Introduction

In April 2016 the Community Foundation of the Ozarks commissioned a 5-year pilot program to address poverty in Springfield, Missouri. The Northwest Project developed an asset-building program called Reaching Independence through Support and Education (RISE) which was designed to encourage self-sufficiency through development of human and social capital. Participants were selected for the RISE program if they had a dependent and fell below the 200% Federal Poverty Guideline (%FPG). In addition, participants had to have already achieved the following: stable housing, access to transportation, and be employable with high school education or equivalent. The RISE Self-Sufficiency Assessment (RSSA) was used at baseline and every six months to determine if participants were experiencing improvements in self-sufficiency while participating in the RISE program. The RSSA was also developed to determine which RSSA items could predict upward mobility in socioeconomic status. Results revealed significant improvements in the overall self-sufficiency score and for the items relating to employment, education, income, quality childcare, legal resolution (criminal), and food security. Furthermore, the RSSA was used to determine if these improvements impacted participants' %FPG. Poverty, food security and self-sufficiency are often-used terms, but are less frequently defined by those who employ them. These terms are often conceptualized as flowing along a continuum. However for this research and the work with the RISE program, quantifiable measures were defined.

Percent Federal Poverty Guideline

The percent federal poverty guideline (%FPG) was created by the Social Security Administration in 1963 to determine an individual's or household's eligibility for federal assistance programs. The qualifications for assistance were developed based on the USDA's assessed average dollar value of food. Further assessment of family dynamics found that for a family of three or more the total cost of food was about one third of their net income. Today, the %FPG is used frequently to determine access to most federal programs. Since the standard for determining the federal poverty threshold does not consider inflated costs of housing, utilities, or medical care, most federal programs have inclusion criteria of household income below the 185%FPG, but some as high as 200%FPG (Dinan, 2009). To better understand income levels based on 2020 income, a family of three would have the following income and %FPG: $21,720/100%; $29,322/185%; $43,440/200% (ASPE, 2020).

Self-Sufficiency

The Family Self-Sufficiency (FSS) program was a development of the National Affordable Housing Act of 1990 which intended to improve self-sufficiency through education, skill development, case management and referrals to resources (Silva & Wijewardena, 2011). Although a national standard does not exist, HUD requires public housing authorities to administer SSA's to predict household self-sufficiency. HUD suggests that all FSS tools should include questions that address the following: family demographics, education, employment, finances and assets, and barriers or needs. Some FSS include a 5-point Likert scale while others use a 10-point scale. Most include 15-18 questions, while others include 100 questions (HUD, 2017). Organizations that use FSS typically assist households in increasing wages by building social and human capital. Human capital is improved through education and skill development with a focus on higher paying jobs. Social capital is developed through expanding networks and access to resources. Therefore, poverty prevention programs must address issues beyond

budgeting as many low-income jobs are volatile and developing stability below 200%FPG has proven difficult. As a result, state and federal assistance programs have been using between 125 and 200 percent of a poverty guideline as an eligibility requirement for over thirty years (Dinan, 2009; Fisher 1992).

RISE Program

Once participants are accepted into the program, personal development managers interview participants to collect data and assist in setting short- and long-term goals. Participants agree to a minimum of 24 months of personalized coaching, weekly small group classes, and job-training, skill development or education tailored to their abilities and goals. These agreements require participants to attain objectives toward their goals by specific dates with the overall objective of becoming financially self-sufficient within two to five years of program entry. Personal development managers provide referrals to counseling and resources. Weekly classes cover a variety of topics that include developing self-efficacy, asset development and credit counseling, and home-buyer education. Referral resources include childcare, job openings, legal resolution, food resources, etc. Completion of one year of the RISE program includes three college credits of coursework toward achieving an education goal. RISE participants also earn incentive dollars, receive free bus passes, and free tutoring. The RISE program and the support provided by the personal development managers, class facilitators, and community resources are similar to those found in most comprehensive self-sufficiency programs. The primary difference in the RISE program is the weekly classes with specific topics that help improve self-efficacy while helping participants create and reach goals with weekly accountability and support of the facilitators and their peers.

Food Insecurity

The United States Department of Agriculture monitors food security annually. Most households (85-88.5%) report being food secure — having dependable access and funds to provide enough food for a healthy lifestyle. However, within the last seven years, between 10.5 and 14.9 percent of households have reported periods of food insecurity through lack of access or finances at some point in time during the year (Coleman-Jensen, Rabbitt, Gregory, & Singh, 2020; Feeding America, 2015). Several socioeconomic factors are correlated with food security. These factors include unemployment and underemployment, poverty rate, and educational attainment (Loopstra and Tarasuk, 2013; Furness et al., 2004). Other considerations leading to food insecurity are stagnant wages while housing and food costs have increased (Gunderson, 2013; Journal of American Dietetic Association, 2010.) As poverty rates and stagnant wages in the United States continue to be unchanged, food insecurity continues to be a national concern. From 2011 through 2013 about 49 million households (14.9%) reported they were not able to meet basic food needs at some point within the year. In this same time period, the rates of food insecurity were significantly higher in Missouri (Coleman-Jensen, Rabbitt, Gregory, & Singh, 2020; Feeding America, 2015). Prior to Covid-19 food security had seen a slight decrease between 2013 and 2019. According to the United States Department of Agriculture, 10.5 percent of the general population reported food insecurity at some point in 2019. This was a slight decrease from 11.1 percent of the population reporting in 2018. Coleman-Jensen, et al. (2019) found that among low-income households (at or below 185% FPG) food insecurity was reported by nearly 30 percent of those households. Although poverty does have relationships to food

insecurity, it is important to note that individuals at or below Federal Poverty Guidelines can be food secure (Gunderson, 2013). To understand this, food security needs to be defined.

Food security is influenced by more than access to food. The United States does not have famine, thus the limiting factor of access is more than scarcity. Access can be limited by physical factors like food deserts or financial factors like increasing costs of food with stagnant pay. Food security is also subjective. One household may not have the quality of food they desire for nutritional health and consider themselves insecure, while another household has no quantity and is experiencing physical hunger. True food security includes the ability to physically possess nutrients and have the economical means to access food with nutritional value that promotes health (McDonald, 2010; Webb, et al, 2006). According to the Rome Declaration (1996), the definition that encompasses these constructs and was developed by the World Food Summit of 1996 states, "Food security exists when all people, at all times, have physical and economic access to sufficient, safe and nutritional food to meet their dietary needs and food preferences for an active and healthy life" (p. 1405S). This definition is most widely accepted because it considers availability, access, and utilization (Webb, et al, 2006).

Food insecurity is often linked to unemployment and increases food costs. During the 2007 recession, food costs increased as did unemployment. The food cost increases have remained elevated even after the recession ended. Many households had recovered by 2012, however, food insecurity rates remained elevated, leading researchers to suggest that food inflation was the cause of unchanged rates of food insecurity. This is supported by research conducted on Supplemental Nutrition Assistance Program (SNAP) recipients, who reported the greatest causes of food insecurity was food prices (Nord, M., Coleman-Jensen., & Gregory, 2013). Households with a median income spend an average of 24 percent more for food than same size households that rate themselves as food-insecure households, which included government assistance in their total food cost (Coleman-Jensen, Rabbitt, Gregory, & Singh, 2020).

Methods

Participants

There were 19 females and 5 males (n=34). Initial mean annual household income was $22,358 with an average %FPG of 82.92%. In the follow-up measurement, the mean annual household income was $30,357 with an average %FPG of 116.65%.

Data Collection

The Northwest Project is a longitudinal study that collects demographic information and socioeconomic characteristics from participants and their families. Data were collected every six months from 2016 to 2019 by staff of the project. Data were collected through verbal questionnaire and entered into a HIPAA protected online database as well as paper copies to compare for accuracy. Intake included a broad array of outcomes including employment status, financial health, physical health, emotional wellbeing, skill development, academic achievement, social relationships, and community engagement.

Measures

The RISE Self-Sufficiency Assessments (RSSA) was developed to assist in case management, self-assessment and goal setting by participants, and to gauge the potential to which a household was able to become self-reliant after enrollment in the RISE program. In

developing the methodology for this measurement tool, HUD recommendations for self-sufficiency matrices were compared against national standards for measurements of self-sufficiency. For example, in the RSSA a rating of 5 for a household was only achieved if the family was currently living in permanent adequate housing, but cost did not exceed 30% of family income in unsubsidized housing. Many self-sufficiency assessments do not consider the percentage of household expenses to total household net income. The definition of affordable housing may vary among communities however, the worldwide conventional public policy indicates that housing expenses (rent/mortgage and utilities) should be no more than 30 percent of household income. This indicator of stable housing has evolved from the United States National Housing Act of 1937. The measure began at 20 percent of household income, but has increased over the decades as households found difficulty achieving the American dream of home-ownership. As housing costs increased, the disproportionate spending on home ownership led to an increase to 30 percent (Linneman & Megbolugbe, 1992).

The RSSA tool was developed with the consideration that self-reliance is more than an increase in socioeconomic status and a family's socio-ecological environment should be considered in their potential for overall wellbeing. The RSSA includes quantitative measures like educational attainment, income, and transportation. The RSSA consists of following sixteen items: 1) Housing; 2) Transportation; 3) Employment; 4) Education/Academic Attainment; 5) Income/Budget; 6) Health Insurance; 7) Physical Health; 8) Mental Health/Substance Abuse; 9) Psychosocial & Environmental Stressors; 10) Parenting Skills; 11) Quality Childcare; 12) Legal: Criminal and Non-criminal; 13) Support Systems, 14) Food, 15) Home Safety, 16) Community Involvement.

Each participant is interviewed and a rating is assigned to each item in one of five categories – (1) Crisis, (2) Vulnerable, (3) Safe (4) Building Capacity or (5) Empowered/Thriving. The RSSA should be administered every six months and is designed to be objective, reliable and valid while measuring change in small increments as participants progressed with their objectives and goals. Each item is not weighted—no item is more important than another to reach self-sufficiency. The scale itself is subjective and each participant determines what self-sufficiency means. Like RISE, organizations that use any version of an SSA typically assist households in increasing wages by building social and human capital. Human capital is improved through education and skill development with a focus on higher paying jobs. Social capital is developed through expanding networks and access to resources. Programming goes beyond simply budgeting as many low-income jobs are volatile and developing stability below 200%FPG has proven difficult. Therefore %FPG is just one consideration for self-sufficiency.

Sample question:

FOOD SECURITY: Please select with of the following describes your family's food situation:

- ❑ No food or means to prepare it. Rely primarily on sources of free or low-cost food. (1)
- ❑ Household meeting most food needs with SNAP benefits. (2)
- ❑ Can meet basic food needs, but require occasional assistance. (3)
- ❑ Can meet basic food needs without assistance. (4)
- ❑ Can choose to purchase any food household desires. (5)

Statistical Analysis

Before the data were analyzed, the data were screened to assess accuracy, missing data, outliers, and the violation of assumptions. The data appeared to be accurate and consisted of 111

participants who had completed the RISE program. Of those participants, 48 (43%) were considered active participants, and 7 were recent graduates who had not reached the six-month second data collection point. Only 41 (36.9%) participants had at least two measures and were active members in the RISE program. There were an additional 7 participants who did not have complete points for post data; thus, they were excluded from the statistical analyses. Additionally, missing data appeared random for other participants which was excluded pairwise. Difference scores of the posttest and pretest data were derived for each of the variables. Outliers and assumptions were evaluated based on the difference scores. One outlier was identified by obtaining z-scores above the absolute value of 3 and was removed. The violation of assumptions was also examined prior to performing analyses. Linearity, homogeneity and homoscedasticity were all met. Normality was also met; however, showed a slight negative skew for the average self-sufficiency and a slight positive skew for percent federal poverty guideline.

Two reliability analyses were computed to determine the reliability of the RISE Self-Sufficiency Assessment for the pretest data and posttest data. The reliability of the scale was assessed along with all the items as a whole. Cronbach's alpha ranges from 0 to 1.0. Alpha's for scales used in practice require an alpha above 0.7. An ideal Cronbach's alpha in a reliability analysis is .8 or higher. The pretest was considered reliable as there was a Cronbach's Alpha of $\alpha = .76$. Similar results were shown for the posttest as the Cronbach's Alpha was $\alpha = .80$. Additionally, the individual items were also assessed by evaluating the stability and the Cronbach's alpha when items are removed. If an item is removed, the Cronbach's alphas remained consistent around .72 - .78 for the pretest assessment and between .76 - .81 for the posttest assessment. The lack of change in the Cronbach's alpha when an item was removed suggests that the items are reliable and that each item does not hold too much "weight." The means and standard deviations also remained moderately consistent which suggests the assessment was moderately stable.

Results

A series of paired-samples t-tests (Wilcoxon Signed-Rank Tests when appropriate) were performed to assess the change in self-sufficiency for participants in the RISE program. Analyses consisted of evaluating self-sufficiency by using the self-sufficiency average and the individual items on the self-sufficiency assessment. Results revealed significant improvements in self-sufficiency overall and for the areas relating to employment, education, income, childcare, criminal and food. Participants are becoming more self-sufficient overall, $t(32) = 5.86$, $p < .001$, $d = 1.03$. The childcare and employment self-sufficiency measures appeared to show the largest improvement from initial to current status. Moreover, when the *p*-value was adjusted to control for a type I error ($p < .003$), education and criminal self-sufficiency measures no longer showed a significant improvement. See *Table 1* for a result of the analyses for the individual self-sufficiency measures. See *Figure 1 – 7* for a depiction of the results for the significant t-tests. See *Table 1*.

A series of simple linear regressions (SLR) were performed to assess if the change in self-sufficiency predicted participant's current percent federal poverty guideline (%FPG). In other words, the SLRs were performed to help determine the measures that had an impact on participants %FPG. Difference scores of the post and pre self-sufficiency assessment items were derived to measure the change for each of the variables. Also, difference scores were calculated for the self-sufficiency average scores. Results revealed self-sufficiency overall (average

difference scores) did not have an impact on %FPG. However, the slope was rather large; thus, for every one increase in self-sufficiency, there were 24.01 increases in %FPG. See Figure 8 for a depiction of the relationship. When the individual self-sufficiency items were assessed, food security appeared to have a significant impact on participants %FPG. Specifically, there was a significant positive relationship with the self-sufficiency food security item and %FPG; thus, as participants were more self-sufficient in food, the % FPG percentage increased (Figure 9). In fact, for every one increase in food security self-sufficiency, there was 25.25 increases in the %FPG. Therefore, as participants are more self-sufficient in food, the higher the participant's income per household member. While education and psychosocial were not significant predictors of %FPG, the slopes were rather large. Specifically, for every one increase in education self-sufficiency, there were 12.13 increases in %FPG and for every one increase in psychosocial self-sufficiency, there were 8.24 increases in %FPG. See *Table 2* for the results of the simple linear regressions.

Additionally, a series of simple linear regressions (SLR) were performed to assess if the change in self-sufficiency predicted change in federal poverty guideline (ΔFPG). Difference scores of the %FPG were derived to measure the change in the %FPG. Results revealed self-sufficiency overall (average difference scores) did not have an impact on ΔFPG; however, when the individual self-sufficiency items were assessed, food security appeared to have a significant impact on participants ΔFPG. Specifically, there was a significant positive relationship with ΔFood Security and Δ%FPG; thus, as participants were more self-sufficient for food, the FPG percentage seemed to increase. In fact, for every participant one increase in food security self-sufficiency, there was 16.27 increases in Δ%FPG.

Discussion

This study revealed that the participants of the RISE program are becoming more self-sufficient. Income alone is not enough to predict self-sufficiency, however, an increase in multiple RSSA factors leads to self-sufficiency. Participants of RISE had an annual household %FPG income increase of 35.78%, revealing that the RISE program does result in significant improvements in financial measurements. Self-sufficiency also significantly increased in areas relating to employment, education, childcare, criminal, and food security. The average participants joined the program with incomes that *meet basic needs, but attained insufficient funds for emergencies*; however, current income *meets basic needs and allows for minor emergencies*. See *Table 1*. A majority of Americans fall into this category. According to the Federal Reserve (2020), in 2019, 65 percent of Americans stated they did not have an extra $400 to cover unexpected expenses like a medical bill. The lack of savings for emergent needs like car repairs means that many employees are often unable to get to work. Lack of transportation is a common cause of social exclusion, increased chronic health conditions and employee absenteeism creating a cyclical financial crisis (Agarwal, et al., 2019). At the initial intake the average participant reported they were *unemployed for less than 3 months*, but are currently *full-time employees with no benefits*. Although the participants report improved employment due to of RISE participation, it is essential to note they do not receive benefits, which causes them to be at an extremely high risk for unaffordable medical expenses. This risk, which leads to financial catastrophe for working Americans, has been well documented for more than a decade. Research has repeatedly shown that being uninsured leads to increased morbidity and mortality rates, decreased quality of life, decreased work productivity, and overall lack of self-sufficiency (Finkelstein & McKnight, 2005; McWilliams, 2009; McWilliams, et al., 2007). As a result of

RISE participation, members see improvements in income and employment; however, they remain at high risk for financial catastrophes as they cannot secure the safety net necessary for medical or other unbudgeted expenses.

Table 1
Wilcoxon Signed-Rank Analysis Results for the Self-Sufficiency Measures

Self-Sufficiency Measures	*W*	*p*	*Rank Biserial Correlation (r_{rb})*
Housing	53.5	.724	-.11
Transportation	104	.182	.36
Employment	235	<.001**	.86
Education	135	.005*	.77
Income	218.5	.002**	.73
Insurance	154.5	.622	.12
Physical	106	.984	.01
Mental	69	.466	-.19
Psychosocial	224.5	.091	.38
Parenting	138	.065	.45
Childcare	159	.001**	.86
Criminal	28	.015*	.98
Non-Criminal	58	.392	.28
Support System	95	.385	.24
Food	140.5	.015*	.64
Home Safety	13	.17	.73
Community	26	.173	.16

*p <.05 **p <.003

Additionally, at intake, participants reported *childcare and subsidies were available, but the childcare provider did not accept subsidy or was unaffordable*; however, participants currently reported *childcare to be available, affordable, good quality and there is at least one emergency backup caregiver*. Individuals with children have a significant barrier to employment if affordable and quality childcare are not available. An improvement in access to childcare increases the capacity for an individual to be employed and maintain employment—access to childcare influences more than just the adult. Access to quality childcare influences the potential for upward mobility of the child, having a multi-generation influence on self-sufficiency. Early childhood education has been shown to create upward mobility, decreasing the demand for programs like RISE later in life. Quality childcare reduces the achievement gap and improves cognitive function and also improves social skills necessary throughout life (McCoy 2017).

Education improved between intake and current measurements. The average participant initially reported they *lack academic skills that limit employment or other goal attainment*, but currently they report obtaining some academic skills and now feel these skills *only occasionally limit employment or other goal attainment*. For participants who reported they had unresolved legal concerns, the average response included that they were on *probation and had no new charges filed*. Participants received assistance through the RISE program and currently stated *no criminal history*.

Finally, at intake, the average participant reported to *meet basic food needs, but require occasional assistance*, whereas currently they reported to *meet basic food needs without assistance.* These financial stability factors do have potential for an individual to increase capacity for stability. Previous studies suggest development of human and social capital may be protective against food insecurity (Chhabra, Falciglia & Lee, 2014; Dean, Sharkey & Johnson,

2011; Martin, Rogers, Cook & Joseph, 2004). Significant changes in food security related to improvements in social determinants of health. Food security is understood to be a significant determinant of overall health and potential for improving development. It is well documented that food insecurity is one of the most influential factors on the overall health of individuals. Food insecurity affects 11-14 percent of U.S. households and causes disproportionate chronic diseases among those individuals causing a national health crisis (Colemen-Jensen, et al, 2020, Feeding American, 2020). Artiga and Hinton (2018) found that "healthcare costs for food-insecure adults were $1,834 higher than for food-secure adults—totaling $52.6 billion across all food-insecure households. These additional costs include all direct healthcare-generated costs, like clinic visits, hospitalizations and prescription medications" (p. 3). Matthew Desmond, a Professor of Sociology at Princeton University reports that public housing with rents set at 30 percent of household income increases the disposable income of an individual, who in turn spends more money on food. Long-term, these individuals saw improvements in their children's health (Desmond, 2016).

Specifically, there was a significant positive relationship with the self-sufficiency food security item and %FPG; thus, as participants reported feeling more self-sufficient in food, the %FPG percentage increased. See *Figure 9*. In fact, for every one increase in food security self-sufficiency score, there was 25.25 increases in the %FPG. Therefore, as participants feel more food secure, the higher the participant's income per household member. Finally, while education and psychosocial were not significant predictors of %FPG, the slopes were rather large. This information can be used to predict changes in self-sufficiency. For every one increase in education self-sufficiency, there were 12.13 increases in %FPG and for every one increase in psychosocial self-sufficiency, there were 8.24 increases in %FPG. RISE programming can assist participants in setting and achieving goals focused on items that have high slopes to improve self-sufficiency. See *Table 2* for the results of the simple linear regressions.

Table 2
Simple Linear Regression Results for the Self-Sufficiency Measures

Self-Sufficiency Predictors	*r*	*b*	*β*	*t*	*p*	r^2
Self-Sufficiency Average	.2	24.01	0..2	1.16	.256	.04
Housing	-.02	-0.74	-0.02	-0.1	.922	.0004
Transportation	-.16	-6.42	-0.16	-0.88	.384	.03
Employment	.21	6.53	.21	1.17	.251	.04
Education	.3	12.13	.3	1.75	.09	.09
Income	.07	3.29	.07	0.39	.7	.005
Insurance	.07	2.06	.07	0.41	.683	.005
Physical	-.11	-4.43	-0.11	-0.59	.557	.01
Mental	.1	3.93	0.10	0.55	.583	.01
Psychosocial	.26	8.24	0.26	1.49	.145	.07
Parenting	.04	1.94	0.04	0.19	.850	.002
Childcare	-.003	-0.08	-0.003	-0.02	.987	.000
Criminal	.12	7.32	0.12	0.65	.518	.01
Non-Criminal	.01	0.53	0.01	0.07	.943	.0001
Support System	-.17	-5.86	-0.17	-0.98	.335	.03
Food	.56	25.25	0.56	3.88	<.001**	.31
Home Safety	-.16	-7.39	-0.16	-0.53	.604	.03
Community	-.08	-2.93	-0.08	-0.28	.788	.01

*p <.05 **p <.003

Limitations of the study include a small sample size. As the program continues, these assessments will be revisited. The number of months between the Pre-test and Post-test were not consistent. Participants joined the program at different intervals. Some participants may be in the program for one year, while others were in the program for two years. Finally, the FSSA measurement is conducted in a single point of time. The household dynamic can change quickly. If a participant was laid off for a short period, but the assessment was conducted at that point in time, the participant was considered unemployed.

Recommendations for future studies include repeating measures as additional graduates meet the six-month post-measurement point. Future studies are planned that will expand the comparison of each six-month data measurement to determine at what point in the program RISE participants see the greatest changes in self-sufficiency and annual household income.

Conclusion

A series of Wilcoxon Signed-Rank tests were performed to assess if participants showed improvements in self-sufficiency while participating in the RISE program. Results revealed significant improvements in self-sufficiency overall and for the areas relating to employment, education, income, childcare, criminal and food. Furthermore, a series of simple linear regressions were performed to assess if these improvements in self-sufficiency impacted participants' % FPG. According to the results, the food security item on the self-sufficiency assessment appeared to have a significant impact on participants' %FPG. Specifically, there was a significant positive relationship between these two measurements; thus, as participants were more self-sufficient in food, the % FPG percentage increased. Lastly, the self-sufficiency overall (average difference scores) did not significantly impact %FPG. However, the slope was rather large; thus, for every one increase in self-sufficiency, there were 24.01 increases in %FPG.

Figure 1.

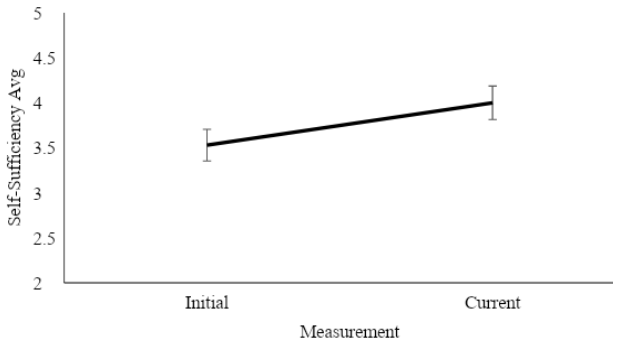
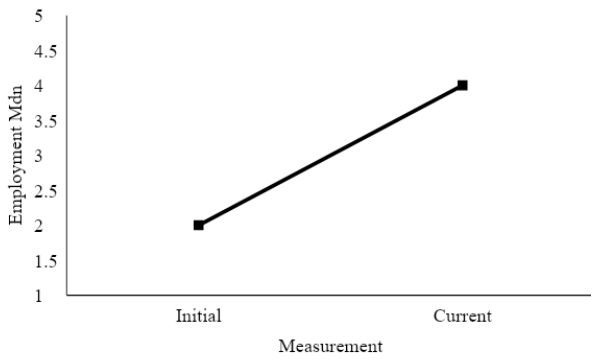


Figure 2.



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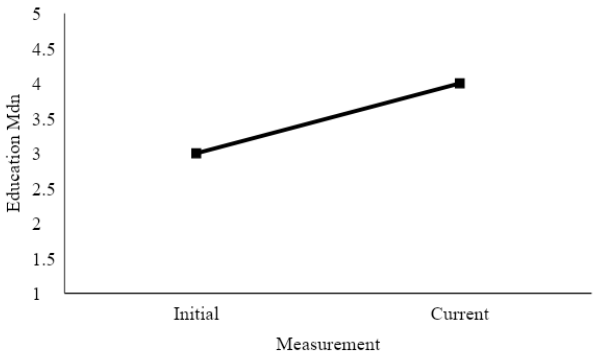

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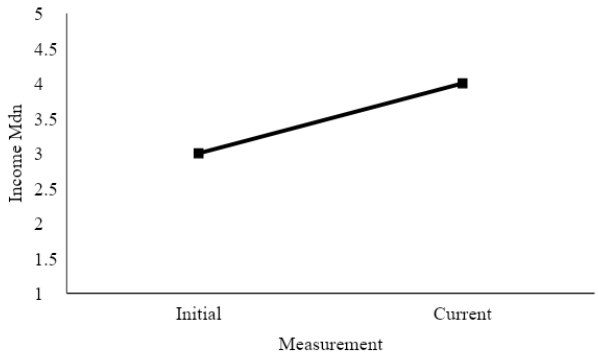

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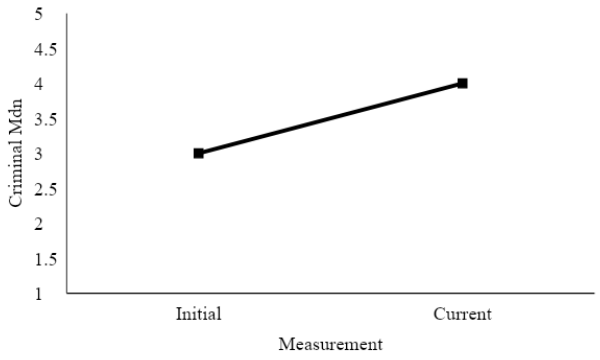

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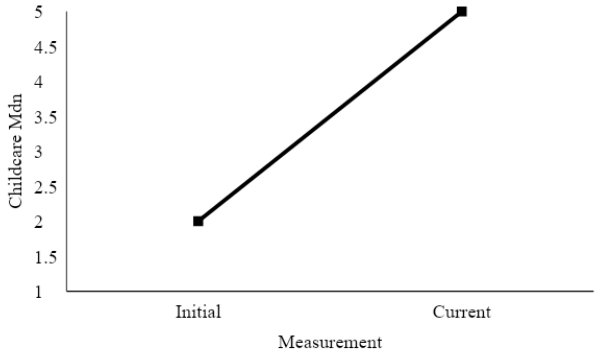

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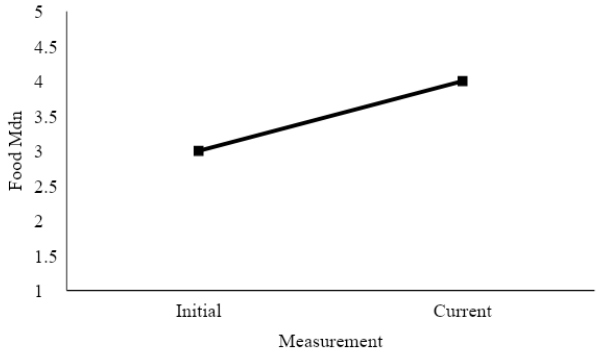


Figure 8.

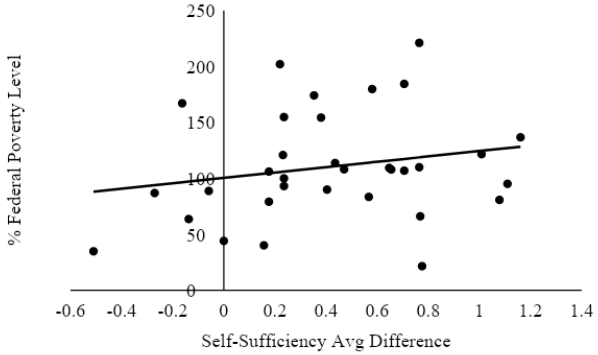
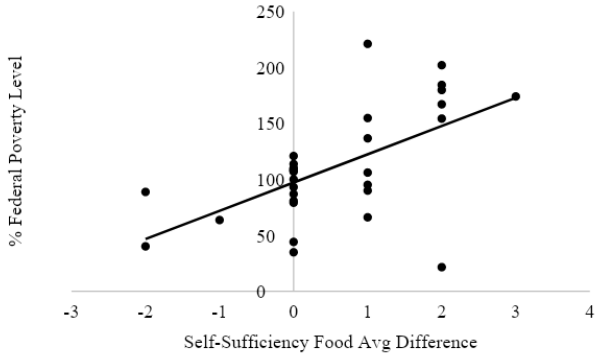


Figure 9.



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