12.2% n=18,909,451

(U.S. Census Bureau, 2019e)

Table X.X Poverty Status, Race and Ethnic Demographics

	Waynesville	Haywood County	North Carolina	U.S.
<b>Racial and Ethnic Demographics</b>				
American Indian/ Alaskan Native	24.0% n=23	8.5% n=24	24.9% n=29,981	24.9% n=660,695
Asian	39.7% n=29	22.8% n=91	10.7% n=30,707	10.9% n=1,922,319
Black or African-American	32.4% n=77	31.8% n=178	22.5% n=475,973	23.0% n=9,114,217
Native Hawaiian and Other Pacific Islander	0.0% n=0	0.0% n=0	20.5% n=1,360	17.5% n=101,826
Some Other Race	68.9% n=84	65.5% n=377	27.2% n=84,699	21.0% n=3,313,183
White	15.9% n=1,433	12.4% n=7,141	11.5% n=790,244	11.1% n=25,658,220
Hispanic or Latino/a/X (of any race)	18.6% n=108	37.4% n=907	26.4% n=248,474	19.6% n=1,740,383

(U.S. Census Bureau, 2019e)

Table X.X Socio-economic Indicators

	Waynesville	Haywood County	North Carolina	U.S.
<b>Socio-Economic Indicators</b>				
Food Stamp/SNAP Participation Rate	19.4% N=907	12.0% N=3,204	12.6% N=498,689	11.7% N=14,171,567
Disability Status: 1 or more person	36.6% N=1,713	33.5% N=8,928	26.2% N=1,039,781	25.5% N=30,781,341
Supplemental Security Income (SSI): Households	7.9% N=369	7.1% N=1,880	4.9% N=194,574	5.3% N=6,443,122
Mean Supplemental Security Income	\$12,395	\$10,953	\$9,828	\$10,073
Public Assistance: Cash Payments (TANF)	3.4% N=158	1.7% N=466	1.6% N=63,625	2.4% N=2,853,791
Mean Cash Assistance	\$1,767	\$3,323	\$2,666	\$3,163

(U.S. Census Bureau, 2019f & 2019g)

Table X.X 2019 Social Security and Retirement Income

	Waynesville	Haywood County	North Carolina	U.S.
<b>Social Security and Retirement Income in 2019 Inflation-adjusted dollars</b>				
Mean Social Security Income	\$19,629	\$20,243	\$19,742	\$19,792
Mean Retirement Income	\$24,239	\$23,811	\$24,693	\$27,793

(U.S. Census Bureau, 2019g)

Table X.X Health Insurance Coverage

	Waynesville	Haywood County	North Carolina	U.S.
<b>Health Insurance Coverage</b>				
With health insurance coverage	90.7% N=8,852	90.1% N=54,614	89.3% N=8,983,255	91.2% N=291,458,259
With private health insurance	61.7% N=6,025	66.0% N=39,999	67.4% N=6,781,282	67.9% N=217,186,300
With public coverage	50.3% N=4,908	43.7% N=26,498	34.5% N=3,469,932	35.1% N=112,236,495
No health insurance coverage	9.3% N=909	9.9% N=5,982	10.7% N=1,076,994	8.8% N=23,248,613

(U.S. Census Bureau, 2019g)

## Housing

There are 5,539 housing units in Waynesville, which represents an increase of 82 units added since 2010. A distinct characterization of Waynesville is the ratio of owner-occupied units (55.6%, n=2,602) to renter-occupied units (44.4%, n=2,078). As a whole, Haywood County has a higher homeownership rate (73%, n=19,465) not only of Waynesville but also the state (65.2%, n=2,585,934) and nation (64%, n=77,274,381). Waynesville's median housing value in 2019 (\$161,000) increased by approximately \$14,800 since 2010 (\$146,200). Waynesville's median mortgage is \$1,152 and median gross rent is \$814. Over 200 (8.2%) Waynesville residents live in a home that is less than \$50,000 in value while 74 (2.8%) reside in a home valued at \$1 million or more. The

percent (14.6%, n=808) of Waynesville's home owners residing in a mobile home unit is more than double the national percent (6.2%, n=8,495,408). Ten percent (9.9%, n=461) of Waynesville residents live in a home without a vehicle present.

Renters and homeowner are considered "housing cost-burdened" if they pay more than 30 percent of a household's gross income on housing costs. Rental housing costs include rent plus utilities. Owner-occupied costs include mortgage payment, taxes, insurance, and utilities. Twenty-five percent (24.5%, n=297) of Waynesville homeowners with a mortgage are estimated to be housing cost-burdened while fifty percent (49.5%, n=979) of renters are estimated to be housing cost-burdened.

Additional housing data is including in the Market Analysis section.

Table X.X Selected Housing Characteristics

	Waynesville	Haywood County	North Carolina	U.S.
<b>Selected Housing Characteristics</b>				
# of housing units: 2019	5,539	35,514	4,627,089	137,428,986
# of housing units: 2010	5,457	34,705	4,229,552	130,038,080
% of owner-occupied units	55.6% N=2,602	73% N=19,465	65.2% N=2,585,934	64% N=77,274,381
% of renter occupied units	44.4% N=2,078	27% N=7,188	34.8% N=1,379,548	36% N=43,481,667
Owner-occupied, median housing value	\$161,000	\$179,700	\$172,500	\$217,500
Median mortgage	\$1,152	\$1,199	\$1,314	\$1,595
Median Gross Rent	\$814	\$785	\$907	\$1,062
Housing value, less than \$50,000	8.2% N=213	8.5% N=1,645	7.9% N=205,430	6.9% N=5,335,889
Housing value, more than \$1 million	2.8% N=74	1.0% N=197	1.2% N=30,103	3.4% N=2,610,794
Mobile homes	14.6% N=808	17.7% N=6,283	12.8% N=594,578	6.2% N=8,495,408
Owner-occupied houses where no vehicle is present	9.9% N=461	5.1% N=1,360	5.8% N=230,276	8.6% N=10,395,713

(U.S. Census Bureau, 2010b & 2019h)

Table X.X Housing Cost Burden

	Waynesville	Haywood County	North Carolina	U.S.
<b>Housing Cost Burden</b>				
% of owner-occupied households w. mortgages who are housing cost burdened	24.5% N=297	28.3% N=2,905	25.0% N=406,288	27.8% N=13,400,012
% of renter households who are housing cost burdened	49.5% N=979	47.5% N=2,984	47.4% N=597,082	49.6% N=20,002,945

(U.S. Census Bureau, 2019h)

## Education and Employment

Census data indicates that twenty-one percent (21.0%, n=135) of Waynesville's 18 to 24 year-olds hold a high school diploma or equivalent. An additional thirty-two percent (32.3%, n=208) of Waynesville residents aged 18 to 24 years-old have some college education or have earned their associate's degree. Further, thirty-eight percent (37.5%, n=241) of 18 to 24 year-olds in Waynesville have earned a Bachelor's degree or higher, which significantly outpaces county (9%, n=370), state (10.3%, n=101,494), and national (11.2%, n=3,429,064) trends. This notable attainment level is likely influenced by the local access to Haywood Community College and regional presence of Western Carolina University. Among Waynesville residents aged 25 and older, nearly fifteen percent (14.7%, n=1,094) hold a Bachelor's degree as their highest educational level and thirteen percent (13.1%, n=976) have earned a graduate or other professional degree.

Expectedly, employment among Waynesville residents is concentrated in three industries (55.0%, n=2,300): 1) education, health care, social services (27.3%, n=1,142); 2) arts, entertainment, recreation, accommodation and food services industry (14.6%, n=610) and, 3) retail (13.1%, n=548). Manufacturing (9.9%, n=415) and professional, scientific, and management, and administrative and waste management service (8.5%) industries also account for notable sectors of employment. Having a relatively high concentration of jobs in the service and retail sectors likely explains the comparatively low median wage earned by full-time, year-round workers that was previously noted.

Although Waynesville residents are employed in industries that provide an attractive wage (Transportation, \$58,125; Information, \$61,042; and, Public Administration, \$46,

845), these sectors only account for eight percent (8.1%, n=341) of employed workers—few of which appear to be female. The three industries in which most Waynesville residents are employed pay moderate to low-wages: Educational services, and health care and social assistance, \$42, 206; Arts, entertainment, and recreation, and accommodation and food services, \$15,000; and, Retail, \$25,536. There is also a notable wage gap between female (\$36,306) and male workers (\$69,663) in the educational, health care, and social assistance sector. Further, the arts, entertainment, recreation and food services sector reports near-poverty level wages.<sup>3</sup> In 2019, the poverty threshold for a 1-person household was \$12,490, for a 2-person household \$16,910, for a 3-person household \$21,330, and, for a 4-person household \$25,750.

Table X.X Highest Level of Educational Attainment, 18 to 24 Years-Old

	Waynesville	Haywood County	North Carolina	U.S.
<b>Highest Level of Educational Attainment, Population 18 to 24 Years Old</b>				
Less than high school graduate	9.2% N=59	12.9% N=529	12.9% N=126,704	12.6% N=3,865,636
High school graduate (includes equivalency)	21.0% N=135	32.3% N=1,326	31.3% N=308,119	31.4% N=9,631,866
Some college or associate's degree	32.3% N=208	45.8% N=1,877	45.5% N=448,086	44.8% N=13,719,761
Bachelor's degree or higher	37.5% N=241	9.0% N=370	10.3% N=101,494	11.2% N=3,429,064

(U.S. Census Bureau, 2019i)

<sup>3</sup> [U.S. Department of Health & Human Services 2019 Poverty Guidelines](#)

Table X.X Highest Level of Educational Attainment, 25 Years & Older

	Waynesville	Haywood County	North Carolina	U.S.
<b>Highest Level of Educational Attainment, Population 25 Years and Older</b>				
Less than 9 <sup>th</sup> grade	6.6% N=489	2.7% N=1,250	4.5% N=314,545	5.1% N=11,284,290
9 <sup>th</sup> to 12 <sup>th</sup> grade, no diploma	14.0% N=1,038	9.3% N=4,245	7.7% N=538,851	6.9% N=15,187,971
High school graduate (includes equivalency)	22.2% N=1,650	26.4% N=12,075	25.7% N=1,791,532	27.0% N=59,472,748
Some college, no degree	20.8% N=1,548	23.1% N=10,582	21.2% N=1,480,933	20.4% N=45,044,698
Associate's degree	8.6% N=641	12.5% N=5,747	9.7% N=675,145	8.5% N=18,712,207
Bachelor's degree	14.7% N=1,094	15.4% N=7,065	20.0% N=1,395,214	19.8% N=43,646,104
Graduate or professional degree	13.1% N=976	10.6% N=4,838	11.3% N=787,639	12.4% N=27,274,058

(U.S. Census Bureau, 2019i)

Table X.X Industry, Civilian Employment, Age 16 and Over

	Waynesville	Haywood County	North Carolina	U.S.
<b>Industry, Civilian Employment, Age 16 and Over</b>				
Civilian employed population 16 years and over	4,184	27,218	4,764,135	154,842,185
Agriculture, forestry, fishing and hunting, and mining	.4% N=17	1.3% N=344	1.3% N=60,469	1.8% N=2,743,687
Construction	7.5% N=312	7.4% N=2,013	7.0% N=334,847	6.65% N=10,207,602
Manufacturing	9.9% N=415	12.8% N=3,491	12.4% N=588,544	10.1% N=15,651,460
Wholesale trade	.9% N=36	1.7% N=467	2.5% N=119,312	2.6% N=4,016,566
Retail trade	13.1% N=548	11.6% N=3,159	11.5% N=548,478	11.2% N=17,267,009
Transportation and warehousing, and utilities	2.1% N=88	2.6% N=705	4.7% N=222,911	5.4% N=8,305,602
Information	.5% N=22	1.1% N=289	1.7% N=80,477	2.0% N=3,114,222
Finance and insurance, and real estate and rental and leasing	4.9% N=205	4.7% N=1,287	6.5% N=308,904	6.6% N=10,151,206
Professional, scientific, and management, and administrative and waste management services	8.5% N=356	8.5% N=2,302	10.9% N=518,609	11.6% N=17,924,655
Educational services, and health care and social assistance	27.3% N=1,142	27.9% N=7,584	22.9% N=1,089,814	23.1% N=35,840,954
Arts, entertainment, and recreation, and accommodation and food services	14.6% N=610	11.9% N=3,243	9.6% N=457,584	9.7% N=14,962,299
Other services, except public administration	4.8% N=202	4.7% N=1,288	4.9% N=235,036	4.9% N=7,522,777
Public administration	5.5% N=231	3.8% N=1,046	4.2% N=199,150	4.6% N=7,134,146

(U.S. Census Bureau, 2019j)

Table X.X Industry, Civilian Employment, Age 16 and Over with Median Earnings

	Waynesville	Female Workers	Male Workers	Female Earnings as % of Male's
<b>Industry, Civilian Employment, Age 16 and Over with Median Earnings</b>				
Civilian employed population 16 years and over with earnings	\$32,671	\$31,155	\$34,547	90.2%
Agriculture, forestry, fishing and hunting, and mining	\$20,568	-	\$20,568	-
Construction	\$27,778	-	\$26,042	-
Manufacturing	\$38,995	\$29,712	\$40,052	74.2%
Wholesale trade	\$31,364	\$45,096	-	-
Retail trade	\$25,536	\$19,566	\$35,865	54.6%
Transportation and warehousing, and utilities	\$58,125	\$62,750	-	-
Information	\$61,042	\$61,042	-	-
Finance and insurance, and real estate and rental and leasing	\$25,282	\$40,297	\$21,593	186.6%
Professional, scientific, and management, and administrative and waste management services	\$35,401	\$13,750	\$36,960	37.2%
Educational services, and health care and social assistance	\$42,206	\$36,306	\$69,663	52.1%
Arts, entertainment, and recreation, and accommodation and food services	\$15,000	\$13,831	\$18,813	73.5%
Other services, except public administration	\$14,038	\$11,716	\$26,667	43.9%
Public administration	\$46,845	\$90,613	\$41,574	218.0%

(U.S. Census Bureau, 2019k)

Table X.X Largest 25 Employers in Haywood County: 2020

Haywood County			
Largest 25 Employers in Haywood County: 2020			
Employer Name	Industry	Class	# of Employees
Haywood County Consolidated Schools	Educational Services	Public Sector	1000+
Blue Ridge Paper Products Inc	Manufacturing	Private Sector	1000+
Dlp Partner Midwest Llc	Health Care and Social Assistance	Private Sector	500-999
County Of Haywood	Public Administration	Public Sector	500-999
Ingles Markets, Inc	Retail Trade	Private Sector	500-999
Consolidated Metco Inc	Manufacturing	Private Sector	250-499
Haywood Vocation Opportunities Inc	Manufacturing	Private Sector	250-499
Wal-Mart Associates Inc.	Retail Trade	Private Sector	250-499
Haywood Community College	Educational Services	Public Sector	250-499
Giles Chemical Division	Manufacturing	Private Sector	100-249
Town Of Waynesville	Public Administration	Public Sector	100-249
Lowes Home Centers Inc	Retail Trade	Private Sector	100-249
Silver Bluff Nursing Home	Health Care and Social Assistance	Private Sector	100-249
Publix North Carolina Employee Serv	Retail Trade	Private Sector	100-249
Mountain Projects Inc	Health Care and Social Assistance	Private Sector	100-249
Sonoco Products Company	Manufacturing	Private Sector	100-249
Maggie Valley Nursing And Rehab	Health Care and Social Assistance	Private Sector	100-249
Ken Wilson Ford	Retail Trade	Private Sector	100-249
Food Lion	Retail Trade	Private Sector	100-249
Autumn Corporation	Health Care and Social Assistance	Private Sector	100-249
U S Postal Service	Transportation and Warehousing	Public Sector	100-249
McDonalds Restaurants	Accommodation and Food Services	Private Sector	50-99
Meridian Behavioral Health Services	Health Care and Social Assistance	Private Sector	50-99
Plus Linen & Uniform Service	Other Services (except Public Administration)	Private Sector	50-99
Cataloochee Ski Area	Arts, Entertainment, and Recreation	Private Sector	50-99

(NC Department of Commerce, 2020)

# Point in Time Counts

Every January, on a single night in the last 10 days of the month, the U.S. Department of Housing and Urban Development (HUD) requires that Continuums of Care (CoC)<sup>4</sup> conduct a yearly count of people experiencing homelessness who are living in emergency shelter, transitional housing, and other sheltered environments. Every other year, in odd-numbered years, CoCs are also asked to count people who are experiencing homelessness and are unsheltered (i.e. people sleeping on the streets, in cars, abandoned structures, or, other areas not intended for human habitation) (U.S. Department of Housing and Urban Development [HUD], 2021a). That is—every odd-numbered year until January 2021, when we experienced a pandemic in which HUD waived the requirement to count unsheltered populations due to public health concerns related to COVID-19 (HUD, 2021b). Consequentially, our Waynesville neighbors who were living outside in January were not counted during the 2021 Point in Time count (PIT).

Point in Time data is reported by HUD and hosted on the website of the North Carolina Coalition to End Homelessness (2021a). PIT data is reported at the county-level and is used to inform grant and allocation decisions.

According to the recent 2020 Annual Homeless Report to Congress, after experiencing reductions in homelessness from 2010 to 2016, homelessness has increased across the nation in the last four years (HUD, 2021c). From January 2019 to January 2020, prior to the impacts of the pandemic, homelessness increased nationwide by 2.2 percent. Notably, increases were experienced by individuals who are unsheltered (7 percent increase from 2019 to 2020), which was connected to an increase in individuals experiencing chronic homelessness (15 percent increase from 2019 to 2020). Since data collection began, 2020 is the first year in which more individuals who were homeless were unsheltered than were sheltered. Further, nationwide, Veteran homelessness did not decline in 2020, which was also the first year homelessness among family households did not decrease in over a decade (HUD, 2021c). Although Waynesville and Haywood County may be experiencing an increase in homelessness, the growing challenge is not distinct from the rest of the nation.

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<sup>4</sup> A CoC is defined by HUD as “the group organized to carry out the responsibilities prescribed in the [CoC Program Interim Rule](#) for a defined geographic area. Responsibilities of a CoC include operating the CoC, designating and operating an HMIS, planning for the CoC (including coordinating the implementation of a housing and service system within its geographic area that meets the needs of the individuals and families who experience homelessness there), and designing and implementing the process associated with applying for CoC Program funds.” The CoC representing the Town of Waynesville is [Region 1](#). Region 1 includes Cherokee, Clay, Graham, Haywood, Jackson, Macon, Madison and Swain Counties.

Documenting homelessness and counting individuals who are unhoused are always challenging. The population is often hidden—both intentionally and unintentionally. As noted above, the pandemic introduced a significant challenge in counting individuals this year. For these reasons, point-in-time counts are included for both 2021 and 2020 (North Carolina Coalition to End Homelessness [NCCEH], 2021b & 2020a). Considering 2020 provides a more accurate count, we are estimating a current homeless population between 133 and 253. This estimate reflects a conservative 2.2% increase that was nationally documented from 2019 to 2020, 40-50 individuals who are incarcerated and anticipated to be homeless upon release, and 70 individuals served by Helping Hands of Haywood utilizing a motel housing model.

This estimated range underscores the significant limitations and flaws of relying solely on point-in-time counts to document the number of people who are homeless and their needs (National Law Center on Homelessness & Poverty, 2017). Although a more accurate documentation system is needed, it also must be noted that participating in point-in-time counts remain a requirement to receive HUD funding (Substance Abuse and Mental Health Services Administration [SAMHSA], 2020).

## 2021 and 2020 Point in Time and Housing Inventory Counts

General Populations: Haywood County

Table X.X Families with Children who are Homeless

Year	Children Age 17 & Under	Adults Age 18-24	Adults age 25+	Total People	Total Households
2021	11	1	4	16	5
2020	22	1	12	35	11

(NCCEH, 2021b & 2020a)

Table X.X Adults Without Children Who Are Homeless

Year	Adults Age 18-24	Adults age 25+	Total People	Total Households
2021	0	27	27	27
2020	5	90	95	92

(NCCEH, 2021b & 2020a)

Table X.X Children without Guardians who are Homeless

Year	Children Age 17 & Under	Total Households
2021	0	0
2020	1	1

(NCCEH, 2021b & 2020a)

Table X.X Location of People who are Homeless

Year	Emergency Shelter	Transitional Housing	Unsheltered Situation	Total People who are Homeless
2021	43	0	No unsheltered count conducted in 2021 due to COVID-19 pandemic	43
2020	100	0	30	130

(NCCEH, 2021b & 2020a)

Sub-Populations: Haywood County

Table X.X Population that are Chronically Homeless

Year	CH People in Families w. Children	CH Adults wo. Children	CH Children wo. Guardians	Total People who are Chronically Homeless
2021	0	21	0	21
2020	0	21	0	21

(NCCEH, 2021b & 2020a)

Table X.X Veterans who are Homeless

Year	Veterans in Families w. Children	Veterans wo. Children	Total Veterans	Veterans who are Chronically Homeless
2021	0	4	4	0
2020	0	4	4	0

(NCCEH, 2021b & 2020a)

Table X.X Youth Households (everyone in household is under age 25)

Year	Unaccompanied Youth	Youth Parents & Children	Total People	Total Households
2021	5	0	5	5
2020	5	0	5	5

(NCCEH, 2021b & 2020a)

DRAFT -- Plan Under Discussion, Not Approved

## 2021 Housing Inventory Count

Proj. Type	Organization Name	Project Name	Housing Type	Year-Round Beds	Overflow Beds	PIT Count	Total Beds	Utilization Rate
ES	ABCCM	SSVF Emergency Housing Assistance	Tenant-based – scattered site	0	13	13	13	100%
RRH	ABCCM	SSVF Rapid Re-Housing	Tenant-based – scattered site	9		9	9	100%
PSH	Charles George VAMC (Haywood)	HUD-VASH	Tenant-based – scattered site	2		2	2	100%
ES	Haywood Pathways Center	Cold Weather Shelter	Site-based – single site	0	2	2	2	100%
ES	Haywood Pathways Center	Men's Emergency Shelter	Site-based – single site	19	0	11	19	58%
ES	Haywood Pathways Center	Myre-Ken Family Shelter	Site-based – clustered / multiple sites	17	0	13	17	76%
ES	Haywood Pathways Center	Women's Emergency Shelter	Site-based – single site	14	0	12	14	86%
RRH	HERE in Jackson County	Rapid Re-Housing	Tenant-based – scattered site	4		4	4	100%
ES	REACH of Haywood County	DV Shelter	Site-based – single site	10	0	5	10	50%
PSH	Vaya Health	Western Combo PSH	Tenant-based – scattered site	87		87	87	100%

(NCCEH, 2021c)

## 2020 Housing Inventory Count

Proj. Type	Organization Name	Project Name	Housing Type	Year-Round Beds	Overflow Beds	PIT Count	Total Beds	Utilization Rate
RRH	ABCCM	SSVF Rapid Re-Housing	Tenant-based – scattered site	9		9	9	100%
PSH	Charles George VAMC (Haywood)	HUD-VASH	Tenant-based – scattered site	3		2	3	67%
ES	Haywood Pathways Center	Emergency Shelter	Site-based – clustered / multiple sites	96	0	71	96	74%
RRH	HERE in Jackson County	Rapid Re-Housing	Tenant-based – scattered site	14		14	14	100%
ES	REACH of Haywood County	DV Shelter	Site-based – single site	11	0	8	11	73%
PSH	Vaya Health	Western Combo PSH	Tenant-based – scattered site	97		97	97	100%

(NCCEH, 2020b)

# Results: Community Feedback Survey

The Community Feedback Survey was adapted from an existing instrument developed by Phillips (2015)<sup>5</sup> to assess perceived causes of homelessness, priority interventions to respond to homelessness, community integration and readiness, and possible stigma in Waynesville.

## Perceived Factors Causing Homelessness

Survey participants identified having a mental illness (n= 202; 90.2%), problems with illicit drugs (n=196; 87.9%), problems with alcohol (n=191; 85.7%), limited affordable housing (n=169; 76.1%), and limited education or training (n=151; 68%) as the most consequential perceived factors causing homelessness in Waynesville. Overall, participants perceived not working hard enough to earn income (n=82; 36.9%) and being lazy (n=79; 35.7%) among the least likely factors causing homelessness in our community.

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<sup>5</sup> We express our gratitude to the author as Phillips has generously provided permission to use her instrument.

Table # Participant Responses About Perceived Causes of Homelessness from Most to Least Likely

Instructions given to participants: Please indicate how likely the following factors are to cause homelessness using the scale below (definitely likely, probably likely, neutral, definitely unlikely, probably unlikely)

Factor	Definitely & Probably Likely (n/%)	Definitely & Probably Unlikely (n/%)	n
Having a mental illness	202 (90.2%)	5 (2.2%)	224
Having a problem with illicit drugs	196 (87.9%)	4 (1.8%)	223
Having a problem with alcohol	191 (85.7%)	5 (2.2%)	223
Limited affordable housing	169 (76.1%)	28 (12.6%)	222
Having limited education or training	151 (68.0%)	24 (10.8%)	222
Having a physical illness	148 (66.4%)	33 (14.8%)	223
Having limited opportunities in life	143 (63.8%)	44 (19.6%)	224
Growing up in a home with limited income	142 (63.7%)	38 (17.0%)	223
Lack of affordable healthcare	130 (58.0%)	53 (23.7%)	224
Decline in public assistance	129 (58.4%)	69 (31.2%)	221
Economic Impact(s) of COVID-19	129 (57.6%)	55 (24.6%)	224
Poor economic conditions	135 (60.8%)	44 (19.8%)	222
Social inequality for different groups of people	124 (55.9%)	64 (28.8%)	222
Limited availability of jobs	112 (50.5%)	82 (36.9%)	222
Not working hard enough to earn income	82 (36.9%)	97 (43.7%)	222
Being lazy	79 (35.7%)	96 (43.4%)	221

Each participant was asked what they thought was the main cause of homelessness in Waynesville. Reflecting the complexity and nuanced experience of homelessness, participants often identified more than one primary cause. The researchers coded similar responses into themes: Attracted to Services, Cost of living/inadequate wages, Enabling Behavior by Providers and the Government, Lack of Affordable Housing Options, Lack of Leadership, Lack of Services (i.e. healthcare, shelters, treatment, etc.) Presence of Mental Health Issues, Presence of Substance Abuse Issues, and Sent Here. The most frequent cited open-ended responses indicate that participants think substance use along with structural and systemic issues are likely to cause homelessness: presence of substance use issue (n=105, 47.7%), lack of affordable housing (n=62, 28.7%), cost of living/inadequate wages (n=50, 22.3%), and the lack of services (including healthcare, shelters, and mental health treatment) (n=43, 19.1%). Individuals also responded with several distinct “other” causes (n=24, 10.7%) that did not

readily fit into another category (i.e. people have no hope, social inequity, not trusting people, poor education, etc.). Participants also noted causes that reflected more personal characteristics: personal choice (n=35, 15.6%), enabling behavior by providers and government (n=18, 8.0%), presence of a mental health issue (n=17, 7.5%), attracted by services (16). A handful of participants think that a lack of leadership (n=7) in our community is a main cause of homelessness. And, a few participants think that the main cause of homelessness in Waynesville is that people are sent here by other communities (n=3). Please note, because this was an open-ended question, participants could identify more than one cause, or choose not to provide a response to this question; consequently, the percentages do not add up to one hundred percent.

<b>Main Cause, Open-Ended Response</b>	<b># of Responses n/%</b>
Substance Use	105, (47.7%)
Lack of Affordable Housing Options	62, (28.7%)
Cost of Living/Inadequate Wages	50, (22.3%)
Lack of Services (i.e. healthcare, shelters, treatment)	43, (19.1%)
Personal Choice	35, (15.6%)
Other	24, (10.7%)
Enabling Behavior by Providers and Government	18, (8.0%)
Presence of Mental Health Issue	17, (7.5%)
Attracted by Services	16, (7.1%)
Lack of Leadership	7, (3.1%)
Sent Here	3, (1.3%)

## Perceived Solutions to Homelessness

Survey participants identified mental health treatment (n=195; 87.1%), drug and alcohol treatment (n=181; 80.8%), job training (n=179; 81%), residential programs where individuals can live and address housing and employment (n=175; 78.1%), and outreach programs in shelters (n=169; 75.4%) as the most likely solutions and supports to help our neighbors overcome homelessness and obtain housing. It is worth noting that two of the possible solutions receiving the highest rating of *least likely to help people overcome homelessness* involve programs providing food for individuals who are homeless (such as soup kitchens) (n=55; 24.6%) and “drop-in centers” where individuals who are homeless can go during the day to seek help and access hygiene services (n=53; 23.8%). Even though both services are still perceived by most survey participants to be likely to help, these relatively high negatives likely reflect concerns expressed by some Waynesville residents regarding existing service delivery.

Table # Participant Responses About Perceived Solutions to Homelessness from Most to Least Likely

Instructions given to participants: Please indicate how likely the following factors are to help individuals who are homeless to overcome this problem and obtain housing, using the scale (definitely likely, probably likely, neutral, definitely unlikely, probably unlikely).

Perceived Solutions	Definitely & Probably Likely (n/%)	Definitely & Probably Unlikely (n/%)	n
Mental Health treatment programs	195 (87.1%)	16 (7.1%)	224
Drug and Alcohol treatment programs	181 (80.8%)	22 (9.8%)	224
Job training programs	179 (81.0%)	17 (7.7%)	221
Residential programs where individuals can live and address housing and employment goals	175 (78.1%)	28 (12.5%)	224
Outreach services in shelters	169 (75.4%)	28 (12.5%)	224
Educational programs	165 (73.7%)	24 (10.7%)	224
Programs that provide individuals with low-cost housing	165 (73.7%)	26 (11.6%)	224
Transitional housing programs	161 (71.9%)	27 (12.1%)	224
Medical care for people who are homeless	160 (71.7%)	32 (14.3%)	223
Outreach services in the streets	158 (70.9%)	38 (17.0%)	223
"Drop in centers" where individuals who are homeless can go during the day to seek help and access hygiene services	153 (68.6%)	53 (23.8%)	223

Programs that provide individuals with vouchers for housing	148 (66.1%)	44 (19.6%)	224
Shelters for individuals who are homeless	141 (62.9%)	45 (20.1%)	224
Programs providing food for individuals who are homeless (such as soup kitchens)	139 (62.1%)	55 (24.6%)	224
Faith based programs	112 (50.0%)	50 (22.3%)	224

Participants were asked what they think society and citizens can do to help people who are homeless in Waynesville/Haywood County. The researchers coded similar open-ended responses into themes: Limit/End Help and Services, Ending Stigma Against People who are Homeless, Expand Supports and Programs, Engage: Volunteer, Donate, Community Engagement/Relationship-building, Other, and, Policy Change. Participants (n=127) overwhelmingly indicated support for expanding programs and supports to help people who are homeless. Respondents identified several ways they thought people who are homeless may be assisted—including, expanding affordable housing options, partnership with faith-based groups, mental health supports, substance use treatment, workforce development, and, outreach. There were also participants (n=30) who thought it was important to address the stigma directed to people who are homeless in Waynesville. There are also participants (n=28) who think people who are homeless will be helped by ending or limiting help and services. Other participants (n=20) thought that more neighbors volunteering, donating, engaging with one another to build community and relationships could help people who are homeless. A handful of individuals (n=6) advocated for policy change that included ideas for developing transitional housing, building tiny home communities, and living wages. Some “other” (n=4) ideas included providing services with accountability.

<b>Proposed Solutions, Open-Ended Response</b>	<b># of Responses n/%</b>
Expand Programs and Supports	127 (56.7%)
End Stigma Against People who are Homeless	30 (13.4%)
Limit or End Help & Services	28 (12.5%)
Engage by Volunteering, Donating, Building Community & Relationships	20 (8.9%)
Policy Change	6 (2.7%)
Other	4 (1.8%)

## Community Integration and Readiness for Support

A notable amount of survey participants (n=135; 71.05%) shared they either have experience working or volunteering with individuals who are homeless or formerly homeless. When assessing quantitative results, there appears to be a high-level of support for community integration of people who are/were homeless.

Table # Participant Responses to Proximity Indicators, Organized from Most Willing to Least Willing to Consider

Instructions given to participants: Please indicate how willing you would be to interact with an individual who was previously homeless, using the scale (definitely willing, probably willing, neutral, definitely unwilling, probably unwilling).

Proximity Indicators	Definitely & Probably Willing (n/%)	Definitely & Probably Unwilling (n/%)	n
Work closely with that person on a job	202 (90.6%)	10 (4.5%)	223
Make friends with the person	190 (84.8%)	11 (4.9%)	224
Spend the evening socializing with that person	187 (83.5%)	18 (8.0%)	224
As your child's teacher	184 (82.9%)	15 (6.8%)	222
Have the person as a neighbor	179 (79.9%)	18 (8.0%)	224
Marry into your family	160 (71.7%)	20 (9.0%)	223
Dating your child	133 (60.2%)	42 (19.0%)	221

Survey participants indicate a strong directive for our community to address stigma concerning our neighbors who used to be homeless (n=188; 83.9%) and who are currently homeless (n=157; 70.1%). Participants note prior and current willingness to both volunteer and donate money to help individuals who are homeless. The majority of survey participants also indicate an openness to increase programs to help people who are homeless (n=162; 72.6%)—including more programs that provide housing and vouchers to people who are homeless (n=145; 64.7%). Further, it is noteworthy that most participants support the government doing more to help people who are homeless (n=143; 64.1%)—including an apparent willingness to use tax dollars to fund such interventions.

Table # Participant Responses of Willingness to Help People who are Homeless, Organized from Most Willing to Least Willing to Help

Instructions given to participants: The next set of questions asks your opinion about people who are homeless. Please respond to the following questions honestly by clicking on the response that indicates your opinion, using the scale below (strongly agree, agree, strongly disagree, disagree, undecided).

<b>Level of Response</b>	<b>Strongly Agree &amp; Agree (n/%)</b>	<b>Strongly Disagree &amp; Disagree (n/%)</b>	<b>n</b>
Communities should work to decrease stigma for people who used to be homeless.	188 (83.9%)	15 (6.7%)	224
I donated money to help individuals who are homeless in the past.	176 (78.6%)	33 (14.7%)	224
There should be more programs to help individuals who are homeless.	162 (72.6%)	37 (16.6%)	223
Communities should work to decrease stigma for people who are homeless.	157 (70.1%)	37 (16.5%)	224
I would be willing to volunteer in a program that provides food for individuals who are homeless (such as a soup kitchen).	157 (70.1%)	39 (17.4%)	224
I volunteered to help individuals who are homeless in the past.	151 (67.4%)	46 (20.5%)	224
Society should do more to help people who are homeless.	149 (66.5%)	36 (16.1%)	224
I would be willing to work in a program that helps individuals who are homeless.	147 (65.9%)	33 (14.8%)	223
People should do more to help people who are homeless.	146 (65.2%)	34 (15.2%)	224
There should be more programs that provide housing and vouchers to people who are homeless.	145 (64.7%)	48 (21.4%)	224
The government should do more to help people who are homeless.	143 (64.1%)	56 (25.1%)	223
I would be willing to donate money to an organization to help individuals who are homeless.	136 (60.7%)	41 (18.3%)	224
I would be willing to volunteer in a homeless shelter.	118 (52.9%)	57 (25.6%)	223
Tax dollars should not be used to help people who are homeless.	63 (28.3%)	133 (59.6%)	223

# Results: Survey with our Neighbors who are Homeless

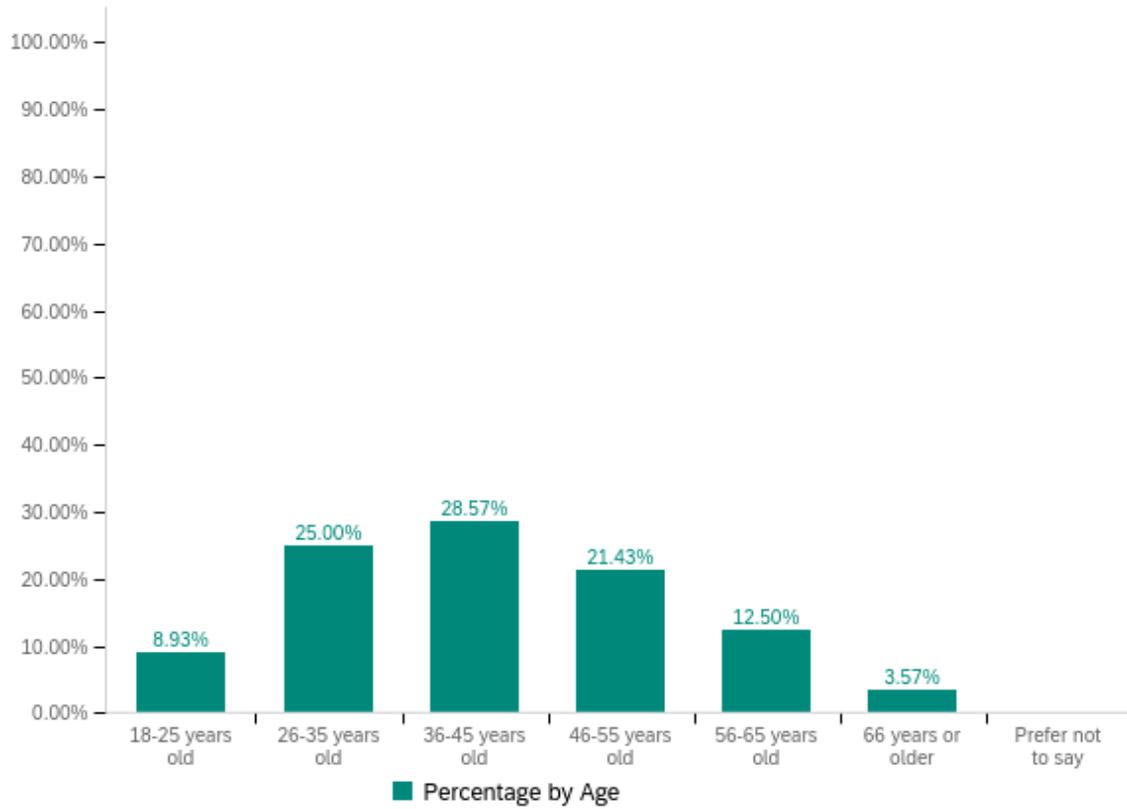
A comprehensive survey was administered to individuals who are homeless to document demographics, assess causes of homelessness, explore mitigating factors, and document the lived experience of people who are homeless in Waynesville.

## Demographics of People who are Homeless in Waynesville

### Age

Approximately nine percent (8.93%, n=5) of survey participants were between the ages of 18-25 when they took the survey. In North Carolina as a whole, the rate of young adults aged 18-25 constitute a slightly smaller percentage of the statewide homeless population (5.9%, n=561) (HUD, 2020). Twenty-five percent (25%, n=14) were between the ages of 26-35, nearly twenty-nine percent (28.57%, n=16) were between the ages of 36-45, nearly twenty-two percent (21.43%, n=12) were between the ages of 46-55, nearly 13% (12.5%, n=7) were between 56-65, and nearly 4 percent (3.57%, n=2) were 66 years of age or older. Children under the age of 18 were not surveyed in accordance with human subjects' protection protocol.

Figure X.X Age



Age Categories	%	Count
18-25 years old	8.93%	5
26-35 years old	25.00%	14
36-45 years old	28.57%	16
46-55 years old	21.43%	12
56-65 years old	12.50%	7
66 years or older	3.57%	2
Prefer not to say	0.00%	0
Total	100%	56

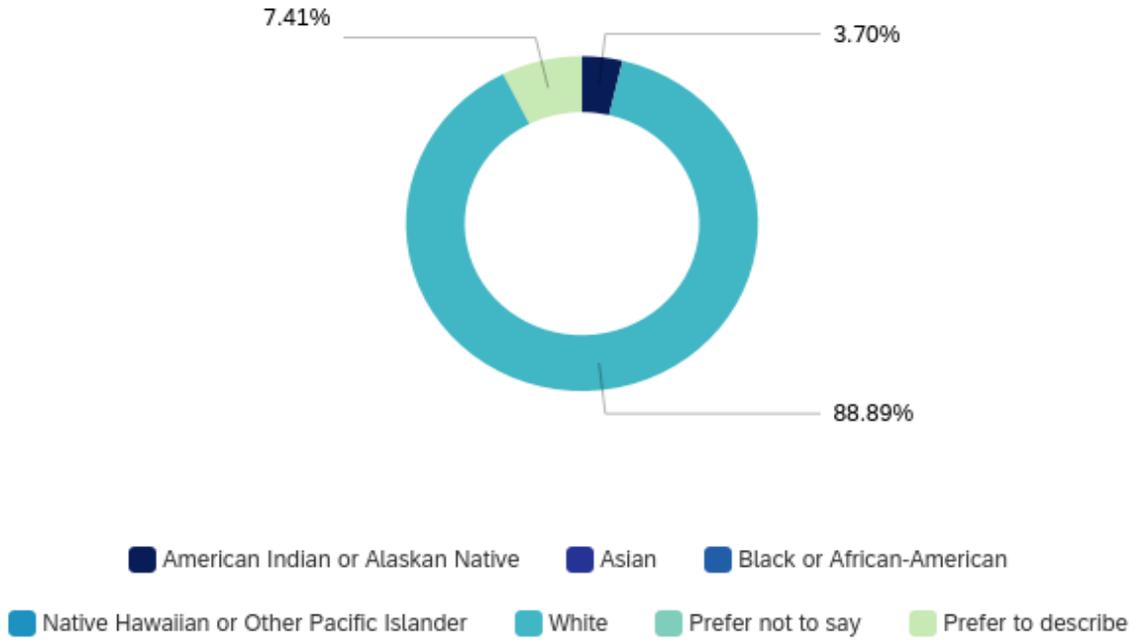
## Race and Ethnicity

Reflecting regional demographics, approximately eighty-nine percent (88.89%, n=48) of survey participants indicated a white racial identity. Almost eight percent (7.41%, n=4) preferred to self-describe indicating a combination racial identity of white and American Indian. Approximately four percent (3.7%, n=2) indicated they were American Indian/Alaskan Native.

Likewise, the overwhelming majority of participants indicated they are not Hispanic/LatinX/Latino/a (87.04%, n=47). Almost eight percent (7.41%, n=4) preferred to describe themselves as white or American, reflecting a racial or national origin rather than ethnic categorization. Nearly four percent (3.7%, n=2) identified as Hispanic/LatinX/Latino/a.

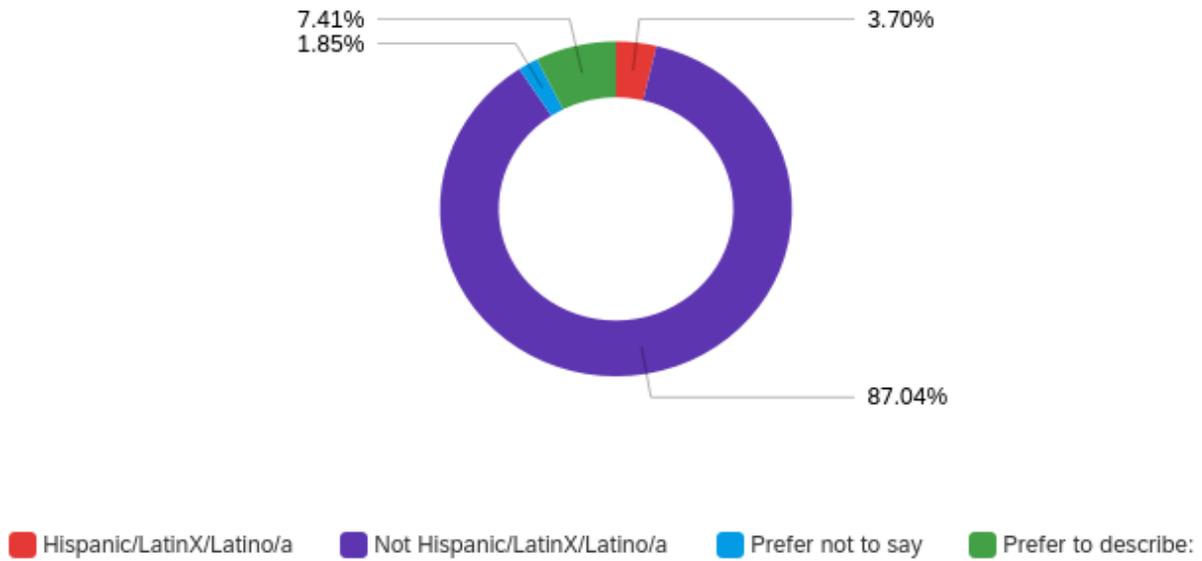
Although these demographic trends mirror the region, it should be noted that underrepresented communities are often disproportionately represented among populations who are homeless. For example, according to the 2019 Point in Time data, in North Carolina, Black individuals accounted for 51 percent of the homeless population even though they only constitute 22 percent of the state's overall population (North Carolina to End Homelessness, 2019). Given the challenges in identifying and connecting with this often-hidden population, our community should be mindful of these considerations.

Figure X.X Race



Race	%	Count
American Indian or Alaskan Native	3.70%	2
Asian	0.00%	0
Black or African-American	0.00%	0
Native Hawaiian or Other Pacific Islander	0.00%	0
White	88.89%	48
Prefer not to say	0.00%	0
Prefer to describe	7.41%	4
Total	100%	54

Figure X.X Ethnicity



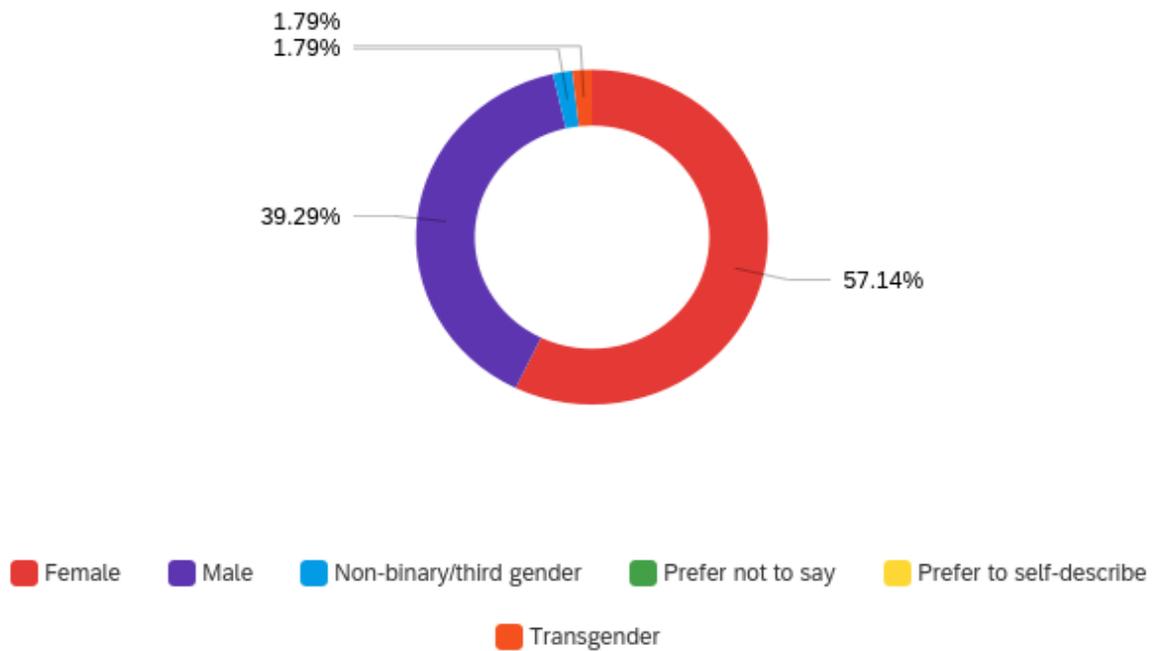
Ethnicity	%	Count
Hispanic/LatinX/Latino/a	3.70%	2
Not Hispanic/LatinX/Latino/a	87.04%	47
Prefer not to say	1.85%	1
Prefer to describe:	7.41%	4
Total	100%	54

### Gender

Survey participants were majority female (57.14%, n=32) with males consisting of approximately forty percent of participants (39.29%, n=22). This data contrasts traditional statistics concerning gender make-up. At the state-level, approximately 62 percent of North Carolina's homeless population is male (Interagency Council for Coordinating Homeless Programs, 2019). Approximately two percent of participants (1.79%, n=1) identified as transgender as well as individuals identifying as non-

binary/third gender (1.79%, n=1). It is worth noting that one of the individuals identifying outside of the binary indicated that they do not seek emergency shelter because they are forced to sleep in areas that do not reflect their gender identity. This concern was also noted in the community feedback survey.

Figure X.X Gender

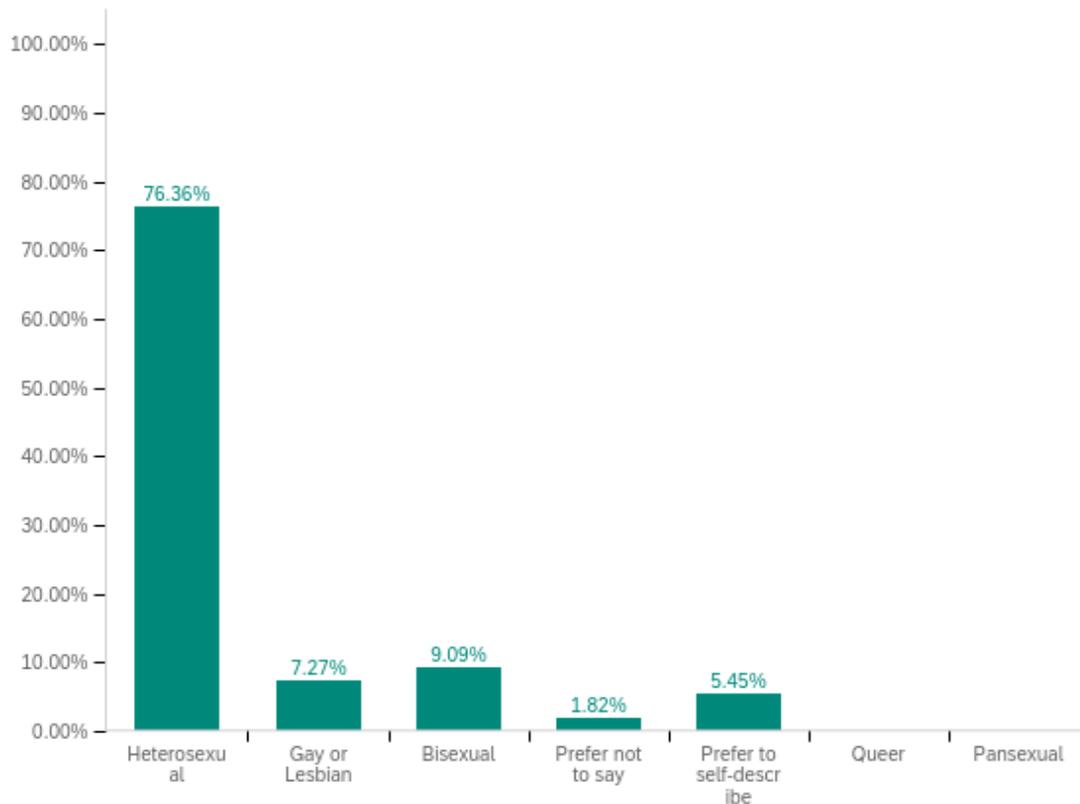


Gender	%	Count
Female	57.14%	32
Male	39.29%	22
Non-binary/third gender	1.79%	1
Prefer not to say	0.00%	0
Prefer to self-describe	0.00%	0
Transgender	1.79%	1
Total	100%	56

## Sexual Orientation

The overwhelmingly majority of participants indicate they are heterosexual (76.36%, n=42). Individuals who elected to self-describe their sexual orientation noted they are “straight,” (5.45%, n=3) also reflecting heterosexuality. Lesbian, gay, and bisexual participants constitute approximately 17 percent (16.36%, n=9) of the survey sample. These numbers reflect national trends, which indicate homelessness prevalence rates among the LGB population are more than twice than the general population (Wilson, Choi, Harper, Lightfoot, Russell, & Meyer, 2020).

Figure X.X Sexual Orientation



Sexual Orientation	%	Count
Heterosexual	76.36%	42
Gay or Lesbian	7.27%	4
Bisexual	9.09%	5
Prefer not to say	1.82%	1
Prefer to self-describe	5.45%	3
Queer	0.00%	0

Pansexual	0.00%	0
Total	100%	55

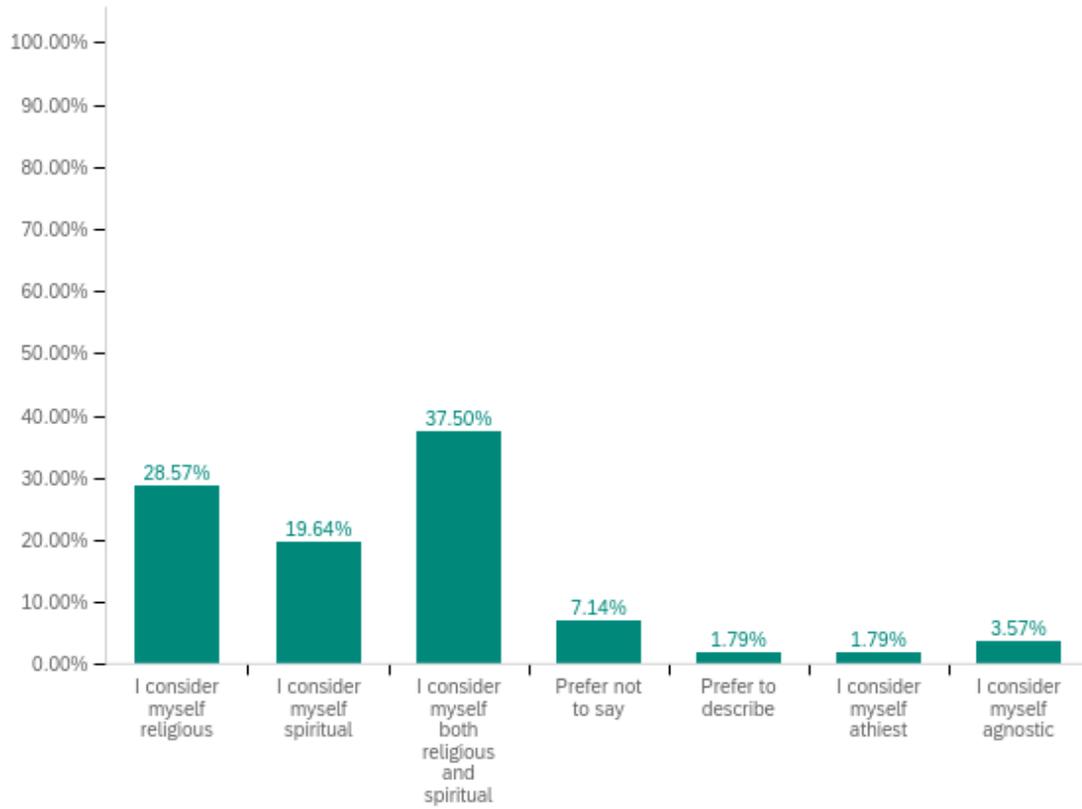
### Religious and Spiritual Affiliation

Approximately eighty-six percent (85.71%, n=48) identify as either religious, spiritual, and/or both religious and spiritual. A little over seven percent (7.14%, n=4) preferred not to disclose their religious and/or spiritual affiliation. Additionally, nearly six percent consider themselves atheist (1.79%, n=1) or agnostic (3.57%, n=2).

For individuals considering themselves religious, the overwhelming majority (97.37%; n=37) indicate they are Christians or self-describe as belonging to a Christian-affiliated denomination (i.e. Baptist, Roman Catholic, etc.)

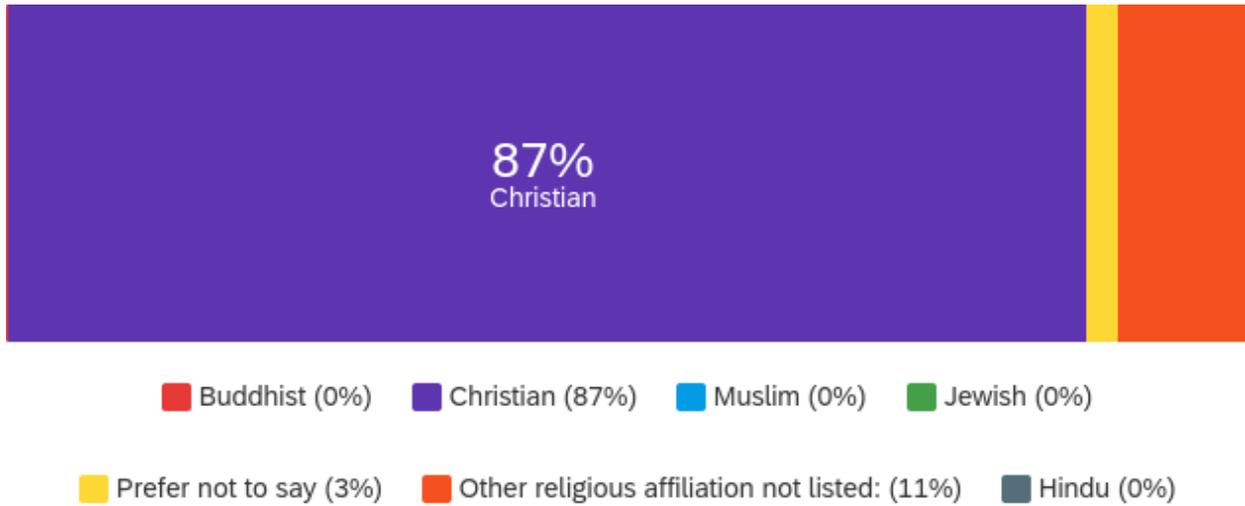
This information is relevant considering the presence of faith-based approaches and/or programs that characterize some services for people who are homeless. For some individuals, their faith will provide an important path and strategy for coping with their situation. Other individuals may hold a strong faith orientation yet differ in approach from the services they need and are provided in a community. For example, in the listening session with people who are homeless, the majority of participants expressed a strong faith orientation and history; however, they spoke of how they perceived many volunteers to be condescending in assuming an absence of belief among individuals who are homeless. Further, consideration should be given to individuals who need services but have no religious and spiritual affiliation.

Figure X.X Religious and Spiritual Affiliation



Religious and Spiritual Affiliation	%	Count
I consider myself religious	28.57%	16
I consider myself spiritual	19.64%	11
I consider myself both religious and spiritual	37.50%	21
Prefer not to say	7.14%	4
Prefer to describe	1.79%	1
I consider myself atheist	1.79%	1
I consider myself agnostic	3.57%	2
Total	100%	56

Figure X.X Religious Denomination



Religious Denomination	%	Count
Buddhist	0.00%	0
Christian	86.84%	33
Muslim	0.00%	0
Jewish	0.00%	0
Prefer not to say	2.63%	1
Other religious affiliation not listed:	10.53%	4
Hindu	0.00%	0
Total	100%	38

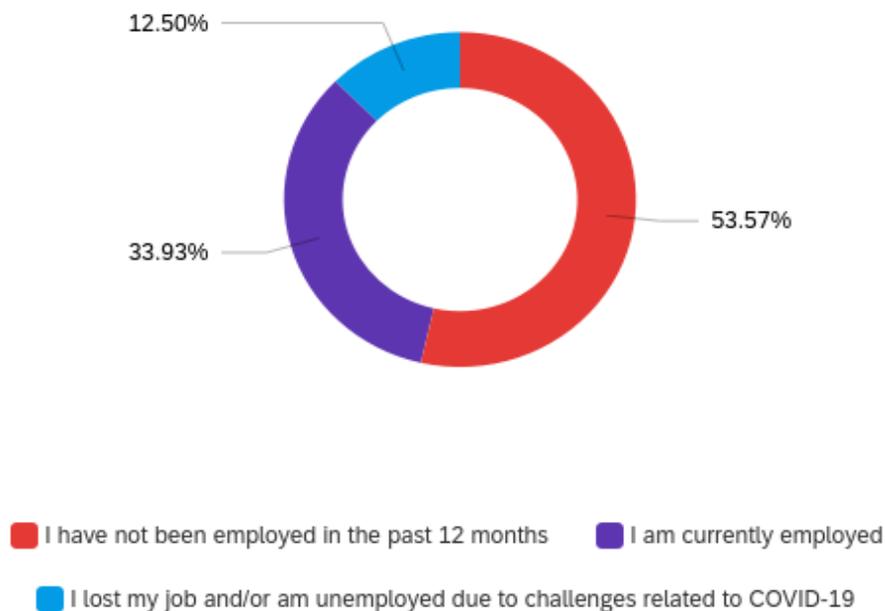
### Employment, Wages, Income & Financial Support

A little more than half of participants (53.7%, n=30) have not been employed in the past 12 months, and almost thirteen percent (12.5%, n=7) are unemployed due to challenges related to COVID-19. Approximately thirty-four percent (33.93%, n=19) are currently employed. This data is relatively consistent with recent national estimates of unemployment rates between 57 and 90 percent among people experiencing homelessness (Homelessness Policy Research Institute, 2020), which may be further complicated by the presence of untreated mental health issues and involvement in the criminal justice system (Tiderington, et al., 2019). Furthermore, it is important to note that

discrimination by potential employers regarding housing and criminal backgrounds was a significant barrier to employment identified in the listening session with people who are homeless.

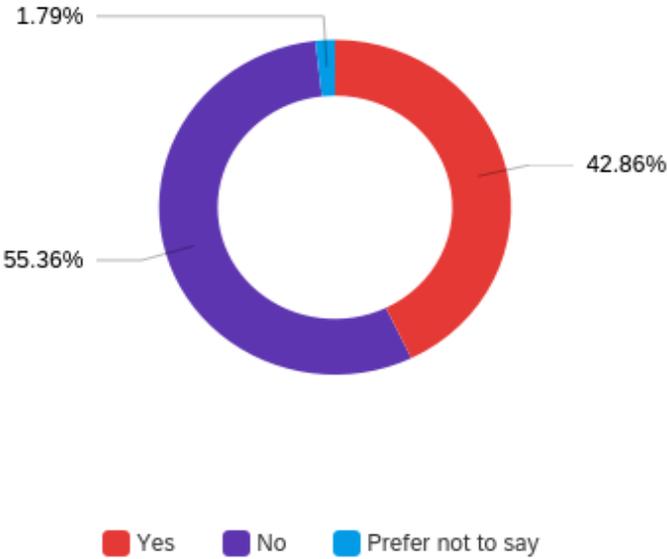
Approximately fifty-five percent (55.36%, n=31) of participants are not receiving any wages or income, while almost forty-three percent (42.86%, n=24) have some form of income. One participant preferred not to report their income. The types of reported income and financial support received by participants included employment wages (28.13%, n=18), government assistance (12.5%, n=8), and support from a partner, family member, and/or friend (7.81%, n=5). While almost twenty-two percent (21.88%, n=14) preferred to self-describe their financial support, eleven (n=11) of these participants described forms of government assistance. This would increase the total number of participants reporting receiving government assistance to nineteen (n=19), or approximately thirty percent (29.68%). Monthly government assistance such as disability or Social Security is not adequate to afford Fair Market Rent in Waynesville. For example, an individual whose only income is their Social Security can afford to pay roughly \$490 per month in rent (based on Waynesville's mean Social Security of \$19,629).

Figure X.X Employment Status



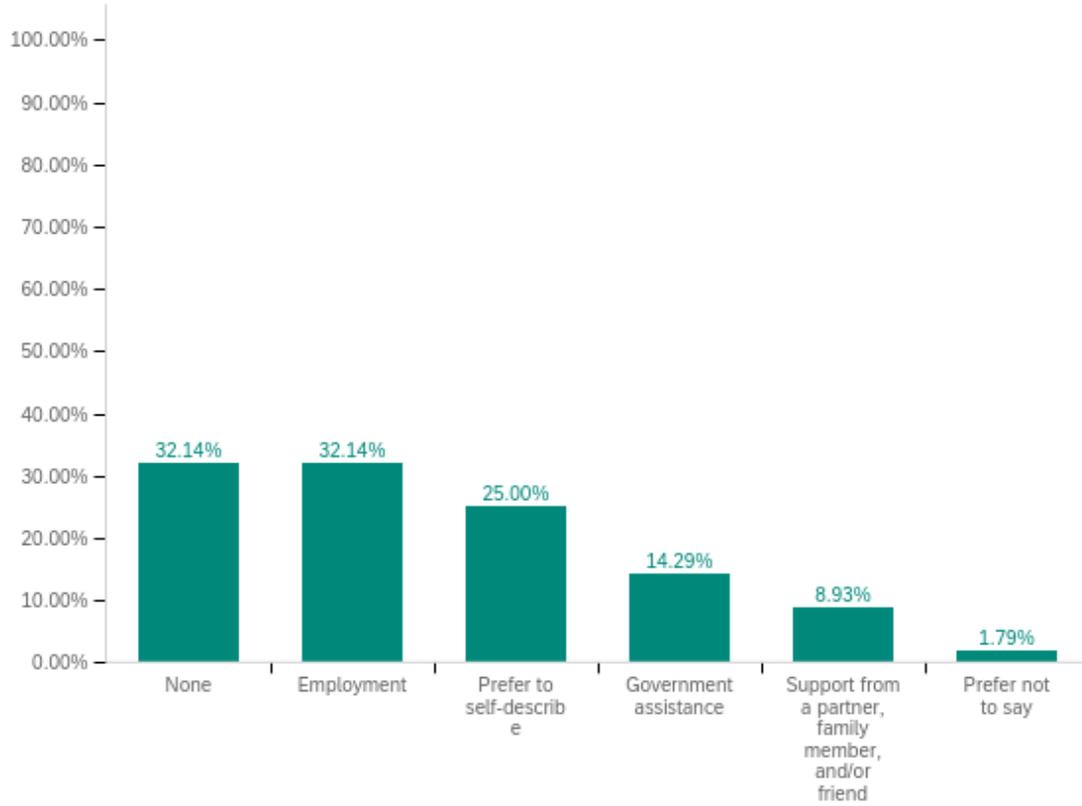
Employment Status	%	Count
I have not been employed in the past 12 months	53.57%	30
I am currently employed	33.93%	19
I lost my job and/or am unemployed due to challenges related to COVID-19	12.50%	7
Total	100%	56

Figure X.X Receiving Wages, Incomes, and/or Financial Support



Receiving Wages, Incomes, and/or Financial Support	%	Count
Yes	42.86%	24
No	55.36%	31
Prefer not to say	1.79%	1
Total	100%	56

Figure X.X Current Type of Financial Support



Current Type of Financial Support	%	Count
None	28.13%	18
Employment	28.13%	18
Support from a partner, family member, and/or friend	7.81%	5
Government assistance	12.50%	8
Prefer not to say	1.56%	1
Prefer to self-describe	21.88%	14
Total	100%	64

## Familial Relationships and Status

Approximately forty-two percent (41.82%, n=23) reported being without a romantic partner and never married. Almost one quarter of participants are divorced (25.43%, n=14), while a little more than seven percent (7.27%, n=4) are married and three percent (3.64%, n=2) widowed. Approximately twenty-two percent (21.82%, n=12) reported their relationship status as "other", with many participants noting that they were separated from their partners at the time of this survey.

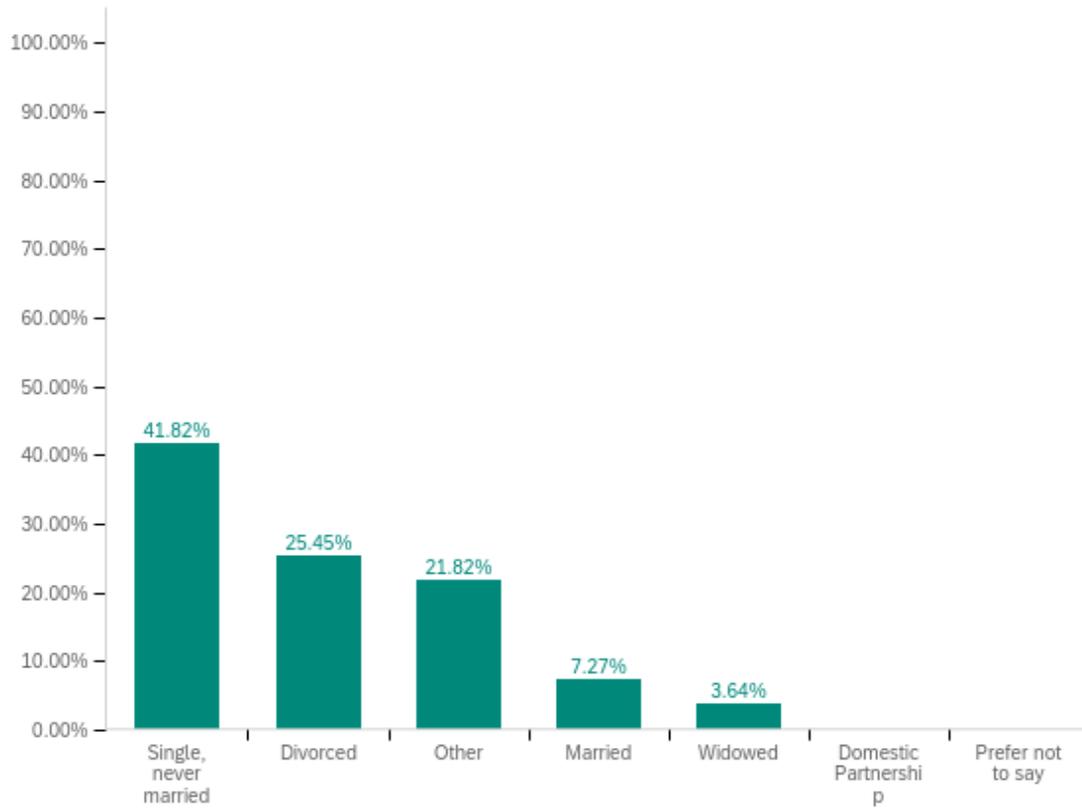
The majority of participants have children (83.93%, n=47), while sixteen percent (16.07%, n=9) reported not having children. Most participants (96%, n=47) were not pregnant at the time of this survey. As females who are homeless are more likely to be pregnant than females who are housed, the relatively small number of pregnant females who are homeless in Waynesville (2%, n=1) is inconsistent with the national estimates of approximately 48% (Clark et al., 2019).

Of the participants with children, eighteen percent (18.31%, n=13) had young children under the age of 7, twenty-eight percent (28.17%, n=20) had children between the ages of 8-15, twenty-five percent (25.35%, n=18) had children between 15-22 years old, and almost twenty-seven percent (26.76%, n=19) had children older than 22 years.

One participant in the listening session with people who are homeless explained that their children were living with their parents during their current housing crisis. This situation was underscored during the law enforcement listening session, when participants noted their concern for the outcomes of many children in the area who live with their grandparents because of their parents' substance use and/or mental health challenges and homelessness.

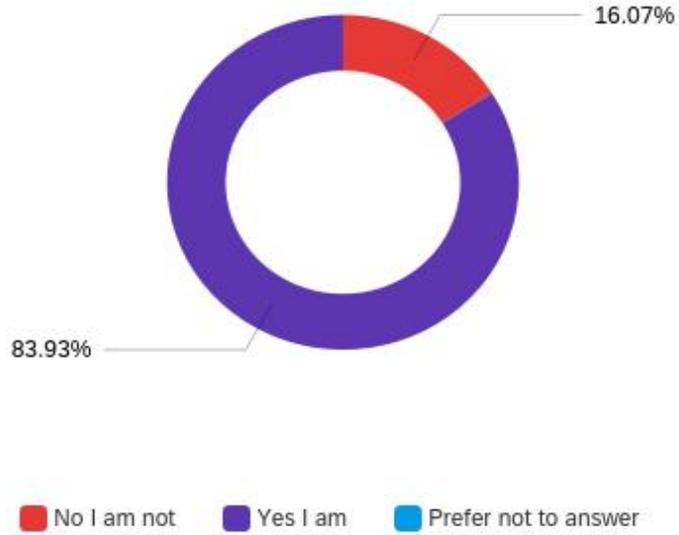
A little more than sixty-four percent (64.29%, n=36) of survey participants reported seeking shelter alone. Approximately fourteen percent (14.29%, n=8) were seeking shelter with one other person, nine percent (8.93%, n=5) with two other people, and seven percent (7.14%, n=4) with three or four people. A little more than five percent (5.36%, n=3) preferred not to disclose how many people they were seeking shelter with. This data is a little less with state-wide trends, with approximately seventy-two percent (72.17%, n=6,698) seeking shelter alone and twenty-seven percent (27.19%, n=2,524) seeking shelter with others and/or children (HUD, 2020).

Figure X.X Relationship Status



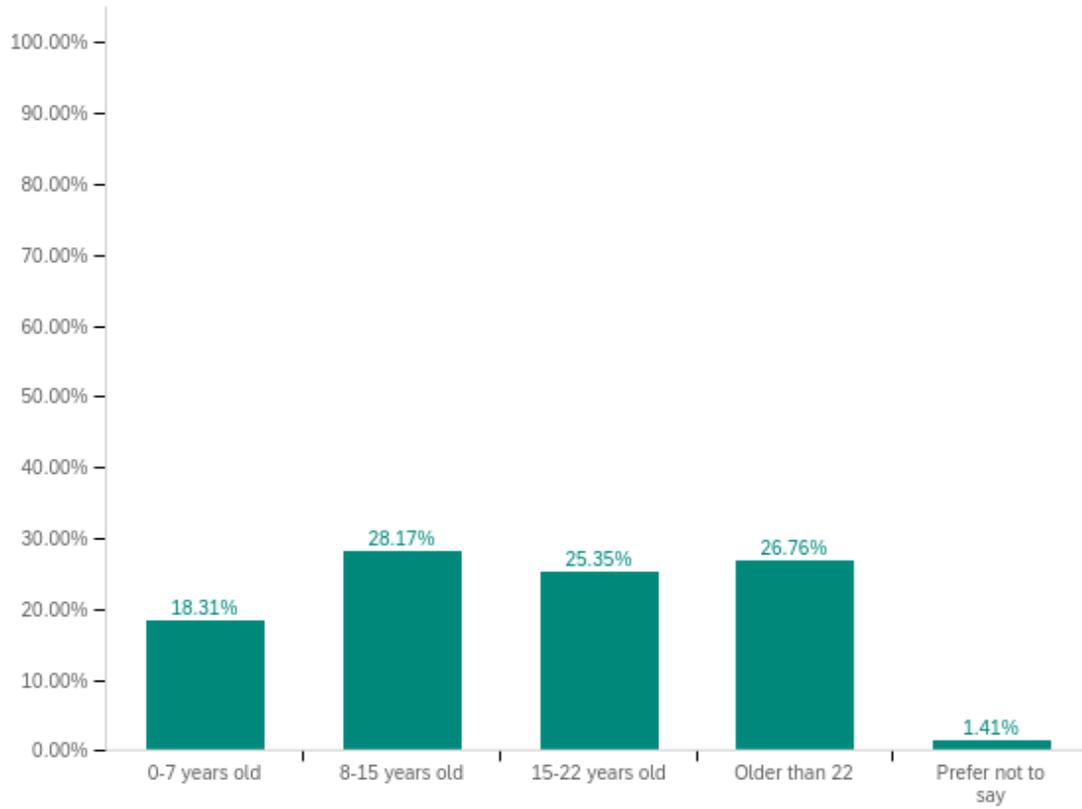
Relationship Status	%	Count
Single, never married	41.82%	23
Married	7.27%	4
Domestic Partnership	0.00%	0
Divorced	25.45%	14
Widowed	3.64%	2
Prefer not to say	0.00%	0
Other	21.82%	12
Total	100%	55

Figure X.X Parental Status



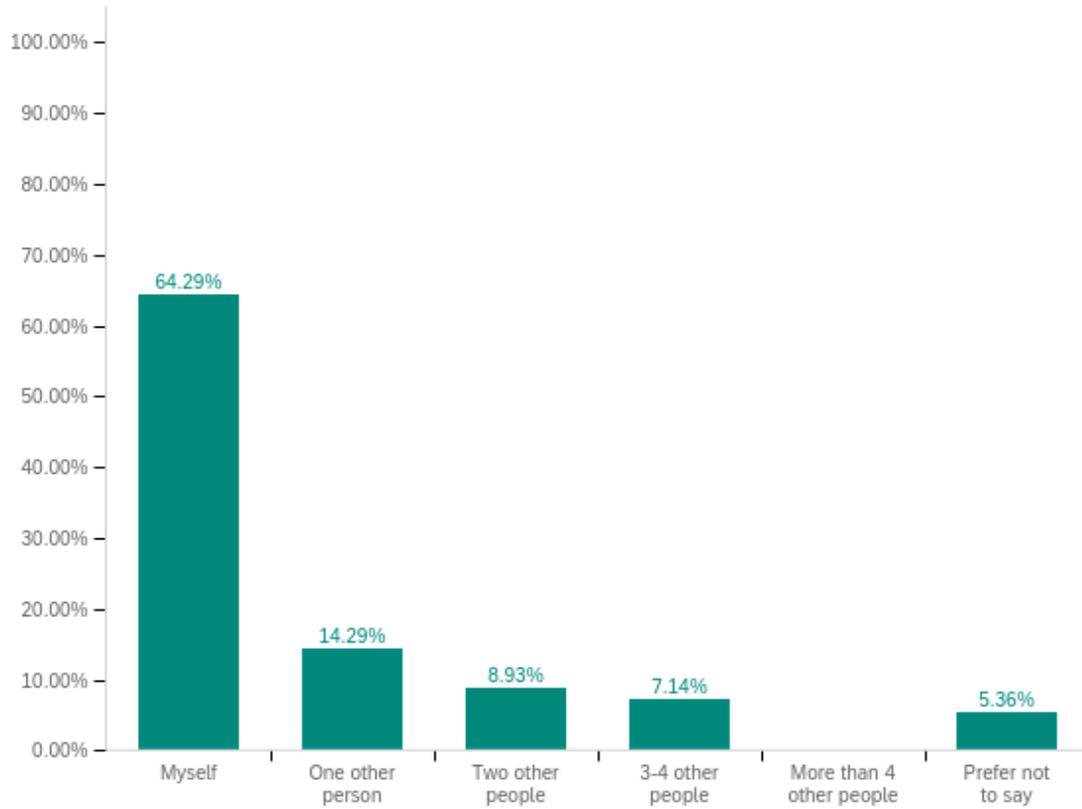
Parental Status	%	Count
No I am not	16.07%	9
Yes I am	83.93%	47
Prefer not to answer	0.00%	0
Total	100%	56

Figure X.X Age Ranges of Children



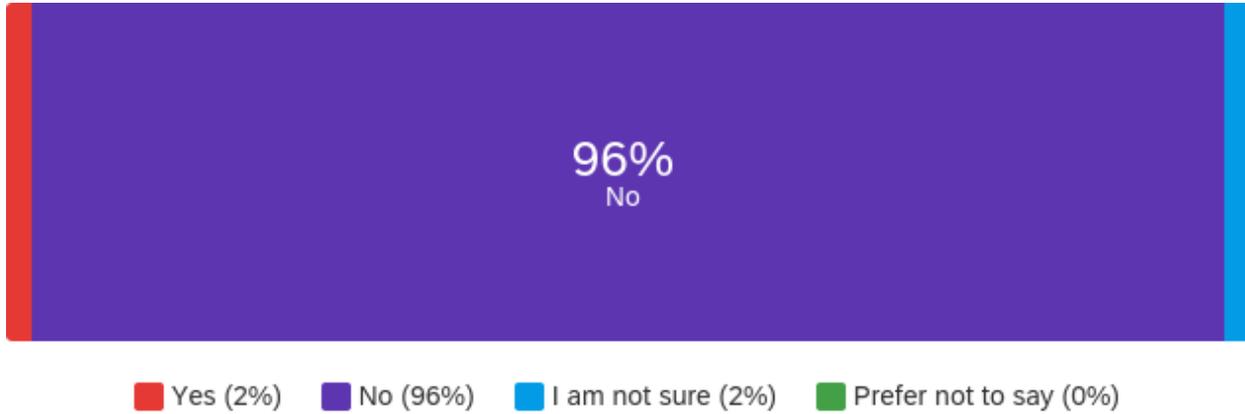
Age Categories for Children	%	Count
0-7 years old	18.31%	13
8-15 years old	28.17%	20
15-22 years old	25.35%	18
Older than 22	26.76%	19
Prefer not to say	1.41%	1
Total	100%	71

Figure X.X Number of People Seeking Shelter With



Seeking Shelter With	%	Count
Myself	64.29%	36
One other person	14.29%	8
Two other people	8.93%	5
3-4 other people	7.14%	4
More than 4 other people	0.00%	0
Prefer not to say	5.36%	3
Total	100%	56

Figure X.X Pregnancy Status

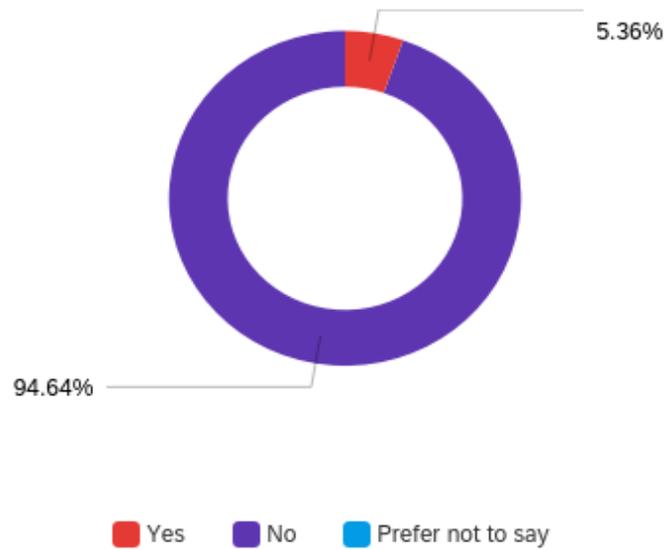


Pregnancy Status	%	Count
Yes	2.04%	1
No	95.92%	47
I am not sure	2.04%	1
Prefer not to say	0.00%	0
Total	100%	49

### Veteran Status

The overwhelming majority of participants are not veterans (94.64%, n=53), with only three participants (5.36%, n=3) reporting veteran status. As over eight percent (8.59%, n=798) of people who are homeless in North Carolina have veteran status (USDHUD, 2020), this relatively low percentage of veterans who are homeless in Waynesville could be due to the large percentage of participants who identified as female in our sample. Of course, the service and contributions of our female veterans are appreciated and acknowledged. Yet homelessness among veterans is primarily experienced by male veterans; according to the 2019 Point in Time Count for the balance of state in North Carolina, 93 percent of veterans who are homeless were male (NC Coalition to End Homelessness, 2019).

Figure X.X Veteran Status



Veteran Status	%	Count
Yes	5.36%	3
No	94.64%	53
Prefer not to say	0.00%	0
Total	100%	56

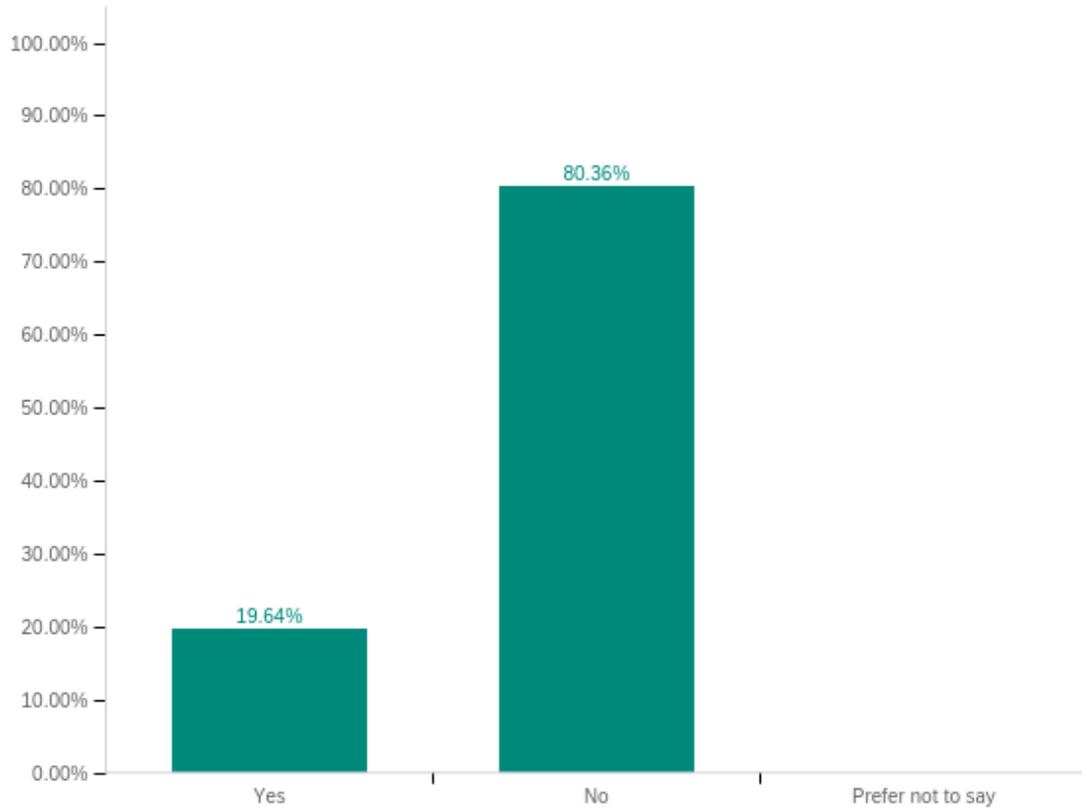
### Foster Care Experience

Approximately eighty percent (80.36%, n=45) of participants had no experience being in the foster care system. Almost twenty percent (19.64%, n=11) had experience in the foster care system as a child. Approximately 1.4% of children in Haywood County are currently in the foster care system, a number that has been increasing since 2010 (Annie E. Casey Foundation, 2020).

Children in foster care often encounter a four or more Adverse Childhood Experiences (ACES), which increases their risks for behavioral and mental health conditions as well as homelessness in adulthood (Nilsson, et al., 2019). In Haywood County over 10% of adults report having four or more ACES (Haywood County Community Health Assessment,

2018). This percentage is noteworthy and suggests ACES interventions with children in Waynesville could prevent them from becoming homeless in adulthood.

Figure X.X Foster Care Experience



Foster Care Experience	%	Count
Yes	19.64%	11
No	80.36%	45
Prefer not to say	0.00%	0
Total	100%	56

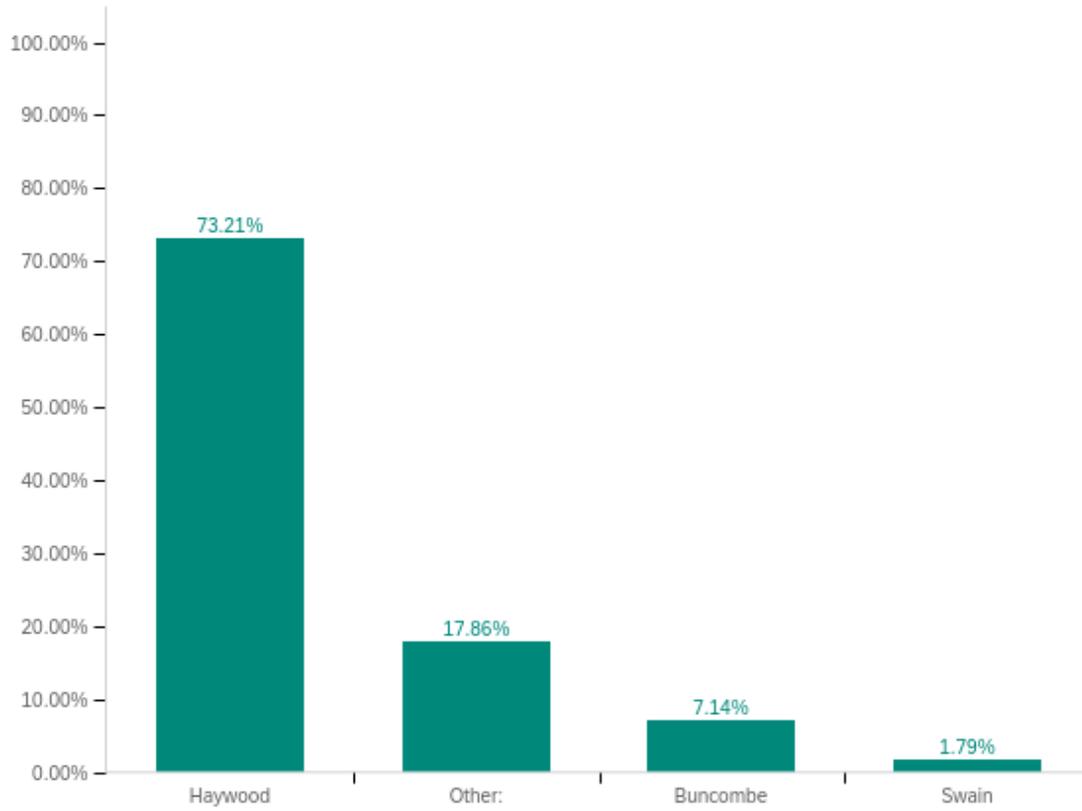
## Time in Haywood County and Waynesville

A little more than seventy-three percent (73.21%, n=41) of participants reported living in Haywood County when they last had stable housing. Approximately seven percent (7.14%, n=4) reported having stable housing in Buncombe County, and 1.79% (n=1) last had stable housing in Swain County. Almost eighteen percent (17.86%, n=10) reported last having stable housing elsewhere. Many of these participants reported that their last stable housing experiences were in surrounding regions that were not listed on the survey, including Clyde, Cruso, and Jackson County.

Forty percent (40%, n=22) of participants reported being originally from Waynesville, while sixty percent (60%, n=33) reported they were not originally from Waynesville. However, over sixty-two percent (62.5%, n=35) reported living in Haywood County for more than 10 years, with fifty-one percent (51%) of those participants being originally from Waynesville. Approximately fourteen percent (14.29%, n=8) of participants reported being in Haywood County for 1-4 years, with seventy-five percent (75%) of those individuals not originally from Waynesville. A little more than twelve percent (12.5%, n=7) of participants reported being in Haywood County for less than 1 year, suggesting that they are not originally from Waynesville. Almost eleven percent (10.71%, n=6) reported being in Haywood County for 5-9 years, with almost sixty-seven percent (66.76%) of those individuals not originally from Waynesville. These data appear to indicate that most individuals have been in Haywood County for a decade or longer, yet they may have lived in other towns and neighborhoods in the county prior to Waynesville.

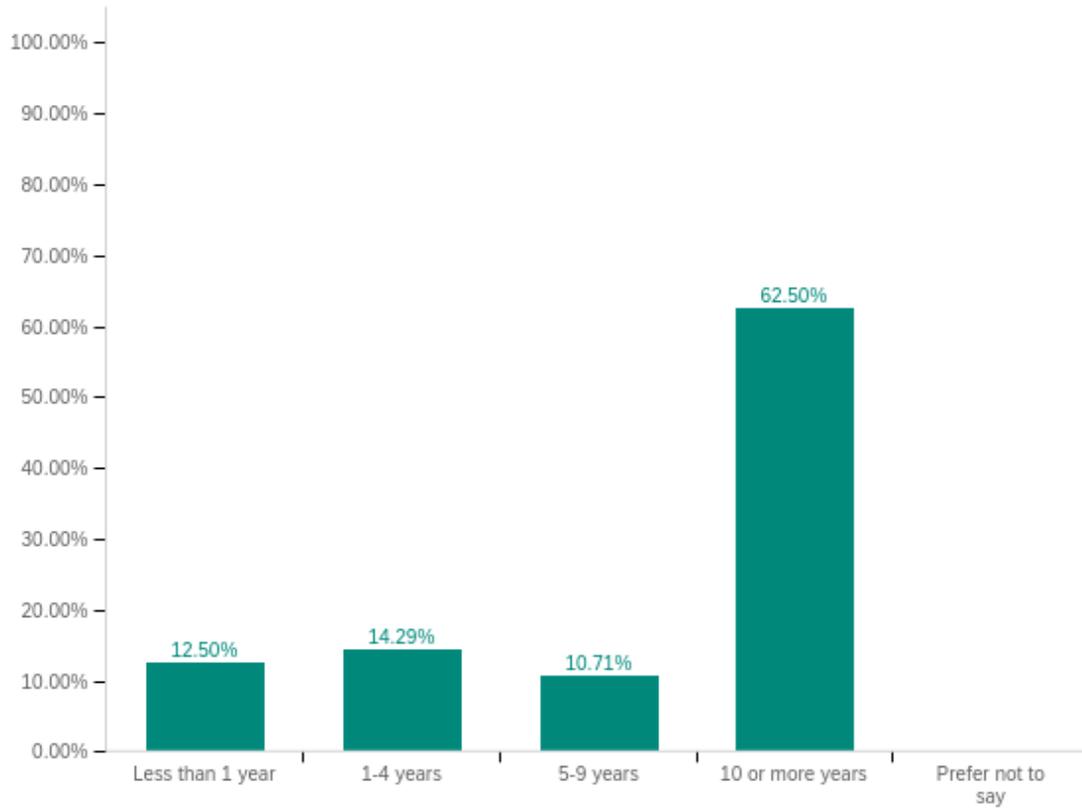
A little more than half of participants (51.52%, n=17) reported coming to Waynesville because they had friends or family living there. While 1 participant (3.03%) preferred not to say why they came to Waynesville. Approximately fifteen percent (15.15%, n=5) reported coming to Waynesville to access homeless services, twelve percent (12.12%, n=4) for employment opportunities, and eighteen percent (18.18%, n=6) for reasons other than what was listed on the survey. Studies of other rural areas indicate some people who are homeless may migrate in search of homeless services, supports, and employment (National Advisory Committee on Rural Health and Human Services, 2014), especially if they have been homeless for an extended amount of time. For example, 20% of Veterans who are chronically homeless migrate to different regions during their homelessness (US Department of Veterans Affairs, 2015). Further, the participants (n=5) who indicated they came to Waynesville to access homeless services represent individuals seeking protection and safety from domestic or interpersonal violence or due to the death of family member.

Figure X.X County Lived In When Last Had Stable Housing



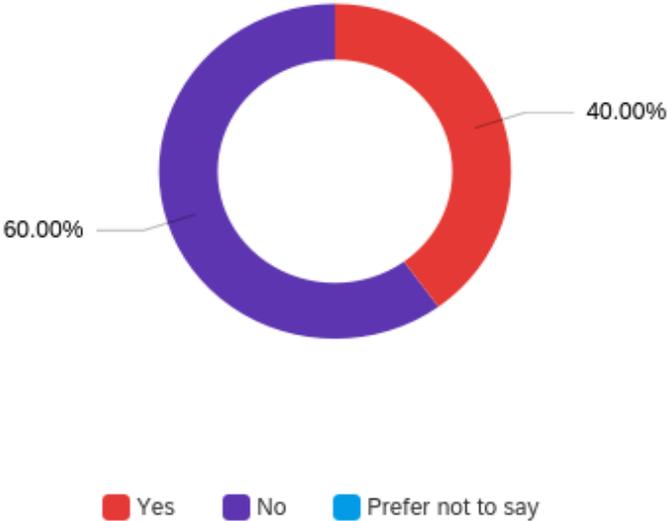
County Last Lived in with Stable Housing	%	Count
Buncombe	7.14%	4
Haywood	73.21%	41
Swain	1.79%	1
Other:	17.86%	10
Total	100%	56

Figure X.X Time in Haywood County



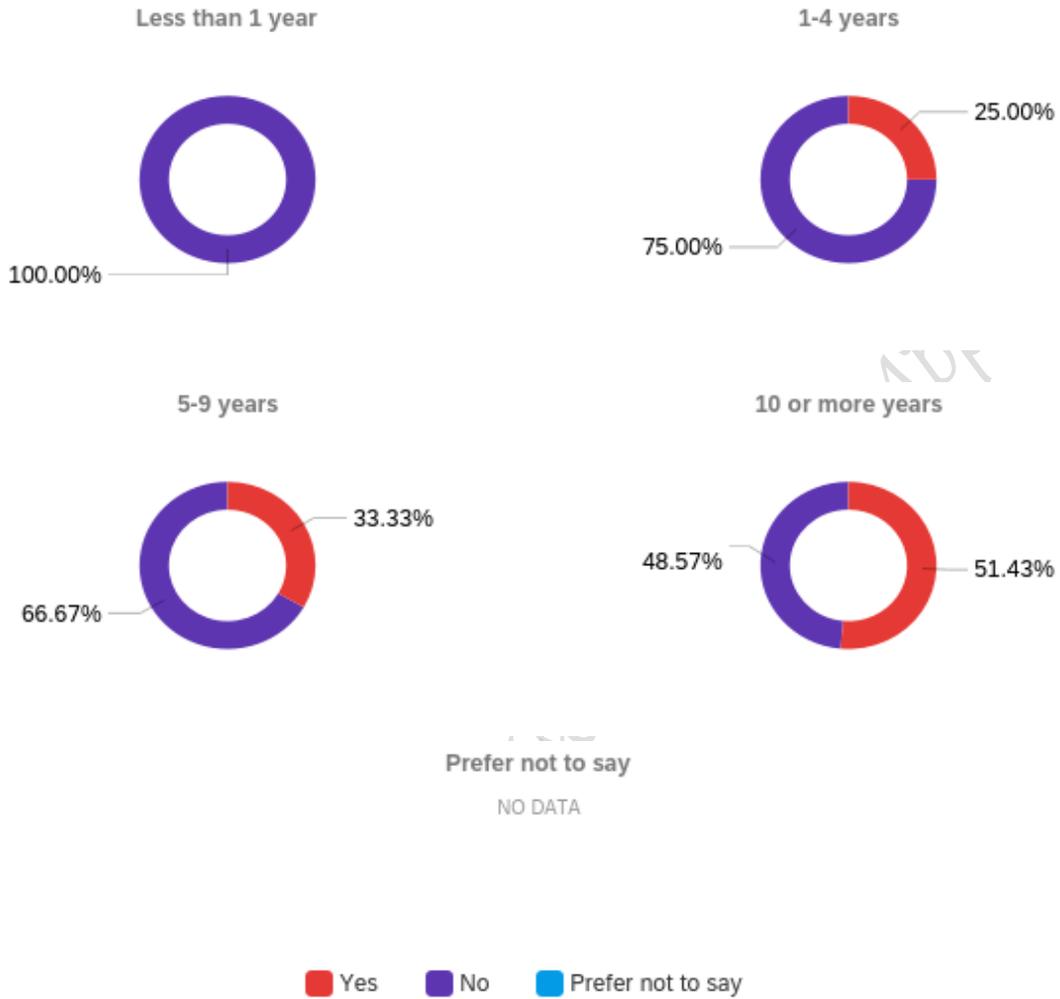
Time in Haywood County	%	Count
Less than 1 year	12.50%	7
1-4 years	14.29%	8
5-9 years	10.71%	6
10 or more years	62.50%	35
Prefer not to say	0.00%	0
Total	100%	56

Figure X.X Originally from Waynesville



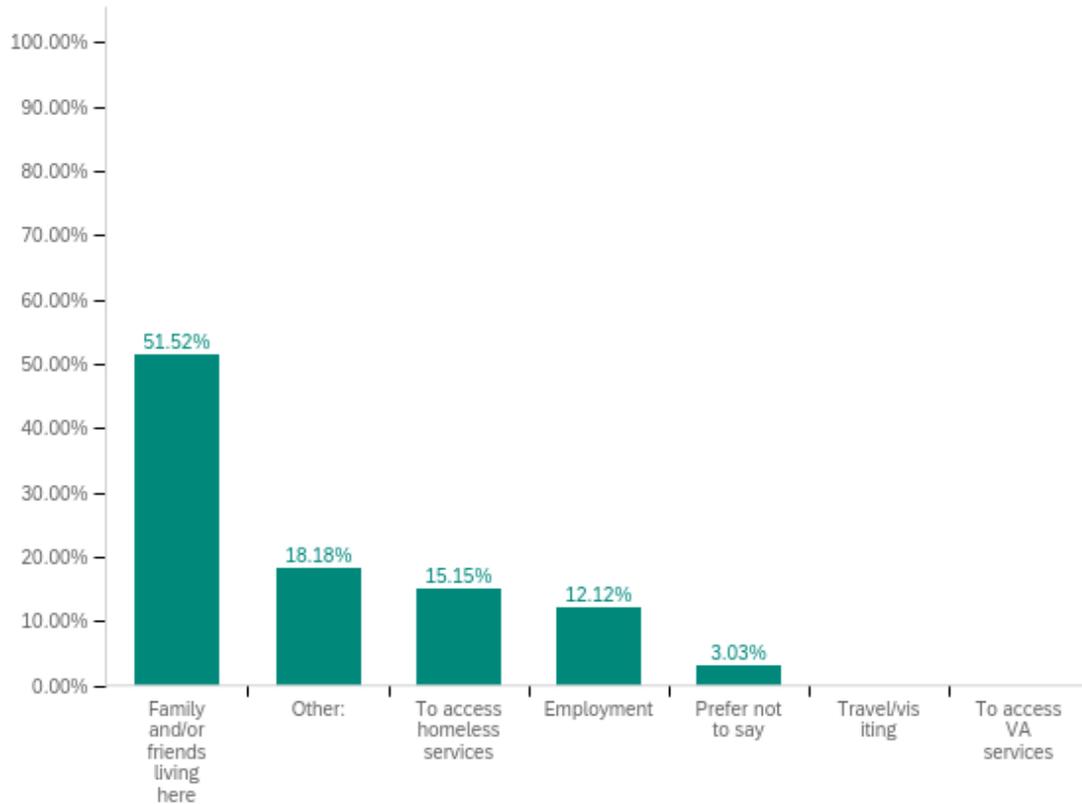
DRAFT -- Plan Under Discussion

Figure X.X Originally from Waynesville and Time in Haywood County



DRAFT -- plan

Figure X.X Reason Came to Waynesville



Reason Came to Waynesville	%	Count
Family and/or friends living here	51.52%	17
Employment	12.12%	4
Travel/visiting	0.00%	0
To access homeless services	15.15%	5
To access VA services	0.00%	0
Other:	18.18%	6
Prefer not to say	3.03%	1
Total	100%	33

### Living Arrangements

Prior to becoming homeless, over sixty percent (60.71%, n=34) lived in a house they or their partner rented. This high percentage is indicative of a lack of affordable housing in

the area. In 2019, 29% of renters in Haywood County were cost-burdened (meaning that they were spending more than 30% of their income on housing costs) and 14.6% faced eviction (NC Housing Coalition, 2019). This data suggests that over a quarter of Haywood County renters cannot afford their homes, and some are becoming homeless as a result.

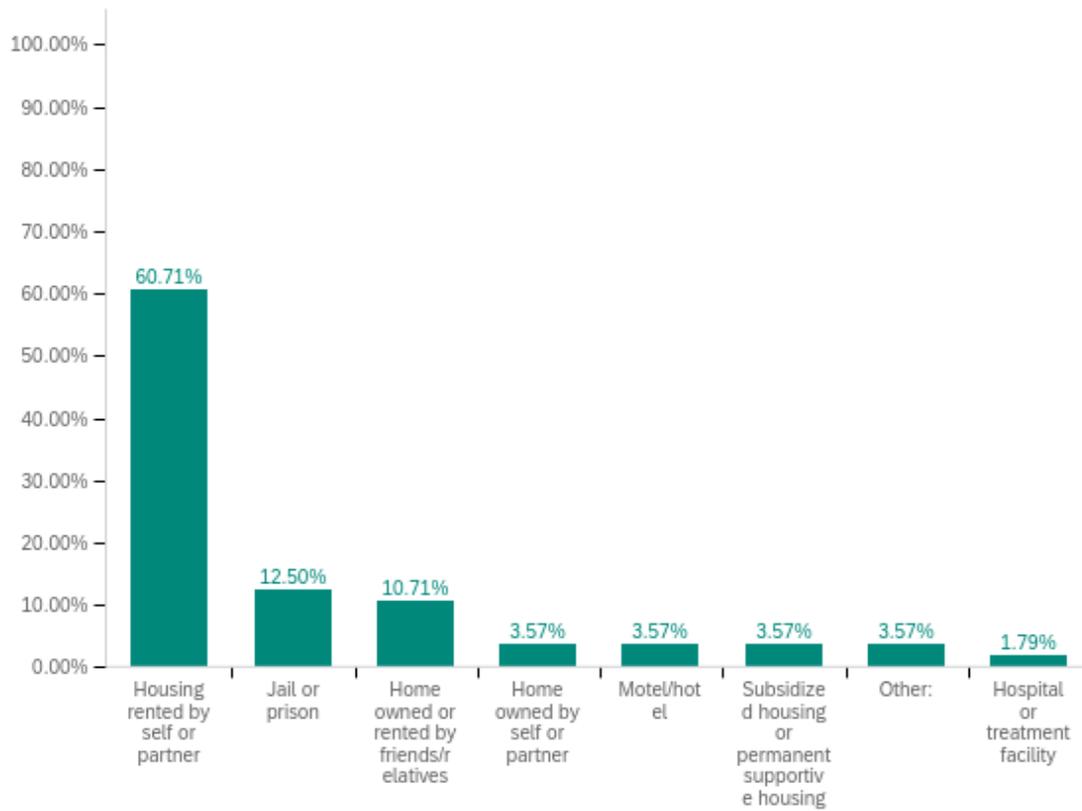
Almost eleven percent of participants (10.71%, n=6) lived in a house rented or owned by friends and/or family before they became homeless. A little more than twelve percent (12.5%, n=7) became homeless after being released from jail or prison. Two participants (3.57%, n=2) lived in a home that they or their partner owned, two participants (3.57%, n=2) lived in a hotel or motel, two participants (3.57%, n=2) resided in subsidized or supportive housing, and two participants (3.57%, n=2) lived in a place other than what was listed on the survey.

Currently, most participants are sleeping at a private facility/homeless shelter (32.14%, n=18) or at an outdoor location (28.57%, n=16). A little over ten percent (10.71%, n=6) are sleeping at a friend's house, and five percent (5.36%, n=3) are sleeping at a family member's house. One person (1.79%, n=1) reported sleeping in an abandoned building, and two (3.57%, n=2) reported sleeping in a place not normally used for sleeping. Almost eighteen percent (17.86%, n=10) of participants reported sleeping somewhere other than what was listed on the survey, indicating a wide array of sleeping locations. The majority of participants (59.26%, n=32) have experienced being asked to move sleeping arrangements. People who are homeless indicated in our listening session that being asked to move throughout the night impacts their ability to function during the day, seek the resources they need, and/or maintain a job.

Thirty-six percent (35.8%, n=19) of participants were unsheltered in Waynesville at the time of the survey. This proportion is substantially higher than that of North Carolina (27.5%, n=2558) (HUD, 2020) and may suggest a lack of street outreach to people who are homeless in Waynesville. Outreach workers are important for identifying the needs of a person experiencing homelessness and connecting them with services. Outreach workers are often the first point of contact for people who are homeless, and can help connect individuals with services who may have previously resisted them (Bond, et al., 2021; HUD, 2009). Multiple listening session participants, especially stakeholders serving in law enforcement, also mentioned challenges with "service-resistant" people who are homeless and unsheltered. Research suggests this service gap could be alleviated by efforts from street outreach workers by building trusting relationships with people who are unsheltered and connecting them to services that would be most appropriate for their individual and unique needs. Research on homelessness in rural America highlights the necessity for street outreach programs in rural regions due to the phenomenon of "hidden homelessness" as a result geographically inaccessible resources and services (HUD, 2009).

The vast majority (80%, n=44) of participants reported never being approached by a street outreach worker while in an unsheltered location. The need for street outreach workers and programs in Waynesville was repeatedly identified throughout our data collection, including in the community feedback survey and in listening sessions with law enforcement, housing providers, faith-based institutions, and behavioral health service providers.

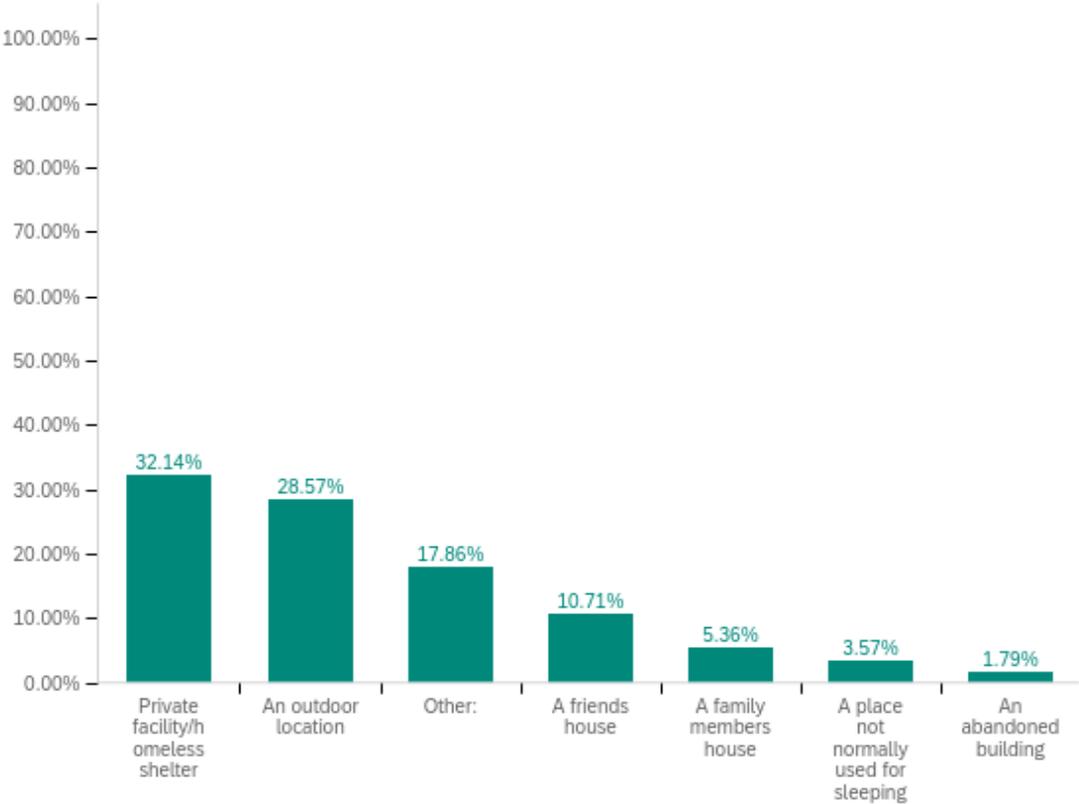
Figure X.X Living Arrangements Prior to Becoming Homeless



Living Arrangements Prior to Becoming Homeless	%	Count
Home owned by self or partner	3.57%	2
Home owned or rented by friends/relatives	10.71%	6
Jail or prison	12.50%	7
Motel/hotel	3.57%	2
Subsidized housing or permanent supportive housing	3.57%	2
Hospital or treatment facility	1.79%	1

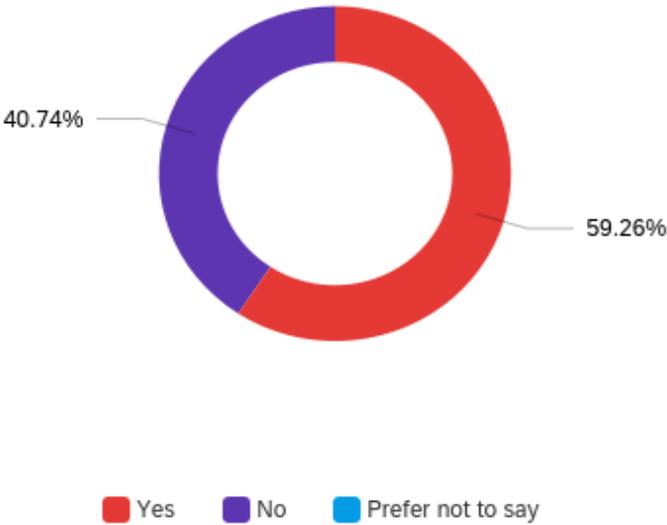
Military base/active duty	0.00%	0
Foster care	0.00%	0
Juvenile justice facility	0.00%	0
Other:	3.57%	2
Prefer not to say	0.00%	0
Housing rented by self or partner	60.71%	34
Total	100%	56

Figure X.X Where are you sleeping now: Most often



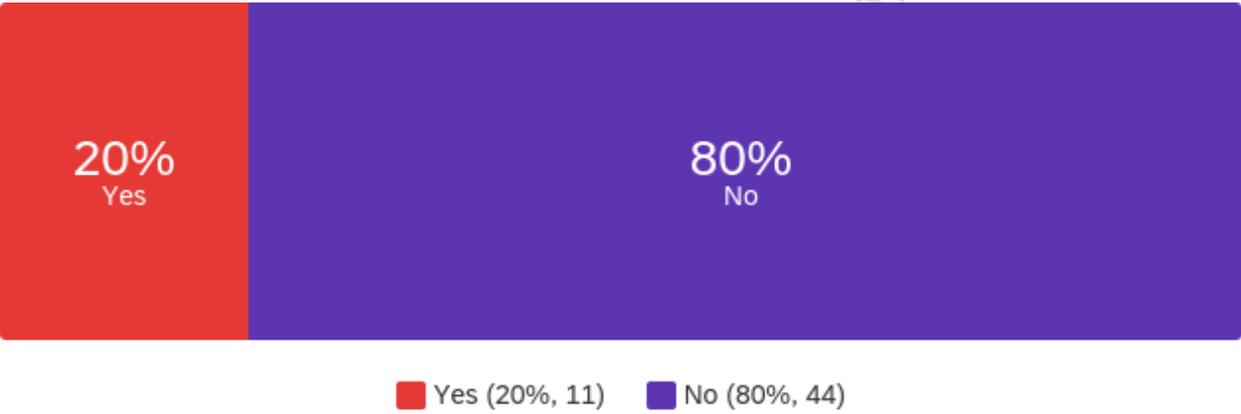
Where Are You Now Sleeping (most often)	%	Count
An outdoor location	28.57%	16
A friends house	10.71%	6
A family members house	5.36%	3
An abandoned building	1.79%	1
Public facility	0.00%	0
A place not normally used for sleeping	3.57%	2
Other:	17.86%	10
Prefer not to say	0.00%	0
Private facility/homeless shelter	32.14%	18
Total	100%	56

Figure X.X Ever Asked to Move Sleeping Arrangements



Ever Asked to Move Sleeping Arrangements	%	Count
Yes	59.26%	32
No	40.74%	22
Prefer not to say	0.00%	0
Total	100%	54

Figure X.X Ever Approached by an Outreach Worker While in an Unsheltered Location



Ever Approached by an Outreach Worker at an Unsheltered Location	%	Count
Yes	20.00%	11
No	80.00%	44
Prefer not to say	0.00%	0
Total	100%	55

**Experience with Homelessness**

At the time of this survey, about forty-eight percent (48.21%, n=27) of participants were experiencing homelessness for the first time. A little more than half (51.79%, n=29) had experienced homelessness before. One participant (1.82%, n=1) had been homeless for less than a week and four (7.27%, n=4) had been homeless for less than a month. Approximately seven percent (7.27%, n=4) have been homeless for 1-3 months,

fourteen percent (14.55%, n=8) for 4-6 months, and sixteen percent (16.36%, n=9) for 7-11 months. Half of participants (50.91%, n=28) had been homeless for a year or more. Approximately sixty-eight percent (67.86%, n=38) of participants expect to be stably housed within the next year.

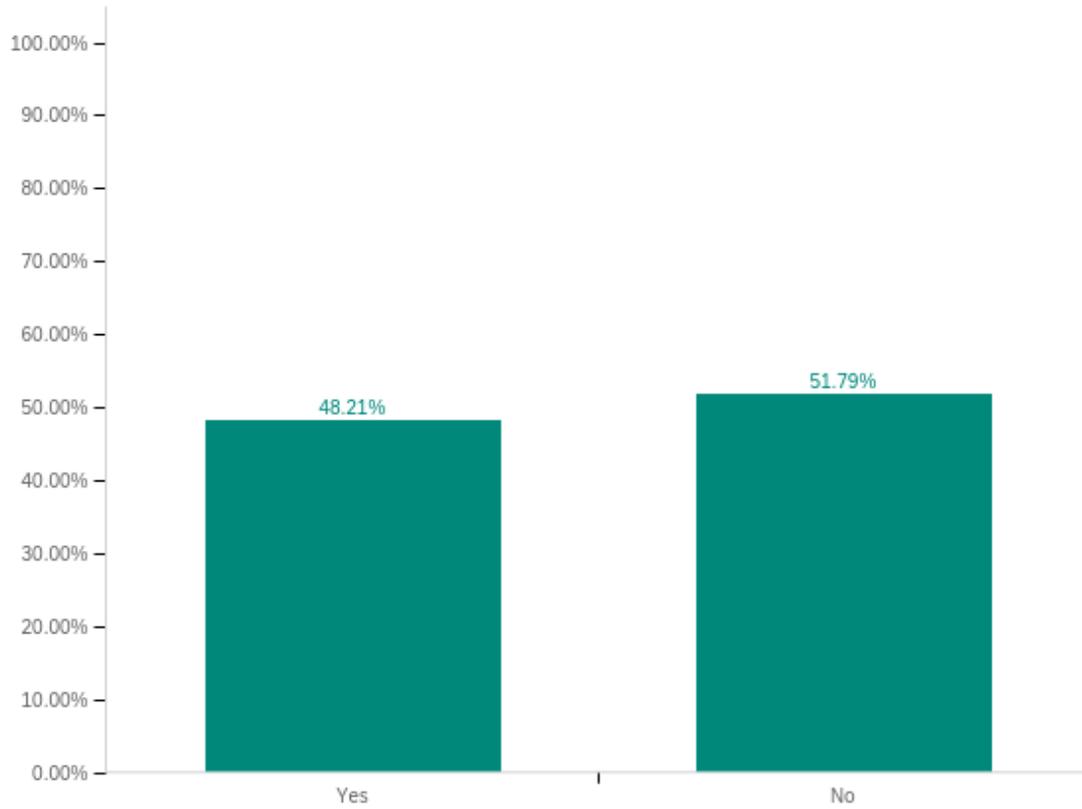
In the past year, almost fifty-nine percent (58.93%, n=33) of participants experienced homelessness once. A little over twelve percent (12.5%, n=7) were homeless twice in the past year and seven percent (7.14%, n=4) three times. Two participants (3.57%, n=2) preferred not to disclose this information. One participant (1.79%, n=1) was homeless four times in the last year, and sixteen percent (16.07%, n=9) were homeless six or more times. In the past three years, almost forty-three percent (42.86%, n=24) had experienced homelessness one time. Almost twenty percent (19.64%, n=11) experienced homelessness two times in the past three years, and eleven percent (10.71%, n=6) three times. One participant (1.79%, n=1) experienced homelessness four times in the past three years, two participants (3.57%, n=2) experienced homelessness five times, and almost eighteen percent (17.86%, n=10) experienced homelessness six or more times in the past three years.

People who have a disability and experience homelessness consistently for at least one year, or, at least on four separate occasions in the last 3 years where the combined length of time being unsheltered is at least 12 months may be considered chronically homeless.<sup>6</sup> Chronic homelessness is often caused by comorbid physical and mental health conditions, and often requires supportive interventions like permanent supportive housing and case management (Raven, et al., 2020). In North Carolina, a little more than thirteen percent (13.7%, n= 1,272) of people who are homeless are considered chronically homeless (North Carolina Coalition to End Homelessness, 2020); nationally, this percentage is higher at twenty-seven percent (27%, n=110,528) (National Alliance to End Homelessness, 2021). In this study, fifty-one percent (50.91%, n=28) of participants have been homeless for over one year, and the amount of time spent in homelessness for the past three years equaled twelve months or more for seventy-one percent (71.43%, n=40) of participants. Although the disability or status of the study participants was not documented, these rates of long-term homelessness and repeated episodes of homelessness in Waynesville may suggest higher rates of chronic homelessness in the area, as well as a need for increased outreach and supportive housing programs.

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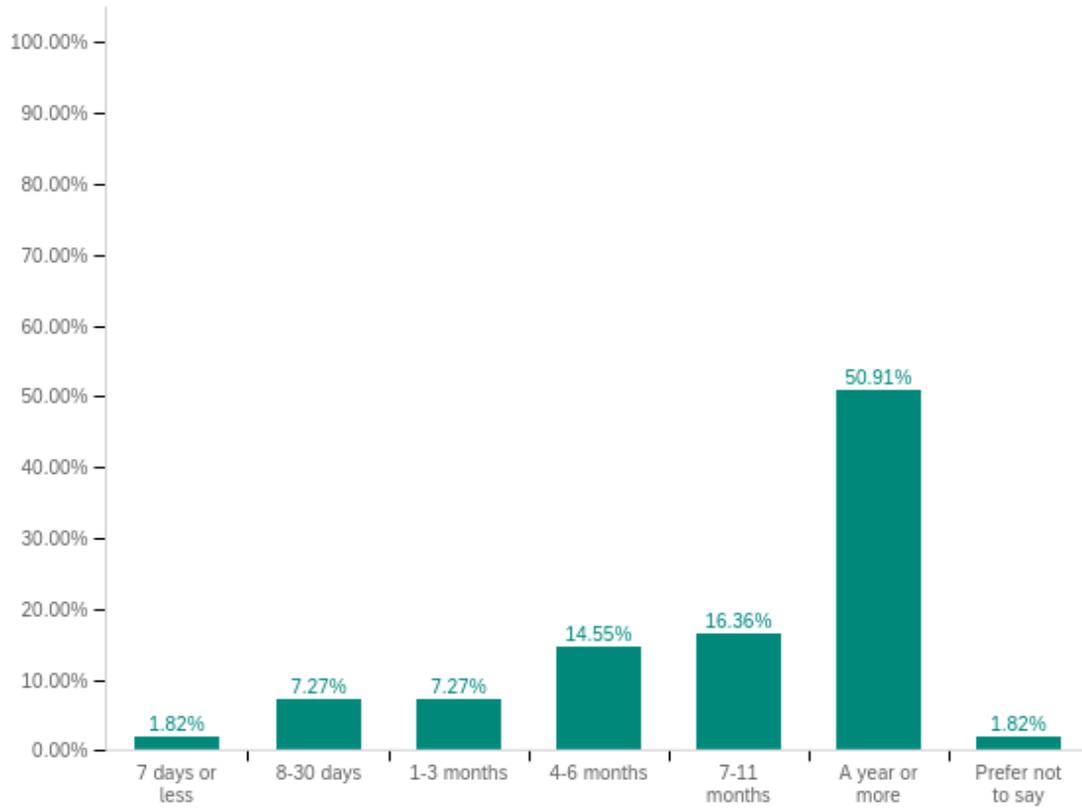
<sup>6</sup> [Definition of Chronic Homelessness](#)

Figure X.X Is This Your First Time Experiencing Homelessness



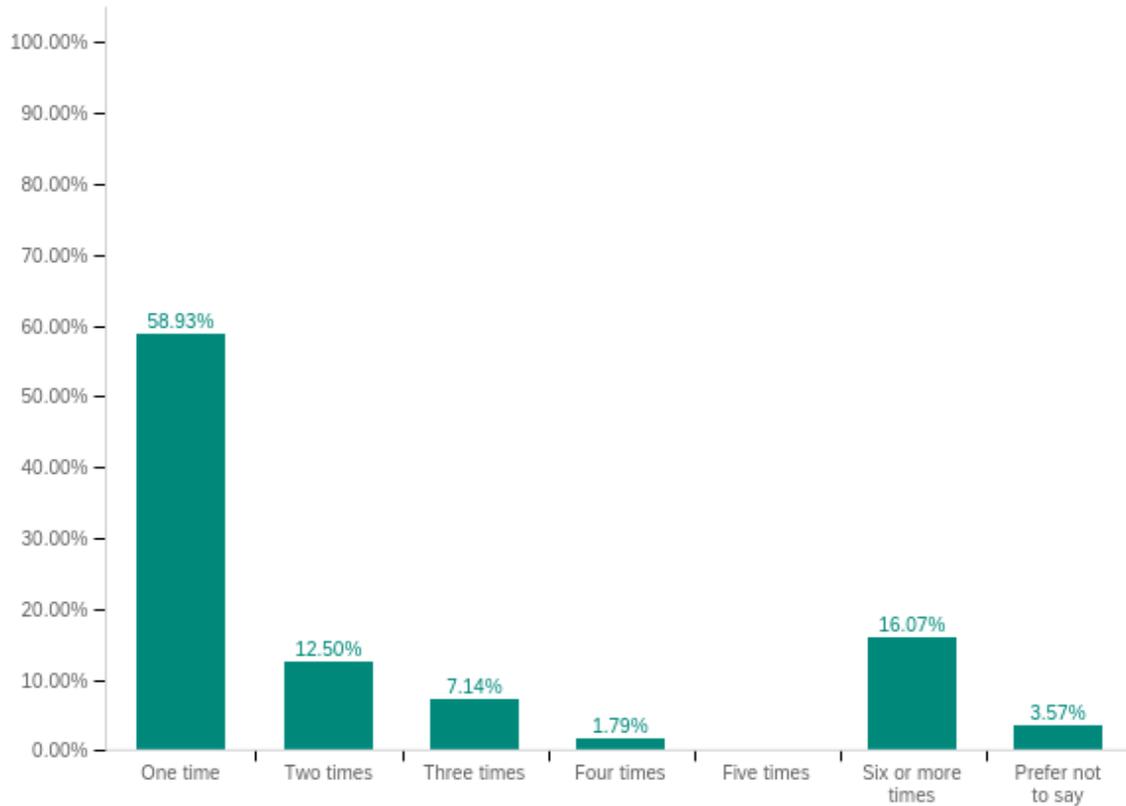
First Time Experiencing Homelessness	%	Count
Yes	48.21%	27
No	51.79%	29
Prefer not to say	0.00%	0
Total	100%	56

Figure X.X How Long Have You Been Experiencing Homelessness Currently



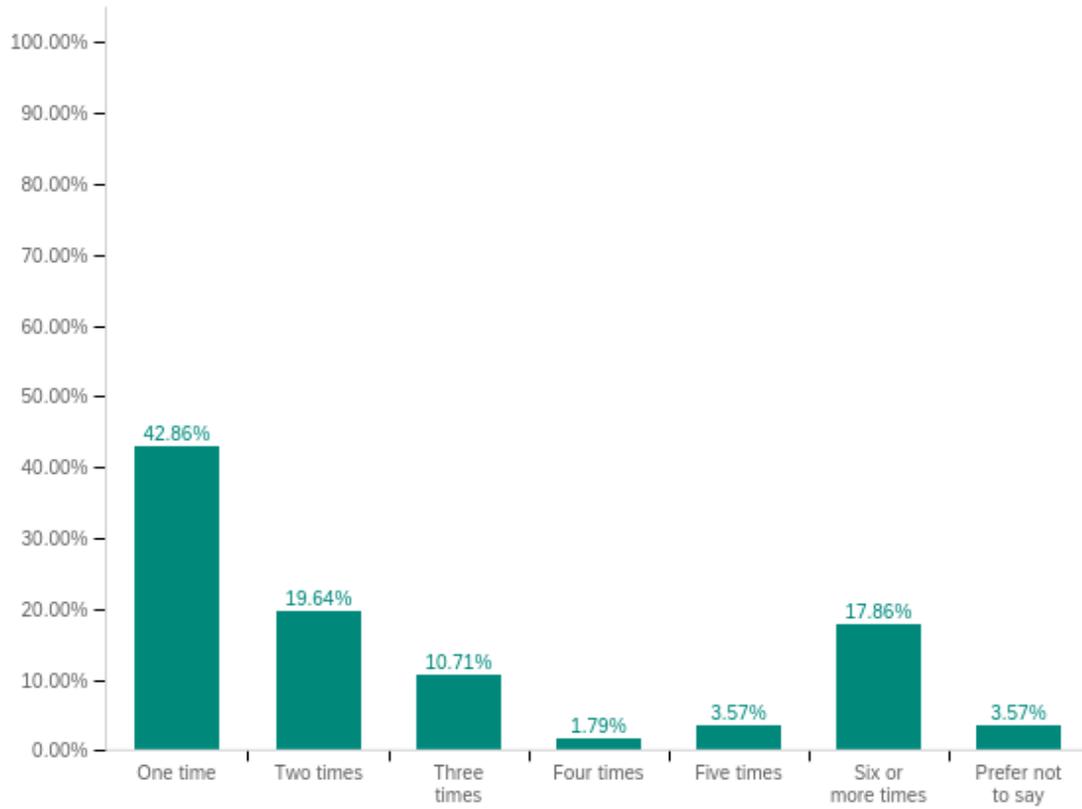
How Long Have You Been Experiencing Homelessness Currently	%	Count
7 days or less	1.82%	1
8-30 days	7.27%	4
1-3 months	7.27%	4
4-6 months	14.55%	8
7-11 months	16.36%	9
A year or more	50.91%	28
Prefer not to say	1.82%	1
Total	100%	55

Figure X.X How Many Times Have You Experienced Homelessness in the Past 12 Months



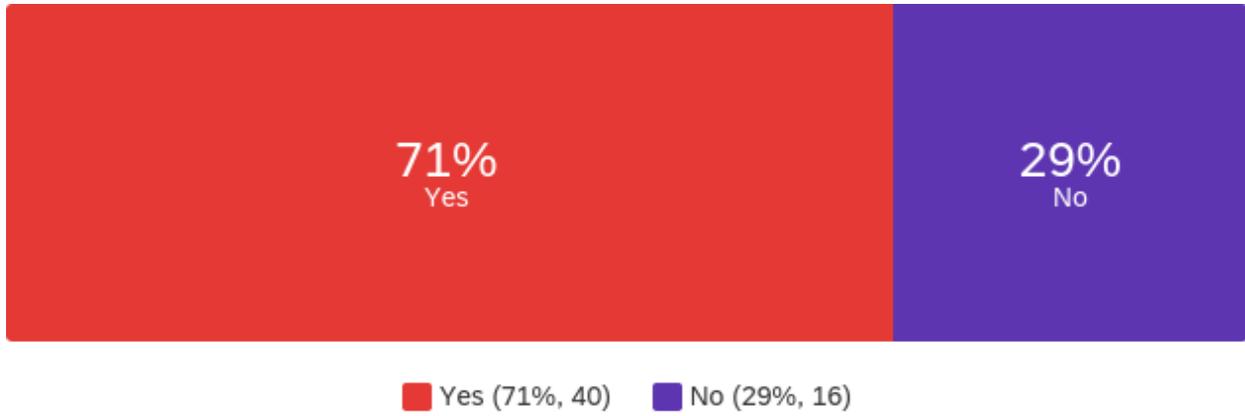
How Many Times Have You Experienced Homelessness in the Past 12 Months	%	Count
One time	58.93%	33
Two times	12.50%	7
Three times	7.14%	4
Four times	1.79%	1
Five times	0.00%	0
Six or more times	16.07%	9
Prefer not to say	3.57%	2
Total	100%	56

Figure X.X How Many Times Have You Experienced Homelessness in the Past 3 Years



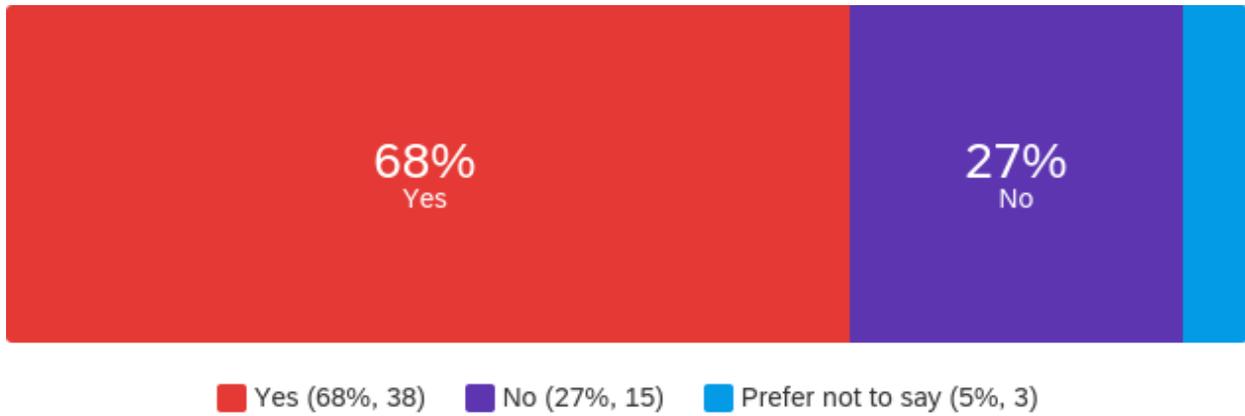
How Many Times Have You Experienced Homelessness in the Past 3 Years	%	Count
One time	42.86%	24
Two times	19.64%	11
Three times	10.71%	6
Four times	1.79%	1
Five times	3.57%	2
Six or more times	17.86%	10
Prefer not to say	3.57%	2
Total	100%	56

Figure X.X Combined Does the Amount of Time You've Been Homeless In The Past 3 Years Equal 12 Months or More



Combined Does the Amount of Time You've Been Homeless In The Past 3 Years Equal 12 Months or More	%	Count
Yes	71.43%	40
No	28.57%	16
Prefer not to answer	0.00%	0
Total	100%	56

Figure X.X Are You Expecting to Be Stably Housed Within the Next 12 Months



Are You Expecting to Be Stably Housed Within the Next 12 Months	%	Count
Yes	67.86%	38
No	26.79%	15
Prefer not to say	5.36%	3
Total	100%	56

### Main Cause of Homelessness

The most frequently cited causes for homelessness among the participants included: alcohol and/or substance use (17.82%, n=18), domestic and/or interpersonal violence (11.88%, n=12), could not afford rent (9.9%, n=10), job loss (7.92%, n=8), mental health issues (7.92%, n=8), and, incarceration (6.93%, n=7). These responses reflect the complex and varied experience of individuals who are homeless—including both personal as well as structural causes.

Over seventeen percent (17.82%, n=18) of participants identified alcohol and/or substance use as a main cause for their housing crisis. The rates of substance misuse among people who are homeless in Waynesville reflect the prevalence of substance use disorder in Haywood County. According to the Haywood County Community Health Assessment (2018), substance use in the county has increased exponentially since 2009, with alcohol being the most misused substance in the county. In the county's health assessment, thirty-eight percent of surveyed residents said their lives had been negatively impacted by substance use—either their own or someone they

knew. Haywood County has prioritized mental health and substance use the top priority issue for the entire community. (please see the following section on substance use for more county, state, and national data comparisons)

Almost twelve percent (11.88%, n=12) of participants cited domestic/interpersonal violence as a main cause of their homelessness. This rate is higher than at the state level, which indicates that nine percent (9.2%, n=860) of people who are homeless in North Carolina reported domestic/interpersonal violence experiences (HUD, 2020). Participants in the listening sessions with service providers and people who are homeless identified the prevalence of intimate partner violence in Haywood County, as well as their hope for increased services to address interpersonal violence in the community. (please see the following section on domestic and interpersonal violence for more on domestic violence in Waynesville)

Almost ten percent (9.9%, n=10) of participants cited their inability to afford rent as a main cause of their homelessness. Unaffordable housing has been repeatedly identified as a leading cause of homelessness in national research (Schwartz, 2021), as well as during almost every listening session conducted for this needs assessment. Waynesville is experiencing a high-demand on housing. In pre-pandemic 2019, almost half (48%) of Haywood County renters struggled to afford their homes, and fifteen percent (14.9%) faced evictions (North Carolina Housing Coalition, 2019). We are anticipating seeing those numbers increase when the current pandemic eviction moratorium is lifted. (please see the following housing market analysis section for an overview of Waynesville's current affordable housing crisis).

Eight percent (7.92%, n=8) of participants cited mental health issues as a main cause of their homelessness. State-level data provides that almost fourteen percent (13.8%, n=1,281) of people who are homeless suffer from severe mental illness (HUD, 2020), yet it is unknown if their mental health was the cause of their homelessness. Other sources indicate that mental health issues are experienced by a range of thirty-three to forty-six percent of the population who are homeless (Larkin, Aykanian, & Streeter, 2019).

Eight percent (7.92%, n=8) identified job loss as main cause of their homelessness. As job loss is a major risk factor for falling into poverty, it is a common cause of homelessness across the nation. Past research on homelessness and job loss explains that this phenomenon most often occurs among extremely low-income individuals that have irregular employment including temporary jobs and day labor (Metraux et al., 2018). Sporadic and temporary employment is even more common in rural areas like Waynesville (Robertson et al., 2007).

Lastly, almost seven percent (6.93%, n=7) of participant cited incarceration as a main cause of their homelessness. Research on the intersection of incarceration and homelessness indicates that involvement with the criminal justice system may lead to

homelessness, rather than homelessness leading to incarceration (Moschion & Johnson, 2019). It also demonstrates that the risk of homelessness increases over the twelve-month period after incarceration. In the listening sessions with people who are homeless, faith-based institutions, and law enforcement officers, participants mentioned their concerns with the lack of housing supports for people who are released from incarceration in Haywood County.

*DRAFT -- Plan Under Discussion, Not Approved*

Table X.X Main Cause of Homelessness (may have selected more than 1 response)

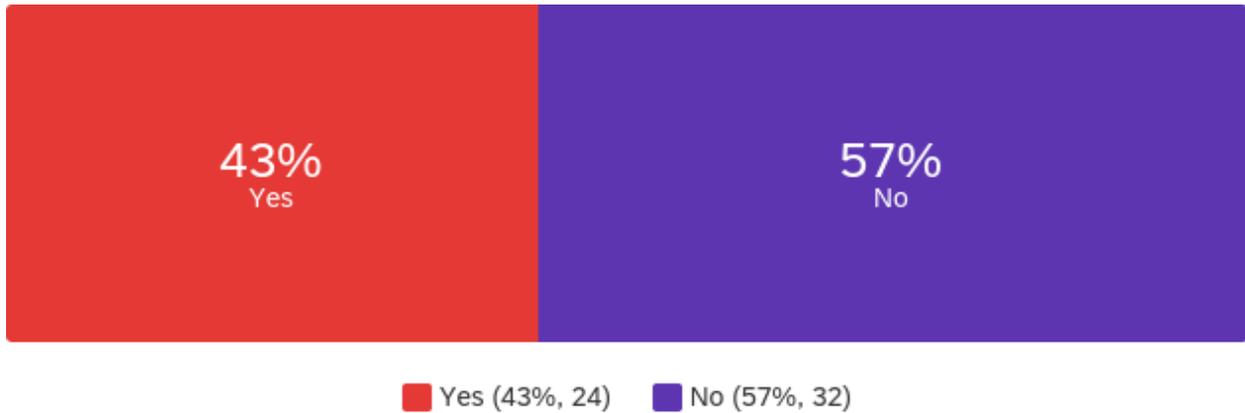
Main Cause of Homelessness Responses	%	Count
Alcohol and/or substance use	17.82%	18
Domestic and/or interpersonal violence	11.88%	12
Could not afford rent	9.90%	10
Job loss	7.92%	8
Mental health issues	7.92%	8
Incarceration	6.93%	7
Other option not listed:	6.93%	7
COVID-19	5.94%	6
Eviction	5.94%	6
Argument with family/friends/roommate	3.96%	4
Divorce/separation/break-up	3.96%	4
Illness/medical issues	3.96%	4
Death of a parent/spouse/child	2.97%	3
Family/friends couldn't afford to let me stay	1.98%	2
Family/friends wouldn't let me stay	0.99%	1
Prefer not to say	0.99%	1
Foreclosure	0.00%	0
Aging out of foster care	0.00%	0
Hospitalization/treatment	0.00%	0

## Housing and Non-Housing Supports

Fifty-seven percent (57.14%, n=32) of participants indicated they have not accessed any kind of housing support. Nearly, forty-three percent (42.86%, n=24) of participants have accessed housing support. When asked what services participants have found helpful in Waynesville, the highest rated service is food assistance. Seventy-one percent (71.43% n=40) rated food assistance services as either mostly or very helpful. Participants in the listening sessions specifically identified faith-based food pantries and Open Door as most helpful in alleviating their food insecurities. Among the least helpful services, eighteen percent (18.2%, n=10) of participants did not find either mental health services nor housing services helpful. A participant in the listening session with law enforcement mentioned the challenging outcomes associated with the loss of government funding for mental health resources and treatment in Western North Carolina. Further, in the 2018 Haywood County Community Health Assessment, it is noted that although current behavioral health services in Haywood County are effective in supporting some residents, there is a lack of services for people who need longer term mental health care and substance abuse treatment. This gap was noted in the listening sessions with housing and behavioral health service providers as well.

Sixty-two percent (61.82%, n=34) of participants have used shelter services in Waynesville. Of the thirty-five percent who have not used shelter services, most of them indicated issues with substance use and addiction are a barrier ("other" category, 27.59%, n=8). Other reasons cited for not seeking shelter include too crowded (17.24%, n=5; too many rules (17.24%, n=5), feel unsafe (10.34%, n=3), cannot bring pet (10.34%, n=3), prefer not to say (6.9%, n=2), would be separated from my partner (3.45%, n=1), bugs (3.45%, n=1), and cannot stay with my friends (3.45%, n=1). This is consistent with research from the US Department of Housing and Urban Development (2010), which cites common barriers to supportive services including structural barriers (physical location, transportation), capacity barriers (lack of resources and funding), and eligibility barriers (restrictive criteria to receive service). These struggles were underscored in the listening sessions with people who are homeless, who mentioned feeling isolated from services in the face of eligibility requirements they were unable to meet and structural barriers like congregated living shelters, which can be inaccessible for individuals suffering from trauma and other forms of mental illness.

Figure X.X Have You Ever Accessed Any Kind of Housing Support

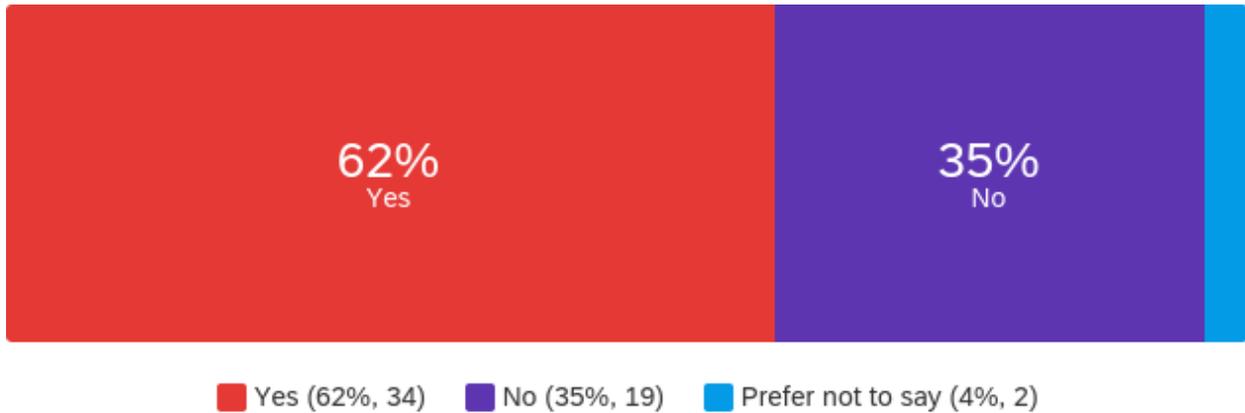


Have You Ever Accessed Any Kind of Housing Support	%	Count
Yes	42.86%	24
No	57.14%	32
Prefer not to say	0.00%	0
Total	100%	56

Table X.X How Helpful Do You Think Services in Waynesville Are

Service	I haven't accessed any services	n	Not helpful	n	Somewhat helpful	n	Mostly Helpful	n	Very helpful	n	Total
Housing Services	37.50%	21	17.86%	10	30.36%	17	7.14%	4	7.14%	4	56
Mental health services	36.36%	20	18.18%	10	10.91%	6	18.18%	10	16.36%	9	55
Physical health service	40.74%	22	14.81%	8	14.81%	8	14.81%	8	14.81%	8	54
Substance use services	50.91%	28	9.09%	5	18.18%	10	16.36%	9	5.45%	3	55
Food Assistance	10.71%	6	1.79%	1	16.07%	9	28.57%	16	42.86%	24	56
Transportation	40.74%	22	11.11%	6	20.37%	11	11.11%	6	16.67%	9	54

Figure X.X Have You Used Shelter Services in Waynesville/Haywood County



#	Answer	%	Count
1	Yes	61.82%	34
2	No	34.55%	19
3	Prefer not to say	3.64%	2
	Total	100%	55

Table X.X What Are Reasons You Have Not Accessed Shelter Services

Responses	%	Count
Other	27.59%	8
They are too crowded	17.24%	5
Too many rules	17.24%	5
Feel unsafe	10.34%	3
I cannot bring my pet	10.34%	3
Prefer not to say	6.90%	2
I would be separated from my partner	3.45%	1
Bugs	3.45%	1
I cannot stay with my friends	3.45%	1
Distance from town	0.00%	0
Germ	0.00%	0

Table X.X Have You Applied For, or Are You Receiving Any of the Following Types of Assistance in the Last Two Years (mark all that apply)

Type of Assistance	Not applicable		Have applied		Applied and was denied		Total
Child support	98.11%	52	1.89%	1	0.00%	0	53
Food Stamps/SNAP	40.00%	8	35.00%	7	25.00%	5	20
General assistance	83.33%	35	9.52%	4	7.14%	3	42
Medicaid	44.12%	15	20.59%	7	35.29%	12	34
Social Security Disability Income	69.57%	32	10.87%	5	19.57%	9	46
Social Security Income	80.85%	38	10.64%	5	8.51%	4	47
TANF (cash assistance)	95.92%	47	2.04%	1	2.04%	1	49
Unemployment assistance	86.27%	44	1.96%	1	11.76%	6	51
VA benefits/compensation	100.00%	50	0.00%	0	0.00%	0	50
Worker's compensation	100.00%	53	0.00%	0	0.00%	0	53

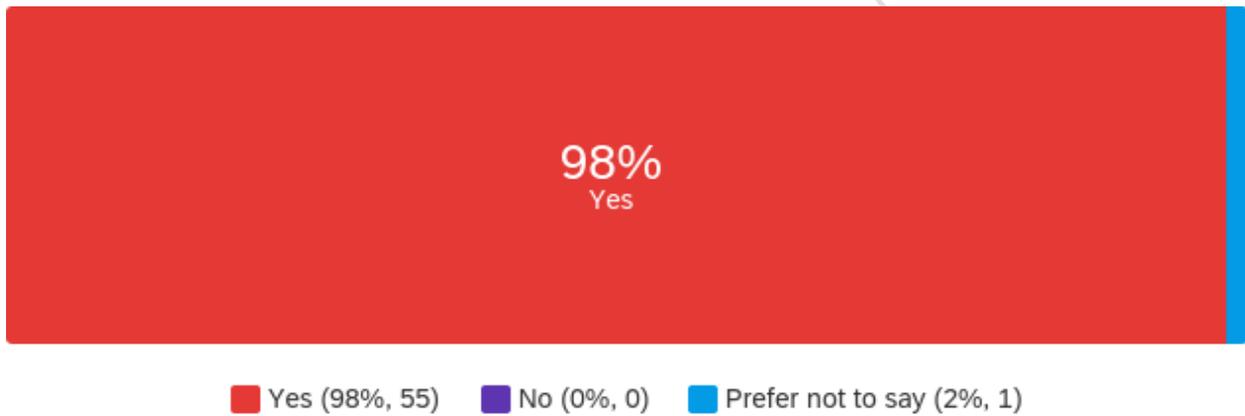
Table X.X What, if any, Non-Housing Supports Do You Access (mark all that apply)

Non-Housing Supports	%	Count
Food pantry/food assistance	23.45%	34
Bus or transportation passes	8.97%	13
Syringe exchange	10.34%	15
Walk-in clinics for physical health, mental health, and/or substance use	5.52%	8
Mobile crisis	4.14%	6
Emergency department and/or urgent care services	10.34%	15
Other:	4.83%	7
Prefer not to say	0.69%	1
Case management	17.93%	26
Employment services	5.52%	8
Meal programs	8.28%	12

## Interest in Housing & Affordable Monthly Housing Cost

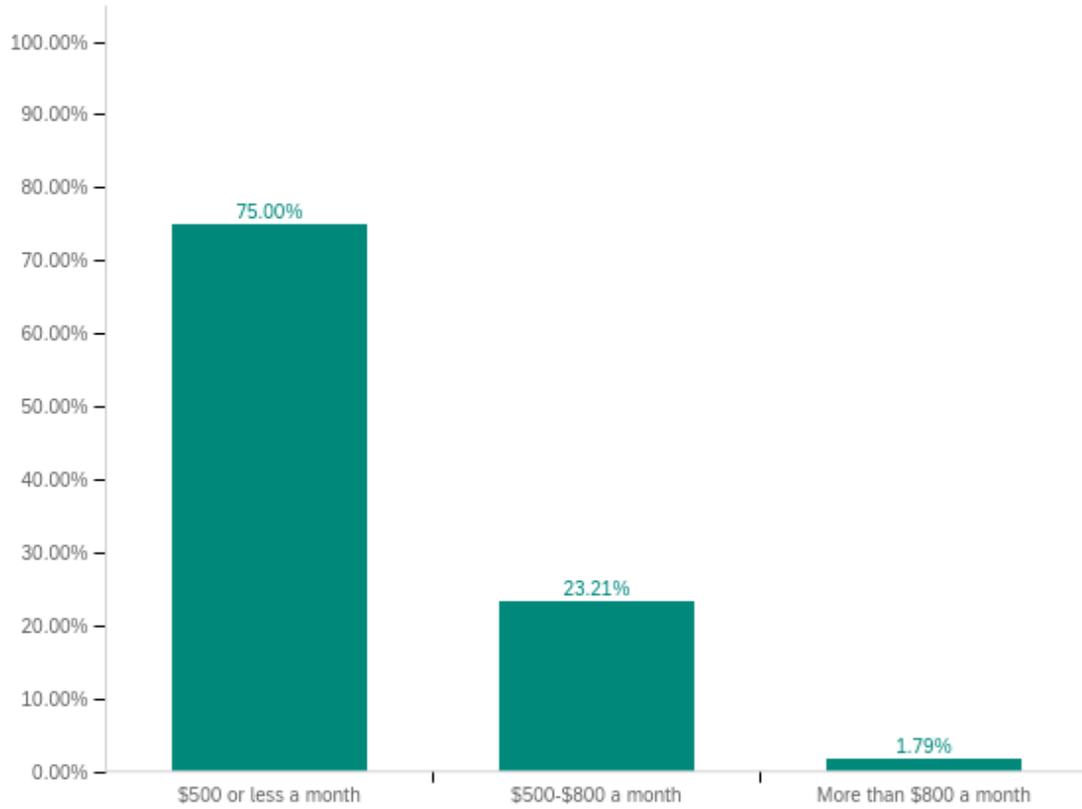
Almost 100 percent (98%, n=55) of participants indicated they would move into safe, affordable housing if it were available. This response challenges the claim that individuals who are homeless chose this situation and prefer an unhoused living arrangement. In assessing access to housing, 75 percent (75%, n=42) indicate that could afford \$500 or less in rent/housing cost per month, 23 percent (23.21%, n=13) estimate they could afford \$500 to \$800 in rent/housing cost per month, and 1 participant could afford more than \$800 in rent/housing cost per month. According to the U.S. Census Bureau, the 2019 median monthly rent in Waynesville was \$810 and 2019 median monthly mortgage was \$1,152 (2019). Please see additional discussion in the housing market analysis.

Figure X.X If Safe, Affordable Housing Were Available Would You Move Into It



If Safe, Affordable Housing Were Available Would You Move Into It	%	Count
Yes	98.21%	55
No	0.00%	0
Prefer not to say	1.79%	1
Total	100%	56

Figure X.X How Much Do You Think You Could Pay Towards Rent or Housing Costs Each Month



How Much Do You Think You Could Pay Towards Rent or Housing Costs Each Month	%	Count
\$500 or less a month	75.00%	42
\$500-\$800 a month	23.21%	13
More than \$800 a month	1.79%	1
Total	100%	56

## Health Status, Access & Services

People who are homeless have higher rates of illness and mortality than the general U.S. population (National Health Care for the Homeless Council, 2019), and are more than twice as likely to have a disability (National Alliance to End Homelessness, 2020). Nearly 77 percent (76.79%, n=43) of study participants had a current physical health (16.07%, n=9), mental health (21.43%, n=12), or a combination of physical and mental health conditions (39.29%, n=22). Although 57 percent (57.14%, n=32) of participants indicated an ability to access physical, mental, and/or substance use health services, nearly 30 percent (28.57%, n=16) shared they sometimes are able to access those services but not always when they are needed. Fourteen (14.29%, n=8) percent of participants communicated that they are not able to access these health services. Inaccessible healthcare services for people who are homeless due to structural barriers like transportation, physical location, or lack of funding are quite common throughout rural America, as well as a hesitancy to seek professional healthcare (Robertson, 2007; Whitley, 2013).

Further, the data indicate that just because an individual has access, it does not mean they are receiving health care services. Most notably, ninety-one percent (91.07%, n=51) of individuals have not accessed dental care in the last year. This finding is consistent with a 2019 study of people experiencing rural homelessness, which reported that dental health was the most common physical health concern among their survey sample (Easterday et al., 2019). Inadequate oral health may contribute to serious quality of life and costly health issues, including, endocarditis, cardiovascular disease, pregnancy and prenatal complications, and pneumonia (Mayo Clinic, 2019). Further, in an aesthetically-driven society, dental appearance may impact one's ability to compete for jobs—particularly, in a local economy reliant on public-facing service sector employment (Halasa-Rappel, Tschampel, Foley, Dellapanna, & Shepard, 2019).

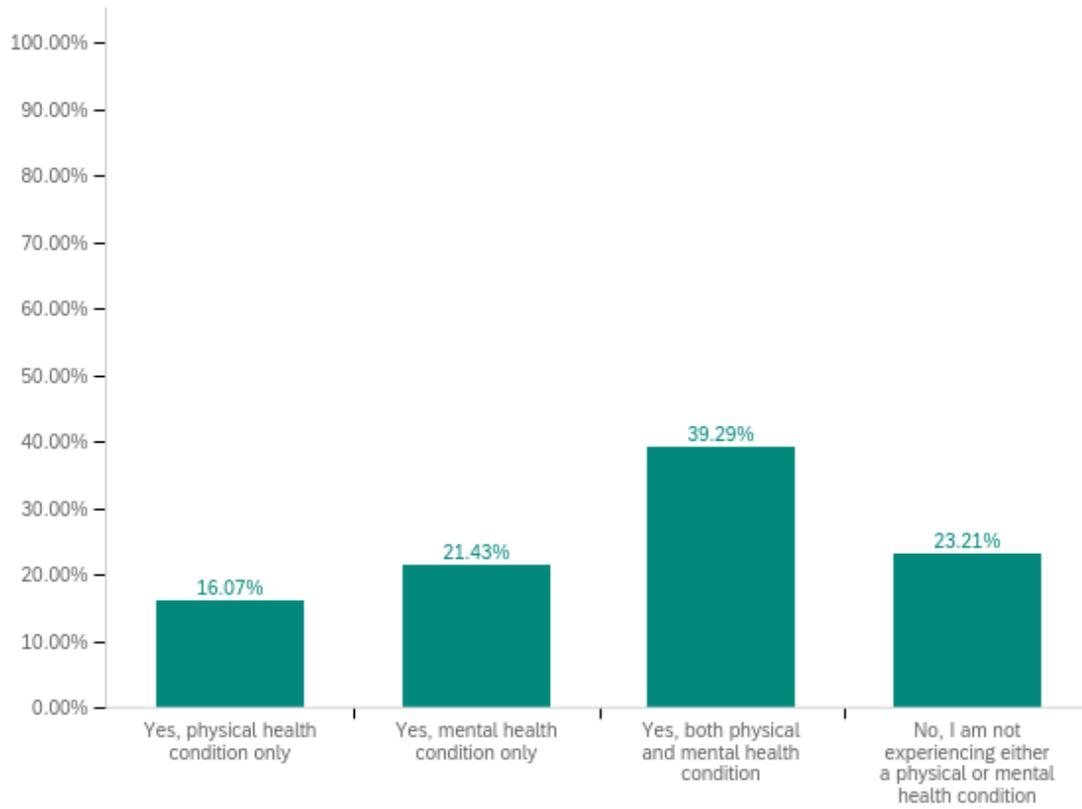
The majority of respondents (55.36%, n=31) have also not accessed behavioral health services in the last 12 months. It was noted in the listening sessions with service providers that behavioral healthcare opportunities for people who are homeless in Waynesville are limited. Participants explained that behavioral health services are challenged by resource capacity, which makes it difficult for people who are homeless to receive timely and sustainable mental healthcare when they need it. About 30 percent (n=17) of participants have accessed behavioral health services 1-4 times in the last 12 months. Approximately fourteen percent (14.29%, n=8) of individuals accessed services more than 4 times in the last 12 months. Of those individuals receiving behavioral health services, thirty percent (30.36%, n=17) accessed outpatient services and five percent (5.36%, n=3) were admitted for inpatient services.

Approximately thirty-six percent (35.71%, n=20) of participants have not accessed a physical healthcare provider in the last 12 months. Twenty-four (23.93%, n=26) percent of participants accessed physical health services 1-4 times in the last 12 months. In 2020, Blue Ridge Community Health Services reported providing physical healthcare to twenty-eight (28) people who are homeless. Eighteen percent (17.86%, n=10) of participants accessed physical health care more than 4 times in the last 12 months. Blue Ridge Community Health Services also reported fifty-three (53) return visits from previous patients. Overall, the rates of physical healthcare access among people who are homeless in Waynesville are lower than national rates of approximately 53% (Easterday et al., 2019).

In terms of accessing emergency health care, thirty-seven percent (36.36%, n=20) of participants have not been to the emergency department at all. Fifty-seven percent (56.37%, n=31) of participants have visited the emergency department 1-3 times in the last 12 months, increasing care costs for both themselves and the emergency departments. Seven percent (7.27%, n=4) have used emergency health care more than 4 times in the last 12 months. These rates are typical; people who are homeless often use emergency departments due to a lack of primary care or community clinic availability. Nationally, there are an average of 203 emergency department visits per 100 people who are homeless (USDHHS, 2020). This suggests a “revolving door” in which people who are homeless have higher rates of returns to emergency departments because their complex health needs are most likely not met by emergency room treatment (Kerman et al., 2020).

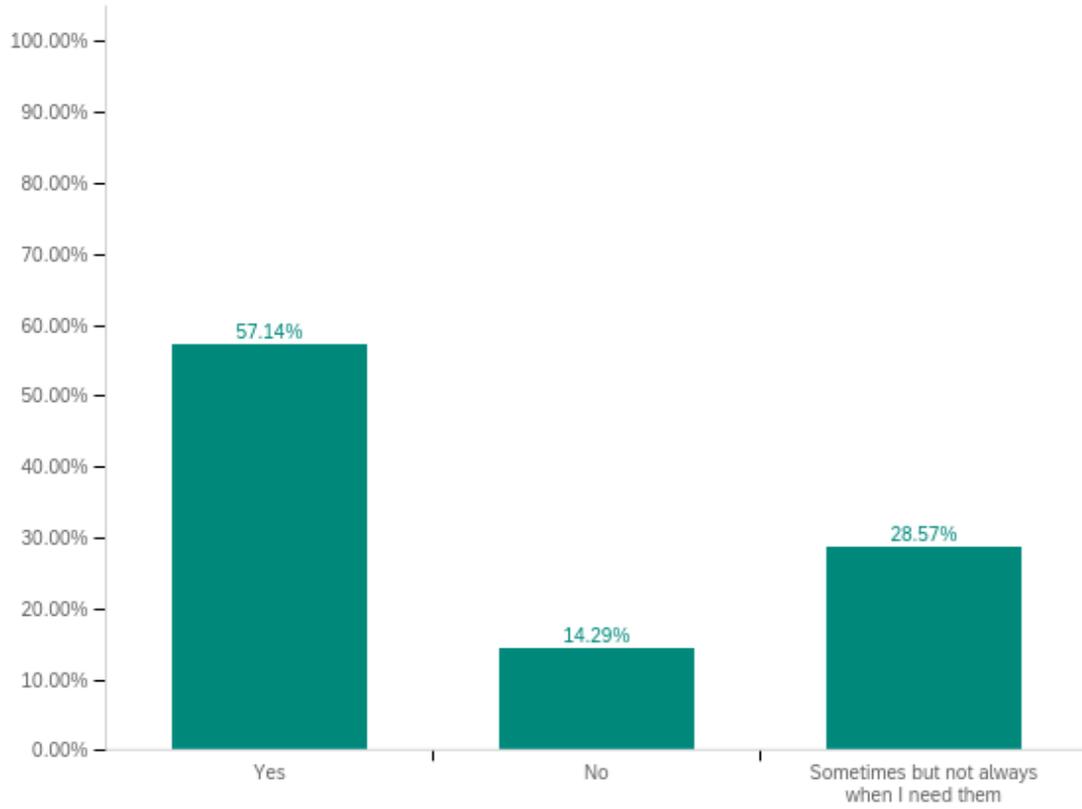
When individuals do access health care services, they are most likely to visit the emergency room (31.65, n=25) or urgent care (20.25%, n=16). Nineteen percent of participants typically go to a private doctor (18.99%, n=15). Eight percent (7.59%, n=6) typically go to a community clinic. Although six percent (6.33%, n=5) of participants indicated an “other” location, most of those identified Blue Ridge Health, which would fall under the category of a community clinic. Three percent (2.53%, n=2) typically go to a Veterans Administration (VA) hospital or clinic. One percent (1.27%, n=1) of participants preferred not to share where they typically seek health care services. These rates are consistent with research on the subject; people who are homeless often avoid professional doctors due to perceived discrimination and an inaccessible healthcare system (Kerman et al., 2020). For this reason, people who are homeless usually prefer community-based clinics and other not for profit community health services (Whitley, 2013).

Figure X.X Experiencing Any Current Physical or Mental Health Issue



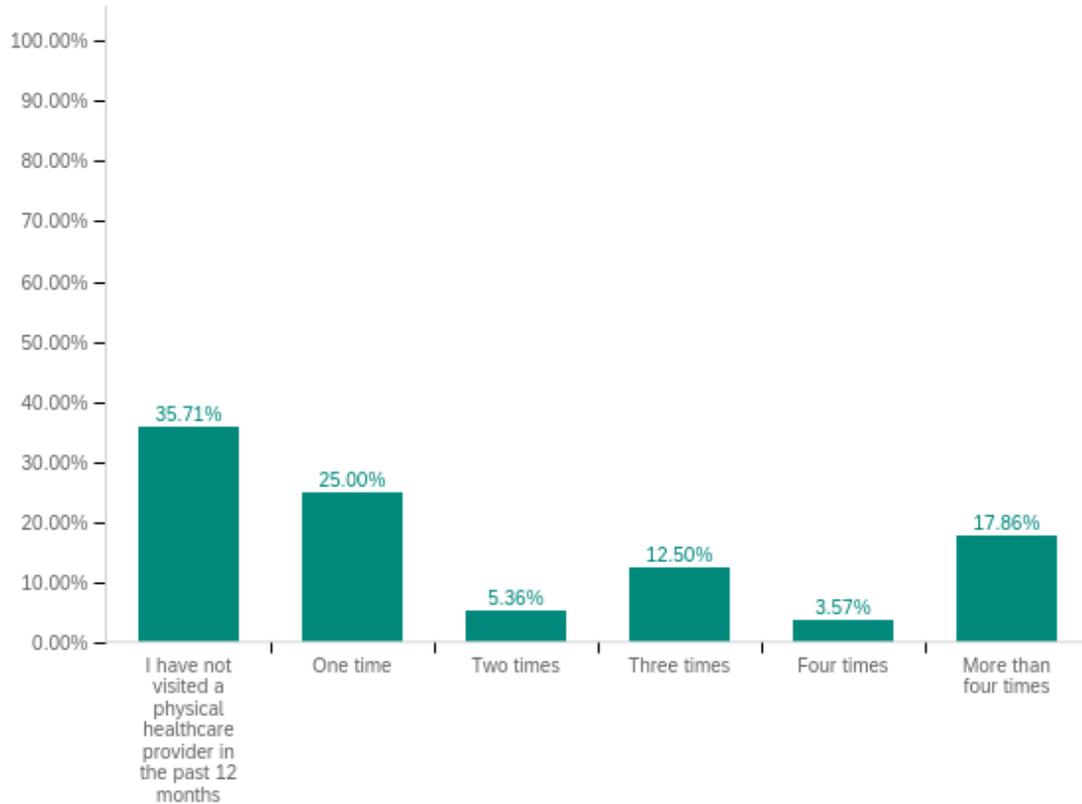
Experiencing Any Current Physical or Mental Health Issue	%	Count
Yes, physical health condition only	16.07%	9
Yes, mental health condition only	21.43%	12
Yes, both physical and mental health condition	39.29%	22
No, I am not experiencing either a physical or mental health condition	23.21%	13
Prefer not to say	0.00%	0
Total	100%	56

Figure X.X Are You Able to Access Physical, Mental, and or Substance Use Health Services



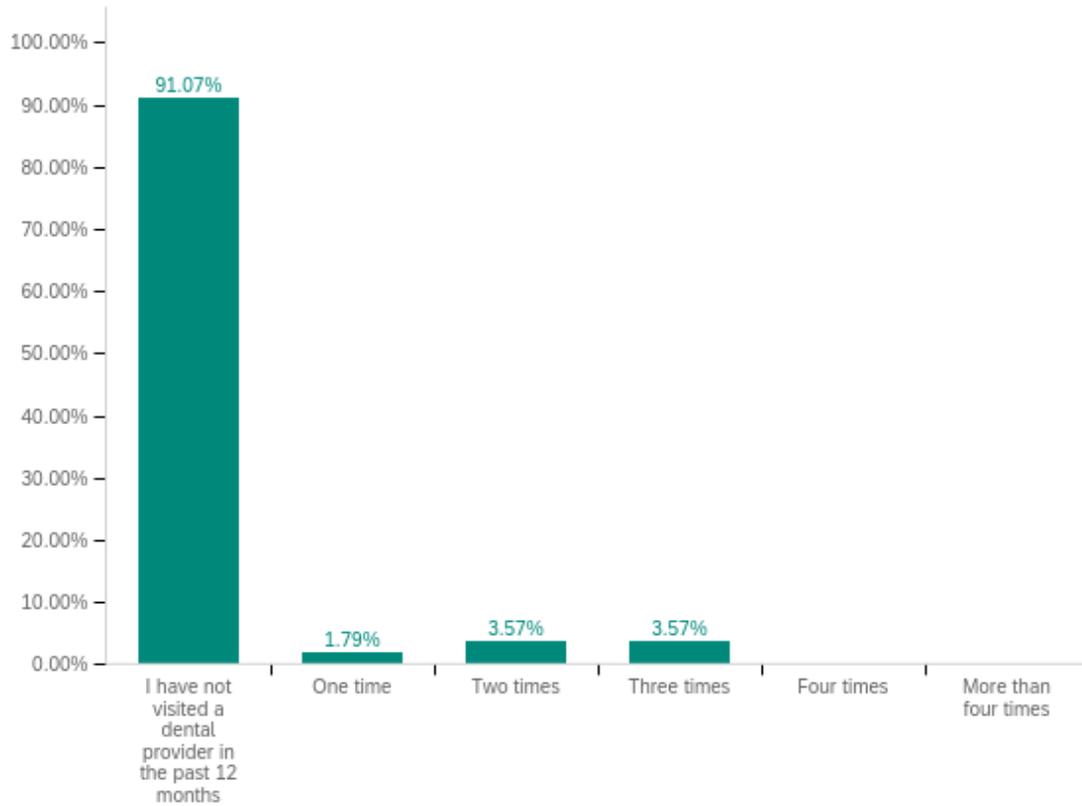
Able to Access Physical, Mental, and or Substance Use Health Services	%	Count
Yes	57.14%	32
No	14.29%	8
Prefer not to say	0.00%	0
Sometimes but not always when I need them	28.57%	16
Total	100%	56

Figure X.X In The Past 12 Months, How Many Times Have You Seen A Physical Health Provider



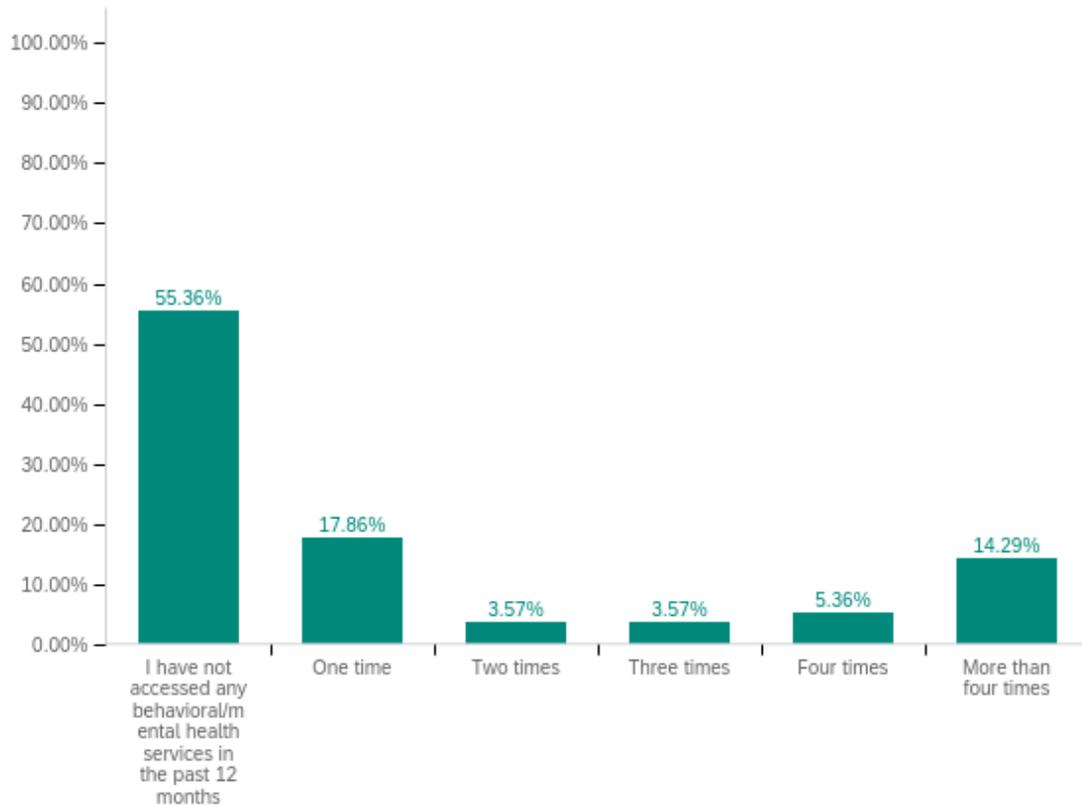
In The Past 12 Months, How Many Times Have You Seen A Physical Health Provider	%	Count
I have not visited a physical healthcare provider in the past 12 months	35.71%	20
One time	25.00%	14
Two times	5.36%	3
Three times	12.50%	7
Four times	3.57%	2
More than four times	17.86%	10
Prefer not to say	0.00%	0
Total	100%	56

Figure X.X In The Past 12 Months, How Many Times Have You Received Dental Care



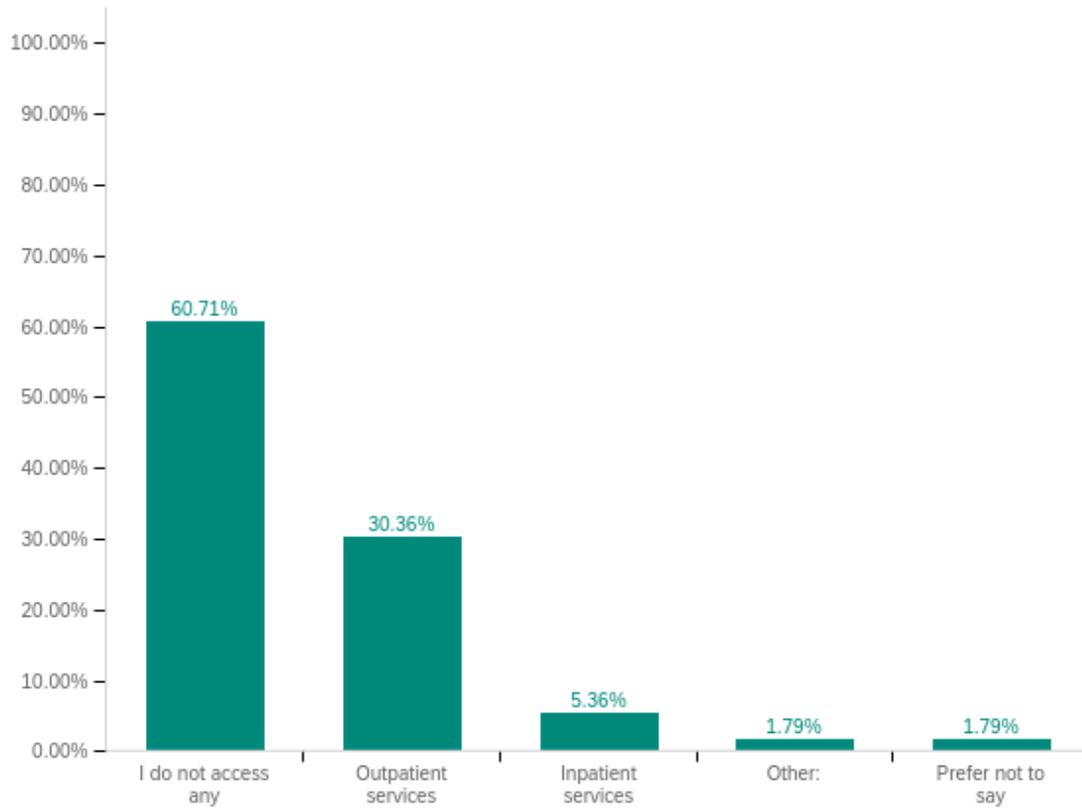
In The Past 12 Months, How Many Times Have You Received Dental Care	%	Count
I have not visited a dental provider in the past 12 months	91.07%	51
One time	1.79%	1
Two times	3.57%	2
Three times	3.57%	2
Four times	0.00%	0
More than four times	0.00%	0
Prefer not to say	0.00%	0
Total	100%	56

Figure X.X In The Past 12 Months, How Many Times Have You Accessed Behavioral/Mental Health Services



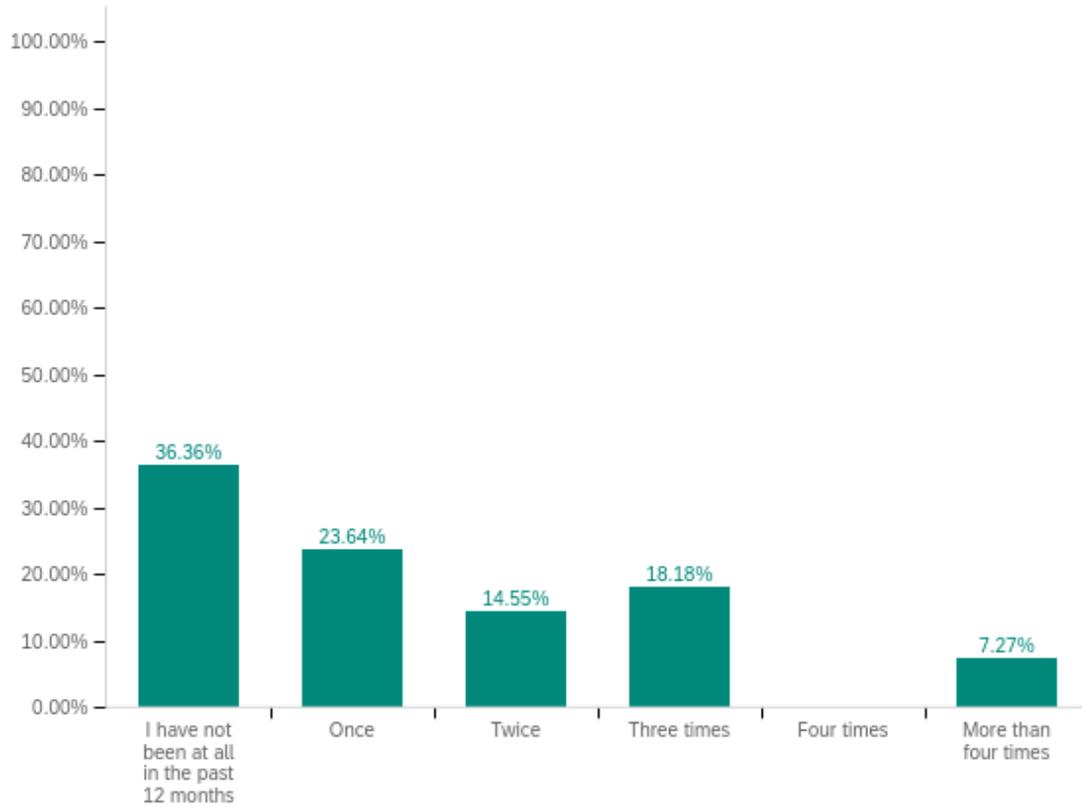
In The Past 12 Months, How Many Times Have You Accessed Behavioral/Mental Health Services	%	Count
I have not accessed any behavioral/mental health services in the past 12 months	55.36%	31
One time	17.86%	10
Two times	3.57%	2
Three times	3.57%	2
Four times	5.36%	3
More than four times	14.29%	8
Prefer not to say	0.00%	0
Total	100%	56

Figure X.X What Behavioral Health Services Do You Access



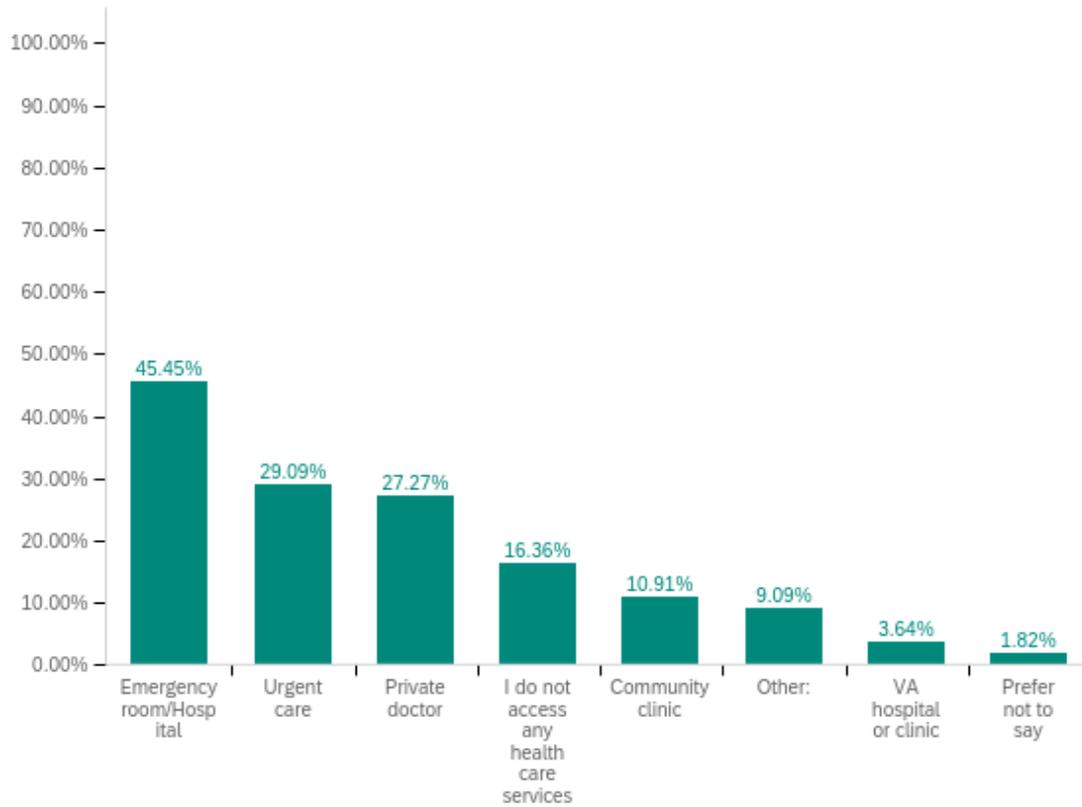
What Behavioral Health Services Do You Access	%	Count
I do not access any	60.71%	34
Outpatient services	30.36%	17
Inpatient services	5.36%	3
Other:	1.79%	1
Prefer not to say	1.79%	1
Total	100%	56

Figure X.X How Many Times Have Your Visited the Emergency Department in the Last 12 Months



How Many Times Have Your Visited the Emergency Department in the Last 12 Months	%	Count
I have not been at all in the past 12 months	36.36%	20
Once	23.64%	13
Twice	14.55%	8
Three times	18.18%	10
Four times	0.00%	0
More than four times	7.27%	4
Prefer not to say	0.00%	0
Total	100%	55

Figure X.X Where Do You Typically Go For Health Services (mark all that apply)



Typically Go for Health Services	%	Count
I do not access any health care services	11.39%	9
Community clinic	7.59%	6
Emergency room/Hospital	31.65%	25
Urgent care	20.25%	16
Private doctor	18.99%	15
Other:	6.33%	5
Prefer not to say	1.27%	1
VA hospital or clinic	2.53%	2

## Substance Use

National estimates of illicit substance use suggest that twenty-six percent of people who are homeless use harmful chemical substances (National Coalition For The Homeless, 2017). Approximately ten percent (10.5%, n=973) of people who are homeless in North Carolina report chronic substance abuse (HUD, 2020). Comparatively in 2017, nearly eleven percent of North Carolina's general population reported illicit substance use (USDHHS, 2017). According to the 2018 Haywood County Community Health Assessment, substance use in the county has increased since 2009, with alcohol being the most misused substance in the county. Further, over one-third (38%) of Haywood County's population reported being negatively affected by substance abuse either in their own lives or that of their families, suggesting that substance use is a prevalent health issue throughout the county.

Findings in this study generally reflected those of people who are homeless in North Carolina. Participants in Waynesville most frequently use nicotine (24.79%, n=29). Fourteen percent (13.68%, n=16) of the participants use methamphetamine, compared to less than one percent of North Carolina's general population (USDHHS, 2017). Twelve percent (11.97%, n=14) use alcohol and/or marijuana, while approximately twenty-six percent of the state's general population reports doing so. National estimates of alcohol use among people who are homeless report a use rate of thirty-eight percent (National Coalition For The Homeless, 2017). The rate of use for heroin and opioids is eight percent (7.69%, n=9) among study participants, compared to less than one percent of North Carolina's general population. Three percent (2.56%, n=3) of study participants use benzodiazepines and/or barbiturates. Less than two percent (1.71%, n=2) of participants use hallucinogens and less than one percent (.85%, n=1) use cocaine/crack and/or herbal stimulants. Of those participants who use substances, a combination of methamphetamine, alcohol, marijuana, heroin, and opioids was often indicated. Fourteen percent (13.68%, n=16) of participants do not use any substances.

Type of Substance	%	Count
Nicotine	24.79%	29
I do not use any substances	13.68%	16
Methamphetamine	13.68%	16
Alcohol	11.97%	14
Marijuana	11.97%	14
Heroin	7.69%	9
Opioids	7.69%	9
Benzodiazepines/Barbiturates	2.56%	3
Other: Using before incarceration (2); Zyprexa (1)	2.56%	3
Hallucinogens	1.71%	2
Cocaine (crack)	0.85%	1
Herbal substances (kratom, kava)	0.85%	1
Aerosols/Inhalants	0.00%	0
Ecstasy	0.00%	0
Steroids	0.00%	0
Prefer not to say	0.00%	0

### Justice System Involvement

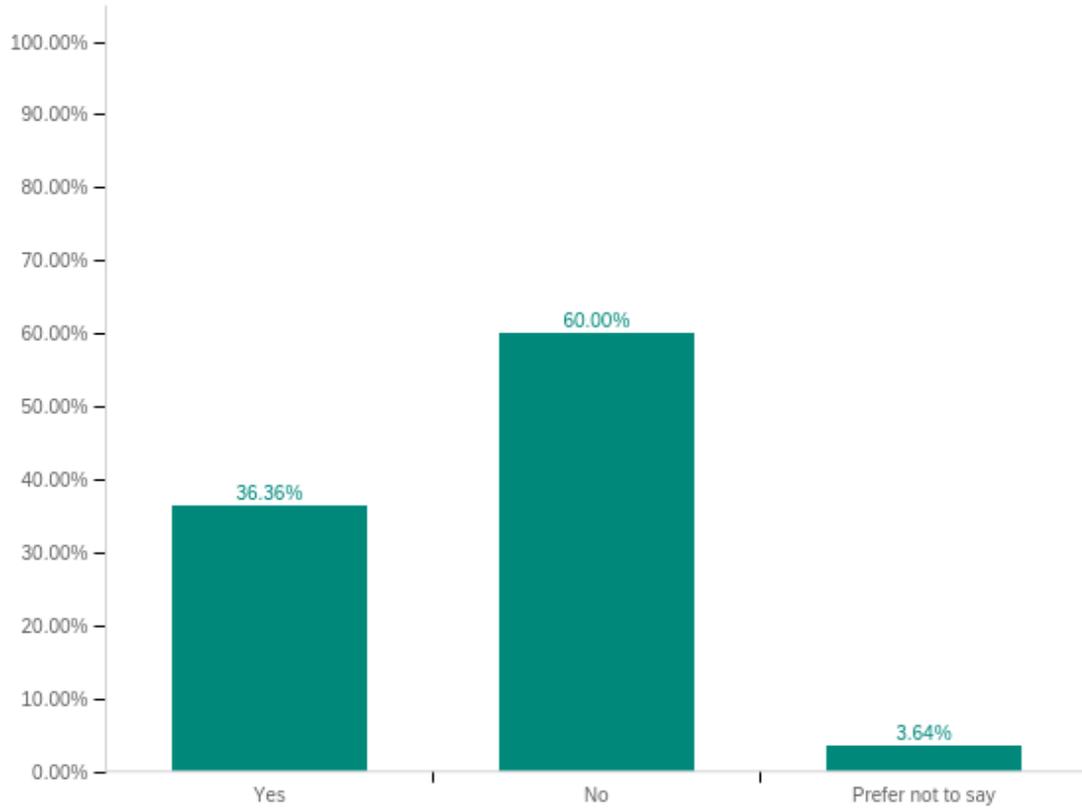
People who are homeless are particularly vulnerable to violence and being victims of crime. Thirty-seven percent (36.36%, n=20) of participants have experienced being a victim of a crime while they have been unsheltered and/or experiencing homelessness. This percent is higher than national rates—nationally, fifteen to twenty-one percent of people who are homeless report being victims of a crime. These numbers increase as the length of time experiencing homelessness increase (Meinbresse et al., 2014). Further, females and people with mental health concerns are more at risk for victimization (Nilsson et al., 2020). The higher rates of victimization among people who are homeless in Waynesville could be due to participants' extended length of time experiencing homelessness, as well as the majority presenting as female.

Fifty-six percent (55.56%, n=30) of participants had prior involvement with the justice system before becoming homeless. Forty-five percent (44.44%, n=24) of participants indicated no involvement with the justice system before they became unhoused.

Forty-eight percent (48.21%, n=27) of participants reported that they had not been incarcerated (jail or prison) any time during the last 12 months. Twenty percent (19.64%, n=11) of participants reported being incarcerated one time during the last 12 months. Twenty-three percent (23.21% n=13) of participants reported being incarcerated two-four times during the last 12 months. Almost six percent (5.36%, n=3) of participants reported being incarcerated five-seven times over the last 12 months. Nearly four percent (3.57%, n=2) of participants preferred not to respond to this question.

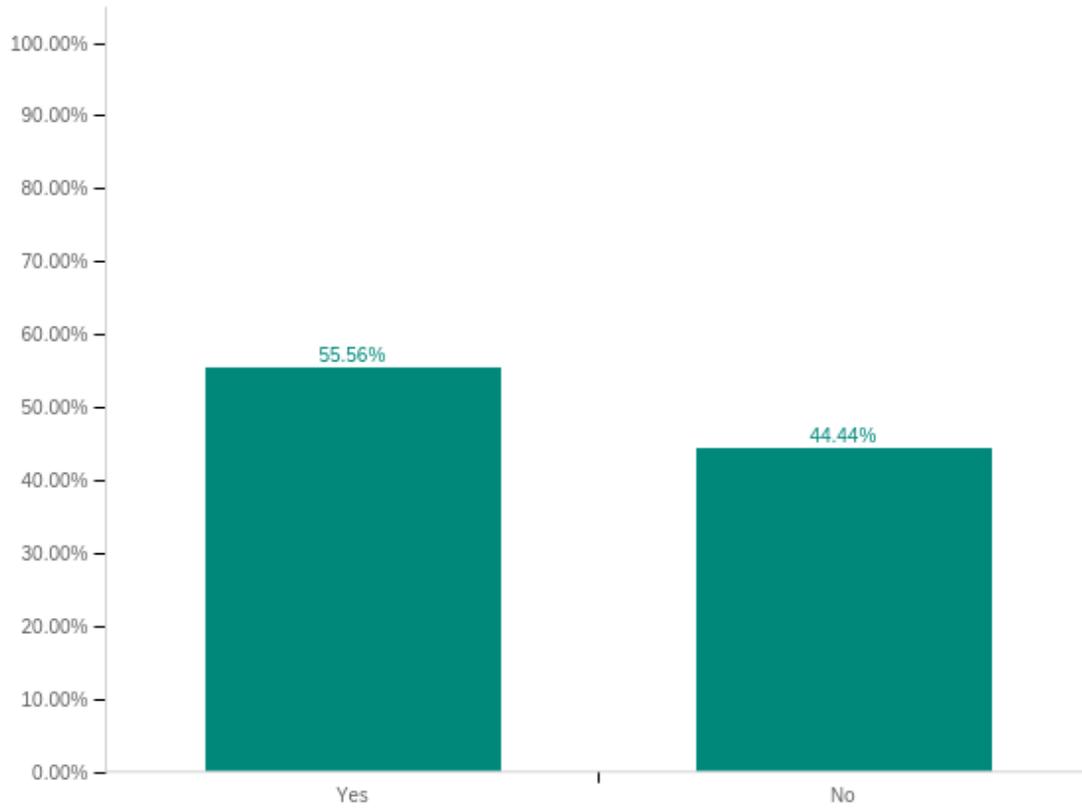
Overall, forty-five percent of participants reported no justice system involvement over the last 12 months—while forty-eight percent (48.21%, n= 27) experienced anywhere from one to more than seven episodes of incarceration. This data indicates two distinct sub-populations of people who are homeless in our community—i.e. those who are encountering our justice system and requiring its resources and those who are not. To assess the level of potential impact of criminal involvement and behavior, participants who were incarcerated in the last 12 months were asked to indicate the highest type of crime for which they were convicted. Sixty-two percent (62.07%, n=18) of participants who had been incarcerated in the last 12 months indicated they were convicted of a felony. Twenty-eight (27.59%, n=8) of participants who had been incarcerated in the last 12 months indicated they were convicted of a misdemeanor.

Figure X.X Have You Been a Victim of a Crime While You Have Been Unsheltered/Experiencing Homelessness



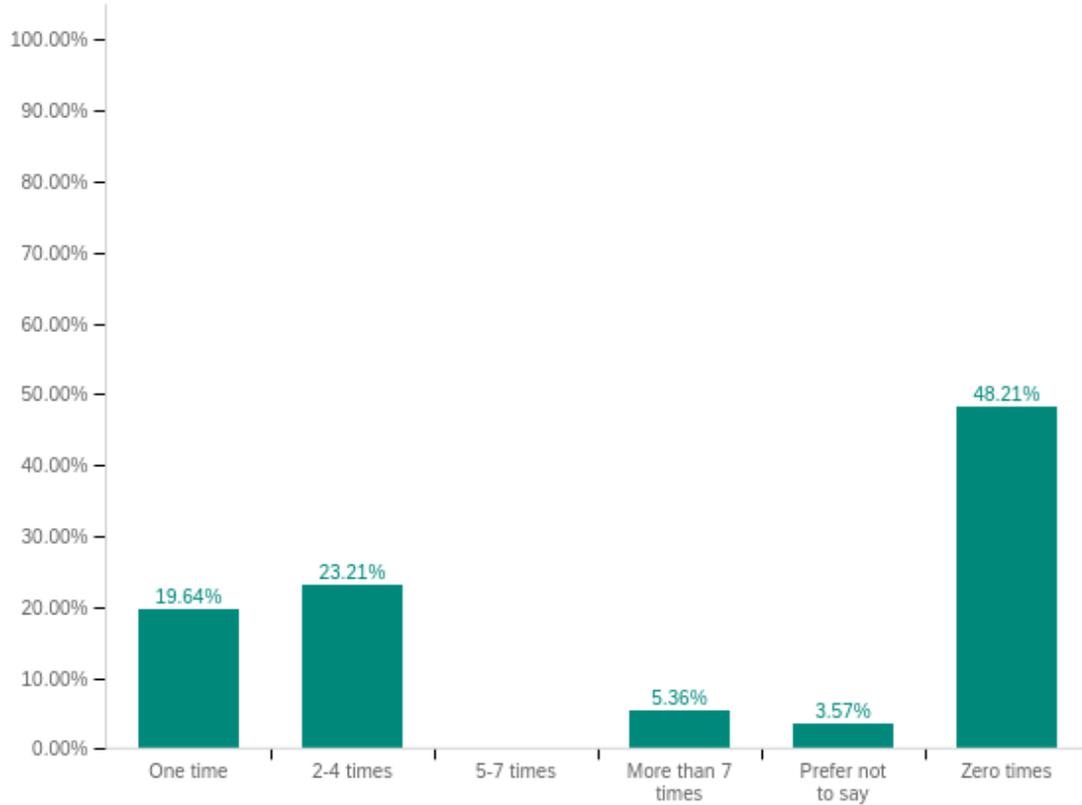
Victim of Crime While Homeless	%	Count
Yes	36.36%	20
No	60.00%	33
Prefer not to say	3.64%	2
Total	100%	55

Figure X.X Prior to Become Homeless, Were You Involved with the Justice System At All?



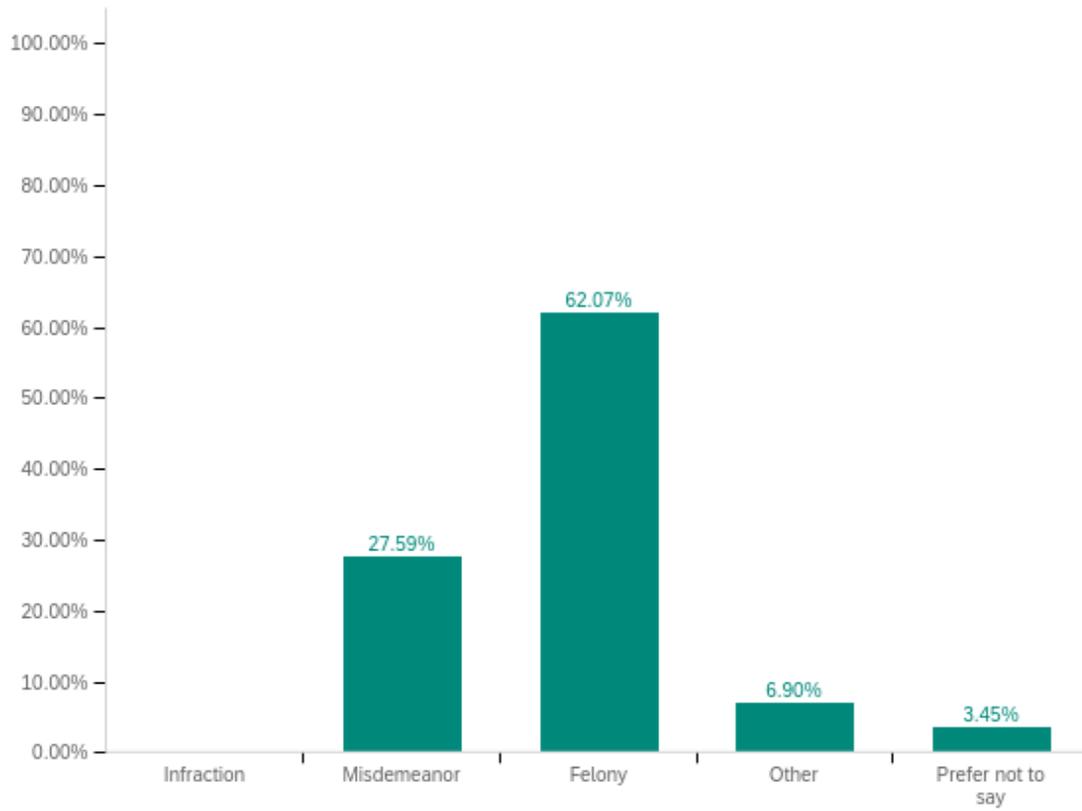
Prior to Become Homeless, Were You Involved with the Justice System At All?	%	Count
Yes	55.56%	30
No	44.44%	24
Prefer not to say	0.00%	0
Total	100%	54

Figure X.X Over The Past 12 Months, How Many Times Have You Been Incarcerated (jail or prison)



Over The Past 12 Months, How Many Times Have You Been Incarcerated (jail or prison)	%	Count
One time	19.64%	11
2-4 times	23.21%	13
5-7 times	0.00%	0
More than 7 times	5.36%	3
Prefer not to say	3.57%	2
Zero times	48.21%	27
Total	100%	56

Figure X.X What Type of Crime Were You Convicted Of



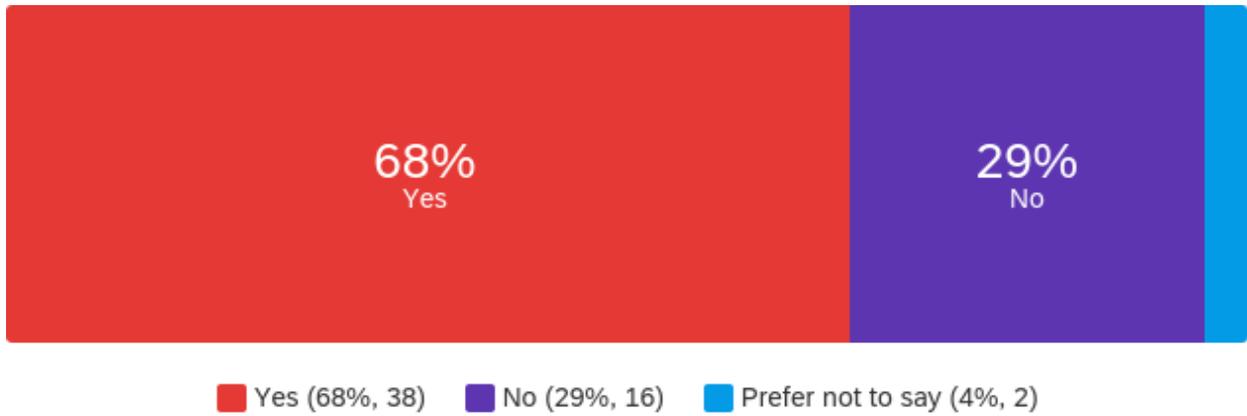
What Type of Crime Were You Convicted Of	%	Count
Infraction	0.00%	0
Misdemeanor	27.59%	8
Felony	62.07%	18
Other	6.90%	2
Prefer not to say	3.45%	1
Total	100%	29

## Domestic Violence and Interpersonal Violence

Sixty-eight percent (67.86%, n=38) of participants are survivors of domestic and/or interpersonal violence. Comparatively, in North Carolina, 9% (n=860) of people who were homeless in 2020 are survivors of domestic violence (HUD, 2020). Yet North Carolina has the 10<sup>th</sup> highest rates of reported domestic violence in the country (National Domestic Violence Hotline, 2020). It is possible that the North Carolina PIT Count underreported intimate violence in 2020, as available data about the North Carolina general population estimates intimate partner violence as 1 in 4 for women and 1 in 9 for men. Regardless, the high rates of domestic violence within Waynesville's homeless population suggest that the Town and County may need to increase its response to domestic violence prevention and supports.

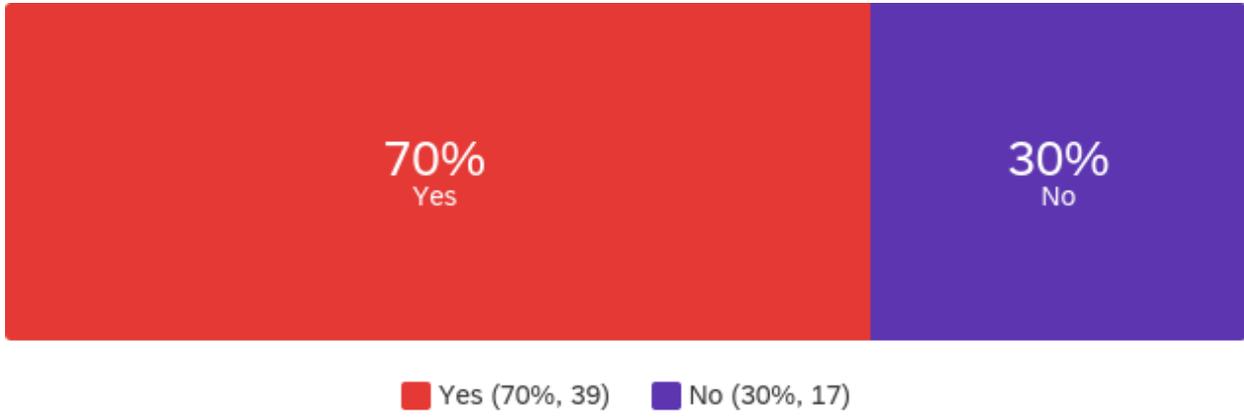
An almost equal number of participants have a history of domestic and/or interpersonal violence/abuse (69.64%, n=39). Further, thirty-eight percent (37.50%, n=21) of participants identify domestic violence and/or interpersonal violence/abuse as a cause of their homelessness. This phenomenon was also noted in the listening session with people who are homeless, and is the case nationally as well, with many individuals and families citing domestic violence as a cause of their homelessness (National Alliance to End Homelessness, 2021).

Figure X.X Are You a Survivor of Domestic and/or Interpersonal Violence



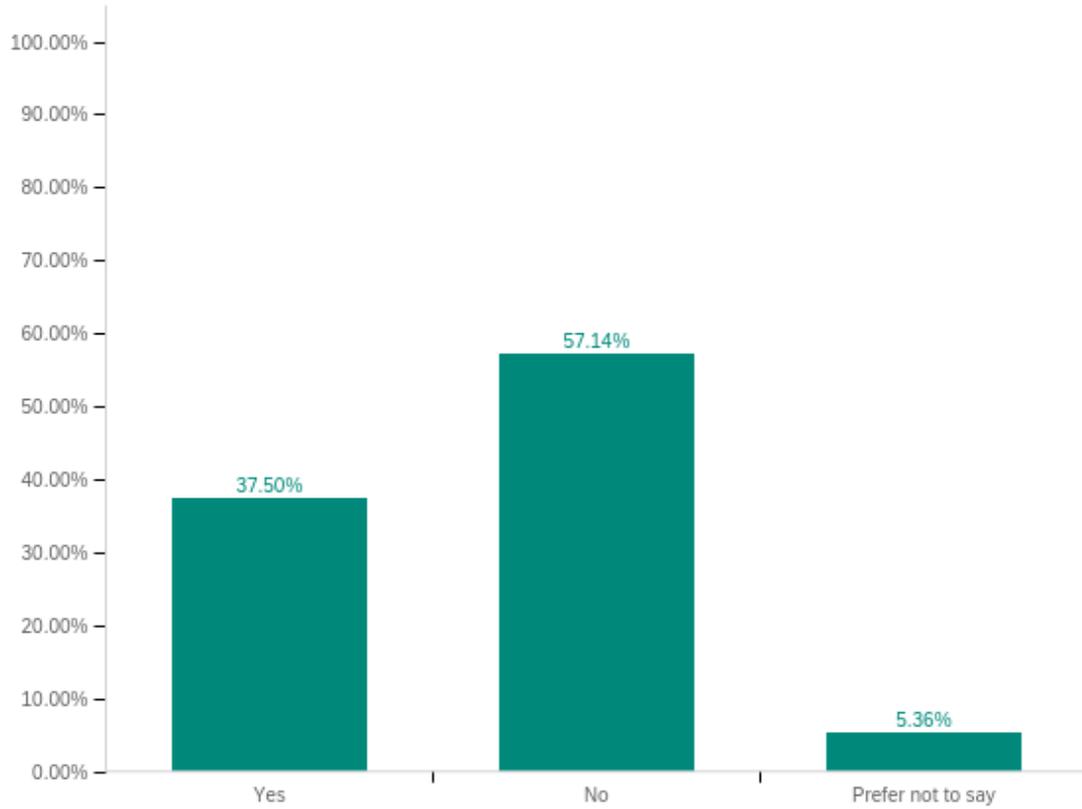
Are You a Survivor of Domestic and/or Interpersonal Violence	%	Count
Yes	67.86%	38
No	28.57%	16
Prefer not to say	3.57%	2
Total	100%	56

Figure X.X Have You Experienced a History of Domestic and/or Interpersonal Violence/Abuse



Have You Experienced a History of Domestic and/or Interpersonal Violence/Abuse	%	Count
Yes	69.64%	39
No	30.36%	17
Prefer not to say	0.00%	0
Total	100%	56

Figure X.X Was Domestic and/or Interpersonal Violence/Abuse The Cause of Your Homelessness



Was Domestic and/or Interpersonal Violence/Abuse The Cause of Your Homelessness	%	Count
Yes	37.50%	21
No	57.14%	32
Prefer not to say	5.36%	3
Total	100%	56

## Grief and Trauma Experience

Although grief is often associated with the death of a loved one, the experience of loss may also occur with other life events such as job loss or loss of material goods—including one's home (Papa & Maitoza, 2013). The symptoms of grief include extreme sadness, rumination or excessive thinking about the loss, and the experience of feeling emptiness and sadness for a period of time (American Psychiatric Association, 2013). The loss of home may create a loss of belonging (Clapham, 2010; Tognoli, 2003). Further, the loss of one's home can have profound psychological consequences resulting in disenfranchised grief—which is defined as the socially stigmatized denial of the right to grieve (Doka, 2002). Pickover and Slowik (2013) report that the involuntary loss of one's home may be a significant contributor to prolonged grief and psychological distress—including suicidal ideation and depression.

Neimeyer and Jordan (2002) associate *empathetic failure* with disenfranchised grief. Attig (2004) explains that this is a failure to recognize and to acknowledge a profound loss, which leads to the inability of a person experiencing loss to restore to a former, healthier state of functioning. In essence, the result is the person experiencing loss is subjected to disenfranchisement twice—first, in their overwhelming loss of their home and second, in the lack of social support that contributes to an inability to return to a former state of functioning.

Table X.X provides all individual ratings for each grief statement. This data summary aggregates responses noting ratings of *sometimes*, *very often*, and *always* to illustrate the extent of the grief response to the loss of housing and potential impact to the return to a former state of functioning. Eighty-three percent (83.34%, n=45) of participants feel like the loss of their housing is a personal disaster sometimes, very often or always, with seventy-four percent (74.08%, n=40) thinking about not having housing so much that it is hard for them to do the things they would normally do sometimes, very often, or always. Nearly sixty-nine percent (68.52%, n=37) of participants feel stunned and dazed over the loss of their housing sometimes, very often, or always. Reflecting grief implications on trust and security, eighty-one percent (81.48%, n=44) of participants have a difficult time trusting people since the loss of their housing sometimes, very often or always, seventy-six percent (76.37%, n=42) of participants have lost their sense of security, safety, and control sometimes, very often, or always, and eighty-one percent (81.82%, n=45) of participants have felt on edge, jumpy or easily startled since the loss of their housing sometimes, very often, or always.

Eighty-one percent (81.81%, n=45) of participants are made upset by memories of their housing loss sometimes, very often, or always with seventy percent (70.37%, n=38) of participants feeling bitter about the loss of their housing sometimes, very often, or always. Further, sixty-one percent (61.10%, n=33) of participants feel a part of them

vanished by the loss of their housing sometimes, very often, or always. Fifty-eight percent (58.18%, n=32) of participants feel that the loss of their housing has smashed their view of the world sometimes, very often, or always. Sixty-seven percent (66.67%, n=36) of participants feel like they have become numb sometimes, very often or always since the loss of their housing. Sixty-four percent (64.15%, n=34) of participants have pain in different places of their body sometimes, very often, or always since the loss of their housing.

Grief Statement	Never	Rarely	Sometimes	Very Often	Always	Total
The loss of my housing feels like a personal disaster.	7.41% n=4	9.26% n=5	25.93% n=14	22.22% n=12	35.19% n=19	54
I think about not having housing so much that it is hard for me to do the things I normally do.	14.81% n=8	11.11% n=6	25.93% n=14	20.37% n=11	27.78% n=15	54
I feel stunned and dazed over the loss of my housing.	18.52% n=10	12.96% n=7	29.63% n=16	20.37% n=11	18.52% n=10	54
Ever since the loss of my housing, it's hard for me to trust people.	11.11% n=6	7.41% n=4	22.22% n=12	22.22% n=12	37.04% n=20	54
I have pain in different places in my body since I lost my housing.	32.08% n=17	3.77% n=2	24.53% n=13	15.09% n=8	24.53% n=13	53
I feel like I have become numb since the loss of my housing.	22.22% n=12	11.11% n=6	31.48% n=17	18.52% n=10	16.67% n=9	54
I feel bitter about the loss of my housing.	24.07% n=13	5.56% n=3	20.37% n=11	27.78% n=15	22.22% n=12	54
I feel a part of myself vanished by the loss of my housing.	29.63% n=16	9.26% n=5	24.07% n=13	14.81% n=8	22.22% n=12	54
I feel that the loss of my housing has smashed my view of the world.	30.91% n=17	10.91% n=6	36.36% n=20	7.27% n=4	14.55% n=8	55
I have lost my sense of security, safety, and control.	18.18% n=10	5.45% n=3	20.00% n=11	21.82% n=12	34.55% n=19	55
I have felt on edge, jumpy or easily startled since the loss of my housing.	12.73% n=7	5.45% n=3	32.73% n=18	10.91% n=6	38.18% n=21	55
Memories about the loss of my housing upset me.	12.73% n=7	5.45% n=3	25.45% n=14	16.36% n=9	40.00% n=22	55

# Findings: Listening Sessions

## Listening Session: People Who Are Homeless

Participants in the listening session with people who are homeless agree that Waynesville is a nice place to live with available jobs, access to natural beauty, and family connections. They report several challenges of being homeless in Waynesville, including lack of affordable housing and inactive landlords, a high cost of living, and a lack of accessible public transportation. They struggle to pay housing deposits and application fees, leaving them unable to rent a home and creating a fear-based mindset of being constantly uprooted and unsafe. Participants identified solutions to their challenges including rental assistance programs, housing and employment case management, a community gathering space for mutual support, a “tiny home” community, transitional and independent housing to foster social inclusion and personal accountability, and accessible public transit costs and schedules.

Participants described feeling hurt their perceived judgement, discrimination, and stigma against them by some community members in Waynesville. They often cannot find housing or employment due to practices by landlords and employers who do not move their applications forward when they learn they live at a shelter. They wish people could get to know their stories, approach the issue with empathy and compassion, and make them “feel like humans”. They hope to live in a community that helps vulnerable populations instead of blaming them for their struggles. The listening session ended with participants speaking of the fear they have surrounding the new jail plans in Haywood County, especially being caught in a cycle of criminality in which they get arrested for being homeless, become a felon, and struggle to find housing and employment because of it. Participants also voiced their gratitude for the compassion provided to them by Waynesville law enforcement.

## Listening Session: Business Owners

The participant in this listening session reported that Waynesville has always been a positive environment for business owners. Challenges related to homelessness that their business faces included: the location of homeless supportive services disrupting their daily business, providers not creating limitations and boundaries for the people they serve, interacting with people who are homeless that they do not know, unsafe feelings among clientele and staff, and that homeless services seem to be attracting more people who are homeless to the area. They also reported their concern that prospective investors are not interested in the area due to the prevalence of homelessness. Solutions identified by the participant included not providing enabling “band-aid” services such as food and shelter, moving service locations away from business districts, and heightened collaboration among service providers and local businesses. They also requested an increase in the policing of people who are homeless

to hold them accountable for their actions, the provision of substance abuse treatment, and an end to the “court diversion” program.

In addition to a formal listening session with business owners, the Task Force's Economic Stability Work Group in partnership with the Haywood County Chamber of Commerce conducted a Homelessness and Business Impact Survey for business owners in Waynesville. Findings in this survey were similar to the above listening session. Common themes identified in the survey included increased policing, concern for safety of business clientele and staff, a focus on the cleanliness of business districts, and suggestions to move resources away from the centralized locations they are currently in. Survey participants stressed the importance of the Town protecting business owners and property values, while also reducing the chances of community harm that could be caused from divestment in economic development and investment in homelessness services. Many business owners were concerned about the effects of homelessness on their clientele, as well as speculation about people who are homeless in Waynesville not being local to the area. While some business owners wanted to end, move, and/or reduce low barrier services that “enable” people who are homeless, other business owners advocated for an expansion of services, compassion for neighbors who are homeless, and offered to employ people who are homeless. Some participants also mentioned community collaborations and education efforts to better understand homelessness in Waynesville. Business owners on all sides of the spectrum agreed, however, that mental health and substance abuse treatment services are important in getting to the “root of the problem” and alleviating homelessness in Waynesville.

## Listening Session: Faith Leaders

The faith leaders in this listening session reported enjoying the spiritual connections they found in the mountains of Waynesville, leading their caring congregations, encouraging community outreach efforts, and working with community partners. The challenges they associated with homelessness included: the lack of a low barrier shelter for people who are homeless to meet their basic survival needs, the lack of mental health and substance abuse services, inaccessible service locations due to the lack of public transportation, and public misconceptions and rumors that disrupt service provision and the wellbeing of people who are homeless. They also reported concerns with interorganizational conflicts and scarcity mindsets, discriminatory town policies and ordinances, and local leadership that may more effectively balance economic success and the well-being of their townspeople.

Solutions identified by participants include street outreach to connect people who are homeless to services, increased capacity for existing service providers, and removing religious barriers and requirements for services. They also spoke of creating a network of community organizations and service providers with an organizer to coordinate intake and service provision. Participants hoped that their churches could work to build relationships with people who are homeless, provide them with resources, and mobilize their congregations to volunteer with and donate to homeless services.

## Listening Session: Law Enforcement Representatives

Participants in this listening session reported enjoying engaging and building relationships with community members, protecting and serving the people of Waynesville, and thinking creatively in order to best serve the needs of residents and people who are homeless. They noted that it is their duty to serve community members regardless of if they have homes or not, and that mediating between resident needs and the needs of people who are homeless presents challenges. They also shared the importance of having data to determine if there has been a rise in homelessness in Waynesville so that the community can respond from an evidence-informed perspective.

Challenges reported by participants regarding homelessness included interactions with “service-resistant” individuals with intersecting mental health and substance abuse disorders, understanding severe mental illness, a lack of funding for mental health services, as well as the seemingly unsafe “diversion program.” They also mentioned problematic public misconceptions and rumors about people who are homeless being criminals and not local to the area, as well as their concern with the families and children affected by substance abuse and homelessness. Solutions identified by participants included childhood trauma interventions in schools, advocating for more funding for mental health services, holding people who are homeless legally accountable for criminal actions, harsher drug law penalties, and street outreach for service-resistant individuals that would alleviate the concerns of business owners. They also provided community engagement solutions including learning the stories of people who are homeless, empathizing with their situations, increased town support for service provision, and a community collaboration of service providers, local organizations and law enforcement that is led by a coordinator of services. Lastly, participants identified their need for support in interventions with individuals with severe mental illness, like a Mobile Crisis Team.

## Listening Session: Providers of Behavioral Health and Supportive Services

Participants in this listening session reported enjoying building relationships with people who are homeless, connecting them with resources, and engaging the greater community in their work. Their challenges to serving people who are homeless included handling the community stigma and judgement against them, serving the unique needs of every individual (e.g. like housing the pets of people who are homeless), the difficulty in addressing the intersections of substance abuse and mental illness, and a lack of a community gathering space for people who are homeless and providers to network and coordinate services. Participants also noted the challenges caused by the

lack of public transportation and walkability in Waynesville, the lack of affordable housing and landlord incentives for low income housing, and being overwhelmed with calls for services.

Solutions identified by participants included rapid re-housing and rental assistance programs, utilizing old buildings for low income housing, and landlord recruitment to accept housing vouchers. They also advocated for a mutually supportive community gathering space, breaking down barriers between people who are homeless, providers, and law enforcement, and case management services to connect people who are homeless with all the services they need. Participants called for more town support for outreach services, mental health treatment, medical screenings for people who are homeless, and a collaborative effort among service providers and town organizations to address all the needs of people who are homeless in Waynesville. Lastly, they wished for a change in the community narrative regarding homelessness, including community education efforts, poverty simulations, and facility tours with residents and local government officials.

## Listening Session: Providers of Housing and Supportive Services

Participants in this listening session reported enjoying connecting people and families who are homeless with permanent housing, as well as teaching people who are homeless sustainable life skills. They shared that the definition of a home is different for everyone, and that a home base allows people to meet their basic needs (shelter, food) and take care of other issues in their lives (employment, healthcare). Challenges to service provision identified by participants included community assumptions and stereotypes of people who are homeless that disrupt their work and cause harm to the people they serve, reconciling with the stigma that creates a barrier to housing and employment for people who are homeless, providing housing in a place with no affordable housing, and finding temporary shelter for the pets of people who are homeless with trauma. They also mentioned their concerns with the end of the COVID-19 eviction moratorium and the increase in homelessness that it will cause.

Solutions to these challenges identified by participants included changing the community narrative regarding homelessness in Waynesville, educating community members and local leaders on the complexities of homeless, and collaborating with other service providers and local organizations to coordinate intakes and address service gaps. Other solutions included addressing the "roots of the problem" by providing affordable and accessible substance abuse rehabilitation and mental health treatment programs, expanding Medicaid, acknowledging that congregate shelters do not work for everyone, and providing case management for newly housed people. Participants also requested community poverty simulations, Point In Time counts by the Town, and a meeting with the Board of Alderpeople.

## Listening Session: Residents Impacted by Homelessness

Participants in this listening session reported enjoying the community connections they have in Waynesville, as well as the era of more policing of the Town in the 1980's and 1990's. They share a concern for the lack of investment and infrastructure in Waynesville and Hazelwood. Challenges associated with homelessness that they face were reported as seeing drug paraphernalia in their neighborhoods, late night noise disruptions, a lack of mental health and substance abuse inpatient and outpatient treatment, as well as a concern about people who are homeless that may be coming to Waynesville from elsewhere.

Solutions to these challenges identified by participants included expanding the jail in Haywood County, ending the pre-trial diversion program, and having a stronger police presence. They would like to see work requirements for homeless services, one centralized location away from town for service provision, no methadone or suboxone maintenance clinics, no low barrier shelter options, and stricter zoning laws to control where people who are homeless are allowed to be. Lastly, they would like the Task Force to have more business owner representation, as well as funding oversight for not for profits, fewer homeless services, and an end to food distribution for food scarce families in Waynesville.

## Housing Market Analysis

### Housing Types

There are 5,539 housing units in Waynesville. In 2010, there were 5,457 housing units. A distinct characterization of Waynesville is the ratio of owner-occupied units (55.6%, n=2,602) to renter-occupied units (44.4%, n=2,078). As a whole, Haywood County has a higher homeownership rate (73%, n=19,465). The national homeownership rate is sixty-four percent.

Table X.X

	Waynesville	Haywood County	North Carolina	U.S.
<b>Housing Types</b>				
# of housing units: 2019	5,539	35,514	4,627,089	137,428,986
# of housing units: 2010	5,457	34,705	4,229,552	130,038,080
% of owner-occupied units	55.6% N=2,602	73% N=19,465	65.2% N=2,585,934	64% N=77,274,381
% of renter-occupied units	44.4% N=2,078	27% N=7,188	34.8% N=1,379,548	36% N=43,481,667

(U.S. Census Bureau, 2010b & 2019h)

### Housing Supply

There are an average of 2.10 persons per owner-occupied unit and 2.05 persons per renter-occupied unit in Waynesville. In 2010, there was more potentially available housing supply than is currently in Waynesville or Haywood County. In 2010, there were approximately eighteen percent of units (17.8%, n=969) that were vacant in Waynesville—that percent dropped to sixteen percent (15.5%, n=859) in 2019. Further, the homeowner vacancy rate decreased from 3.1 in 2010 to 1.0 in 2019 and the rental vacancy rate decreased from 5.8 in 2010 to 5.4 in 2019. Less than one percent (approximately 30 units) of Waynesville's housing stock was constructed after 2014, compared to 2.5 percent of the overall nation's.

Table X.X

	Waynesville	Haywood County	North Carolina	U.S.
<b>Housing Supply</b>				
Average household size: Owner-occupied unit	2.10	2.29	2.57	2.70
Average household size: Renter unit	2.05	2.22	2.43	2.49
2019 Vacant housing units	15.5%	25.0%	14.3%	12.1%
2010 Vacant housing units	17.8%	22.4%	14.3%	12.2%
2019 Homeowner vacancy rate	1.0	1.9	1.8	1.6
2010 Homeowner vacancy rate	3.1	2.4	2.5	2.4
2019 Rental vacancy rate	5.4	4.1	6.8	6.0
2010 Rental vacancy rate	5.8	10.3	9.6	7.8

(U.S. Census Bureau, 2010b & 2019h)

## Housing Condition

### Plumbing and Kitchen Facilities

The adequacy of indoor plumbing facilities is often used as a proxy for housing conditions. In Waynesville, there are approximately 100 housing units lacking complete plumbing facilities and 98 units lacking complete kitchen facilities. Nearly 600 homes are without telephone service—it should be noted that this increasing number may reflect individuals opting out of landline use for cellular service.

### Heating Fuel

Most housing units in Waynesville are heated by electricity (59.8% n=2,799) or fuel oil, kerosene, etc. (27.6%, n=1,293). A smaller percentage (7.5%, n=349) uses bottled, tank, or LP gas; or wood (2.8%, n=133), and/or utility gas (1.9%, n=91). Less than one percent (n=6) reportedly use no fuel, which likely indicates a housing condition problem unless the units are seasonal.

### Age

Age may also be a proxy for the condition of housing, especially considering the risk of lead-based paint. The percent of homes built in 1979 and prior is sixty-four percent (63.6%, n=3,524). Further, approximately thirteen percent (13.3%, n=734) of the housing stock was constructed prior to the year 1940 when the health risks of lead-based paint was highest.

	Waynesville	Haywood County	North Carolina	U.S.
<b>Housing Condition</b>				
Housing lacking complete plumbing facilities	.0%	.4%	.3%	.4%
Housing lacking complete kitchen facilities	.1%	.4%	.6%	.8%
No telephone service available	2.4%	2.2%	2.0%	1.9%
Utility gas	1.9%	2.1%	6.9%	48.0%
Bottled, tank, or LP gas	7.5%	12.2%	63.4%	4.8%
Electricity	59.8%	55.5%	3.0%	38.9%

Fuel oil, kerosene, etc.	27.6%	21.6%	3.0%	4.7%
Coal or coke	0.0%	0.1%	0.0%	0.1%
Wood	2.8%	7.8%	1.7%	1.8%
Solar	0.0%	0.2%	0.0%	0.2%
Other fuel	0.2%	0.3%	0.2%	0.5%
No fuel used	0.1%	0.2%	0.4%	1.1%
Built 2014 or later	0.5%	0.8%	3.3%	2.5%
Built 2010 to 2013	1.8%	1.5%	3.9%	2.7%
Built 2000 to 2009	8.2%	18.5%	19.4%	14.0%
Built 1990 to 1999	15.0%	16.1%	19.9%	13.9%
Built 1980 to 1989	10.8%	18.3%	15.4%	13.4%
Built 1970 to 1979	15.2%	12.9%	13.7%	15.2%
Built 1960 to 1969	12.6%	9.4%	8.9%	10.6%
Built 1950 to 1959	13.4%	8.7%	6.9%	10.3%
Built 1940 to 1949	9.2%	5.6%	3.5%	4.9%
Built 1939 or earlier	13.3%	8.1%	5.2%	12.6%

(U.S. Census Bureau, 2010b & 2019h)

## Housing Affordability

An affordable housing mortgage or rent should not exceed 30 percent of an individual or household's income. When housing costs exceed 30 percent of one's income, it constitutes being a "cost burdened household." Twenty-five percent (24.5%, n=297) of Waynesville homeowners with a mortgage are estimated to be housing cost-burdened while fifty percent (49.5%, n=979) of renters are estimated to be housing cost-burdened.

Of Waynesville's renter households that are cost-burdened, forty-one percent (40.5%, n=435) are extremely low-income households and thirty percent (30.3%, n=325) are low-income households. In terms of being at-risk for homelessness and presenting a potential opportunity for preventive interventions, there are 545 renter households in Waynesville that are both extremely housing cost-burdened (i.e. paying more than fifty percent of their income toward housing costs) and also characterized by extremely low- or low-incomes.

The largest percent of Waynesville's owner households that are cost-burdened are moderate-income households (28.5%, n=185). Twenty-two percent (22.3%, n=145) of Waynesville's extremely low-income population is paying more than 30 percent of its income toward a mortgage. Further, twenty-four percent (24.4%, n=55) of Waynesville's extremely low-income households are also extremely housing cost-burdened—paying more than fifty percent of their income toward mortgage costs.

	Renter Households		Owner Households	
Housing Cost Burden	>30%	>50%	>30%	>50%
# of Households	1,074	549	650	225
0-30% HAMFI <sup>7</sup> Households	40.5% N=435	64.7% N=355	22.3% N=145	24.4% N=55
30% to 50% HAMFI Households	30.3% N=325	34.6% N=190	18.5% N=120	37.1% N=70
50% to 80% HAMFI Households	24.1% N=259	0.7% N=4	28.5% N=185	17.8% N=40
80% to 100% HAMFI Households	5.1% N=55	0.0% N=0	10.0% N=65	13.3% N=30
100% and greater HAMFI Households	0.0% N=0	0.0% N=0	20.8% N=135	13.3% N=30

(U.S. Department of Housing and Urban Development, 2020)

## Housing Continuum

The housing continuum—a concept related to but also distinct from “Continuums of Care”—describes the various types of housing options available in a community from those completely financed by public funding with extensive integrated supports to full market-rate, independent ownership opportunities. The housing continuum may also be used to map existing capacity as well as gaps in services and opportunities.

<sup>7</sup> [HAMFI](#) is HUD Area Median Family Income. This is the median family income calculated by HUD for each jurisdiction, it is used to determine Fair Market Rents (FMRs) and income limits for HUD programs.



## Western North Carolina Homeless Coalition

The WNCHC serves as the Balance of State's Regional Committee (or, Local Planning Area [LPA]) for Continuum of Care Region 1. Region 1 includes Haywood County as well as Cherokee, Clay, Graham, Jackson, Macon, Madison, and, Swain Counties. Destri Leger currently serves the regional lead; however, Keri Guidry is transitioning into this role.

The WNCHC is the entry point for accessing the following supports and housing services:

**Coordinated Entry<sup>8</sup>:** Coordinated entry is a process developed to ensure that all people experiencing a housing crisis have fair and equal access and are quickly identified, assessed for, referred, and connected to housing and assistance based on their strengths and needs.

**Rapid Rehousing<sup>9</sup>:** Rapid re-housing rapidly connects families and individuals experiencing homelessness to permanent housing through a tailored package of assistance that may include the use of time-limited financial assistance and targeted supportive services. Rapid rehousing programs help families and individuals living on the streets or in emergency shelters solve the practical and immediate challenges to obtaining permanent housing while reducing the amount of time they experience homelessness, avoiding a near-term return to homelessness, and linking to community

<sup>8</sup> [What is Coordinated Entry?](#)

<sup>9</sup> [What is Rapid Rehousing?](#)

resources that enable them to achieve housing stability in the long-term. Rapid re-housing is an important component of a community's response to homelessness. A fundamental goal of rapid rehousing is to reduce the amount of time a person is homeless.

Rapid Rehousing Assistance: Available from 24 to 47 households

Permanent Supportive Housing<sup>10</sup>: Permanent housing (PH) is defined as community-based housing without a designated length of stay in which formerly homeless individuals and families live as independently as possible. Under PH, a program participant must be the tenant on a lease (or sublease) for an initial term of at least one year that is renewable and is terminable only for cause. Further, leases (or subleases) must be renewable for a minimum term of one month. The CoC Program funds two types of permanent housing: permanent supportive housing (PSH) for persons with disabilities and rapid re-housing (RRH). Permanent supportive housing is permanent housing with indefinite leasing or rental assistance paired with supportive services to assist homeless persons with a disability or families with an adult or child member with a disability achieve housing stability. Rapid re-housing emphasizes housing search and relocation services and short- and medium-term rental assistance to move homeless persons and families (with or without a disability) as rapidly as possible into permanent housing.

Permanent Supportive Housing: Accessed through Coordinated Entry, Administered through Vaya, Available for 47 households

## Haywood Pathways Center

The mission of Haywood Pathways Center is, "In Christ's name, feed the hungry, house the homeless and reduce recidivism in Haywood County." The organization fulfills its mission by providing emergency shelter and other supports to people who are homeless.

### Adult Shelter

Haywood Pathways Center provides overnight and/or short-term (1-3 night) shelter for adults who are in crisis or chronically homeless, and are residents of Haywood County. They are open year-round and accept men and women over the age of 18. Each intake has the following requirements- proof of residency, 8 panel urine drug screening, background check, and breathalyzer test.

Haywood Pathways Center has the capacity to provide shelter for 32 men and 28 women. Guests have access to hot meals, showers, hygiene items, clothing, and laundry facilities. All guests participate in center activities – devotion, prayer, and chore teams for dorms, kitchen, dining room, laundry, and grounds maintenance. Adult Shelter Dorms are closed from 8:30 AM- 4:30PM each

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<sup>10</sup> [What is Permanent Supportive Housing](#)

weekday. However, their dining hall is open 24 hours per day, to ensure that residents have a safe and stable place to be.

The shelter does not accept anyone under the influence of drugs and/or alcohol. They are unable to accommodate anyone who has been convicted of violent crimes or sex offenses. They are also not able to accommodate anyone who is determined to be a danger to self or others, but will assist in finding an appropriate facility and transportation.

#### Myr-Ken Family Dorm

Haywood Pathways Center provides short-term shelter for mothers and their children who are in crisis or chronically homeless, and are residents of Haywood County. Fathers are not permitted into the family shelter, but may be able to reside in the Adult Shelter program if they meet the requirements to do so. The Family Shelter has an interview process, as there are fewer spaces available. Phone interviews are available upon request at 828.246.0332. Five private family rooms per floor are available to assist 10 total families.

Applicants will be required to provide proof of Haywood County Residency, undergo an interview with a case manager, needs assessment, legal clearance, and drug/alcohol testing. They do not accept anyone who is under the influence of drugs or alcohol, but will refer them to a substance treatment program, and reconsider their application after successful completion of the program. Parents must commit to participation with a case manager to develop a person-centered plan of action based on their specific needs, goals and resources. In addition, parents are also required to attend parenting classes and a budgeting class.

#### Short Term Residential Program

Residents of Pathways are addressed in a holistic and individual manner, recognizing that the road to recovery is rarely a clear-cut path. The overall goal is to provide a safe and sober environment that eliminates the concerns for the basic needs, and allows a shift in focus to that of breaking the cycles of addiction and homelessness.

Individuals interested in the Short Term Residential Program have a 3 day trial period to determine if they have the motivation and commitment to make a change in their life. During this time, they will meet with a case manager to learn more about the 6 month program.

A person-centered plan is developed by an experienced case manager taking into consideration six areas of focus which include: income, housing, stabilization, life skills, social support, and spirituality.

Some individuals only need a helping hand until they can find employment. They have the life skills and financial knowledge to make it on their own. But many who come to Haywood Pathways Center need more. An individual may have obtained employment, but he/ she does not have the life skills or financial knowledge to be successful without additional support, education, and/or resources. For this individual, the 6 month program offers the safety and security of a place to sleep and regular meals as they work toward the goal of permanent employment, housing and self-sufficiency. In addition, all residents that are extended to staying the short-term program are required to attend a budgeting class and a renting 101 class.

#### Emergency Cold Grace

**Cold Grace Program** — During the winter months, Haywood Pathways Center implements the Cold Grace Program for nights when temperatures fall below 32 degrees Fahrenheit. Any man or woman, without safe shelter for the night, who is alcohol and drug-free, will be accepted and permitted to stay in the dining hall for the night, and/or return, for an unlimited number of nights until the weather has improved and safety can be assured.

#### Day Labor Program

For many Haywood Pathways guests, employment opportunities are limited due to lack of education, skills, incarceration, or a previous poor employment record. The Day Labor Program provides guests with the opportunity to work on a day by day basis, develop skills in job responsibility, accountability and communication, and potential references for future employment.

The Day Labor Program is administered through the Administrative Team and is staffed by individuals who have been determined to be ready to assume responsibility and accountability. The program is available to any resident, or business in Haywood County on a day to day basis—for any field of work, Monday through Saturday. Requests for day labor must be made a minimum of 24 hours in advance.

#### Pathways Kitchen

Food, a basic necessity in life, is an important component of Haywood Pathways Center. They have a fully equipped kitchen, large and welcoming dining room, caring and loyal stores, individuals, churches and organization that supply them

with food and faithful volunteer crews who plan, prepare and serve an evening meal 7 days a week to their guests and the community.

Breakfast and Lunch are open only to guests of the center as this is a time of fellowship, chore completion, and making plans for their day off campus. The kitchen chore team is responsible for cleaning the kitchen and dining room after all have eaten, and before they leave for the day. Bagged lunches are prepared and dispersed to HPC guests who will be off campus for appointments or employment reasons.

Dinner is served at Haywood Pathways Center 7 days a week from 5:45PM to 6:30 PM The evening meal is open to guests of the center, as well as to anyone in need in the community; men, women and children. Meals are planned, prepared and served by volunteer crews from local churches and organizations. Menus vary with the season and /or donations that have been received that week.

#### Cooperating Agencies

Haywood Pathways Center goal is to partner with as many agencies within Haywood County as possible in order to get their guests the services they need, that will allow them to return to independent living.

**Goodwill Career Connections**- used for employment services, job retention skills, budgeting classes, mock interviews

**NCWORKS**- used for employment services, job retention skills, budgeting classes, mock interviews

**Haywood Community College**- GED Classes

**Lifeworks**- life skills, job skills, and discipleship classes.

**Meridian Behavioral Services**- substance abuse programs, offender services, recovery education, mental health services

**Vaya Health**- Permanent Supportive Housing program.

**Appalachian Community Services**- Mental health, substance abuse, and developmental disability services.

**Mountain Projects**- Housing assistance

**Blue Ridge Health**– Healthcare needs

**The Open Door**- Medication assistance program and food assistance program

**Haywood Christian Ministries**– Thrift store clothing assistance, medication assistance, food assistance programs

**NCServes**– Veterans Services

**Working Wheels**– Referring partner to help successful program participants obtain a vehicle

**EACH Initiative**– Referring partner for transitional Housing for Single Parents with children

**WNC Homeless Coalition**– Rapid Re-Housing Program

### Helping Hands of Haywood

The mission of HHH is to, “Expand and add valuable programs and provide vital items needed to increase the well-being of our community, especially to those who are disenfranchised, experiencing homelessness, or insecure shelter in Haywood County and western North Carolina.” HHH fulfills its mission by providing the following services:

#### HHOH Deliverables

<b>Survival Services</b>
<b>Includes:</b> “Trust Intake,” food, hygiene, clothing, private, emergency overnight stays, addressing severe health conditions and obtaining medication, rent/mortgage assistance, and immediate attention for mental health episodes including suicide intervention or death prevention.
<b>Wrap Around Deliverables</b>
<b>Examples:</b> Full health assessment, care plan with daily engagement, critical IDs/documents, general health care services including an ongoing doctor relationship, health insurance, addiction interventions, surgical procedures, public health initiatives, ongoing medication and food, enrollment and active participation in support services, employment assistance, government financial/disability income, driver’s license and insurance, bills/fees, car maintenance, phone, court/legal support, transportation, and “warm hand offs” to intervention initiatives.
<b>Sustaining Housing</b>
<b>Examples:</b> rental search/application, 1st month rent/deposit, legal lease review, utilities, furniture, household equipment and supplies, house repairs, transportation solutions, bank accounts, etc. Follow up for a minimum of 6 months after services completed ensuring healthy status and use of support systems.

## REACH of Haywood County

REACH of Haywood is a local not-for-profit organization that provides aid to survivors of domestic violence, sexual assault, and elder abuse. REACH offers advocacy, emergency shelter, community outreach, and prevention education to empower individuals to live a self-sufficient life free of violence.

Services provided by Reach of Haywood:

24-Hour Crisis Helpline

Emergency Shelter

Legal and Court Assistance

Counseling and Support Groups

Housing Assistance

Services for the Elderly and Persons with Disabilities

Referrals to Other Local Agencies

Community Education and Prevention Programs (*Safe Dates*)

All of Reach's services are offered free of charge to women, children, and men. Reach has the capacity to provide shelter services to up to 10 individuals at one time.

## EACH (Ending Area Child Homelessness)

The EACH Initiative, Inc. brings together groups of people who care in the Haywood Community known to EACH as "Villagers. Villagers partner with children and parents experiencing homelessness they move to a position of self-sustainability over a two-year period. A full-time Case Manager, employed by The EACH Initiative, works one-on-one with the Family and the Villagers as they mobilize community resources and connect them with the Family. Housing is provided for the Family over the two-year period the Family is in the EACH Program. Villagers provide love and care by celebrating birthdays and sharing in social events, offering Skill Partners in areas a Family needs, such as financial counseling, health care referrals, nutritional guidance, etc. Under the Family Funds First principle a Family uses all of their income and financial resources to meet their needs after which Villagers supplement income as may be needed. Budgeting and financial oversight and accountability occur through the EACH Case Manager and a Villager budget coach. EACH has the capacity to provide housing for up to five families at one time.

## Mountain Projects

Mountain Projects is a community based not-for-profit organization, founded in 1965 as a Community Action Agency, that provides vital services to the elderly, disadvantaged and general public in Western North Carolina. It was begun as part of the "War On Poverty" with a \$52,000 Office of Economic Opportunity grant and a pilot summer Head Start program. Since then the agency has grown to an annual budget of eleven million dollars, a staff of 140, and provides a broad diversity of services to the community in response to its changing needs.

Mountain Projects administers the Section 8 rental assistance voucher program, which is a federal program designed to provide rental assistance for families who have low-incomes. This program is aimed at families who are currently paying more than 30% of their adjusted gross, monthly income for rent and utilities, and for those who need rental assistance in order to live in "safe, decent and sanitary" housing. Mountain Projects and the federal government have a special commitment to aid people who are homeless, low income, elderly, disabled and large families.

MPI currently has 1,008 vouchers to help families in both Haywood and Jackson Counties. Typically, 43% of the clients they help are elderly or people with disabilities. Once their clients receive a voucher, they choose the home they want to live in. They work with more than 700 landlords within the two counties that work with this program.

## Waynesville Housing Authority

Members of the Waynesville Housing Authority are appointed by the Mayor to deal with issues regarding the Waynesville Housing Authority per North Carolina General Statute 157-5, including managing 100 units total. The units are brick, single story duplexes located in four areas of Waynesville. The locations are Chestnut Park (8 units), Pigeon Street (12 units), Boyd Avenue (20 units), and Ninevah [60 units (family section)]. There are 20 studio apartments, 24 one-bedroom apartments, 25 two-bedroom apartments, 23 three-bedroom apartments, and 7 four-bedroom apartments.

The Waynesville Housing Authority Tower, at 65 Church Street, manages 62 units total in a six-story building. There are 52 one-bedroom, and 10 two-bedroom apartments in the building.

Rent for WHA is estimated at 30% of the family's monthly adjusted income. WHA has a minimum rent of \$50. The max rent must be 80% of HUD issued fair market rent for Haywood County. The max rent for the Tower is set by USDA/HUD RD. Different factors can change a tenant's rent such as income, medical expenses (elderly households 62+), and children in the home (daycare expenses). Rent includes electric, water, sewer, and garbage. With WHA, electric is partially included. The tenant has a monthly

allowance of kilowatts; tenants are responsible for the amount they exceed the allowance, at .0922 cents per KW over.

Public housing is funded by the federal government and administered by the Waynesville Housing Authority for the jurisdiction of City of Waynesville / County of Haywood. PHAs are governed by a board of officials that are generally called “commissioners.”

### Low-income Housing Tax Credit (LIHTC) Developments

#### Credits Awarded

Project Name: Brookmont Lofts Project

Developer: Landmark Realty

Project type: LIHTC

Location: North Main Street (old hospital)

Anticipated # of Units: 50 affordable rental units

Eligible Populations: Income-qualifying older adults & veterans

Anticipated Monthly Rent Range:

Anticipated Construction Completion Date:

#### Credits Applied For

Project Name: Balsam Edge

Developer: Mountain Housing Opportunities

Project type: LIHTC

Location: Howell Mill Road and Calhoun Drive

Anticipated # of Units: 84

Eligible Populations: Income-qualifying populations

Anticipated Monthly Rent Range: \$388 (one-bedroom)--\$963 (three-bedroom)

Anticipated Construction Completion Date: In application process, awards announced August 2021, if awarded, anticipated completion by 2023

### Smoky Mountain Housing Partnership

Smoky Mountain Housing Partnership (SMHP) is the affordable housing division of Mountain Projects, Inc., a community action agency that has served the southern mountains of Western North Carolina since 1965. Mountain Projects has several long-running initiatives to assist homeowners in need. These programs offer renovation support for current homes, rental assistance, and heating assistance during winter months. Smoky Mountain Housing Partnership is the newest addition to Mountain Projects' lineup of programs, generating affordable housing and home buying services for essential workers in Haywood and Jackson Counties.

### DIRECT PURCHASE HOUSING

Homeownership through the USDA 502 Direct Loan Program:

Direct Purchase is an alternative to new construction. With the direct purchase option clients are able to purchase an existing home through the assistance of a realtor. An

additional benefit of the direct purchase program may include down payment assistance.

Smoky Mountain Housing Partnership serves all of North Carolina through this program:

Financing

### **Rural Home Loans (Section 502 Loan Program)**

Assists low- and very-low-income applicants to obtain decent, safe and sanitary housing in eligible rural areas by providing payment assistance to increase an applicant's repayment ability. Payment assistance is a type of subsidy that reduces the mortgage payment for a short time. The amount of assistance is determined by the adjusted family income.

Financing Benefits:

- Interest rate below market rate and when modified by payment assistance, can be as low as 1%
- Payment is based on income and adjusted annually
- Repayment period is 33 years
- No down payment is required
- Most closing costs can be financed into the loan
- Interest and mortgage payments are deferred during construction
- Moratorium – Suspends the borrower's requirement of making monthly payments for up to a 2-year period due to hardship situations

Micro Home Communities

The SMHP, in collaboration with Western Carolina University (WCU), will be developing a national model for micro-home community development for the communities of our Smoky Mountains.

Western Carolina University's School of Art and Design, Interior Design, and Social Work programs will be assisting SMHP in creating a unique micro-home model that will incorporate the latest concepts in WELL-Certified Design Standards.

The Social Work Community & Organization Practices course students at WCU will be breaking into four teams to conduct a needs assessment of the population that will occupy the micro-homes SMHP will be building. The students will be targeting demographics such as elderly, homeless, veterans, and single-parent families. Their research will prove to be an invaluable insight into the quality of life of these individuals and families. The study will be used to gain an understanding of what the population's disadvantages are, such as unique challenges, social status, and each demographics' unique needs. The students will then analyze their research and present their data and recommendations to be incorporated into the design features of this project.

The Junior Studio II course at the WCU School of Art & Design will work in tandem with the Social Work students implementing their research findings by creating design concepts that will utilize a holistic approach. They will create floor plans, specifications

of materials needed, rendered views, and present them to the Smoky Mountain Housing Partnership later in the semester. Junior Studio II students will be encouraged to use sustainable building practices. This particular project will focus on features such as the orientation of the buildings to capture daylighting, passive solar, and address seasonal opportunities for shade, while also incorporating accessibility, aging in place, mobility, environmental, and well-being standards.

The opportunity for Western Carolina University students to work with the SMHP is a win-win situation. Students will be facing real issues and gaining valuable life experience in the field, all the while seeing they have a lasting impact. SMHP benefits by having floor plans and designs built around the concepts of WELL building standards and cutting edge research.

The micro-home community will consist of 8 to 15 micro-homes of 300 to 600 square feet in size that will be interconnected by walkways clustered around a community garden and community gathering area. The micro-homes will be highly energy-efficient and contain full kitchens, washers and dryers, separate bedrooms, and living areas for residents.

### Self-Help Housing

Through SMHP's Self-Help housing program, we help families and individuals achieve their dream of homeownership. With the help of the participants "sweat equity", these homes are affordable and attainable.

### **What is Self-Help Housing?**

Through this program, qualifying participants work within a small group of 4-6 families to help each other build their homes under the leadership of a construction supervisor. By the families working together cooperatively to build their homes, they earn "sweat equity" and reduce construction costs.

### **Do I need construction experience to apply?**

No, you do not need to have any prior construction experience to be eligible for this program — just a willingness to learn and work with a construction supervisor.

### **Who provides the financing for the land, materials, fees, etc.?**

The USDA provides payment assistance and low-interest rates to low-income families that would otherwise not be able to secure a home loan.

Financing Benefits of the Self-Help Housing Program are:

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- Interest and Mortgage Payments are Deferred During Construction
- Payment deferral of a borrower's requirement of monthly payments for up to 2 years due to hardship situations such as job loss or medical illness.

### **Who can qualify for the Self-Help Program?**

In general, you may qualify for this program if:

- Have stable income.
- Ability and willingness to meet the labor requirements.
- Have the legal capacity to incur a loan.
- Agree to occupy the residence as your primary home.
- You are not barred from any other federal programs.
- You are unable to obtain a loan from any other source.
- Meet Household Income Limit.

#### **Workforce Housing**

SMHP owns land off of Jonathan Creek in Maggie Valley suitable for building 40 or so homes for the workers of Haywood and Jackson counties. Stay tuned to this page for updates on when we break ground, pour foundations and complete the homes. All homes will be listed on this website as they become available for purchase.

#### **Down Payment Assistance**

Down Payment Assistance is offered through the North Carolina Housing Finance Agency (NCHFA). It is a deferred payment, non-forgivable mortgage with 0% interest rate that can increase your purchase power or reduce your first mortgage amount making your monthly payment even more affordable.

Smoky Mountain Housing Partnership serves the following North Carolina counties through this program:

**Avery, Buncombe, Cherokee, Clay, Graham, Haywood, Henderson, Jackson, Macon, Madison, McDowell, Mitchell, Rutherford, Swain, Yancey**

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### [Haywood Habitat for Humanity](#)

The mission of Haywood Habitat for Humanity is, "Seeking to put God's love into action, Habitat for Humanity brings people together to build homes, communities and hope." Habitat fulfills its mission through homeownership opportunities.

Each house Habitat build is sold to their partners with an affordable mortgage. Additionally, each homeowner listed on the deed is required to invest 200 hours of “sweat equity” into the construction of their home.

#### HABITAT GUIDELINES

All applicants must be a resident of Haywood County at the time of application and must have been a resident of North Carolina for a minimum of 12 months. Applicants cannot be on the sexual offender registry. A criminal background check is conducted for all applicants.

Haywood Habitat for Humanity’s Board of Directors, based upon the recommendation of the Homeowner Selection Committee, selects their Partner Homeowners. The decision is based on the following criteria:

- **Need** - Applicants must be unable to qualify for a conventional bank loan, and their current housing must be inadequate (unsafe, overcrowded, unsanitary, unaffordable, unsafe neighborhood, or inaccessible). As part of the application process, the Homeowner Selection Committee will conduct an interview with the applicants.
- **Ability to Pay** - Applicants must have a steady source of verifiable, legal income, and earn 60%-80% of the county’s median income based on family size. (See *current qualifying income guidelines below.*) The monthly mortgage payment cannot exceed 30% of the homeowner’s gross income, to not overburden the homeowner with a housing cost that exceeds their budget.
- **Willingness to Partner** - Each applicant that will be listed on the deed must invest 200 hours of “sweat equity” in the construction of their home. All applicants are required to attend Habitat home ownership education classes.

#### CURRENT QUALIFYING INCOME GUIDELINES

Family Size	Annual Income Range	Monthly Income Range
1	\$26,625-\$35,500	\$2,219-\$2,958
2	\$30,450-\$40,600	\$2,538-\$3,383
3	\$34,238-\$45,650	\$2,853-\$3,804
4	\$38,025-\$50,700	\$3,169-\$4,225
5	\$41,100-\$54,800	\$3,425-\$4,567
6	\$44,138-\$58,850	\$3,678-\$4,904
7	\$47,175-\$62,900	\$3,931-\$5,242
8	\$50,213-\$66,950	\$4,184-\$5,579

## Market Rate Multi-Family Development with LMI Set-Aside

Multi-family development with designated affordable units:

Project Name: Mountain Creek

Developer: Tribridge Residential

Project type: Market rate

Location: Russ Avenue (former BI-LO grocery location)

Anticipated # of Set-aside Moderate-Income Units: 20

Eligible Populations: Moderate income-qualifying populations

Anticipated Monthly Rent Range for Moderate-income Units: ???

Anticipated Construction Completion Date: ???

*DRAFT -- Plan Under Discussion, Not Approved*

# Recommended Action Plan

## Proposed Action Framework: Waynesville Community CARES

Homelessness is a multifaceted and complex issue that impacts the individual experiencing being unhoused, individuals living near homelessness, businesses situated near homelessness, and the community at-large. Consequently, an effective response will require various partners and resources that span the social determinants of health. The following Community CARES framework proposes an asset-based approach to strengthen existing services for people who are homeless and addressing concerns communicated by neighbors and businesses impacted by homelessness.

DRAFT -- Plan Under Discussion, Not Approved



# WAYNESVILLE COMMUNITY CARES

## C.A.R.E.S

**C:** Coordination, Collaboration, Community-Building & Civility

**A:** All neighbors are known

**R:** Residence, A place to call home

**E:** Education (prevention & early intervention)

**S:** Supports (SDOH--education, financial capability, workforce development, integrated health [i.e. behavioral & physical], social capital, transportation, policy innovation, etc.)

# Proposed Community Action Plan

## C: Coordination, Collaboration, Community-building & Civility

Goal: Strengthen existing partnerships and service provider capacity & deepen community connections among neighbors for the purpose of both meeting needs and creating opportunity for our neighbors who are homeless, and, neighbors & businesses who are impacted by the issue of homelessness

Action Steps	Year				
	1	2	3	4	5

Coordination & Collaboration					
TOW appoints hiring committee for CARES Director	•				
TOW hires Community CARES Director & 2 neighborhood CARES outreach workers	•				
Community CARES Director establishes a care coordination team of community-based providers	•				
Community CARES Director, on monthly basis, convenes CARES coordination team to connect PWH to service providers/services	•	•	•	•	•
Neighborhood CARES Outreach Workers engage with & connect PWH to services, engage with neighbors & businesses and respond to issues associated with homelessness	•	•	•	•	•
Neighborhood CARES Outreach Workers host monthly meetings with neighbors and businesses impacted by homelessness, communicate needs & opportunities to appropriate officials, implement actions	•	•	•	•	•
CARES Director & Neighborhood CARES Outreach Workers track aggregate data & outcomes for success measures & reports quarterly at BoA meetings	•	•	•	•	•

Community-building & Civility					
Annual Community Picnic	•	•	•	•	•
Establish and Implement Community-Building & Engagement Mini-Grants	•	•	•	•	•
Identify Facilitator & Convene Community Study Circle(s)			•	•	•

## A: All Neighbors are Known By Name

Goal: By using an evidence-informed and baseline “by-name-list,” cultivate community, increase prevention of homelessness, and/or expedite neighbors to services and opportunities

Action Steps	Year				
	1	2	3	4	5

CARES Coordination Team establishes shared “by-name-list”	•				
CARES Coordination Team meets every month to review “by-name-list” & connects PWH to services	•	•	•	•	•
CARES Director, in partnership with coordination team, tracks aggregate data & outcomes for success measures & reports quarterly at BoA meetings	•	•	•	•	•

## R: Residence, A Place to Call Home

Goal: Strengthen individual well-being and community quality of life by rapidly connecting individuals at-risk of homelessness to housing, and supporting efforts to expand & develop low-cost affordable housing in safe neighborhoods including rental units and home ownership programs.

### Option 1: Maintain Current System

Action Steps	Year				
	1	2	3	4	5

TOW and community continues to support service providers, PWH, neighbors and businesses impacted by homelessness at current levels	•	•	•	•	•
Service providers continue providing service and supports at current levels	•	•	•	•	•
TOW assesses homelessness after year 3 and year 5, determines if progress is acceptable			•		•

Option 2: Strengthen and Expand Capacity of Current System

Action Steps	Year				
	1	2	3	4	5

CARES Director either provides or secures capacity-building and team-building professional development for CARES coordination team	•	•			
CARES Director facilitates expansion of provider participation and PWH access to Coordinated Entry, Rapid Rehousing, LIHTC, Section 8 Vouchers, PSH units	•	•	•		
CARES Director evaluates capacity-building, team-building, & access of Coordinated Entry, Rapid Rehousing, LIHTC, Section 8 Vouchers, PSH units			•		•
TOW increase affordable housing units: Rental & Homeownership Opportunities	•	•	•	•	•
CARES Director facilitates expansion of partnerships with landlords	•	•			
CARES Director tracks aggregate data & outcomes for success measures & reports quarterly at BoA meetings	•	•	•	•	•
TOW assesses progress, makes modifications as needed; after year 3 and year 5 determines if model is working or additional shelter is needed	•	•	•	•	•

Option 3: Develop Additional Emergency Shelter

Action Steps	Year				
	1	2	3	4	5

Explore feasibility of additional emergency shelter options	•				
Develop operations and capacity plan to apply for funding FY2022	•				
*ESG requires low barrier model					

DRAFT -- Plan Under Discussion, Not Approved

## E: Education

Goal: Expand prevention and early intervention education strategies that prevent or mitigate homelessness

Action Steps	Year				
	1	2	3	4	5

Individual-level education: Work with community agencies, schools, partners to support teaching positive coping skills and building resiliency among youth					
Community-level education: Quarterly and annual reports on homelessness issues at BoA meetings	•	•	•	•	•
Community-level education: Quarterly speaker series on issues related to homelessness, housing, & community building		•			
Community-level education: Annual housing fair	•	•	•	•	•
Community-level education: Poverty simulation hosted every other year		•		•	

## S: Supports

Goal: Identify community assets and build network capacity to connect people who are homeless, other neighbors, and businesses to services and opportunities

Action Steps	Year				
	1	2	3	4	5

CARES Director builds network capacity between/among housing and other providers/resources: Behavioral health, physical health, dental care, education, workforce development, peer support, transportation, pro-social & affordable recreation, basic services, spiritual, governmental services, etc.	•	•	•	•	•
Care Coordination Team uses network capacity (& possibly NCCare360) to connect PWH to appropriate service and support mix	•	•	•	•	•
Neighborhood Outreach Workers identify & map support services assets for both people who are homeless and businesses	•		•		•
Explore Policy Innovation in support of CARES Action Plan:  TOW affordable housing set-asides (inclusive zoning)  Landlord incentives for affordable set-asides, Rapid Rehousing and/or Voucher participation  Child Development Accounts—particularly for youth who are under 5 & identified as living in poverty  Map and identify vacant land/property that may be used for housing development—including affordable units  Access to mental/behavioral health services	•	•	•	•	•

## Additional Recommendations Proposed by Members of the Task Force

Action Steps	Year				
	1	2	3	4	5

Instead of TOW hiring CARES Director, recommend TOW release request for proposal to contract with a service provider to fulfill actions items assigned to CARES Director					
Propose the 2 Neighborhood Outreach Workers focus their efforts--1 outreach worker focuses on businesses and housed neighbors and is employed by the Town of Waynesville; 1 outreach worker focuses on people who are homeless and is employed by a service provider					
Proposes Town of Waynesville's financial support be increased to service providers that focus efforts on existing need instead of supporting Community CARES Director & associated action items					
Community CARES Director explores Policy Innovation in support of CARES Action Plan--to also include: response to the pre-trial release program—document summons, citations; more effective communication & partnership between LEOs and magistrates; considerations of more effective monitoring and supports for individuals on release (i.e. check-ins, connections with providers), support for a recovery court in Haywood County.					

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# Appendices Place-holder

*DRAFT -- Plan Under Discussion, Not Approved*