

A Market in Transition: Drug Trafficking in Southern Appalachia

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Abstract

Traditionally, Americans have viewed drug abuse and drug dealing as an overwhelmingly urban problem. Therefore, there is very little research that has been conducted on the topics of illicit drug use and trafficking in rural America. In the last decade, however, it seems as though illicit drug use has not respected geographic boundaries and has begun to overwhelm rural neighborhoods throughout small town America. This research is concerned with illicit drug use, production and trafficking in southern Appalachia. Data were collected from a convenience sample of law enforcement officers who were or are members of five multi-agency drug task forces located in the southern Appalachia region. The findings show that the recent influence of Mexican Drug Cartels in this area has caused a variety of changes in the types of drugs being used and the methods in which illicit drugs are being produced.

1. Introduction

In general, there is very little research that has been conducted on the topics of illicit drug use and trafficking in rural America (Schoeneberger et al., 2006; Muilenburg, 2007; Wu, Schlenger, & Galvin, 2006; Maxwell, Tackett-Gibson, & Dyer, 2006; Leukefeld, et al., 2005; Shears & Stanley, 2006; Sexton, 2006; Sexton et al., 2005; Warner & Leukefeld, 2001). Traditionally, Americans have viewed drug abuse and drug dealing as an overwhelmingly urban problem. Rural areas have been long viewed as isolated and therefore protected from the negative impact of drug usage. Most of the major national studies concerned with illicit drugs in the U.S., such as ADAM (which examines drug use among arrestees), DAWN (which examines drug overdoses), and the Office of National Drug Control Policy's Pulse Check (which examines local drug markets), focus exclusively on urban areas. In the last two decades, however, it seems as though illicit drug use has not respected geographic boundaries and has begun to overwhelm rural neighborhoods throughout small town America. While the drugs of choice may differ somewhat in urban and rural areas, today, adults and young teens in rural areas are just as likely to abuse substances as those in larger metropolitan areas (Substance Abuse and Mental Health Services Administration, 2011).

Appalachia is a cultural region in the eastern United States that stretches from the southwestern part of New York State to northern Alabama, Mississippi, and Georgia (Appalachian Regional Commission, 2008). The purpose of this research paper is to examine illicit drug production and drug trafficking in rural southern Appalachia, specifically, northern Georgia, western North Carolina, eastern Tennessee, and eastern Kentucky.

Often called "hillbillies," people living rural Appalachia are frequently misunderstood and ridiculed by outsiders as being uneducated, clannish people who are prone to acts of violence. Appalachia does not possess or represent a single culture, despite stereotypes to the contrary; however scholars have identified several similarities in beliefs and values.

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Some of the most prevalent values in the Appalachian culture include: loyalty to their community, tight kinship ties, resourcefulness, self-reliance, independence, and strong religious faith (Jones, 1994; Beaver, 1986; Keefe, 1997; Keefe, 2005). Appalachians have a strong sense of family and community. In rural Appalachian culture, family members usually live in close proximity and relatives are frequently sought for help and advice on most aspects of life. This dedication to family and the seclusion of living in the mountains has played a large role in keeping the Appalachian people and culture fairly isolated from the rest of the United States. Appalachians also value independence, self-reliance, and “doing things for themselves.” Historically, Appalachians have always been self-sufficient by living off land through farming and hunting, by building their own homes, and by making their own products (Jones, 1994; Beaver, 1986).

People in southern Appalachia have always been involved in producing and selling goods in the black-market, especially moonshine. In colonial times, the distillation of whiskey in the Appalachian region allowed farmers an affordable way of condensing bulky corn crops into small, high-value loads that could be transported by horse over many of the narrow mountainous trails. Moonshining later thrived during Prohibition and many residents in Appalachia still tell stories of high speed car chases between bootleggers and law enforcement officers. Some of the more successful moonshine drivers later became the early stars of stock-car racing, such as NASCAR legend Junior Johnson. The first NASCAR event in 1947, for example, was held in Wilkes County, North Carolina, located in the foothills of northwestern North Carolina. The race was held at the Wilkesboro Speedway in North Wilkesboro, North Carolina (Wilkinson, 1985; Maurer, 1974).

Although finding old moonshine stills in the backwoods of the mountains in southern Appalachia is not uncommon, moonshining is a fading tradition. With a decrease in the number of counties that ban the sale of alcohol beverages steadily decreasing and the reduction in the price advantage that moonshine once held over its “legitimate” competition, many moonshiners have been driven out of business.

During the 1980s and 1990s some Appalachians found a new product that could be used to supplement their income just as moonshine once had – marijuana. In Kentucky, for example, Hafley and Tewksbury (1996) found that marijuana cultivation was not limited to a small minority of rural residents; rather the illicit marijuana industry is a major portion of the economy in Kentucky’s Appalachian region. In rural Kentucky, marijuana cultivators are often longtime residents of the area, white males between the ages of 35 and 50, with a high school education who live in secluded rural areas. The majority of these residents do not use marijuana themselves and are well respected, church-going, community members with no previous arrest records. Many of these individuals acknowledge that growing marijuana is morally and legally wrong, but grow marijuana because of economic hardship, and often feel that due to circumstances they have no better option. Lower-class families in this region have a history of making “extra money” by being involved in bootlegging and moon shining, and marijuana cultivation has become an extension of this region involvement in the black market. The small rural community and tight kinship networks of this area provide a culture of safety and protection for marijuana growers. Rural residents of Appalachia do not want their “kin” to be arrested, and, therefore, often remain silent, or sometimes even protect those involved in the marijuana industry (Halperin, 1990; Hafley and Tewksbury, 1996).

Over the past three decades, southern Appalachia has experience a significant increase in the number of Hispanics, especially from Mexico. Traditionally, Hispanics migrated to the area for short periods of time, working seasonally in the agriculture-based industries in Appalachia and then leaving to head back to Mexico or other regions of the United States. Today, the Mexican immigrants have become a permanent segment of southern Appalachia’s population, holding jobs in such areas as construction and landscaping, the food service industry, and the chicken processing plants located in northern Georgia (Pollard, 2004).

The Hispanic population in Atlanta's northeast suburb of Gwinnett, for example, has increase from less than 5% in 1900 to over 20% in 2012 (U.S Census, 2012). While the vast majority of Mexican immigrants are not involved in drug trafficking, their presence does allow drug trafficking organizations from Mexico to blend in with the Mexican communities.

The same rival Mexican drug cartels that are battling for control of drug routes in Mexico have recently established Atlanta as the principal distribution center for the entire eastern U.S. From the Mexican border, shipments of marijuana, cocaine, methamphetamine and heroin are routed over land to Atlanta for storage in a network of stash houses. From Atlanta, drugs are transported to markets in the Northern U.S., such as New York, Chicago, and Boston. Cash from the sale of drugs is moved over the same routes back to the Atlanta area, where bundles of money are turned over to transportation units for bulk shipments back to Mexico. Over the last several years, drug seizures in Atlanta have surpassed the number of seizures in Los Angeles and Chicago (DEA, 2012).

2. Methodology

Data for this research was collected from a convenience sample of twenty-six law enforcement officers who are members of five multi-agency drug task forces located in the southern Appalachia region. Two of the drug task forces were located in the northern Georgia (Georgia's Appalachian Drug Task Force and the Cherokee Multi-Agency Narcotics Squad), one in southwestern North Carolina (North Carolina's Multiple Agency Narcotics Unit), one in southeastern Tennessee (the 10th Judicial District Drug Task Force), and one located in eastern Kentucky (Lake Cumberland Area Drug Task Force).

Multi-agency drug forces are a means by which many rural law enforcement agencies can combine resources in an attempt to reduce the amount of drug trafficking, drug dealing, and availability of drugs in a certain geographical area. Multi-agency task forces were designed on the premise that drug trafficking has no natural boundaries and that most law enforcement authority is limited to specific jurisdictions, but criminal activity is not. Most multi-agency or multi-jurisdictional task forces receive at least some federal funding and are often managed by a federal or state level drug enforcement agent.

Georgia's Appalachian Drug Task Force, for example, is an agency that has jurisdiction over four counties in northern Georgia. At least one sheriff's deputy from each of the four counties is assigned to the task force. Many of these deputies receive specialized training in the area of drug-law enforcement, such as courses that train agents how to work undercover successfully. A special agent from Georgia's Bureau of Investigation, often called "the agent in charge", heads the Appalachian Drug Task Force and is responsible for supervising the eight drug agents who work for the task force.

For this research, a total of 26 drug-law enforcement agents were interviewed over a one-year period. None of the agents contacted during this study refused to be interviewed. Interviews were semi-structured in nature and each lasted from 65 to 120 minutes in length. Each agent was asked three general questions: (1) describe any current trends in the use, production, and trafficking of illicit drugs in your area, (2) describe any challenges you or your agency faces when conducting drug-law enforcement operations, and (3) describe any steps you or your agency has taken to deal with these challenges. Probing was used in most cases in which the interviewee failed to elaborate or expand on their answers. Although extensive notes were taken during each interview, none of the interviews were audio taped. Most persons working in the criminal justice field tend to be very uncomfortable with taped interviews. Twelve of the interviews were conducted face-to-face, while the remaining ten interviews were conducted via phone. All of the participants were assured anonymity. Notes from the interviews were coded and analyzed manually to identify recurring themes and patterns relevant to the research question as well as unexpected data.

3. *Marijuana*

All of the drug law enforcement agents interviewed in this study stated that the cultivation of domestically cultivated or “home grown” marijuana remains at high levels throughout the Appalachian region. In fact, the region is one of the most significant outdoor cannabis cultivation areas in the United States. Kentucky, Tennessee, and West Virginia are three of the seven states (along with California, Hawaii, Oregon, and Washington) that make up the Marijuana Seven – those states that produce the most domestically grown marijuana. Data from the 2011 Domestic Cannabis Eradication/Suppression Program show that marijuana from Kentucky and Tennessee, comprise 11 percent of all outdoor plants eradicated in the United States (DEA, 2011).

During the 1990s, fear of asset forfeiture laws motivated many marijuana growers in southern Appalachia to cultivate marijuana on federal lands, such as National Forests. When law enforcement agents arrest a grower cultivating marijuana on federal lands, the agents cannot seize the person’s house, vehicles, or other property because the marijuana was not being grown on private land. The Daniel Boone National Forest (a region policed by the Lake Cumberland Drug Task Force), in Kentucky, led all National Forests for cannabis plants eradicated in 2005, accounting for 29 percent (213,229 of 729,481) of cannabis plant eradication on National Forest Service lands nationwide (National Drug Intelligence Center, 2005). Surveillance operations on federal lands are nearly an impossible task because it often requires that agents wait in the “bush” for a grower to tend his crops or harvest the marijuana. Some growers may not tend to their crops until they harvest them, and it is often difficult to predict when a plot will be harvested.

In the last several years, Mexican drug cartels have taken over the cultivation of marijuana on national forest lands. With the U.S. intensifying the drug interdiction efforts at the U.S.-Mexican borders, it has become more and more difficult to smuggle Mexican marijuana across the border. Growing in the mountains of southern Appalachia saves them the expense and risks of smuggling marijuana across the border. It is also closer to large markets such as Atlanta, GA and Charlotte, NC, where it can be distributed quickly and profitably.

Illegal immigrants from Mexico are recruited for the sole purpose of growing the marijuana and protecting the plots. Cartels drop off the workers at the edge of the national forest and have them hike several miles into the heart of the forest, carrying with them everything they need, such as, tents, food, weapons, fertilizer, irrigation hoses, and marijuana seeds. The workers plant their crop then dam mountain creeks to create pools to siphon the water into miles of gravity-fed hose that water their crop. Armed men keep watch over their plots night and day, and may set-up dangerous booby traps to keep others from stealing their plants. The plots themselves can often be enormous; during this study, for example, agents working for the Appalachian Drug Task force uncovered a remote site hidden in the Chatahoochee National Forest just two miles from Helen, GA. More than 26 thousand plants worth 52 million dollars were found growing under a giant canopy. Even when the plots are detected by law enforcement, it can be extremely difficult to make an arrest; in most cases, growers are able to escape while law enforcement agents make their way through the forest.

Outdoor Hispanic growers in Appalachia have also stepped-up their cultivation of high potency marijuana through improved cultivation and harvesting techniques. For example, *sinsemilla* (from the Spanish *sin semilla*, “without seed”) is marijuana harvested from the female plant that has not been allowed to be fertilized. This cultivation technique involves killing or pulling-up the surrounding male plants so that the female plants, in seeking to trap pollen, produce larger buds. Being isolated from the male plant, the female plant produces an enormous amount of resin and because the resin covering the buds contains more THC than the leaves, *sinsemilla* has a higher THC content than ordinary marijuana. Growers of *sinsemilla* marijuana usually concentrate on selling only the buds of the plant and disregard the dried leaves or “shake” of the plant.

In Kentucky, for example, the average THC content of domestically grown marijuana in 1987 ranged from 1-6 percent, in 2012, the average THC content of eradicated marijuana in Kentucky was 15 percent (DEA, 2012).

4. Methamphetamine

For the last three decades, methamphetamine has been one of the most popular illicit drugs used and sold in southern Appalachia. Methamphetamine is a white, odorless, bitter-tasting crystalline powder and is commonly known as “speed,” “meth,” and “crank.” The drug can be snorted, smoked, or injected intravenously and is sold for \$50 to \$125 per gram. Meth is a powerful synthetic stimulant that affects the central nervous system, causing severe addiction. After an initial euphoric rush, meth produces feeling of increased energy, alertness, and loss of appetite. Drug-law enforcement agents often call meth users “tweakers” because of their propensity to focus (tweak) on one task for hours. Meth users, for example, commonly take apart electronic items in their homes, such as computers, televisions sets, DVD players, or cell phones.

Traditionally, methamphetamine has been popular among white lower-class males; giving the drug the name “redneck cocaine.” Throughout the 1970s and 1980s, outlaw motorcycle gangs, such as Hell’s Angels and the Pagans, controlled the production and trafficking of methamphetamine. Today, many users still call meth “crank” because many outlaw motorcyclists would hide the drug in the crankshaft of their motorcycle. During the 1990s, small independent cooks operating clandestine laboratories, often called “mom-an-pop labs” by local drug enforcement agents, produced the majority of methamphetamine used in southern Appalachia. Many Appalachians whose families once supplemented their income by cultivating marijuana began to produce batches of methamphetamine. The secluded mountainous regions of Appalachia are perfect for small-time meth cooks who often set-up their labs in trailers or mobile homes located in secluded, heavily forested areas.

The main precursor ingredient used to make methamphetamine is pseudoephedrine, which is usually obtained from over-the-counter cold medications. Since 2005, all four states involved in this study have passed laws that require cold and sinus pills containing pseudoephedrine to be sold behind a pharmacy counter. Purchasers must be at least 18 years old, show a government issued photo ID, and sign a log to buy these products. These laws also limit the purchase of these products to no more than two packages per transaction and no more than three packages within 30 days without a prescription. Since the passage of these laws, there has been a dramatic decrease in the number of clandestine labs in southern Appalachia. In Kentucky, for example, methamphetamine lab seizures decreased from 604 in 2004, to 200 in 2006. In Georgia, the number of identified methamphetamine labs decreased from 226 in 2003, to 117 in 2007 (DEA, 2007).

All of the drug agents interviewed in the study stated that although there has been a decrease in the number of domestic meth labs, they have not seen a corresponding decrease in methamphetamine use. According to drug agents, the sharp decrease in the production of domestic methamphetamine has been offset by an increase in the production and distribution of methamphetamine by Mexican drug trafficking organization. In recent years, Mexican drug trafficking organizations have begun operating large-scale “super labs” capable of producing in excess of 10 pounds of methamphetamine in a 24 hour period. Most of these labs are located near the Mexican-American border.

The entry of ethnic Mexican trafficking into the drug trade has resulted in a significant increase in the supply of high-purity, crystal form of methamphetamine known as “ice”. Produced from powdered methamphetamine, ice had been used in Hawaii and southern California for years before gaining popularity throughout the rest of the United States. The name “ice” is derived from the drug’s appearance: that of clear, large, chunky crystals resembling rock candy. Samples of ice have been found to be highly concentrated, with purities as high as 98 to 100 percent.

Ice is usually smoked in a glass pipe in a manner similar to crack cocaine. Ice gives a virtually instantaneous euphoria that last up to four hours, much longer than the high obtained from crack cocaine (Paterline, 2003).

Atlanta, Georgia is the primary source of Mexican methamphetamine for the southern Appalachian region. Mexican wholesalers smuggle meth by vehicles traveling along Interstate Highway 20, which runs directly into Georgia from drug entry points along the southwest border of the United States. Recently, Mexican drug traffickers have begun smuggling large amounts of pseudoephedrine and setting up their own “super-labs” in and around metro Atlanta. During this study, drug-enforcement agents raided a super-lab located in a suburban house in Cherokee County, Georgia. When searching the house, agents seized 10 pounds of ice, 39 pounds of methamphetamine, 240,000 pills of cold medicine containing pseudoephedrine, and several 55 gallon buckets that contained liquid substances suspected to be methamphetamine in various stages of processing. Three illegal immigrants from Mexico were arrested and charged with the possession of methamphetamine with intent to distribute. This recent drug operation shows that Mexican drug trafficking organizations may be beginning to operate large meth labs in the Southern Appalachia.

5. Opiates

During the late 1990s a new synthetic narcotic pain killer, Oxycodone, posed significant problems for the Appalachian region. In Appalachia, Oxycodone was on sold on the street for 20 to 40 dollars a pill. The drug’s high rate of abuse among rural Appalachia earned the drug the name “hillbilly heroin.” High rates of abuse began in communities in West Virginia, Kentucky, and western Virginia and then spread through the rest of rural Appalachia. No one is quite sure why use of Oxycodone became part of the Appalachian culture. Many communities in Appalachia are isolated from major towns and highways. As a result, many of the usual street drugs may not be available to Appalachians. Instead, residents have always made do with the resources that are already on hand, such as moonshine or, in this case, prescriptions drugs. In addition, many residents of Appalachia often suffer from chronic illnesses and pain from hard lives of manual labor in professions like coal mining, logging, and the textile industry. As a result, the use of pain killers becomes a coping mechanism and the practice of self-medication has become a way of life (Inciardi & Cicero, 2009).

Early in 2000, the national and local news stories about the abuse of Oxycodone in Southern Appalachia were extremely popular. News stories ran information not only about the potential dangers of the drug and how addictive the drug could be, but also about the tactics of diversion that people were using to obtain the drug (including Medicaid fraud). After OxyCodone became a national media event, doctors reduced the number of prescriptions, and rates of use fell.

In 2009, however, rates of Oxycodone abuse in Appalachia once again began to rise. After the burst of the housing market in 2008, many businessmen in Appalachia began to pull their money out of construction and real estate and invest it into a new business: pain clinics, also known as “pill mills.” Georgia and many other states in southern Appalachia lacked a prescription drug tracking system, which enabled buyers to fill overlapping prescriptions without being flagged as drug abusers. Owners of pain clinics would begin their operations by posting ads on Craigslist that promised licensed physicians enormous salaries for joining their “medical practices.” Many of the physicians who agree to work for a pain clinic had practices that were failing or had been sued for malpractice. Working for a pain clinic allowed these physicians to make a minimum of \$7,000 dollars a month without worrying about managing employees or paying high insurance bills to cover malpractice suits.

As states and local communities in Appalachia began to crack down on pill mills by passing laws that help track the dispensing of prescription pain killers, drug agents began to see younger Oycodone users turn to a new opiate to fulfill their addiction needs: black tar heroin. All of the agents in this study stated that they have seen a surge in demand for black-tar heroin beginning about five years ago, coinciding with the rising abuse of prescription drugs. Black tar heroin is crudely refined from poppy plants grown in Latin America, mostly on the western mountain slopes of Mexico. Because it's sticky, suppliers roll it on plastic grocery bags, cut it in squares and tie the squares off like a balloon. During this study, law enforcement officers in northern Georgia confiscated 86 pounds of black tar heroin worth over \$5 million. Agents made three arrests, and also found \$2 million in cash, more than four pounds of methamphetamine and two guns, including an AR-15 assault rifle. The packaged drugs were found stashed in the walls and above a refrigerator. Agents stated that they had been investigating the alleged drug traffickers — who were tied to the infamous Gulf Cartel in Mexico — for more than a year.

6. The Changing Structure of Appalachian Drug Trade

Traditionally, there has been a difference between the structures of the urban drug trade and the rural drug trade. In urban areas, drug dealers at the retail level generally follow what has been called the business model. The business model of street dealing is organized as a “business” with a hierarchy and numerous persons occupying a range of roles. At the center of the business model is the crew boss, who receives a supply of drugs from a wholesaler. Drugs are fronted at each level of the organization. A wholesaler fronts the drugs to the crew boss, who then divides the drugs and fronts them to street dealers often called “runners.” Runners are most often young (age 14-23), African American males recruited from inner city neighborhoods. Each crew boss may have up to 20 runners working for him. Runners are assigned to work a particular street location, sell only at a given price, and then hand over all of the money to the crew boss. As the drugs are sold, the money flows back up the chain, from the runners, to the crew boss, and back to the wholesaler. Prices are agreed upon before the drugs are fronted. At the end of the day, each runner is paid in money or drugs for his or her work. To avoid rip-offs and robberies, each crew is guarded by an armed lieutenant who supervises several runners. Crack dealing organizations located in many urban neighborhoods best approximate the business model of street dealing. Members of many urban street gangs, such as the Crips and Bloods, are often involved in the business model of street dealing, working both as runners and crew bosses (Johnson et al., 1992; Alder, 1985).

Drug dealers in rural areas generally follow a free-lance model of street dealing. Independent actors working together without a previously established relationship characterize the free-lance model of retail drug distribution. Dealers are not part of any large-scale drug organization. This model is a “cash only” business in that dealers operate like most stores; the buyer must pay for the drugs at the time of purchase. Both wholesalers and retailers usually do not front the drugs and the price of a drug is negotiated at the time of the buy. Dealers may have many different buyers, many of which they may never see again after a given transaction is completed. If transactions occur successfully, dealers and buyers may negotiate similar arrangements on a more regular basis, however, there is no expectation that they will cooperate in the future (Johnson et al., 1992; Office of National Drug Control Policy, 2004).

Recently there has been somewhat of a transformation in drug trade in southern Appalachia from a free-lance model into more of a business model. The “good ole boys” in the mountains that once sold marijuana, methamphetamine, and narcotics no longer control the drug trade. Hispanic males are now the primary drug dealers in the region, and instead of a free-lance model they are using a business model. Rather than using young males as runners, however, Hispanic dealers are now using young single Hispanic female drug couriers and runners.

By using female runners, Mexican wholesales are able to insulate themselves from buyers. Many male dealers may have as many as seven to ten young women working for them to make deliveries of drugs to different households throughout the area.

The law enforcement agents in this study stated that male Hispanic drug dealers often prefer to use single mothers as drug couriers because they “have cooler heads than men,” they are more trustworthy than men, are less violent, and are better able to diffuse violent situations. Women couriers are also less likely than men to use the drugs they carry. The women also often use children as a cover to “distract” law enforcement officers as they drive loads of drugs. Diaper bags were mentioned by several agents as a primary stash location. In recent years, several female couriers have earned enough respect and money to break the “glass ceiling” of the male dominated Mexican drug trade and become crew bosses and/or wholesalers.

7. Discussion and Conclusion

Only a small number of studies have focused on illicit drug production and trafficking in rural America (Sexton, et al., 2006; Hafley & Tewksbury, 1996; Weisheit, 1993) and there has yet to be a study that focuses solely on rural drug-law enforcement. Rural areas present unique problems for local law enforcement agencies that often lack the resources to effectively combat drug trafficking. Rural communities’ smaller tax bases translate to fewer dollars for law enforcement services. This scarcity of resources means that rural law enforcement officers do not often have the equipment, personnel, or training to do their jobs as efficiently as possible. Rural agencies often lack the staff with the expertise to work drug crimes and officers are expected to perform more varied activities than their urban counterparts. Drug law enforcement requires officers to be proactive, initiating a case themselves; however, with limited time and resources, it is often difficult for an officer to be anything but reactive. In addition, drug-related federal funding sometimes favors urban areas. Most federal money is aimed at urban centers, despite the fact that there is a growing body of literature that shows that there is virtually no difference in drug dependence based on community size (Warner & Leukefeld, 2001; National Center on Addiction and Substance Abuse, 2000).

The purpose of this research was to examine illicit drug production, drug trafficking, and drug-law enforcement in southern Appalachia. The study found several important trends in regard to the production and trafficking of illicit drugs in the region. First, there has been a dramatic increase in the amount and potency of domestically grown marijuana in southern Appalachia. Marijuana growers commonly cultivate marijuana on federal lands and indoors by using hydroponic growing techniques. The domestic production of methamphetamine by small “mom-pop” operations has decreased in southern Appalachia in recent years. This decrease, however, has been offset by an increase in the higher purity form of methamphetamine known as “ice” being smuggled into the region by Mexican drug trafficking organizations.

Although this is one of the few studies that has focused on rural drug-law enforcement, this study does have its limitations. First, the small convenience sample used in this research limits the generalizations that can be made about southern Appalachia and rural America as a whole. Southern Appalachia is an expansive and diverse area and current trends concerning drug production and drug trafficking may not be similar in other parts of Appalachia. Furthermore, any valid and reliable qualitative study concerning crime and/or deviance should not be one sided, in examining behavior only through the perspective of law enforcement personnel. Future research needs to examine the behavior, attitudes, and opinions of drug users, drug producers, and drug traffickers within a rural context. If possible, such a study should also be extended to other rural regions throughout the United States.

Future research should also address the subject of drug treatment in rural areas, especially drug courts. Although studies have found that drug courts are generally successful in urban areas (Gottfredson, Najaka, & Kearley, 2003; Goldkamp, 2001; Meyer & Ritter, 2001), many of drug-law enforcement agents interviewed in this study believe that rural drug courts are less than successful. A few scholars have also concluded that persons living in rural areas are less likely to be successful in drug treatment programs than persons in urban areas (Warner & Leukefeld, 2001; Donnermeyer & Robertson, 1997). There may be several reasons for this finding. First, the norms and values of rural culture may decrease the likelihood that individual drug addicts seek treatment. Rural residents often value self-reliance, independence, individualism, and a distrust of outsiders. Family problems, whether they be domestic violence or drug addiction are supposed to be kept in the family, not shared with others. Lastly, because of lower population density, rural residents often have to travel greater distances to treatment services and may not have many available service providers. Until the supply side of the equation is addressed, one cannot expect a quick solution to the illicit drug problem that is currently destroying the lives of many people residing in rural America.

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